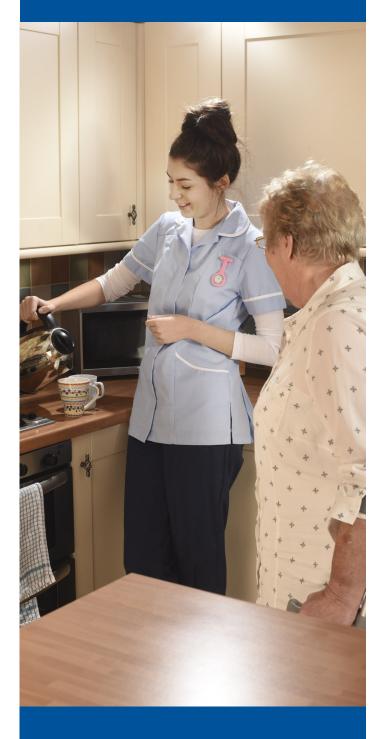
"HOME-LIKE" MATTERS

Nursing Home Resident Quality of Life Knowledge Sharing Series



HOW DO WE KNOW HOME-LIKENESS MATTERS?

Surveys with residents, family, and staff from nursing homes across Nova Scotia showed that perceptions of resident quality of life were generally positive. Across the three perspectives, the things that mattered most were positive relationships among residents, families and staff, and more home-likeness. For staff, a supportive working environment also mattered. Based on these findings, we know that relationships, home-likeness and working environment are more important to resident quality of life than physical design and staffing approach. This brochure focuses on the importance of a "home-like" environment on resident quality of life.

The way in which physical space is designed and how people feel within the facility are both connected to findings related to a "home-like" environment. While "home-like" was found to have different meanings depending who was asked, three themes emerged:

- Making it feel like home.
- Making it look like home.
- Treating it as the resident's home.

"We need to honour personal preferences and their history; that is integral to home-likeness." – Workshop Participant

IT FEELS LIKE HOME



From the resident perspective, home-likeness was captured in one statement "this place feels like home to me." Residents who agreed with this statement reported higher quality of life. Families assessed the extent to which a nursing home felt "like home" through its warmth and coziness.

IT LOOKS LIKE HOME

Family members and staff were each asked about the physical features and appearance of the nursing home to assess home-likeness. They were asked about the general cleanliness, and whether the space looked home-like. Family members were also asked if the nursing home looked "cold and sterile."

"Family expectations are much higher than ever before. New facilities create higher expectations (because the facility looks like a hotel)" – Workshop Participant



OTHERS TREAT THIS SPACE AS MY HOME

Involvement of the community in the "life" of the nursing home was a feature of home-likeness expressed by both family and staff. Family members were also asked if they felt an attachment to the nursing home and if they felt welcome when they visited the nursing home.

IDEAS FOR ACTION

The project hosted a workshop with almost 70 representatives from the long-term care sector in Nova Scotia. Workshop participants heard research results and identified areas for action.



SUPPORT THE DEVELOPMENT OF EVIDENCE-BASED POLICY

- Define home-likeness at a policy level and consider this definition when developing new policy, licensing, and regulations.
- Review philosophies of care to examine how they support resident choice and control over their own routines.
- Ensure ongoing review of policy and practices, taking into consideration change within the sector and facilities.

OFFER EDUCATIONAL OPPORTUNITIES

- Provide leadership development among staff regarding the importance of home-likeness for resident quality of life.
- Encourage staff to be creative to provide a "homelike" environment and experience within current constraints.



IMPLEMENT FINDINGS IN EVERYDAY PRACTICE

- Consult with residents and family on an ongoing basis to find out what is "homelike" to them.
- Find strategies to balance risk (or perceived risk) of residents with home-likeness.
- Promote ongoing relationships with the community, offering public meeting space within the facility to community groups.
- Consider physical modifications to improve home-likeness, including a reduction in signage, improved access to outdoor space, rolling walls to provide privacy in shared rooms, and providing a play-area for visiting children.
- Include "wayfinding" features to improve the ability of residents with dementia to move about the facility independently.

MOVING FORWARD

The findings of this research regarding the importance of home-likeness to resident quality of life can be applied in any nursing home environment, regardless of the facility's physical design or staffing approach. The first step in providing a homelike experience is acknowledging and accepting that home-likeness will mean different things to residents, family members and staff. Conversations with those living, visiting, and working within long term care facilities should be ongoing to ensure the social and physical environment is as home-like as possible.

PROJECT BACKGROUND

In Nova Scotia, the long term care sector has been undergoing significant changes as part of the government's Continuing Care Strategy, impacting those living in the province's 89 licensed nursing home facilities (with approximately 7000 publically-funded beds). New and replacement facilities were built with the self-contained household design, which includes smaller households of private rooms and baths with a shared kitchen, dining, and living space. The staffing approach was adjusted to support continuing care assistants to perform personal care along with household-level tasks such as housekeeping and dietary.

The Care and Construction project team sought to understand the impact of models of care on resident quality of life from the perspectives of residents, family, and staff. The models of care included 1. New-Full-scope with household design and Continuing Care Assistants (CCAs) responsible for all tasks 2. New-Augmented with household design and CCAs providing care needs and limited dietary and housekeeping, and 3. Traditional with Floor/unit design and CCAs providing care needs only. Multiple methods were used to answer the research question, including surveys, interviews, focus groups, participant observation, and physical activity monitoring. Results presented here are based on surveys with 319 nursing home residents, 397 family members, and 862 staff members.



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