



Action Collaborative for Excellence
Powered by Constellation Quality Health

High Value Business Model in Nursing Homes

Change Package



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Purpose

To Pilot a High Value Business Model that Strengthens Staff Retention and Triggers High Performance



A South Carolina Long-Term Care Learning Pilot

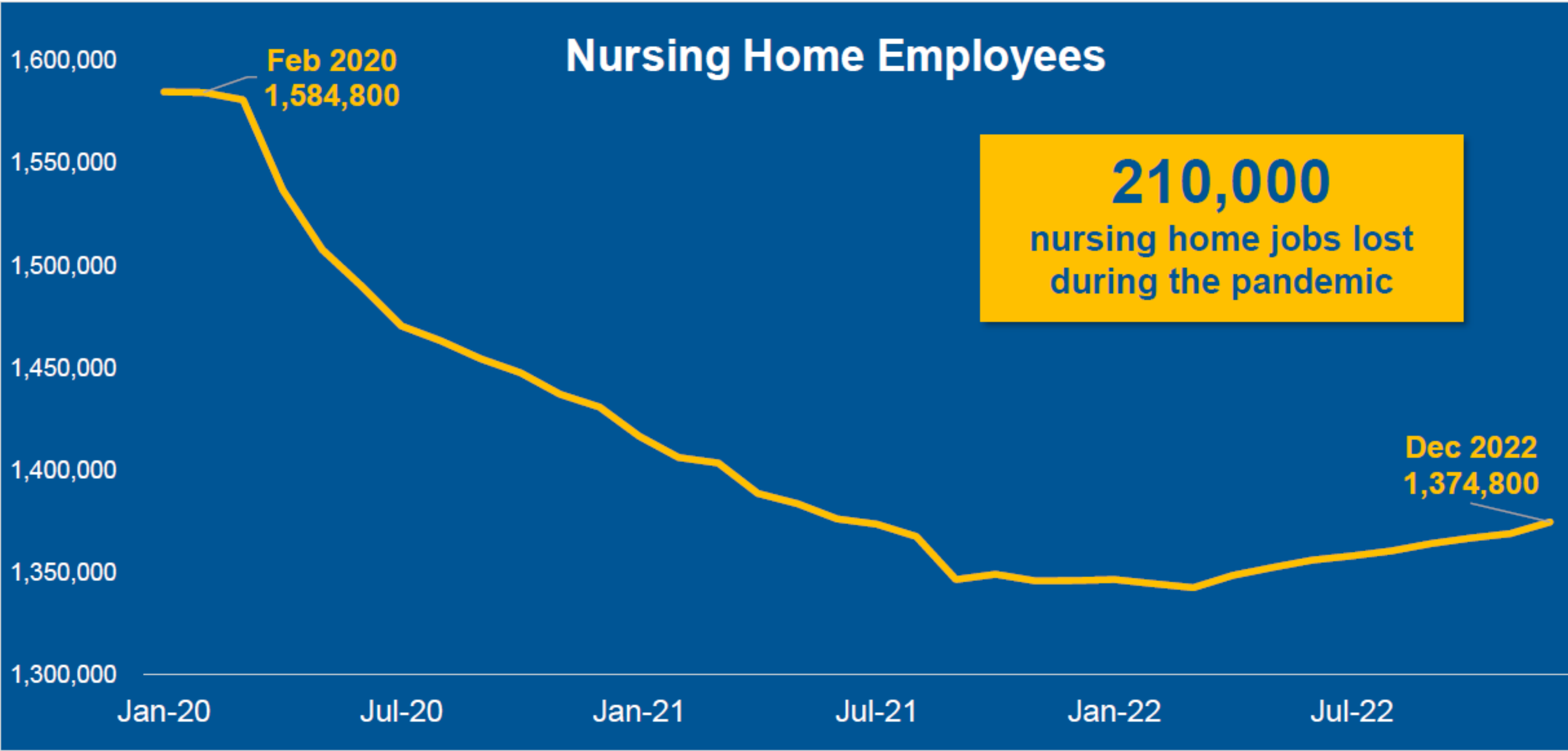
A collaboration to strengthen frontline staff retention as the foundation for high performance

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



Current State when the Project Started

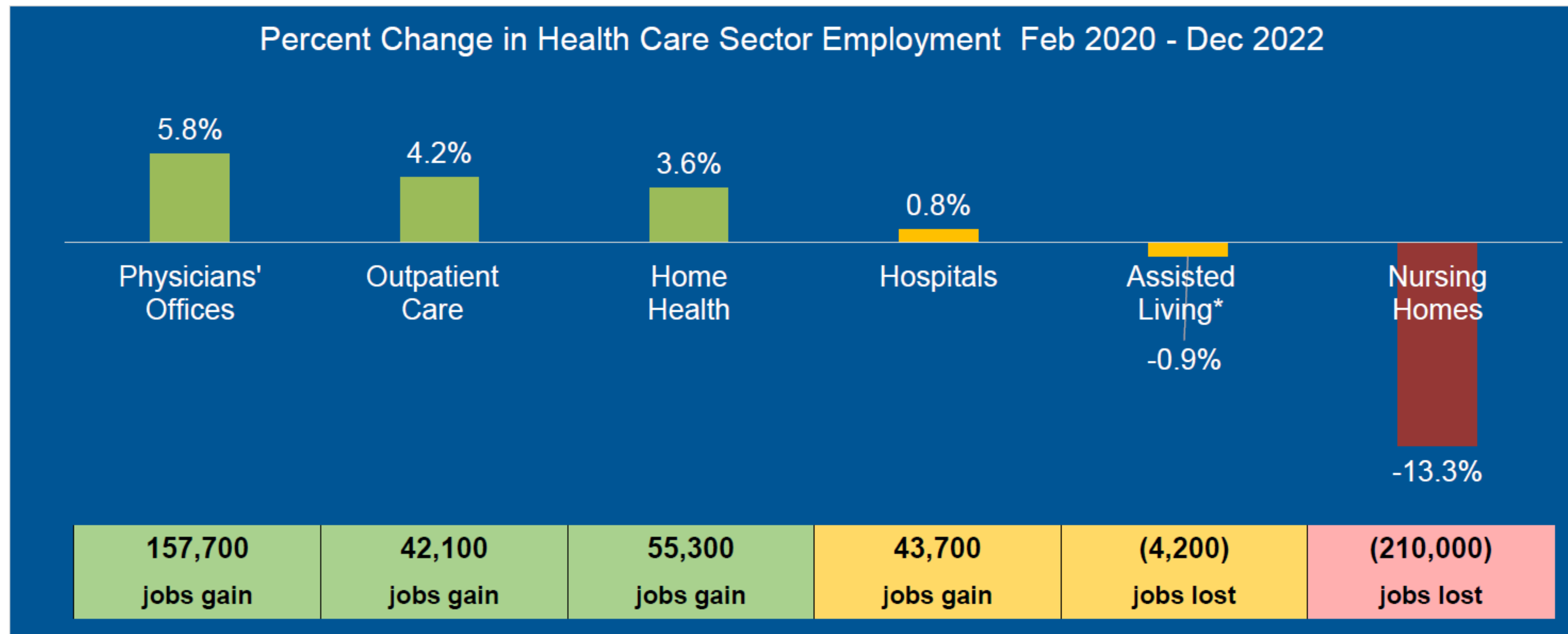
Nursing homes have lost more than 200,000 workers over the course of the pandemic.





Staff Were Not Coming Back to SNFs

LONG TERM CARE: WORST IMPACTED THAN ANY OTHER HEALTH CARE SECTOR





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Project Overview

- ✦ Phase 1: OCT 2022 (1 month)
 - Assess/learn best practices from eight high-performing nursing homes.

