





# A Day Well Lived: Redesigning our approach to care

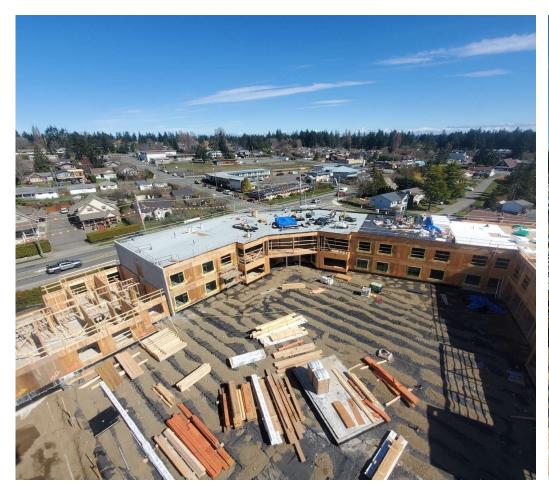
West Coast Conference on Aging

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### **Objectives**

- Introduce the social-relational model of care as a novel, alternative approach
- 2. Present Providence Living/Providence Health Care's design of a new home where this model will be in place
- 3. Explore various initiatives that are underway to support and evaluate successful transformation and integration of this new model





# The social-relational model of care



## Foundational principles

EMO	OTIONAL CONNECTIONS MATTER MOST	RESIDENTS DIRECT EACH MOMENT	HOME IS NOT A PLACE, IT IS A FEELING
_	won't remember what you said or ey will remember how you made them feel"	"Time is not measured by a clock, but by moments"	"Home feels friendly, relaxing, secure and familiar"



### Be Advice Paradigm®

	Quality of Life —————						
Favourable surrounding	Lifestyle	Health	Life's pleasures & meaning of life	Formal & informal network	Organisation	Social inclusion & emancipation	
The individual				100			
The home							
The living environment							
Organisation and proce	ess						

### Providence Approach with the de Hogeweyk 7 Pillars

Looking at issues from 4 points of view - the individual, home, living environment and organization/process

Favorable	
Surroundings	s

 Surround Residents with familiar surroundings to reduce confusion, agitation, frustration, anger and desire to leave the household

#### Lifestyle

 Increased choice to live the life Residents wish with people who share similar preferences, interests and values

#### Health

 Focus is on Resident's quality of life and their overall health (physical, mental, emotional and spiritual)

### Life's Pleasures & Meaning of Life

• Residents experience a normal life – enjoying simple pleasures and supported by a diverse offering of activates and events that are easy to participate in

## Formal & Informal Networks

 Formal network of professionals developed to support Residents and family (i.e. dementia care coach) and an informal network of volunteers, family and community members to support Residents, community interaction and destigmatize people living with dementia

### Organization

 Vision, Guiding Principles and Educational Curriculum taught to everyone and incorporated into care actions and behaviors and a staffing model that supports household living

### Social Inclusion & Emancipation

 Residents feel part of a community that accepts them as they are and the community is open to the surrounding neighborhoods to share knowledge and amenities to help destigmatize people living with dementia





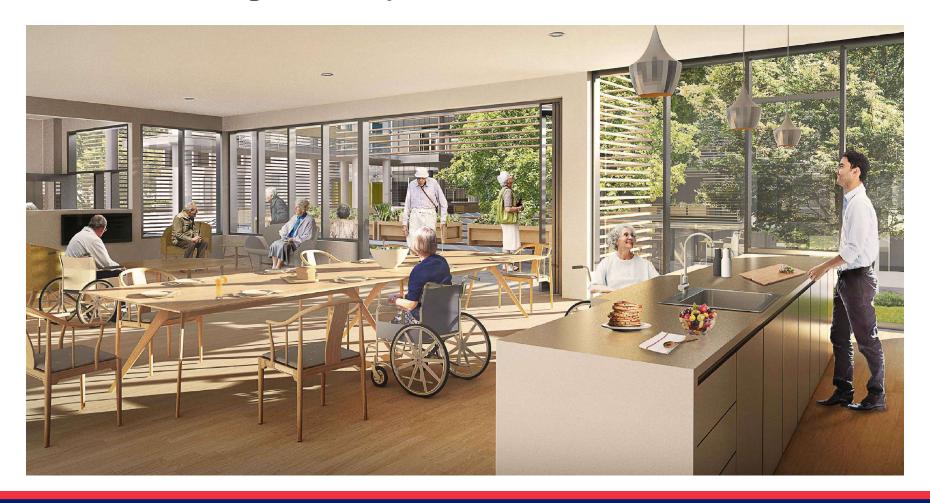
How the household model supports a sense of home



