



Action Collaborative for Excellence (ACE)

ACE Leadership Collaborative

The Outliers: Lessons Learned from the Pandemic

May 8, 2024 Learning Session 1
www.constellationqualityhealth.org

ACE Leadership Academy

- ✦ A South Carolina long term care learning collaborative 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*.



Today's Presenters



Beth Hercher, CPHQ
Program Manager
Constellation Quality Health



David Farrell, MSW, LNHA
Author, Consultant to
Constellation Quality Health



Annlouise Moran, MPH, RN
QI Specialist/Educator,
Constellation Quality Health



ACE Learning Collaborative APRIL–OCT 2024

Initiative Goals

Learn How to Strengthen Frontline Staff Retention through:

- ✦ 60-minute monthly Zoom learning sessions to learn about high-performance areas
- ✦ 30-minute monthly Zoom coaching sessions to share and learn from each other

Zoom registration for the entire series will be sent out along with a calendar.

A flyer for the ACE Virtual Learning Academy. The top section has a blue background with white text: "ACE Virtual Learning Academy for NHAs, DONs, ADONs and DSD". Below this, in a white box with a blue border, is the date and time: "April 3, 2024, 1:00 pm EST, Kick-Off Webinar". The middle section has a white background with blue text and icons. It lists three key events: "Kick-off event on the collaborative process and introduction of the Change Package framework.", "On the second Wednesday of each month, participate in a 60-minute Learning Session (LS).", and "On the fourth Wednesday of each month, participate in a 60-minute Coaching Session (CS).". Below this is the title "SC Leadership Virtual Learning Collaborative" and two paragraphs of text describing the initiative. The bottom section has a white background with blue text and icons. It lists the schedule: "LS1: May 8th | May 22nd @ 1pm EST", "LS2: Jun. 12th | Jun. 26th @ 1pm EST", "LS3: Jul. 10th | Jul. 24th @ 1pm EST", "LS4: Aug. 14th | Aug. 28th @ 1pm EST", "LS5: Sep. 11th | Sep. 25th @ 1pm EST", and "LS6: Oct. 23rd In-Person Outcomes Celebration". It also includes contact information for Beth Hercher, CPHQ, and a QR code linking to ACELYC.org. The bottom of the flyer features logos for ACE, Constellation Quality Health, and dhcc.

Active Participation Accelerates All Participants

Learn and teach by doing



Practical approaches

Why important, how to put in play



Discovery and
implementation



Share and teach at
coaching sessions



Everybody
Teaches



Everybody
Learns





Presentation Overview:

Learning Objectives:

- ✦ Discover how specific management practices generated positive staff, resident, and organizational outcomes during the pandemic.
- ✦ Explore evidence-based practices that increased infection control compliance and boosted staff vaccination rates.
- ✦ Hear what SC leaders consistently did, repeatedly, to successfully navigate the pandemic.



Phase 1: South Carolina Outliers

Purpose: 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 8 high-performing facilities with high workforce retention rates. Also review:
 - ✦ NHSN COVID data
 - ✦ CMS Care Compare star ratings
 - ✦ Survey and certification results
2. Conduct onsite visits with each identified high performer.
3. Identify outstanding leadership practices and staffing strategies that stand out.

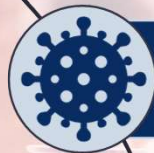
What did they do differently?

Across a broad base of metrics, these facilities stood out...

Why?

- Did they have advantages or resources that other facilities didn't?
- Was it the physical structure and layout of their facility?
- Did it have to do with the acuity or age of the residents?
- Were they just lucky?

COVID-19 is Like No Other



Airborne and highly infectious

14

14-day virus incubation period



Long infectious period

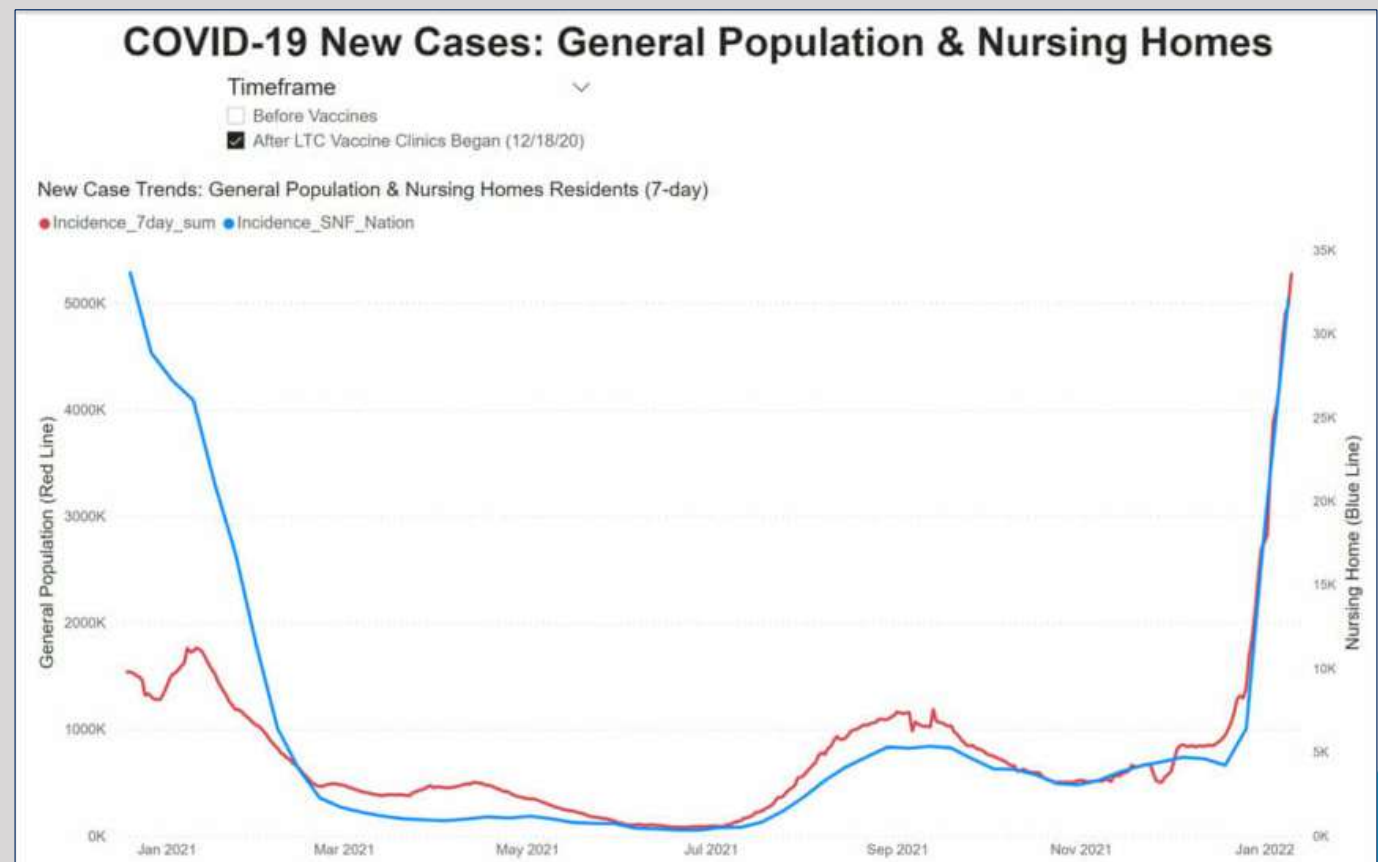


50% of positive cases are asymptomatic



PCR turnaround time challenges and cohorting

Community Spread is a Key Indicator of Nursing Home Outbreaks





Predictors of COVID Outbreaks in SNFs in 2020

Early Research Findings: *Key Variables*

- Over 100 beds
- 50% or more residents are male
- Large number of residents with behavioral health diagnoses
- Specialize in caring for those living with dementia
- For-profit ownership
- No fit testing of N95 respirators
- Serving Medicaid, Blacks, and Latinos
- Located in a low-income ZIP code
- Low CMS 5-star rating
- Low CMS star rating for RN hours and total nursing hours
- No Infection Preventionist on staff
- Deficiencies on Targeted Infection Control Survey

Harrington, C., et al. 2020; Grabowski, D., et al. 2020; Abrams, H., 2020

A Systematic Review of Long-Term Care Facility Characteristics Associated with COVID-19 Outcomes

Risk factors for poor COVID-19 outcomes in long-term care facilities:

- **Larger bed size and location** in an area with high COVID-19 prevalence.
 - Strongest and most consistent predictors of COVID-19 cases and deaths.
 - Outcomes varied by facility racial composition.
- **Larger facilities with more staff members** were associated with more and larger outbreaks.
- **Higher total nursing staffing** was associated with fewer COVID deaths.
 - Higher RN staffing was associated with fewer cases and deaths.
- Nursing Home Compare 5-star ratings, ownership, and prior infection control citations **did not** have consistent associations with poor COVID-19 outcomes.



What the outliers did that worked...

