

Welcome to our roundtable series. We're glad you're here.





Our Work Together

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This Year's Focus....Leadership & Culture

- The role of leadership in staff retention and recruitment
 - How can medical directors have an impact on facility culture?
 - How can medical directors, administrators, directors of nursing and others in leadership work together to develop sustain a positive work culture?
- Live leadership modules to kick off in January 2024 with practical, evidence-based "try this" approaches that can help you improve your leadership style





To Level Set....

- We are a community focused on co-design
- "All teach, all learn" 1
- Small tests of change
- Collation and dissemination of insights
- www.paltc.org/goodthing









Presenters



Alyssa Pischel, DHA, LNHA
Director Post Acute QI/State Director, SC
QIN/QIO
Constellation Quality Health



Beth Hercher, CPHQ
Program Manager
Constellation Quality Health and ACE Collaborative



Vicki Sides, MHA, LNHA, LBSW

HCC Administrator

Presbyterian Communities of SC-The

Village at Summerville



A South Carolina Long-Term Care Learning Pilot

A collaboration to strengthen frontline staff retention as the foundation for high performance

Funded through the American Rescue Plan Act of 2021 under the Nursing Home and Long-Term Care Facility Strike Team and Infrastructure Project.









Presentation Objectives:

- Present project alignment with the SC Institute of Medicine; The Direct Care Workforce in Long-Term Care Settings: Recommendations for Recruitment and Retention.
- Describe the SC LTC Leadership Academy Project: A three-phased approach.
- Share low burden/high value of best practices.
- Share how a pilot home engaged their MDs in day-to-day operations to strengthen staff moral and help achieve 5-Star Care Compare Rating.



The Imperative to Act!

The South Carolina Institute of Medicine and Public Health's June 2022 report, "Direct Care Workforce in Longterm Care Settings Recommendations for Recruitment and Retention," states:

- COVID related widespread burnout across the spectrum of direct care occupations has exacerbated already existing challenges recruiting and retaining talented direct care workers across the country.
- High turnover rates and the resulting decrease in staffing levels threaten quality of care, result in diminished health outcomes, and negatively influence the viability of infection control measures.

The report calls for significant changes and states the urgency of taking such action.

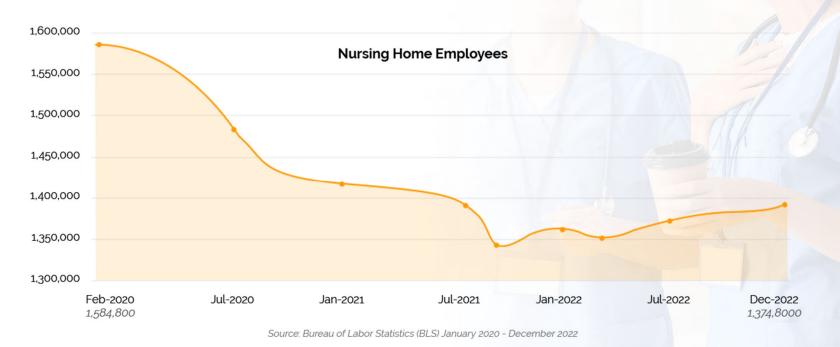


This pilot of a new nursing home high-value business model will inform public discussion about how SC policy decisions can positively impact nursing home staffing in the future.



A Staffing Crisis - Workplace retention is more important and more challenging than ever.

- COVID-related, widespread burnout exists across the spectrum of direct care occupations.
- High turnover rates, resulting in decrease in staffing levels.





Project Overview

Phase 1

OCT. 2022

Learn best practices from eight high-performing nursing homes.

Phase 2

JAN. - JULY 2023

■ Launch the SC Learning Collaborative Pilot, a cohort of nursing homes to explore these best practices.

Phase 3

JAN. - SEPT. 2024

- Support the pilot program.
- Evaluate results.
- Spread best practices to additional pilot nursing homes in a virtual learning collaborative.



Phase 1: Learn Best Practices



Phase 1: Learn Best Practices

Oct. 2022

Learn best practices and gain valuable insights from high-performing nursing homes to lay the foundation for Phase 2 of the pilot program.

- 1 Identify eight high-performing facilities with high workforce retention rates. Compare specific data* to:
 - NHSN Covid data
 - CMS Care Compare Star ratings
 - Survey and certification results
- Conduct onsite visits with each identified high performer.
- Identify outstanding leadership practices and staffing strategies that stand out, specifically those regarding COVID-19 infections and staffing shortages.

^{*} Data reviewed was from Jan. to Aug. 2021



We asked about **COVID practices**

...and they answered with their leadership practices.

