

# Above & Beyond: Driving Regulatory Compliance Through the Domains of Well-Being

Pioneer Network Conference  
August 2018



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## Objectives for Today

- List at least 2 of the 7 Eden Alternative Domains of Well-Being
- Name 2 examples of how applying the Domains of Well-Being support compliance with regulatory requirements
- Describe 3 ways that care teams can assess well-being and use results to frame solutions to care challenge

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## Speaker

- Vickie Burlew, RN, LNHA, CEA, CEE, Eden Mentor and Guide
- No personal or commercial conflicts of interest



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## The Eden Alternative® Domains of Well-Being

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### The Regulation Says ...

- Each resident must receive and the facility must provide the necessary behavioral health care and services to attain or maintain the highest practicable physical, mental, and psychosocial **well-being**, in accordance with the comprehensive assessment and plan of care. Behavioral health encompasses a resident's whole emotional and mental well-being, which includes, but is not limited to, the prevention and treatment of mental and substance use disorders

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### What is Practicable?

- It's everyone's job!



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### The Eden Alternative® Solution

- Well-being is the path to a life worth living. It is the ultimate outcome of a human life. It leads us to ask the following questions:
  - What are the components of well-being? What do we need to experience contentment?
  - Through a collaborative effort involving a task force of culture change specialists, The Eden Alternative has identified seven primary Domains of Well-being: identity, growth, autonomy, security, connectedness, meaning, and joy

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### What Is Well-Being

Well-being is a much larger idea than either quality of life or customer satisfaction. It is based on a holistic understanding of human needs and capacities. Well-being is elusive, highly subjective, and the most valuable of all human possessions.”

– Dr. Bill Thomas, *What Are Old People For?* 2004 (Page 226)  
What are Old People For? How Elders Will Save the World. Acton, MA, VanderWeil & Burnham.

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### Eden Alternative® Domains of Well-Being

- **IDENTITY**—being well-known; having personhood; individuality; having a history
- **GROWTH**—development; enrichment; expanding; evolving
- **AUTONOMY**—liberty; self-determination; choice; freedom
- **SECURITY**—freedom from doubt, anxiety, or fear; safety; privacy; dignity; respect
- **CONNECTEDNESS**—belonging; engaged; involved; connected to time, place, and nature
- **MEANING**—significance; heart; hope; value; purpose; sacredness
- **JOY**—happiness; pleasure; delight; contentment; enjoyment

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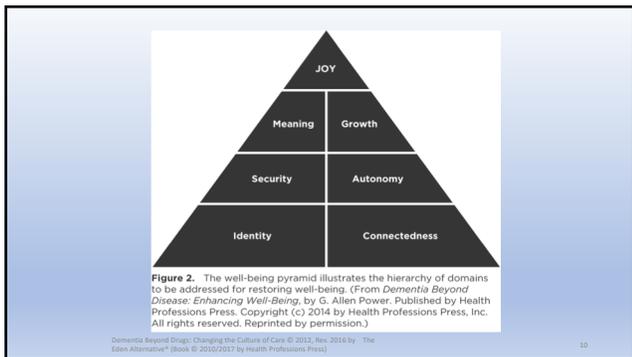
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## Identity



Having a history  
individuality  
well-known  
personhood

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## The Surveyors Will ...

- LTCSP Resident Interview Care Areas and Probes
- First 20 minutes with the resident during first day of survey
- Surveyors will take 20 minutes to get to know the resident

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Shouldn't We Do The Same?



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Relationship Building



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Bringing Identity Forward

- How do welcoming rituals bring forth the identity of the care partner (Elder or individual accepting support, employee, or family member)?
- How do conversations among the care partner team members reflect a "knowing" of the individual's identity?
- How do our care partners help people continue to become well-known to one another?
- In written language, how is each individual's identity revealed?
- How are individual strengths applied to affirming each person's unique identity?

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### Ftags that Reference Identity

- F604 – Physical Restraints
- F636 – Resident Assessment
- F675 – Environment supporting my culture
- And ...“Resident history” [medical] is mentioned 25 times in various regulations

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### Connectedness



Belonging  
Engaged  
Involved

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### LTCSP Interview Care Planning

- Does the staff include you in decisions about your medicine, therapy, or other treatments?
- Are you or a person of your choice invited to participate in setting goals and planning your care?
- Can you share with me how the meeting went?
- Do you receive care according to the plan you developed with the staff to achieve your goals?

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### LTCSF Interview Community Discharge

- For new admissions and long-stay residents who want to return to the community:
  - Do your goals for care include discharge to the community? If so, has the facility included you or the person of your choice in the discharge planning?
  - Do you need referrals to agencies in the community to assist with living arrangements or care after discharge??



