

Nursing Homes: Resources

These resources provide evidence-based information in support of all eight Advancing Excellence campaign goals. The purpose of this information is to help nursing homes:

- Identify and manage the problems, risks, and health related conditions of nursing home residents; and
- · Provide individualized care and improved outcomes.

General Resources

Barbara Bowers Manual: Implementing Change in Long Term Care is a detailed guide for how to engage nursing home staff at all level in the change process.

- Manual: Implementing Change in Long Term Care
- Case Studies
- Worksheets

The Top <u>The Top Ten Ideas to Involve All Staff in Advancing Excellence</u> has ideas on how to engage staff, ranging from planning a campaign kick-off to providing sample newsletter articles to help you gather input from staff.

View video presentations from LANE Conference (December 2008)

Campaign Goal-Directed Resources

The Implementation Guides are organized by campaign goal. Each guide includes the campaign goal; Flow Diagram; Process Framework; Process Review Tool; and Resources. These guides are designed to assist all nursing homes in meeting their selected campaign goals. For more information, please read the <u>Questions and Answers for Implementation Guides</u>. (These materials are in PDF format.)

Advancing Excellence campaign webinars are listed with each goal's resources below, and can also be accessed on the $\frac{\text{Webinars}}{\text{Webinars}}$ page.

- Goal #1: Reducing High Risk Pressure Ulcers
- Goal #2: Reducing the Use of Daily Physical Restraints
- Goals #3 & 4: Improving Pain Management
- Goal #5: Establishing Individual Targets for Improving Quality
- Goal #6: Assessing Resident and Family Satisfaction
- Goal #7: Increasing Staff Retention
- Goal #8: Improving Consistent Assignment of Nursing Home Staff

CLINICAL GOALS

Goal #1: Reducing High Risk Pressure Ulcers

- Implementation Guide
- Reducing Pressure Ulcers in Nursing Homes: An Interdisciplinary Process Framework
 (PowerPoint or PDF, with separate <u>audio</u> [may take a few minutes to load])
 This presentation is from the popular Advancing Excellence Webinar/teleconference
 held on February 21, 2008.
- Achieving Results in Pressure Ulcer Prevention Across Care Settings: Lessons from the NJ Pressure Ulcer Collaborative (webinar or PDF)
 This presentation describes results from the New Jersey Hospital Association Pressure Ulcer Collaborative representing acute care and specialty hospitals, skilled nursing facilities, home health agencies and assisted living providers. This webinar/PDF may be helpful in your work in support of Goal #1.
- Fact Sheet for consumers

Goal #2: Reducing the Use of Daily Physical Restraints

- Implementation Guide
- · Fact Sheet for consumers

Goals #3 & 4: Improving Pain Management

- Implementation Guide
- Improving Pain Management by Using the Advancing Excellence Campaign
 Frameworks (PowerPoint or PDF, with separate <u>audio</u> [may take a few minutes to load])
 This presentation from the popular Campaign Webinar held on January 8, 2008 focuses on process frameworks and treatment of pain.
- Fact Sheet for consumers

ORGANIZATIONAL GOALS

Goal #5: Establishing Individual Targets for Improving Quality

- Implementation Guide
- Fact Sheet for consumers

Goal #6: Assessing Resident and Family Satisfaction

- Implementation Guide
- Nursing Home Satisfaction Survey Tools (PDF)
 This document contains a list of tools for measuring resident and/or family satisfaction. These tools can be helpful for conducting satisfaction surveys to satisfy the requirements of Goal #6.
- · Fact Sheet for consumers

Goal #7: Increasing Staff Retention

- Implementation Guide
- Calculation of Turnover Workbook (XLS)
 This easy-to-use template is a mechanism for tracking and monitoring monthly turnover. This workbook will also help nursing home staff prepare entries for submission of turnover data for Goal #7.
- Staff Stability: Learn to Manage your Resources and Improve Staff Retention
 (PowerPoint or PDF, with separate <u>audio</u> [may take a few minutes to load]).
 This presentation is from the Advancing Excellence Webinar/teleconference held on

September 25, 2008.

- Fact Sheet for consumers
- Staff Stability Toolkit

This toolkit, published by Quality Partners of Rhode Island, incorporates experiences and lessons learned in over 400 nursing homes. It is designed to serve as a resource for homes just getting started with efforts to reverse turnover as well as employers who have already started to address recruitment and retention and need further assistance in a specific area

 Coaching Supervision: Introductory skills for supervisors in home and residential care from PHI. The curriculum is free for download.

Goal #8: Improving Consistent Assignment of Nursing Home Staff

- Implementation Guide
- Consistent Assignment The Practice and the Experience (PowerPoint or PDF, with separate <u>audio</u> [may take a few minutes to load])
 This presentation is from the popular Advancing Excellence Webinar/teleconference held on June 3, 2008.
- Fact Sheet for consumers

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Top 10 Ideas to Involve All Staff in Advancing Excellence

Advancing Excellence in America's Nursing Homes is a national campaign to improve the quality life and care for residents and staff. The participation of nursing homes staff in Advancing Excellence is essential to achieving the campaign's quality goals.

Successful nursing homes tell us that one of the first steps on their road for excellence is involving and listening to staff. They name their process differently—culture change, person-centered care, Quality First, etc. And, sometimes they use different guides. But the common element is that staff from all physical parts of the home, all time slots, and all job descriptions and disciplines are actively asked about improving care and quality.

We have gathered some great ideas on how to involve your staff in your home's Advancing Excellence campaign. We have also posted on the Advancing Excellence Web site (www.nhqualitycampaign.org) more information and details for some of these ideas. We hope that this list helps jump-start and support your efforts for excellence in the lives of the people who live and work in your nursing home.

Top 10 ideas to involve all nursing homes staff in Advancing Excellence:

- 1. How to Distribute Advancing Excellence Campaign Information with Your Employees' Paychecks
- 2&3. Communicate Your Facility Campaign Goals and Progress to Staff
- 4. Hold 10-Minute Stand-Up Meetings with Staff
- 5. Top 10 Ideas for an Advancing Excellence Kick-off Event
- 6. How to Form an Advancing Excellence Campaign Committee
- 7. How to Celebrate Your Nursing Home's Advancing Excellence Progress
- 8. How to Create an Advancing Excellence Campaign Recognition Program in Your Nursing Home
- 9. Provide Staff with Talking Points on the Campaign for Discussion with Residents and Families
- 10. Sample Articles for Your Employee Newsletter about Advancing Excellence

Please feel free to use, modify, add and tailor these ideas for your community. You can also use them to start discussions with your staff, and together, plan your strategy for bringing all staff on board.

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Advancing Excellence in America's Nursing Homes is a national campaign to improve the quality of care and life for the country's 1.5 million people receiving care in nursing homes. Nursing homes, their staff and consumers can join in this effort by working on the campaign goals, designed to improve quality.

www.nhqualitycampaign.org

Introduction

Advancing Excellence in America's Nursing Homes is a campaign is designed to improve the quality of life for both nursing home residents and the staff who serve them. The campaign is led by an unprecedented broad-based coalition of organizations representing nursing home providers, nurses, caregivers/support staff, medical directors, quality improvement experts, consumers, government agencies and foundations.

We all believe that every person and every organization has an important role and responsibility in making this campaign successful—by bringing excellence to every nursing home in America. High quality nursing home care—where each resident gets personalized, appropriate care – is important to all of us. Nursing home residents, their families and people who may someday choose a nursing home should be able to expect the best possible care and quality of life. Nursing home staff members deserve the satisfaction of knowing that their hard work contributes to high quality of care and quality of life for residents.

The Advancing Excellence in America's Nursing Homes campaign is the first national effort to measure quality by setting measurable "clinical quality goals" and "organizational improvement goals." Every nursing facility may participate by voluntarily pledging to focus on three or more goals. Nursing homes that participate will have free access to assistance and information from quality experts to help them meet their targeted goals. Over 20 national organizations and 48 statewide groups are participating in this campaign.

Clinical quality goals focus on health care issues that are familiar to many—reducing pressure ulcers, reducing physical restraints and improving pain management. Four organizational improvement goals are believed to be basic to achieving excellence—establishing targets for improving quality, assessing resident and family satisfaction, increasing staff retention and improving consistent assignment.



How to Distribute Advancing Excellence Campaign Information with your Employees' Paychecks

Sample #1: To announce campaign

Advancing Excellence in [Name of Your Home]

With your help, [name of home] has selected three excellence goals to work on. Your continued help, ideas, observations and brains are needed to:

- List selected goal
- List selected goal
- List selected goal

For more information about how you can help, contact [fill in name of person] or come to the next AE team meeting on 00/00/08 in [name location] at time.

Sample #2: To announce goals' progress

Goal Report for Advancing Excellence in [Name of Your Home]

With your amazing help and skills, [name of home] has made great progress on our three excellence goals. Specifically, our progress to date is:

- More relief from pain among our residents; only two residents reported severe pain last month.
- More effectively treatment of pressure ulcers; no stage #2s have gone to #3.
- Successful implementation of consistent assignment on Gettysburg and Philly wings on all three shifts. Work starts on Albany and Bay wings next week.

And the resident council has noticed the changes. The President reports, "I know the changes have been hard for some, but the residents and families are very happy to see the same faces and caring hearts. Thanks and keep it up."

For more information about how staff can become involve in the campaign, go to http://nhqualitycampaign.org/files/NursingHomeStaffInvolvementFactSheet.pdf



Communicate Your Facilty Campaign Goals and Progress to Staff

Staff involvement is a core component of successfully attaining the Advancing Excellence in America's Nursing Homes Campaign goals your facility has set.