Preventing and mitigating COVID-19 outbreaks



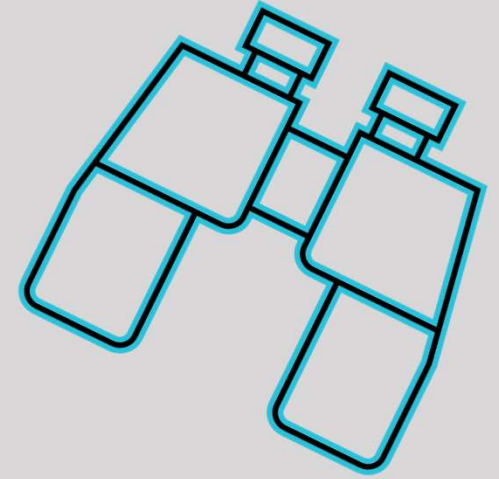
We asked about COVID practices

*...and they answered with their
leadership practices:*

Hands-on, roll-up-your-sleeves leaders

- High standards combined with caring and compassion.
- Inclusive and in partnership with the staff.
- Creating the conditions where staff felt safe.

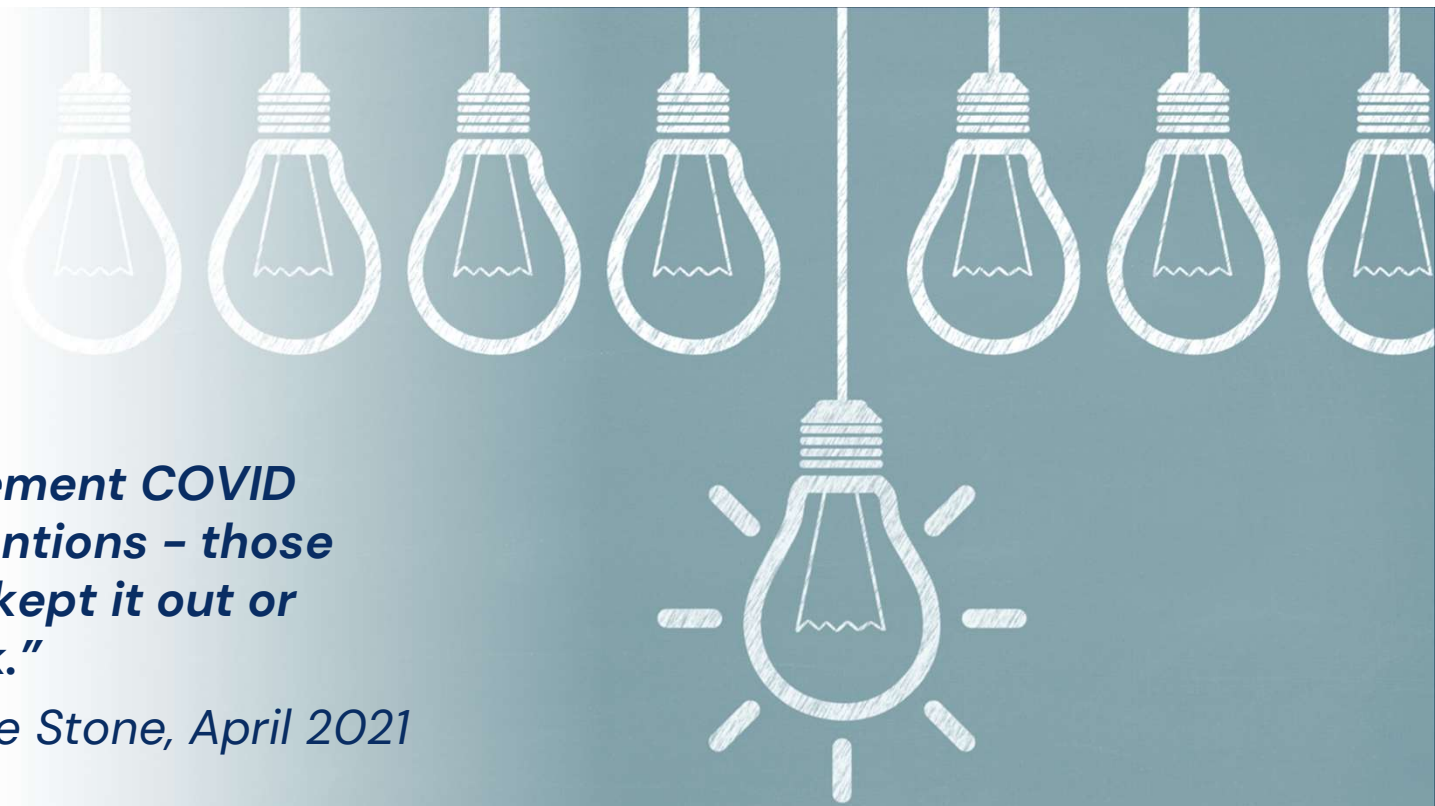
Seeing it Coming...



- ✦ The **first** to implement new guidance or tools to prevent and mitigate.
- ✦ More likely to **sustain** the guidance when put into place.
- ✦ The **last** ones to pull back after the state or CDC relaxed it.

“Being the first to implement COVID restrictions and interventions – those are the ones who have kept it out or minimized the outbreak.”

Dr Nimalie Stone, April 2021



Prevention and Mitigation

- ✓ Screening was active and thorough.
- ✓ Never short on PPE.
- ✓ Minimized foot traffic.
- ✓ Involved and supportive Medical Director.
- ✓ Decided not to accept COVID-positive residents.
- ✓ Had a QI debrief with staff after every outbreak:
 - ✦ How did it spread this time?
 - ✦ What can we do better next time?



COVID Communication

- Stayed on top of the guidance and the news and shared what was known
 - Huddled with staff daily.
 - What are you worried about?
 - Group text messaging
 - Facebook page, video boards, binder with updates
 - Didn't ignore night shift.
- Large calendars that tracked every resident's COVID status.
- Timely, Accurate, Transparent, Actionable, Caring



Triggered the right behaviors
on and off the job





“Don’t Mess Up at Walmart”

- ★ The residents' families saw the staff members commitment when off the job:
 - Masking, social distancing, staying home
 - Held each other accountable
 - Leaders didn’t take their commitment lightly

“We all knew that actions in our personal lives affected resident safety and we had personal accountability. What they did outside of work kept residents safe.”

What they did that worked...

Achieving high vaccination and booster rates



Achieving High Vaccination Rates Before the Federal Mandate

- ✦ The leaders went first.
- ✦ Medical Director – group meetings and 1:1 discussions with hesitant staff and their family members.
- ✦ Created the space and had the trust to be asked by hesitant staff – ***“My Mom said I shouldn’t, what do you think I should do?”***
- ✦ Provided education and cited trusted sources.
- ✦ Made it fun and offered incentives – \$2 raise, prizes, gifts.
- ✦ Some mandated the vaccine.

Achieving High Vaccine and Booster Dose Rates

Used multiple strategies

- ✦ Asked hospitals to offer vaccine or booster to residents being discharged.
- ✦ Became a vaccine provider.
- ✦ Designated frontline staff champions.
- ✦ Set resident vaccine/booster coverage goals and publicized them.
- ✦ Gave residents inexpensive rewards.
- ✦ Armed the vaccinated CNAs with talking points to speak to the hesitant ones.
- ✦ Used 1:1 testing time to address vaccine concerns.
- ✦ Set expectations for future booster doses.



Cause and Effect

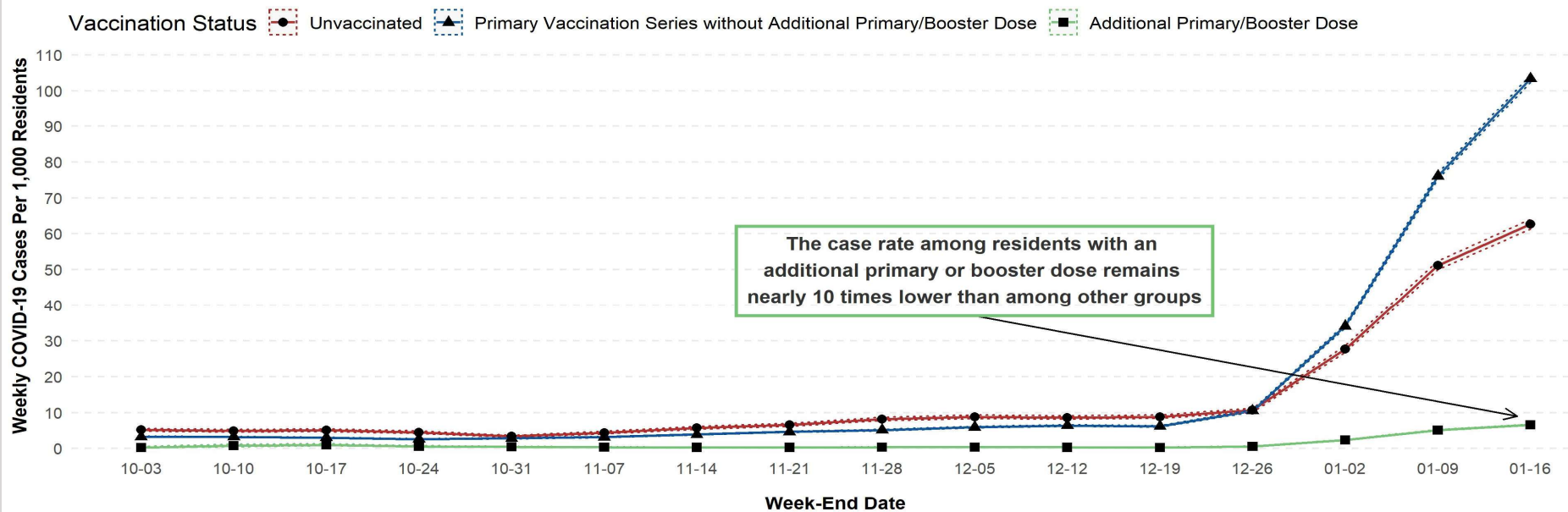
Nursing home residents more likely to die of Covid if staff is unvaccinated, study says

Researchers found a link between low vaccination rates among caregivers and Covid deaths among residents. "Where is the national outrage?" one expert asked.

