



# The Journey

The Official Newsletter of the Michigan Alliance for Person-Centered Communities

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Welcome to *The Journey*, the official newsletter of the Michigan Alliance for Person-Centered Communities (MAPCC). This publication is designed to help inform and guide those interested and involved in a person-centered approach to long term supports and services.

## In This Issue

- ★ MAPCC Proudly Hosts Michigan's Consumer Information Project!
- ★ National Nursing Home Collaborative and Learning Session Postponed
- ★ Tax Time – and Help – are HERE!
- ★ Pioneer Network Accepting Applications for Executive Director Position
- ★ Case Study Explores Planetree Continuing Care Implementation
- ★ Study Compares CNA Care at Green House and Traditional Facilities
- ★ Occupancy and Revenue Gains from Culture Change in Nursing Homes: A Win-Win Innovation for a New Age of Long-Term Care
- ★ MAPCC Steering Committee Conducts Strategic Planning
- ★ Resources:
  - Pioneer Network Announces Launch of “Design on a Dollar”
  - NCCDP Offers Alzheimer's & Dementia Staff Toolkit
  - New Geriatric Nursing Education Consortium (GNEC) Web-based Modules on Cultural Competence, Spirituality and Sexuality
  - Free Consumer Webinar on Feb. 24<sup>th</sup> – “*Live a Good Life Wherever You Call Home*”
  - Helping Faculty and Nursing Homes Prepare Nurses for Nursing Home Careers
- ★ Upcoming Events
- ★ Stories from the Field –  
*Interview with Mrs. Pauline Russell – Fairlane Nursing Home, Detroit*

## In the News

### MAPCC Proudly Hosts Michigan's Consumer Information Project!

The Michigan Alliance for Person-Centered Communities is pleased to announce Michigan's participation in the Pioneer Network and Picker Institute Fund Consumer Information Projects. MAPCC Steering Committee members will be hosting 10-15 sessions between March and May across the state to share the vision of person-centered care with consumers and gather their feedback. Questions regarding this project can be directed to MAPCC Co-chair Cean Eppelheimer at [ceppelheimer@phinational.org](mailto:ceppelheimer@phinational.org)

In 2009, with funding from the Picker Institute and the Pioneer Network, along with several other agencies, a small pilot project brought consumers together to talk about culture change. As a result, a curriculum for consumer education, "Creating Home: Advocating for Change in How and Where We Age" was created and shared with more than 500 consumers. The project demonstrated consumer interest in person-centered care.

Phase Two of this project will be implemented in Michigan and 21 other states (Alabama, Arkansas, California, Colorado, Florida, Georgia, Illinois, Indiana, Kansas, Kentucky, Louisiana, Massachusetts, Missouri, New York's Rochester area, Ohio, Oklahoma, Oregon, Pennsylvania, Virginia, Washington and Wisconsin). MAPCC is proud to be hosting these sessions.

### National Nursing Home Collaborative and Learning Session Postponed

The 2011 National Nursing Home Learning Collaborative and In-Person Learning Session, Creating Home in the Nursing Home III: MDS 3.0 as the Engine for High Quality Individualized Care, scheduled for early April, has been postponed. Work on this initiative will begin instead with a series of webinars to be scheduled this spring and additional events throughout the year. Stay Tuned for upcoming information on the next events!

### Tax Time – and Help – are HERE!

Now that W-2s have been sent, tax time is in full swing! Employers can give their staff one more important piece of tax information to help them find free in-person and on-line tax preparation services and claim both the federal and state earned income tax credit (EITC).

PHI's Earn, Keep, Save MORE Tax Resource Center – [www.phinational.org/taxes](http://www.phinational.org/taxes) – provides a variety of materials and information that employers can share with staff. Free paycheck stuffers, posters, and fact sheets can be downloaded from the website. If you have any trouble accessing this information, please contact Tameshia Bridges at [tbridges@phinational.org](mailto:tbridges@phinational.org) or (517) 643-1049.

PHI would also like to hear from you and/or your staff if you have used these resources. What motivated you to share this information with your staff? How has it been received? Did staff go to a VITA site for the first time this tax season? Contact Tameshia to share your story, and encourage your staff to do the same!

