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Senior Capstone Project : share the love : implementing animal therapy in long-term care facilities

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Senior Capstone Project

Share the Love: Implementing Animal Therapy in Long-Term Care Facilities

Keywords:

Animal Therapy, Skilled Nursing Facility, Nursing Homes, F-248, Activity Care Plans, Benefits of Animals, Elderly, Frail.

Abstract: The implementation and coordination of an animal therapy program in a skilled nursing facility to provide social interaction as part of the socially isolated and depressed patient's care plan.

Executive Summary

This capstone project was done in conjunction with Monterey Pines Skilled Nursing Facility in Pacific Grove, California. Monterey Pines is a 99-bed facility that provides their patients with twenty-four hour physical, emotional, and psychosocial care.

All nursing facilities in the United States must adhere to regulations established by the Center for Medicare and Medicaid Service to ensure that patients are receiving the best care. One of these guidelines is “F-248” which requires facilities to provide activities that will not only address their patients’ individual interests, but their psychosocial wellbeing. This is a concern of Monterey Pines’ given that as of April 2007, forty-four percent of the residents had a diagnosis of depression and they do not offer activities which address this need.

In my research I found that animals are quite effective in behavioral health and can actually decrease the degree of depression. My capstone was developing an animal therapy program for the residents who stated they were not satisfied with the current activities provided, had expressed an interest in having animals visit them, and had a diagnosis of depression.

Once the participants were selected, I began doing recruitment of volunteers with animal therapy dogs to make visits at the facility on a regular basis. The volunteer would spend five to ten minutes with each participant and allow them to pet or hold the dog and would interact with the patient as well, often rekindling conversations they had on previous visits.

When I evaluated the patients’ satisfaction with the program, I found that 80% were now satisfied with the activities provided for them. This was a significant change given that my baseline showed only 40% were satisfied. Given the results, I believe that my program addressed the needs of Monterey Pines and their residents in that it provided an individualized psychosocial activity to meet CMS F-248 regulations, greatly improved resident activity satisfaction, and provided invaluable social interaction.

Agency Description

Monterey Pines was established in Pacific Grove as a long-term 24-hour skilled nursing facility. They provide the residents with round-the-clock care and seek to support them on physical, emotional, and psycho-social levels. They accomplish this by having a qualified staff of nurses at the facility as well as having doctors, dentists, optometrists, psychiatrists, physical/occupational/speech therapists coming in to the facility on a daily basis. (J. Miller, Personal Communication, November 10, 2006) These professionals work together with the administrative staff, the social worker, and the activity staff to ensure that every resident is receiving quality care. (Horizon West Health Care, Inc., 2006) They are "...committed to providing compassionate, respectful care and service to the residents and their families." (Horizon West Health Care, Inc., 2006)

Monterey Pines also remains the only long-term care facility on the Monterey Peninsula to have not changed ownership in over two decades. (K. Spake, Personal Communication, November 10, 2006) Their mission is to "excel in delighting our customers through our employee excellence, relationship building and financial progress." (K. Spake, Personal Communication, September 29, 2006)

The population at the facility is varying, but is generally between 83 and 100 individuals. It is predominantly made up of senior citizens (65-104); but there are a few patients under 40, including one 22 year old. Their ethnic backgrounds are very diverse and range from Caucasian, Hispanic, African American, and Asian.

Issue to be Addressed

Nursing homes are mandated by guidelines established through the U.S. Department of Health & Human Services: Centers for Medicare & Medicaid Services, or CMS, to provide residents with quality services. Years ago, CMS was only concerned about the quality of care of the residents. They wanted to ensure that each resident in a nursing facility had the best doctors, nurses, and treatments available. However, as the years have gone by, CMS has begun to realize that the standards for quality of care are just as important as ensuring the residents have the best quality of life (M. Seamon, Personal Communication, November 2, 2006).

