

Small Steps, Big Change: New Possibilities for Dementia Care

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Overview

- What is culture change?
- Why do we need culture change?
- How might we undertake culture change?
- Terminology



The only person who likes change is a baby with a wet diaper.

Mark Twain

What is Organizational Culture?

- Shared behavior of people and the meanings attached to actions
- Includes values, visions, norms, language, symbols, beliefs and habits.
- Shared behaviors and assumptions are taught to new members
- Affects the way people interact with others

What is Culture Change?

- The process of re-examining an organization's:
 - Values
 - Beliefs
 - Attitudes
 - Behaviours
 - Approaches
- Involves transforming or enhancing through innovation, discovery, and contact with others.
- An ongoing process of improvement rather than an end-point

Culture Change in Dementia Care

- Involves a shift in the way care is provided to incorporate person-directed and relationship-centred values where all voices are considered and respected
- Means older adults and their formal and informal care partners express choice and practice self-determination in meaningful ways at every level of daily life
- Often requires changes in organization practices, physical environments, relationships

Why do we need Culture Change?

- Hierarchical structure of organizations
- Focus on a medical model of care
- Provider-as-expert approaches
- Program-centred rather than person-centred
- Reliance on irrelevant outcome measures
- Exclusion of all voices in decision-making

Factors Supporting Culture Change

Increasing focus on Patient (Person) Experience

- In healthcare & community-based settings:
 - move away from satisfaction toward experience
- In research:
 - value of the lived experience
 - Importance of knowledge translation
- We need to do things differently

"Every system is perfectly
designed to get the results
it gets"

Dr. Paul Batalden

What does Culture Change Look Like?

Organization-Directed	Person-Directed
Set schedules & routines	Schedules reflect needs & desires
Task-oriented	Relationship-centred
Centralized decision-making	Decisions close to the person
Structured activities	Spontaneous activities
Isolation & loneliness	Community & belongingness

“What patients want is not rocket science, which is really unfortunate because if it were rocket science, we would be doing it. We are great at rocket science. We love rocket science. What we’re not good at are the things that are so simple and basic that we overlook them.”

*Laura Gilpin
Griffin Hospital, Planetree Hospital*

Quoted in Healthcare Quarterly, Dec. 2012

Evolution of Person-Centred Care

“Doing To”



“Doing For”



“Doing With”

“Doing To”

- Providers believe they know how care should be provided
- Examples:
 - Organizations set schedules (eating, sleeping)
 - Limit family access to loved ones
 - Care meetings/conferences that do not include the older person or their family member
 - “Compliance”

“Doing For”

- Consider individuals and families when designing, determining schedules, etc.
- “We design, then ask”

“Doing With”

- True partnership
- Systems and services are designed with individuals
- Recognized value
- Partners in decision making

Tell me, I may listen.

Teach me, I may remember.

Involve me, I will do.

Chinese Proverb

Authentic Partnerships

Culture Change in Dementia Examples

- Alzheimer Society of Canada
- Pioneer Network
- Partnerships in Dementia Care (PiDC) Alliance
- Jane Rufrano

“Never doubt that a small group of thoughtful, concerned citizens can change the world. Indeed it is the only thing that ever has.”

Margaret Mead

“Your transformation as a leader must come before you can transform your business. To lead a change you as the leader must have already changed.”

Wayne Smith

How can we get started?

Appreciative Inquiry

- <http://www.youtube.com/watch?v=BqHeujLHPkw>

Appreciative Inquiry

- Include all partners
- Focus on what you are doing well
- Envision new possibilities
- Create and commit to action
- Support and sustain actions

“I quite like the approach of the positive. It is so refreshing in our industry to be working on a project that concentrates on the positive because you don’t get a lot of that. Everything is always looking at what you’re not doing. So this is so enjoyable.”

