

The PULSE

TEAM UPDATES

Care team bio: Joy Kim

"I knew that I wanted to be involved in health care since I was in elementary school. My mother was a nurse. I think nursing was already in my nature, and I feel very comfortable doing it."

started working as a full-time nurse at CHCC in 2015. At first,

I was very nervous, but I had so much support and help from others who work here.

In early 2020, I was promoted into the role of MDS coordinator. The new position was a bit unexpected; it wasn't



by Joy Kim MDS coordinator

something I was looking for, but there was an opening, and I decided to apply.

In the role of MDS coordinator, I

Please see Kim on Page 4

THANK YOU



In the most challenging times, CHCC's entire team pulls together to deliver on our mission: To provide skilled nursing care with compassion and love in Christ's name.

Thank you to all staff — housekeeping, dietary, nursing, administration, transportation, therapy, social services, spiritual support and recreation — for your flexibility, determination and grace.

Thank you for being here and doing all that you can to provide care for our vulnerable population.



Communicating in the 'blue' style

ou might remember that CHCC leaders recently took part in a communications training session based on the popular book "Success Signals," by Rhonda Hilyer. The training helped leaders identify their own primary communication style and how their style may affect others. In the next few issues of The Pulse, we'll take a deeper dive into each of the four colors (blue, red, green and gold) representing various communication styles so that CHCC team members also can take advantage of this training. Today: blue.

Regarding the Blue Style of Communication, it's important to remember that that no one is entirely blue. Everyone is a blend; we all have some blue in our communication style.

People with the blue communication style tend to express themselves in ways that are sensitive and caring. Blue communicators can read human emotions and see relating to others as a primary purpose in communicating.

Decision-making: Blue-style communicators make decisions based on people first and facts second. This doesn't mean that they ignore facts; they are more concerned with questions like: Did we involve every one? Did we get input? How will this decision affect other people? How will people feel about this decision?

Conflict: Blues don't like it. Blue-

The blue communication style, at CHCC and around the world:

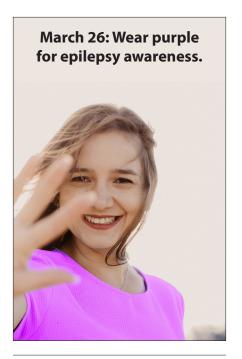
CHCC leaders: Tonja Myers, Dianne Anderson, Sarah Thomas, Happy McMeekin, Kaitlin Gobeille, Carol Du-Bois. (Note: Tonja Myers falls into the blue, brown and red communication styles, having scored evenly in each. What does this mean? Tonja is a "communication facilitator" who can move easily among these communication styles.)

Famous blue communicators: Mother Teresa, Paul McCartney, Princess Dianna, Oprah Winfrey, Florence Nightengale, Laura Bush, Richard Simmons, Jay Leno.

style communicators will do what they can to avoid conflict. They tend to personalize criticism and are sensitive to how it is delivered. If they are wronged, they may engage in passive resistance. Seeming compliance: doing things exactly by the book (superficial compliance: following an order to the letter and in a way that causes problems). Blues may try to avoid conflict, but they don't easily forget a conflict.

Other characteristics: Blues

Please see **Blue** on Page 4



The community sure has been rallying around CHCC the past two weeks! What a wonderful community we serve.

Check out CHCC's Facebook page for a list of actions people are taking to support those who live and work here at CHCC, including cards, words of encouragement, donations, kind prayers and well-wishes for all of us.

This was shared with CHCC by a local pastor this week:

Keep blessed as the Lord is your strength and protector in such a worrisome situation. The Prayer Baptist Church family are in prayers for God's grace and mercy to take you through.

-Pastor Grupee

COVID-19 Q&A

I would like to start out by saying "thank you" to all of you for continuing to do what you do each and every day for

our residents. I have faith that we will get through this together and come out stronger on the other side!

We received a question in the suggestion box regarding employees who live outside of Washington and work in our facility, and whether this is



by Heather Lewis Director of Nursing

something to be concerned about. The answer, in a nutshell, is "No."