Pointed out the expected benefits/clinical outcomes of reaching 90%

Omicron Surge

Unadjusted COVID-19 Cases Per 1,000 Nursing Home Residents, by COVID-19 Vaccination Status (Including Additional Primary and Booster Doses) and Week, United States



Data source: Centers for Disease Control and Prevention, National Healthcare Safety Network
 For more information: <https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html>
 Note: Data reported in the most recent week may still be accruing.

Data as of 01/24/2022 05:30 AM

What they did (and didn't do) that worked

COVID Testing and Cohorting

Testing Headlines

NEWS

Nearly 12k nursing homes receiving point-of-care testing in second distribution wave



DANIELLE BROWN

AUGUST 24, 2020

SHARE ▾

Many nursing homes shun free COVID-19 testing equipment

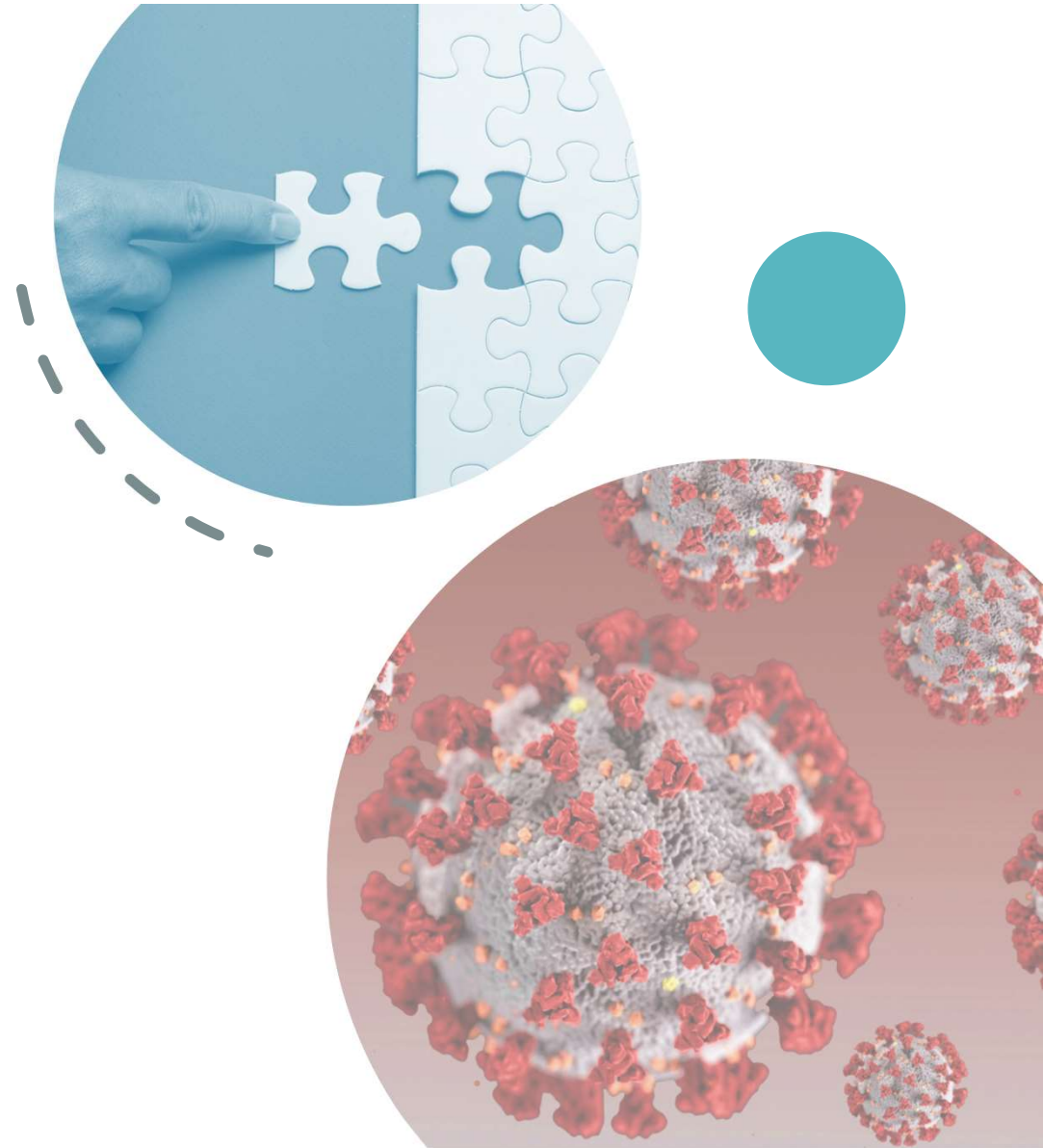
Nursing homes still see dangerously long waits for Covid-19 test results

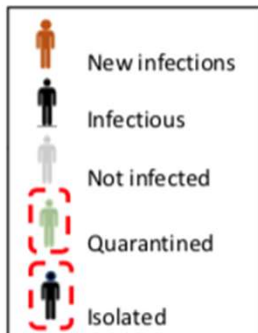
By Rachana Pradhan, Jordan Rau and Lauren Weber, Kaiser Health News

Updated 3:16 PM EST, Wed November 11, 2020

COVID Testing Strategy

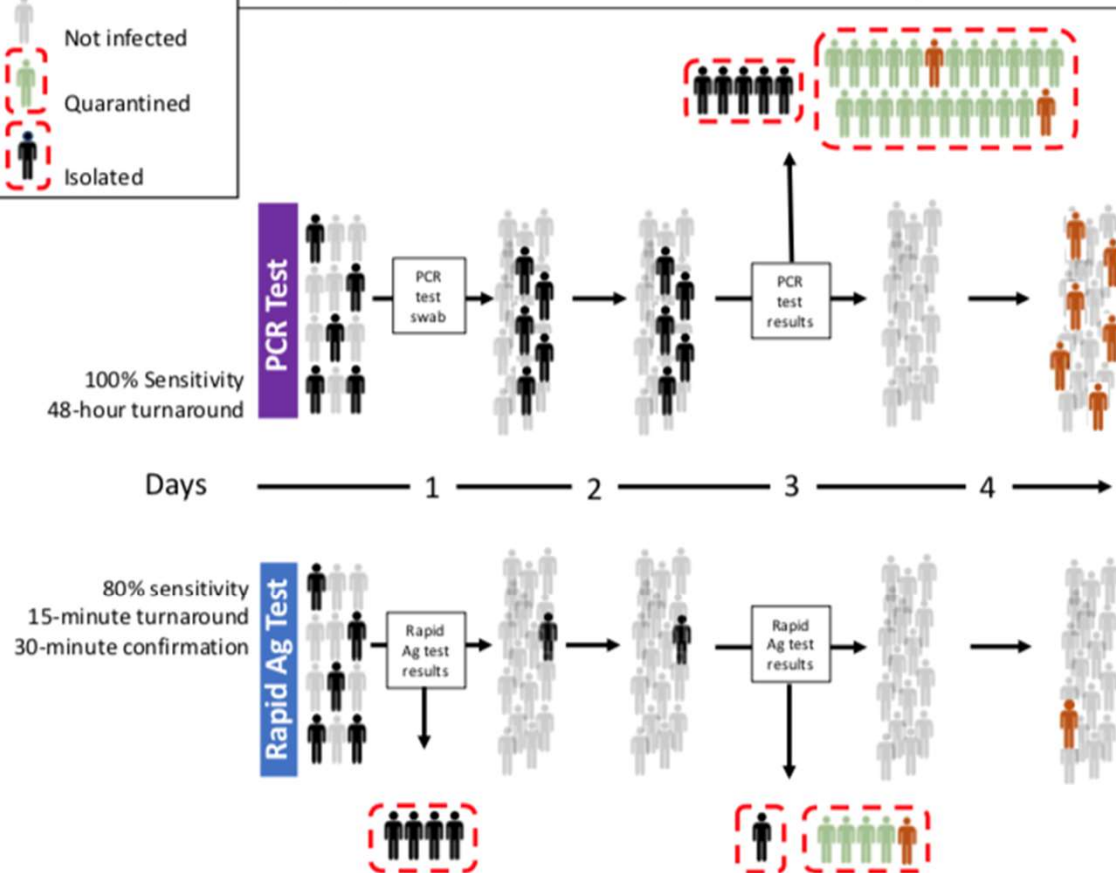
- ✦ Early adopters of POC rapid antigen testing.
- ✦ Aggressive diagnostic screening testing.
- ✦ Testing people outside of the facility.
- ✦ Going to staff members' homes to test them.
- ✦ Understanding the risks of slow PCR test turnaround times combined with the cohorting guidance.