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### Bringing Connectedness Forward

- How are members of the care partner team connecting with one another regularly?
- How are meaningful connections in the lives of care partners identified and shared?
- What actions are the care partner team members taking to help all team members continue or build connectedness?
- What role does a connection with the larger living world play in the individual's life and how is the care partner team developing that connection?

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### Ftags that Reference Connectedness (involved)

- F551 – Decision Makers
- F604 – Chemical Restraints
- F657 – Care Planning
- F660 – Discharge Planning
- F690 – Incontinence
- F692 - Assisted Nutrition and Hydration
- F700 – Bed Rails
- F759 – Psychotropic Drugs

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## Security

Safety Privacy  
Dignity Respect  
Freedom from Anxiety

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## LTCSP Interview Dignity

- Do staff treat you with respect & dignity?
- Do you have any concerns about how staff treat you? If so, please describe.
- Do you have any concerns about how staff treat other residents in the facility? If so, please describe.
- Have you shared with staff any of your concerns about how you or other residents are treated? If so, what happened?

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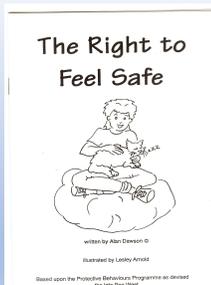
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## More ...

- Abuse
- Resident to resident interaction
- Privacy
- Personal Funds
- Personal Property
- Sufficient Staffing
- Environment – clean, safe and comfortable



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### Bringing Security Forward

- How does the care partner team uncover and address anxieties and fears that members of the team possess (Elders and individuals accepting support, employees, family members)?
- How do care partners protect the dignity and privacy of individuals in this community?
- What does respect for one another look like on the care partner team?
- How comfortable are care partners in their physical space and with those living or working in that space?
- In what ways is the care partner team optimizing the safety of its members?

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### Ftags That Reference Security (Fear)

- F563 – Visitors
- F570 – Personal Funds
- F578 – Grievance
- F600 – Abuse
- F604 – Restraints
- F607 – 609 – Abuse Policies and Procedures
- F660 – Discharge Planning
- F675 – Quality of Life
- F677 – ADLs
- F679 – Activities
- F689 – Accidents
- F690 – Incontinence
- F740 – Behavioral Health
- F742 - Post-trauma care
- F743 – Adjustment to facility

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### Autonomy

Choice  
Freedom  
Self-governance  
Self-determination

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### LTCSP Interview - Choices

- Are you able to make choices about your daily life that are important to you?
- I'd like to talk to you about your choices. Are you able to get up and go to bed when you want to?
- How about bathing, are you able to choose a bath or shower? Do you choose how often you bathe?

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### LTCSP Interview - Choices

- How about food, does the facility honor your preferences or requests regarding meal times, food and fluid choices?
- How about activities, are you able to choose when you go to activities?



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### LTCSP Interview - Choices

- How about meds, are you able to choose when you receive your medications?
- Did you choose your doctor? Do you know their name and how to contact them?
- Can you have visitors any time or are there restricted times?

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### Bringing Autonomy Forward

- When engaging care partners, do leaders seek input and ideas or truly empower them to take an active role in daily decision-making?
- What are some ways individual choice is optimized in the community?
- How do care partners uncover assumptions that may cause us to limit choices for one another?
- How does the care partner team handle situations when poorer choices are made?
- Are mistakes an opportunity for punishment, or limitation, or an opportunity for growth?

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### Ftags That Reference Autonomy (Choices)

- 450 + references to autonomy, choices, preferences and alternatives




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### Meaning

- Hope
- Value
- Purpose
- Significance

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### Meaning: Purpose

Becoming engaged, staying involved in a purpose, in purposeful activities is a key to living out our lives as happy, fulfilled individuals.

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### LTCSP Interview Activities

- Do you participate in activities here? If not, why?
- Do the activities meet your interests? If not, what type of activities would you like the facility to offer?
- Are activities offered on the weekends and evenings? If not, would you like to have activities on the weekends or in the evenings?
- Do staff provide activities you can do on your own (cards, books, other)?

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### LTCSP Interview Activities

- If resident is in the facility for rehab or is a young resident who says they don't care to participate in the activities, determine:
  - If it is because the activities don't interest them. or
  - If they wouldn't participate in activities no matter what was offered. If they don't want to participate in activities (offered or not), then mark activities as No Issues.



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### Bringing Meaning Forward

- How are care partners learning each other's stories of times when they find meaning in their lives?
- How is time for reflection and celebration woven into care partners' lives?
- How are individual's goals honored and achieved in meaningful ways?

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### Ftags That Reference Meaning (purpose)

- F679 – Activities
- F743 – Adjustment to Facility
- F744 – Dementia Care

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### Growth



Development  
Evolving  
Enrichment

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### Bringing Growth Forward

- How are the strengths, dreams and goals of individuals captured and shared in the community?
- How does the care partner team work together to help one another to grow based on individual strengths and goals?
- What opportunities are all care partners given to be exposed to new life experiences and knowledge?

