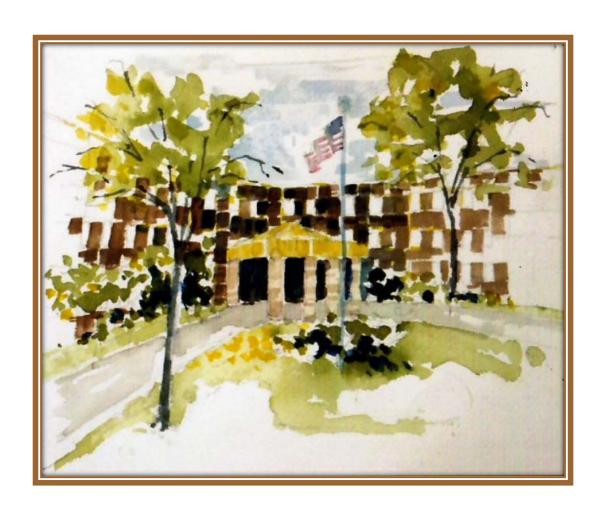
The Ups and Downs of Living in a Nursing Home: My Experiences and Observations



BY: Catherine B. Shrier

Dedicated to my children

Jan Shrier Hines

James L. Shrier, Jr.

Karen Shrier Maidlow

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INTRODUCTION

About the Author

Before entering the nursing home, I was admitted to the hospital due to edema in my left leg. I was also experiencing some confusion. I also had two falls at home. I couldn't get up! I was in the hospital for about one week.

After being released from the hospital in the fall of 2011, I was admitted to the nursing home on the rehab floor, to strengthen my legs. I was there for about a month. I was then transferred to a private room on the 2nd floor. I enjoyed the privacy (and the attention!) I received while in the private room, for about a month, when my husband was admitted to the same nursing home. Private room residents are offered physical exercises to improve body strength and conditioning.

Shortly after, I was transferred to a semi-private room on the 3rd floor. I believe, my son who has "Power of Attorney", thought it was getting too expensive to have me stay in the private room since my husband was now also a resident in the same nursing home. The nursing home residents are periodically tested by the social worker on the 3rd floor for cognitive ability and memory retention. I have scored 100% on both tests, each time I tested! Most residents on the 3rd floor are stroke victims. I was not. I have not had a stroke.

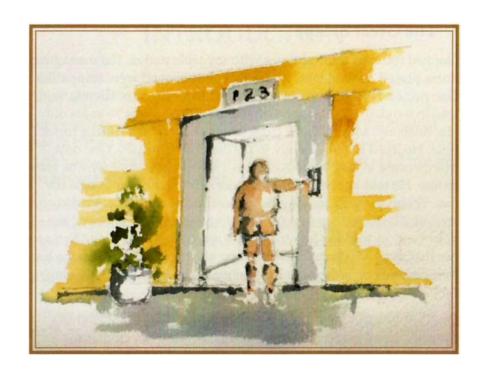
I adjusted quite well to being in a semi-private room. I enjoyed having someone I could talk to and understand. The nurse manager tried to place roommates with me that I could have a conversation with and understand. She did a good job! I was able to converse with and understand all four of my roommates!! I also adjusted to associating with stroke victims. Some became my good friends!

I don't know how much longer I will be in the nursing home. Only time will tell!

1. The Great Escape

I looked forward to meal times with my table mates. The managing nurse placed us with table mates that she believed were compatible. One person I especially looked forward to seeing was Trudy, a Jewish woman, who sat across from me. Trudy was 96 years old. Her husband, Mike, came to be with her every day during lunch time. He lived independently in his own home nearby. One day Mike came in later than usual and Trudy asked him why he was so late. He told her he could no longer drive so he had to take the bus. Trudy asked him why he couldn't drive anymore. Mike replied "Because I am too old!" Trudy asked him "How old are you?" and he told her he was 97. She responded by saying "You are not that old!" Mike told her that she was 96 and they were the last living members of their family. Trudy had a hard time believing they were that old!