We screen all employees the same, no matter where they live, by checking temperatures and asking about travel and symptoms. We are incredibly grateful that our co-workers are able and willing to travel across the border to care for our residents. In addition, you may recall, the United States has had more cases of COVID-19 than Canada. And our facility is one of the "safest" places to be, given the stringent infection control interventions we have in place to mitigate the risk of exposure. The risk to you is greater when going to the gas station or the grocery store. Any of us could just as easily be "carrying the virus" and "exposing" others, which is why we wash our hands, use alcohol gel, cover our sneezes and do not come to work sick. Residents depend on each of us to do what we can to protect them while providing care. We ask that you please do not create unnecessary panic. We must support one another and appreciate each other. Remember, we are in this together!

HEALTH

Have questions? Get answers

any of you have ongoing questions about COVID-19, and it is hard to sort through the many sources of information and decide what is accurate.

While I encourage you to refer to the CDC website at https://www.cdc.gov/ and the Washington State Department of Health website at https://www.doh.wa.gov/, you may have questions that are "closer to home".

To try to help with that, without overwhelming our in-house resources, I want to offer our suggestion boxes. If you have a

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COVID-19 question, you can write it down and leave it in any

of the suggestion boxes throughout the facility (rehab lobby, front lobby and both staff lounges). I will check the boxes each day I am here. We will com-



by Tonja Myers Administrator

pile your questions and answer them in "COVID-19 Q&A" messaging. I hope this helps!

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LASK US ANYTHING!
Have a question about CHCC? Jot it down and drop this slip into the comment box in the break room. We'll share answers in the Comment Box Corner column in an upcoming issue of this newsletter.
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BLUE

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are supportive; they often offer to help and can take on too much responsibility for helping others. They seek to please; they do not want to disappoint anyone. They are forthcoming; they'll tell you about the details of their lives if they feel safe and respected. They communicate emotions, feeling comfortable communicating a full range of emotions. They also tend to not trust or disclose if they don't know you on a personal level.

How blues are misunderstood: Sometimes, blues are seen as weak or as pushovers because they don't usually yell or "get in your face" when they disagree or feel mistreated. Individual blues may be strong or weak, just like individual reds, greens and browns. It's important not to generalize or stereotype styles of communication. Sometimes, blues may be perceived as wanting to socialize and bond with people rather than get things done. Remember: Blues believe that more is accomplished when people understand and support each other.

You know someone is speaking in a blue style when they say: "How do you feel about this?" "What would you like to do?" "Can't we all just get along?" "Let's see how the others feel about this"

One more important thing to note: Blue is the primary style of communication at CHCC. Most CHCC team members have blue as either their first or second color style of communication. Knowinng that, it's best for all of us to take



"Success Signals: Open the Door to Getting More of What You Want," by Rhonda Hilyer.

the time to get to know how best to communicate with a blue style of communication.

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use resident assessment tools and my nursing experience to assess the care levels and needs of residents and develop care plans for them, working with the person's doctor, therapists, social workers, dietary team, nurses and others. We approach each person in a holistic way to develop a broad spectrum of care, and we also use the data for clinical reimbursement.

Recently, with advice and encouragement from CHCC's director of nursing, I worked to become wound care certified. The additional training has been a good way for me to support CHCC's care team and also learn and grow in my career.

Through the certification process, I learned how different wounds can alter a person's lifestyle. By becoming a certified wound care expert, I can better serve CHCC's patients and



Joy Kim, CHCC's MDS coordinator, displays the certificate she recently earned for becoming wound care certified.

residents. I still need much hands-on experience, but I'll be able to join the wound care team in the near future.

From the time I was hired until now, I have really enjoyed working at Christian Health Care Center. I have been so impressed with the leadership and my coworkers. I have great colleagues; they are mature, sincere and responsible. I can count on them anytime. CHCC is a safe, clean environment, and we are always working to continuously improve with a purpose to serve others. I feel very privileged working here.

For those considering working at CHCC, I would say that if you have the passion to help people, go for it! Find out your potential; find out what you can do. There will be challenging and stressful days, but you can overcome them with the support available all around you. As you do, you can gain satisfaction and fulfilment by improving yourself and at the same time contributing your unique personality, talents and skills to build up others in many different ways.

I am very thankful and grateful that I have an opportunity to work and better myself at CHCC.