



Implementation Tips For Directors of Nursing

For Operational Success and Sustainment



**NADONA/LTC
National Conference**

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX



The key to maximizing
MUSIC & MEMORY
is having iPods
easily accessible for 24/7 use
by staff closest to the residents.



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX





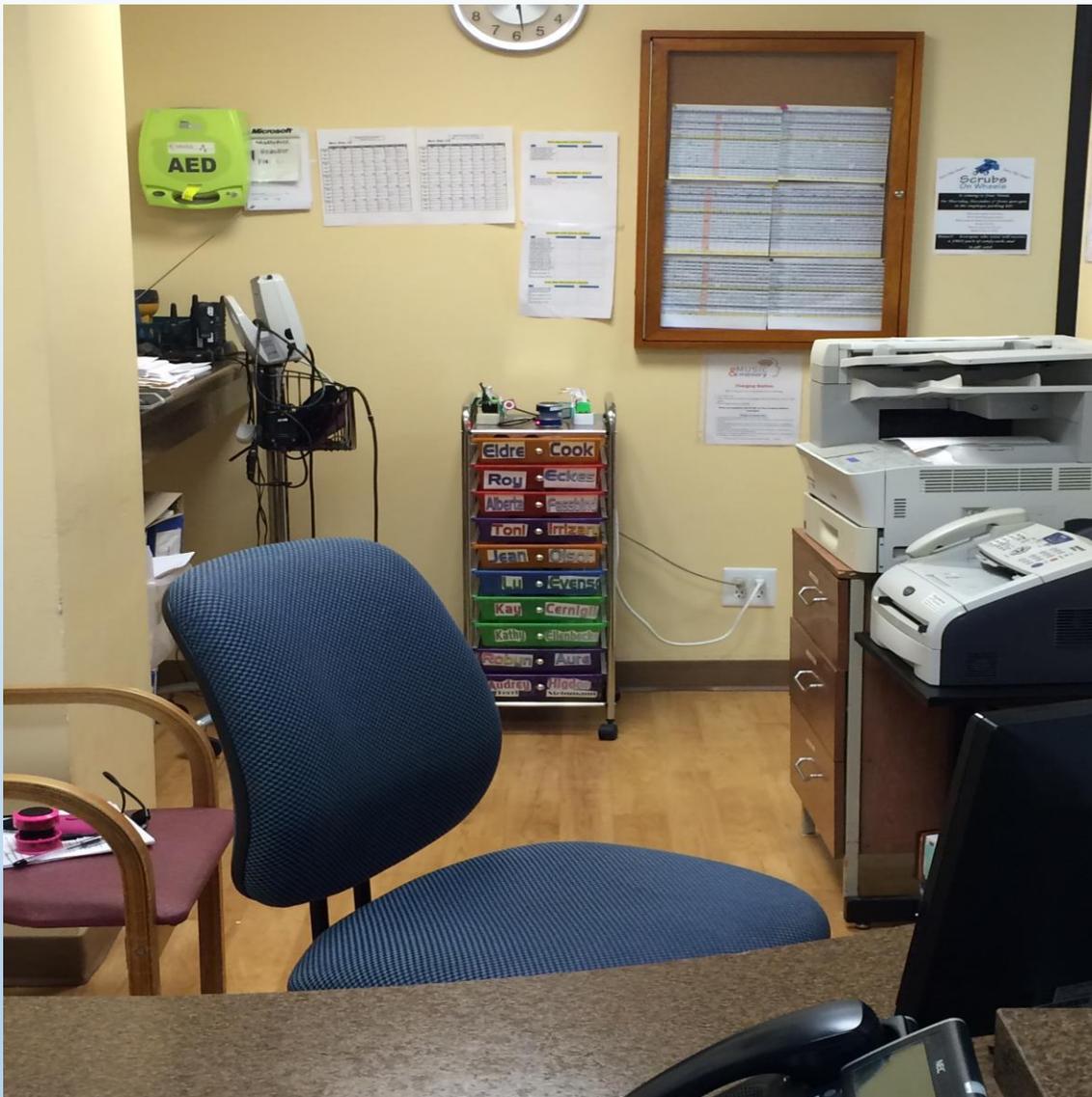
A to-go bag for the
iPod to be on the
wheelchair



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX





Storage and charging station for all iPods convenient, secure, and accessible 24/7 at the nurses' station



**NADONA/LTC
National Conference**

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX



BEFORE YOU START

Put everything in place to facilitate easy use
prior to initiating the program,
so staff can focus solely on
figuring out the best use for each resident.



Key Steps in Prep:

1. Strong Support from Leadership

- Administrator on Board
- DoN and Director of Activities co-lead
- Support from Memory Care Unit Manager
- All Departments contribute
- All Clinicians think about therapeutic uses

2. A Team Effort

- Involve CNAs and nurses in figuring out storage, charging, security, and documentation
- Watch the certification webinars



Key Steps in Prep:

3. iPods easily accessible around the clock

- Easy accessibility is crucial to success.
- Keep the iPods, speakers, headphones, and chargers where staff can get to them immediately.
- Storage options include a bag on the back of a resident's chair, in residents' rooms, at the nurses' station, and in a cabinet in the common room.
- For security, code them for identification and keep a log by code and name.
- Make charging iPods easy with easily accessible charging stations with multiple chargers.



Iris Cart

\$25.00

Sam's Club

Charging ports on top



NADONALTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX





Multiple chargers.
One drawer section
for each iPod with
personalized
instructions for that
resident.



**NADONA/LTC
National Conference**

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX





Portable speaker,
headphones, easy
how-to information,
and this resident's
play list and
preferred listening
times