Contributed by Tameshia Bridges, PHI

## Pioneer Network Accepting Applications for Executive Director Position

Pioneer Network Executive Director Bonnie Kantor is leaving her current position to become the Director of the Ohio Department of Aging. MAPCC extends its congratulations and best wishes to her. Megan Hannan, president of the Pioneer Network Board of Directors, will serve as interim executive director.

Pioneer Network is now accepting applications for a new Executive Director. It is seeking an individual who will successfully serve as a liaison between staff, the board of directors and stakeholders in the aging services and policy community. The Executive Director position brings visionary leadership while guiding Pioneer Network's strategic development, fundraising efforts, business planning and financial management in addition to representing Pioneer Network with key external audiences.

If you are an experienced leader with a passion to inspire deep system change and transformation in our culture of aging, then the Network hopes you will consider this career opportunity. For more information on this position, please contact: James Zaniello, 888 16th Street NW, Suite 800, Washington, D.C. 20006, (202) 544-4749 Direct, (202) 210-1926 Cell, [jim.zaniello@vettedolutions.com](mailto:jim.zaniello@vettedolutions.com)

### Case Study Explores Planetree Continuing Care Implementation

"**Wesley Village - A Story of Planetree Continuing Care Implementation**" is a newly featured case study detailing how the Planetree philosophy transformed a continuing care environment. Since 2002, Wesley Village in Shelton, Connecticut has implemented resident-directed practices in areas such as dining, staffing and transitional experiences, resulting in exceptional outcomes for residents, families and staff, including enhanced clinical, financial, and operational outcomes, as well as increased resident and staff satisfaction.

Wesley Village realized that transformation is not about implementing a laundry list of programs; instead it is about awakening passion, creating a strong sense of purpose, and engaging everyone in the process of improvement. Through the interactive and supportive environment, caregivers have reawakened their inner passion and remembered what brought them to healthcare in the first place.

Learn more about Wesley Village and the Planetree experience through this inspiring [case study](#).



## **Study Compares CNA Care at Green House and Traditional Facilities**

Certified nursing assistants (CNAs) working in skilled nursing facilities affiliated with [The GREEN HOUSE® Project](#) spend more time on direct care than their counterparts in traditional facilities, according to a new report.

The [study](#) also shows that Green House CNAs spend more time engaging with residents when they are not assisting them with activities of daily living (ADLs), as compared with CNAs in more traditional long-term care facilities.

"This study confirms what we can see and feel from the moment we enter a flourishing Green House," said PHI Midwest Training & Organizational Development Specialist Maureen Sheahan. "The Shahbazim take pride in creating home and comfort for the elders. Their close contact with each other, along with the comprehensive way that they engage in daily life, tasks, and activities, create meaningful and satisfying relationships for both staff and elders."

According to the *Journal of the American Geriatrics Society* study, Shahbazim spend an average of 24 more minutes each day on direct-care activities than CNAs in traditional long-term care facilities — despite the fact that Shahbazim have more indirect-care responsibilities than traditional CNAs. The study also found that Shahbazim spend approximately 25 minutes a day engaging with residents outside of ADL activities. CNAs in traditional facilities spend an average of just five minutes a day engaging with residents when they are not helping them with their ADLs.

The report is available in the January 2011 issue of the *Journal of the American Geriatrics Society*. It was written by researchers from Health Management Strategies in Austin, Texas, and the Institute for Clinical Outcomes Research in Salt Lake City, Utah and funded by a grant from the Robert Wood Johnson Foundation. For additional details or provide feedback, visit: [Green House/Traditional Facilities Study](#).

Source: Matthew Ozga, PHI Blog

## **Occupancy and Revenue Gains from Culture Change in Nursing Homes: A Win-Win Innovation for a New Age of Long-Term Care**

According to a study released by The Commonwealth Fund in late January, nursing homes engaged in "culture change" to become more resident-centered in their approach achieve higher occupancy rates and increased revenue, according to a study comparing culture change adopters with a comparison group of traditional nursing homes. Over the four-year study period, homes undergoing culture change realized an additional 3 percent in occupancy and over \$11 per bed per day in extra revenue.