- ✦ Phase 2: JAN–SEP 2023 (6 months)
 - Launch the SC Learning Collaborative Pilot (cohort to explore best practices).
 - Assess/learn best practices from eight high-performing nursing homes.
 - Support the pilot program.
 - Evaluate results.

- ✦ Phase 3: JAN–DEC 2024 (12 months)
 - Spread best practices to additional pilot nursing homes in a virtual learning collaborative.

Phase 1

Phase 1:

South Carolina's Elite 8 Outliers

- ✦ Purpose: Learn best practices and gain valuable insights from 8 high-performing nursing homes in South Carolina over the first 2 years of the pandemic.
- 1. Identified 8 high-performing facilities with the fewest COVID cases and high workforce retention rates.
- 2. Conducted onsite visits with each identified high performer.
- 3. Identified outstanding leadership practices, staffing strategies and infection control strategies.



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What Did They Do Differently?

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

- ✦ 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?





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We asked about their COVID practices

...and they answered with their leadership practices

- Having high standards combined with caring and compassion
- They were hands-on, roll-up-their-sleeves leaders
- They were inclusive and in partnership with the staff
- Created the conditions where staff felt safe



Identified a Bundle of High Value Interventions

| Management Practices | Financial Investments | HR Practices |
|---|---|---|
| <p>Presence/Communication</p> <ul style="list-style-type: none"> -Rounding to check-in on people -Huddles with everyone sharing -Regular town hall/community meetings -Hands-on leaders pitching in | <p>Wages and Benefits</p> <ul style="list-style-type: none"> -Pay staff enough to live on -Provide affordable health insurance -PTO -Emergency funds | <p>Bringing in New Team Members</p> <ul style="list-style-type: none"> -Recruit, screen, and hire for character -Include staff in the process -Help new staff settle in |
| <p>Inclusion</p> <ul style="list-style-type: none"> -CNAs in care planning meetings -CNAs and frontline nurses in QI -All staff involved in improvement and community building efforts | <p>Morale Building</p> <ul style="list-style-type: none"> -Reward core staff -Invest in fun, community building, relationship-building activities | <p>Incentivize Stability and Growth</p> <ul style="list-style-type: none"> -“Refer and Retain a Friend” bonus -Bonuses for reliability and a job well done -Tuition for basic and professional education |
| <p>Community Building</p> <ul style="list-style-type: none"> -Health and wellness -Relationship building -Fun -Continual appreciation and caring | <p>Work Environment</p> <ul style="list-style-type: none"> -Staffing levels -Staff have what they need for good care -Employee break room -Staff work areas and equipment | <p>Personalize Scheduling</p> <ul style="list-style-type: none"> -Schedule so people can come to work -Cover for each other when life happens -Find out what’s going on |

Why People Stayed at these SNFs during the Pandemic

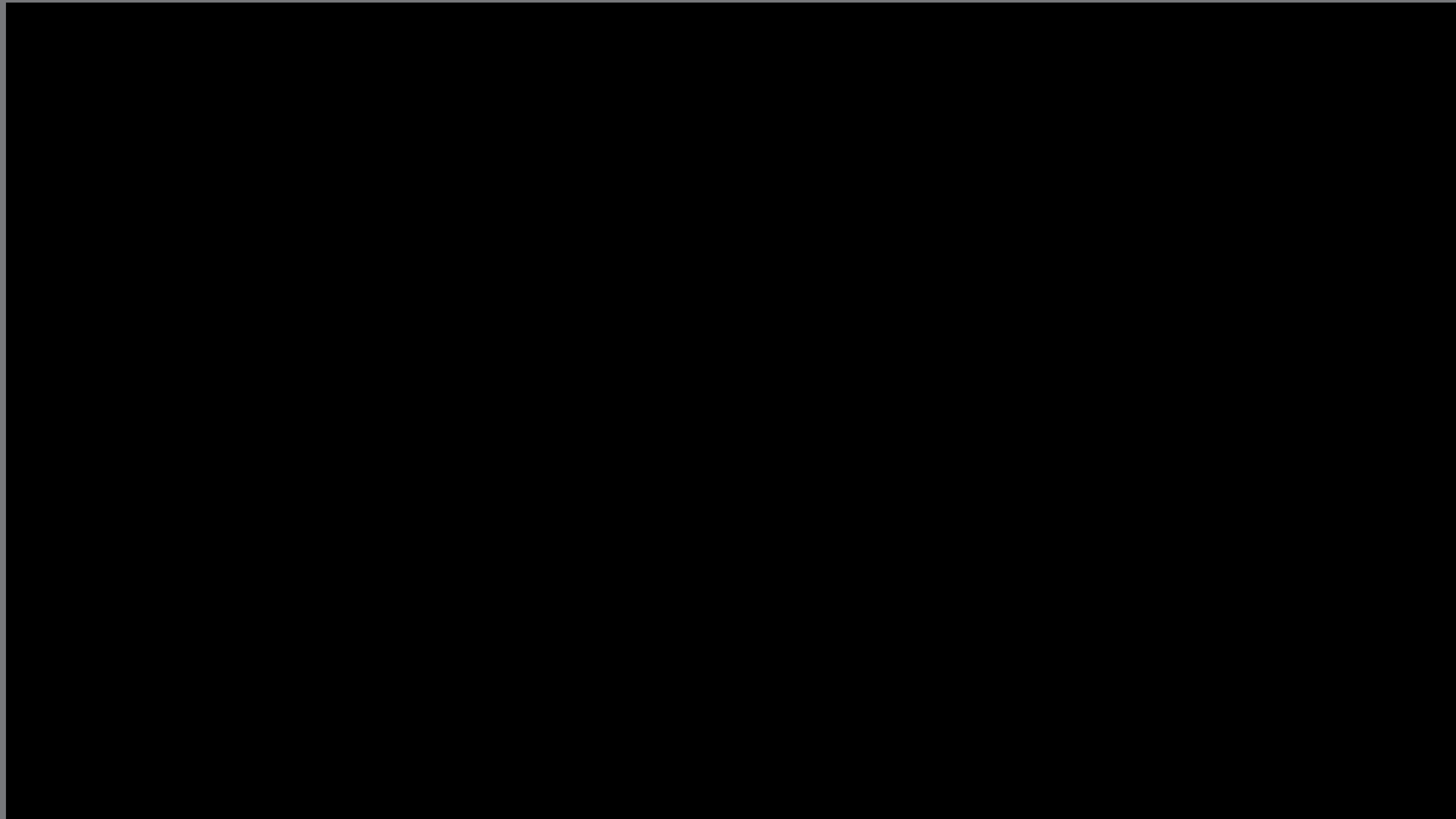
They created the conditions where their staff felt safe, valued, informed and cared about.



Leadership



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The Leaders in the Elite 8 Did More Than the Staff Expected Them to Do

They made investments to keep their staff and show that they cared about them and their families.

- ✦ Showed 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 homes.



Offered Staff Paid Time Off to Isolate or Quarantine due to COVID

They made sure that their staff could pay the rent.

- ✦ Generous paid time off policies triggered their staff to be more transparent about their COVID exposure(s) which helped keep the virus contained.
- ✦ In some SNFs, they set up a process for staff to donate their sick pay to other staff in need.
- ✦ Other SNFs allowed for their employees to accrue a negative sick pay balance.
- ✦ And many expanded their use of their emergency funds as a safety net for staff in need.