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX





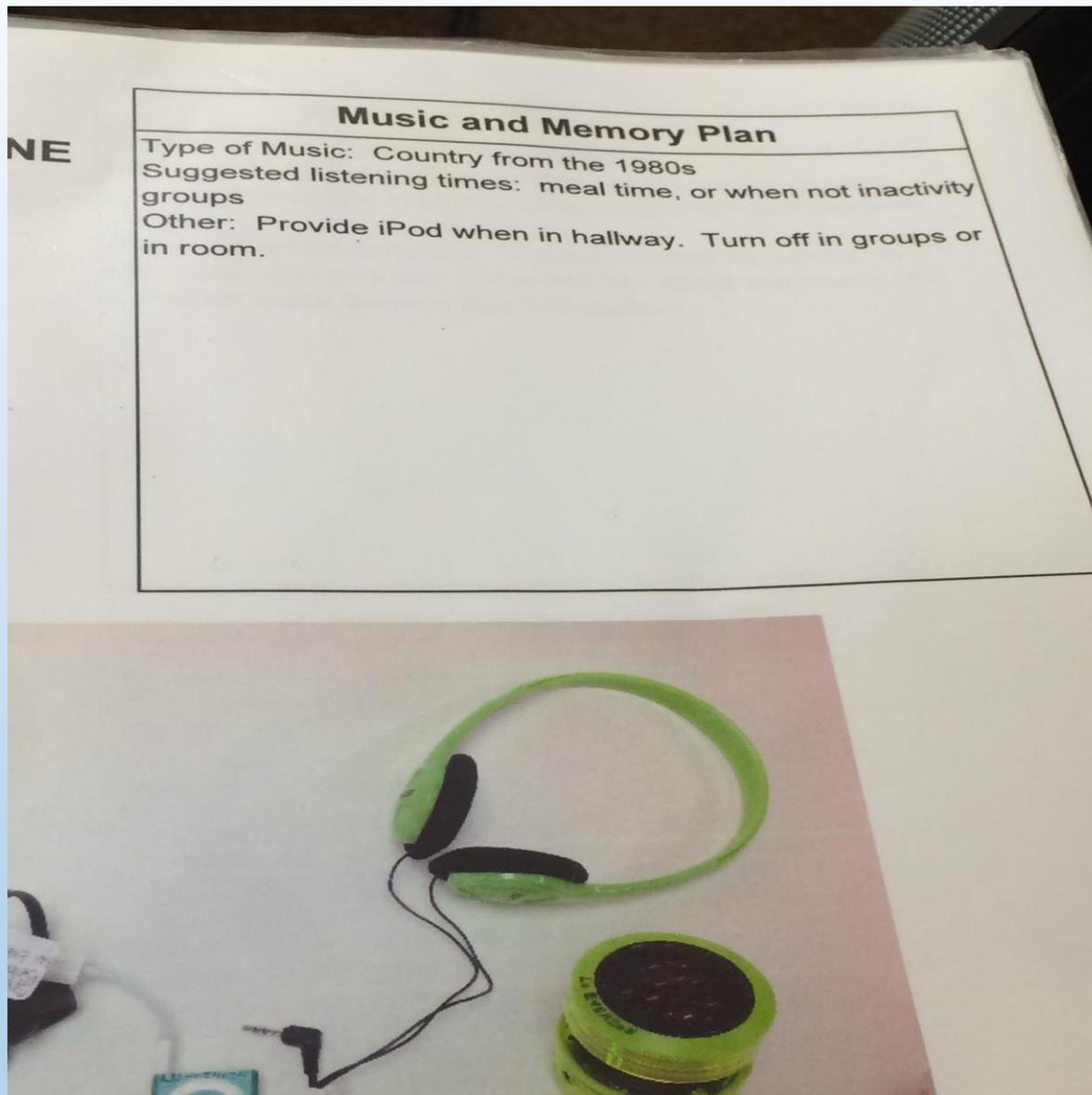
The book has a page for each person.



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX





Type of music,
suggested listening
times, other
instructions.

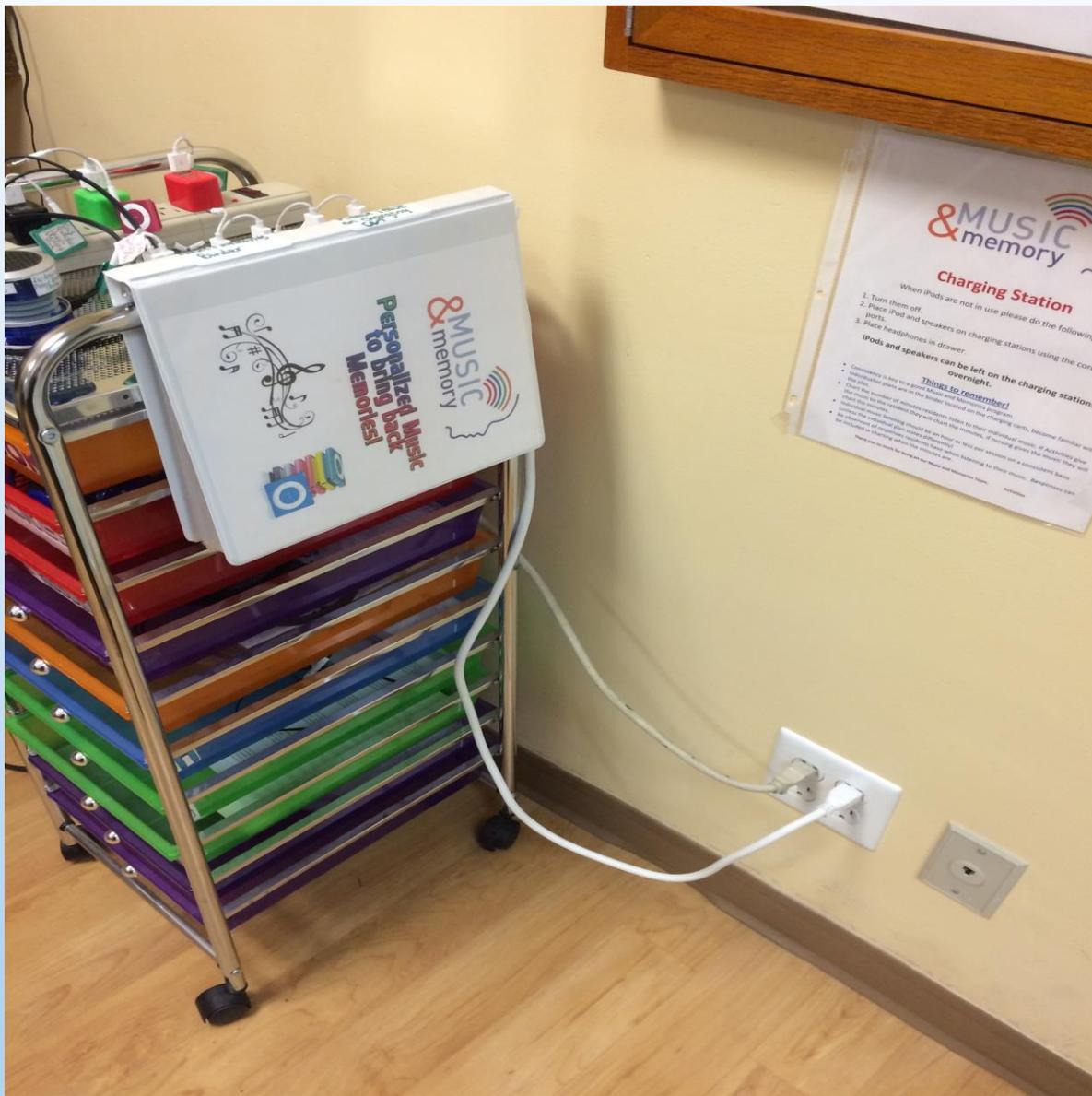
***And it's all color-
coded!***



**NADONA/LTC
National Conference**

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX





It's kept at the storage and charging cart, at the nurses' station, ***easily and always accessible.***



**NADONA/LTC
National Conference**

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX



***“Before we started,
we put everything in place...”***

- Put together care plans
- Added Music & Memory to electronic records for easy use by nursing
- Figured out where to put 3 charging stations
- Loaded all music
- Trained 40 people in the how and why

