


October 17, 2024

---

# Leading With Purpose



## *8 Strategies for Engaging Your Careforce*



The  
John A. Hartford  
Foundation





# Our Work Together

JoAnne Reifsnyder PhD, MSN, MBA, RN, FAAN  
Professor, Health Services Leadership and Management  
University of Maryland School of Nursing  
Former Chief Nursing Officer, Genesis HealthCare



The  
John A. Hartford  
Foundation



# What the 8-Part Series Delivers

---

By participating in this series of 8, 30-minute sessions, you will:

- Assess your strengths and your organization's strengths and build on those;
  - Lead change through small tests over time,
  - Cultivate a positive work culture, and
  - Ultimately, grow and retain your *Careforce* (Porter, 2022)

Porter, L. (2022, April 15). *We need a careforce, not just a workforce*. McKnight's Long-Term Care News. <https://www.mcknights.com/blogs/guest-columns/we-need-a-careforce-not-just-a-workforce>

# Age-Friendly Care is a Careforce Strategy

**With Special Guest**  
**Taylor McMahon,**  
**RN CNDLTC,**  
Director of Nursing at  
Presbyterian Senior  
Care, Pittsburg, PA  
will share a case  
study of AFHS and its  
impact on the team.



The  
John A. Hartford  
Foundation



# But first... a brief Session 7 Recap!

## Strengthening Your Approach to *Leading Change*

In this session, we ...



Made the case for building skills in leading change across your careforce;



Examined facilitators and barriers to change;



Applied a change model to frame, organize and evaluate change initiatives;  
and,

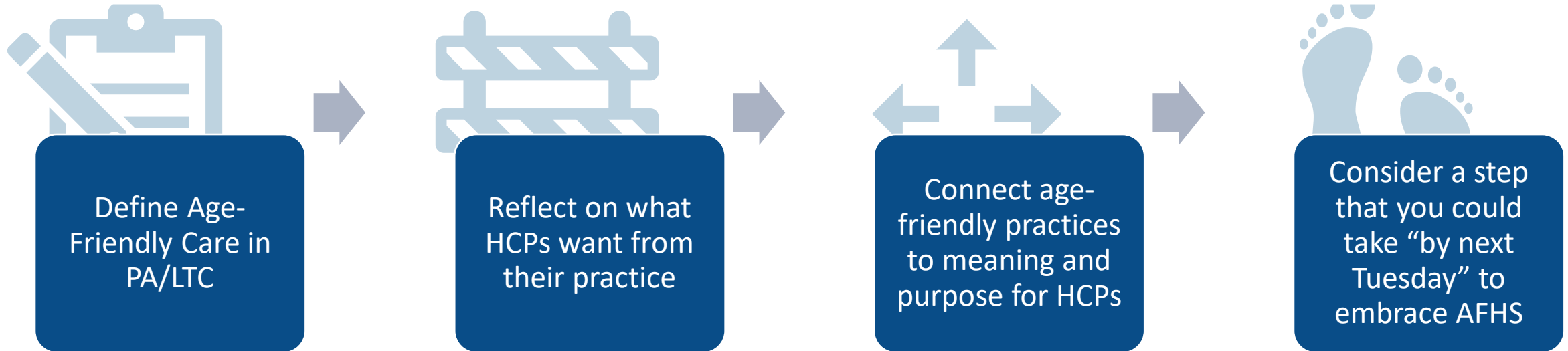


Selected two actions to take “by next Tuesday” to develop knowledge,  
attitudes and skill in leading change.

# On Deck for Today

## *Age-Friendly Care is a Careforce Strategy*

*In this session we will...*



The  
John A. Hartford  
Foundation



# To begin...

---

- What matters most to you in the work that you do?
- What brings you joy in a workday?



# What do healthcare workers want from their leaders?

---



- What will make them join, what will make them stay?
  - Commitment to quality and patient-centered care
  - Clear commitment to values
  - Culture of respect and inclusion

*What makes health care workers stay in their jobs?* (2023, March 2). Harvard Business Review. <https://hbr.org/2023/03/what-makes-health-care-workers-stay-in-their-jobs>  
*What makes health care workers stay in their jobs?* (2023, March 2). Harvard Business Review. <https://hbr.org/2023/03/what-makes-health-care-workers-stay-in-their-jobs>



