CMP In Action: Person-Centered Staff Engagement Project

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Deputy State Long-Term Care Ombudsman

aging.ohio.gov/services/ombudsman

Ombudsman Mission

• The Office of the State Long-Term Care Ombudsman advocates for excellence in long-term services and supports wherever consumers live.
Structure

- State Office
- 12 regional programs
- 72 paid staff
- 200 volunteers
- All representatives of the Office

NH Quality Initiative

- Improve the provision of Person-Centered Care in NHs
- Quality improvement projects that provide resources and on-site education promoting PCC strategies and positive resident outcomes

ORC 173.60
Staffing challenges in the news

Demographic changes on the horizon

Impetus

Ombudsmen verified complaints

Family Satisfaction Survey comments

Concept

Four foundations:
(1) consistent assignment;
(2) huddles;
(3) involving CNAs in care planning; and
(4) QI closest to the resident.
Tools

Project Ombudsmen
Details

- 2 year project
- Roughly $2 million
- 12 regional ombudsmen
- 2 state project staff (40%)
- 5 statewide collaborative training events
- Quarterly roundtables
- 2 annual conferences by Person-Centered Care Coalition
- B&F contracted services
- Scripps Gerontology evaluation
- Toolkits, books

Enticement

- Recruitment
  - 12 project ombudsman assigned to recruit up to 10 facilities each
- Maximizing MDS, QIS, and QAPI
  - MDS 3.0 requires interviewing about customary routines and honoring those routines
  - Reducing distress and use of antipsychotics
  - QAPI teams
- Ohio law
NH Quality Initiative

• Each NH home shall participate every 2 years in at least one of the quality improvement projects included on the list made available by the department of aging

  ORC 3721.072 (B)

  https://aging.ohio.gov/nursinghomequalityimprovement

Evaluation

Dr. Jane Straker
Principal Investigator
Director of Research, Senior Research Scholar
Scripps Gerontology Center at Miami University (of Ohio)
Baseline Data Collection

Complete ONE survey for each nursing home.

1. How quickly after a new resident’s admission are his/her customary nap times, bedtime, etc assigned or cared for by the resident?
   - (2) 4 hours, but the same day as the resident’s arrival
   - (3) Next day
   - (4) 2-3 days
   - (5) >3 days
   - (6) The information is not provided to the CNA

2. How quickly after a new resident’s admission are his/her customary nap times, bedtime, etc assigned or cared for by the resident?
   - (2) 4 hours, but the same day as the resident’s arrival
   - (3) Next day
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Index of Person-Centered Care (IPCC) (Straker & Reece, 2015)

<table>
<thead>
<tr>
<th>Item</th>
<th>Always</th>
<th>Often</th>
<th>Occasionally</th>
<th>Never</th>
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<tbody>
<tr>
<td>1. Do you have a good understanding of the residents you are caring for?</td>
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<td>2. Do you find it hard to talk to residents because you don’t know enough about them?</td>
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<td>3. Do you feel like you know each resident as a unique individual?</td>
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<td>4. Are residents able to decide when they want to eat?</td>
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<td>5. Are residents able to decide how they want to bathe (i.e., tub, shower)?</td>
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<tr>
<td>6. How often do you ask residents about how they want things done?</td>
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<td>7. How often do you participate in care planning for residents?</td>
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<td>8. Do you have the time you need to learn the histories of the residents?</td>
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<td>9. Do your supervisors consider your preferences when making decisions</td>
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Baseline Data Collection

- Ombudsman Verified Complaints
- State Survey citations
- QMs

Outcomes

- A 10% reduction in ombudsman verified complaints in participating nursing homes
- A 10% reduction in citations issued by the State Survey Agency
- A 10% improvement in staff stability as measured by the Advancing Excellence LTC Collaborative staff turnover/retention tool; and
- A 20% improvement in the organizational tools
Activities

• Hosted 5 statewide conferences
  – Action Plans
• Each region held quarterly roundtables
  – Agendas based on the preceding conference and action plans

The Bundles

Four practices together provide the infrastructure for engaging staff in individualizing care to continually improve quality of care and quality of life outcomes.

-B&F Consulting
Staffing Foundations

From
- Sign on bonuses
- Eating the young
- Death by orientation video
- Hire anyone & use agencies
- Discipline for tardy and absent

To
- Stay bonuses
- Mentorship
- Active orientation
- Selective hiring
- Reward for perfect attendance
Resident Voice

- Resident Council development
  - Regional resident conference calls
- Resident Interview Committees
Primary areas of focus

• Staff recruitment, retention and reducing turnover
• Communication Infrastructure
• Translating foundations into clinical quality
• Leadership
Unexpected good outcomes

• Retention – 115 homes finished with us
• To the ombudsman program:
  – Use in SFF outreach
  – Expertise among staff ombudsmen
• To the homes
  – Peer relationships
  – Collaborative learning in other areas

Surprises and lessons learned

• Administrator/Management turnover

<table>
<thead>
<tr>
<th>Change in the LNHA</th>
<th>Change in the DON</th>
<th>Change in other significant management personnel</th>
<th>Facility owner or operator change</th>
</tr>
</thead>
<tbody>
<tr>
<td>40.0%</td>
<td>46.1%</td>
<td>16.9%</td>
<td>18.2%</td>
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• Cancellation of the PCC Coalition Conference
• Turnover among our project ombudsmen
More information

• Grant proposal, approval and reports:

https://medicaid.ohio.gov/RESOURCES/CMP-Reinvestment-Program

State Ombudsman toll-free number:
1-800-282-1206

aging.ohio.gov/services/ombudsman