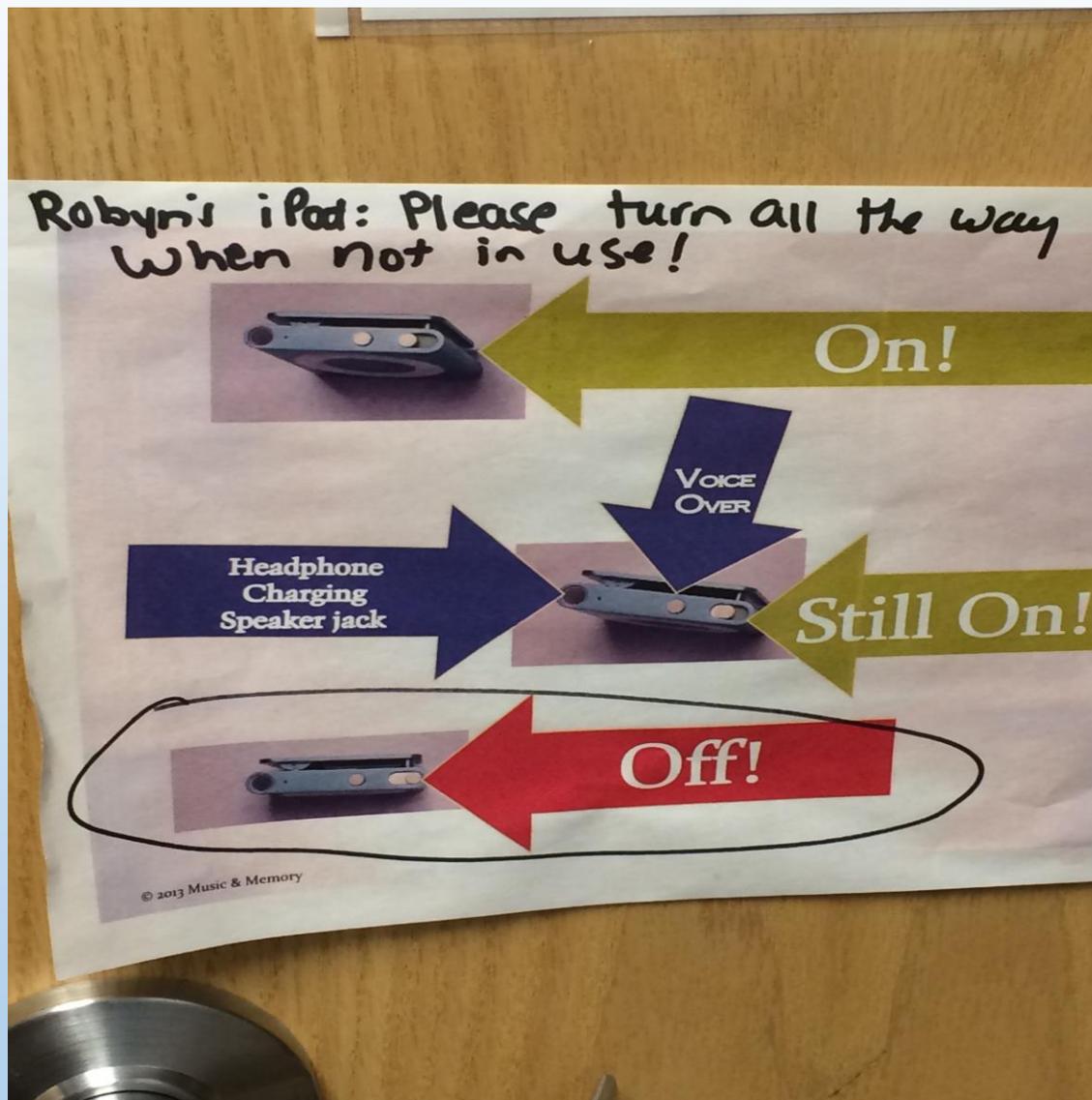


Key Steps in Prep:

4. Make technology easy

- ***dedicated laptop*** computer for Activities to maintain a library of music
- Have ***easy to follow instructions*** for how to use the iPod and how to recharge it.
- Have someone who is ***tech-comfortable***, in charge of loading and trouble-shooting





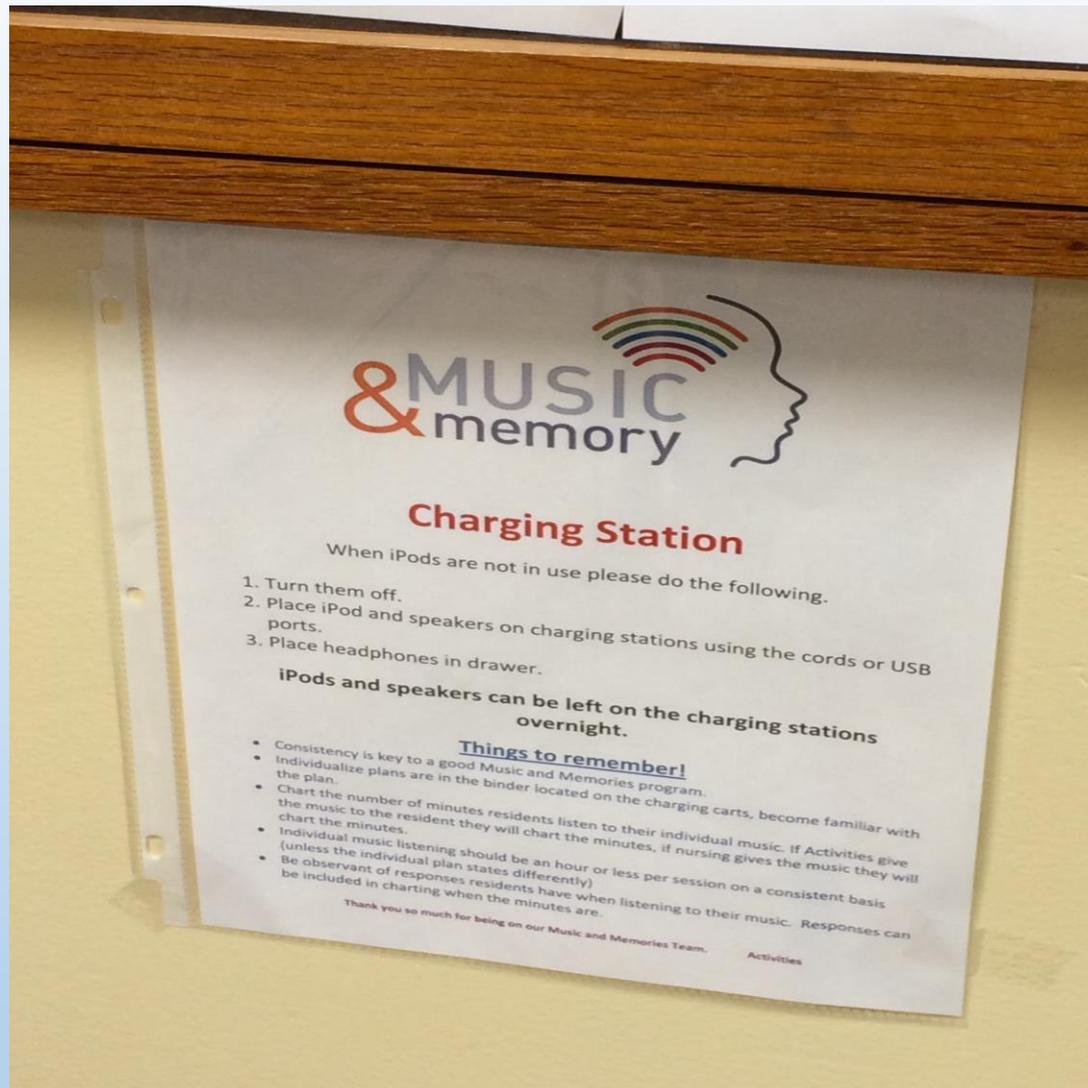
Easy to follow-
instructions with
pictures