SPEED MATTERS MUCH MORE THAN SENSITIVITY

For public health and return to workplace



OUTCOME

New Infections
With 100%
sensitive

PCR Test



Quarantined
With 100%
sensitive

PCR Test



New Infections
With 80%
sensitive*

Rapid Ag Test



Quarantined
With 80%
sensitive*

Rapid Ag Test



* Most antigen tests exceed 80% and approach 95% for high viral loads



What they did that worked...

Staff Assignments



Consistent Assignment was the Key to Low Mortality

- ✦ Staff stability and consistent assignment
 - ✦ Early detection of changes or symptoms
- ✦ Intervene right away with a COVID order set
- ✦ Treat residents like they have COVID while waiting for the test results
- ✦ Send them to the hospital before the disease progresses

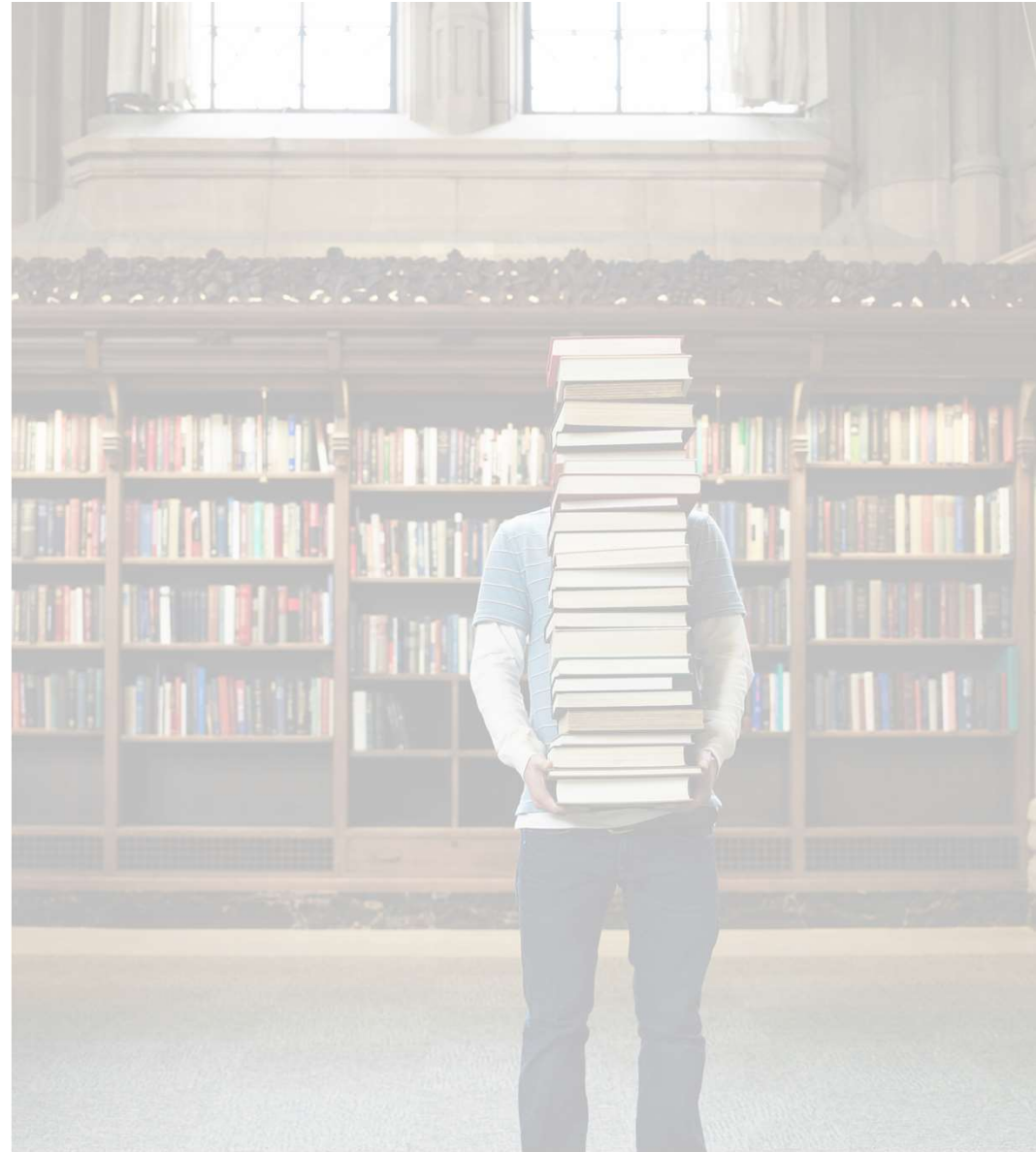


Support for Consistent Assignment

Results from 13 research studies:

- ✦ Enhanced relationships
- ✦ Staff attendance
- ✦ Improved staff, resident, and family satisfaction
- ✦ Lowered staff turnover
- ✦ Improved identification of slight changes in residents
- ✦ Improved clinical outcomes
- ✦ Improved quality of life

Allow for individualized care



What they did that worked...

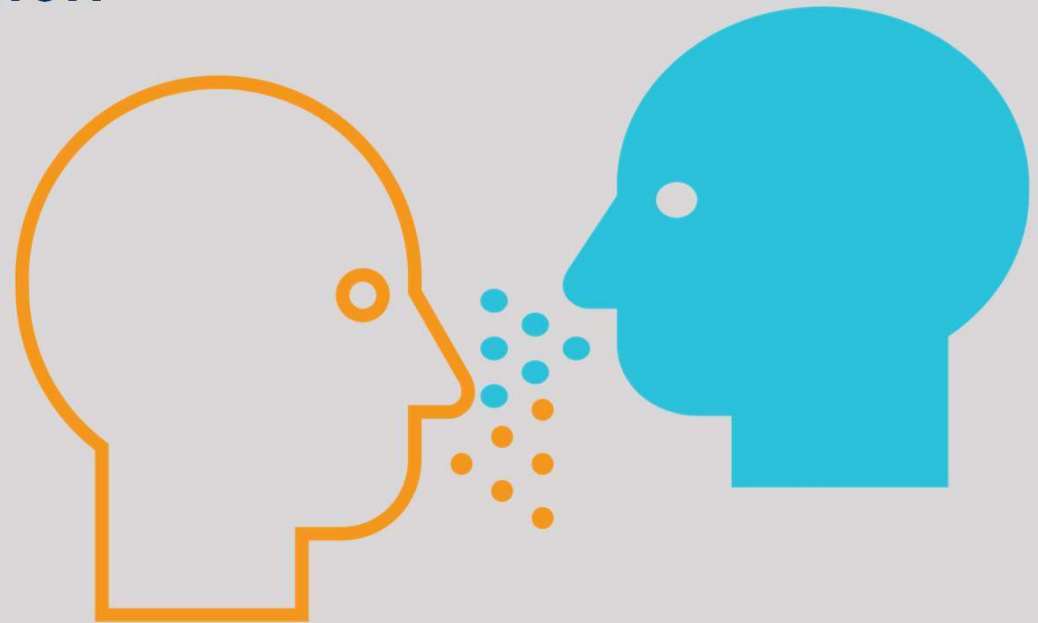
Disease Transmission



COVID-19 Disease Transmission

Primary mode of transmission – person to person through the **air**.

- ✦ Airborne: small droplets/aerosols from nose or mouth when a person with COVID-19 coughs, sneezes and even speaks.
- ✦ These droplets/aerosols can linger in the air and be circulated throughout a building.



The virus is in the air...

Purchased and used:

- Air purifiers
- Air scrubbers
- Foggers
- Reviewed/enhanced HVAC systems



Creating a Negative Pressure Room



Portable air cleaner with HEPA filter.



Close the door.