- High standards combined with caring and compassion
- Hands-on, roll-up-their-sleeves leadership
- Inclusive and in partnership with the staff
- Creating the conditions where staff felt safe





We asked **how they invested in staff** during the pandemic

...and they answered with their leadership practices

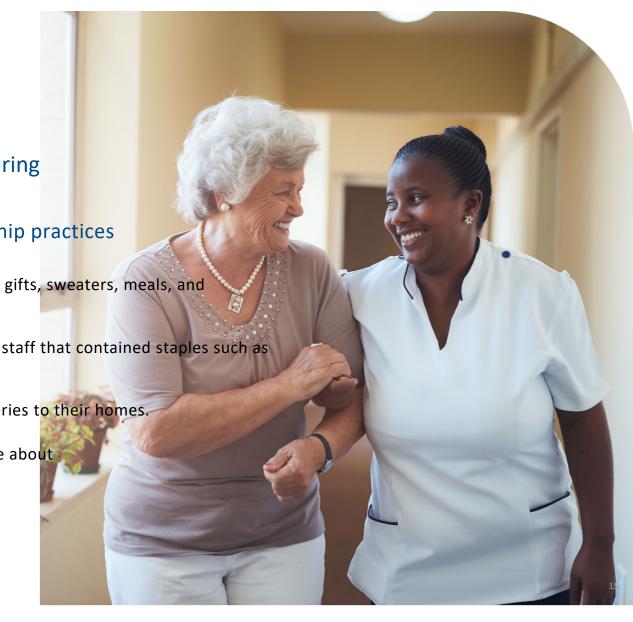
Showed appreciation for the staff – big and small gifts, sweaters, meals, and prepacked meals to take home.

Prepared and handed out "care packages" to the staff that contained staples such as toilet paper, paper towels, and bread.

Arranged hotel rooms, Uber rides, and PPE deliveries to their homes.

 Communicated the message that supervisors care about each staff member as a person.

* Data from My Interview







Phase 2: Launch and Support the SC Learning Collaborative Pilot



Phase 2: Launch and Support the SC Learning Collaborative Pilot

Jan.-July 2023

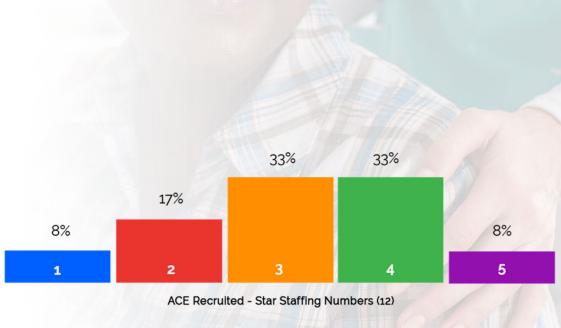
- 1 Identify 12 pilot nursing homes and ensure variability.
- 2 Conduct onsite visits.
- 3 Select coaches who have expertise in the field.
- 4 Offer coaching sessions and other support.
- **5** Explore how to evaluate results of the bundle approach/high-value business model.



Variability of the program/pilot homes:

- 6 for-profit and 6 not-for-profit facilities
- Varying CMS Star Rating Range
- Vary in leadership stability and experience
- Vary in staff stability
- Vary in financial stability

Are engaged and interested in testing new approaches





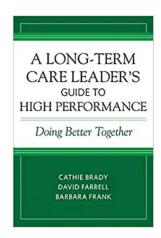
Conduct onsite visits with each home from January 9-19:

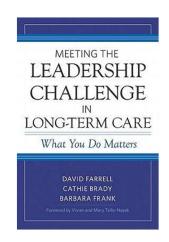
- Establish a working relationship
- Learn about each pilot home's strengths and identify areas for improvement (interventions)
- Introduce components of the new business model learned from high performers
- Explain the pilot process
- Establish a unique action plan for each home



Select coaches and pilot leaders who have expertise in the field:

- B&F Consulting founders, Cathie Brady and Barbara Frank, have helped long-term care communities become better places to live and work since 2004.
- Licensed nursing home administrator David Farrell, MSW, LNHA, has spent his entire career in the longterm care profession.





Award-winning books co-authored by Brady, Frank, and Farrell

Brady, Frank, and Farrell's work is grounded in the recognition that "our systems create our outcomes." By improving organizational systems for engaging staff in individualizing care, nursing homes become better places to live and work.