In fact, CMS specifically outlines that nursing facilities must meet specific criteria to ensure that they are providing for their patients' quality of life. One of these guidelines is known as "F248," what states that activities are an integral part of a resident's quality of life (American Institute for Research, 2006). F248 is a regulatory outcome which states that the facility must "...involve the resident in an ongoing program of activities that is designed to appeal to his or her interests and to enhance the resident's highest practicable level of physical, mental and psychosocial well-being" (American Institute for Research, 2006).

Psychosocial issues are certainly not a new concern in nursing facilities. It is well documented that there is a high rate of residents in nursing facilities who are suffering from depression (American Geriatrics Society, n.d.). Many residents become depressed as the result of "the combined impacts of loneliness from losses of family members and friends, the need to adapt to deteriorating physical capacities, and the lack of treatment and diagnosis of depression in older persons," (Stickle, F. & Onedera, J., 2006) other issues also include loss of freedom and privacy. It has been estimated that the "...rate of depressive symptoms among elderly in institutionalized settings is unusually high," with the average long-term facility ranging between "13 and 30%." (Stoil, M., 2003) According to the diagnosis roster at Monterey Pines, as of April

2007, forty-four percent of the residents are seeing a psychiatrist for a diagnosis of depression. These alarming numbers are the highest rates Monterey Pines has seen to date. (J. Miller, Personal Communication, November 2, 2006)

Monterey Pines currently has few activities available that address both psychosocial issues, such as depression, and the residents' individual interest. Aware that their current programming seems a little too "one size fits all," the staff is working hard to create new activities and programs which will address this alarming area of concern.

Project Description

My capstone project was to develop a program that would not only address the individual interests of a group of residents, but would address their psychosocial issue of depression. In my research, I discovered that animals are quite effective in therapeutic roles and can actually help decrease depression in nursing facilities. This can be seen through the following examples: "Pets provide social interaction. In a health care facility, people come out of their rooms to socialize with the animals and with each other." (Pawprints & Purrs Inc., 2006) Implementing a pet therapy program would also provide the residents with "...a source of expectation, hope and communication. Looking forward...[to the animals coming] ...gives that spark of anticipation all humans need to help feel alive." (Pawprints & Purrs Inc., 2006)

One empirical study published by the Gerontological Society of America was at first quite skeptical of animal-therapy's affect with long-term care patients. However, their results in fact showed that the participants had "...significantly reduced loneliness scores in comparison with the no [animal therapy] group." (Banks, M. & Banks, W., 2002) The study also noted that the participants who got the most out of the program had "...a strong life-history of emotional intimacy with pets and wished that they currently had a pet." (Banks, M. & Banks, W., 2002)

Program Description

I began the program by obtaining a roster of the patients who had a diagnosis of depression and/or were socially isolated, as requested by Monterey Pines. From there, I interviewed the patients to identify their interests and conducted an “Activities Satisfaction Survey.” The patients were asked if they felt that the current activities being provided for them reflected their interests, and if they were enjoying them. They were also asked what they would like to see included in their care plan. Of the patients that I interviewed, ten informed me that enjoyed animals and were asked to participate in my program.

The results of the survey showed that of these ten patients, forty percent stated that they enjoyed the activities that were currently being provided for them; ten percent answered “somewhat,” and fifty percent felt that the current activities were not enjoyable to them.

When asked, “Do the current activities being provided to you reflect your interest?” Twenty percent answered “yes,” sixty percent answered “somewhat,” and twenty percent answered “no.” This data helped form a baseline for comparison to ensure the patients satisfaction with the animal therapy, and it was in fact addressing their individual interests.

Once the participants were selected, I began doing recruitment of volunteers with animal therapy dogs to make visits at the facility on a regular basis. I attempted to collaborate with local organizations such as the SPCA, but found that placing an ad on the web resource, “craigslist” was most effective. At the end of a two month recruitment and orientation period, I began the program with six volunteers that were asked to come into the facility twice a month to visit with my ten program participants. The volunteer would spend five to ten minutes with each participant and allow them to pet or hold the dog and would interact with the patient as well, often rekindling conversations they had on previous visits.