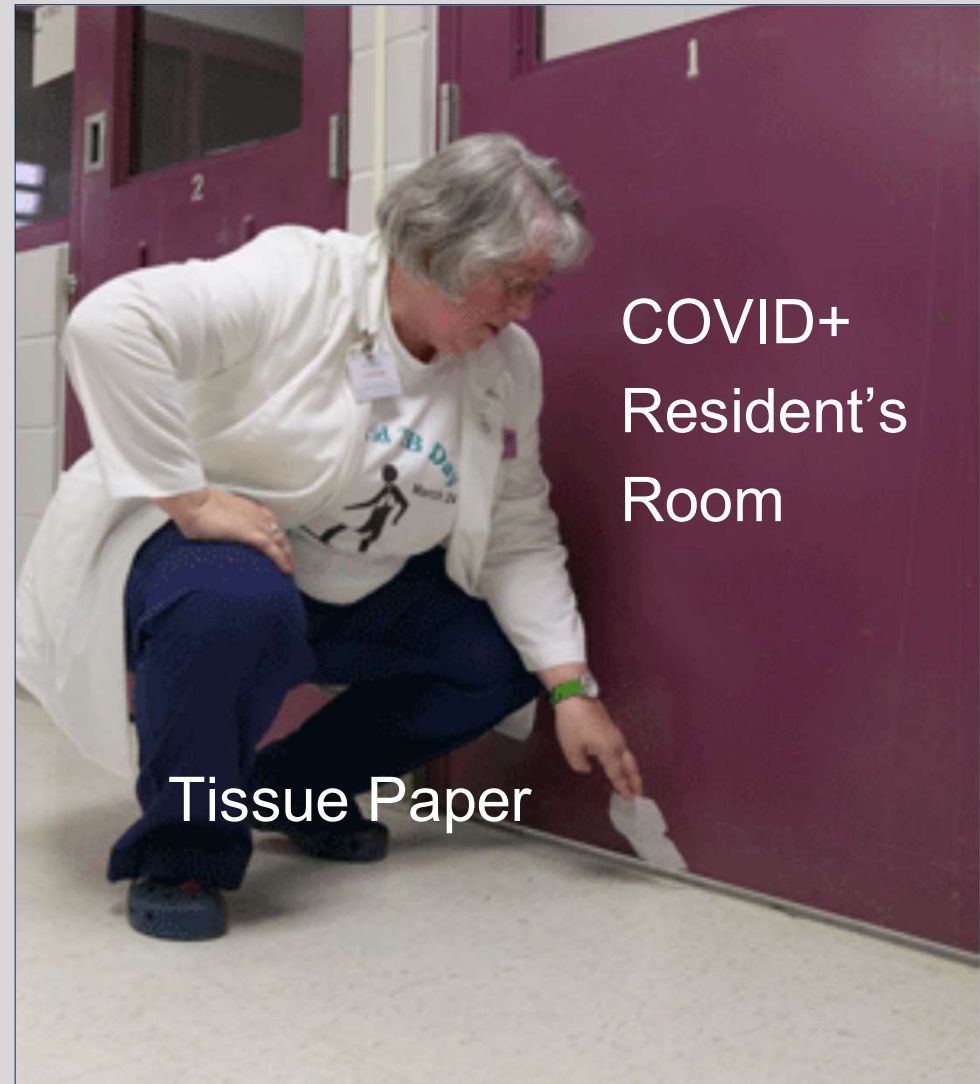
Air vent sealed shut.

Open window with small fan turned around exhausting air.

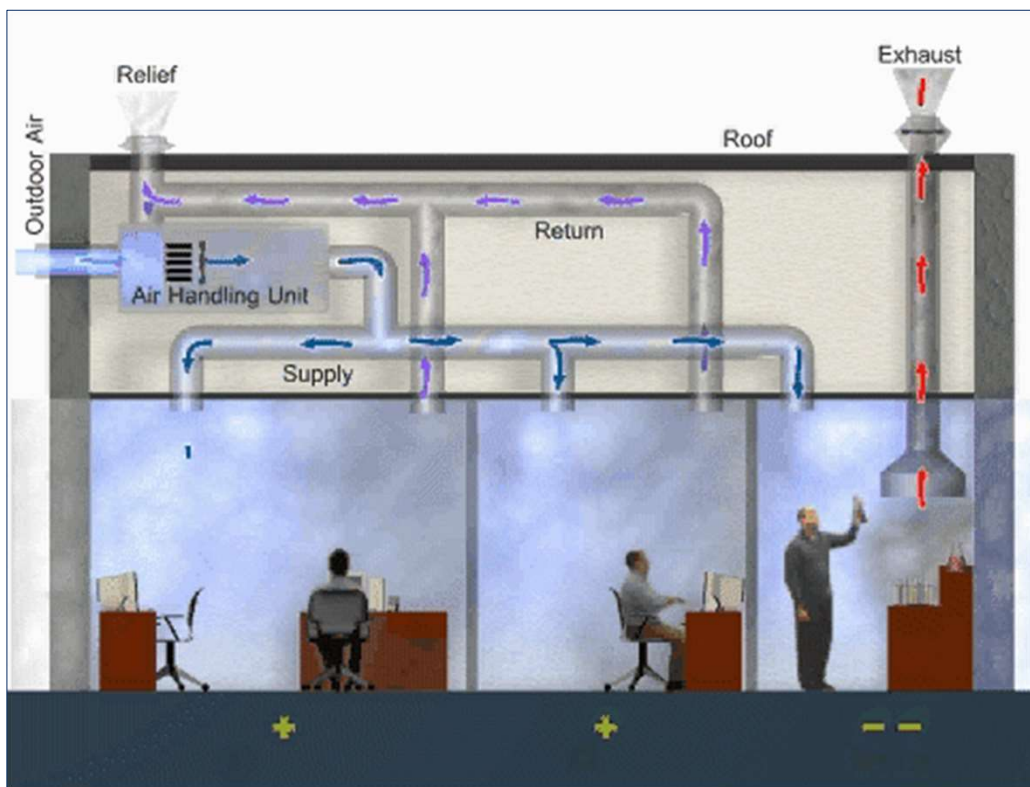


**Which way is the
air flowing?**

**Is it in or out
of the COVID+
resident's room?**



Outliers Enhanced their HVAC Systems



Ventilation systems supply buildings with a mixture of fresh and recirculated air



Adjust the outdoor air damper to supply more fresh air



Adjust the HVAC system to run continuously



Reduce or eliminate air recirculation



Have a regular maintenance service agreement with a certified HVAC technician who is changing filters, checking ducts, inspecting system



Filtration of Recirculated Air:

- Upgrade air filtration filters to MERV 14 or higher
- MERV = Minimum Efficiency Reporting Value



COVID-19 & Beyond:
Well Living Lab Safe Indoor Environment Program
**STUDY OVERVIEW: PORTABLE AIR FILTRATION
IN A SKILLED NURSING FACILITY**

UNANSWERED QUESTION EXPLORED

How do portable air purification units impact the transmission of potentially infectious airborne particles and overall air quality in a Skilled Nursing Facility (SNF)?

OBJECTIVE

Examine whether portable air purification can reduce how many particles are present in the air and on surfaces in a SNF, which is critical in limiting respiratory virus transmission and improving health and well-being among older adults.

TIMELINE & LOCATION*

The study was conducted during the third quarter of 2022 at a SNF in Rochester, Minnesota.

WHY IT MATTERS

Improved indoor air quality (IAQ) in skilled nursing facilities can limit virus transmission and benefit other health metrics among older adults, such as cognitive function and sleep.

METHODS

This study was conducted in a SNF by leveraging the Well Living Lab's advanced field study platform. The "infectior" room was 30 square meters; the "susceptible" room was 16 square meters. A breathing simulator, connected to an anatomically correct respiratory manikin, mimicked physiologically correct inhalation and exhalation. The simulator exhales particles in both submicrometer and micrometer-size. (For context, the average diameter of a single human hair is 70 micrometers.) These particles were tagged with two different fluorescent dyes (orange and blue) that allow us to measure the mass of particles that deposit on surfaces throughout the assisted living facility as well as the mass concentration present in the air.

