



“THAT’S MY JOB” PROGRAM

by Jerry Rhoads, CPA, FACHCA

The typical nursing home patient is 85, frail, and wedded to a wheelchair most of the day. As a former nursing home administrator, I learned that the derrière cannot stand more than an hour of sitting without becoming a weapon ... either used against the patient or the chair.

Every one of us needs to be occupied to be healthier. Residing in a nursing home is, in itself, degrading because it puts you in a group setting whether you want it or not. So, to be busy doing anything is necessary for a chance at a quality of life. All of us have had jobs in our former lives ... why stop as we age?

We developed jobs for the higher functioning patients, which included:

- Opening mail
- Delivering mail
- Checking doors at night
- Folding linens
- Sorting socks
- Making objects for sale
- Running the popcorn machine
- Working in gift shop
- Peeling potatoes
- Setting tables
- Transporting (not lifting) patients to activities
- Conducting classes on common illnesses
- Conducting current events classes

We complied with the regulatory requirement that we pay the residents (\$1 or so per hour). The residents then had money to spend at the facility functions, beauty shop, gift shop, and country store. All of these programs qualified for scoring in the case mix system as psycho-social interventions.

Then, when asked, “What are you doing?” the residents could respond, like we all do, “That’s my job.”

If the goal at your facility is active and improved patient functioning, consider instituting a “That’s My Job” program. As a result, your staff will be able to supervise something productive, rather than wheel patients around to the TV set or the nursing station to fend for themselves.