Communicating the goals, and the progress toward meeting them, is critical to having the staff fully involved.

Sample templates for communicating the goals and progress for each of the Campaign's eight goals follow.

- 1. The templates can be used as designed, or they can be modified for your specific facility.
- 2. The templates are designed to report the same or similar data that is measured for the Campaign goals.
- 3. The templates are designed to share with employees only, in an area that is not accessible to residents and family; however, you may choose to share this data with them.
- 4. To make the best use of these templates, all posted data should be discussed with the employees shortly before or after each posting.
- 5. We recommend that you update the postings monthly, except for goal #1, pressure ulcers. We recommend updating this information weekly.
- 6. Keeping posted information current confirms to your staff that you are committed to improvement.
- 7. Consult with your corporate management, board of directors, etc. if you have questions about posting any of the data.
- 8. See the *Top 10 Ideas to Involve All Staff* for more ideas for more ideas for involving staff in your Campaign activity.

Template Instructions for

Communicating Your Facility Campaign Goals and Progress to Staff

Goal #1 - Pressure Ulcers

- 1. Use the weekly "skin" report to complete this template.
- 2. The "Our Goal" is the percentage rate of in-house pressure ulcers you have set for your facility.
- 3. The "Our Rate this week" is the in-house pressure ulcer rate calculated from the weekly skin report.
- 4. Replace [State] with your state.
- 5. The state and national averages can be obtained from the Advancing Excellence in America's Nursing Homes website, http://www.nhqualitycampaign.org/star index.aspx?controls=states map.
- 6. Enter the actual number of pressure ulcers in the table. Notice that it is separated by in-house, those that developed in the facility; and admitted, those that were present at the time of admission.
- 7. Enter the data from the previous three weeks.
- 8. Discuss this data with your staff with each updated posting.

Goal #2 - Restraint Use

- 1. Use the restraint data collected for your Restraint Committee or QA committee to complete this template.
- 2. The "Our Goal" is the percentage rate of restraint use you have set for your facility.
- 3. The "Our Rate this month" is the restraint use rate calculated for your Restraint Committee or QA committee.
- 4. Replace [State] with your state.
- 5. The state and national averages can be obtained from the Advancing Excellence in America's Nursing Homes website, http://www.nhqualitycampaign.org/star index.aspx?controls=states map.
- 6. Enter the total number of restraints in use in your facility.
- 7. Enter the data from the previous three months.
- 8. Discuss this data with your staff with each updated posting.

Goal #3 - Pain Management, Long Term Residents

- 1. Use data from your facility's most recent composite MDS report to complete this template.
- 2. The "Our Goal" is the overall percentage rate of moderate and severe pain you have set for your facility.
- 3. The "Our Rate this month" is the pain rate calculated from the MDS data.
- 4. Replace [State] with your state.
- 5. The state and national averages can be obtained from the Advancing Excellence in America's Nursing Homes website, http://www.nhqualitycampaign.org/star index.aspx?controls=states map.
- 6. Enter the actual number of residents with moderate and severe pain in the table.
- 7. Enter the data from the previous three months.
- 8. Discuss this data with your staff with each updated posting.

Goal #4 - Pain Management, Short Stay Residents

- 1. Use data from your facility's most recent composite MDS report to complete this template.
- 2. The "Our Goal" is the overall percentage rate of moderate and severe pain you have set for your facility.
- 3. The "Our Rate this month" is the pain rate calculated from the MDS data.
- 4. Replace [State] with your state.
- 5. The state and national averages can be obtained from the Advancing Excellence in America's Nursing Homes website, http://www.nhqualitycampaign.org/star_index.aspx?controls=states_map.
- 6. Enter the actual number of residents with moderate and severe pain in the table.

- 7. Enter the data from the previous three months.
- 8. Discuss this data with your staff with each updated posting.

Goal #5 – Establishing Goals

- 1. This template is to be used by all facilities. It informs the staff of which goals your facility is committed to improving. It changes only if you change goals.
- 2. Delete the goals you have not signed up for on the Advancing Excellence in America's Nursing Homes website, http://www.nhqualitycampaign.org. This will leave only the goals that you are working on for the Campaign and their data, which is tracked on the Campaign website.
- 3. Delete the directions on the template.
- 4. Enter your facility specific goal for each of the goals.
- 5. Enter the current rate for each of the goals.
- 6. Use the specific goal templates for the goals listed.
- 7. Discuss the data with your staff with each updated posting.

Goal #6 - Resident and Family Satisfaction

- 1. Use data from your most recent resident/family satisfaction survey to complete this template.
- 2. Sample survey resources can be found at http://www.nhqualitycampaign.org/files/SATISFACTION%20TOOL%20MATRIX.pdf.
- 3. Enter the satisfaction rate. If you have not completed a survey, enter "Not Available."
- 4. Enter the completion date of the last survey, or the future date you plan to have completed a survey.
- 5. If you have completed a survey, enter the top ranked "Most satisfied" and "Least satisfied."
- 6. If you have not completed the survey, leave the "Most satisfied" and "Least satisfied" areas blank.
- 7. Discuss this data with your staff with each updated posting.

Goal #7 – Staff Retention

- 1. Two different sample templates are offered for this goal.
- 2. Use a staff tracking and trending report to complete either of these templates. A *Calculation of Turnover Workbook* is available on the Advancing Excellence in America's Nursing Homes website, http://www.nhqualitycampaign.org/star_index.aspx?controls=nhTechAssist under Nursing Home Resources.
- 3. The "Our Rate this month" (overall, RN, LPN, and CNA) is the turnover rate calculated from the staff tracking and trending report. This data is entered on both sample templates.
- 4. Replace [State] with your state.
- 5. The state and national averages can be obtained from the Advancing Excellence in America's Nursing Homes website, http://www.nhqualitycampaign.org/star index.aspx?controls=states map.
- 6. If using the more detailed template, enter the actual number of RNs, LPNS and CNAs hired within the last month. Enter the number of vacancies for each position at the end of the reporting month.
- 7. Enter the data from the previous three months.
- 8. Discuss this data with your staff with each updated posting.

Goal #8 - Consistent Assignment

- 1. Use a Consistent Assignment tracking and trending report to complete this template. A tracking and trending tool is available at http://www.health.ri.gov/hsr/facilities/icp/ConsistentAssignmentChangeIdeas.pdf.
- 2. The "Our Goal" is the percentage rate of consistent assignments you have set for your facility.
- 3. The "Our Rate this month" is the consistent assignment rate calculated from the tracking and trending report.
- 4. Replace [State] with your state.
- 5. The state and national averages can be obtained from the Advancing Excellence in America's Nursing Homes website, http://www.nhqualitycampaign.org/star index.aspx?controls=states map.

- 6. Change the "Unit/Hall" categories to reflect your facility.
- Enter the percentage rates for each unit/hall that you are tracking. Leave the other unit/halls blank.
 Enter the data from the previous three months.
- 9. Discuss this data with your staff with each updated posting.



GOAL #1 Reducing Pressure Ulcers

| | Our Goa | 1 | | Our Rat | e this wee | k | | |
|--------------------------|----------------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--|--------------------|
| [State | [State] average National average | | | | | | | |
| | Stage 1 (In-house) | Stage 2 (In-house) | Stage 3 (In-house) | Stage 4 (In-house) | Stage 1 (Acquired) | Stage 2 (Acquired) | Stage 3 (Acquired) | Stage 4 (Acquired) |
| This week (Week 1) | | | | | | | | |
| Last week (Week 2) | | | | | | | | |
| Week 3 | | | | | | | | |
| | | | | | | | | |

Tips for preventing and/or healing pressure ulcers:

- 1. Know which residents are at risk for developing pressure ulcers
- 2. Assess residents' skin daily when providing care and report changes to the nurse
- 3. Help residents to be repositioned as needed

Week ending

Week 4

- 4. Encourage residents to be involved in exercise programs
- 5. Assist residents to get enough to eat and drink
- 6. Notify the nurse if you notice a change in the resident's behavior



GOAL #2 Reducing Daily Restraint Use

| Month | |
|-----------------|---------------------|
| Our Goal | Our Rate this month |
| [State] average | National average |

| | TOTAL # Restraints | Bedrails | Specialty Beds | Lap Cushions | Lap Trays | Lap Belts | Specialty Chairs | Other |
|-------------------------------|--------------------|----------|-------------------|-----------------|-----------|-----------|---------------------|-------|
| This month (Month 1) | | | | | | - | | |
| Last month (Month 2) | | | | | | | | |
| Month 3 | | | | | | | | |
| Month 4 | | | | | | | | |

Tips for reducing restraint use:

- 1. Anticipate residents' needs (hunger, thirst, bathroom)
- 2. Ask residents regularly about pain
- 3. Encourage and support residents involvement in favorite activities
- 4. Notify the nurse if you notice a change in a resident's behavior



GOAL #3 Improving pain management in long-term residents

| Our Goal | | Our Rate this month | | | | |
|----------------------|---------------------------|-------------------------------|----------------------|--------------------------------|--|--|
| [State] average _ | | National a | | | | |
| | MODERATE PAIN Daily | MODERATE PAIN Less than Daily | SEVERE PAIN Daily | SEVERE PAIN Less than Daily | | |
| This month (Month 1) | | | | | | |
| Last month (Month 2) | | | | | | |
| Month 3 | | | | | | |
| Month 4 | | | | | | |

Tips for managing resident pain:

Month

- 1. Know which residents have chronic pain
- 2. Ask residents regularly if they have any pain
- 3. Observe residents who can't communicate, for signs of pain (changes in mood, appetite, etc.)
- 4. Learn and use what works best for individual residents to relieve their pain
- 5. Notify the nurse if you notice a change in a resident's behavior



