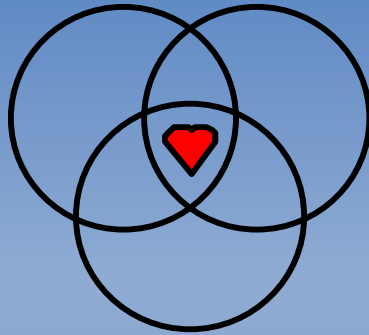


Welcome to: Learning Session 1



Nursing Home Person Centered Care (PCC) Pilot Collaborative!

Introductions!

- Name and Title
- How long have you been at your current facility?
- One personal thing about yourself.

Confront the Brutal Facts of Reality

Presented by: Joseph Bestic, NHA, BA
HSAG Clinical Quality Specialist

With permission from author:

David Farrell, MSW, NHA
CEO, Wellspring Institute

Objectives

- Prepare for the inevitable
- Sell it
 - Business case
 - Quality case
- Statistics
- Research-based evidence

Turnover and Vacancies

Nationwide

- **Turnover**
 - RNs = 50%
 - LPNs = 50%
 - CNAs = 70%
- **96,000 Vacant FTEs**
 - 52,000 CNAs
 - 25,100 LPNs
 - 13,900 RNs

21 Pilot States

- **Turnover**
 - RNs = 43%
 - LPNs = 50%
 - CNAs = 77%
- **Vacant FTEs**
 - 25,000 CNAs
 - 9,400 LPNs
 - 7,700 RNs

AHCA, 2002

Who are the CNAs?

- Deliver 80% of hands-on care
- 90% are women
- 50% are non-white
- Single mothers age 25–54
- 50% are near or below the poverty line

GAO, 2001

SNF Statistics

- 16,500 SNFs
 - 15,000 free-standing
 - 75% for-profit
 - Top 10 chains dropped 20% of their beds
- 1.8 million beds
- Average occupancy 86.6%
- Serve 3.5 million per year
- Total spending \$99 billion in 2001

CMS Healthcare Industry Market Update 2002

SNF Statistics

continued

- Net profit margin for-profits 2.2%
- Net profit margin of non-profits 0.3%
- Average Medicaid rate \$115/day
 - \$9.78 less than avg. daily costs
- Labor accounts for 60%
- % of total census / % of revenue
 - Private pay 20% / 30%
 - Medicare 10% / 25%
 - Medicaid 70% / 45%

CMS Healthcare Industry Market Update 2002

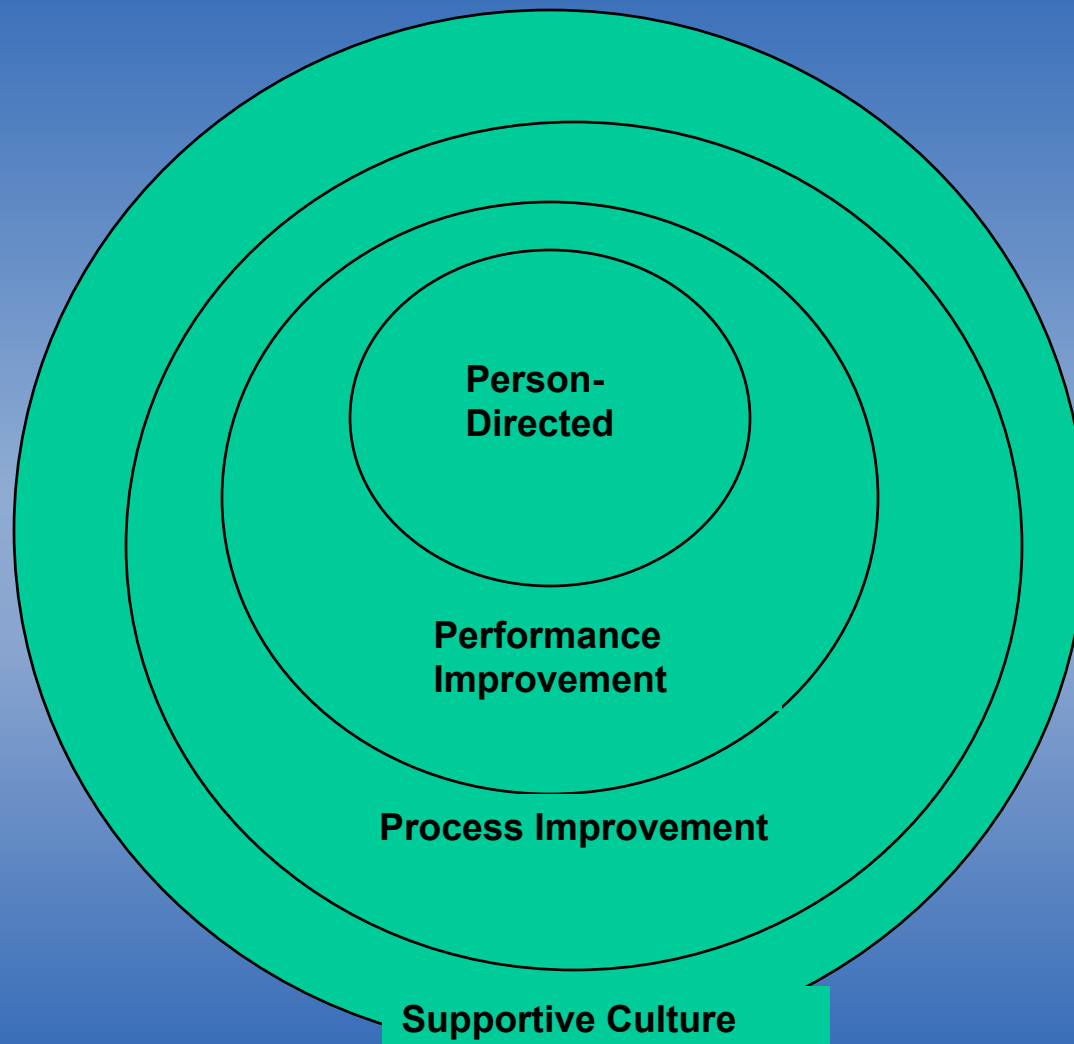
Why Is Culture Change Necessary?