PiDC Culture Change Coalition Member

Quality Improvement

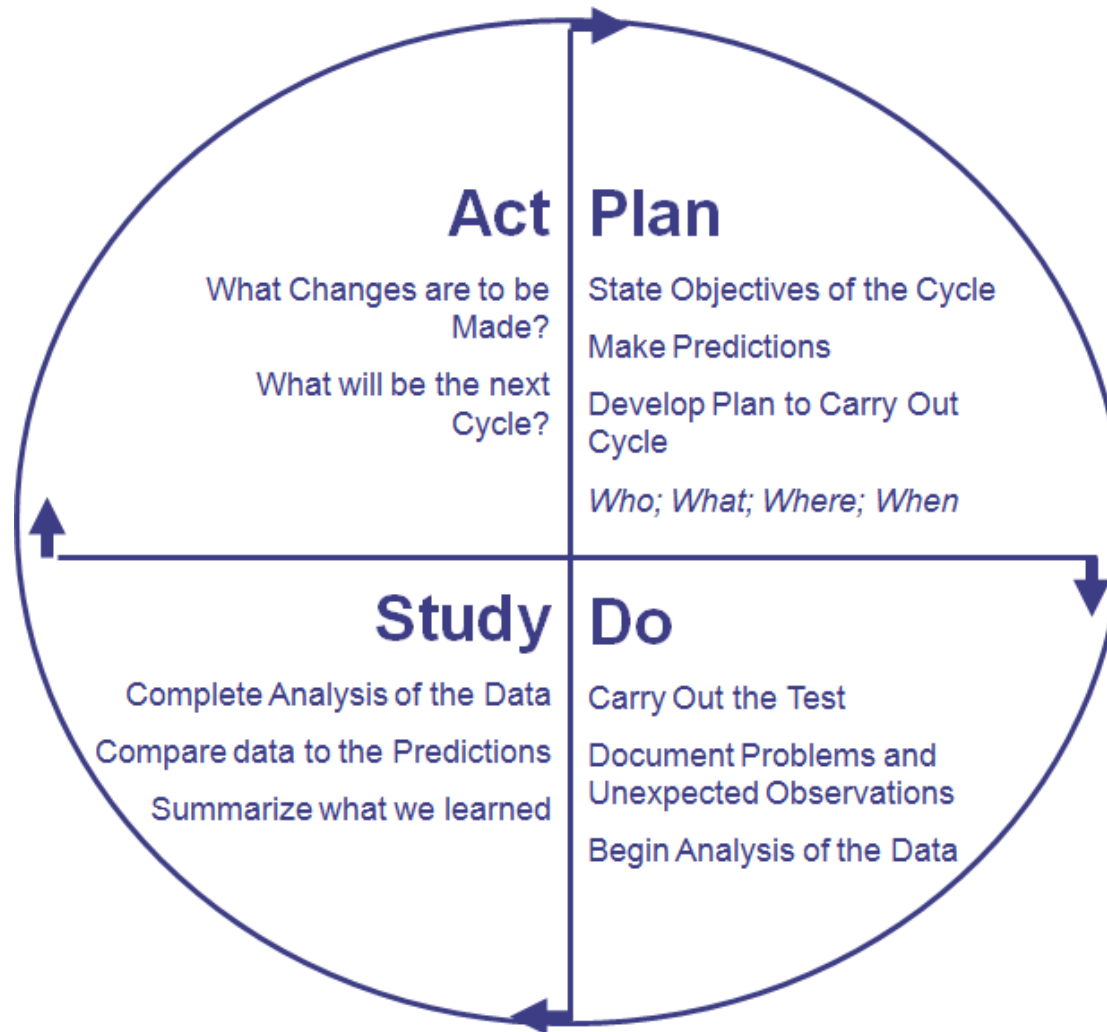
- A systematic approach to making changes
- Impacts:
 - Improved health outcomes for patients/clients
 - Improved healthcare system
- Need all stakeholders to make change and sustain improvements

<http://www.hqontario.ca/quality-improvement>

Plan-Do-Study-Act (PDSA)

- Rapid test of improvement
- Test a change on a small scale
- “What change can I make by Tuesday?”

PDSA



“When you improve a little each day,
eventually big things occur... Don’t look for
the quick, big improvement. Seek the
small improvement one day at a time.
That’s the only way it happens – and when
it happens, it lasts.”

John Wooden



“How wonderful it is that nobody need wait a single moment before starting to improve the world.”

Anne Frank

Thank you