Drivers of Staff Stability at these SNFs

- ✦ 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

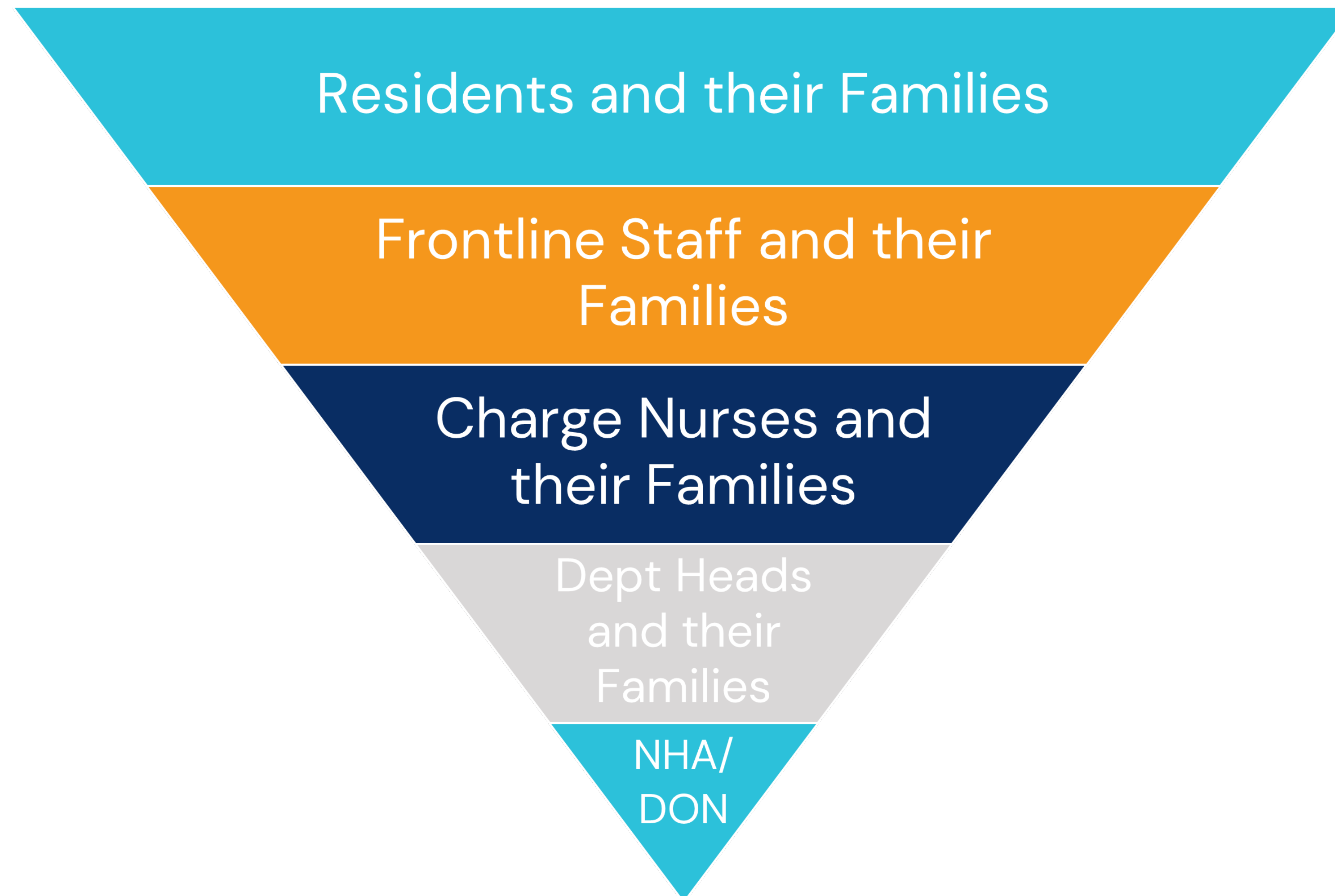
PruittHealth, Barnwell

The Elite 8 SNFs who Kept Their Staff and Kept COVID Out

Balanced
performance and
accountability
with compassion
and flexibility.



Leadership Hierarchy was flipped upside down in the Elite 8 SNFs we visited



Acknowledgments

The Elite 8 of Phase 1 of the Project



We gratefully acknowledge the contributions of the following organizations that so generously shared their time, effective practices, and experiences which informed and laid the foundation for the content this change package.

- Presbyterian Communities of South Carolina – Foothills
- Greenwood Transitional Rehab, SNF
- NHC Healthcare, Anderson
- Pruitt – Barnell
- PruittHealth – Dillion
- NHC Healthcare, Sumter
- Spartanburg Hospital for Restorative Care, SNF
- RoseCrest



Phase 2

Phase 2:

Purpose: To support 12 diverse SNFs with the implementation of the best practices learned from the Elite 8 to lower staff turnover and improve their staff retention.

- Conducted onsite visits to learn about the 12 SNFs and their staffing challenges.
- Led virtual coaching sessions to support implementation of some of the Elite 8 SNFs best practices that fit best for their facility.
- Identified the tested and refined best practices from phase 2 to spread to phase 3 SNFs.

Nursing Homes with Low Staff Turnover

Have Leadership Teams That:

- ✦ Understand that staff stability requires an upfront investment, and they invest wisely to incentivize the staff to care about the residents and each other.
- ✦ Prioritize high quality, resident-centered care in a clean, safe home-like environment.
- ✦ Are humble and are willing to learn about and implement best practices. They never stop learning and trying new approaches to engage the staff.





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More Ideas that Engage and Retain

- ✦ Rookie of the Month.
- ✦ Employee of the Month.
- ✦ Improve name badges.
- ✦ Solve battles for scarce supplies.
- ✦ New chairs for the nursing stations.
- ✦ Raffles related to data.



When it Comes to Staff Turnover...



What a Difference Management Makes!