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX





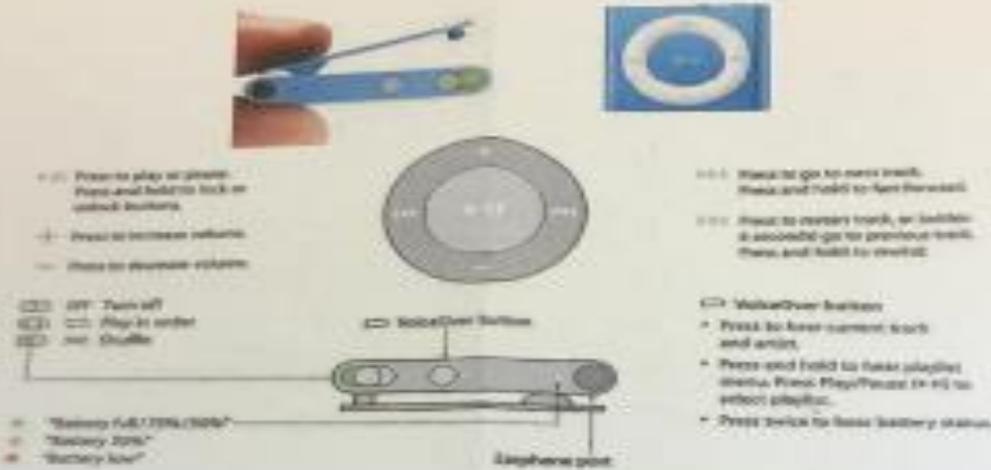
Easy to follow-
instructions right at
the charging station



**NADONA/LTC
National Conference**

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX

How to Operate the iPod



How are the iPods powered?

There is a small rechargeable battery in the unit that provides up to 12 hours of playing time. A full charge takes 4 hours. A 2-hour charge will provide an 80% charge. Units will not overcharge if they remain plugged in.

Who is responsible for the iPod and headphones?

The iPod, charger and headphones are stored inside the resident's in the unit's room. Recreation staff will make sure the iPods are loaded with personalized music, but nursing is responsible for making sure the iPods are charged and stored in the med room. All staff must sign the iPod in/out on the worksheet located with the resident's iPod. Information must include the date, name of staff member checking the iPod in/out and the time checked out or returned.

What do I need to do?

- sign iPod in/out
- put in and take off headphones
- turn the music on and off
- sanitize headphones (use purple top - Super Sani-Cloth)
- recharge the iPod battery
- let Recreation staff know if the resident is asking for new or different music.

What are the biggest challenges to residents with using the iPod?

The biggest complaint is that "it is broken." Always the problem is one of two things.

- the battery is dead and the unit needs to be recharged.
- the volume has been turned all the way down and that's why they can't hear anything. Hold the "volume up" button for two or three seconds to get the volume back to normal.

What should we watch out for?

- Occasionally the music will result in increased agitation. If that happens, stop the music immediately and inform the Recreation Therapist so that they can reassess the resident's personal music preference to determine the cause for the resident's negative reaction.
- "Hate!" Please be careful with the iPod around Squids.

What happens to the iPod when an individual leaves our facility?

The iPods are property of Ridgewood. If a resident leaves our facility for any reason, the iPod and all accessories (headphones and chargers) need to be turned to the recreation department. Please DO NOT pack them up with the resident's personal belongings.

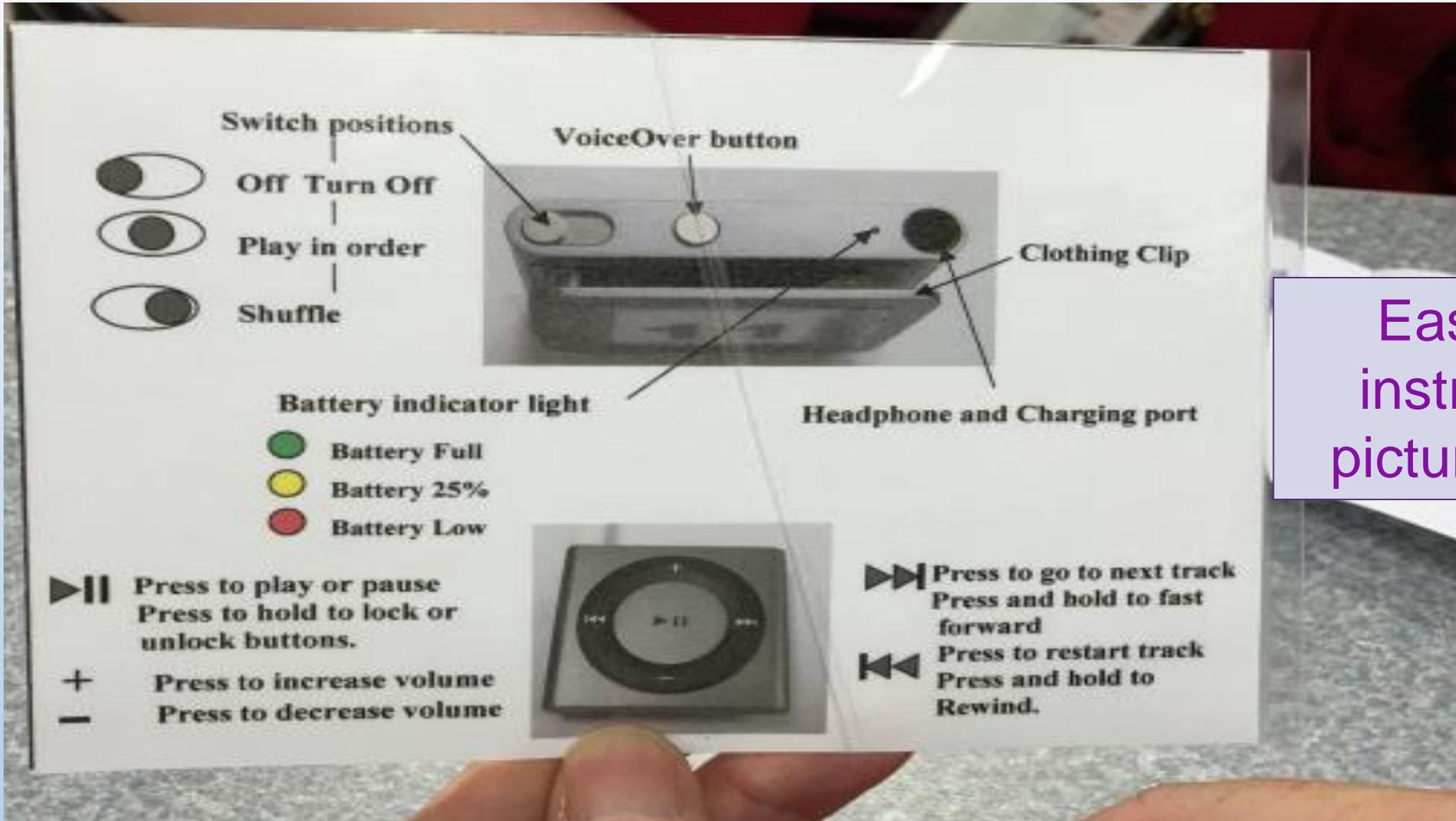
Easy to follow-
instructions with
pictures on paper in
the drawer or ziplock
with the iPod