One day, Trudy came to dinner with several articles of clothing over her arm. I asked her why she was carrying her clothes to dinner. She replied, "I am going home!" Trudy had previously tried to leave the 3rd floor residence by going to the elevator and pressing the 2nd floor button which is the floor that leads to the outside of the building. Trudy then took the elevator to the 2nd floor and came close to leaving the building before an Aide recognized that she was on the run. The Aide called the 3rd floor nurses station to inquire if anyone was missing from the floor. After checking, the nurse responded that Trudy was missing. The nurse sent an Aide to the 2nd floor to bring Trudy back to the 3rd floor. After Trudy's second attempt to escape, the administration installed a new system which basically locked the elevators. Only a key card held by staffmembers, other qualified personnel and visitors could operate the elevators. It was interesting watching some residents hang around the elevator waiting for the doors to open in hopes of sneaking on as someone got off. Nurses and Aides were alerted to keep an eye on any residents suspiciously hanging around the elevator.



2. Naked Man in the Elevator!

One day, a male resident was able to sneak onto the elevator. It wasn't clear if he thought the elevator was a private room or if he too was trying to escape. He was totally naked! The naked man could walk independently and operate the elevator. Security guards were called to remove him from the elevator.

It got so bad with residents trying to sneak onto the elevator that a couch was placed in front of the elevator as a barrier for a while. Since many residents are in wheel chairs, this seemed to deter escapees, at least for a while.

With the elevators locked down, it became clearer that we "the residents" were living in a version of "Hotel California" the famous song by the Eagles. As the lyrics go......" We are all just prisoners here of our own device...... this could be Heaven or this could be Hell.....you can check-out anytime you like, but you can never leave"!

3. Is this the Jewish Table? (Just tell her the food is Kosher!)

Theresa, a Jewish woman, was placed at our table for meals. Upon arriving at the table, she asked "Is this the Jewish table?" I told her that this was not a Jewish table, but that we would like to have her sit with us at the table. She decided to stay. However, she had another problem. When she was served meals, she wanted to know if the food was kosher. It was not. They did not serve kosher food except for kosher hot dogs. Before the kitchen staff responded, I asked to speak to them. I told them to tell Theresa that they did serve kosher food so that she would eat. They agreed to tell her that the food was kosher. A Jewish woman sitting at a nearby table overheard us and later said in private that we should not lie to Theresa. I asked her if she only ate kosher food to which she replied "no" but that was her decision. She, however, went along with us and did not tell Theresa that most of the food served was not kosher. Theresa did control her diet by the order in which she ate her food. One example is that she didn't drink milk when meat was served at the same meal and she did not eat pork. She adjusted quite well to the diet with modifications. Unfortunately, she died a few years later.



4. The Preacher: "Where is Louise?"

Some of the residents on the 3rd floor had very interesting backgrounds. One was Robert, an Episcopal Minister who also taught communications at Marquette University in the Upper Peninsula of Michigan. He had a beautiful voice and sang on stage in some famous musicals. Robert was always calling out to Louise, his wife of many years, who also lived in the nursing home but on a different floor. He and Louise died in the nursing home just a few weeks apart.



5. Don't beat Susan at checkers...she's a poor loser! Teaching Susan English

Susan was a Russian ophthalmologist who I came to realize was extremely competitive. Susan sat across from me at our table in the dining room. After my cataract surgery, she would always look at my eyes to see if they were healing well or if they had any inflammation. Since she did not speak English, Susan would smile if everything looked good or she would turn her head from side to side if she noticed anything irregular. My eyes healed very well and I was able to enjoy playing checkers again. Susan watched me play checkers and

indicated that she would like to play with me. I didn't know she could play checkers. Of course, I was glad to play with her. I soon learned that she was very competitive and didn't like to lose! If Susan lost, we had to keep playing until she won again. I did not learn any Russian phrases. I was too busy teaching Susan English! Susan lived to be 103 years old! Some staff members and residents thought I spoke Russian. I did not, though I was able to understand Susan's non-verbal communication. I also taught her a few common English phrases.

6. Take me out to the Ball Park! Singing with Jean every Morning

Jean, a former resident, and I used to recite nursery rhymes together. Every morning, we would sing "Take me out to the Ball Park". Jean was a baseball fan! Jean was 100 years old when she and I recited nursery rhymes and sang songs. She was very mentally alert. Jean lived to be 100+ years old!

