

# The PEAK Experience: Characteristics of Culture Change Exemplars in Kansas Nursing Homes

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## ABSTRACT

This poster describes the efforts of PEAK (Promoting Excellent Alternatives in Kansas Nursing Homes), a statewide, multi-disciplinary effort in Kansas now in its fourth year of promoting culture change in nursing homes. This effort is seen as multidisciplinary as it is a collaborative effort between state regulators, providers, advocacy groups and academics. The Kansas Department on Aging has recognized twenty-six nursing home innovators in providing new models of care that support resident and staff quality of life. In addition to this recognition process, the Center on Aging at Kansas State University has been contracted to provide educational materials for nursing home administrators using these exemplars, research and process information so that innovations for care can be further disseminated. The poster will present an analysis of characteristics of PEAK winners including ownership, continuing care retirement community versus free-standing nursing home, geographic location and other factors. In the latest phase of the competition/education development, the Center on Aging will be collaborating with Kansas Foundation for Medical Care (KFMC). The methodology to collect current and retrospective (prior to culture change) data from the PEAK winners will also be presented. This information will include organizational factors such as retention, turnover, complaints, survey performance, occupancy rates and employee satisfaction; resident outcomes such as depression, pressure ulcers, use of pain medications, unplanned weight loss, etc.; as well as qualitative information about how the organization managed the process of change.

## Objectives:

Participants will learn characteristics of nursing homes that are more likely to be innovators in models of care.

Participants will be informed about methods associated with the process of changing the culture in a nursing home

Participants will be provided with tools, designed by the Kansas PEAK collaborative effort, to measure culture change and its outcomes.

## Background:

PEAK (Promoting Excellent Alternatives in Kansas Nursing Homes) is an initiative created by the Kansas Department on Aging (KDOA) to recognize innovations that may lead to improved quality of life in Kansas nursing homes. Over the past four years 26 nursing homes have been awarded, some homes more than once.

These innovations are widely recognized as a part of "culture change," a movement to transform long-term care to improve the quality of life for residents and staff. Criteria for qualification cover areas of resident-centered care which promotes autonomy and control for residents; empowerment for staff; meaning more decisions are made at the level closest to the residents; physical environment and community involvement.

Nursing homes have self-nominated, filling out application and assessment forms. These applications are then screened and site visits are conducted. Winning homes have been featured by KDOA and by local media sources.

The Center on Aging at Kansas State University has been providing education to help to disseminate these innovative practices throughout the state. Part of that education is to use PEAK winning homes as examples of change. Through this effort various forms of data have been collected.

## Methodology:

Characteristics of winning nursing homes will supply information about the dissemination of these innovations. Staff from the Center on Aging has used nursing home self-reported data as well as information from Nursing Home Compare (CMS website, [www.medicare.gov/NHCompare](http://www.medicare.gov/NHCompare)) to analyze these characteristics.

## Summary:

Analysis of PEAK winning nursing home characteristics predicts that culture change may occur first in states within large, non-profit, independent ownership, continuing care retirement communities. As these innovations in care are disseminated the philosophy is adopted by small stand-alone homes that may be part of for-profit or non-profit chain ownership. Geographically, new ideas may start in one core area and ripple out to farther regions of the state.

Length of tenure for key leaders in the organization is an important factor in the ability to adopt culture change. PEAK winners outperform other nursing homes in Kansas in the areas of survey performance and direct care staffing ratios. This evidence is corroborated by a report written for KDOA by Bill McDaniel (2005) analyzing the likelihood of PEAK winners to outperform non-PEAK winners on the Medicaid reimbursement incentive program. Judging from the difficulty in gathering these relatively simple statistics there is little standardization of data within the nursing home profession and little understanding of how to use this information.

McDaniel, B. (2005). *Kansas case study: Culture change and the nursing facility quality and efficiency outcomes incentive factor*. Retrieved 11 October from the Kansas Department on Aging Web site: <http://www.kdoha.com/peak/peakreport/peakreport050608.pdf>

## Geographic Distribution:

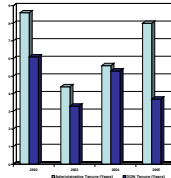
Most of the PEAK winning homes cluster in two distinct geographic regions. Historically, these areas have been where we have seen the highest number of exemplary homes.

It may also be an indication that homes in the area see the positive outcomes related to recognition for winners and then choose to enter the contest themselves leading to further dissemination of the philosophy of culture change.



## Leadership Attributes:

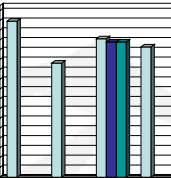
Members of the PEAK advisory council have long espoused that long-term commitment to the organization is essential to the process of culture change. Empirical evidence is lacking but speculation within the nursing home profession in Kansas is that the average tenure is about eighteen months for nursing home leadership. Our data would support that leadership within PEAK homes has stayed with the organization for longer than the state and national averages for leadership tenure.



## Direct Care Staff Attributes:

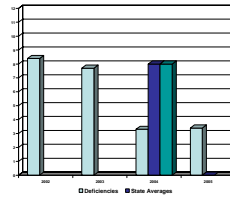
In 2004, PEAK winning homes had comparable staff ratios to state or national averages as demonstrated by the number of minutes per resident by direct care staff.

Data for all winners and state and national averages is reported for 2004.



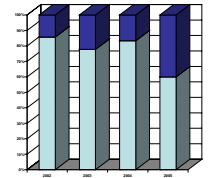
## Survey Attributes

There may be some relationship to the role modeling that occurs in pockets around the state. As can be seen in the map to the left and the chart to the right winners have been relatively close to one another and these facilities are also demonstrating strong survey outcomes. Innovations tend to come from organizations that are already seen as exemplary. It would not be fair to say that PEAK winners improved in survey performance based on their adoption of culture change but our data clearly demonstrates that PEAK award winners outperform other nursing homes in the survey process. In 2004, winners awarded PEAK recognition had lower than state and national average deficiencies for every year except 2001 winners.



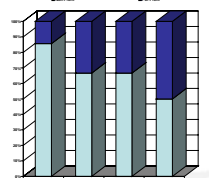
## Ownership Attributes

**Non-profit vs. for-profit nursing homes:** Non-profit nursing homes are sometimes assumed to be more focused on quality of life and/or have more resources to commit to innovation. Based on trend analysis over the four years that this award has been presented this observation might appear to be true. However, it is clear that "culture change" is moving into the for-profit arena and qualitative data would seem to confirm that the focus for quality of life is not necessarily ownership status but an emphasis on mission.



## Independent Owner vs. Chain Operation:

Early PEAK innovators in Kansas were primarily stand-alone, non-members of chain organizations. This trend seems to be changing as more nursing home chains recognize the value of innovation to their organization.



## Stand Alone Nursing Home vs. those with Assisted Living vs. those within a CCRC

Most of the nursing homes that were applying for and winning PEAK awards were initially part of a larger organization including either assisted living or were part of a continuing care retirement community. Initially, many organizations may have felt that they lacked the resources to commit to wholesale changes. Residents in independent living and assisted living provide financial income that can support these innovations in health care. As the philosophy behind culture change continues to disseminate smaller nursing homes are seeing that innovation is possible without additional income.