GOAL #4 Improving pain management in short-stay residents

| Our Goal | | Our Rate this mo | onth | | | | |
|----------------------|---------------------------|-------------------------------|----------------------|--------------------------------|--|--|--|
| [State] average _ | National average | | | | | | |
| | MODERATE PAIN Daily | MODERATE PAIN Less than Daily | SEVERE PAIN Daily | SEVERE PAIN Less than Daily | | | |
| This month (Month 1) | | | | | | | |
| Last month (Month 2) | | | | | | | |
| Month 3 | | | | | | | |
| Month 4 | | | | | | | |

Tips for managing resident pain:

Month

- 1. Recognize that short term residents often have acute pain
- 2. Know which residents have chronic pain
- 3. Ask residents regularly if they have any pain
- 4. Observe residents who can't communicate for signs of pain
- 5. Notify the nurse if you notice a change in a resident's behavior



GOAL #5 Establishing Individualized Goals for Improved Care

| | Date | |
|----------|-------------------------------|---------------------------|
| Οι | ır current goals are: | |
| V | Reducing high risk pressure | ulcers |
| | Our goal | Start rate |
| V | Reducing the use of daily ph | ysical restraints |
| | Our goal | Start rate |
| | Improving pain managemen | <u> </u> |
| V | Improving pain managemen | · |
| | Our goal | Start rate |
| V | Establishing individual targe | ets for improving quality |

| $\overline{\mathbf{A}}$ | Assessing resident and family satisfaction with the quality of car | | | | | |
|-------------------------|--|---------------------------------|--|--|--|--|
| | Our goal | Start rate | | | | |
| | Increasing staff retenti | ion (decreasing turnover rate) | | | | |
| | Our goal | Start rate | | | | |
| V | Improving consistent a | ssignment of nursing home staff | | | | |
| | Our goal | Start rate | | | | |

Directions: Delete the goals that you are not working on. Then delete this sentence.



GOAL #6 Assessing Resident and Family Satisfaction

| | Our current satisfaction rate | |
|----------|-------------------------------|--|
| | Date of survey completion | |
| Areas mo | est satisfied with: | |
| 1 | | |
| | | |
| | | |
| | | |
| | | |
| | st satisfied with: | |
| 1 | | |
| 2 | | |
| | | |
| | | |
| 5. | | |

Tips for improving resident/family satisfaction:

- 1. Learn individual preferences and needs for each resident
- 2. Respond to any concerns or complaints timely
- 3. Use your facility concern/complaint system
- 4. If you can't fix a concern/complaint, find out who can and ask that person to address the issue



GOAL #7 Improving Staff Retention

| Mo | onth | | | | | |
|-------------------------|--------------|-----------------|---------------|------------------|--|------------------|
| | Our OV | ERALL G | oal | | | |
| | Our OV | ERALL Tu | rnover l | Rate this me | onth | |
| | RN Tur | nover Rate | this mor | ith | | |
| | LPN Tu | rnover Rat | e this mo | onth | | |
| | CNA Tu | ırnover Rat | e this m | onth | **** | |
| [State] aver | rage | | _ Nationa | al average | WHEN THE RESERVE OF T | |
| | RNs Hired | RN Vacancies | LPNs Hired | LPN Vacancies | CNAs Hired | CNA Vacancies |
| This month (Month 1) | | | | | | |
| Last month (Month 2) | | | | | | |
| Month 3 | | | | | | |

Tips for improving staff retention:

- 1. Treat new employees the same as you would new residents
- 2. Take pride in your work, and others will too
- 3. Have good communication among all shifts and among all departments
- 4. Have fun each day

Month 4

5. Replace blame with "how can I help to fix the problem?"



GOAL #7 Improving Staff Retention

| Month | |
|-----------------|-----------------------------|
| Our OVERA | ALL Goal |
| Our OVERA | LL Turnover Rate this month |
| [State] average | National average |

| | RN Turnover rate | LPN Turnover rate | CNA Turnover rate |
|----------------------|------------------------|-------------------------|-------------------------|
| This month (Month 1) | | | |
| Last month (Month 2) | | | |
| Month 3 | | | |
| Month 4 | | | |

Tips for improving staff retention:

- 1. Treat new employees the same as you would new residents
- 2. Take pride in your work, and others will too
- 3. Have good communication among all shifts and among all departments
- 4. Have fun each day
- 5. Replace blame with "how can I help to fix the problem?"



GOAL #8 Consistent Nursing Assignments

| Month | |
|-----------------|---------------------|
| Our Goal | Our Rate this month |
| [State] average | National average |

| | Entire Facility | Unit/Hall 1 | Unit/Hall 2 | Unit/Hall 3 | Unit/Hall 4 | Unit/Hall 5 |
|-------------------------|--------------------|-------------|-------------|-------------|-------------|-------------|
| This month (Month 1) | | | | | | |
| Last month (Month 2) | | | | | | |
| Month 3 | | | | | | |
| Month 4 | | | | | | |

Tips for achieving consistent assignments:

- 1. Be open to new ideas
- 2. Give consistent assignments a chance
- 3. Actively participate in the changes being made, offering suggestions to fix the problems you see
- 4. Recognize the benefits for residents, families and staff



Hold 10-Minute Stand-Up Meetings with Staff

Engaging the staff so that your nursing home attains its goals is crucial. Once the staff is engaged, they should be kept informed to maintain their focus. Nursing home leaders have a variety of mechanisms to achieve this effect. Leaders may choose to: post results, incorporate the information into quality assurance activities and/or address progress during the organizations stand-up communications meetings. Below are three approaches leaders may choose to us to inform during stand-up.

Once Weekly Stand-Up

Given that time is of the essence and that a wide variety of information must be covered, it is recommended that nursing home leadership focus their comments on the goal that has had the greatest improvement and the goal that has the greatest potential for improvement. As a caveat, it will be essential to ensure that progress on other goals is posted so that each member of the organization can grasp the overall progress.

Three-Times-a-Week Stand-Up

In a three-times-a-week format, leaders can sandwich the data. During the Monday stand-up meeting, the focus could be on the goal that demonstrated the greatest improvement. It will also be beneficial for leaders to explain what actions are required to sustain the current level of achievement, or actions that are likely to continue advancement. This information may set the tone for the remaining weeks efforts.

During the Wednesday stand-up meeting, it is recommended that nursing home leaders address the goal that has the greatest potential for improvement. It may be beneficial to invest a few minutes to gain feedback from the staff as to why the goal is not advancing, and their recommended approaches/actions to move it forward toward excellence. Leaders are encouraged to transition from this discussion by commenting on their degree of confidence in the ability to achieve the given goal.

It is encouraged to use the Friday stand-up as an opportunity to pair achievements with specific staff, departments or shifts as appropriate. This action will combine acknowledgement of progress on a particular goal while actively demonstrating the value of staff involvement. In addition, this approach gives the staff an opportunity to conclude the week with a sense of accomplishment.

Five-Times-a-Week Stand-Up

The benefit of a daily stand-up is that nursing home leadership may elect to cycle through the specific set of goals selected by the home. It is recommended that the nursing home staff continue this process until attainment. If the home elected to focus specific energy on a smaller number of goals then it may be of virtue to uses attainment as a signal to select a new goal for implementation.



Top 10 Ideas for an Advancing Excellence Kick-off Event

- 1. Ask the resident and/or family councils to host the event, to welcome people to the area, and to open the presentation.
- 2. Invite the home's "governing board" to explain the home's history and mission in service to your local community. A re-cap of the home's "pioneer" achievements could be the focus of this part of the event.
- 3. If your home is organized, invite the union steward or other local officials to talk about their support of the Advancing Excellence campaign and their support for the goals and targets selected.
- 4. Ask the state's QIO to participate by attending with posters explaining clinical goals and the stories of success in other homes. Or, ask the QIO for its ideas on how to kick-off the Advancing Excellence campaign.
- 5. Ask the local Ombudsman to participate by assisting the resident or family council in their work, being a part of the welcoming committee to the event, or in some fashion.
- 6. Invite the local area agency on aging to set up a booth to answer questions from the attendees about Medicare, Medicaid and other aging services programs.
- 7. Consider making the event a "community event" by asking residents, families, staff and the home's vendors to bring their families to a picnic, ice cream social, afternoon tea, talent show, carnival or other party with "excellence" as the theme.
- 8. Invite elected political leaders (mayor, county commissioners, state legislators, federal legislators, etc.) to the event. Pair the elected leaders with a resident and frontline staff member for a tour of the home and explain the Advancing Excellence campaign as well.
- 9. As for food and refreshments, ask the dietary department to cater the event using favorite resident recipes. Or, ask the home's vendors to cater the event with in the selected theme—an afternoon tea leads to tea and crumpets; a carnival leads to funnel cakes and cotton candy.
- 10. Invite the local "film" class or public TV station to videotape the event. To connect with family and friends who cannot attend, make the videotape available through *YouTube* or on the nursing home's Web site.



How to Form an Advancing Excellence Campaign Committee

It is very worthwhile to make the effort to form an Advancing Excellence Committee. Having people from all levels of the organization, departments, disciplines and from your governing Board as well as from your resident and family councils participate allows you to get input and buy-in from these groups. It helps people understand the many relationships that exist between organizational units and processes, and the impact of these relationships on quality, productivity and cost. It also makes the value of the committee apparent.