Susan Eaton, 2002, MIT research
for CMS on turnover in nursing homes

Not All SNFs Have High Staff Turnover

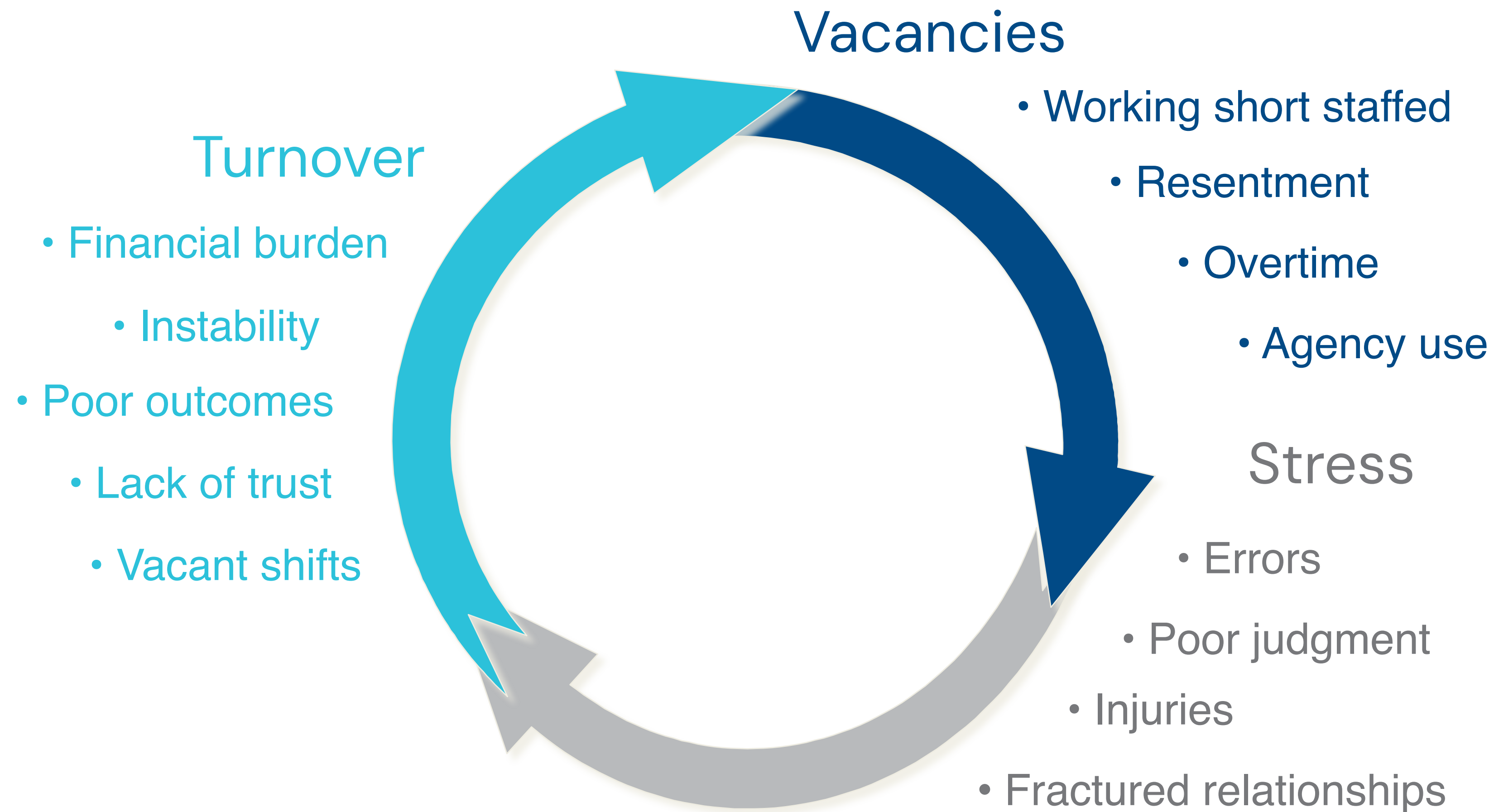
In a study of nursing homes across the street from each other, where one had high staff turnover, and the other had low staff turnover, researcher Susan Eaton found these areas that distinguished low turnover SNFs from high turnover SNFs –

- ✦ Leadership visibility – leaders who are visible and who make frequent rounds and talk to all the staff in a positive manner.
- ✦ Care for the caregivers – leaders who know that the staff who provide the most hands-on care need leaders who care about them through their words, actions, staffing levels, benefits, policies and procedures and even the condition of the breakroom.
- ✦ Keep the people you hire – leaders who extend orientation time if needed, who create career ladders for their low-wage earners, and have fair and flexible scheduling practices.
- ✦ Provide fair and consistent staff assignments – leaders who know that caregivers can only deeply know their residents if they care for them consistently.
- ✦ Minimize understaffed shifts – leaders who treat absenteeism as an organizational problem and address each of root causes that results in unplanned staff absences.

The Vicious Cycle of Understaffed Shifts, High Levels of Stress, and Staff Turnover



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Eaton, 2002, What a difference management makes!



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Relationships Matter





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Leadership Practices

To demonstrate management listens to employees:

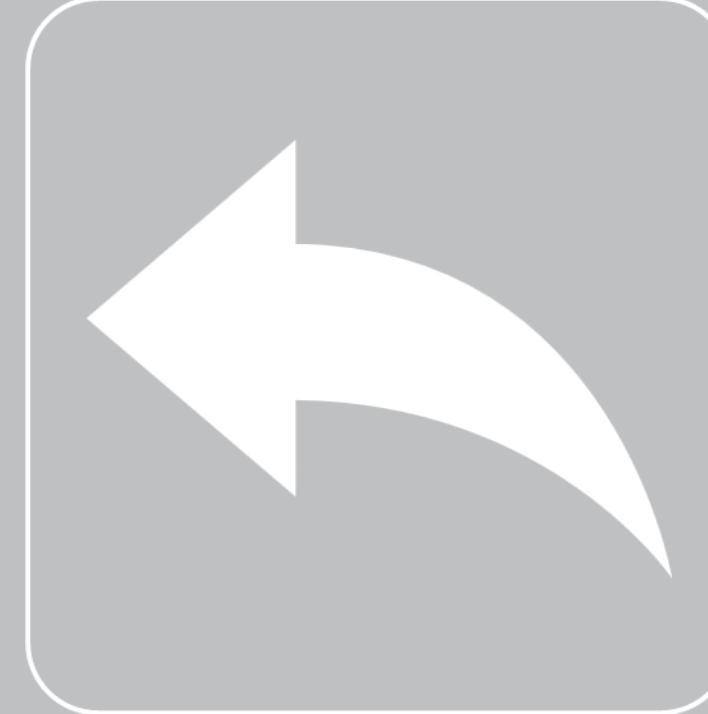
- ✦ Implement and attend unit huddles and community meetings. Ask key questions, listen, act, and follow-up.
- ✦ Share data and ask for ideas from staff on how to improve staff retention.
- ✦ Conduct consistent, frequent rounds. Compliment staff performance, ask questions.





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Effective Leadership Rounds



Mood
Posture
Facial
expressions

Content:
What you
observe,
say, and do

Timing

Following
up



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Leaders are Always In the Spotlight!

Best practices when leaders are making rounds through the nursing home –

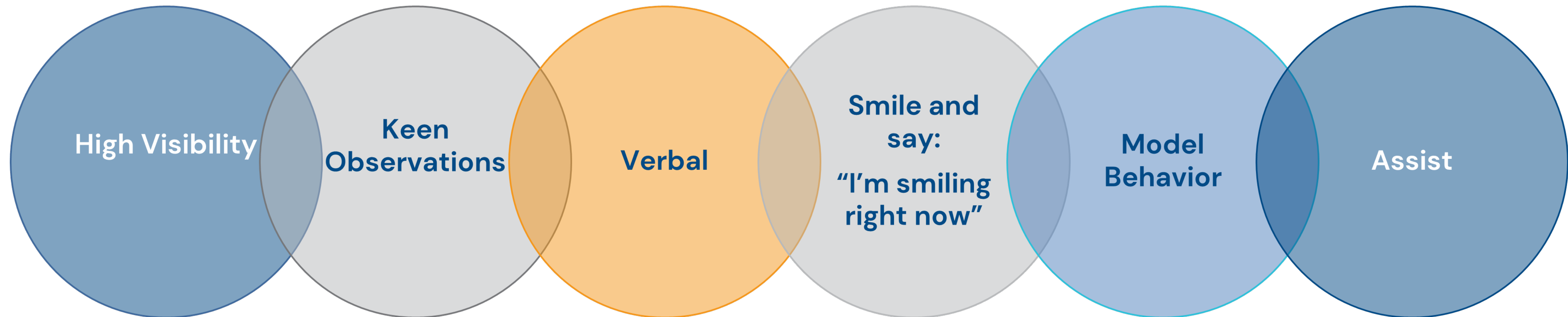
- ✦ Make eye contact, smile, call staff by name, say hello.
- ✦ Find something to praise, intentionally look for genuine ways to notice staff performing well.
- ✦ Slow down, linger, don't let anyone believe that your rounds are a race.
- ✦ Hand out granola bars to the staff (or apples, or cookies).
- ✦ Be a positive force, a helper, a problem solver, a housekeeper.



Purposeful Leadership Rounds



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Key Questions to Ask Staff During Rounds

- ✦ Relationship-building:
 - ✦ “How are your beautiful kids doing?”
- ✦ Focus on the positive:
 - ✦ “What is working well today?”
- ✦ Positive feedback loop:
 - ✦ “Is there anybody who has gone above and beyond the call of duty?”
- ✦ QI-Systems focus:
 - ✦ “Is there anything we can do better?”
- ✦ Needs:
 - ✦ “Do you have the tools and equipment to do your job?”