Key findings include:

- From 2004 to 2008, nursing homes in the adopting group experienced a modest but significant improvement in occupancy compared with the control group. Both groups had occupancy rates of 86 percent before culture change was implemented in 2004, but by 2008, the occupancy rates of adopter homes increased to 89 percent, while those in the control group remained at 86 percent.

- Revenue increased significantly for adopter homes when compared with control-group homes. Implementing culture change resulted in an additional \$11.43 per bed per day for a 140-bed nursing home. This translates to an additional \$584,073 in revenue per year for the adopter home.

Experts in culture change were asked to identify facilities that "best exemplified homes engaged in sustained culture change innovation." This was defined as homes engaged in change for two years or more in key areas of care practice, environment, and workplace. Adopters were compared with a control group of similar homes on two variables: occupancy, percentage of beds occupied, and revenue per bed per day. Data are from 2004, pre-culture change, and 2008, after adopters had been engaged in culture change for at least two years.

For additional information, visit [The Commonwealth Fund: In The Literature](#).

Source: A. E. Elliot, "Occupancy and Revenue Gains from Culture Change in Nursing Homes: A Win-Win Innovation for a New Age of Long-Term Care," *Seniors Housing & Care Journal*, 2010 18(1):61–76

## MAPCC Steering Committee Conducts Strategic Planning

The MAPCC Steering Committee had an exciting meeting on January 18, 2011, to conduct strategic planning for the year and continue discussion of ongoing work, including:

- MAPCC is representing Michigan, as one of 21 states participating in the Picker Institute Project focusing on consumer awareness of person-centered care (see Page 2 for details).
- The Alliance now has an informational PowerPoint presentation and brochure. Additional work continues on the MAPCC Website and bi-monthly newsletter. Individuals with stories from the field, person-centered events, or other culture change news, or opportunities to present or share MAPCC information are encouraged to email [getinvolved@mapcc.info](mailto:getinvolved@mapcc.info).
- Hollis Turnham and Cean Eppelheimer reported talking with stakeholder groups about barriers to a person-centered approach to resident care in nursing homes through the One Vision project grant awarded to PHI by MDCH with monies coming from the CMP (Civil Monetary Penalty) fund. To learn more, visit [One Vision](#).

MAPCC's strategic planning included a review of areas of focus, our accomplishments, a timeline of planned activities, potential activities, and an assessment of priorities and possibilities. Then, the Steering Committee set MAPCC priorities for 2011 and volunteered for various aspects of the work to be done. Our plans include:

- Grow the website and newsletter
- Ensure successful accomplishment of project work on our time-line
- Conduct, gather, and share research on person-centered approaches that illustrates how to overcome the barriers, the "We would like to do this, but..."
- Establish a Speakers' Bureau by recruiting Steering Committee members to volunteer to do one or more 20 minute – 2 hour presentations a year using MAPCC/PHI/AANP modules



- Link One Vision, DCH Person-Centered Planning Training, and MAPCC work all together
- Build stronger partnerships with regulatory agencies
- Build on the One Vision Project
- Clarify the role of Steering Committee members at regulatory agencies in sharing personal centered message with our consumers
- Make mentoring available across the continuum
- Identify funding sources
- Recruit union representation on the Steering Committee

We closed the strategic planning session, with a learning circle to share our Steering Committee members' sense of MAPCC's strengths and weaknesses. Special thanks to Maureen Sheahan for assisting Cean in preparing for and facilitating our session. Watch for additional strategic planning updates.

## Resources

### Pioneer Network Announces Launch of "Design on a Dollar," Practical Strategies to Transform Nursing Home Environments



The Pioneer Network has launched an exciting new web-based resource, "[Design on a Dollar](#)." Based on the pioneering work of [Lois Cutler and Rosalie Kane](#) and funded by [The Retirement Research Foundation](#), Design on a Dollar provides easy "how-to" instructions and tips to make environmental changes cost-effective while involving your whole community. Click the link above to take a virtual tour, learn more about self-assessment tasks, view environmental transformations, and to access culture change resources.