- **Satisfaction**
- **Quality of life**
- **Quality of care**
- **Financial**

The Impact of Leaders

- Nursing homes—a short history
- Research-based evidence
- Administrator and DON influence
- Leader's actions
 - Culture
 - Retention
 - Quality outcomes

Four Facets of the Improvement Strategy



Institute of Medicine

- Quality of care depends on the performance of the workforce
- Staffing levels are a necessity
- Other key factors:
 - Education
 - Supervision
 - Job satisfaction
 - Turnover
 - Leadership
 - Organizational culture

Wunderlich G. S., “Improving the Quality of Long Term Care,” IOM, 2000

Existing Explanations for High Turnover

Frontline workers:

- Do not have a good work ethic
- Are not reliable
- Have little support at home
- Have a lower commitment
- Will leave for 10 cents more per hour
- If we could pay them more they would stay

Jervis, 2002

State Wage Pass-Through Legislation

Has it made a difference?

- 21 states passed legislation
- Analysis of 10 states
 - 3 states reported no impact
 - 3 could not determine
 - 4 reported marginally positive impact
- Data does not support efficacy
- Simply a first step

PHI, Workforce Strategies No. 1, 2003

Top Reasons for Leaving

- Too many patients
- Not valued by the organization
- Dissatisfaction with supervisor
- Could not provide quality care
- Unsafe working conditions
- Not enough support from peers

Mickus, M., Luz, C., Hogan, A., “Voices from The Front.” 2004

Institutional Model

- **Low morale**
- **Great responsibility**
- **Little autonomy**
- **Emotional demands**
- **Inadequate orientation**
- **Lack of flexibility**
- **Environment**
- **Stress!**
- **Lack of supplies**
- **Lack of systems**
- **RN/CNA conflicts**
- **Inadequate leadership**

Cost and Quality

Marilyn Rantz research findings:

- Retention translates into increased efficiency
- Retention leads to better quality outcomes
- Better quality outcomes lead to lower costs
- On average—\$13.50 less PPD
- Annual savings (90 residents per day) = \$440,000

Rantz, M., “Does Good Quality Care in Nursing Homes Cost More or Less Than Poor Quality Care?” *Nursing Outlook*, April 2003

The High Cost of Turnover

Average costs:

- One CNA \$2,500
- One LPN \$4,000
- One RN \$8,000

Case study: 120 bed SNF with 50 CNAs

- Average turnover of CNAs = 77%
- Annual cost = \$95,000

Cullen, K., "Recruiting and Retaining Nurses," 2000

Calculating the Cost of Turnover

- Advertisement costs
- Staff time to interview, check references, etc.
- Drug screen, pre-employment physical
- Classroom orientation
- Unit orientation
- Cost of coverage of the vacant position
 - Agency \$25–\$30 per hour CNA
 - Overtime and double time