Here are some ways that the committee can add value:

- More synergistic process design and problem solving
- Objective analysis of problems and opportunities
- Promotion of cross-functional understanding
- Improved quality and productivity
- Greater productivity
- Reduced operating costs
- Increased commitment to the organization's mission
- More flexible response to change
- Increased ownership and stewardship
- Reduced turnover and absenteeism

In addition, individuals gain the following benefits from serving on committees:

- Enhanced problem-solving skills
- Increased knowledge of business processes
- New skills for future leadership roles
- Increased quality of work life
- Feelings of satisfaction and fulfillment
- A sense of being part of something greater than what one could accomplish alone

The committee will be most effective if it includes the:

- Administrator
- Director of Nursing
- Medical Director
- Department heads
- Frontline caregivers from all shifts and disciplines including environmental and food service departments

¹ Duke Okes and Russell T. Westcott, editors, Certified Quality Managers Handbook: Second edition, ASQ Quality Press, 2001,Pages 37-41

- Mid-level managers and supervisors
- Unit nurses
- Residents
- Family members
- Members of your governing Board

The committee should include staff that are both senior and junior in seniority in the facility:

- If the committee only includes representatives from management, then how will frontline staff be empowered?
- If the committee is only representative of nursing, then how can cross-discipline collaboration occur?
- If the committee only includes long-term experienced staff, then how can new ideas and energy in your organization be tapped?
- Finally, if the committee only includes frontline workers, then how can they commit the whole organization to the achievement of the goals of Advancing Excellence?

Consider allowing groups to pick their own leaders through a democratic process. As a result, the members of the committee will have some authority to speak for their group. For this committee to be effective, the members of the committee need to have roles and responsibilities between meetings, such as communicating with their departments and disciplines about the importance of achieving the Advancing Excellence Campaign's goals.

The committee needs to work through a process, which should include:

- Describing the purpose of the committee.
- Establishing the measurable results desired and the timeline for achieving those results.
- Determining the level of decision-making authority of the committee.
- Clarifying the important roles played by each member of the committee.
 - Who are the co-chairs? One of these should be from the line staff.
 - o Who will facilitate the meeting?
 - o Who is the scribe?
 - o Who is the timekeeper?
- Determining the resources available to the committee.
 - o Special training or information to be given to the committee?
 - o Designated advisors, trainers, facilitators, etc.?
 - Working capital budget.
 - o Clerical or other personnel support.
- Clarify expectations for communication and reporting.

Tips for effective meetings:

- Have a regularly scheduled time and day.
- Start and end on time.
- Circulate minutes from the previous meeting to committee members prior to each meeting.
- Develop an agenda for each meeting with input from members of the committee.



How to Celebrate Your Nursing Home's Advancing Excellence Progress

One way to show to your staff that working to achieve the goals of Advancing excellence is important to your nursing home's residents is by starting a program, which celebrates the progress you are making in achieving your goals. A celebration program can create a spirit of community in your nursing home.

It is important that your Advancing Excellence Committee initiates the program and that all members of the Committee be personally involved. The celebrations should be public and become woven into the culture of your nursing home. The Committee should be present at all of these celebrations.

Here are some ways to plan celebrations:

- Have regularly scheduled celebrations, not just a one-time event.
- Use the ideas in *Top 10 Ideas for an Advancing Excellence Kick-off Event* as a way to begin discussions about celebrations that would be right for your home.



How to Create an Advancing Excellence Campaign Recognition Program in Your Nursing Home

An Advancing Excellence recognition program is a way of showing that your nursing home expects the best of everyone. The Advancing Excellence Campaign is a great vehicle for doing this because when the "goals" are chosen by your nursing home, it focuses the staffs' attention on what is expected of them. By giving recognition to staff working in an exemplary way, it reinforces that this initiative is important to the organization.

A successful recognition program will personalize the recognition given to people. This will differentiate this program from previous quality improvement efforts.

Spend more time than you are accustomed to walking the halls of your nursing home and meeting with individuals and small groups of people. Give verbal approval to people in front of their peers.

Use other visible awards such as certificates, plaques and other tangible objects. Try giving a spontaneous award from time to time to acknowledge people who are going the extra mile.

Consider inviting people to an Advancing Excellence Committee meeting or sharing a meal. Consider starting one of the following:

- Advancing Excellence Champion of the Month award celebrated with a photograph of the individual in your lobby.
- A column in your newsletter featuring a story about individuals whose support of the campaign warrants recognition.
- Consider just taking the time to work along side the person and offer some assistance with their work
- Write someone up for exceptional work.
- Create special buttons or pins for people to wear who are on the committee or who have made a significant contribution to achieving the campaigns goals.



Provide Staff with Talking Points on the Campaign for Discussions with Residents and Families

Providing your staff with talking points about your nursing home's participation in the Advancing Excellence campaign has two important benefits:

- It helps involve your staff in the campaign.
- It ensures that residents and their families know how committed you are to improving quality.

The first step in this process is to meet with staff to review and discuss the overall campaign goals and the specific quality goals you have chosen. See *Hold 10-minute Stand-Up Meetings* for ideas on organizing these meetings. This discussion about the goals should not be a one-time conversation but should be incorporated into meetings involving care planning, quality measures and staff responsibilities.

The next step is to prepare talking points the staff can use to discuss the campaign with residents and families. One way of accomplishing this is have a small group of direct care workers and other caregiving staff develop the talking points. Since they have day-to-day relationships with residents and know them well, their input would be very valuable in helping to focus on what's important to residents regarding quality measures.

This work group can then present it to your Advancing Excellence committee or another larger group for approval. Once this is achieved, staff can begin talking with residents about the campaign and the home's specific goals.

Here are some ideas of what to include in the talking points:

- Advancing Excellence Campaign description.
- The eight goals, why they are important, how they improve quality of life and quality of care.
- The specific goals of the home.
- What changes the home is making to reach their quality goals.
- How residents and consumers can help.
- We are all partners in caring.



Sample Articles for Your Employee Newsletter about Advancing Excellence

Staff Newsletter Article Sample #1—To announce and help in selection of goals

[Name of home] is joining the national Advancing Excellence (AE) in America's Nursing Home Campaign. We believe that the campaign shares our commitment to quality for the residents, families and staff here at [name of home].

The AE campaign is a coalition-based campaign to improve the quality of life for residents and staff in America's nursing homes. The Campaign's national leaders believe it will strengthen the public trust in nursing home care by focusing on quality improvement and self-regulation.

The campaign acknowledges the critical role of nursing home staff and consumers in improving quality of care and quality of life for nursing home residents. We share that belief.

The campaign's excellence goals are:

- 1. Reducing high risk pressure ulcers
- 2. Reducing the use of daily physical restraints
- 3. Improving pain management for longer term nursing home residents
- 4. Improving pain management for short stay, post-acute nursing home residents
- 5. Establishing individual targets for improving quality
- 6. Assessing resident and family satisfaction with the quality of care
- 7. Increasing staff retention
- 8. Improving consistent assignment of nursing home staff, so that residents regularly receive care from the same caregivers.

We would like to include all staff in selecting the three goals we want to work on first. This discussion will be part of all department meetings in the next month. You can also fill out a general comment card or talk directly with your supervisor. [Or fill in the various methods your facility wants to use to collect input.] I am particularly interested in understanding why you picked the particular goal or goals for us to work on.

Staff Newsletter Article Sample #2—To announce selected goals and seek input on how to reach goals

Thanks to all the great input from you, [name of the home] has selected our Advancing Excellence (AE) Goals. The AE campaign here at [home name] and nationally is designed to improve the quality of life for residents and staff in America's nursing homes.

Your commitment to improving the care and quality of life experienced by the residents of **[your home]** showed through once again in this discussion. Our AE goals are:

[Name your goals here]

Even with all the great work you do now, we have room for improvement in these areas. For example, for our first goal, we are better than both the state and federal averages for [fill in the issue.] Our goal is to exceed the state average. And, in our second goal, while we are better than the average home in the state, our team has decided that we can [fill in your target—i.e. reduce the rate to half the state standard]. And, finally, in third goal, we want to reduce turnover among RNs, LPNs, and CNAs by half in the next year.

Now, it is time to hear your ideas on how we meet the targets. This discussion will be part of all department meetings in the next month. You can also fill out a general comment card or talk directly with your supervisor. [Or fill in the various methods your facility wants to use to collect input.] I am particularly interested in understanding why you picked the particular goal or goals for us to work on.

Again, we will most successful with your input.



Implementation Guide:

Goal 7: Increasing Staff Retention

This Implementation Guide provides efficient, consistent, evidence-based approaches to increasing staff retention.

www.nhqualitycampaign.org

ADVANCING EXCELLENCE IN AMERICA'S NURSING HOMES

A Campaign to Improve Quality of Life for Residents and Staff

Advancing Excellence in America's Nursing Homes is a coalition based, two-year campaign that launched in September 2006. The campaign is reinvigorating efforts to improve the quality of care and quality of life for those living or recuperating in America's nursing homes.

The campaign's unprecedented coalition includes long-term care providers, caregivers, medical and quality improvement experts, government agencies, consumers and others. Together, we are building on the success of other quality initiatives, including Quality First, the Nursing Home Quality Initiative (NHQI), the culture change movement, and other quality initiatives.

Founding Organizations:

Alliance for Quality Nursing Home Care

American Association of Homes and Services for the Aging

American Association of Nurse Assessment Coordinators

American College of Healthcare Administrators

American Health Care Association

American Medical Directors Association

Centers for Medicare & Medicaid Services and its contractors, the Quality Improvement Organizations

National Association of Health Care Assistants

National Citizen's Coalition for Nursing Home Reform

National Commission for Quality Long-Term Care

The Commonwealth Fund

The Evangelical Lutheran Good Samaritan Society



Goal 7: Increasing Staff Retention

Goal 7: Most nursing homes measure staff turnover and develop action plans as appropriate to improve staff retention.