Priority is Leadership Team Visibility



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**Before
Huddles**



**Last
Rounds**



Mealtimes



Weekends



**Shift
Change**

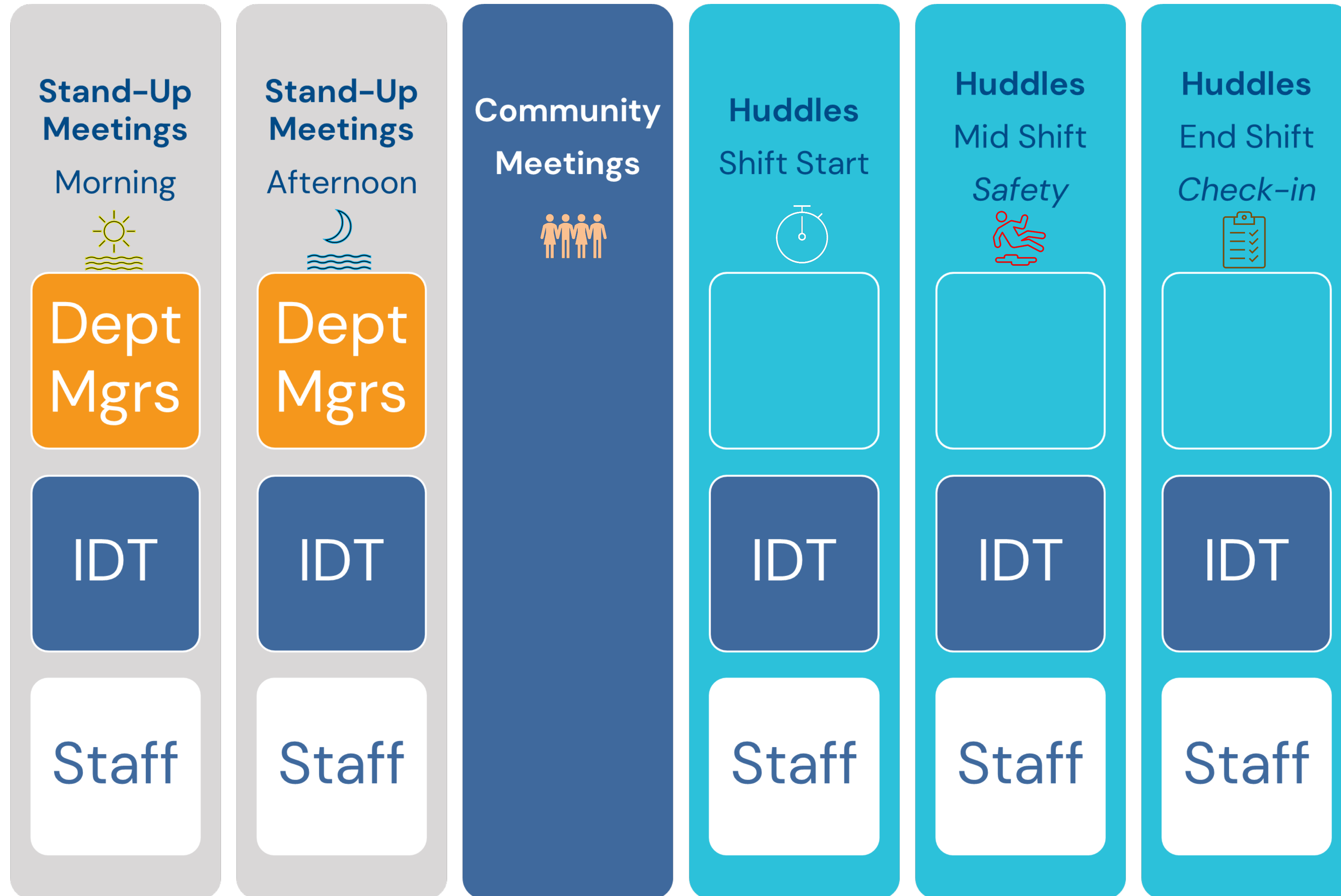


Nights

Systems of Communication



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Low Turnover SNFs Huddle Up!

How long?

- ✦ 15–20 minutes
- ✦ Each unit/neighborhood

Who attends?

- ✦ Administrator
- ✦ DON
- ✦ IP
- ✦ DSD
- ✦ Nurse supervisors
- ✦ Key department heads
- ✦ All nursing staff
- ✦ Housekeepers from each unit

How to Do It?

- ✦ Start at a time that works best for most nursing staff on the unit.
- ✦ Position the CNAs and other care staff in the middle of the huddle and give them seats if possible while the leaders and the IDT stand.
- ✦ The key is to share information and have the frontline care staff provide relevant information about their residents' conditions – reporting by exception.
- ✦ IDT and nursing staff listen and provide additional information and context. Care plan changes are agreed upon after discussion.
- ✦ Designated staff cover call lights for CNAs to stay in the huddle for 15–20 minutes.



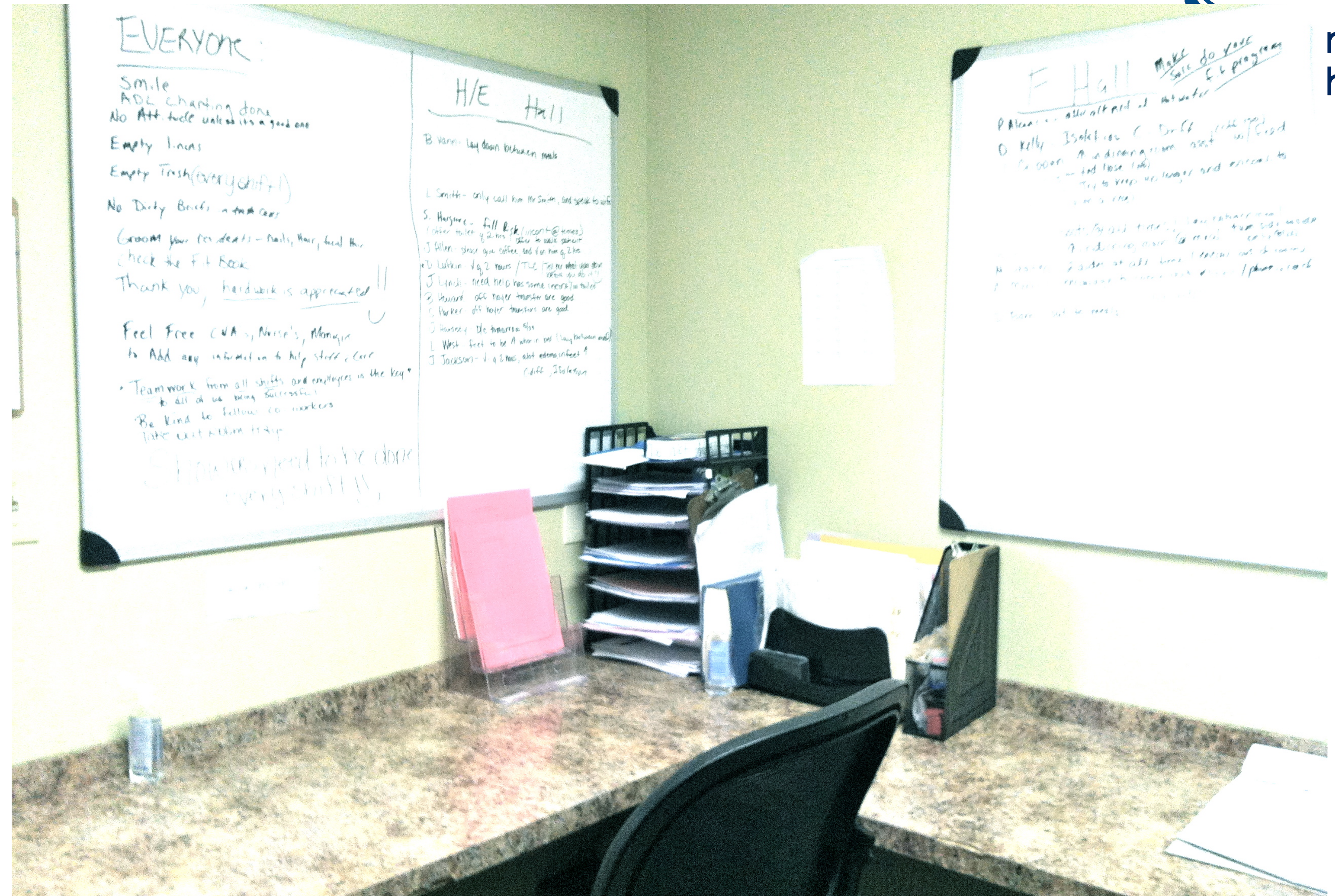
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Huddle Up!