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX





Easy to follow-
instructions with
pictures laminated

Key Steps in Prep:

5. Documentation system in place

- Add MUSIC & MEMORY to
 - CNA assignment sheets
 - MARS
 - care plan
 - electronic records



Instructions: Watch for increase agitation after med given

SIDE EFFECTS:

Per POA request: Greek yogurt twice a day AM PM first date: 06/05/2014

Entry Date: 08/05/2014

Medication monitoring: Observe for neuro delirium, and coma AND medication-spe
Every shift AM PM NOC

Nursing Care Plan describes when to use iPod for what, and what to observe.

Entry Date: 04/09/2015
unstable blood pressure, agitation, TIA or stroke. Update MD as needed.

Medication monitoring: Blood pressure, t

Entry Date: 04/09/2015



Music & Memory charting - Offer IPOD every shift when awake. Also offer when resident is having an increase in behaviors, restlessness, agitation, ect. If used for behaviors, note behaviors, and chart to effectiveness. If not effective chart to alternative interventions and effectiveness of alternative interventions. Document length of time used on shift. AM PM NOC

Entry Date: 09/29/2015

NURSING ORDER: Monitor bowel movements. Chart to consistency amount every shift AM PM NOC
(discontinued) DC'd on 11/30/2015

Entry Date: 11/04/2015

NURSING ORDER: Pulse Blood Pressure every 4 weeks AM first date: 11/26/2015

Entry Date: 11/17/2015

NURSING ORDER: Check Blood Pressure every shift AM PM NOC AM PM NOC noc BP
(discontinued) DC'd on 11/30/2015

Entry Date: 11/24/2015

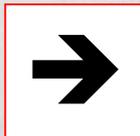
<p>Type of Music: Country, classic rock, swing Suggested listening times: When waiting for activities, as needed Other: Use headphones</p>
<p>Type of Music: Dean Martin, Elvis Presley, Hawaiian Suggested listening times: while in bed during day or when roaming the halls Other: has speakers in room, attach speakers to wheelchair, she does not care for the headphones.</p>
<p>Type of Music: old time country Suggested listening times: when fairly content and not talking to self Other: have iPod on back of shirt if possible.</p>
<p>Type of Music: Spanish Language and Cuban Suggested listening times: Meal time, when in dining room. May also listen while waiting for a meal. Other: Use headphones.</p>
<p>Type of Music: 30s music Suggested listening times: afternoon and evening Other: has own headphones and pair assigned to her, iPod is stored</p>
<p>Type of Music: Classic Country, mainly men Suggested listening times: While waiting for meals or activities, she may take Other: Use headphones</p>
<p>Type of Music: Fabulous 50s, Jazz, Pop Suggested listening times: While waiting for activities (not more than an Other: Use headphones</p>
<p>Type of Music: Hits from the 50s, 60s, Sounds of Summer Suggested listening times: when not in activity groups, not more than 60 minutes at a time Other: Use headphones</p>
<p>Type of Music: 30s, Frank Sinatra, Big Band Suggested listening times: When not in activity groups Other: Provide headphones.</p>

Each person's type of music and times for listening

Select Word(s)

