







### THE POTENTIAL FOR LEISURE TO BE A KEY CONTRIBUTOR TO CULTURE CHANGE

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### **CULTURE CHANGE**



Describes the transformation of long-term care (LTC) homes based on person-directed values and practices where the voices of residents and those working with them are considered and respected (Dupuis et al., 2016)

 It is a term commonly used to describe efforts to transform LTC homes into caring communities where residents, staff, and family can thrive and quality of life is paramount (Baker, 2007; Jurkowski, 2013)



#### HISTORICAL PERSPECTIVE

 The culture change movement goes back decades when individuals began to work together to "radically transform the essence and meaning of long-term care homes and improve the experiences of people living and working within" (Carson, 2015, p.31)

 The movement gained momentum in 1997 when advocates came together in a more formal way to advance more humane, resident-driven models of care (Pioneer Network, 2013)



### PRINCIPLES GUIDING CULTURE CHANGE

- Knowing each person
- Providing opportunities for choice and self-determination
- Treating each person with dignity and respect
- Cultivating close, interdependent relationships
- Creating home-like environments
- Collaborating on decisions being made





#### LEISURE IN LONG-TERM CARE



- Leisure has been recognized as one of the strongest contributors to quality of life for individuals living in LTC homes
- Attention is often focused on recreation and leisure as therapy
- Little attention has been directed toward the ways leisure may be a contributor to culture change efforts



#### **OUR STUDY**

We set out to explore the following questions:

- 1. What are recreation and leisure practitioners' perceptions of culture change and the initiatives happening within their homes?
- 2. What do recreation and leisure practitioners perceive their roles to be in the culture change process?
- 3. What are recreation and leisure practitioners doing to support the culture change process within their LTC homes?
- 4. How do recreation and leisure practitioners describe their experience with the culture change process?

(Fortune & Dupuis, in press)



Moving away from a stringent focus on disability can enable team members to discover who each resident really is:

I don't know a lot of people in terms of their disability;
I know that person as a person, what makes them happy,
what energizes them, and what creates opportunities of life for
them.



Getting to know residents' life stories and the things that invigorate them paves the way for new leisure initiatives sparked by the uniqueness of each resident:

We have a gentleman here that actually invented the [pizza pop] which we didn't know until his family told us. So we did a program around that and his nephew brought in the dough and he told us exactly what ingredients he wanted for it.



Relational leisure is supported when staff are attuned to residents' relational needs:

We made arrangements with her hairdresser to have her all made up that day, the nursing staff all knew she was dressed to go out that day. As she was waiting for the bus she saw [her partner] and said, "What are you doing here this early"? He goes well we're going for lunch at this place together. She started crying, she was so happy.



Opportunities to get to know each person's unique skills and abilities are not limited only to residents:

If a team member has a special talent, such as flower arranging, and they are a nurse or a PSW, maybe the recreation staff can do the tea cart while the PSW runs the program.





Leisure experiences are more likely to be meaningful when they are freely chosen and self-directed:

We do a diner's club where we take residents to the grocery store and they pick their own groceries and come back and make their own meals, whatever they want to make...One resident said he hadn't been in a grocery store in over five years. He was amazed at the self-checkout and had a laugh every time he would pick something up and scan it.



Sharing decisions can happen by moving away from a monthly leisure calendar and inviting residents to decide what they would like to do each month:

We have a lot of Chinese residents in our home and they implemented English classes. It was such a simple idea, but for us to put that into place, we were not really thinking of it. We discovered that the residents' self-esteem is so much better because they are making decisions on their leisure and well-being activities.



Increasing opportunities for shared decision-making can help support residents to engage in more familiar activities and traditions:

Our grandmas and our grandpas have their grandkids over for a sleepover. We have also begun to ask how we can help them make Sunday night dinner that they always did and was a big part of their family tradition.



Reflecting on why residents are not always provided the same opportunities as others living in the community can lead to the creation of new opportunities:

You know one of our rec staff once said to me "I have friends who make their own wine in their home. Why couldn't we have a wine club here so residents can make their own wine?" So we approached leadership and they said, "That sounds great to us". We now have had a wine club that meets once a week. We have 45-55 people that attend, we make our own wine, and we have wine and appetizers.





Dignity and respect is enhanced when staff move beyond the context of just providing care, toward understanding and valuing residents' whole lives:

We completed the life stories...and we essentially ended the process with slide show versions of the stories, pulling highlights and lessons learned and putting photos and music into a DVD format and then we had celebrations. So it was like a little movie premiere about the resident's life when we had narrative ceremonies.



