

## Night Care Role Play

### Goal

To contrast the delivery of culture change idea implementation

### Description

- Ask for volunteers to participate in a role play.
- Encourage volunteers to be as natural as possible.
- Assign roles to each volunteer and offer them a large sign that identifies their role.
- Follow the script.

### Discussion

Role play helps dramatize the ways in which conversation, attitudes and real life can play into the understanding and implementation of any process.

We are learning not only what it is like when people are asked to change systems but also the complexity of these changes. Additionally, we want to demonstrate what is effective and what is not effective in gaining trust and buy-in.

**Time needed: 60 minutes**

## How Not to Introduce the Idea of Changing the Way Care is Given at Night

### At the monthly nurses meeting

**Director of Nursing:**

I just went to a conference on skin care and heard about these new incontinence products that let residents sleep through the night. That got me thinking about how we wake people up every two hours and how this is not how we sleep at home. I am going to change the way we do our night care. Instead of turning every two hours, we will let them sleep until they wake up and check them every hour. And if they want to get up, we will get them up. I will leave a memo in the night shift book telling them what we are going to do. What do you all think about this?

**Day Nurse:**

Well, I have real concerns about this. We already find people wet in the mornings when we come on. Now this will just give nightshift an excuse for not changing them.

**New Graduate Nurse:**

Where is the evidence to back up this change? We learned in school the importance of turning every two hours. Won't we have more bedsores?

**Night Nurse** (under her breath to the relief night nurse sitting next to her):

You have got to be kidding me! Is she nuts? We barely have time to finish our rounds now. Where do they get these ideas? Not from anyone actually doing the work!

**Relief night nurse** (quietly to night nurse):

Nobody really understands what we go through each night. They never include us in the planning. We just won't do it.

**Medical Supply Person:**

I believe these items cost more than what we are currently using. How will the increased cost be covered?

**Night Nurse** (to the DON):

Well, we have trouble getting enough linen at night as it is. And where will we get these new fangled diapers and what happens if we run out? I won't be responsible if my patients get bedsores. It is in your hands.

**Administrator:**

This is the first I have heard of this. I have some concerns about cost, how the change will be perceived by the families, and what the surveyors will say. I think we better not try this at this time.

**Director of Nursing:**

(To the group)

Fine then.

(To herself) I try so hard to implement person-directed care and I get no support. They are all so stuck in the past! I have done my part.

# How to Introduce the Concept of Improving Sleep and Comfort at Night

## At a monthly Nurses Meeting

### Director of Nursing:

Recently I attended a workshop on wound care and one new thing that was introduced was the idea of using the new heavy-duty incontinence briefs as one way to allow residents to sleep longer without being disturbed. Since our facility has made the commitment to create more person-directed care, I started wondering how we could improve residents' sleep. I would like to have a discussion about that now and ask for volunteers to work on improving sleep and reevaluating night care. I have also brought some articles and information that supports the idea that many residents do not need to be turned every two hours in the way we have been doing it for so many years. Helen the supervising nurse at night and I have talked briefly before this meeting, but we wanted to bring this idea to the whole group to discuss. What are your first thoughts and concerns about this?

### Day Nurse:

I have some concerns. We find people wet in the morning already. Will this make it worse?

### Night Nurse (Helen):

I am sorry if you are still finding people wet in the mornings and feel like we need to be doing a better job. I would be glad to problem solve with you more after this meeting. I think that is a different issue from the one we are now discussing.

### New Graduate Nurse:

Is there evidence to back up this new approach? I am fearful of skin breakdown.

### Director of Nursing:

That is an excellent question and legitimate concern. I felt the same way when I first thought about this. However, after doing some reading and talking to others that have made these changes, I've learned there is significant evidence that shows when people are individually assessed and changes in care evaluated routinely, there have been no skin problems and people get a better night sleep. Here is the folder of materials that the QIO folks shared with me. I'd like you to look it over and tell me what you think.

### Relief Night Nurse:

Well, I don't know how we can help them sleep better. Helen, we do a good job keeping them turned and dry.

### Night nurse:

Yes, you do a very good job of that. But since the director of nursing and I talked, I have been thinking about how what we do is so much different from how I sleep at home, except when my kids are home and do wake me up every two hours! I'm pretty grumpy when that happens. I think all of us who work nights can identify with that. What I would like to do is to begin having learning circles at night to discuss this with the staff and to get their opinions and concerns and then to create a plan for change that makes sense to people. The director of nursing is going to come in to the first couple of meetings to answer any questions and get feedback from all the night shift.

### Night Nursing Assistant:

That is good because as nursing assistant, particularly on nights, we feel that people are always making decisions about our work without asking us. I was glad when the DON invited me to come to this meeting.

**Director of Nursing:**

I have also asked the administrator and medical supply person to be here to answer any other questions you might have.

**Day Nurse:**

What about the smell? What about cost for these briefs? Who will pay for them? Families are already complaining about the cost of briefs. Won't families think we are neglecting people if we allow them to sleep when they are wet?

**Medical Supply Person:**

I have been researching some of the overnight briefs to find the best product at the best price. The superabsorbent better products wick away the moisture and neutralize the pH of the urine so there is less bacteria, odor or skin problems. I do believe these items cost more than those what we are currently using.

**Administrator:**

You bring up a very important point, too, about families. We need to be sure to educate families about this and bring them into the discussion and planning. I don't have all the answers yet about cost and who will be bearing those costs. But, after a discussion with the DON I see where there might be cost savings in that we will be using fewer of the other briefs. Plus as other facilities reported, when residents get a better night sleep, they are easier to get along with during the day. As administrator, I am committed to making person-directed care a reality. We will need to track costs and outcomes for sure. I want to know from the night shift what resources and education they need to plan and implement changes. I want you to tell me what you need so I can support you as we move forward.

**Director of Nursing:**

One other thing I want you all to know that I am doing is being proactive with the surveyors. I will be calling the person who heads the unit that surveys us and tell them what we are planning and why. Thanks to all of you for listening. We will be looking for neighborhoods who are particularly interested in this to volunteer to begin the process on their neighborhood. So take this idea back, share it with others, and let me or the night nurse know if you are interested. I am excited about what we will accomplish together.