The Eden Alternative: Reinventing Long Term Care

EDEN ALTERNATIVE

HOST:
Susan Dolan.

SUSAN DOLAN:
He is dedicated to eliminating the plaques of loneliness, helplessness, and boredom that exist in many of today’s long-term care facilities. You are listening to ReachMD XM157, the channel for medical professionals. Welcome to the clinicians roundtable. I am Susan Dolan, your host and with me today is Dr. William H. Thomas. Dr. Thomas is an international authority on geriatric medicine and elder care and founder of the Eden Alternative and the Greenhouse. Dr. Thomas, welcome to the clinicians roundtable.
Dr. THOMAS:

Well, thank you for having me.

SUSAN DOLAN:

Tell us about the Eden Alternative.

Dr. THOMAS:

I started my career in the emergency room medicine and thought I had really found my place and after a few years of practicing in the emergency room, I took a part-time job working in a nursing home, sort of little thing on the side, and I just fell in love with it, fell in love with geriatrics, fell in love with long-term care, but the big problem that I could see out there was that even if you get great medical care and you are really attending to people’s diagnoses and their medications and treatment, patients were still suffering and dying of really loneliness, helplessness, and boredom. So we came up with a new philosophy for long-term care that we call The Eden Alternative.

SUSAN DOLAN:

Where did the name come from?

Dr. THOMAS:

Well, it is sort of like, if you look at a nursing home, you see the life that is directed towards an institution and we thought to ourselves, you know, what makes things grow? Where do people thrive, and we started thinking about gardens, and then about the garden at Eden and we said, you know, should a nursing home be more like a garden or more like a hospital and really our view is nursing home should be much more like gardens and much less like hospitals, so we call what we do – The Eden Alternative.

SUSAN DOLAN:

When was it founded?
Dr. THOMAS:

In 1992 and actually with my wife and I, we did some initial preliminary research under a grant from the New York State Department of Health and then published that research and immediately actually set about doing a replication project, which took another couple of years and by 1997, we had 2 successful studies and we are ready to really start teaching people around the country how to Edenize long-term care.

SUSAN DOLAN:

How many Eden Alternative Homes exist in the United States?

Dr. THOMAS:

300, we have a registry. We have started a non-profit organization and we have a registry at edenalt.org, where we have maintained a registry of homes that are practicing this philosophy.

SUSAN DOLAN:

How is an Edenized home different from a traditional nursing home?

Dr. THOMAS:

We cannot say that the Eden Alternative gives a nursing home a heart transplant. We really try to change the focus away from tasks, which is really the primary focus in nearly all institutions and move the focus towards people. We really advocate persons and/or person-directed care where the elders, kind of take their place at the center of the organization, so the result of that is you find that people change the environment. They add dogs and cats and birds and plants and children and you can see that physically, but organizationally you can see people changing how they treat one another and how they think about elders and the work that they do for elders.

SUSAN DOLAN:
Is it expensive to transition?

**Dr. THOMAS:**

No, actually it is interesting, we have had a number of studies we have done over the years that point out that the Eden Alternative is a cost neutral approach, and I guess what we find is that it takes actually much more change in your heart than change in your pocket. It is really about rethinking how you do long-term care, what is important, what the priorities are, and then supporting those priorities.

**SUSAN DOLAN:**

How are Eden Alternative staff trained?

**Dr. THOMAS:**

Our mantra on this is really the 3 most important things are – education, education, and education. We think that people in long-term care want to do the right thing, that they are good people, that they are trapped in a system, that often feels that it is institutionalizes staff as much as elders, so we focus on in-house staff training done by the organization itself to kind of help people do the kind of work they feel that long-term care led them to do and not worry so much about the institutional part of it.

**SUSAN DOLAN:**

One of the stereotypes of a nursing home is that it is poorly staffed and the staff members are poorly paid. How does Eden address that?

**Dr. THOMAS:**

A couple of things, I mean, I think if you look at the numbers nationally, you would find that if you crunch the numbers and look at the hours that are sort of what the staff are on duty, that is not necessarily the problem. Often, usually, nursing homes do have the people there to do the job. Here’s the problem:

1. There is too much staff turnover. So even though you have a got a nurse aide on the third floor, that
nurse aide has only been here a short period of time, does not know the people, does not know the work, does not have relationships, and therefore her or his work is less effective.

2. The second thing is too often nursing homes operate in such a way that people leave the best parts of them at home. Now the staff members leave the best parts of who they are outside the door and Eden really encourages people to bring their whole selves to work because we think that, that is important for relationships and it is important for quality care.

SUSAN DOLAN:

If you are just joining us, you are listening to the clinician’s roundtable on ReachMD XM157, the channel for medical professionals. I am Susan Dolan, your host and joining me is Dr. Thomas discussing the Eden Alternative.

SUSAN DOLAN:

Dr. Thomas, what feedback have you received from residents and families?