# What is a normal life? How does the social-relational model support a meaningful life?



## More than redesign of the space and environment...







Implementing the model and evaluating impact



### Implementing: Operational framework



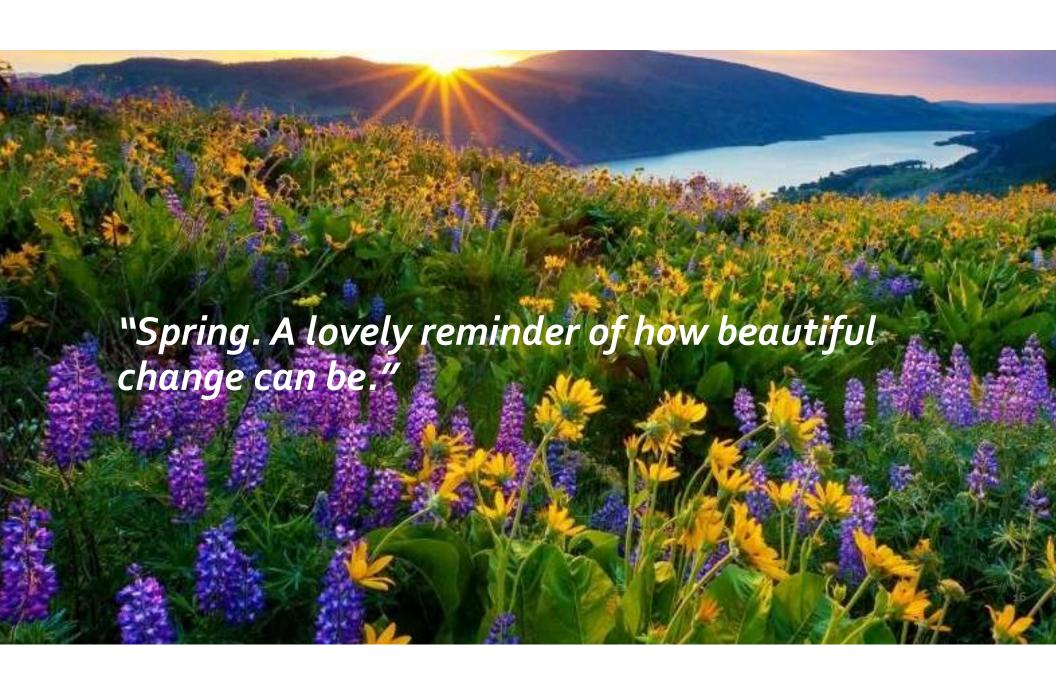




### **Evaluating: Partnership with research**

- Qualitative and quantitative methods
- Resident journey mapping
- Resident and staff focus
- Quality of life and other related health outcomes







## **Questions/Discussion**



## http://www.providenceliving.ca





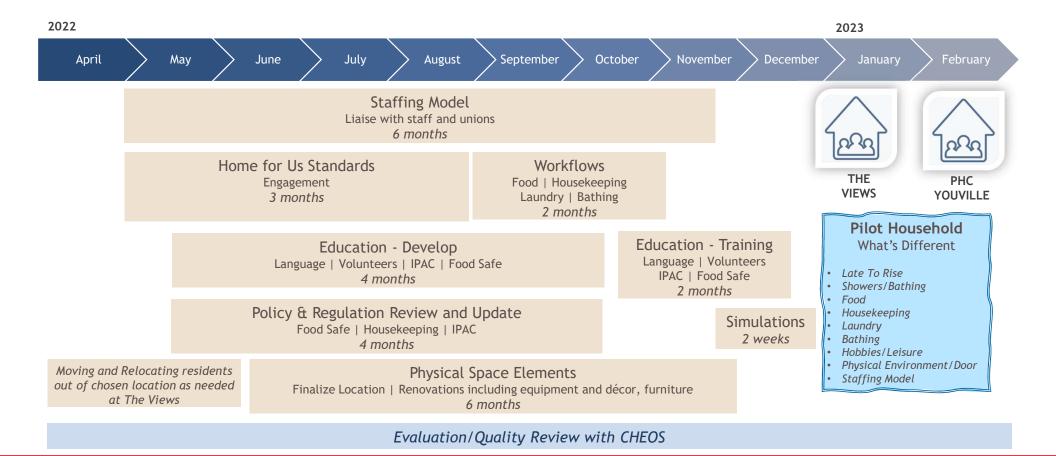
## Extra slides



## Moving from an Institutional to a Social/Relational model of care

Domaine	Institutional Model	Social/Relational Model
Primary Focus	Focus on Care	Focus on Living (and Care)
Resident/Team Routines	Scheduled Routines	Flexible Routines
Team Assignments	Team Members Rotate	Team Members Assist Same Residents
Decision-Making	Decisions for Residents	Decisions with Residents
Physical Environment	Environment = Workplace	Environment = Home
Activities	Structured	Planned, Flexible, Spontaneous
Department Structure	Hierarchical Departments	Collaborative Teams
Relationships	Team Members Care for Residents	Mutual Relationships
Sense of Community	Us and Them	Community

### **Pilot Household Timeline**



### Home for Us Overview

#### Priorities to be Identified Priorities to be Identified Phase 1 Phase 2 for Phase 3 of Model of Care for Phase 4 of Model of Care Restart Home For Us Model of Care Megamorphosis Access and flow Megamorphosis was initiated in 2014 in • Food and dining experience Clinical workflows order to start transformation of our care • Increasing Resident Choice • Primary care and medical model homes from a traditional model to a social (i.e. late to rise) • Implementing prototype households • Prototype households mode of care across remaining homes • Dedicated Home for Us curriculum Policy revisions • New staff structure March/April 2024 May 2017 November 2019 February 2023 Providence Living Place Megamorphosis Megamorphosis Together by the Sea Pilot Household at Brock Fahrni at Holy Family **Build Complete** Youville 2022 2023 2014 2024 March 2020 - April 2022 COVID-19 Pandemic April 2018 March/April 2022 January 2023 Megamorphosis Set up Home for Us Pilot Household at Youville Transformation Team The Views and created Project Plan