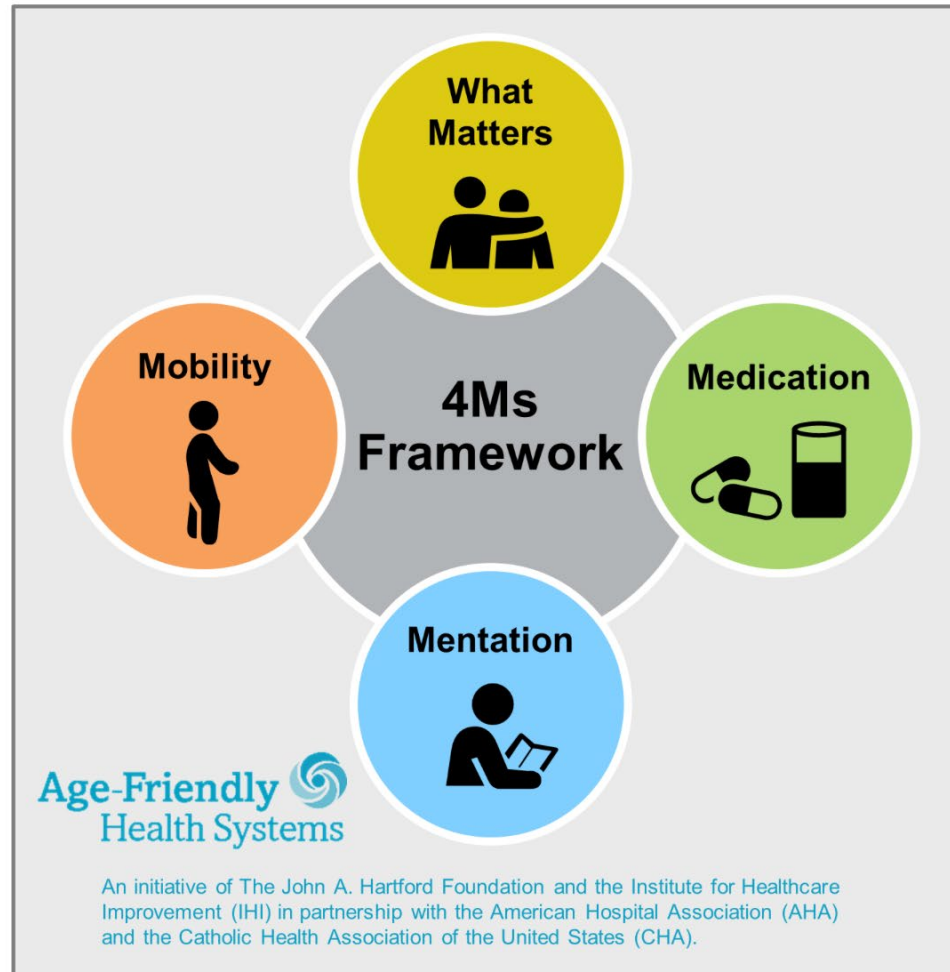
Dr. Mary Tinetti, Chief of Geriatrics at Yale School of Medicine and Yale-New Haven Hospital,

---

[Watch Video](#)



## 4Ms Framework of an Age-Friendly Health System



For related work, this graphic may be used in its entirety without requesting permission.  
Graphic files and guidance at [ihi.org/AgeFriendly](http://ihi.org/AgeFriendly)

### What Matters

Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care.

### Medication

If medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care.

### Mentation

Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

### Mobility

Ensure that older adults move safely every day in order to maintain function and do What Matters.

# Age-Friendly is the right care for seniors, but how can it help staff?

---

- Simple framework
- Make “person-centered” real
- Standardize language across disciplines
- Use language that residents and family can grasp
- Measure, report and celebrate small and large progress



“Being able to do what matters most for the resident  
is what matters most to ME”

# Team members with higher levels of engagement:

---

- Produce substantially better outcomes
- Treat customers better and attract new ones
- Are more likely to remain with their organization than those who are less engaged
- Are healthier and less likely to experience burnout.



# The Willows Action Steps

## Enrolled in AFHS education though launched organically

- Not one more thing, fits into work we are doing
- Educational Opportunities and Just-in-Time Learning

## Following in the Footsteps of Leadership

- Person centered care
- Adapt AFHS framework into organizational philosophy

## Empowered Staff

- Nurses Lead Delirium Assessment & Interventions, partner with CNAs
- CNAs lead the Restore What Matters Resident program
- Not afraid to try- the value of PDSA!

## Opportunities to align with Documentation and MDS

- Successes and Challenges with EMR



## Tools to Assess if Delirium is Present

CAMs and UB-2s

### CAM screening tool

The Confusion Assessment Method is a diagnostic tool used to identify delirium based off the four cardinal signs of delirium

1. Acute onset and fluctuating course
2. Inattention
3. Disorganized thinking
4. Altered level of consciousness

If there is a presence of feature 1 and 2, a diagnosis of delirium is made.