Dr. THOMAS:

Gratitude, you know when you are a physician, you have actually wonderful work being a doc because you actually get to feel people’s gratitude very often in your work and that is something that you know and you can make the right decision, start the right medication, call for the right test, and people are always grateful for getting good care. What was unexpected to me and what was new for me was feeling gratitude for people because I could help make a change in our healthcare system. You know that as a doctor, I could step up and advocate for changes in how nursing homes are operated, how they are managed, how they are organized, and that could make a big difference in my patient’s lives and in fact, the great thing about the Eden Alternative is that, I mean, it has influence, it is far greater than what I could ever have had as a practicing doc in one city; you know, we have been able to have influence in the lives of really many tens or thousands of people and that feels really good.

SUSAN DOLAN:

What feedback have you received from practicing physicians?
Dr. THOMAS:

Well, I think, follow the 80-20 rule, 80% of physicians kind of practicing in long-term care, who encounter the Eden Alternative are pretty enthusiastic supporters because actually doctors want things that are good for their patients; you know, I mean if it is good for your patient, you will back it up; I mean, I think most doctors ascribe to that. A smaller group have been sort of let just say more focused on their medical aspects of their work and less focused on quality of life and you know some physicians sortof feel the quality of life isn’t their responsibility, but it really belongs to other professionals, but I think most doctors actually understand that well being is an important part of good medical care and most doctors really back it up.

SUSAN DOLAN:

Is there a limit to the number of residents that can reside in an Eden Home?

Dr. THOMAS:

No, actually we have worked with a home in New York City. It is over 500 beds; we have worked with several homes over 400 beds. Actually the largest home we ever worked with, with Eden was in Halifax, Nova Scotia and that has 600-bed facility and they have done a great job up there over the years with Eden.

SUSAN DOLAN:

How many Eden Alternative Homes exist outside of the United States?

Dr. THOMAS:

I would say about a 150. Interesting, Eden has grown very rapidly outside of the US, especially in European and Scandinavia, but also in Australia, New Zealand, and now it is really starting to take off in Japan as well; so what we find is even though different countries have different healthcare systems, the needs of elders, who are instutionalized are remarkably similar, they are remarkably consistent regardless of what language you speak or what color your skin is.
SUSAN DOLAN:

What statistics are we looking at in terms of nursing home populations in the future?

Dr. THOMAS:

It is interesting, my views on that are a little different than some people. Some people call for large increases in the number of nursing homes or the nursing home residents in the future. I actually don’t think that is going to happen. I believe if you look at recent history, you find that the number of nursing homes in America has been going down, and I think it is going to continue going down, and I think Americans are really looking at and really working hard at developing non-institutional alternatives to long-term care.

SUSAN DOLAN:

What other non-institutional alternatives do you foresee happening?

Dr. THOMAS:

Well, I am a big fan of community-based Adult Day Services; for example, for even a person living with dementia or person with real some significant health needs can go to a Day Service Center and have a good day, good socialization, good support medically, and then come home and be home at night and the family can support that and the elders can support that and I would like that model a lot. I also see more and more people getting interested in community-oriented living options like co-housing where older people are starting to say, “Hey, You know what matters most is the community that I am a part of, that community is going to add a lot to the quality of my life in my later years.” So we are seeing a lot of movement toward intentional community as a strategy for coping with old age.

SUSAN DOLAN:

Tell us about Eden At Home.
Dr. THOMAS:

That is one of my most funny things we are working on right now. We spent years as I mentioned working on long-term care, working on issues related to long-term care in nursing homes and we realized one day, “Hey, wait a minute, where does most long-term care take place? - in this home. Who is most long-term care provided by? – family members.” We worked with AARP in the State of Arkansas to develop a statewide pilot project where we taught the lessons we had learnt in long-term care to family caregivers and helped them think about “How do you make Eden at home, how do you make a home where older person is living more like a garden and less like a nursing home?” and it has turned out to be really positive.

SUSAN DOLAN:

And is that throughout the United States now?

Dr. THOMAS:

Actually, not yet. The thing I can really report on is the successful statewide pilot project in Arkansas, and I think the next step is really to take that nationwide.

SUSAN DOLAN:

How can listeners learn more about the Eden Alternative and Eden At Home?

Dr. THOMAS:

Online the best thing to do is to go to edenalt.org, great resources there, and I had offered 2 books I have written for people, who are interested. One is a book called “What Are Old People For” and that book is really designed to kinda of ask questions about aging in our society and how we make sense of aging, and the other book I wrote is a novel, actually it is a love story called “In The Arms Of Elders” and it really approaches kind of questions related to aging and society from the point of view of fiction. I sort of, I think people kind of know what they find most congenial to them whether it is a fiction or non-fiction, but it is really What Are Old People For and In The Arms Of Elders are the 2 books I would
recommend.

SUSAN DOLAN:
Dr. Thomas, thank you so much for joining us to discuss the Eden Alternative.

Dr. THOMAS:
Really you are very welcome.

SUSAN DOLAN:
I am Susan Dolan and you have been listening to the clinicians roundtable on ReachMD XM157, the channel for medical professionals. For COMMENTS AND (commencing) questions, send your e-mail to XM@ReachMD.com. Thank you for listening.