

***Person-Centered Care***  
**The Dignity and Challenges of Resident Choice**

*Presented by*  
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**Nursing Home Social Work Network**

Webinar Series

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**Long Term Services and Supports**

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Christa M. Hojlo, PhD, RN, NHA



Director of VA Community Living Centers, Department of Veterans Affairs. As a licensed nursing home administrator she has led, guided, and directed significant transformation in the delivery of care to frail and functionally impaired veterans in VA Community Living Centers nationally and set a vision for care in State Veterans Homes (SVH).

She holds a bachelor's in Nursing, The University of San Francisco and master's degree as an Adult Nurse Practitioner, and a PhD from The Catholic University of America. She is a licensed nursing home administrator in the State of Maryland.

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Molly Rees Gavin, MSW, LCSW



President of Connecticut Community Care, Inc. (CCCI). She began with CCCI processor in 1976; a state demonstration project to help people remain in their homes rather than being admitted prematurely to a skilled nursing facility. CCCI is now a statewide nonprofit organization offering community services to elders and adults with disabilities living at home.

Prior to CCCI, Molly was a medical social worker at Hartford Hospital on the neurosurgical and urology units and a psychiatric social worker at Trenton Psychiatric Hospital.

She received her bachelor's from The University of Saint Joseph, West Hartford, CT and her master's in Social Work from Rutgers, The State University of New Jersey.

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**Objectives**

1. Participants will gain an understanding of the history of the culture change movement and person-centered care
2. Participants will incorporate the principles of person-centered care into their practice
3. Participants will learn effective tools to enhance person-centered care in their own facilities

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## Welcome and Thank you

Your social work practice is on the cutting edge of culture change

## How Did We Get Here?

- 1980s - consumer advocacy groups exposed substandard care in some nursing homes
- 1987 - Congress enacted sweeping legislative reforms—Omnibus Reconciliation Act encouraging individualized care
- 1997 – The Pioneer Group coalesced to advocate for person-centered care and “culture change”

## Principles of Person-Centered Care

- Resident autonomy, direction and choice
- Resident engagement – enhanced quality of life
- Resident relationships with consistent staff who know them and recognize changes in their condition
- Resident lives in a way that is meaningful
- Resident lives in an environment of trust and respect

## How Do We Bring About Change?

- Do your homework
- Carefully identify your allies
- Start small
- Educate yourself and others
- Role model appropriate behavior
- Advocate
- Identify and celebrate success

## These Are Social Work Skills

- Support resident in the identification of personal goals
- Keep person at the center of the care planning/decision-making process
- Adopt motivational interviewing techniques
- Engage in active and reflective listening
- Concentrate on the individual’s affect and behavior

## Long Term Services and Supports for Person-Centered Care

New Populations  
New Language  
New Approaches

Nursing Homes  
Placement – Where to “put” people  
Medical diagnoses as the framework for “placement”

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Oh my, NO! I won't be PUT there!



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Language is changing

- Population changes:
  - Younger MEN and women
  - Skilled services
- Many “elders” do not want to be considered “geriatric”
- Options are expanding
- New options = new opportunities to redefine elder, placement, individualization of care.

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SERVICES

- Diagnoses only provide clues to what is needed
- The PERSON is NOT their diagnosis/diagnoses
- The diagnosis impacts how the person functions
- Function determines need for SERVICES  
e.g. not everyone who has a stroke, needs to be in a nursing home OR even needs SERVICES

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SERVICES

- SERVICES are intended to mitigate the IMPACT of the medical diagnoses/acute or chronic problem on the person's ability to function –
  - To bathe, toilet, eat, remain mobile, or dress self (Activities of Daily Living (ADL))
  - To prepare meals, go shopping, use the telephone; conduct personal business; manage money (Instrumental Activities of Daily Living (IADL))

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New Imperative

- To provide the SERVICES needed for the right reason, for right amount of time, in the right venue
  - ASSESS
    - Impact of medical problem on function (ADL/IADL)
    - Social supports
    - What specific interventions are needed such as wound care, physical therapy...
    - Person's personal history; suicidal ideation, history of drug or alcohol use

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## VENUES for Services

- Once upon a time there was only the nursing home but it is no longer the only game in town
- Home and community based care
  - CCRC
  - Homemaker home health aid
  - Skilled nursing
  - Adult Day Health
  - Person-Directed Care
  - Other community based SERVICES

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## Questions