7. Recreation & Socializing

The recreation staff provides a social schedule of events that are well attended by the residents. There are games such as cards and bingo as well as outings to restaurants, movie theaters, parks, and museums. Musical groups, both vocal and instrumental, are hired to perform for the residents for special events.

Residents look forward to and enjoy the holiday celebrations. Christmas is the holiday that generates the most fun! The day after Thanksgiving, Christmas trees are set-up on each floor of the building by staff members. The residents of each floor, with the help of volunteers, decorate the trees. Each resident has their picture taken in front of a decorated tree. The pictures are then given to each resident to keep or to give to a relative or friend.

During early December, a long table is set-up in a large conference room with unwrapped gift items. Each resident can choose one unwrapped gift item that is wrapped by a volunteer. The gift can be given to a relative or friend. The residents enjoy a Christmas party given by staff members. Each resident

receives a wrapped gift from a staff member during the Christmas party. I received an MSU blanket last Christmas, 2016 that was made by a staff member. I love it! Most staff members and residents know I am a Spartan fan!

On New Year's Eve, some residents choose to go out to dinner in the early evening to a local restaurant (they pay for their own dinner and tip). The facility provides transportation to and from the restaurant (the residents also pay for the transportation service). The residents can watch the New Year's celebration on television. They can watch until the "ball drops" if they want. Most residents cannot stay awake that long!

Valentine's Day is celebrated by residents making Valentines. Residents can keep their Valentines or give to a friend. On Valentine's Day 2016, I received a personal Valentine from someone that did not sign their name. The name was never revealed to me! What's that all about?

Halloween is the "big holiday" for the children of the Staff and grand and great grandchildren of the residents. The children arrive with their parents, relatives, friends in Halloween costumes with their bags to be filled with candy or fruit. In the community room, the residents are given a bag of wrapped candy donated by volunteers to place in the bags. Parents donate the fruit.

Thanksgiving is celebrated with a Harvest Festival Dinner in the large reception room on the first floor. The dinner consists of turkey, stuffing, mashed potatoes & gravy, and many fall vegetables.... And, of course, pumpkin pie! The gathering of the residents makes it a fun occasion.

Easter, the last of the "big" holidays, starts with an Easter Egg Hunt for the children of the staff members and the grandchildren of the residents. Plastic Easter eggs are filled with candy and placed in "hiding places" in the living room. It's fun to see the smiles on the children's faces when they find an Easter egg!

On St. Patrick's Day, the residents are served a corn beef and cabbage dinner. An Irish dance group from a local dance studio provides the entertainment. It's fun to watch the Irish dance movements!

A Mother's Day Tea honoring mothers and grandmothers is organized to celebrate Mother's Day. The celebration takes place in the community room.

The holidays of Memorial Day, Independence Day, and Labor Day are celebrated with outdoor barbeques, weather permitting. In the event of inclement weather, the events are held in the community room or the dining rooms on each floor. The outdoor barbeque events have musical groups providing entertainment that make these events very festive!

The Recreation Director organizes and moderates a dog show once a year during the fall. This gives the residents another occasion to go outside and socialize. The dog show is well attended. Another annual event is a fashion show. A local consignment store moderates the fashion show and lends the clothes that participants wear. The participants can later buy the clothes they wear at a discount if they choose.

Father's Day is celebrated by watching a classic car parade on the grounds of the facility. Fathers enjoy watching the parade! They also enjoy a cake & ice cream social before the parade. All residents are invited to the cake & ice cream social as well as the parade.

Birthday parties are organized and meet monthly to celebrate birthdays occurring during the month. Cake and ice cream are served. Residents look forward to the birthday parties and enjoy them. Cakes are made by the residents under Sam's supervision. Sam serves the cake and ice cream.

Residents are invited to attend a wine and cheese social event every other Wednesday afternoon in the 2nd floor lounge. The 2nd floor also has an "upscale" dining room managed by Martin. Residents may also choose to have their meals in the dining room

Sam organized a book club which originally consisted of about 20 members. The members take turns choosing a book to read and discuss at the next meeting. The meetings are held once a month. However, after a few months most of the members dropped out. They either didn't like the book chosen or they had difficulty following the story. There are only three members left: Robert, Penny, and me. Penny unfortunately, has recently passed away.

Sam also organizes outing events and is the driver to those events.