Objectives – By September 2008:

- a) The national average of nursing homes that regularly measure staff turnover and develop action plans to reduce the rate of turnover (including setting targets for staff turnover) exceeds 80%.
- b) The national average for (measured) staff turnover (RN, LPN, CNA) will be reduced by 15%.
- c) Approximately 35,000 fewer nursing home nursing staff will leave their jobs each year.

| | ICON KEY |
|----|------------------------|
| GS | Recognition/Assessment |
| P | Cause Identification |
| * | Management |
| 翻 | Monitoring |
| | |

The icons in the box to the left will be used throughout this guide to help identify those processes related to key evidence-based approaches.



Approach to Implementation

A nursing home working to improve staff retention should follow these steps:



Recognition / Assessment

- 1. Identify reducing staff turnover as an area for potential improvement.
 - Based on nursing home quality improvement data, quality measures, staff surveys, review of actual occurrences and cases, comparison to benchmarks, etc.
- 2. Identify authoritative information available about reducing staff turnover.
 - Review references listed in the Staff Turnover Resources, as well as reliable and evidence-based information about ways to reduce staff turnover from the literature and from relevant professional associations and organizations.
 - Identify ways to distinguish the reliability of information about reducing staff turnover (i.e., how to separate valid ideas from myths and misconceptions about the topic).
- 3. Identify current approaches to reducing staff turnover.
 For an overview of the process, see the Staff Turnover Process Review Tool and related Staff Turnover Flow Diagram.
 - Are the nursing home's approaches consistent with the steps identified in the Staff Turnover Process Framework?
 - Identify the nursing home's current approach to reducing staff turnover, and the basis for that approach.
 - Who in the nursing home decides how to reduce staff turnover, and what approaches do they use?
- 4. Identify areas for improvement in approaches to reducing staff turnover.

 Using the information gathered in Steps 2 and 3 above, compare current with desirable approaches to reducing staff turnover. Address the following:
 - Check whether current nursing home policies / protocols are consistent with desirable approaches.
 - Check whether desirable approaches are being followed consistently.
 - Identify whether anyone has been reviewing and comparing current approaches to reducing staff turnover to desirable ones.



Approach to Implementation (cont.)

Have issues related to staff turnover been identified previously? Were they followed up on? Has the nursing home previously evaluated its performance and taken steps to improve?



Cause Identification

- 5. Identify the causes of issues related to reducing staff turnover, including root causes of undesirable variations in performance and practice.
 - Identify issues and practices that are inhibiting reducing staff turnover.
 - Identify underlying causes (including root causes) of, and factors related to, high rates of staff turnover.
 - Identify reasons given by those who do not adequately follow desirable approaches.



Management

- 6. Reinforce optimal practice and performance.
 - Continually promote "doing the right thing in the right way."
 - Follow the steps of the *Staff Turnover Process Framework*, throughout the nursing home.
 - Identify and use tools and resources to help implement the steps and address related issues.
 - Based on information and data collected about the organization and the processes and results related to reducing staff turnover, identify and strengthen systems and processes that are already optimal.
- 7. Implement pertinent interventions.
 - Address underlying causes (including root causes) of the challenges and obstacles to the nursing home's efforts to reduce staff turnover.
 - Implement pertinent generic and cause-specific interventions.
 - Address issues of individual performance and practice that could be improved in trying to improve staff turnover.
 - Refer to Staff Turnover Resources for resources and tools that can help to address this goal.



Approach to Implementation (cont.)

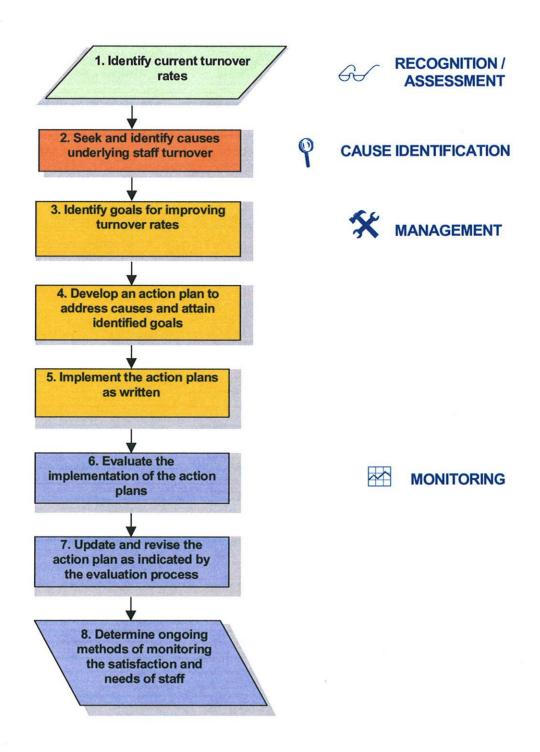


Monitoring

- 8. Reevaluate performance, practices and results.
- Recheck for progress towards getting "the right thing done consistently in the right way."
- Use the Staff Turnover Process Review Tool to identify whether all key steps are being followed.
- Use the Staff Turnover Process Framework and related references and resources from Steps 2-4 above, and repeat Steps 2-7 (Recognition / Assessment, Cause Identification, and Management) until processes and practices are optimal.
- Continue to collect data on results and processes.
- Evaluate whether changes in process and practice have helped attain desired results.
- Adjust approaches as necessary.



Flow Diagram - Staff Turnover Process Framework





STAFF TURNOVER PROCESS FRAMEWORK

| PROCESS STEP | EXPECTATIONS | RATIONALE |
|-------------------------------------|---|---|
| 6€ PROBLEM RECOGNITION / ASSESSMENT | SSESSMENT | |
| 1. Identify current turnover rate. | The nursing home periodically gathers data and other information related to staff turnover, for key categories of staff. The nursing home reviews and analyzes its turnover data to identify what problems are occurring, and where, when, and how often they occur. | Identifying the turnover rate helps a nursing home determine areas for improving staff stability, and provides a benchmark for developing a quality improvement action plan. AHCA'S 2002 study of staff turnover showed annual turnover for staff RNs, LPNs, and DONs of approximately 50% across all three positions. Turnover among CNAs has remained very high (nationally, estimated at over 71% in 2002) nationwide. Average annual CNA turnover rates were below 40% in only 4% of states, and 60% or less in only 35% of states. CNA turnover rates exceed 60% in 65% of states, 80% in 20% of states. The high turnover rate and numerous vacancies among CNAs has been a particular concern because CNAs provide most direct resident care. |
| | | |



| RATIONALE | | - Identifying trends, patterns, and causes can help alert the facility to readily addressable issues that may be resolved with simple approaches, as well as helping to identify other causespecific interventions. Numerous studies have identified factors related to job satisfaction and other issues that affect an individual's willingness to remain in a workplace. Examples of areas that have been identified as contributing to turnover include deficits in management styles and practices, orientation, work design and practices, support of staff efforts, human resource management and sufficient staff and resources. See for example, Centers for Medicare & Medicaid Services (CMS): Appropriateness of Minimum Nurse Staffing Ratios in Nursing Homes. Phase II [Online]. Available: http://www.cms.hhs.gov/Certificationand Complianc/downloads/StaffingPhaseII.zi |
|--------------|------------------------|---|
| | | |
| EXPECTATIONS | | - The nursing home identifies factors causing or related to turnover, including trends and patterns. To help identify these underling causes, the nursing home may, for example, assess for trends and patterns related to CNAs, RNs, other staff, specific shifts, weekdays or weekends, etc. |
| PROCESS STEP | S CAUSE IDENTIFICATION | 2. Seek and identify causes underlying staff turnover. |



| PROCESS STEP | EXPECTATIONS | RATIONALE |
|--|--|--|
| * MANAGEMENT | | |
| Identify goals for improving turnover rates. | - The nursing home establishes a specific and realistic strategy to address factors associated with staff turnover. | Goal setting allows the nursing home to envision potential achievements through their quality improvement efforts. |
| Develop an action plan to address causes and attain identified goals). | The nursing home uses findings determined through the Cause Identification step (Step #2) to help develop an action plan to meet the established goals. This may include (but not be limited to): Develop and incorporate a written plan of action into the nursing home's overall quality improvement process. Identify specific interventions to be implemented. Identify the staff responsible for implementing the interventions. Identify the staff responsible for implementing the interventions within the identified time frames. | An action plan provides a "roadmap" to meeting goals. Without an action plan to guide the quality improvement efforts, it is less likely that the goal will be achieved and sustained. Interventions that address specific causes may provide more definitive and enduring improvements. Some general interventions such as ways to recognize desired staff performance are also beneficial. In determining appropriate interventions, the nursing home should consider utilizing available resource material and best practices from expert sources. |
| 5. Implement the action plan. | - The nursing home develops strategies to communicate the goals, interventions, time frames, and responsible parties related to the action plan. The nursing home provides all involved parties with a copy of the action plan. | The success of the plan depends on various factors, including understanding by involved parties and the support given to making definitive changes in work environment, work flow, care processes, etc. |



| PROCESS STEP | EXPECTATIONS | RATIONALE |
|--|--|--|
| MANAGEMENT (cont.) | | |
| | - The nursing home develops and implements policies and procedures to address specific elements of the plan. | All parties involved should be aware of their responsibilities and the expectations to which they will be held accountable. |
| MONITORING | | |
| 6. Evaluate the implementation of the action plan. | The nursing home periodically evaluates the effectiveness of the action plan implementation, including (but not limited to) the following: Are interventions being implemented as written? Are the action plan interventions being implemented within the identified time frames? Are the identified responsible staff members implementing the action plan interventions? What are the results / findings related to the implementation of the action plan interventions? What unanticipated barriers have been identified during implementation of the action plan? | Evaluation of the progress of implementation allows the nursing home to determine if they are "on the right track" or need to take a different path to try to meet their goal. Barriers commonly arise as action plans are being implemented, which necessitate revisions in order to achieve the goal. |



| PROCESS STEP | EXPECTATIONS | RATIONALE |
|--|---|---|
| MONITORING (cont.) | | |
| Update and revise the action plan as indicated by the evaluation process. | - The nursing home approaches to try to make enduring improvement. | Positive changes need continuing support in order to be sustained. |
| Determine ongoing methods of monitoring the satisfaction and needs of staff. | - The nursing home periodically monitors its turnover rates, and the status of factors that were identified as influencing turnover | Sustained improvement requires monitoring both results and the status of processes and issues that influence those results. |



Abstraction Date:

10.