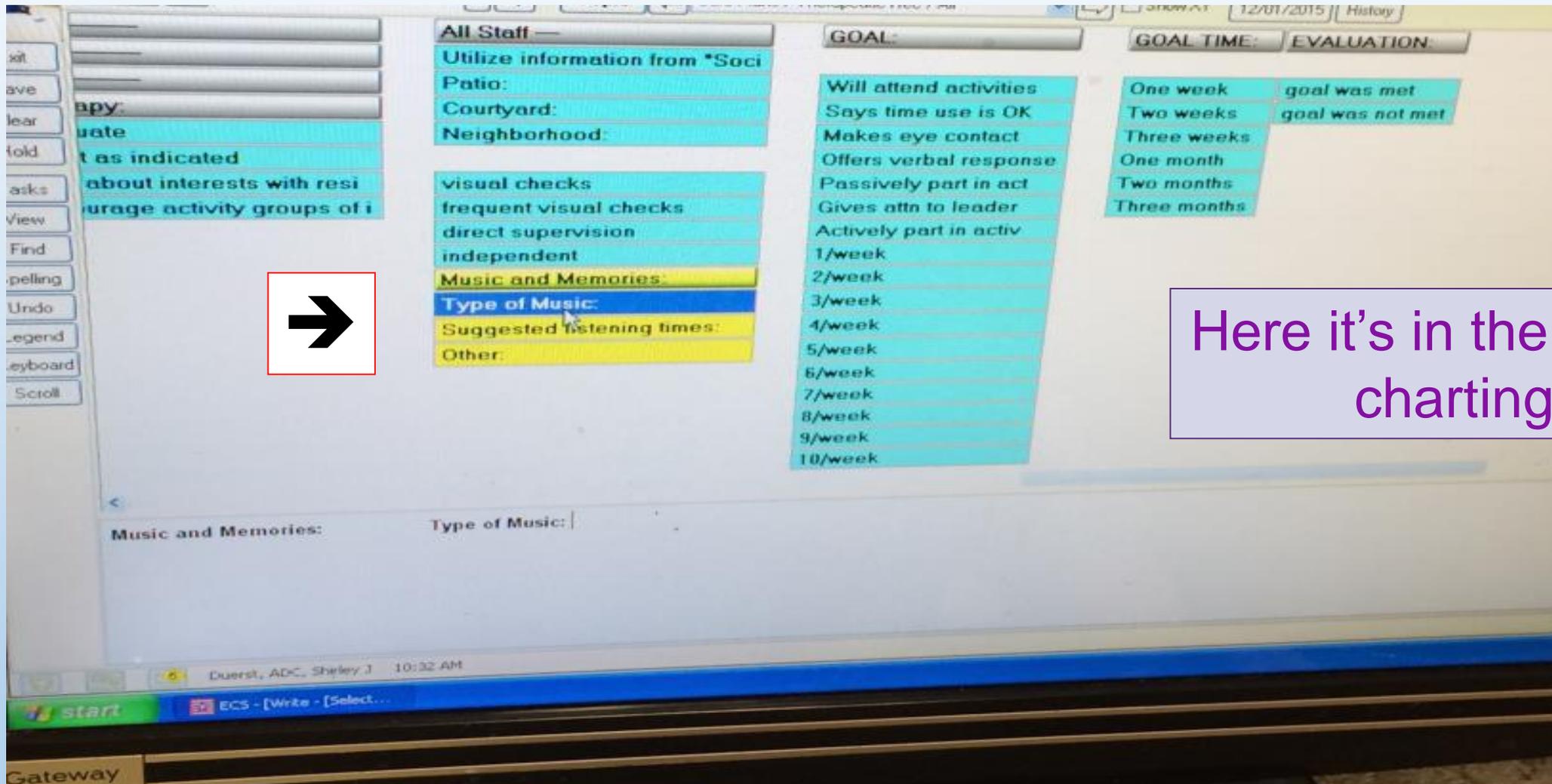
Care Plans

- Self Care Deficit
- Health Maintenance
- Neglect Post CVA
- Urine Incont.
- Urine Pattern
- Urine Retention
- Constipation
- Diarrhea
- BM Incontinence
- Bath Schedule
- Thought
- Knowledge
- Verbal
- Social Interaction
- Social Isolation
- Adjustment
- Violence
- Noncompliance
- Disruptive
- Spiritual
- Grieving
- Self Awareness
- Powerlessness
- Hopelessness
- Fear
- Anxiety
- Coping
- Therapeutic Rec**
- Sleep Pattern
- Bleeding
- Hypoglycemia
- Circulatory Output
- Perfusion
- Activity Intol.
- Comfort
- Infection
- Skin Integrity
- Tissue Impairment
- Oral Mucous
- Airway Clearance
- Breathing Pattern
- Gas Exchange
- Falls
- Guardianship
- Med Side Effects
- Swallowing
- GI Discomfort
- Decreased Nutrition
- Increased Nutrition
- Altered Diet
- Weight List
- Fluid Vol. Deficit
- Fluid Vol. Excess
- Cognition
- Beha
- Mood
- Psych