Throughout the program, I would often shadow the volunteers and observe the interaction between the patients, the dogs, and the volunteers. The visual response was astonishing. Patients whom I had never seen so much as lift their heads were sitting up in their beds, inviting the dog to join them in bed, and their faces were lit up with an enormous smile. As the weeks went on, I was often approached by their nurses and other staff who would mention to me how much their patient enjoys having the animals come to visit them and how much they would talk about their favorite ones. In my studies, I have found that this is not uncommon among animal therapy participants. “Observational studies suggest that introducing pets into the ...lives of patients in a geriatric ward brings about significant positive social and psychological consequences.” (Siegel, J. n.d.)

Evaluation & Conclusions

After a four month period, I evaluated my program by re-interviewing my participants to see if their level of satisfaction had changed, as well to ensure that the animal therapy program was addressing their interests.

When asked, “Do you enjoy the activities that are being provided for you?” eighty percent answered “yes,” and twenty percent answered “no.” This is significant considering during the baseline evaluation, forty percent had answered “yes,” ten percent had answered “somewhat,” and fifty percent had answered, “no.”

When asked, “Does participating in the animal therapy program address your interests?” ninety percent answered “yes,” and ten percent answered “no.” These results are also significant considering the baseline evaluation showed that when the residents were asked if their current activity care plan addressed their interests, twenty percent answered “yes,” sixty percent answered “somewhat,” and another twenty percent answered “no.”

I also took the opportunity to ask the patient to explain to me what they liked best about the animal therapy program. One patient explained, “I love having the dogs come visit me! I always look forward to seeing them and getting dog kisses from Harpo!” Another told me, “When the people come with their dogs it livens up the place.” One other patient shared with me, “I had dogs growing up; I’ve always loved them. It’s nice have them around here.”

Following the interviews, I compiled a list of the most commonly mentioned reasons why the patients enjoyed the program. The most frequent reason was “interaction,” such as having the animal and the volunteer come in and visit; followed by “the feel of the animal;” then “increased happiness,” and finally, “less boredom.”

The one patient that stated the program did not address their needs and interests explained to me that while they like dogs, they prefer cats and would have enjoyed the program if a cat had come in to visit them instead. This information was passed on to the activities staff at Monterey Pines for a possible addition to the animal therapy program in the future.

Given the results, I believe that my program addressed the needs of Monterey Pines and their residents in that it provided an individualized psychosocial activity to meet CMS F-248 regulations, greatly improved resident activity satisfaction, and provided invaluable social interaction.

Application to MLOs & the CSUMB Vision Statement

My capstone relates to the CSUMB vision statement as I developed it address the needs of the diverse population of Californians (CSUMB, 1994). The project also involves the “... assessment of results and outcomes,” (CSUMB, 1994).

My capstone relates most to the MLO’s of “Leadership,” “Collaboration,” “Personal and Professional Communication” (CHHS, 2006). Throughout the project I was in a leadership role

as I coordinated the program and oriented the volunteers to the facility, their policies, and the residents. Once I had volunteers established, I experimented with various recruitment measures, networked with my volunteers via phone, mail, and e-mail, scheduled time slots for them to come in to the facility, and kept a monthly schedule of the volunteers.

I worked collaboratively with the staff, residents and the volunteers to meet a common goal and in turn gave Monterey Pines an entire resource of volunteers to continue the program for years to come. I addressed “personal and professional communication,” as I recognized the needs of the diverse patients of Monterey Pines and developed a program to support their needs.

Recommendations

After much reflection, I would like to recommend that in the future, an intern or Monterey Pines staff member, takes on a more in depth evaluation of the animal therapy program to see how effective animal therapy is as an anti-depressant. I would also like to suggest that as the animal therapy program continues at Monterey Pines, that the staff works with the volunteers to coordinate games and activities with the residents such as playing fetch with the animal in the activity room. I feel that this would be beneficial to the residents given that they currently stay in their beds most of the day and they have expressed that they look forward to the animals coming in. If there was a large group activity with the animal, it would possible encourage the residents to come out of their rooms and interact with the animals and the other residents.

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