Changes that contribute to more meaningful leisure experiences for residents can also lead to changes in how staff support residents' leisure pursuits:

Staff are being more respectful of the resident's time because residents are saying, "I have to do this [activity] or I have to lead that [activity]." So staff are working with the resident for this change.



Learning about residents' lives helps to ensure their lifestyle preferences can be supported:

We ask about what a typical day is in their life. How would they like to structure their day, would they like to get up early or do they like sleeping in a bit later, things that they used to do before they came here. If there was something in particular that they attended on a Friday afternoon, we try to accommodate that and make arrangements for that.



Seeing residents in the context of their broader lives also fosters support for choices and preferences in other aspects of daily living:

If residents are disappointed with some of our food choices, the staff are saying, "Well, bring me your recipe. What's in your recipe?" And those are little things I love. To me that is seeing them as a person. They have a value. Their recipe has value.





Relational community can be created through intentional efforts to strengthen relationships between residents and staff:

We say to staff, "You're more than welcome to participate and enjoy yourself too". How many people have seen a baby kangaroo at their work, right? So when they come in and join and sit next to residents, relationships are built and they're communicating with each other rather than sitting in the back of the room and watching.



Relationships grow when staff have opportunities to connect socially with residents in ways that move beyond the provision of care:

We went on a fishing trip. It was [our chef's] day off and he came along and cooked the fish on-site for residents. A nurse also volunteered on his time off to go fishing because he loves fishing and he never gets the chance to do it, so he participated with residents and they all had a good time.



Relationships can grow naturally when conditions support relationship-centred care:

I have a team member that has such a strong relationship with one resident, that resident only wants her. My rec team member is the only one who can give her a bath because of the relationship and the trust she has. So the PSWs will run the [recreation program] and my team member will help provide the resident that physical care. So within culture change there's a blending of roles for the common good of the resident.



Spending time with residents in a social context is conducive for nurturing deeper, interdependent relationships:

Culture change has really given staff permission to take a five minute break and sit with residents. They have to do all their documentation of course, and that's all very important, but they bring the binders away from the nurses' station and do the documentation in the neighbourhood or in the lounge with the other residents to join them. So I think it has become less of an "us and them" and more of a "we."





Working together means that everyone has a role to play in enhancing life within the home:

Everything we do involves answering that question of what's best for the resident. The question that I would often hear our CEO asking is "Don't talk to me about money, just tell me, is it the right thing to do, you know? Is it for the resident and if the answer to that is yes, then we'll figure it out."



Working together can ensure things residents enjoy can still happen despite an element of risk:

We have a gentleman who likes to walk. He walks way farther than I ever would. He likes to do it and he was getting lost. The family didn't want him to not be able to do those things so we worked with them to put some tools in place. Now he carries a GPS tracker with him...and he carries a card that indicates he lives here so that he can assume that risk.



Working together can result in overcoming logistical challenges:

We have an IMAX theatre in our neighbourhood, and we had a number of residents who wanted to go do that. It was challenging because of all of the logistics and it was something I wouldn't have come up with myself...but when it comes from the residents and they say they'd like to do that, you try to solve all of those problems.



When family members see themselves as integral members of the community, they recognize the role they also play in contributing to everyday life within the home:

We now have family members come and say, "Would it be possible to have this group come in to perform?" We see them coming to us and wanting to introduce other things into our programming.



### LEISURE'S TRANSFORMATIONAL CAPACITY

- Leisure can create opportunities for the personal attributes of individuals living in, working in, and visiting LTC homes to be made visible
  - Through leisure experiences, people can become known for more than their work roles or illnesses
- Leisure programs and practices do not automatically transform LTC homes into caring communities; intentional changes are needed to ensure programs and practices align with culture change principles



### THE IMPORTANCE OF VISIONARY LEADERSHIP

 When the leadership team understands the value of leisure to changing the culture of care they are more apt to be supportive of new ideas and willing to try things that haven't been done before

 Visionary leaders understand it is not enough to just talk about relational and community approaches to care, they must also show residents, staff, and family that they support it in practice



### THE IMPORTANCE OF VISIONARY LEADERSHIP



I bought some touch and plays. It is like a big computer game. Now when staff are sitting and doing their paper work, they will play the game with the resident and they know that it is ok. A manager is not going to pass and say "oh, you're just sitting down playing games. We make sure we educate them and tell them it's ok.

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