STUDY RESULTS & KEY TAKEAWAYS**

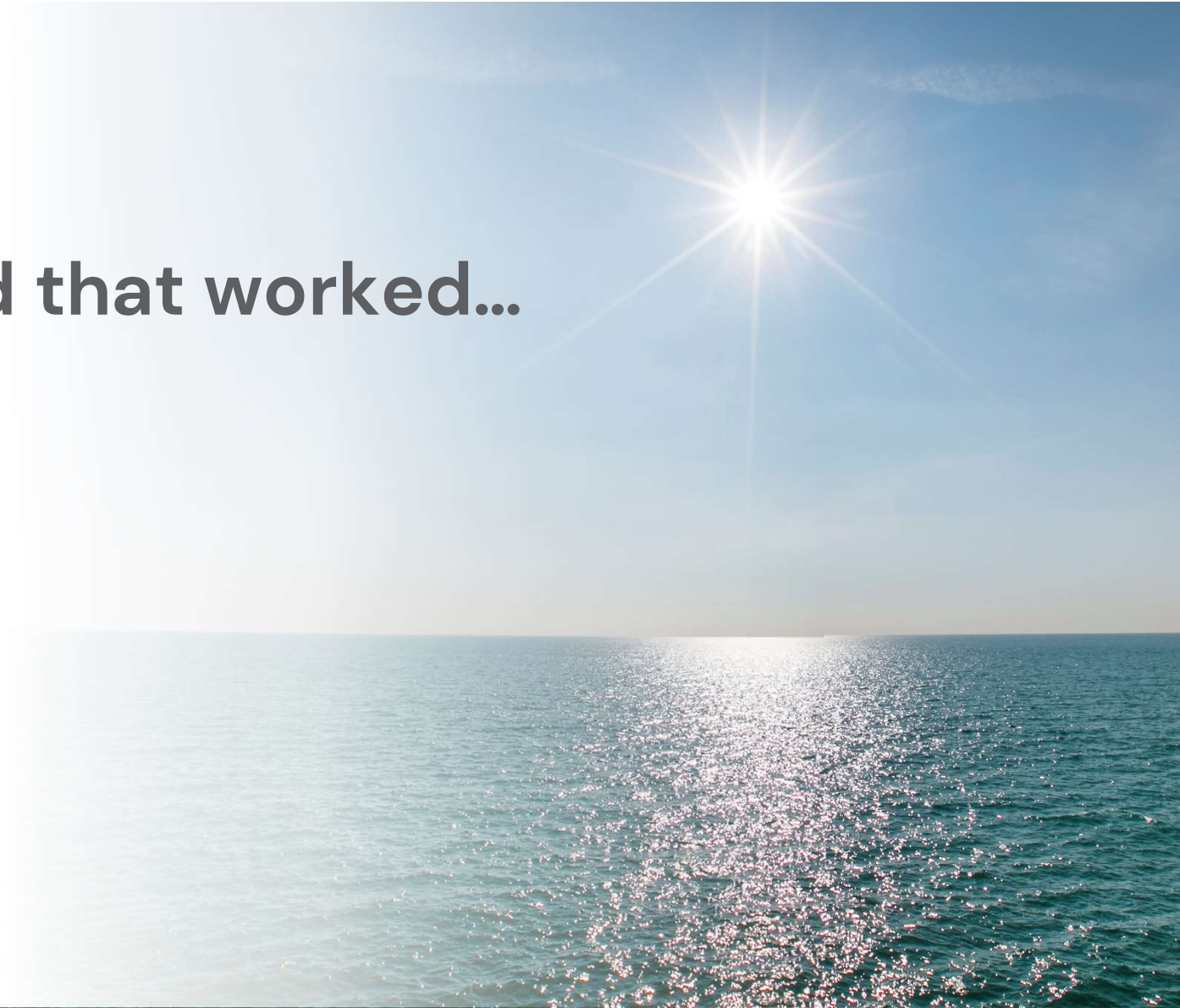
The study showed that portable air filtration units made the air exchange rate 4x more efficient, resulting in up to 7x lower particle concentration in the air and up to 7x less virus accumulation on surfaces.

1. Portable air purification units reduced the risk of airborne transmission of the smallest exhaled particles produced while breathing.
 - The majority of particles exhaled while breathing are smaller than one micrometer in diameter (submicrometer-sized particles). Particles exhaled from people with respiratory illnesses, such as COVID-19, RSV, or influenza, are primarily this size and can remain suspended in the air for weeks; thus, reducing these particles is necessary to decrease risk of illness.
 - Portable air purification units significantly reduced the peak number of submicrometer-sized particles by 64 percent in the same room as the "infectior" and by up to 90 percent in an adjacent room with a "susceptible" individual.

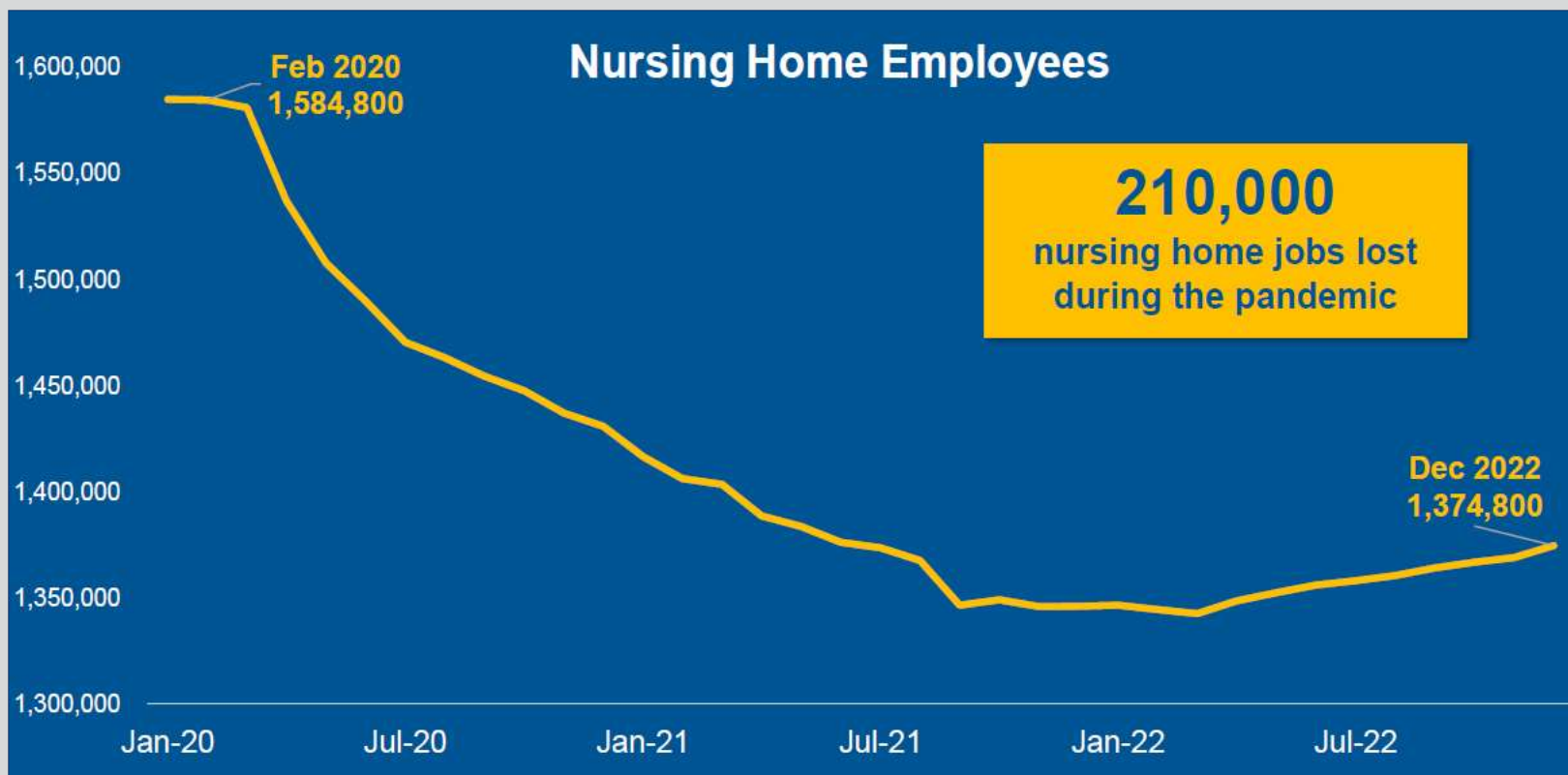


What they did that worked...