11.

its review?

needs of its staff?

STAFF TURNOVER PROCESS REVIEW TOOL

| home | home | | | |
|------|---|-----|----|-----|
| Name | e: Address: | | | |
| 60 | RECOGNITION/ASSESSMENT | | | |
| 66 | RECOGNITION/ASSESSMENT | YES | NO | N/A |
| 1. | Does the nursing home currently gather information related to staff turnover? | | | |
| 2. | Does the nursing home review and analyze its turnover data to identify related problems including where, when, and how often they occur? | | | |
| 9 C | AUSE IDENTIFICATION | | | |
| | | YES | NO | N/A |
| 3. | Does the nursing home identify and categorize factors causing or related to staff turnover? | | | |
| 4. | Does the nursing home identify trends and patterns in its staff turnover, based on the information it has collected? | | | |
| 5. | Has the nursing home done a root cause analysis of specific trends or patterns? | | | |
| * M | ANAGEMENT | | | |
| | | YES | NO | N/A |
| 6. | Has the nursing home established measurable staff turnover goals? | | | |
| 7. | Has the nursing home implemented an action plan, which includes key steps in the <i>Staff Turnover Process Framework</i> , to try to meet its staff turnover goals? | | | |
| 8. | Has the nursing home involved all pertinent parties in developing the action plan, communicated that plan to those parties, and updated pertinent policies related to factors that affect staff turnover? | | | |
| A M | ONITORING | | | |
| | | YES | NO | N/A |
| 9. | Has the nursing home periodically reevaluated its staff turnover rates, and the effectiveness of its action plan in reducing those rates? | | | |

Has the nursing home revised its action plan as indicated by the results of

Has the nursing home continued to periodically monitor the satisfaction and



STAFF TURNOVER RESOURCES

| CONTACT INFORMATION | | MedQIC is an Internet resource. Questions related to Nursing Home content can be directed to: Teresa M. Mota, RN or Paula Mottshaw Quality Partners of Rhode Island 235 Promenade Street Suite 500, Box 18 Providence, Rhode Island 02908 Phone: (401) 528-3200 | | One North Franklin, Suite 1700 | Chicago, IL 60606-3424 Phone: (312) 424-2800 | | | 300 North Lee Street Suite 301 Alexandria, VA 22314 | Phone: (703) 739-7900 |
|---------------------|-------------------|---|------------------------------|--|---|--|--|--|--|
| LOCATION | | MedQIC | | American College of Healthcare Executives | American College of Healthcare Executives | American College of Healthcare Executives | American College of Health Care Administrators | American College of Health Care Administrators | American College of Health Care Administrators |
| RESOURCE | Recommended Tools | Individualized Care Curriculum: Unit 3 – Management That Makes A Difference (Staff Retention, Susan B. Eaton Leadership Materials) | Literature / Latest Research | Employee Retention: Solving the Healthcare Crisis | Human Resources in Healthcare: Managing for Success, 2 nd Edition | Winning the Talent War: Ensuring Effective Leadership in Healthcare | Cultural Competence in Healthcare | From Soup to Nuts: The Best Practices for Finding and Keeping Healthcare Employees | Observations on Excellence: The Team Within |



STAFF TURNOVER RESOURCES (cont.)

| RESOURCE | LOCATION | CONTACT INFORMATION |
|--|----------------------------------|---|
| Literature / Latest Research (cont.) | | |
| You Are Worth It | American Health Care Association | |
| Mentoring for Eldercare Workers | American Health Care Association | |
| Solving the Frontline Crisis in Long - Term Care | American Health Care Association | 1201 L Street, N.W. |
| CNA Mentoring Made Easy | American Health Care Association | Washington, DC 20003 Phone: (202) 842-4444 |
| CNA Career Ladder Made Easy | American Health Care Association | |
| How to Be a Nurse Assistant (Training Library) | American Health Care Association | |
| Everyday Excellence | American Society for Quality | P.O. Box 3005 Milwaukee, WI 53201-3005 |
| | | 600 North Plankinton Avenue Milwaukee, Wl 53203 Phone: (800) 248-1946 |
| A Practical Guide Recruitment and Retention: Skills for Nurse Managers | hcPro healthcare Marketplace | |
| CNA Training Advisor: Lesson Plans for Busy Staff Trainers | hcPro healthcare Marketplace | ang I shoot OOC |
| LTC Nursing Assistant Trainer (Free E-zine) | hcPro healthcare Marketplace | Marblehead, MA 01945 Phone: (877) 727-1728 |
| Long-Term Care Nursing Advisor (Free E-zine) | hcPro healthcare Marketplace | |
| CNA Training Solution Video Kit | hcPro healthcare Marketplace | |



STAFF TURNOVER RESOURCES (cont.)

| / Latest Research (cont.) For Eldercare Workers Training Solutions I Care Nursing Leadership gement (See: Nurse Long-Term Care Nursing Workforce and nortage, Recruitment and Framework for Workforce ad with Character at Work | | |
|---|---|---|
| kers Idership e and int and rkforce at Work | | |
| and and rkforce at Work | | 1995 Wayne Road |
| eadership rse e and nent and /orkforce mpany: | | Cnambersburg, PA 17201 Phone: (717) 263-7766 |
| e and nent and vorkforce mpany: | University of Minnesota Center for Gerontological | School of Nursing |
| | | University of Minnesota 5-140 Weaver-Densford Hall |
| | | 308 Harvard Street |
| | | Minneapolis, MN 55455 Phone: (800) 598-8636 |
| | Society for Healthcare Strategy & Market | 3280 Summit Ridge Parkway |
| | | Duluth, GA 30096 Phone: (800) 242-2626 |
| How to Lead with Character at Work | ship Group | Publicist: |
| יו טומי | | Cathy S. Lewis & Co. Publicists |
| | | Woodstock, NY 12498 Phone: (845) 679-2188 |
| Specialty Organizations and Links | | |
| CAEL Healthcare – Career Lattices Council for Adult an | Council for Adult and Experiential Learning | Phone: (215) 731-7170 Email: <u>healthcare@cael.org</u> |
| Geriatric Care Specialist Certification National Association | National Association for Health Care Assistants | 1201 L Street NW Washington, DC 20005 Phone: (800) 784-6049 |



STAFF TURNOVER RESOURCES (cont.)

| Specialty Organizations and Links (cont.) Resource listing for Caregivers National Association for Empowering Caregivers National on-line library for direct-care workers National Clearinghouse on the Direct Care Workforce Recruitment and Retention Paraprofessional Healthcare Institute The Workforce Stability Institute — Retention Connection | |
|--|---|
| ing for Caregivers ne library for direct- and Retention ting e Stability Institute – | |
| ne library for direct- and Retention ting | wering Caregivers 425 West 23 rd Street Suite 9B |
| ne library for direct- and Retention ting | New York, NY 10011 |
| ne library for direct- and Retention ting | Phone: (212) 807-1204 |
| ne library for direct- and Retention ting e Stability Institute – | Email: info@care-givers.com |
| and Retention ting e Stability Institute – | Direct Care 349 East 149 th Street, 10 th Floor |
| | Bronx, NY 10451 |
| 1. | <u>nstitute</u> Phone: (718) 402-7766 |
| | Email: info@paraprofessional.org |
| | 4057 Battleground Avenue |
| Ketention Kesources | Greensboro, NC 27410-8410 |
| | Phone: (336) 282-9370 |
| | Email: info@hermangroup.com |



Implementation Guide:

Goal 8: Improving Consistent Assignment of Nursing Home Staff

This Implementation Guide provides efficient, consistent, evidence-based approaches to increasing consistent assignment of nursing home staff.

www.nhqualitycampaign.org

ADVANCING EXCELLENCE IN AMERICA'S NURSING HOMES

A Campaign to Improve Quality of Life for Residents and Staff

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American Association of Nurse Assessment Coordinators

American College of Healthcare Administrators

American Health Care Association

American Medical Directors Association

Centers for Medicare & Medicaid Services and its contractors, the Quality Improvement Organizations

National Association of Health Care Assistants

National Citizen's Coalition for Nursing Home Reform

National Commission for Quality Long-Term Care

The Commonwealth Fund

The Evangelical Lutheran Good Samaritan Society



Goal 8: Improving Consistent Assignment of Nursing Home Staff

Goal 8: Being regularly cared for by the same caregiver is critical to quality of care and quality of life. To maximize quality as well as resident and staff relationships, the majority of nursing homes will employ "consistent assignment".

Objectives – By September 2008:

- a) One-third of nursing homes will have adopted "consistent assignment" among CNAs.
- b) 5,300 nursing homes will have adopted "consistent assignment" among CNAs.

