

Meaningful Transformation



THE GREEN HOUSE PROJECT
caring homes for meaningful livesSM

Green House Transformation

- Radical transformation within current nursing home regulatory and reimbursement structures
- Simultaneously change:
 - Philosophy of care
 - Architecture
 - Organizational structure
- Simultaneous change allows new efficiencies
- Full transformation delivers good lives and good jobs
- Physical and organizational barriers to institutional creep - “slip resistant” change



Portrait of An Elder

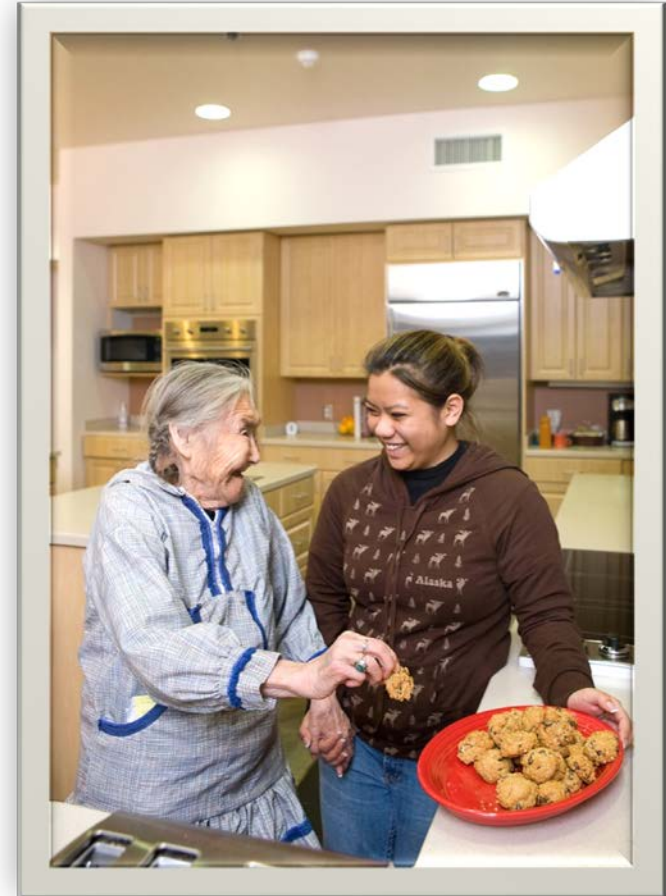
Doris Delanus

The Village of Redford



Philosophy

- All people deserve meaningful lives in real homes
- Meaningful lives require control, being known, and reciprocal relationships
- Control requires that decisions are placed with the elders and the staff who know them best
- Supporting choices requires very flexible operations that can respond to individual preferences
- Becoming known requires clear strategies for intentional community
- Reciprocal relationships require deep relationships



Architecture

Green House homes and site designed to be similar to the housing in the community:

- Single family style in rural and suburban areas
- Low-rise, garden apartment style in dense suburban and low-rise urban areas
- High-rise in dense urban areas
- Each best under 7000 NSF



Architecture

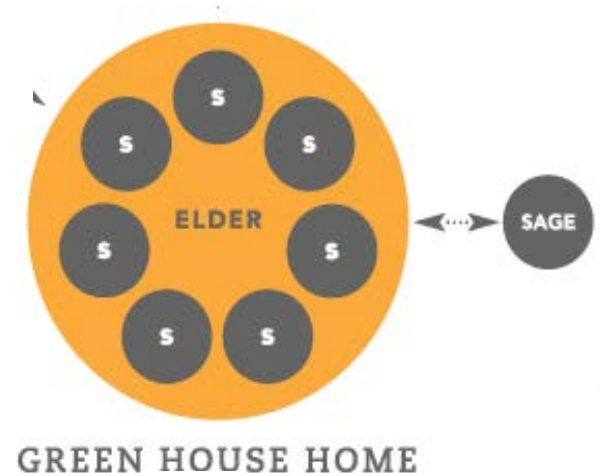
- **Warm** - small scale, truly residential finishes and details, not “home-like” (supports: meaningful relationships)
- **Smart** - technology to support time and capacity for ‘high-touch” services (supports: becoming known)
- **Green** - support continued growth & sustainability (supports: people are whole, reciprocity)
- **Private** - bedroom, bath, and comm areas, regardless of payment source (supports: control, real home)
- **Hearth** - open plan living room, dining room, and kitchen (supports: intentional community, flexibility , efficiency)