Cullen, 2000

Injury Perils of LTC Staff

- Lost-time injuries are twice the U.S. average
- More likely to be injured on the job than:
 - Construction workers
 - Police
 - Firefighters
 - Coal miners
 - Manufacturing plant workers
- Primarily due to short staffing
- Significant cost to providers

Wunderlich, 1996

The Impact of Turnover on Clinical Care

Consumers' perception of quality of care

CNAs report what gets neglected:

- Range of motion
- Hydration
- Feeding
- Bathing

Hawes, 2002

High Turnover = Poor Outcomes

Interrupts continuity:

- Incontinence
- Facility acquired pressures sores
- Urinary tract infections
- Falls and fractures

Dresser et. al. 1999; Harrington et. al. 1999

Measures of “Caring” vs. Clinical Outcomes

Stable workforce results in tacit knowledge:

- Lifting and turning safely
- Who has grandchildren
- Who wears glasses for what
- Individual preferences

Eaton, S., “Beyond Unloving
Care.” 2000

Abuse and Neglect

Preventable Causes:

- Inadequate training
- Short staffing
- Stress
- Burnout
- Frequent thoughts of quitting

Pillemer and Moore, "Abuse of Patients in Nursing Homes." 1989

Litigation

- Only 8% go to trial
 - 50% lead to payment of plaintiff
- 92% settled out of court
 - 88% payment to plaintiff
 - Average payment = \$406,000
- Initiated in reaction to:
 - Death
 - Pressure ulcers
 - Weight loss
 - Emotional distress

Stevenson and Studdert 2003

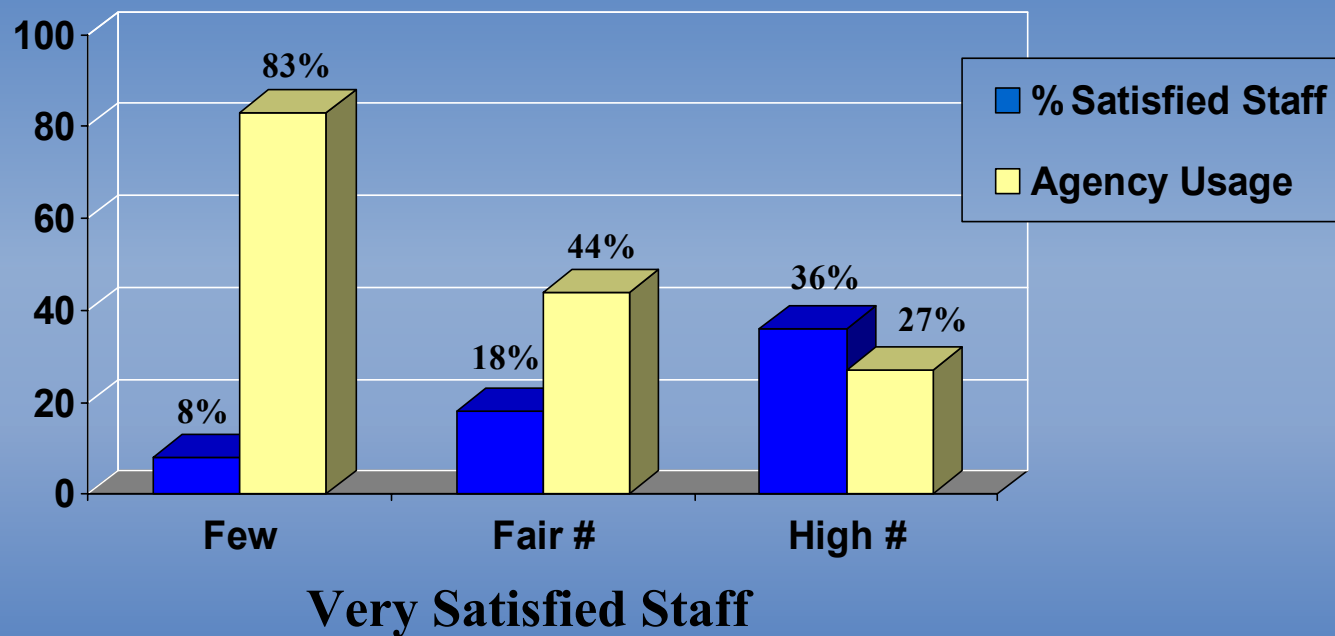
Revenue Growth

- Marketing
- Public relations
- Occupancy rates
- Improved quality mix
- Days in accounts receivable