### UB-2

The Ultra-Brief 2 item screen is a clinician administered tool designed for large-scale delirium identification

Typically performed on admission and with significant changes

## How Can You Help With Delirium Recognition?

- ▶ **Something seems different!**
- ▶ When recognizing a change in a resident's baseline mental status, it is important to be proactive and let the nursing staff aware so that the proper steps may be taken to care for this patient in a timely manner
- ▶ **Are you thirsty? Can I get you a drink?**

SENIOR CARE

OCTOBER 3, 2023

# Delirium vs. Dementia

Tools to Identify and Assess

# Building Peer-to-Peer Education

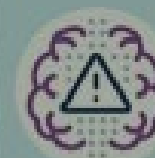
## CNAs Take Lead

## Restore What Matters Project for Improved Mobility

## Delirium QI Project



Similarities  
In both, cognition is disordered



Delirium  
A serious disturbance in mental abilities that results in confused thinking and reduced awareness of surrounding

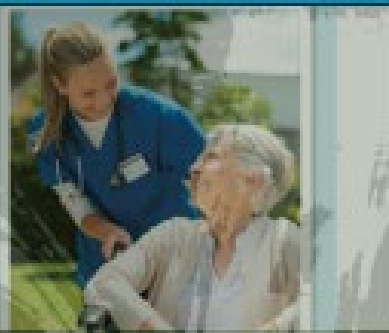


Dementia  
A chronic or persistent disorder of

OUR GOAL: TO PREVENT, IDENTIFY, TREAT AND MANAGE DELIRIUM ACROSS ALL SETTINGS OF CARE

And why YOU are such an important piece to this puzzle!

- What happens when these suggestions don't work?
  - There could be something else contributing to this change
  - It's easy to assume behavioral changes can be related to "normal" aging, and yes dementia is very common among the elderly population. However, these signs can be an indicator of an underlying issue causing delirium and when treated for it, they can be brought back to their baseline



With dementia, the onset is typically a slower, more gradual decline over a longer period of time. Awareness and attention are clear, but individuals have poor working memory and delusions are short-lived and changing.

1

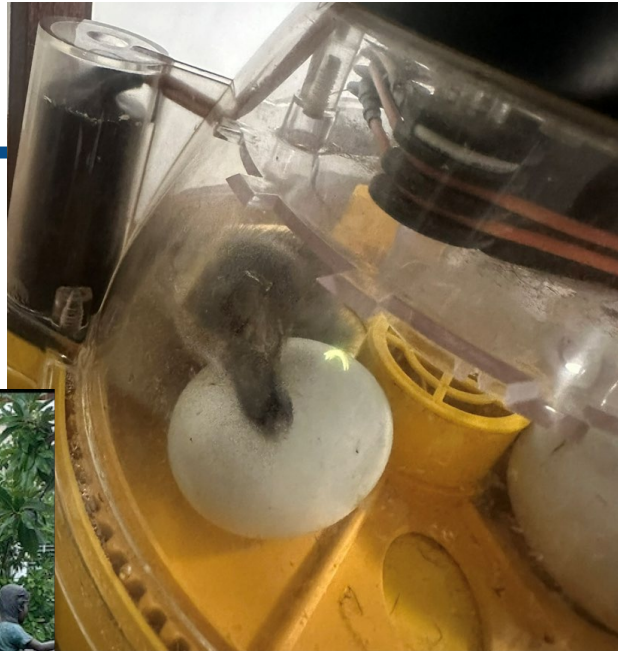
HYPERACTIVE

2

HYPOACTIVE

3

MIXED



# Age-Friendly Health Systems and You!

## Three Ways to Join

IHI offers three ways for health systems and individuals to join the movement based on the degree of interest and self-motivation:

- Action Communities
- Do-It-Yourself Participation
- Scale-up Accelerator

## Action Communities

Action Communities enable teams to accelerate reliable practice of the 4Ms in an active community of learners and testers. This 7-month journey to [Recognition](#) provides a structure for learning with and from other health systems and expert faculty. Over the course of the Action Community, teams participate in webinars and attend an in-person meeting (when possible) and develop their plan for practicing the 4Ms.

Action Communities are scheduled periodically throughout the year and facilitated by IHI or other organizations. If your health system or practice is interested in the Action Community, see the upcoming opportunities below.

## What are the benefits of participating?

- Improved care for older adults through the organization and delivery of evidence-based care. At the end of the seven-month Action Community, participating organizations will have implemented specific changes of the Age-Friendly Health Systems 4Ms Framework in their setting of care.
- Recognition by IHI and The John A. Hartford Foundation as Age-Friendly Health Systems.
- All teach all learn model. By participating in the Action Community, you will have the opportunity to build relationships and learn from expert faculty, as well as peers around the country that have found innovative solutions to similar challenges and obstacles that you may face. In addition, you will have opportunities to share your organization's learning and celebrate its progress with the movement.