8. Three of My Roommates Have Died

Three of my roommates have died. After my last roommate died, I jokingly told the nursing staff that I didn't believe anyone would now want to be my roommate. I do have a fourth roommate, Georgia. Thankfully, she seems to be doing quite well!

It was difficult having 3 roommates die. I miss them and their families and friends who came to visit them.

9. Observing the Dying Process

I noticed and observed when residents are nearing death they would raise their hand and call out to deceased members of their family. They would often call out to their mothers! Many believed they actually saw deceased family members. They usually died shortly after. One of my roommates said she saw her deceased son looking through the window at her, even though we are on the 3rd floor! She died a few days later. Another resident asked me if I would take her to the train station so she could go to Grand Rapids to see her parents. Another time she asked me to go downstairs with her because her parents were waiting to see her. Her parents died several years ago. I did not go the train station or downstairs with her. She died a few days later.

I also observed another resident that I believed to be near death. He sat at a table close to mine. I mentioned this to a nurse but she responded that he was fine. He died two days later. I sat near another resident who had a battery-operated chair. I jokingly asked him if he would "will" his chair to me. He died a week later. I did not inherit the chair!

My Husband, Jim: Dealing with Parkinson's Disease – Observing his Death

Jim was admitted to the nursing home because he was having a hard time coping with the effects of Parkinson's disease. He had tremors in his hands and in his legs. Later he developed rigidity of his facial muscles, often referred to as "frozen face". He lacked expression and couldn't smile. This disturbed me! It was hard for me to see Jim's progression of Parkinson's disease.

Shortly after Jim was admitted to the nursing home, the family got together for lunch in the dining room of the facility. Jim had difficulty feeding himself due to his tremors. Jell-O was served as the desert that day. The shaking in Jim's right hand caused the Jell-O to shake more than usual! He had a hard time getting the Jell-O in his mouth! We couldn't help but laugh, Jim included!

I was with my husband when he was going through the dying process. I remember when my son Kevin Shrier came to my room as his father was dying. He asked me if I would like to go see Dad. He didn't tell me his father was dying. I said no, because the last time I saw him he had the "Frozen Face" expression. The muscles in his face became rigid. He couldn't smile. It bothered me very much. Then Kevin said, "Dad really wants to see you". I said, "Ok I will go see him". As we were approaching his room, I noticed the door was open. I saw my children and Christine, my daughter-in-law, were in the room. The priest from our church was also there. I then realized that Jim must be dying. As I came in the room, everyone left so I could be alone with Jim. I told him that I love him and miss him very much. He tried very hard to respond, but he just couldn't. He was running out of energy. I hugged him as he was passing away. The Hospice nurse who was caring for him during his last days told me that she believed Jim was waiting to see me before passing on. Jim smiled, then looked straight across the room like he saw someone he knew and then passed away.

11. What Did You Do to Get in Here?

One resident thought he was living in a prison. He asked me what I did to get in here. I replied that this is not a prison but a nursing home for people who need long term care. I don't know if he believed me or not.... I wasn't wearing an orange jumpsuit and neither was he. I should have asked him "If you believe this is a prison, what did you do to get in here?" On second thought, its best I don't know!

12. 3rd Floor

I not only had to adjust being in a semi-private room, I also had to adjust communicating with stroke victims. Many of the residents on 3rd floor are stroke victims.... I am not! I never had a stroke! I adjusted quite well to being in a semi-private room. I enjoy having someone I can talk to. The nurse manager tried to match me with roommates that I could have a conversation with and understand. She did a great job! I could have conversations with, and understand, all four of my roommates. I also adjusted quite well to associating with most stroke victims. Some of the stroke victims lost their ability to speak but did not lose their hearing ability. My training in communication arts helped me to understand their sign language. And many of these people are among my close friends.

13. Flirting: The Need for Sexual Expression

There is quite a bit of flirting going on among the residents in the nursing home and the need for sexual expression. I remember studying "Human Sexuality" among the elderly, in my graduate Human Ecology Program at Michigan State University. At that time, I found it hard to believe that this would happen. Now, living in a nursing home, I can attest that this is true! There is a man on my floor who was a former Marine. With no encouragement on my part, follows me around telling me that I am so beautiful and that he wants to take me home. I believe he is just kidding! Maybe not!