Tellis-Nayak, V., 2003

Agency Staff Usage and Staff Satisfaction

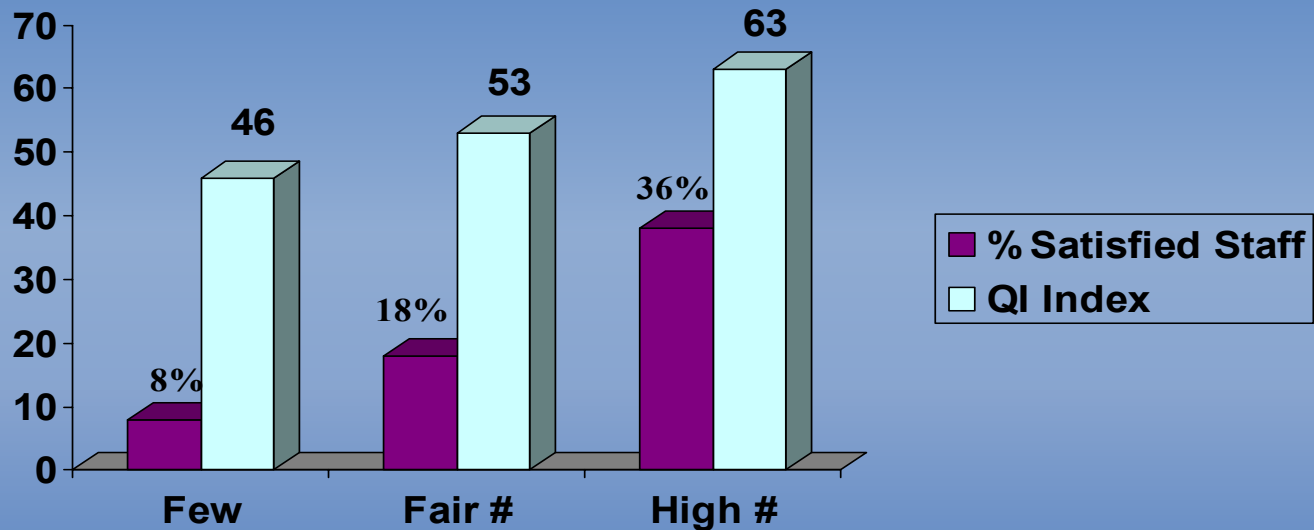
In Three Groups of Facilities



Tellis-Nayak, V., 2003

QI Index and Staff Satisfaction

In Three Groups of Facilities



Very Satisfied Staff

Tellis-Nayak, V., 2003

Keeping Frontline Workers

Methodology:

- Six high-quality, mid-sized SNFs in Kansas
- Training in interpersonal skills and empathy
- CNAs and nurse supervisors

Based on:

- Nurse supervisors with good interpersonal skills leads to lower CNA turnover (Waxman, 1984)
- Listening to and responding to CNA recommendations leads to lower turnover (Banaszak and Hines, 1996)
- Poor interpersonal skills and lack of mutual empathy were root causes of turnover (Lescoe-Long and Long, 1998)

KAHSA, “Keeping Frontline Workers,” 2003

Keeping Frontline Workers (continued)

Findings:

- Impact on nurse supervisors
- Less noticeable by CNAs
- Pervasive sense of cynicism
- Stress ranked high related to short staffing
- When short staffed, CNAs, focus—low wages