This resource includes:

- The 9 Self-Assessment Tasks that are recommended to start your environmental transformation process
- Virtual tours of 12 key areas in your home with low cost ideas and tips for getting started
- Photos, narratives and product recommendations from other homes
- A host of other practical resources to keep you on track and on budget

[Begin your journey today!](#)

## **NCCDP Offers Alzheimer's & Dementia Staff Toolkit**

The National Council of Certified Dementia Practitioners is offering a free [Tool Kit](#) online that includes many free Power Point in-services for download through March 1, 2011. Each in-service is designed to be taught in 30 minutes to health care professionals and front line staff. The Tool Kit is part of The National Council of Certified Dementia Practitioners Alzheimer's and Dementia Staff Education Week celebration February 14th to the 21<sup>st</sup>.

The Tool Kit and the declaration by the NCCDP of Alzheimer's and Dementia Education Week, was developed to bring national and international awareness to the importance of providing comprehensive dementia education in face-to-face classroom interactions to all healthcare professionals and line staff, and to go above and beyond the minimum state requirements regarding dementia education.

Currently there are no national standards for dementia education – regulations are different from state to state. The NCCDP recommends, at minimum, an initial 8 hours of dementia education for all staff, and ongoing additional dementia education to share new advances and innovations in care and practice. In addition to facilitating the Train the Trainer programs, the NCCDP promotes dementia education and certification of all staff who qualify as Certified Dementia Practitioners (CDP®).



The Tool Kit includes:

- Free PowerPoint In-services (many topics) for Health Care Staff which include pre tests, post tests, hand outs, answers, in-service evaluation and in-service certificates.
- Nurse Educator of the Year Nomination Forms
- Proclamations for Senators and Mayors
- Letters to the Editors Promoting Your Program
- Resources and Important Web Sites

The National Council of Certified Dementia Practitioners®, LLC was formed in 2001 by a group of professionals with varying work and personal experiences in the field of dementia care. The Council was formed to promote standards of excellence in dementia and Alzheimer's education to professionals and other caregivers who provide services to dementia clients. As the number of dementia cases continues to increase nationally and worldwide, it is critical to ensure that care givers are well trained to provide appropriate, competent, and sensitive direct care and support for the dementia patient. The goal of the Council is to develop and encourage comprehensive standards of excellence in the health care profession and delivery of dementia care.

## **New Geriatric Nursing Education Consortium (GNEC) Web-based Modules Available – Cultural Competence and Chronic Disease Management of Older Adults, Spirituality and Aging, and Sexuality in Older Adults**

New evidence-based modules have been created to help BSN faculty integrate content on these three topics to support person-centered care for older adults into both didactic and clinical courses. Authored by nurse experts, and in a PowerPoint format, each of the 3 modules provides background and extensive teaching strategies for integrating the content into existing class presentations and assignments (written and clinical). The link takes you to a wealth of resources for instructors. [http://hartfordign.org/education/Baccalaureate\\_education/](http://hartfordign.org/education/Baccalaureate_education/)

## **Free Consumer Webinar Set for February 24<sup>th</sup>**

A free webinar, *“Live a Good Life Wherever You Call Home: How Long-Term Care is Changing to Meet Your Needs,”* is set for 7 p.m. on February 24<sup>th</sup>. The event is sponsored by AARP and Pioneer Network.



We all treasure our lifestyle choices and personal interests. Maintaining our choices throughout our lifetime takes some planning. If you or a loved one needs long-term care now — or think you will in the future — you should still be able to count on living a good life wherever you call home.

This **free webinar** offers consumers exciting information about how long-term care is changing, and how you can find and advocate for care that focuses on your, or your loved one's individual interests and needs. Get practical tips on how to assess whether potential care settings such as assisted living residences or nursing homes will help you live the life you want. Whether you're helping a loved one now or planning for the future, this webinar offers insights to change the way you look at long-term care.