14. Exercising with Stephanie

Stephanie, a young woman, comes to my room to direct exercises for me three days a week. The exercises help to strengthen my legs. She developed the program with input from the orthopedic surgeon who performed knee surgery on my left knee. Stephanie has become a good friend. I enjoy talking to her as well! We have shared some life experiences. I look forward to seeing Stephanie each week.

15. Where is my Laundry?

When I first came to the nursing home my laundry was done by the laundry staff at the facility. I didn't realize, nor was I told, that my laundry would be washed with the other residents' clothes. I felt this practice was not hygienic! The laundry also lost two of my favorite sweaters. I cancelled the service and opted instead for the personal laundry service, which I had to pay for. I also found this service was not very "personal"! My clothes were also washed with other residents' laundry. We had to label all articles of clothing. The personal laundry service once delivered my laundry to another resident's room. It took over a week to finally locate my clothes. I didn't have clean clothes for over a week! Apparently, the resident who received my clothes didn't report that she had received laundry that wasn't hers. It's possible she didn't realize the clothes were not hers. With some minor adjustments, I have continued with personal laundry service. I have not had any additional problems.

16. Patricia, "The Guardian Angel" of the 3rd Floor

Patricia, "The Guardian Angel" of the 3rd floor, is a resident on the 3rd floor, and former nurse. She is always looking after residents that need extra help. She is very attentive and kind and makes an effort to speak to residents that some ignore. She is the "Guardian Angel of the 3rd floor".

17. My Birthday Celebration!

I celebrated my 87th birthday with residents and staff members on the 3rd floor. The facility provided a birthday cake during the lunch hour that I shared with my table-mates: Virginia, Connie and roommate, Georgia.

The staff and the residents sang "Happy Birthday" making it quite a festive occasion. Only one person, a gentleman, asked me how old I was. I said, "Old enough". He laughed and said he was 70 years old. I responded, "That's still young!" He smiled and winked.

My nephews, Hank and Jeff, sent me a beautiful floral arrangement for my birthday that I used as the centerpiece for the table. My daughter, Jan, brought me a Happy Birthday balloon that we also placed at the table. It lent a festive touch!

My niece, Mary Lynn, brought me a beautiful plant with yellow spring flowers that helped brighten my room!

18. MY NEAR DEATH, OUT-OF-BODY EXPERIENCE: How it affects my relationship with the residents in the nursing home and with others

I was 36 years old when I was misdiagnosed as having an ulcer when I was actually suffering from the effects of gall bladder disease. My general practice medical doctor placed me on a high-fat diet. Later I learned that I should have been placed on a low-fat diet. The high-fat diet caused the growth and accumulation of large gall stones. I had to have surgery! I was prepped for surgery. When the two surgeons made their incision, they noticed large gall stones blocking my bile duct and some were moving toward my stomach area.

It was during this part of the operation that I had a near death, out-of-body experience. My spirit had left my body and was hovering near the ceiling above the operating table. I looked down at the surgeon's frantically working on me. I told the surgeons that I was fine! I was ok! They, of course, couldn't hear me. After the surgery, the surgeons came to my room to see me. They said I was

fine and the surgery had been successful. I asked them if there was any indication that I had, or ever had, an ulcer. They said, "Absolutely not!" I also asked them what could have been the worst possible outcome I could have experienced other than death. They told me that the powerful enzymes that help to digest food could have moved-up to my stomach and digested my stomach! Thankfully, that did not happen! Later I realized how life on earth can end so suddenly! The general practitioner never came to see me after the operation or later during my hospital stay. I was told he had left town.

Dr. Keebler Ross, author of, <u>Death & Dying</u>, interviewed many patients that had claimed to have had similar out-of-body experiences. Her follow-up interviews with them indicated that they had all gone on to do something they always wanted to do but had not done prior to their out-of-body experience. After my recovery, I, too, went on to do something I had always wanted to do but had not done yet. I always wanted to go to college!

After I recovered, I went to the Administration Building at Michigan State University, East Lansing, Michigan to register as a freshman. I went to see the Financial Aid Director and asked for a tuition scholarship. The Financial Aid Director said that, if I qualified, I could have a tuition scholarship. The only academic record I had at that time was my high school transcript from years earlier. It was a good one... I was an honor student! I later received a phone call from the Financial Aid Director who informed me that I had qualified for a tuition scholarship!