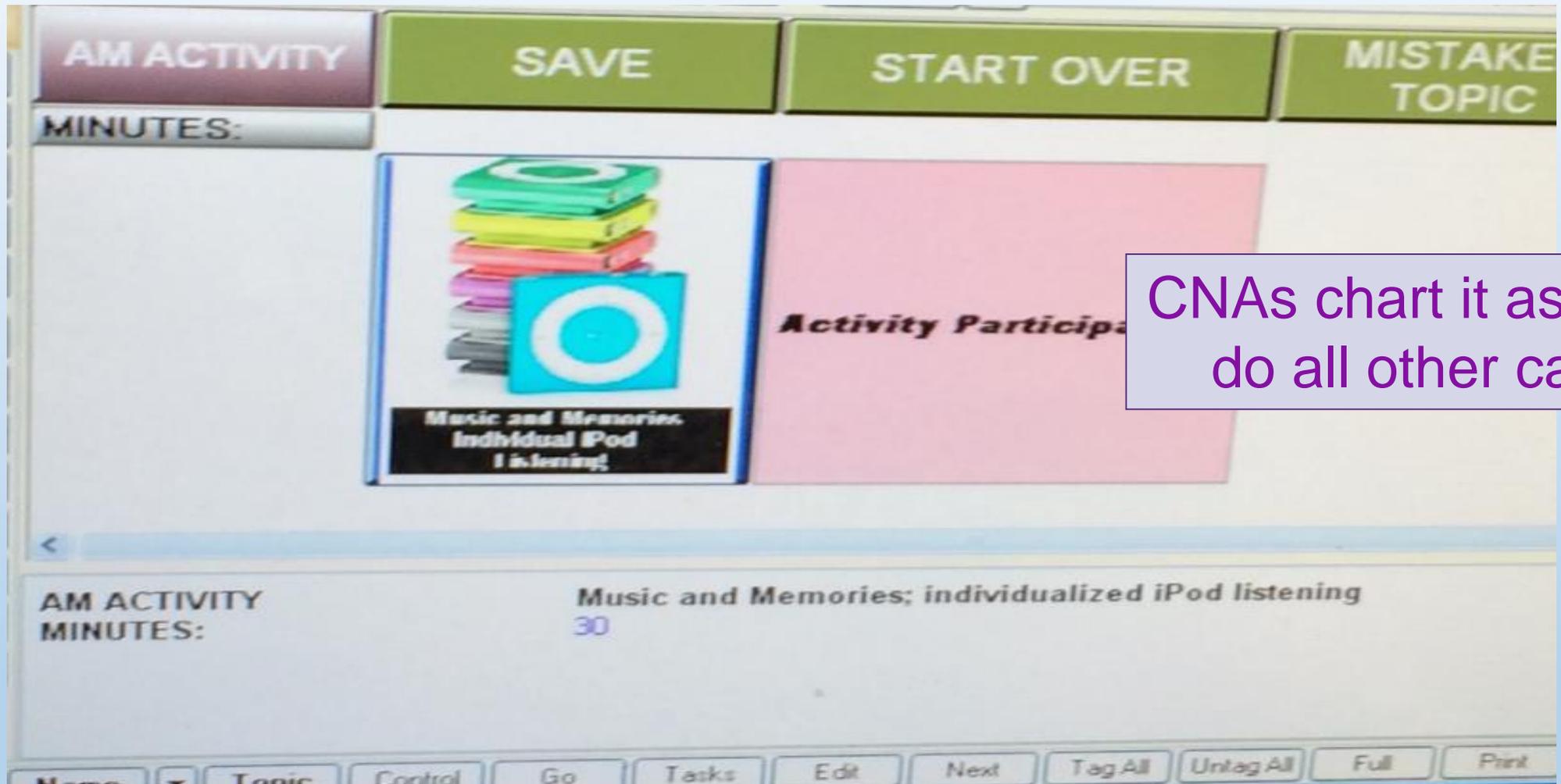


Here it's in
Therapeutic Rec care
plan

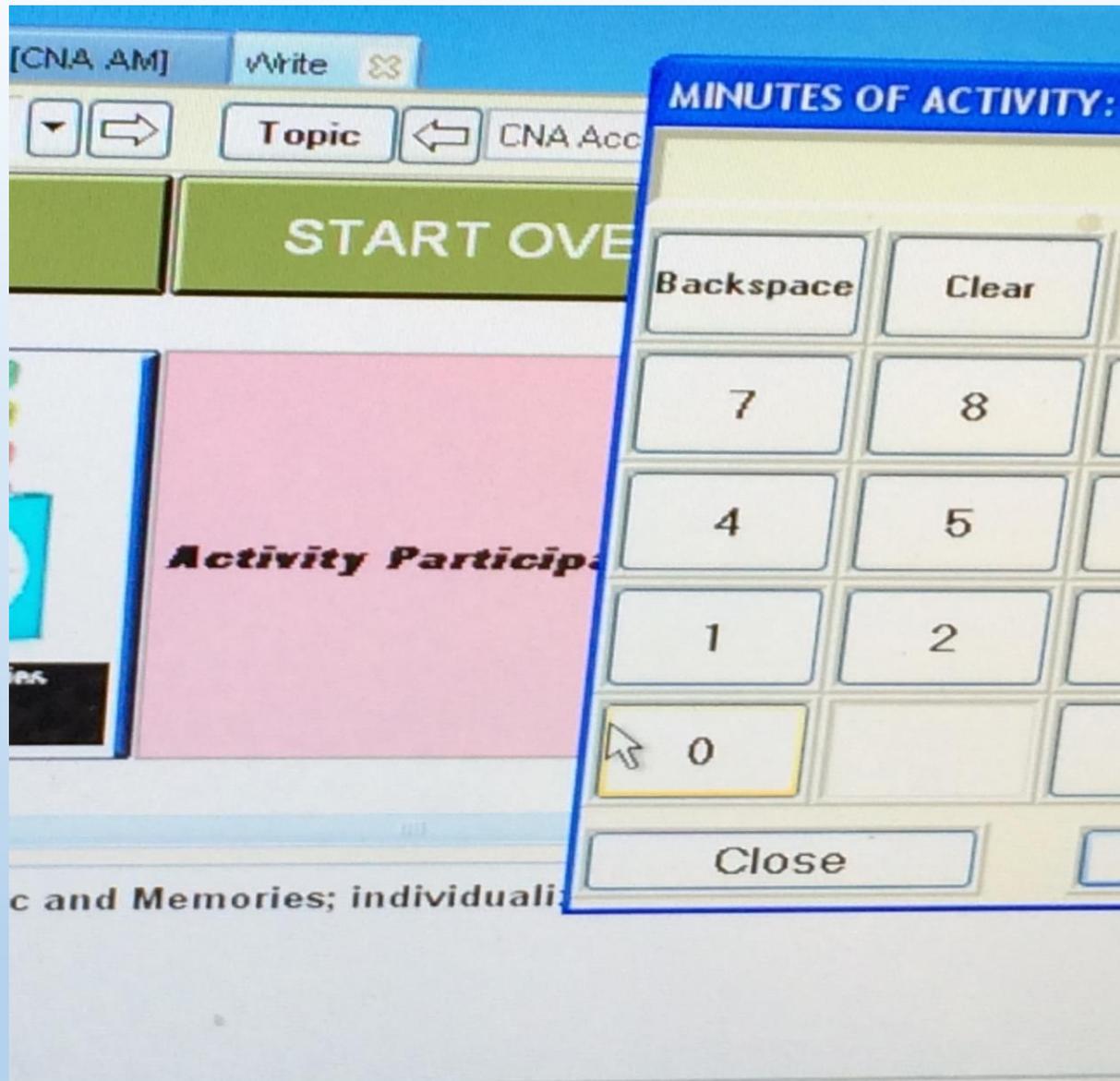
Search Clear All [icon] Cancel Multi



Here it's in the CNA's charting



CNAs chart it as they do all other care



For anyone care planned for M&M, CNAs note an amount of time used each shift.

Key Steps in Prep:

6. Staff Education

- Have **mandatory training** for all staff on the why and how of MUSIC & MEMORY.
- Talk about it in **huddles** on each shift and unit.
- Discuss it in **every department**.
- Discuss how personalized music **activates the mind**. Describe the wide potential for its **use**.
- Explain how the iPods will be stored so they are both **accessible and secure**.
- Have staff learn **hands-on** how to use iPods.



Key Steps in Prep:

6. Staff Education

We show the Henry video clip.

We explain that the music “fires up the brain” and that there are lots of ways to use it.

Then we explain the equipment and have staff handle everything so that they are comfortable.



Key Steps in Prep:

7. Do a Trial Run

- Pilot to work out the kinks.
- Pilot where you have the best chance of success – where you have a strong nurse manager and a cohesive team.
- Choose a resident who you know loves music, and is easy to put together a play list for.

Once staff see the impact on one resident, they will be eager to use iPods for others who will benefit.



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX



Key Steps in Prep:

Seeing is believing.

Some CNA's at first said that this would take too much time.

So I gathered them together.

I had one of them time me.

I put it on a resident who was starting to become anxious.

It took me under one minute to put it on him, and he immediately calmed down.



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX



**The key to sustaining
MUSIC & MEMORY
is integrating it into
your systems for daily care.**



**NADONA/LTC
National Conference**

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX



Key Steps in Sustainment:

Residents will benefit the most when:

1. Nurses and CNAs know its value and initiate use

Because the personalized music “fires up the brain,” at one home staff use the music prior to morning care, activities, and meals and find that residents are more able to follow cues, focus and engage. They use it before family visits, and now, residents are more lucid for their families.



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX



Key Steps in Sustainment:

Common concern:

How will we know when to offer the music and when residents have had enough?

Best practice:

- **Use consistent assignment.** Then staff know residents well enough to recognize residents' cues.

“Timing is everything.

Catch the anxiety before it gets out of control.

There is a fine line between when it will work and when it is already too late.”



Key Steps in Sustainment:

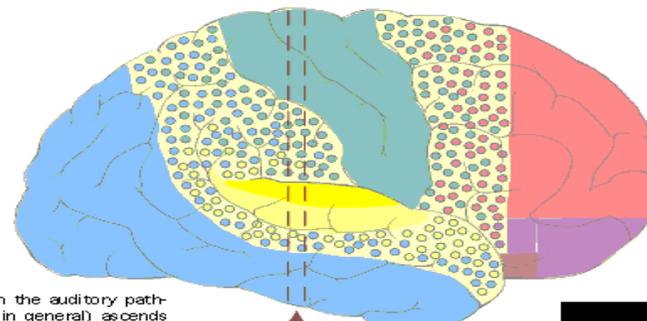
2. Have interdisciplinary team use in care planning and quality improvement

- *We formed a Committee with all departments. We involved CNA's who had been the least involved and most skeptical. Now they are the biggest advocates. They help make decisions about who and when.*
- *We talk about it at **care plan meeting**...could this resident benefit from music?*
- *We use it with all our **standing committees** –falls, safety, behaviors, weights.*



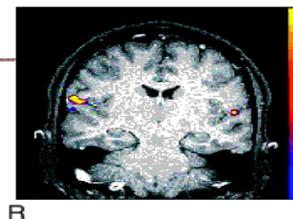
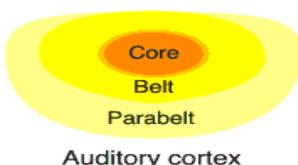
BRAIN STRUCTURES INVOLVED IN MUSIC PERCEPTION, PERFORMANCE, AND COGNITION.