Age-Friendly  
Health Systems

Age-Friendly Health Systems is an initiative of The John A. Hartford Foundation and the Institute for Healthcare Improvement (IHI) in partnership with the American Hospital Association (AHA) and the Catholic Health Association of the United States (CHA)





# Takeaways - Lightening Round

What was of value?

What will you do by next Tuesday?

# Find the Recordings of *More of a Good Thing* and *Leading with Purpose* (this series) ... Along with Other Resources

<https://paltmed.org/goodthing>

The screenshot shows the PALTmed website header with the logo and navigation menu: MEMBERSHIP, EDUCATION, PALTC PROFESSION, RESOURCES, ADVOCACY, PUBLICATIONS, ABOUT. Below the header is a breadcrumb trail: Home / More of a Good Thing. Social media icons for Facebook, Twitter, LinkedIn, and Email are visible. The main content area features two promotional banners. The first banner, titled 'More of a Good Thing', shows a person in a blue uniform giving a thumbs up and includes the text 'A Framework to Grow and Strengthen the PALTC Careforce'. The second banner, titled 'Leading with Purpose', features a sun and leaf logo and the text '8 Strategies for Engaging Your Careforce'. To the right of the banners, there is a section titled 'GENEROUSLY SUPPORTED BY' with logos for The John A. Hartford Foundation and the Jewish Healthcare Foundation. At the bottom right, a yellow box titled 'Save the Dates' contains information about 'More of a Good Thing Monthly Roundtable Discussions' on Thursday, October 10, 2024, from 4:00-4:45 PM Eastern, with a free fee and a 'REGISTER NOW' button.

Home / More of a Good Thing

MEMBERSHIP ▾ EDUCATION ▾ PALTC PROFESSION ▾ RESOURCES ▾ ADVOCACY ▾ PUBLICATIONS ▾ ABOUT ▾

f t in @

**More of a Good Thing**  
A Framework to Grow and Strengthen the PALTC Careforce

**Leading with Purpose**  
8 Strategies for Engaging Your Careforce

**A Framework to Grow and Strengthen the PALTC Careforce**

*More of a Good Thing* expands upon the already successful, evidence-based 4Ms Framework of the Age-Friendly Health System to address the needs and well-being of staff. In 2022, PALTmed convened a series of six virtual roundtable discussions guided by the themes of the 4Ms for Staff: What Matters (facility culture and respect), Medication (health promotion and workplace safety), Mentation (mental health and emotional well-being of staff), Mobility (opportunities for personal growth, ongoing education, and career advancement).

With generous funding support from the Jewish Healthcare Foundation and The John A. Hartford Foundation, PALTmed is building upon its previous work with new sessions that highlight how nursing home leadership can positively impact facility culture and develop effective policies to help grow and strengthen the PALTC Careforce from within.

**Leading with Purpose: 8 Strategies for Engaging Your**

**GENEROUSLY SUPPORTED BY**

The John A. Hartford Foundation

JEWISH HEALTHCARE FOUNDATION

**Save the Dates**

**More of a Good Thing Monthly Roundtable Discussions**  
Thursday, October 10, 2024  
4:00-4:45 PM Eastern  
Fee: Free

**REGISTER NOW**

# What's next in 2025??

- *Leading with Purpose* online course
- *Leading with Purpose* workshop at PALTC25 in Charlotte, NC
- *Leading with Purpose* – Communities of Practice: Co-developing and Implementing Workforce Plans!



The  
John A. Hartford  
Foundation



# References

- *Age-Friendly health systems*. (n.d.). Institute for Healthcare Improvement. <https://www.ihl.org/networks/initiatives/age-friendly-health-systems>
- Harter, J. K., Schmidt, F.L., & Agrawal, S., et al. (2020). *The relationship between engagement at work and organizational outcomes*. Gallup.
- Porter, L. (2022, April 15). *We need a careforce, not just a workforce*. McKnight's Long-Term Care News. <https://www.mcknights.com/blogs/guest-columns/we-need-a-careforce-not-just-a-workforce>
- *What makes health care workers stay in their jobs?* (2023, March 2). Harvard Business Review. <https://hbr.org/2023/03/what-makes-health-care-workers-stay-in-their-jobs>  
*What makes health care workers stay in their jobs?* (2023, March 2). Harvard Business Review. <https://hbr.org/2023/03/what-makes-health-care-workers-stay-in-their-jobs>