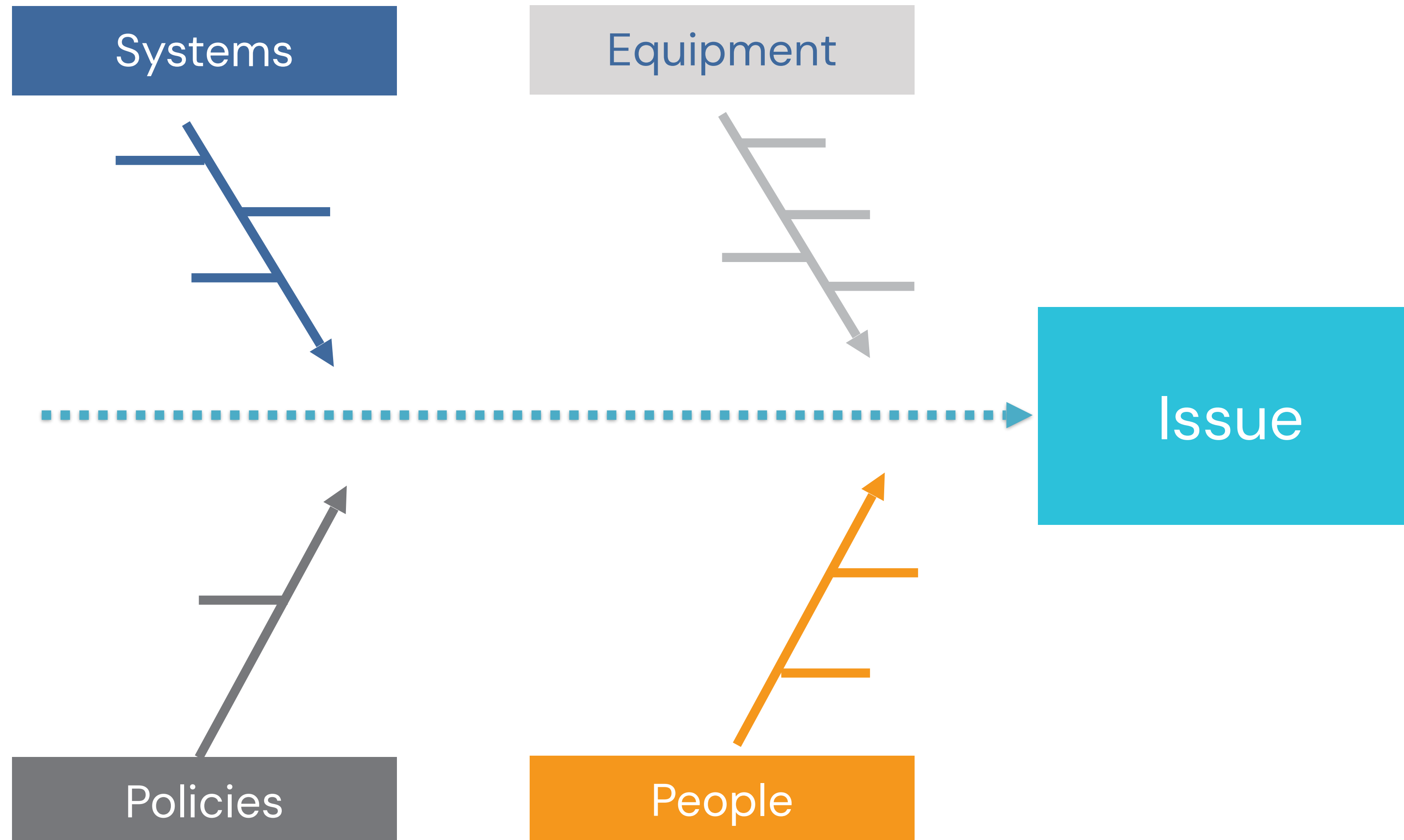
Agenda:

- ✦ Staff kudos and shout-outs, organizational milestones or noted improvements – LEAD with the POSITIVE.
- ✦ New staff members – introductions.
- ✦ Point-of-care staff needs: equipment, supplies, PPE, staffing.
- ✦ Point-of-care staff requests: follow-up from previous huddle(s).
- ✦ Incidents and accidents, safety hazards.
- ✦ Clinical focus area, update on QAPI PIPs.
- ✦ New guidance changes, news, announcements.
- ✦ “At risk” residents and residents on the watch list.
- ✦ Point-of-care staff observations, changes in conditions.

A huddle with a white board keeps the focus on the residents on the watch list.



Huddles Help to Facilitate Critical Thinking among the IDT:





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Leaders Follow-Up After Huddles

Best Practices after huddles:

- ✦ Make rounds on the unit and let staff know they were heard.
- ✦ Thank staff who contributed.
- ✦ Summarize key points and follow-up items if needed.
- ✦ See the resident that were being discussed at the huddle and ask more questions.





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Care Planning and Quality Improvement

To collaborate with staff
closest to residents.

Rounding and QI Closest to the Residents

To support staff closest
to the residents.

Infrastructure for High Involvement

Huddles

Staff routinely share and
problem-solve together.

Staff Stability and Consistent Assignment

Staff deeply know groups
of residents and
coworkers.