Featured presenters will be Rose Marie Fagan, co-founder of Pioneer Network, and Karen Stobbe, Pioneer Network conference chair. The webinar will be moderated by Susan Lutz, project manager at AARP Education and Outreach. [Click here to register.](#)

## **Helping Faculty and Nursing Homes Prepare Nurses for Nursing Home Careers – Become a Clinical Placement Site for Nursing Students**

The Hartford Institute for Geriatric Nursing and the American Association of Colleges of Nursing (AACN), with funding from the Commonwealth Fund and the Picker Institute, introduce a web-based module to help nursing homes prepare to be clinical training sites for nursing students. This free module, Nursing Home Preparation/Readiness as a Clinical Site, is available on the Hartford Institute web site, [http://hartfordign.org/education/Baccalaureate\\_education/](http://hartfordign.org/education/Baccalaureate_education/).

A free one-hour Webinar will also be offered March 3, 2011, to foster discussion on how nursing homes can gauge their readiness and prepare to be clinical placements. General contact hours provided. For information about signing up for the webinar go to:

<http://www.aacn.nche.edu/Faculty/FacultyLink/2011/nursing.html>

*Continued*



The webinar is focused on one of the six modules that were developed based on the experience of the AACN Geriatric Nursing Education Consortium (GNEC) program, and created in conjunction with the Pioneer Network and a HRSA-funded project at the University of Minnesota School of Nursing. Identified as Module 6 below, it has been endorsed by the Advancing Excellence in America's Nursing Homes Campaign (AEC, <http://www.nhqualitycampaign.org>).

Modules 1-5 are designed to help faculty select and use nursing homes for nursing student clinical placement, with a special focus on nursing homes involved in resident-directed care and culture change. Contact hours to be provided. Introduced by an Overview module, the six modules, all available on the Hartford Institute website, [http://hartfordign.org/education/Baccalaureate\\_education/](http://hartfordign.org/education/Baccalaureate_education/), cover the following topics:

- **Module 1. Nursing Homes, the Basics:** background on the structures, processes and outcomes that guide nursing home (NH) delivery of care; how NHs are monitored and reimbursed by federal and state government; NH staff and resident characteristics.
- **Module 2. Nursing Practice in Nursing Homes:** nurse hierarchy, leadership and governance; actual and recommended nurse staffing; delivery of nursing services
- **Module 3. Resident-Directed Care and Culture Change in Nursing Homes:** the concepts of resident-directed care and NH culture change, including the benefits of choosing culture change NHs as clinical placement sites; guidelines for evaluating a NHs adoption of resident-directed care and culture change
- **Module 4. Structuring Student Placements in Nursing Homes:** strategies to assist faculty: select NHs; how the nursing home setting provides a unique opportunity to maximize learning objectives; structure student placements to meet learning objectives; maximize student exposure to resident-directed care and culture change; identify and access resources on NHs.
- **Module 5. Introducing Resident-directed Care and Nursing Home Culture Change: A Case Study:** strategies to structure student clinical experiences in culture change NHs, and to integrate principles of culture change – resident-directed care - into clinical experiences in traditional NHs.
- **Module 6. Nursing Home (NH) Preparation/Readiness as a Clinical Site:** Created for NHs to assist them in positioning themselves as clinical training sites for nursing students

For additional information, please contact [Malvina.Kluger@nyu.edu](mailto:Malvina.Kluger@nyu.edu)

## Upcoming Events

### Pioneer Network National Conference Registration Opens March 1<sup>st</sup>

The Pioneer Network's 11<sup>th</sup> National Conference set for August 1-4, 2011, at the St. Charles Convention Center in St. Charles, Missouri, opens for registration on March 1<sup>st</sup>. The theme for this year's event is *explore, discover, change*. The conference is a showcase for innovative thought and transformative practices in the long term care culture change movement — as well as an opportunity to facilitate communication among people interested in propelling this important work. To learn more, visit the [Pioneer National Conference Registration](#).