ICON KEY Recognition/Assessment Cause Identification Management Monitoring

The icons in the box to the left will be used throughout this guide to help identify those processes related to key evidence-based approaches.



Approach to Implementation

A nursing home working to increase consistent assignment of staff should follow these steps.



Recognition / Assessment

- 1. Identify consistent assignment as an area for potential improvement in nursing home performance.
 - Based on nursing home quality improvement data, quality measures, staff survey results, comparison to benchmarks, etc.
- 2. Identify authoritative information available for the topic.
 - Review references listed in the Consistent Assignment Resources, as well as reliable and evidence-based performance improvement and quality improvement literature; recommendations from professional associations and organizations.
 - Identify ways to distinguish the reliability of information about consistent assignment (i.e., how to separate valid ideas from myths and misconceptions about the topic).
- 3. Identify current approaches to consistent assignment in the nursing home. For an overview of the process, see the Consistent Assignment Process Review Tool and related Consistent Assignment Flow Diagram.
 - Are the nursing home's approaches consistent with the steps identified in the Consistent Assignment Process Framework?
 - Identify the nursing home's current approach to assigning staff, and its basis.
 - Who in the nursing home decides on assignment of staff, and what is the basis for their chosen approaches?
- 4. Identify areas for improvement in processes and practices.

 Using the information gathered in Steps 2 and 3 above, compare current with desired approaches to consistent assignment. Address the following:
 - Check whether current nursing home policies / protocols and practices are compatible with desirable approaches to consistent assignment.
 - Check whether desirable approaches are being followed consistently.
 - Identify whether anyone has been reviewing and comparing approaches to consistent assignment to desirable ones.



Approach to Implementation (cont.)

Have issues related to consistent assignment been identified previously? Were they followed up on? Has the nursing home previously evaluated its performance and taken steps to improve?



Cause Identification

- 5. Identify the causes of issues related to performance and practice, including root causes.
 - Identify issues and practices that are inhibiting attaining the goal of increasing consistent assignment.
 - Identify underlying causes (including root causes) of, and factors related to, inconsistent assignment of staff in the nursing home.
 - Identify reasons given by those who do not adequately follow desirable approaches.



Management

- 6. Reinforce optimal practice and performance.
 - Continually promote "doing the right thing in the right way."
 - Follow the steps of the *Consistent Assignment Process Framework*, throughout the nursing home.
 - Identify and use tools and resources to help implement the steps and address related issues.
 - Based on information and data collected about the organization and the processes and results related to consistent assignment, reinforce systems and processes that are already optimal.
- 7. Implement necessary changes.
 - Address underlying causes (including root causes) of the challenges and obstacles to the nursing home's capacity to implement consistent assignment.
 - Implement pertinent generic and cause-specific interventions.
 - Address issues of individual performance and practice that could be improved in trying to increase consistent assignment.
 - Refer to Consistent Assignment Resources for resources and tools that can help to address this goal.



Approach to Implementation (cont.)

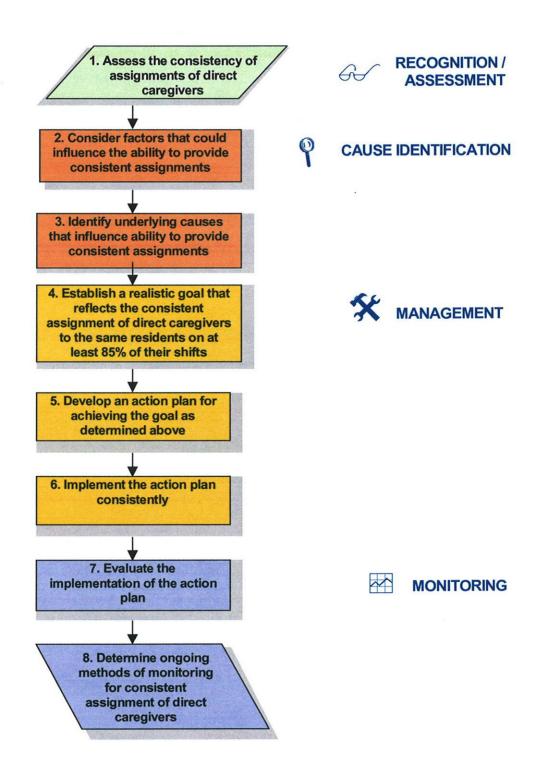


Monitoring

- 8. Reevaluate performance, practices and results.
 - Recheck for progress towards getting "the right thing done consistently in the right way."
 - Use the Consistent Assignment Process Review Tool to identify whether all key steps are being followed.
 - Use the Consistent Assignment Process Framework and related references and resources from Steps 2-4 above, and repeat Steps 2-7 (Recognition / Assessment, Cause Identification, and Management) until processes and practices are optimal.
 - Continue to collect data on results and processes.
 - Evaluate whether changes in process and practice have helped attain desired results.
 - Adjust approaches as necessary.



Flow Diagram -Consistent Assignment Process Framework





| PROCESS STEP | EXPECTATIONS | RATIONALE | |
|--|---|---|---|
| PROBLEM RECOGNITION / ASSESSMENT | SESSMENT | | |
| 1. Assess the consistency of assignments of direct caregivers. | The nursing home will use a systematic approach to assess the consistency of assignments of direct caregivers. The nursing home may choose to look at the assessment data on a small and manageable sample scale by: Targeting one specific hall or unit. Targeting one specific unit. Targeting one specific group of direct caregivers (CNAs who provide all ADL care, or CNAs who provide all restorative nursing care, LPNs, charge nurses, etc.) Targeting one specific group of residents (all short stay residents, etc.) Once the nursing home has selected the above sample, they will review existing records. For example: Review the direct caregiver schedules to determine how many times each direct caregiver was assigned to the same unit, hall, shift, etc. Review the direct caregiver schedules to determine if the direct caregiver was assigned the same residents for each day/shift worked. Review the resident ADL records and shift assignment / work sheets to cross check | "Consistent Assignment" refers to having the same caregivers consistently caring for the same residents on at least 85% of their shifts. A systematic, standardized assessment process is critical to permit the nursing home to use the information to enhance their quality improvement efforts. Developing and maintaining a systematic, standardized assessment process will permit the nursing home to measure, over time, any improvement or decline related to their established goal. Assessing the nursing home's current situation allows it to establish a measurable benchmark from which to develop their quality improvement action plan. Assessing the consistency of consistent assignment will permit the nursing home to also measure its impact on other indicators, such as: Resident satisfaction and choice. Employee satisfaction and job retention. | refers to having sistently caring a assessment int the nursing ion to enhance t efforts. Ing a assessment arsing home to improvement or stablished goal. In and choice. I and choice. I at least 85% and so hand iob in and job in and job is a stable of the consistent and choice. |



| PROCESS STEP | EXPECTATIONS | RATIONALE |
|---|---|---|
| | with the direct caregiver schedules to ensure accuracy of information being assessed. Review the direct caregiver time cards / records. | |
| CAUSE IDENTIFICATION | | |
| 2. Consider factors that could influence the ability to provide consistent assignments. | The nursing home will identify factors that could impact its ability to provide consistent assignments of direct caregivers. This may include (but is not limited to): Existing staffing policies. Organizational culture. Informal staffing practices. Leadership decisions / directives Leadership flexibility / desires Direct caregiver choices / desires Direct caregiver numbers / availability Direct caregiver flexibility Direct caregiver flexibility Resident desires / choices Family desires / choices Physical plant design / layout The nursing home will identify any trends and patterns related to identified factors. | Identifying factors that contribute to the ability to provide consistent assignments of direct caregivers at the start of the process helps to: Enhance the success of the process in meeting the goal. Ensure involvement of all parties. Identify formal and informal structures. Identifying trends and patterns will alert the nursing home to readily addressable issues ("low hanging fruit") that can help improve the situation, as well as those that may require a more detailed action plan. |



| PROCESS STEP | EXPECTATIONS | RATIONALE |
|---|---|---|
| CAUSE IDENTIFICATION (cont.) | | |
| 3. Identify underlying causes that influence ability to provide consistent assignments. | The nursing home will review the above noted trends and patterns and identify the specific causes that influence its ability to provide consistent assignments for direct caregivers. To help identify these underlying causes, the nursing home may: Conduct additional fact gathering exercises to identify and clarify trends and patterns. For example, a trend may be that many longstanding direct caregivers desire consistent assignments but the more recently hired direct caregivers do not. The nursing home would interview both categories of direct caregivers to clarify the basis for their different desires. Assess to determine any trends and patterns related to: Specific halls / units Resident populations Staff populations Conduct a root cause analysis of a specific trend or pattern. For example, if a shortage of available direct caregivers were identified as influencing consistent assignment, then the nursing home would perform a root cause | ldentifying underlying causes will help the nursing home develop specific interventions in the action plan to address those underlying causes and make it more likely that the action plan will meet the established goal. For example, longstanding CNAs may have a different understanding than newer CNAs about the meaning of "consistent assignment". Findings identified through a root cause analysis may take the nursing home longer to address, as these root causes may be imbedded in the nursing home's formal and informal structures. However, to have sustained improvement, the nursing home should strive to uncover and address these root causes. |