Bundle of High Value Interventions



Change Concept Bundle Example

Peer Mentoring Program



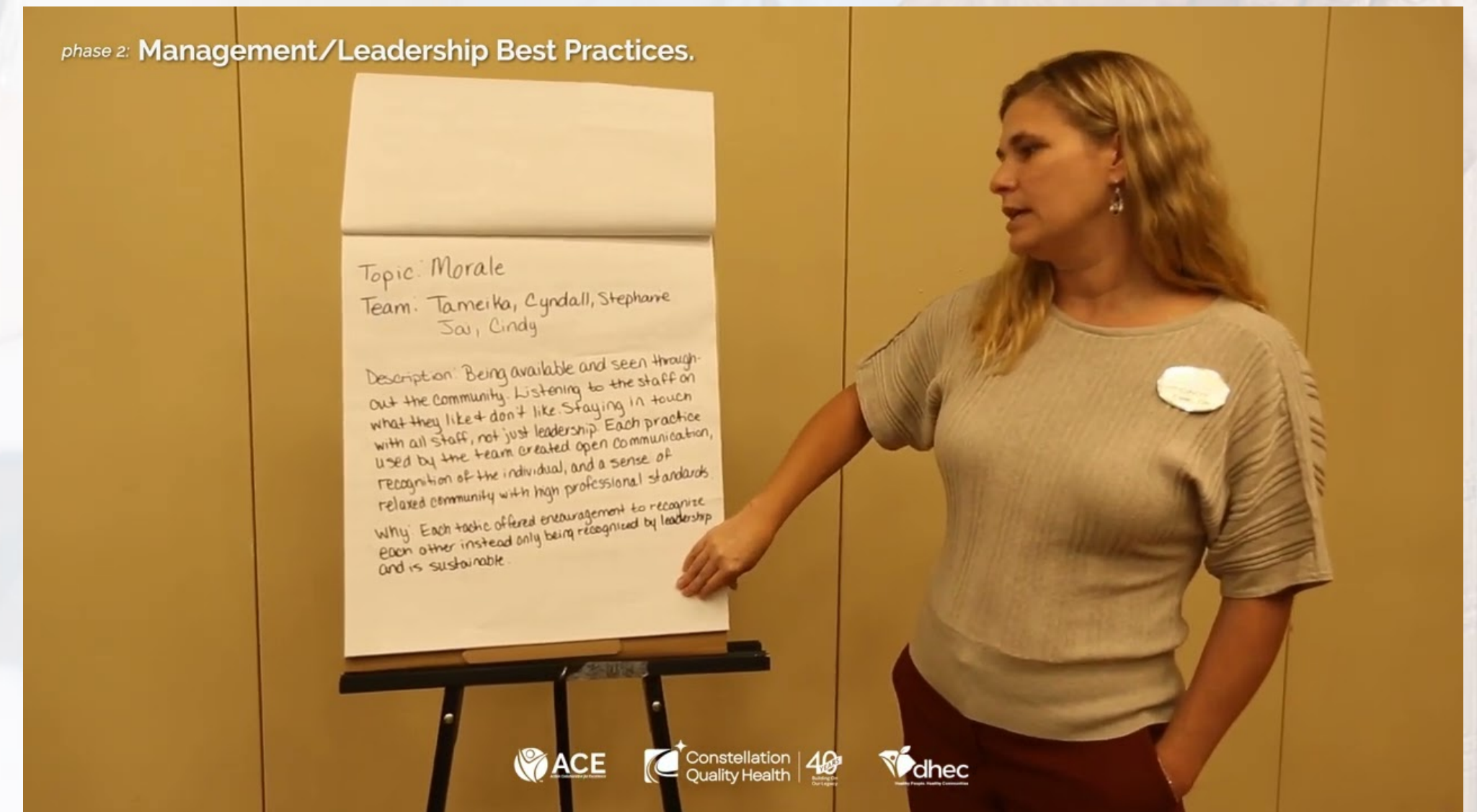
Change Concept

High Involvement Management Practices

Leadership Best Practice:

Morale Building

- Being available and seen throughout the facility
- Listening to the staff regarding their irritants at the SNF
- Recognition of individual and group achievements



Phase 2

Pilot Homes Most Effective Morale Building Practices

- Stay Interviews – interviewing new hires at regular intervals to ensure that you can address any issues early before they resign.
- Adopt a nurse – each department manager adopts a group of nurses to check in with, support and reward.
- Employee Satisfaction surveys – questionnaires where staff have an opportunity to rate how satisfied they are working at the SNF.
- Employee Appreciation Committee – forming a diverse group of staff to create engaging events.



[Download Tip Sheet:](#) (134 KB)

Generating Employee Engagement by Investing in Employee Morale from resource library.



Change Concept

High Involvement Management Practices

Management/ Leadership Practices

Communication via Huddles and Rounds

- Fostering regular communication so that staff feel listened to and supported by leadership.
- Huddles help to sharpen the staff's critical-thinking and collaborative problem-solving skills.



Phase 2

Pilot Homes Most Effective Communication and Community Building Practices

- Morning Rounds – checking in with everyone before the first huddle with the staff begins.
- Regular Huddles with Front-Line Staff – the best performing nursing homes have leaders and the IDT huddle with the staff who are providing the hands-on care.
- Rounding at busy times – at lunch, during change of shift, on holidays.
- Check-Ins with New Staff – finding new hires and letting them know that your supporting them.



[Download Tip Sheet: \(139 KB\)](#)

Management Practices for Positive Presence, Communication, and Community Building from Resource Library.



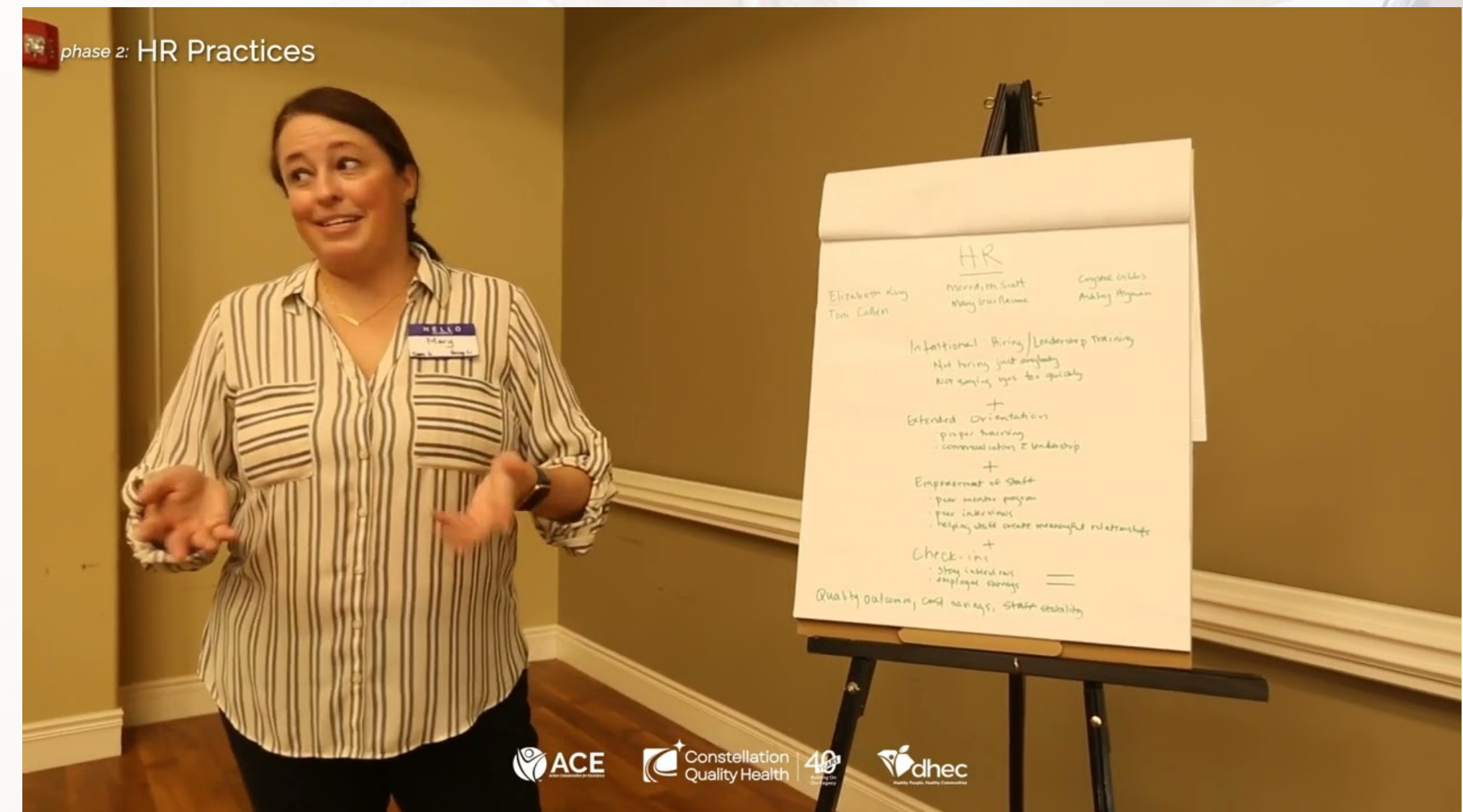
Change Concept

High Involvement Management Practices

HR Practices

Staff Retention

- Intentional hiring
- Extended Orientation
- Peer Mentor Program



Phase 2

Pilot Homes Most Effective HR Practices

Intentional Hiring

Changed from hiring to fill needs quickly to hiring the right people for the job. This breaks the cycle of turnover among newly hired staff.