Staff Stability



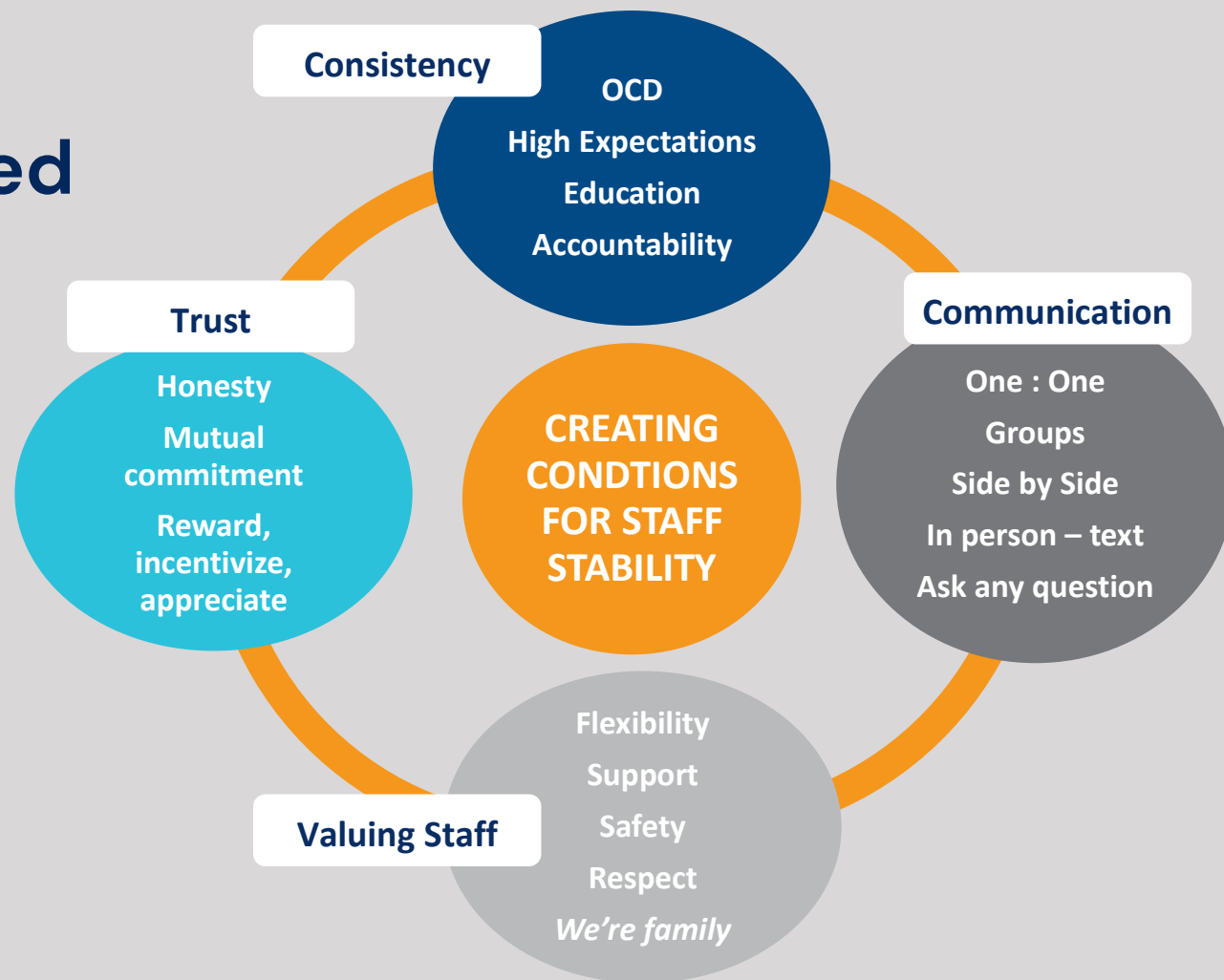
**Nursing homes have lost more than 200,000 workers
over the course of the pandemic.**



Source: Bureau of Labor Statistics (BLS) Jan 2020 – Dec 2022

Why People Stayed

Staff stability ***STARTS***
with keeping the
people you ***HAVE***



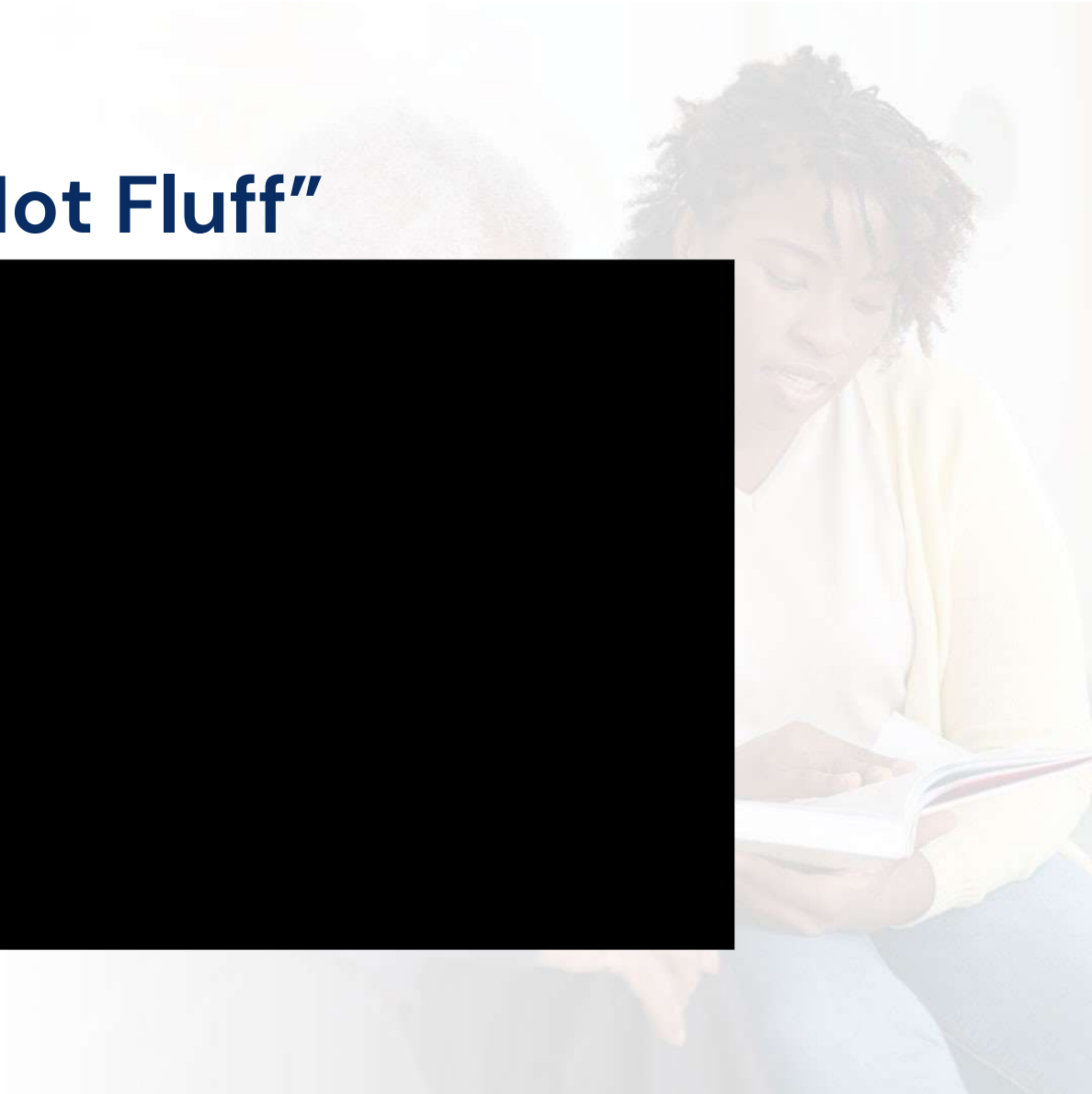
Leadership



They Did More than the Staff Expected

- ✦ Showed a lot of appreciation – big and small gifts, sweaters, and pre-packaged meals to take home.
- ✦ Prepared and handed out “care packages” to the staff that contained staples such as toilet paper and paper towels, fruits and vegetables, bread, and cereal.
- ✦ Hotel rooms, Uber rides, PPE deliveries to their home.

“Not Fluff”

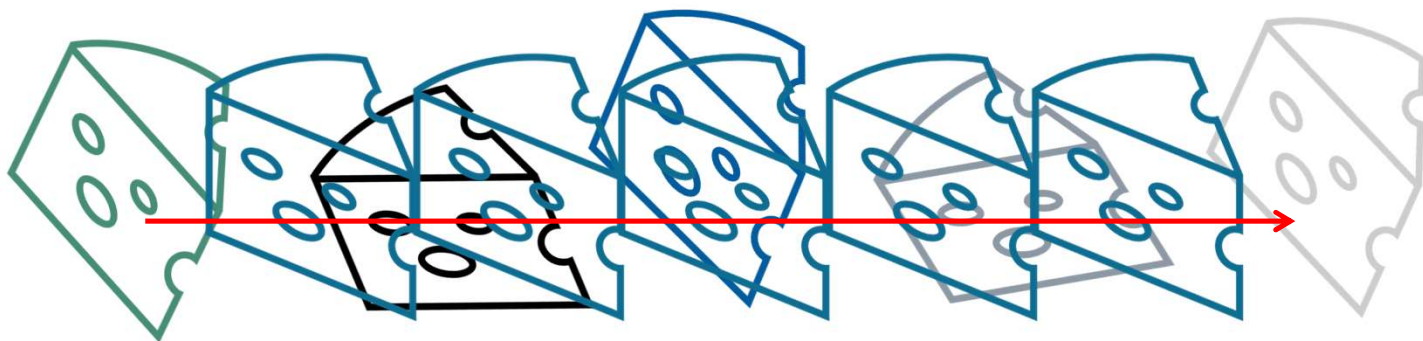


Making sure staff *knew* they could pay the rent.

PDL or *sick pay*
to cover isolation or quarantine time
triggered staff to be more
transparent about exposures.

- ✦ Process for staff to donate their sick pay to other staff.
- ✦ Allow for a negative sick pay balance.
- ✦ Offer generous sick pay accruals.
- ✦ Use of a company relief fund as a safety net.

Swiss Cheese Hypothesis of a COVID-19 Outbreak



First round of testing reveals 8 COVID+ residents in her group.

SNF offers no quarantine/isolation pay.

Staff self-screen at door.

A new CNA with symptoms reveals the symptoms during self-screening, but no one looks at screening form.

CNA with symptoms works 3-11 pm with 15 residents. She is worried about paying the rent.

CNA's symptoms worsen overnight and she calls off the next day. No one asks why. She is tested and reports the positive test to SNF that evening.

Drivers of Staff Stability

Management cares about employees.

Management listens to employees.