## **Consumer Voice Conference Set for October 2011 in Grand Rapids**

Save the date for the [36<sup>th</sup> Consumer Voice Annual Meeting and Conference](#), Tuesday, October 25<sup>th</sup> - Friday, October 28<sup>th</sup>, 2011, at the [Amway Grand Plaza Hotel](#) in Grand Rapids, Michigan. Don't miss this opportunity to come gather, network and exchange ideas with advocates from all over the country!

The 2011 Conference will:

- Offer opportunities for you to cultivate your network through interactions with residents, advocates, family council members, ombudsmen, researchers, direct care workers and others committed to quality long-term care;
- Provide tangible tools to assist in every-day advocacy efforts; and
- Showcase expert presentations and key information to help you translate issues into action and action into better care.

Registration will open in early 2011. Event planners have negotiated a reduced room rate at the Amway of \$114/night. More information will be coming soon regarding session proposals, award nominations, etc.

## **Seminar Set for March 30<sup>th</sup> Focuses on Strategies to Address Cognitive Impairment Underlying Difficult Behaviors**

*Recognizing, Preventing, and Responding to Behaviors that Result from Brain Dysfunction: Strategies that Address Cognitive Impairment Underlying Difficult Behaviors* is set for March 30, 2011, at the University Center in Gaylord. Coordinated by the Mental Health & Aging Project, a program of Lansing Community College, this seminar will present strategies for understanding, preventing, and responding to behaviors in ways that address the individual and cognition in specific situations, regardless of the disorder and the stage of the disorder. Event cost is \$90 and includes lunch. CEs are available for social workers and nurses. Registration deadline is March 23<sup>rd</sup>.

Difficult behaviors are common among adults with a variety of psychiatric and neurological disorders, such as severe mental illness, traumatic brain injury, and dementia. All of these disorders involve impaired functioning of various parts of the brain. This seminar will delineate the functions of specific parts of the brain and the resulting cognitive, behavioral, and functional changes when these parts are impaired.

The use of intervention strategies that address cognitive functions underlying a behavior can increase the chances of success in reducing the behaviors and improving the person's quality of life, regardless of the disorder.

This event is supported by funds from the Substance Abuse and Mental Health Services Administration, Center for Mental Health Services through the Michigan Department of Community Health, Bureau of Mental Health & Substance Abuse Services. For more information, view the [registration brochure](#).

## Free Care Transitions Learning Sessions Available

Join a series of Care Transitions Learning Session conference calls in 2011, “Rising to the challenge: Successes within the Care Transitions theme,” where you will hear from the 14 QIO-led communities participating in the 9th SOW Care Transitions theme. These calls will feature both the QIOs and/or providers from each community related to their successes, best practices and lessons learned in care transitions. Sessions will be held twice a month on the 2<sup>nd</sup> and 4<sup>th</sup> Thursdays of each month through the end of July 2011 from 3:00 – 4:00 PM, ET. Upcoming dates include:

- February 24: TX: Topic TBD
- March 10: WA: Social Network Analysis
- March 24: FL: Topic TBD
- April 14: LA: Topic TBD
- April 28: RI: The ‘Rhode’ map –a Snapshot of Rhode Island Providers Approach to Care Transitions

At this time, not all topics have been identified. To receive further info about the calls, sign up for the Learning Session email list. For more information, or to sign up for the mailing list, please visit: [http://www.cfmc.org/caretransitions/learning\\_sessions.htm](http://www.cfmc.org/caretransitions/learning_sessions.htm)

## Calendar

### **March 30, 2011 – [Recognizing, Preventing, and Responding to Behaviors that Result from Brain Dysfunction](#)**

University Center, Gaylord, Michigan

### **May 6, 2011 – Best Practices of Northern Michigan Conference** (Registration To Come)

Kirtland Community College, Roscommon, Michigan

### **August 1-4, 2011 – [Pioneer Network Conference](#)**

St. Charles Convention Center, St. Charles, Missouri (near St. Louis)

### **MAPCC Steering Committee Meetings**

- March 21, 2011 – 1 - 3:30 p.m. (MQC3)
- May 16, 2011 – 1 - 3:30 p.m. (MQC3)
- July 18, 2011 – 1 - 3:30 p.m. (MQC3)
- September 19, 2011 – 1 - 3:30 p.m. (MQC3)
- November 21, 2011 – 1 - 3:30 p.m. (MQC3)

*General membership interested in attending, please contact [ceppelheimer@phinational.org](mailto:ceppelheimer@phinational.org) to RSVP.*

Have a culture change related event, story or presentation you'd like us to share?