Reorganization

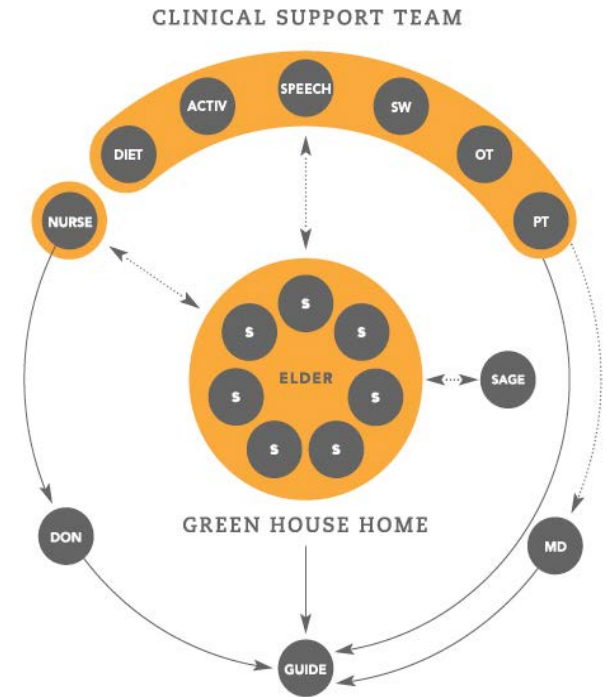
House:

- Staffed by Shahbazim - a versatile staff position accountable for direct care, house keeping, laundry, cooking, activity and life in the home
- Shahbazim work in self-managed teams
- Versatile Shahbaz position allows direct care staff to organize as needed to best meet elder's preferences and needs
- Desegregated staffing puts time in the house - allowing meaningful relationships between staff and elders to develop
- Sage, a volunteer from the community, supports self-managed team as an informal coach



Reorganization

- Traditional roles redesigned to balance care with treatment to support high quality of life
- Shahbazim not supervised by clinical staff - work in partnership with support of Guide, Director Of Nursing (DON), and Medical Director
- Shahbazim coached and held accountable by the Guide
- Nurses coached by and accountable to the DON
- Guide facilitates collaboration between all care and clinical partners
- All staff extensively trained in philosophy, principles, practices, coaching and self-management skills



Portrait of a Shahbaz

Bill Groll

*St. John's Lutheran
Ministries*



Education/Training for Organization

- **The Coaching Approach to Leading Change: Leadership team (2 days)**
- **Coaching Supervision: Guides (3 days)**
- **Coaching for Partnership: Clinical support team (2-days)**
- **Educator Course. GH educators (5-days)**
- **The Roles of Nurses: GH nurses (4-hours)**
- **Core Training: For all who will interact with the home (6-days)**
- **EN-CORE: All new team members after opening, Peer & web-based (6-days)**
- **Peer Network: On-going monthly education and support opportunities**



Green House Research

Address 3 Big Questions:

- Do elders, staff, and family really like it better?
- If it is really a home, can the care be as good?
- If it is really better, doesn't it have to cost more?



Research Outcomes

Kane: JAGs 2007 - Satisfaction and Clinical

- Significant improvements in elders, family, and staff satisfaction
- Better clinical outcomes

Sharkey: JAGS 2011 - Staff Time and Clinical

- Fewer total direct care, nursing, or departmental hours in GH homes
- Same or better clinical outcomes
- ½ hour more direct care time
- 4 times more engagement between staff and elders

Bowers: Gerontologist (Expected 2011/2012) - Nursing Care Quality

- Qualitative research at GH homes
- Seamless communications and deep relationships
- Nursing care as good or better than traditional



Green House Project Services

Comprehensive consulting and tools for success, including:

- Organizational Assessment
- Financial feasibility model and consulting
- Design consulting
- Regulatory and policy review and assistance
- Organizational redesign
- Project management
- Extensive education
- Post-occupancy consulting
- On-going education
- Peer network



Market Response - The Media

**THE WALL
STREET
JOURNAL.**

*Rising Challenger
Takes on Elder-Care
System*

Provider

*Culture Change Goes
Mainstream - Green House
Homes, Considered the
Pinnacle of the Movement,
Spread to 26 States*

AARPSM

*Green House' Homes:
A Model for Aging That
Promotes Growth*

PARADE

*Where We Live As We
Age*

n p r

*Reformers Seek To
Reinvent Nursing
Homes*

The New York Times

Rethinking Old Age

SmartMoney.com

*Home Sweet (Rest)
Home*

**The
Philadelphia
Inquirer**

*A Healthier Take on
a Nursing Home*

Kiplinger

*A Nursing Home
You Can Call Home*



Joining The Green House Project

Providers

- LIKE US on Facebook!
- Download our APP for iPad: GHP
- Attend a Green House Workshop
- Complete Green House Project Application

Advocates, Professionals, Consumers

- Learn how you can help:
 - Review website
 - Join our Social Media Channels
 - Register for our Newsletter



We did the best we could with what we knew.
And when we knew better, we did better.

Maya Angelou