I enrolled as a freshman and graduated from Michigan State University with above average grades. I went on to apply for graduate school, took the Graduate Record Exam for entry and did well enough on the exam to gain acceptance to graduate school. My program in graduate school is Human Ecology. I graduated with above average grades. I then applied for a teaching position at Lansing Community College. I was hired to teach courses in Family Communication. I taught part-time for nearly 30 years. I couldn't teach full-time because I still had 4 children at home to care for. My husband helped take care of the children, as he did during my years in college and graduate school.

19. Other Experiences

The nursing home has an on-site beauty shop. It is owned and operated by Heidi (cosmetologist). Both men and women use the services provided. People never seem to lose their desire or need to look good! I notice when clients leave the salon they are smiling. The operators are also good communicators and listeners. I have read that beauty salon operators and barbers are also lay-psychologists. Patty is the special operator that shampoos and sets my hair. She also manicures my nails. Both Heidi and Patty listened to me and offered comfort when my husband was very ill and when he passed away. My husband was also a client of the beauty salon and enjoyed going there.

I attend Catholic services at the facility. A room is provided for the residents, Priest and volunteers from St. Thomas Aquinas Parish of East Lansing to conduct the services. I have met many volunteers from St. Thomas and enjoy talking to them and learning about their families. I also enjoy talking with those attending the services.

Dr. D is the resident Physician at the nursing home. He tries to see each resident once a month. He cared for my husband and was his primary care physician. He helped resolve a few medical staff problems affecting me.

There are four full time social workers at the nursing home. Taylor is the social worker on the 3rd floor. Taylor helps residents with social and emotional problems. She also helps residents with problems adjusting to living in a senior care environment. I have asked her for help a few times such as when my appointments were not honored or kept and with Aides that I felt were not trustworthy, especially with my personal belongings.

Taylor also tests for memory retention and for cognitive abilities or problems. I have been tested several times and each time I have tested 100% on both memory and cognitive ability.

Mike passed away on March 27, 2017 at the age of 100+ years. He and his late wife, Trudy, were among my special friends in the senior living facility. His son, Tom, brought his father to visit with me shortly after Mike celebrated his 100th

birthday. I enjoyed talking with Mike and, of course, seeing him again. I miss Trudy, Mike and their son, Tom, very much.

In the early 1930s, Mike was an acrobat in the Lewis Brothers 3-ring traveling circus that toured the eastern U.S. His experience as an acrobat was very helpful when he fell in his garage a few years ago as he could get up without any assistance.

Patricia, the "Guardian Angel of 3rd Floor", is a resident on the 3rd floor, and former nurse. She is always looking after residents that need extra help. She is very attentive and kind and makes an effort to speak to residents that some ignore. She *is* the "Guardian Angel of 3rd Floor".

Sam saw me using a dictionary in my room. He remarked "you are probably the only resident in the nursing home that has and uses a dictionary."

I always flush the toilet before I go because some of my roommates often have diarrhea.

CONCLUSION

At first it was quite a challenge adjusting to living in a nursing home environment. Many decisions were made for me. I have had many more Ups than Downs of living in the nursing home and I find it to be a very interesting environment!

After my near-death experience, I began to view life in a more positive way. It especially helped me to communicate with the residents in the nursing home in a more compassionate way, also with others. I don't know how much longer I will be in the nursing home. Only time will tell!

I believe there are no means of communication more effective than a smile, a touch and tone of voice when helping others feel good about themselves!

About the Author

MA - Human Ecology, Michigan State University, East Lansing, MI Cognate - Education Guidance and Counseling

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I wrote this book about my experiences and observations while living in a nursing home.

The Michigan Long Term Care Ombudsman Program wishes to thank Mrs. Shrier for the opportunity to share her work with the public in celebration of Residents' Rights Month, October 2018.

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The Michigan Long Term Care Ombudsman Program strives to improve the quality of care and quality of life for residents of nursing homes, homes for the aged, and adult foster care homes. The program has local ombudsmen located throughout the state who make frequent visits to facilities and work directly with residents to resolve their problems.

OMBUDSMAN PROGRAM

For more information or to get free and confidential help, please contact a local ombudsman by calling 1-866-485-9393.