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### F655 - §483.21 Comprehensive Person-Centered Care Planning §483.21(a) Baseline Care Plans

- Develop and implement a baseline care plan that includes the instructions needed to provide effective and **person-centered care** of the resident that meet professional standards of quality care. The baseline care plan must—
- Be developed within 48 hours of a resident’s admission.
- Include the minimum healthcare information necessary to properly care for a resident including, but not limited to—
  - Initial goals based on admission orders.
  - Physician orders.
  - Dietary orders.
  - Therapy services.
  - Social services.
  - PASARR recommendation, if applicable.

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### F656 §483.21(b) Comprehensive Care Plans

- The facility must develop and implement a **comprehensive person-centered care plan** for each resident, consistent with the resident rights set forth at §483.10(c)(2) and §483.10(c)(3), that includes measurable objectives and timeframes to meet a resident’s medical, nursing, and mental and psychosocial needs that are identified in the comprehensive assessment.

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F656

§483.21(b) Comprehensive Care Plans

- The services that are to be furnished to attain or maintain the resident's highest practicable physical, mental, and psychosocial well-being as required under §483.24, §483.25 or §483.40; and
- Any services that would otherwise be required under §483.24, §483.25 or §483.40 but are not provided due to the resident's exercise of rights under §483.10, including the right to refuse treatment under §483.10(c)(6).
- Any specialized services or specialized rehabilitative services the nursing facility will provide as a result of PASARR recommendations. If a facility disagrees with the findings of the PASARR, it must indicate its rationale in the resident's medical record.

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F656

§483.21(b) Comprehensive Care Plans

- In consultation with the resident and the resident's representative(s)—
  - The resident's goals for admission and desired outcomes.
  - The resident's preference and potential for future discharge. Facilities must document whether the resident's desire to return to the community was assessed and any referrals to local contact agencies and/or other appropriate entities, for this purpose.
  - Discharge plans in the comprehensive care plan, as appropriate, in accordance with the requirements set forth in paragraph (c) of this section.

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In Other Words

- The Care Plan must be MEANINGFUL to the resident!
- That is why Eden Calls Them

GROWTH PLANS

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## Joy

Happiness  
Pleasure  
Delight  
Contentment



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## More LTCSP Interviews

- Dental
- Nutrition
- Hydration
- Tube Feeding
- Vision and Hearing
- ADL and Decline
- Insulin or Blood Thinner
- Respiratory Infection
- UTI
- Infections

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## More LTCSP Interviews

- Hospitalization
- Falls
- Pain
- Pressure Ulcers
- Skin Conditions
- Limited ROM
- Rehab
- Dialysis
- B&B

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### More LTCSP Interviews

- Constipation
- Smoking
- Hospice

**BOTTOM LINE: Are you happy here?**

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### Ftags that Reference Growth and Joy

- F679 – Activities
- Theme of the regulations – “highest practicable”

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### Let’s Look At Well-Being

Eden Alternative Domains of Well-Being Form

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## Connection of Domains to Survey Process & Regulations

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Care Area For Initial Pool Interviews – Elder and Family			Probes	Response Options
Activities	Hydration	Falls		No Issues /NA Further Investigation MDS Discrepancy
Dignity	Tube Feeding	Pain		
Abuse	Vision / Hearing	Hospice		
Privacy	ADLs	Limited ROM		
Accommodations	Catheter	Vent / Trach		
Language / Comm	Psych Meds	Incontinence		
Mood / Behavior	AC Side Effects			
Restraints	Resp Infection			
Accident Hazards	UTI	Smoking		
Unsafe Wandering	Other Infections	Other		
Call lights	Oxygen			
Dental	Positioning			
Nutrition	Pressure Ulcers			
Edema	Other Skin			

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THE EDEN ALTERNATIVE DOMAINS OF WELL-BEING™ Revolutionizing the Experience of Home by Bringing Well-Being to Life”

• <http://www.edenalt.org/wordpress/wp-content/uploads/2014/02/EdenAltWellBeingWhitePaperv5.pdf>

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### References

- Domains of Well-Being Assessment Tool, Copyright 2012,
- The Eden Alternative -"Revolutionizing the Experience of Home by Bringing Well-Being to Life," Revised 2012, Copyright, The Eden Alternative. –
- Perna, Chris. "The Argument for Well-Being Through Culture Change." McKnight's Long-Term Care News & Assisted Living, August 8, 2012. –
- Edward L. Deci, Richard M. Ryan. "Facilitating optimal motivation and psychological well-being across life's domains." Canadian Psychology (Impact Factor: 1.54). 01/2008; 49(1):14-23. DOI:10.1037/0708-5591.49.1.14

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Pioneer Network  
**Pioneering a  
New Culture of Aging  
Conference**

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