KAHSA, 2003

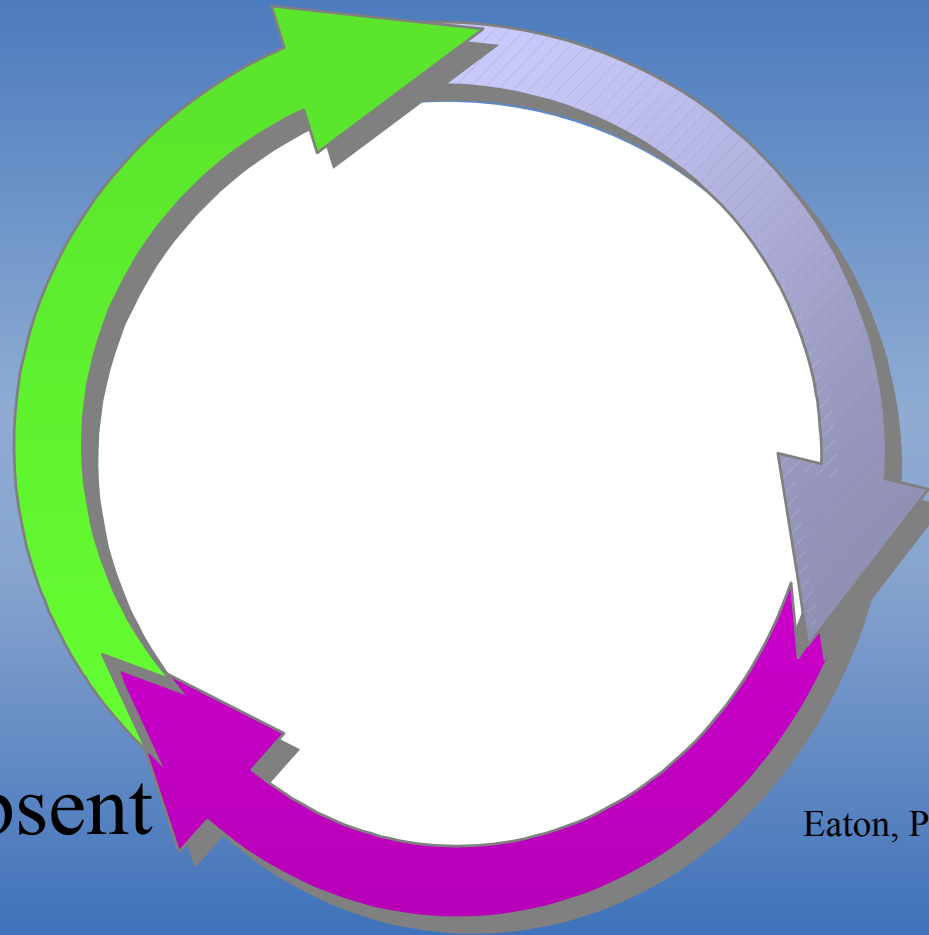
“What a Difference Management Makes”

- Paired four high- vs. four low-turnover facilities
- Similarities
- 159 on-site interviews
- Areas that distinguished high vs. low
 - High quality leadership
 - Culture
 - High performance HR policies
 - Systems and care practices
 - Adequate staffing ratios

Eaton, Phase II Final Report, 2001

A Vicious Cycle

Working Short



Stress

Turnover/Absent

Eaton, Phase II Final Report, 2001

Culture Change = Stability

- Eden
- Wellspring
- Pioneer Network
- Desired Outcomes
 - Less absenteeism
 - Absent staff is replaced
 - Do not “work short”

Eaton, 2000; Stone, 2001

Employee-Centered then Person-Centered

- **Primary assignments**
- **Frontline staff decision making**
- **Involved in care planning**
- **Care resource teams**
- **Cross-training**
- **Enhance critical thinking skills**
- **Extensive education**

Improve Retention by Targeted Recruitment

Screen for personal characteristics:

- Mature
- Compassionate
- Sensitive
- Critical thinking
- Ability to communicate, learn
- Friendly, smiles

Retention Practices

Significant factors in retention:

- Relationship with supervisor
- Empowerment
- Respect
- Time to spend with residents
- Participation in resident care decisions
- Systems

Bowers, 2003

Gallup Organization

Keys to improving retention:

- Recognition and praise
- Care about them as people
- Encourage personal development
- Value their opinions
- Encourage friendships
- Let them know they make a difference

LTC Regulatory Risk & Liability Advisor, Vol. 9/ No. 6. 2001

Basic Human Needs

- To Live
- To Love
- To Learn
- To Leave a Legacy

Covey, “Principle-Centered Leadership,” 1992

The Flywheel Effect

- Never one grand program
- Accumulation of effort
- Consistent direction
- Step by step
- Turn by turn

Collins, 2001

“For every thousand hacking at the leaves of evil, there is only one striking at the root.”
—Henry David Thoreau

Contact Information

Joe Bestic, NHA, BA

HSAG Clinical Quality Specialist

jbestic@azqio.sdps.org

Phone: 602.745.6205

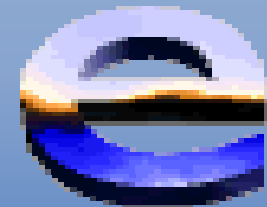
David Farrell, NHA, MSW

Wellspring Chief Executive Officer

dfarrell@wellspringis.org

Phone: 920.434.0123

Cell phone: 920.366.4904



MAIL