| PROCESS STEP | EXPECTATIONS | RATIONALE |
|--|---|---|
| CAUSE IDENTIFICATION (cont.) | | |
| | analysis to try to identify the underlying reason for not having enough direct caregivers. These may include (but not be limited to): An in-depth review of staffing budgets. Wage and benefit comparisons. Retention / turnover data, etc. Availability of qualified individuals. | |
| * MANAGEMENT | | |
| Establish a realistic goal that reflects the consistent assignment of direct caregivers to the same residents on at least 85% of their shifts. | The nursing home will establish specific and realistic targets to measure within the goal. Realistic target measurements may include: All direct caregivers in the nursing home will provide care to the same residents 85% of their shifts. Direct caregivers on a specific hall / unit will provide care to the same residents 85% of their shifts. Direct caregivers on a specific shift will provide care to the same resident 85% of their shifts, etc. | The nursing home may need to begin with a realistic, achievable goal. That may include implementing the action plan on one hall / unit or one shift at a time. This can allow the nursing home to adjust to changes in a manageable way, thus increasing the likelihood of meeting the established goal. The nursing home must know and understand their current position and their ultimate goal in providing consistent assignment of direct caregivers. Goal setting allows the nursing home to envision potential achievements through their quality improvement efforts. |



| PROCESS STEP | EXPECTATIONS | RATIONALE |
|---|---|--|
| MANAGEMENT (cont.) | | |
| 5. Develop an action plan for achieving the goal as determined above. | The nursing home will use the findings determined through the Cause Identification steps (Steps # 2 and 3) to help develop an action plan to meet the established goal. This may include (but not be limited to): Develop and incorporate a written plan of action into the nursing home's overall quality improvement process. Identify specific interventions to implement. Identify specific time frames to complete the interventions. Identify the staff responsible to implement the interventions within the identified time frames. | - The nursing home needs an action plan as their "road map" to move forward in meeting their goals related to consistent assignment of direct caregivers. - Without an action plan to guide the quality improvement efforts, it is less likely that the goal will be achieved and sustained. - In determining the interventions for the action plan, the nursing home should consider using available resource materials and best practices from expert sources. |
| 6. Implement the action plan consistently. | - The nursing home will communicate to staff (residents and families as appropriate) the action plan goals, interventions, time frames, and responsible parties The nursing home will provide a copy of the action plan to all parties involved, as appropriate. | The success of any action plan relates to successfully communicating with parties involved. All parties involved should be aware of what is expected of them. All parties involved in the action plan should have the opportunity to ask questions and provide feedback during implementation of the action plan. |



| PROCESS STEP | EXPECTATIONS | RATIONALE |
|--|--|--|
| MONITORING | | |
| 7. Evaluate the implementation of the action plan. | The nursing home will periodically evaluate the effectiveness of the action plan. The nursing home may also need to reevaluate the action plan in between scheduled evaluation times, as implementation barriers are identified. This reevaluation may include (but is not limited to): Are specific interventions being implemented as written? Are the interventions being implemented within the identified time frames? Are the identified responsible staff members implementing the interventions? What are the results / findings related to the implementation of the action plan? The nursing home updates and revises the action plan as indicated by the evaluation process. | - Action plans should be working documents for the nursing home that are revised as indicated during the evaluation process. Evaluation of the action plan allows the nursing home to determine if they are "on the right track" or need to take a different path to try to meet their goal. Barriers commonly arise as action plans are being implemented, which may necessitate revisions in order to achieve the goal. |
| 8. Determine methods of ongoing monitoring for consistent assignment of direct caregivers. | Upon completing implementation of the action plan, the nursing home will monitor periodically for whether the goal continues to be met (maintained). The nursing home will determine consistent methods by which they will monitor. These may include (but are not limited to): Resident interviews. | - The nursing home should periodically monitor compliance with the action plan to determine if the goal is being met consistently. This allows it to determine if process changes are integrated fully within the nursing home's culture or if the process continues to need attention. |



| RATIONALE | | The nursing home may choose one or more methods for monitoring compliance with the goal. Without ongoing monitoring, the nursing home can only speculate. |
|--------------|--------------------|---|
| EXPECTATIONS | | Direct caregiver interviews Family interviews Review of direct caregiver schedules and/or assignment sheets. Review of direct caregiver time records / cards, etc. |
| PROCESS STEP | MONITORING (cont.) | |



CONSISTENT ASSIGNMENT PROCESS REVIEW TOOL

| Abstra | action Date: | | | | | |
|---------------|--|-------------------|----------------------|----------|---|-------------|
| Nursir | | Nursing | Υ | | | |
| home | 9 | home | | | | |
| Name | : | Address: | | | | |
| How n | nany workers involved? | | being evaluated? | | | |
| | CNAs only | | Entire nursing hor | ne | *************************************** | |
| | | | Nursing home uni | | Please | |
| | CNAs/LPNs/LVNs only | | specify: | | | |
| | CNAs/LPNs/LVNs/RNs and others | | Shift: | | | |
| How n | nany residents involved? | How long ha | as consistent assigr | nment be | en use | ?t |
| <i>6</i> ₽^ R | ECOGNITION/ASSESSMENT | | | | | |
| | 地 国的"全国国际"的"各种"的"各种"的"各种"的"特别"的"特别"的"特别"的"特别"的"特别"的"特别"的"特别"的"特别 | | | YES | NO | N/A |
| 1. | Were worker schedules reviewed to determi | ne how many | times direct | | | |
| 2. | caregivers were assigned to the same unit, I | hall, shift, etc. | ? | | | |
| ^{2.} | Were assignments and other records (time of care workers were assigned to care for the state of | cards) reviewe | ed to assure direct | | | |
| | worked? | same resident | each day / shift | | | |
| 0 0 | | | | | | |
| Y CA | AUSE IDENTIFICATION | | | | | |
| 0 | I But a first and first an | | | YES | NO | NA |
| 3. | Did staff identify factors that could impact the | e ability to pro | vide consistent | | | |
| 4. | assignments, such as existing staffing policies Did staff identify any trends and patterns rela | es, leadership | directives, etc.? | | | - |
| | provision of consistent assignments? | aled to factors | impacting the | | | |
| 5. | Did staff conduct a root cause analysis to ide | entify underlyi | ng reasons for | 1 | | |
| | trends and patterns affecting the provision of | f consistent as | ssignments? | | | |
| * MA | NAGEMENT | | | TO THE | | |
| | 在 的一种特别的人们是不是一种的 | | | YES | NO | N/A |
| 6. | Did staff establish a realistic goal for providir | ng consistent a | assignment | | | |
| 7 | (entire building, hall / unit, shift)? | | | | | |
| 7. | Did staff develop a written action plan that in | cludes specifi | c interventions, | | | |
| | time frames and assigned responsibility to m consistent assignments? | leet the goal c | of implementing | | | |
| 8. | Did staff communicate and provide a copy of | the action of | an to all involved | | | |
| | parties (residents, families, and staff) as app | ropriate? | arr to air irrvorved | | | |
| ₩ MC | NITORING | | | | | |
| | | | | YES | NO | NA |
| 9. | Is the action plan evaluated at specific interv | als to monitor | assignment | | | |
| 40 | progress, identify unanticipated barriers, and | make update | es where needed? | | 6 | |
| 10. | Are resident, family and staff interviews period | dically done t | to monitor | | | |
| | satisfaction with assignment schedules? | | Management | | | |
| | | | | | | |



CONSISTENT ASSIGNMENT RESOURCES

| CONTACT INFORMATION | | MedQIC is an Internet resource. Questions related to Nursing Home content can be directed to: Teresa M. Mota, RN or Paula Mottshaw Quality Partners of Rhode Island 235 Promenade Street Suite 500, Box 18 Providence, Rhode Island 02908 Phone: (401) 528-3200 | | Rhode Island Medical Society 235 Promenade Street Suite 500 Providence, RI 02908 Phone: (401) 331-3207 | (For reprints) Journal of Gerontological Nursing | 6900 Grove Road Thorofare, NJ 08086-9447 USA Phone: (856) 848-1000 E-mail: jgn@slackinc.com | My InnerView Inc. 500 Third Street Wausau, WI 54403 Phone: (715) 848-2713 Email: info@myinnerview.com |
|---------------------|-------------------|--|------------------------------|---|--|---|---|
| LOCATION | | MedQIC | | Medicine and Health in Rhode Island | Journal of Gerontological Nursing | Journal of Gerontological Nursing | My Innerview |
| RESOURCE | Recommended Tools | Individualized Care Curriculum: Unit 3 – Management That Makes A Difference (Consistent Assignment, Staff Retention, etc.) | Literature / Latest Research | Farrell, D. The Case for Consistent Assignment in the Nursing Home Setting. Medicine and Health in Rhode Island. May 2006. 89:5; 187-188 | Campbell, S. Primary Nursing. J Gerontological Nurs. 1985. 8:12-6 | Goldman, BD. Nontraditional Staffing Models in Long-Term Care. J Gerontological Nurs. 1998. 24:29-34. | Pilot Study Shows Value of Consistent Assignment |



CONSISTENT ASSIGNMENT RESOURCES (cont.)

| RESOURCE | LOCATION | CONTACT INFORMATION |
|---|---|-----------------------------------|
| Literature / Latest Research (cont.) | | |
| Quality Improvement in Nursing Homes: A Call to Action | Journal of the American Medical Directors Association | (For reprints) |
| k for Staffing | Geriatric Nursing | 360 Park Avenue South |
| | | New York, NY 10010 |
| Nurs 2000; 21:262-7. | | Phone: (212) 633-3813 |
| | | Email: reprints@elsevier.com |
| Patchner, MA. Essential Staffing For | FindArticles.com | (For reprints) |
| Improved Nursing Home Care: The | | PARS International Corp. |
| Permanent Assignment Model. | | Phone: (212) 221-9595 x123 |
| Nursing Homes, June 1993. | | E-mail: joe.nunziata@parsintl.com |
| | | Website: www.magreprints.com |