Culture Change in Nursing Homes: Addressing Regulatory Impediments

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Introduction
There continue to be serious deficiencies in the quality of life available to many nursing home residents in the U.S. One significant response to this undesirable situation is the nursing home “Culture Change” movement, which attempts to improve the nursing home environment—and consequently residents’ quality of life—by making facilities less institutional and more homelike. One of the impediments often interfering with the adoption and implementation of Culture Change in specific nursing homes is apprehension by staff, administrators, and governing boards about potential exposure to regulatory sanctions if residents suffer injuries that might arguably be attributed to facility conditions or policies that that were inspired and encouraged by the Culture Change movement.

Abstract
The goal of the “Culture Change in Nursing Homes: Addressing Regulatory Impediments” project is to make suggestions to nursing home regulators for amending regulations and enforcement practices in these institutions. This is in an effort to improve the nursing home environment, and by extension, residents’ quality of life. The research assistantship position entailed summarizing published articles about the Culture Change movement, reviewing a proposed Regulation by the Centers for Medicare and Medicaid Services, developing a timeline for significant events in the Culture Change implementation in nursing homes, and compiling a list of acronyms for organizations and policies that pertain to the movement. These tasks were a small portion of the overall project, but these findings will be utilized to demonstrate to nursing home regulators, as well as by extension, residents’ quality of life.

Methodology
The research assistantship position consisted of reviewing and summarizing published articles about the Culture Change movement including “Are Nursing Home Regulations Like Cobwebs?”; “‘At Least Mom Will Be Safe There’: Role of Resident Safety in Nursing Home Quality”; “How to Fix Nursing Homes”; “Making Patient Safety and a ‘Homelike’ Environment Compatible: A Challenge for Long Term Regulation”; and “Nursing Home Culture Change: Legal Apprehensions and Opportunities” all by Marshall Kapp. The UROP student also searched for and examined other relevant articles in the health policy literature. A list of acronyms for organizations and policies pertaining to the advances of the movement was also created by the UROP student.

Another necessary component of the project was the UROP student’s examination of “Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities,” a set of proposed revisions to the Medicare and Medicaid program requirements for Long-Term facilities. This examination of pertinent literature and the proposed regulatory changes help to supplement the faculty member’s research and inform a set of presentations and articles the faculty member is in the process of developing in support of Culture Change implementation in nursing homes.

Discussion
The UROP student was involved in the beginning stages of the project, and therefore, no results are currently available. However, the mentor is working on drafting a Model nursing home regulatory Act that simultaneously better promotes nursing home Culture Change (a more homelike and autonomy-protecting environment), assures quality of care and resident safety, and protects nursing homes against regulatory sanctions associated with their Culture Change practices. It should also be noted that Professor Marshall Kapp will be discussing a portion of the project, “Risk Management, Safety, and Honoring Resident Choice in Long-Term Care” at conference of the American Association of Director of Nursing Services, in Baltimore, Maryland on September 29, 2016.

References
Kapp, M. (2003). “At least Mom will be safe there”: The Role of Resident Safety in Nursing Home Quality. Quality And Safety In Health Care, 12(>3), 201-204.http://dx.doi.org/10.1136/qhc.12.3.201

Figures 1 and 2: The Culture Change movement focuses on person-centered care which increases resident choice and thus improves resident quality of life.

Figure 1. Courtesy of http://www.edenalt.org/

Figure 2. Courtesy of http://www.edenalt.org/