



From Advocate to a Positive Approach™ Provider:

Kathleen Douglas' Journey

by Beth A. D. Nolan

In 2003, Kathleen Douglas was working as an Ombudsman for people living with dementia. She was seeking resources for a more person-centered approach. Through the [National Consumer Voice for Quality Long-Term Care \(formerly NCCNHR\)](#), she was introduced to Teepa Snow before Teepa had formed Positive Approach™ to Care (PAC). At the NCCNHR national conference, Teepa was the keynote speaker, and Kathleen felt Teepa's approach was a natural fit for, as Kathleen described it, "an advocacy culture." A culture of advocacy was, in the changing funding arrangements for long-term care of the time, one in which those working with older adults continuously supported the rights, independence, or quality of care for those living with dementia. Soon after seeing Teepa speak, Kathleen bought every publication and DVD she could find to learn Teepa's techniques.

In 2013, Kathleen took a job as the Personal Care Home Administrator at [Integrace Copper Ridge](#), in Sykesville, MD, because Integrace was adopting the Positive Approach™. This meant that Integrace had engaged PAC Mentors to train and coach Integrace staff on how to approach, connect, and engage their residents regardless of their brain change. At Integrace, she had the opportunity to work with Teepa and her PAC Mentors, who helped Kathleen learn and develop hands-on skills.

In 2014, she was offered a position as the dementia specialist at a startup community with [Sage Senior Living](#), based out of Springfield, PA. Using the knowledge and skills gained through her partnership with Positive Approach™, she helped design and open an assisted living building with a secure dementia unit. Dalesford Crossing in Paoli, PA used the Positive Approach™ mindset from the beginning, making it the cornerstone of their culture. I spoke with Kathleen to discuss her journey; from being introduced to Teepa's person-centered approach, discovering her need to gain more information, developing her own skill, and finally building a community that encompassed her vision.

Where do you feel like you are in this journey of your career?

"I feel like I am really an advocate for people with dementia, in that they deserve the same quality of life as those without dementia—the same recognition for their accomplishments that every other person deserves. And the GEMS™ really fits an advocacy mindset because it focuses on everything that people have—the ability to accomplish, despite any deficits that they may have. It focuses on the positives and all the things that [they have that] are still able to be appreciated. It's all about that every person has meaning, no matter what their level of functioning is in the moment."

How did you find that bridge from ombudsman/advocate to provider?

“See, the challenge in elder care, since it’s a business, is to provide the most cost effective care possible, and also to have a high level of customer satisfaction. So, going from an advocate to a provider, I think the reason that it is so different is because the Positive Approach™ to Care is a relationship-based program; it’s not a financially-based program on paper. The difference is that you have to take that leap of faith, to understand that if you can develop a relationship-based program in your building, that people will want to come; they will want to be a part of that program. Their satisfaction goes up and they want to be a part of it. The profit is a side effect of the relationship-based program. But you have to get out of a business-based mindset and see that on paper, ...it looks like it costs a lot more, but it’s actually more costly to have people not cared for because their staffing levels are too low, or all they do is a task-oriented culture- you get up..., eat..., get changed..., sleep...--and you keep turning residents over. So like in Connections (*program at Sage Senior Living*), the program is full. It took me 8 weeks to fill it. And we didn’t do any outside advertising—it was all word of mouth. So that’s how unique a relationship-based program is and it just shows that people are willing to pay money for quality of life, not quality of care, per se—that should be standard. But for a quality, engaged life. To watch somebody come alive, essentially, I’m not saying we cure anybody, but to see level of functioning in somebody improve, is like people will pay for that until the cows come home.”

“The other thing that is so detrimental to elder care is staff turnover. If you run a Positive Approach™ culture, where we’re actually building on the compassion and care that people actually get into this business for, they stay. They don’t call off. They eat lunch with the residents. They become a part of the family in the program. So, we never have a problem with consistent staffing.”

What would be your biggest take-away for someone who just found the Positive Approach™ philosophy and they are taking on a community?

“It can be a really lonely journey because Positive Approach™ is so different and you have to change your viewpoint from a business model as a provider to a relationship-based model, and it really takes courage and faith to trust the process. You have to accept that fact that, as a sapphire, you are going to trip, you’re going to make mistakes, and it doesn’t mean you scrap everything and go backwards. You just build on moving forward, stay in the confines of [Teepa’s] coaching model. That coaching model has completely changed my life. When I say the Positive Approach™ has changed my life, it really has changed my life—not just my personal life, but how I supervise people, how I appreciate different things from my staff. [For example] Everybody’s personality is as valuable as the next person. So, I think that as a provider, the light goes off. That was the answer the whole time: you’re meeting everybody’s needs – you’re meeting the staffs’ needs, you’re meeting the family’s needs, you’re meeting the resident’s needs. I did 12 tours and every single one moved in.”

Why do you think that happened?

“Because, when I do a tour, I don’t just bring them in and hand them the brochure and just take them around and show them the carpet. I actually sit them down and offer coffee, introduce myself and then I ask them, ‘so tell me, how did you get here?’ I learn their story. And then I ask them, ‘what are you most concerned about?’ and ‘what are the things you’re seeing with your loved one?’ I start the relationship from that point; the minute they walk through the door. Then when I do the tour, I can say, ‘so you were telling me that your dad wanders; so let me explain why the neighborhood is designed this way.’ Maybe your dad is constantly touching things, so I’ll bring them to the GEMS™ poster and tell them, ‘so this is how we assess people each day in their functioning.’ Positive Approach™ is a part of our tour process and the relationship building process from the minute they walk in the door. It’s because I know and I believe so much in this process that it’s not a sales pitch for me. It’s who I am. It’s catered toward the needs of that particular person. The Positive Approach™ gives them that.”