Offer coaching sessions and other supports for pilot homes:

- Implement new high involvement management practices
- Maximize spending that supports front-line staff retention and high performance
- Collaborate with corporate leadership to pilot new compensation and human resource practices
- Evaluate the impact of these practices
- Use low burden/high benefit discovery and implementation assignments



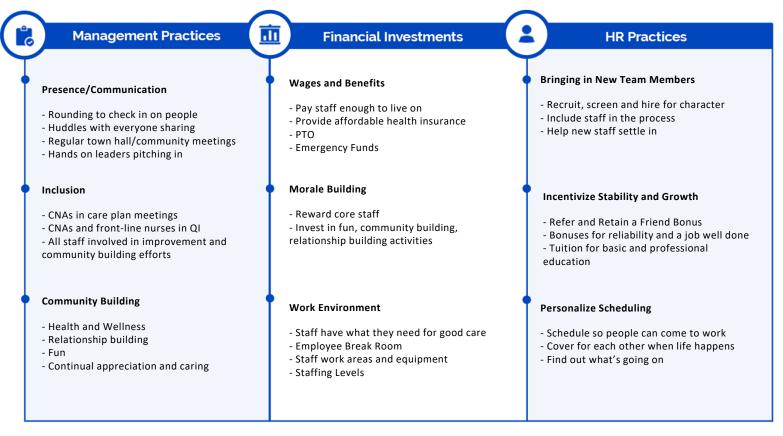
"If you can't change something big, change something small."

Don Berwick

Quality Improvement champion and president emeritus and senior fellow at the Institute for Healthcare Improvement



Low Burden/High Value Bundle of Best Practice Interventions







Medical Director Role in Staff Retention and 5-Star Rating

Vicki Sides, MHA, LNHA, LBSW HCC Administrator Presbyterian Communities of SC-The Village at Summerville





Leadership Rounds are one of the best ways to maintain a high degree of sensitivity to operations, situational awareness and create an atmosphere of trust...

"How to communicate effectively and efficiently with all the stakeholders in the post-acute long term care environment is always a challenge. IDT rounds have proven to strike the right balance with everyone involved-patients, families, and all members of the team." "Dr. Russell Blackwelder, M.D., M.Div., C.M.D.

"IDT rounds have been the biggest source of culture change we've had in my ten years at The Village. Patient/family satisfaction, interprofessional collaboration, and patient care have all improved." ~Dr. Russell Blackwelder, M.D., M.Div., C.M.D.

- Sharing a clear mission
- Inspiring action
- Supporting individuals
- 4 Creating environments where it is safe to speak up



Medical Directors became part of the TEAM—Champions for clinical staff by:

- Taking ownership in assisting the clinical team in achieving 5-star rating
- Taking an active role in QAPI meetings
- Reviewing resident level quality measures, e.g., antipsychotics, antibiotics, UTIs, Pain, and falls to identify improvement opportunities
- Providing clinical and front-line staff education around quality
- Conducting formal and informal rounding with staff



Characteristics of Formal Rounds:

- Held at pre-set times and locations
- Include specific agenda items or topic of focus, e.g., improving UTI QM
- Typically led by senior leaders



Characteristics of Informal Rounds:

- Completed by both senior leaders and other leaders in the organization. Example: MD and Unit Nurse...addressing C.N.As
- Focus driven by the issues of the day
- Provides front line staff opportunity to talk directly with leaders
- Offers flexibility for a leader to round



Successes:

- Staff Empowerment and Improvement in Clinical Knowledge
- Improve (SBAR) process
- Improve Resident Care
- Improve overall 5-Star Care Compare Rating
- Improve staff moral and impact new hire turnover



Data- Quality Measure Improvement





Medical Director Engagement and Staff Satisfaction and Retention:

- Clinic time for staff
- Open door for vaccine hesitancy
- Building front-line staff's clinical knowledge
- Family relationship and addressing concerns
- Supporting staff



Quotes from our Village Team...

"Our physicians are always keeping front line staff informed of resident status. Throughout the day, they are able to be contacted for any change in condition or resident concern. We have a good relationship with our physicians and are in constant contact with them." ~ Emilez Diaz, Lead CNA

"Communication between the physicians and nursing staff is phenomenal - all of the team members work together for the care of every resident we're entrusted with. When you have a physician and nursing staff that work seamlessly together, moral is always great!" James Ferguson, LPN



Phase 3: Spread Best Practices



Phase 3: Spread Best Practices

Jan.-Sept. 2024

Spread best practices from this initial pilot program to additional nursing homes and corporations:

- Virtual learning collaborative based on the change package developed from the high performers and pilot homes through learning sessions and action period assignments
- After the learning collaboration, share business model best practices for statewide implementation







Partner with us!



Beth Hercher, CPHQ
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Next Month's Roundtable: December 14th

Partnership in Leadership: An Administrator and DON Share Their Success Stories and Lessons Learned

Join us as Cindy Woodward and Jamy Von Berg from Statesman Health and Rehabilitation in Levittown, PA discuss the role that their partnership has played in improving the culture of their facility, as well as the success of new initiatives and staff retention.



