Patienthood to Personhood

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09-09-2022 North Dakota Long Term Care Ombudsman Program Bismarck, North Dakota



Enhancing the quality of life and the quality of services for residents of long-term care homes through empowerment, advocacy, and education.







For participating

For all you do



Objectives

- Discuss evolution in long term care practice and culture
- Describe ways to support personhood
- Converse effectively about respect, dignity, choice and individuality



"We did the best with what we knew... and when we knew better, we did better." --Maya Angelou

Years of experience as an Ombudsman /Family member 2020

Department of Human Services

Person-Centered Initiative systemwide culture change for person-centered practices to

assist individuals to have control over the life they desire

engage fully in their communities

Culture & Person -Centered Practices **Community Inclusion**

Focus on the Person

Availability of Services and Support

Choice and Self-Determination

Person-centered/ Person-directed centers on person, not disease

centers on strengths, not losses

shifts authority to individual

Fad or foundational?

reduces reliance on professionals

builds natural supports

gives equal credence to psychosocial context

Why?

Promotes highest quality of life

Prevents excess disability

Better health outcomes



It's the law!

Autonomy is a human need and a human right

It's my life

I have a right to:

Be included

Make decisions

Have an individual plan based on my hopes, dreams and goals_____



1987

Nursing Home Reform Act OBRA 87

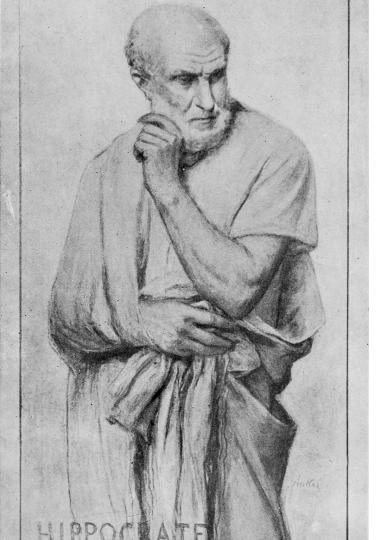
Culture Change

1970s

Patient-centered care as a fullfledged medical model...."to provide an antidote for high-tech specialty care that didn't respect patients' values and concerns."

LTCOP demonstration program

Women's Equal Rights



Study symptoms

Individualize treatment

Restore health

Promote well-being

Proper exercise and diet

Treat indiscriminately

Without concern for money



Long Term Care Continuum

1999

Olmstead Decision

Community Based Services



COVID-19 The great disrupter

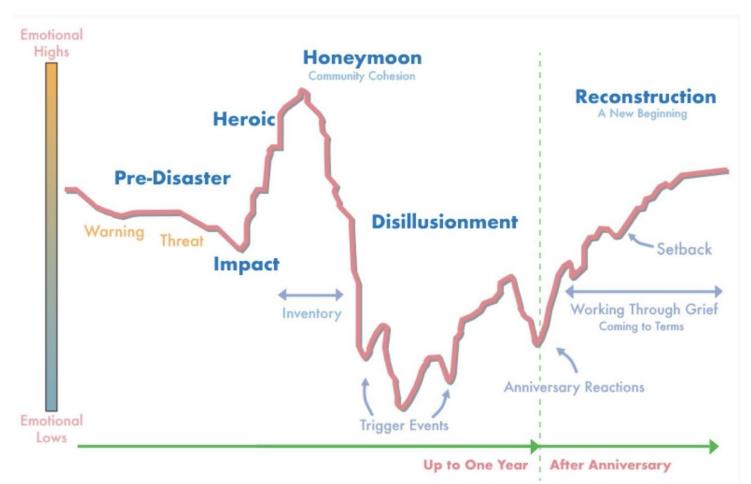




Relationships are CRITICAL for Person-Centered Care Sources of information, support, care plans

And these were disrupted during the pandemic

Stages of recovery: Where are you?



Trauma

No one has been untouched Disruption creates opportunity Trauma-informed care is very person-centered!

Reflections

Principles

Safety

Choice

Empowerment

Understanding

Trustworthiness

Collaboration



Physical and emotional safety is in the relationship

Create calm and comfortable spaces

Provide options in care

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Provide options in daily living

Remind a person they are not powerless

Connect residents with resources and advocate for support

Listen to their story



Remain sensitive to issues of isolation

Provide consistent, clear information

PERPLEXED

BEWILDERED

LOSI

UNSURE

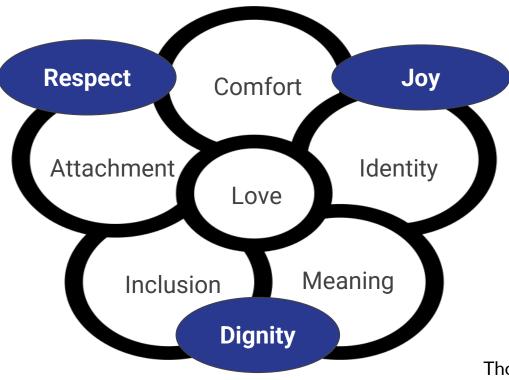
DISORIENTED

CONFUSED

Support decisions AND decisionmaking

What about people living with dementia?

Maintain Personhood



Thomas Kitwood, 1996, Dementia Reconsidered

A person with **DEMENTIA**

A PERSON with dementia

A PERSON



WHO a person is What a person CAN STILL DO

What's in "the who?"

Who are YOU?



"We desperately need others to see our abilities and not simply focus on our inabilities. Please enable us, don't further disable us."

~ Myriam Marquez, living with early onset Alzheimer's dementia



What a person can do

Early Stage

Carries on conversations

Can plan common tasks like dinner

Navigates familiar surroundings

Recognizes familiar people and places

Middle Stage

Remembers things that happened long ago

Recognizes people from early in life

Reads and understands singular words

Mimics simple actions

Carries out over-learned processes like "Hello, how are you."

Makes simple decisions

Late Stage

Interprets and uses basic body language

Enjoys sounds, tastes, smells, sights and touch

What a person can't do

Early Stage

May need help doing familiar tasks

May need assistance recalling familiar places or people

May need assistance with planning or organizing

May need help remembering words or names

May get frustrated easily

Middle Stage

May need hands-on care

May get lost easily

More repetition of questions or statements

Anger, suspicion

Changes in personality

Late Stage

Needs hands on personal care

Significant confusion

Loss of ability to communicate

May not recognize self or family

May lose ability to smile

Valuing staff

If staff feel abandoned and abused, residents will be too. Staff who feel supported and encouraged simply give better care

Creating the right environment



Model

Respect and caring

Start with hello

Person-first language

Fact-finding, not fault finding

Curiosity

Palliative care

Preserves values and identity of the individual, even in the advanced stages

Comfort Care

We are in this together.



Palliative Care for People with Dementia:

Why Comfort Matters in Long-Term Care



Resources

Dementia Action Alliance

The Gerontologist Care Practice Recommendations

Palliative Care for People with Dementia:

Raising The Bar: Practice Guide for Nursing Home Communities

NCAPPS Shorts

For being here For your interest For all you do

Please stay in touch swehry@une.edu @beingwithaging