The sound of music takes shape in our brains through the concerted activity of millions of neurons in the cerebral hemispheres and brainstem. These central auditory neurons are connected directly or indirectly to peripheral auditory neurons in the organ of Corti, which resides in the cochlea of the inner ear (see the illustration on the next page). The lateral surface of the right hemisphere is shown below; the colors indicate brain regions that may perform the music-related functions listed in boxes of the same color.

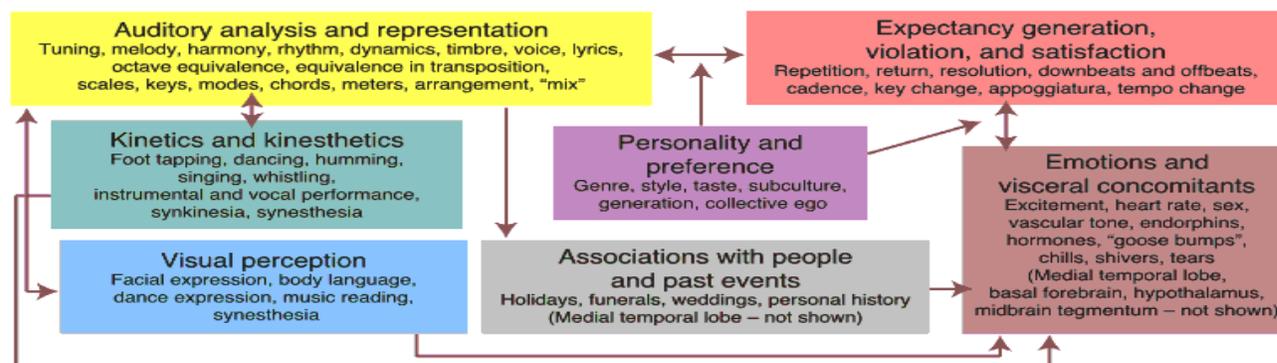


The popular notion that the right hemisphere is the "musical hemisphere" is overstated: both the left and right hemispheres are involved in music perception, performance, and cognition. Pitch perception (e.g., the ability to discern whether one note is slightly higher or lower than another) is one music-related function that does depend heavily, if not entirely, on the integrity of the right hemisphere's auditory cortex — especially its core area. This assertion holds true for most right-handers without absolute pitch ability.

The auditory cortex is the highest station in the auditory pathway. Information about music (and sound in general) ascends from the ear to the brainstem and on to the core area of auditory cortex in approximately one hundredth of a second. Music is processed hierarchically [core to belt to parabelt to multimodal areas (colored dots) and supramodal areas (pink, purple, brown, gray)]. There is also parallel processing: some information sent from the brainstem bypasses the core area and goes directly to the belt area. Strokes, tumors, and other brain lesions that destroy the core areas in both hemispheres cause transient deafness and permanent deficits in music, voice, speech, and environmental sound perception. Lesions that destroy the belt and parabelt areas in both hemispheres do not cause deafness or loss of pitch perception but do affect melody and rhythm perception.



This functional magnetic resonance image (fMRI) shows where neurons are consuming large quantities of oxygen in the cerebral hemispheres of a young volunteer who is listening to Beethoven's Seventh Symphony. "Hot spots" (yellow, red) of neuronal activation are seen in the core areas and adjacent belt areas of right (R) and left (L) auditory cortex (J.R. Melcher, Auditory Neurology Unit, Eaton-Peabody Laboratory, Massachusetts General Hospital and Massachusetts Eye & Ear Infirmary)



Emotion and meaning in music derive from several different types of associative brain functions. Songwriters and composers use a number of music-specific devices (e.g., appoggiatura, key changes, cadences) that affect our emotional state and effect changes in our autonomic state (e.g., a change in heart rate, "goose bumps"). These music-induced changes take shape via numerous connections between the auditory cortex (especially its parabelt area) and supramodal cortex (pink, purple, brown, gray). When we move to music, the motor and somatosensory cortices (green) influence our emotional and autonomic states. When we watch music videos, movies, and musical theatre, information processed by the visual cortex (blue; e.g. facial expressions, dance, scene design, lighting) also influences how music makes us feel. Another powerful route for evoking emotion is through associations with people and episodes in one's life. At some unknown level of interaction between sensory systems and supramodal systems, preference, personality, acculturation, and identification with different cultures, subcultures, and generations influence how we feel about the music we are listening to; evidence from neurological patients with neurodegenerative disease (e.g., frontotemporal dementia) suggests portions of the anterior frontal lobe (purple) may play an important role in deciding what music we like to listen to. Many of the structures that generate emotions and their visceral concomitants (brown, gray) lie towards the middle of the anterior hemispheres and upper brainstem and cannot be seen from this lateral view.

Adapted from "Music of the Hemispheres", *MU Trans, Science* 2001; Vol. 291, pp. 54-55. Copyright 2001 by The American Association for the Advancement of Science.



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX



Wide Range of Uses

- ✓ **Nutritional and Hydration Issues**
- ✓ **Agitation and Anxiety**
- ✓ **Pain Relief**
- ✓ **Rejection of Care**
- ✓ **Sleep**
- ✓ **Mood and Depression**
- ✓ **Occupational, Speech, and Physical Therapy**
- ✓ **Trips to Dialysis and Other Planned Medical Appointments**
- ✓ **Active Dying**



Key Steps in Sustainment:

3. Staff communicate about its use, verbally and in charting

- Use **trial and error** to determine the best timing.
- Share in **huddle**, report, and documentation.

We talk about the iPods during our neighborhood's weekly behavior meetings and at Care Plan meetings. We talk daily about what works for residents.

We put a musical note ♪ on the door.



Key Steps in Sustainment:

4. Staff identify residents who'll benefit and Activities responds immediately

Have a way for CNAs and nurses to let the Activities Director know when someone can benefit, and when a playlist needs to be refreshed.

A staff person asked if we could use it for a certain resident. I had a starter play list together for individualized music within an hour and a half.

We do "trials" before we make an individual iPod.



Key Steps in Sustainment:

5. Discuss during a new resident's admission

- Having personalized music can make a resident's first nights and days less stressful.
- Bring it up early so that you can get an individualized playlist together right away.
- Include information in your admissions packet, and ask residents and families about playlists.

When families can't help make the playlist, have the resident sit with you at computer while you play music you think might work. When they respond positively you know that it is music they like.



Key Steps in Sustainment:

6. On-going – Make Sure Everyone knows about it

Include it in new employee orientation.

Show the Henry clip. Explain what personalized music does for residents. Show staff where the iPods are kept, how they are charged, and how their use is documented. Have them handle the iPod so they know how it works.

Share similar information with volunteers.



For more information:

Dan Cohen

dcohen@musicandmemory.org

www.Musicandmemory.org



NADONA/LTC
National Conference

June 24-29, 2016 ★ JW Marriott Austin, Austin, TX