Help with job stress.

Adequate equipment and supplies.

Supervisor cares about you as a person.

MyInnerView, Inc.

“The grass is greener where it is watered.”

Janet Hamel, DON at PruittHealth, Barnwell

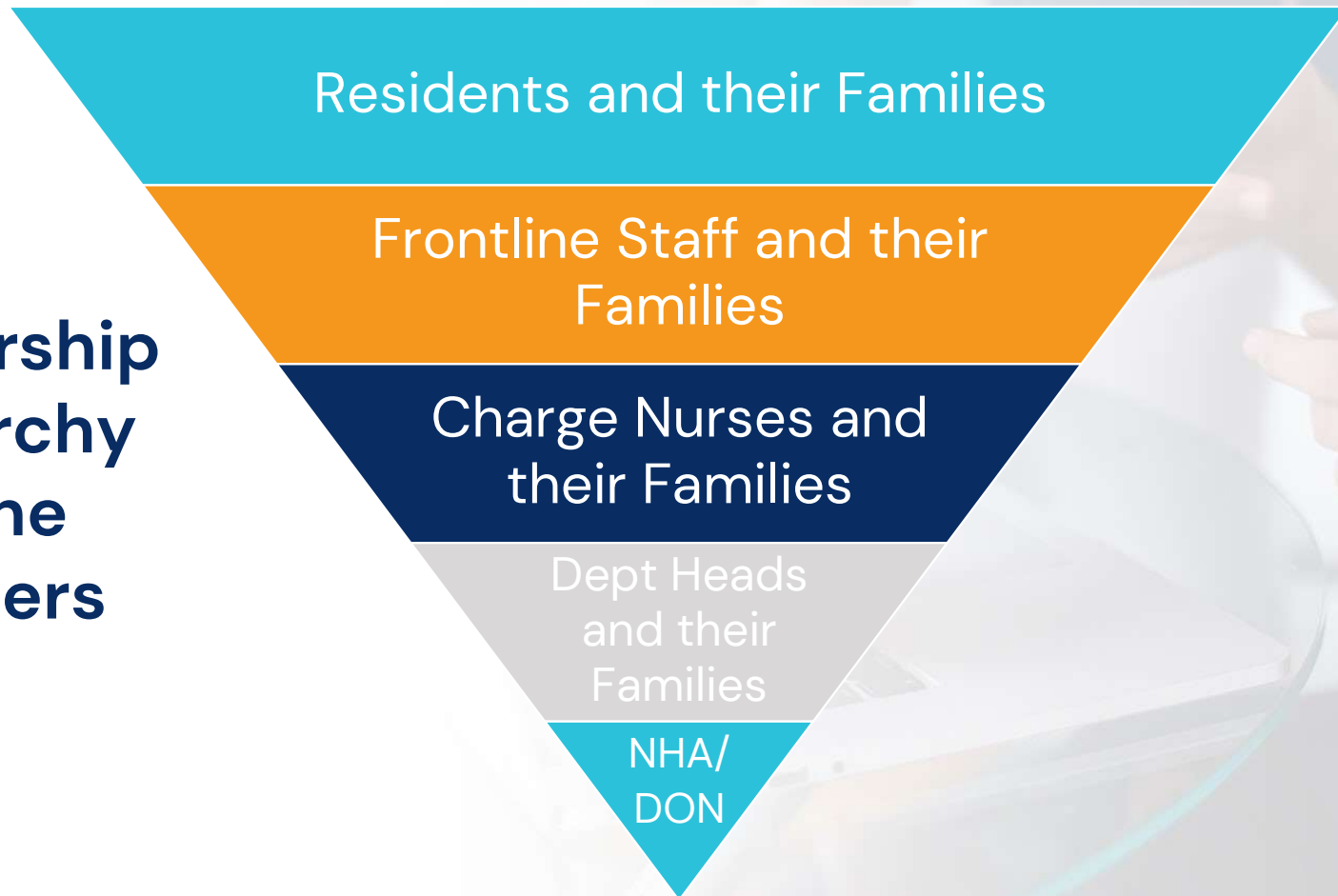
The Outliers: Balancing *Performance* with *Compassion*



Why their COVID numbers are Low, and their staff retention is High

- ✦ Triggered engagement.
- ✦ Leaders modeled the way.
- ✦ Communication:
Timely, Accurate, Transparent, Actionable, Caring
- ✦ Stable, consistent staffing.
- ✦ Antigen (Ag) testing, high vaccination/booster rates.
- ✦ Cleaned the air, plenty of PPE.
- ✦ COVID guidance – first to implement, more likely to sustain, and the last ones to pull back.

Leadership Hierarchy in the Outliers



Retaining Staff During COVID





★ MONTHLY ★

we will bring you an update around the other two programs:

- ★ **Frontline Supervisor Support Training Series**
- ★ **CNA Preceptor Turnover Management Program**



Frontline Supervisor Support Training Series: May Update

Second module discusses Quality of Leadership

- ✦ Role modeling
- ✦ Being a motivational leader
- ✦ Concept of empathy





NAHCA CNA Preceptor Program (Turnover Management Focus): May Update

This preceptor course has been taught over 30 years and has a proven track record of improving 90-day retention rates.

- ★ Beginning modules: Welcome and setting expectations
 - ★ "Careforce" not Workforce
 - ★ Mentoring is "instruction by example"
 - ★ Overcoming negative peer pressure and be a great preceptor



Collecting and Sharing Your Data

- ✦ Adopting new ideas.
- ✦ Measuring if the change made an impact.
- ✦ Process and outcome measures.
- ✦ Sharing data with peers and Constellation.

ACE Leadership Learning Collaborative

General Information

Month of Form Submission *

(April, May, etc)

Submitter Name *

Submitter email address *

Facility Name *

Select or enter value



CCN

This is your six-digit Medicare certification number

Pilot Monthly Data

[Please enter LAST month's data.](#)

New Hire Retention Rate *

Instructions:

After completing the calculation below, enter only the final percentage in the field below.

Direct Care Staff (DCS) are RNs, LPNs, and CNAs.

$\frac{\text{\# of new DCS hires in last 90 days still employed}}{\text{Total \# of new DCS hires in last 90 days}} \times 100$

Direct Care Staff (DCS) Turnover Rate *

$\frac{\text{Number of Separations in a Month}}{\text{Total Number of Employees in a Month}} \times 100$

of Unplanned Monthly Callouts *

of Callouts Each Month

☐ Send me a copy of my responses

Submit



Model for Improvement:

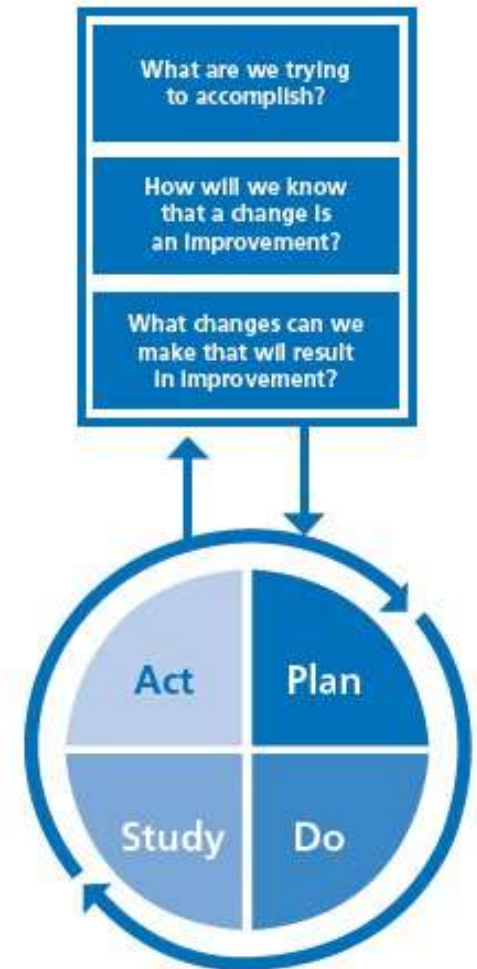
We will be providing you with a worksheet to assist your team with selecting and creating your individual action plan.

We will provide you with a simple data submission tool. Link to a digital form:

- 1) **Direct Care Staff (DCS) Turnover Rate** = $\# \text{ of separations in a month} / \text{total number of employees in a month} \times 100$
- 2) **New Hire Retention Rate** = $\# \text{ of new hires in the last 90 days still employed} / \text{total \# of new hires hired within the last 90 days}$
- 3) **Unplanned Monthly Call-Outs**: $\# \text{ of call-outs each month}$

What will you receive from us?

Constellation will in turn analyze this data and develop trend graphs for you. We will review during Coaching Sessions to assist you in your improvement goals.





Learning Session 2:

Wednesday, June 12, 2024, at 1 p.m. EDT

The Bundles:

- ✦ Financial Practices
- ✦ Care Practices
- ✦ Workplace Practices

Change Starts With One Step



“If you can’t change something big, change something small.”

Don Berwick
Quality Improvement Champion
Former President, IHI



TITLE

Thank you!