

The Physician's Role in Changing Institutional Culture

By Carmen Bowman

Culture change refers to changing institutional culture in health care settings; nursing homes and assisted livings for sure but institutional ways creep into hospitals, home health and other settings as well. I would like to talk about what can inspire culture change. As you know, culture change must involve many people in an organization—including the physicians. Dr. Bill Thomas is a great example of the important role physicians play.

Thomas was working as a medical director in a New York nursing home. After years of practice, he had an “ah ha” moment when visiting a resident named Rose. Rose had a rash. This seemed like a straight forward issue. Dr. Thomas saw Rose and prescribed a cream. But when he was about to leave, Rose beckoned him to come closer and whispered, “Doctor, I am so lonely.” This moment was powerful and touching. In fact, it changed the trajectory of Dr. Thomas’ career forever. When he went home that evening he opened his medical books to look up loneliness. Did he find the answer to that term? As you may suspect, he did not. In fact, the term did not appear anywhere in his medical books.

Inspired by this moment with Rose, Dr. Thomas developed a culture change model known as the Eden Alternative. The premise of the Eden Alternative is that it is better to live in a garden than in an institution. Dr. Thomas “diagnosed” institutionalized elders’ true problems not as high blood pressure or diabetes, but rather as loneliness, boredom and helplessness. In fact, he and the Eden Alternative call these the three *plagues* of institutionalization. Yes, plague is a powerful term, but it just shows how strongly these three factors impact our elders. Have you seen the impact of loneliness, boredom and helplessness? I certainly have, and I’m guessing you have as well. An epidemic is another way to describe these problems. And what do we do when there is an epidemic? *Everything possible* to solve it and stop the spread!

Don’t discount the impact of these three factors. Instead, take action. We all need to do something—and we can. Physicians have an important role to play. They have a great deal of power. The power to prescribe, order, recommend, suggest or discontinue treatments when they’re not working for a person.

Dr. Thomas and the Eden Alternative go on to identify what I call the “prescription” for the plagues as an elder-centered community with close and continuing contact with plants, animals and children. Going back to how physicians can help brings me to another fascinating story. When I was a surveyor, or inspector, I was conducting a survey in an assisted living in Colorado in the late 90s. I ran across a physician order which stated, “Mike must have his dog with him wherever he lives.” Now that is a physician order that *works for* a person and not against them. Wouldn’t it be something if we saw more physician orders like that? This is how physicians can impact quality of life in a way that can then positively affect health; is this “order” truly working *for* a person or actually against the person?

Here are a few “what ifs” to consider.

What if physicians addressed loneliness? What if they thought through meaningful remedies to help cure it?

What if physicians prescribed time with animals? Time with children? Time with living plants and gardens if that brings joy to a person?

What if physicians inquired about a person's favorite music and helped find a way for that person to listen to it?

What if physicians brought up the health benefits of going outside for fresh air, sunshine and Vitamin D? What if they recommended getting outdoors as much as possible?

What if physicians suggested real food that people enjoy such as smoothies, malts and shakes instead of pricey, artificial supplements that often go unconsumed and waste money?

What if physicians asked about a person's quality of sleep? Very little compares to the value of sleep for our health.

What if physicians promote real life for people, not fake life? Meaning and purpose. Purposeful living, real life before medication. Real animals instead of robotic. Real babies and children instead of baby dolls.

Think about these questions. I think they all lead us back to the fact that we could use the leadership of physicians now more than ever. It's time to go back to the basics. If physicians inquire about these non-pharmacological, meaningful, real life approaches, they are bound to happen more.

Al Power, MD, an Eden Educator and Eden board member, has been reminding us that adults decide what they want to drink, not physicians. Adults choose what to drink without calling their physician first. He reminds us that alcohol is not a medical treatment for which a physician can grant or deny use of. Near beer and mocktails end up mocking the adulthood of those living in long-term care communities.

I'll end with one more true story. After a week of enjoying the youth who came for a day camp at Shalom Park in Parker, CO, a nursing home resident named Mia stated, "The children brought my happiness back. I am no longer depressed. I stopped my medication today!" You don't hear that about antidepressants, now do you?

Physicians, join the movement, consider the power you have and how are you using it. You can inspire and support the culture change that many long-term care settings need.

Wyoming Culture Change Coalition

As of January 2019, a coalition representing the ideas of culture change and the desire to spread them throughout the state of Wyoming has begun.

Free Culture Change Education

Join us every month for FREE culture change education the fourth Friday of each month from 2:00–3:00 PM. This opportunity will provide 30 minutes of cutting-edge education, open lines for questions, answers sharing ideas as well as providing updates regarding the Wyoming Culture Change Coalition at <https://www.mpqhf.org/QIO/wccc-home-page/>.

Save the dates: Mar. 22, Apr. 26, May 24, June 28 and July 26, 2019, from 2:00–3:00 PM



To learn more about the Wyoming Culture Change Coalition, to receive coalition emails or to get involved and help create change that focuses on people living the way they want to live, contact Carmen Bowman at carmen@edu-catering.com or at (303) 981-7228.

About Mountain-Pacific—Mountain-Pacific Quality Health is a 501(c)(3) nonprofit corporation and holds federal and state contracts that allow them to oversee the quality of care for Medicare and Medicaid members. Mountain-Pacific works within its region (Montana, Wyoming, Alaska, Hawaii and the U.S. Pacific Territories of Guam and American Samoa and the Commonwealth of the Northern Mariana Islands) to help improve the delivery of health care and the systems that provide it. Mountain-Pacific's goal is to increase access to high-quality health care that is affordable, safe and of value to the patients they serve. www.mpqhf.org

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