Contact us at: [getinvolved@mapcc.info](mailto:getinvolved@mapcc.info)

## Something to Talk About

### Engaging Elders & Staff is the Key to Successful Culture Change!

As compassionate and motivated culture change advocates, it is easy for us to fall into the all too common practice of making changes to improve the culture to make it more person-centered without engaging staff and elders in the process. With limits of time and resources, it is easy to see how tempting it can be to make changes when we are inspired to help make an impact in our work environments.

Although well-intended, this approach can be counterproductive to creating a person-centered environment, and even add unnecessary costs for an organization. Over the years, many organizations have made modifications to their physical environment, décor, amenities, dining options, work schedules, benefits and other resources and services without asking elders and staff what would make their daily lives and work experiences more rewarding. And, when these changes don't produce improved morale and increased occupancy, reduced turnover or call-ins, or other intended outcomes, the perception is that "culture change" is costly and doesn't work.

As you look to begin a culture change, or assess your continued journey, take a good look at whether you are making changes by directive or engaging those around you. If you haven't already, explore creating elder and staff advisory groups and look for other ways to empower those around you to be part of the culture change process.

## Stories from the Field

### A Portrait of Mrs. Pauline Russell – Fairlane Nursing Home, Detroit



I had the privilege of meeting Mrs. Pauline Russell, an octogenarian who despite health challenges provides critical spiritual leadership to the community of residents and staff at Fairlane Nursing Home in Detroit.

Mrs. Russell, a native Detroiter, grew up in the Unitarian Church of Detroit. Her membership and faith have served as a cornerstone for her life in both good times and bad. She spoke with passion of the importance of the church providing a safe, sound moral community in which to grow and raise a family. Despite more recent health challenges, her connection to the church and her active spiritual life did not stop when she came to live at Fairlane. Mrs. Russell reported noticing the suffering of other residents and the difficulties sometimes experienced by staff. She wanted to connect them to the faith that had sustained her throughout her life. She believed that it would bring them the same

sense of peace and comfort that she had experienced.

In attempting to do so, she spearheaded the Fairlane prayer list, where anyone could place the name of a person who needed spiritual support due to life difficulties. The residents and staff

embraced it wholeheartedly, consistently filling the list with names. As Fairlane leadership became aware of the importance of the practice to the community and to Mrs. Russell's health and well-being, they encouraged her by giving her a bulletin board on which she's posted special prayers, many of which were originals written by her nephew. They also provided an area to stock with prayer handouts, free for the taking to passersby. And it didn't stop there. On a monthly basis, Mrs. Russell, with the assistance of Fairlane staff, sends the prayer lists to the Unitarian church center in Missouri, extending the spiritual reach by engaging a national audience in the support of the residents and staff of Fairlane Nursing Home.

Several of the Fairlane staff with whom I spoke talked about the power of Pauline's work, including Chef Kevin Williams. He shared that when a kitchen employee comes to work with a difficulty, the first thing he does is add their name to the list, fully recognizing the power of prayer and the value of Pauline's ministry.

Mrs. Russell's work and Fairlane's facilitation of her passion offer a perfect example of a person-centered approach to care, ensuring that residents are living meaningful lives with a sense of purpose and are able to give back to community in which they live.

Contributed by Cean Eppelheimer

## Words of Inspiration

*"...transformation is not about implementing a laundry list of programs; instead it is about awakening passion, creating a strong sense of purpose, and engaging everyone in the process of improvement."*

- Heidi Gil, Continuing Care Director, Planetree, and
- Julie Norko-Kopta, Planetree Coordinator, Wesley Village

## Send Us Your News

Have an upcoming culture change or person-centered care related event or activity you'd like to share? Email us at [getinvolved@mapcc.info](mailto:getinvolved@mapcc.info)

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