- Revamped their “refer a friend” program to make it more user friendly with fewer restrictions and a faster bonus payout.
- Changed how they interview, focused their interview questions on character traits and relational skills.



Phase 2

Most Effective HR Practices

Extended Orientation

To give new staff proper training and not just be thrown out on the floor to figure out how to do the work on their own.

- Peer Mentor Program
- Helping new staff form meaningful relationships
- Checking in with new staff through stay interviews
- New Employee satisfaction surveys and follow up on responses
- Leadership Training regarding retaining new hires



[Download Tip Sheet:](#) (125 KB)

Management Practices for Positive Presence, Communication, and Community Building from Resource Library.



Change Concept

Financial Practices



Phase 2

Financial Practices

Investments made in staff stability –

- Investments in higher direct care staffing hours PPD – higher staffing levels result in lower staff turnover and better clinical care outcomes.
- Affordable health insurance for low wage earners – benefit costs are tiered according to family income levels.
- Investing in fun events and staff morale – if the staff never have any fun at work, don't expect them to stay with you. Community building events trigger staff stability.
- Offering generous sick pay, paid time off accruals and holiday pay – many nursing homes in SC offer the staff little to no paid time off. High performing SNFs with low staff turnover provide benefits the communicate to the staff that management cares about them and their families.



Phase 2

Pilot Homes Financial Practices

Implement wise and low-cost, high yield investments such as...

- Painting and renovating the staff breakroom and the staff bathrooms.
- Purchasing a second microwave oven for the staff breakroom so no one has to wait.
- Purchasing new chairs at the nursing stations.
- Painting and improving the guest bathrooms
- Purchasing plants, new art work, and other décor to enhance the environment.
- Purchasing, writing, and sending thank you cards to the staff.
- Investing in fun community building events such as Halloween parties, staff talent shows, national nursing home week.





Phase 3

Phase 3: Sharing Best Practices with SC Nursing Homes



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- ✦ Leadership Collaborative (26 recruited nursing homes)
- ✦ FSS
- ✦ NAHCA Turnover Management Program



Frontline Supervisor Support Training Series

Target: nurse managers/
supervisors

**NAHCA
CNA Preceptor Program**

Target: CNAs, staffing
coordinator, facility
educator

**Leadership
Collaborative**

Target: NHA, DON,
ADON

ACE Learning Collaborative

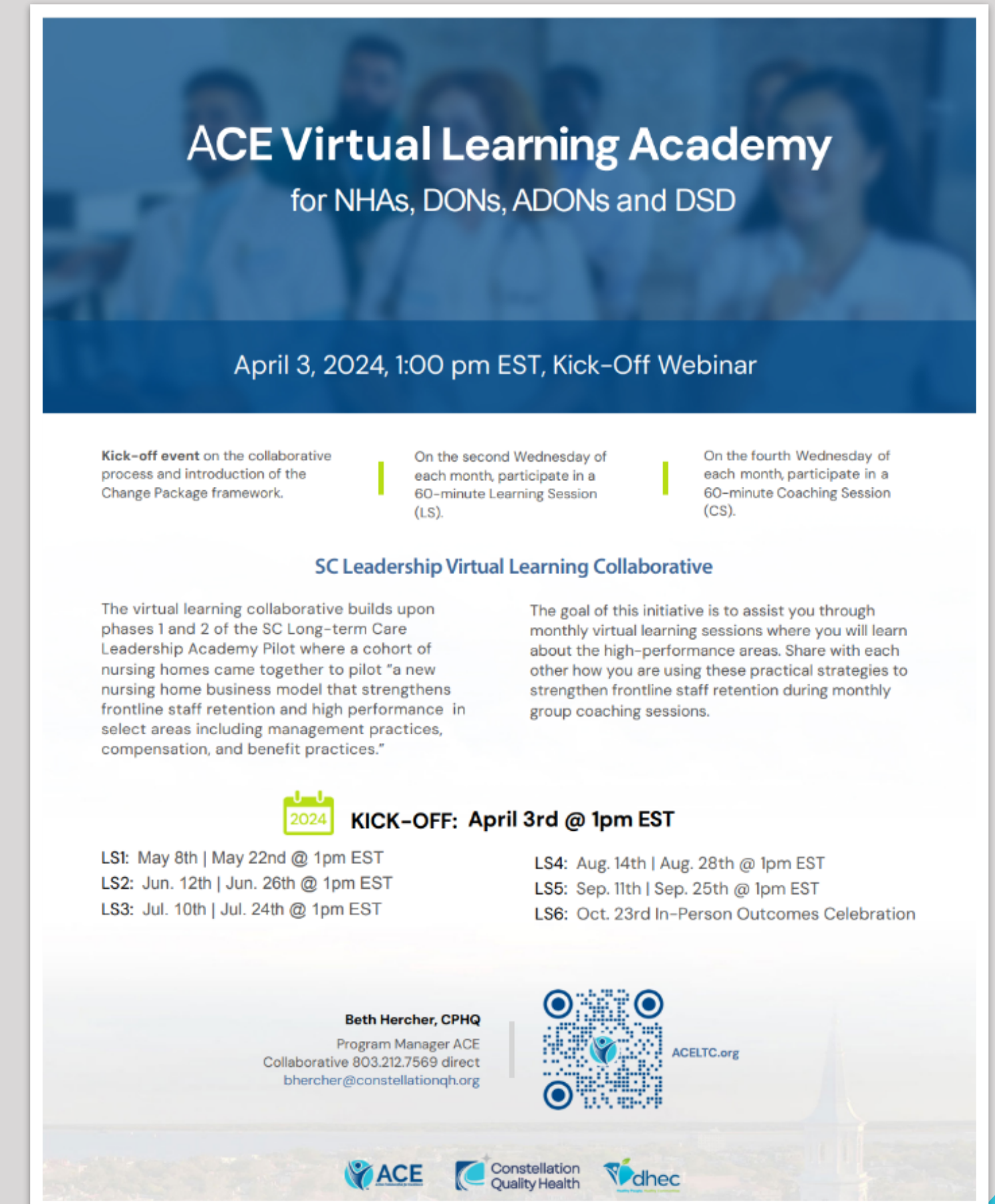
APRIL–OCT 2024

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.



ACE Virtual Learning Academy
for NHAs, DONs, ADONs and DSD

April 3, 2024, 1:00 pm EST, Kick-Off Webinar

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).

On the fourth Wednesday of each month, participate in a 60-minute Coaching Session (CS).

SC Leadership Virtual Learning Collaborative

The virtual learning collaborative builds upon phases 1 and 2 of the SC Long-term Care Leadership Academy Pilot where a cohort of nursing homes came together to pilot "a new nursing home business model that strengthens frontline staff retention and high performance in select areas including management practices, compensation, and benefit practices."


The goal of this initiative is to assist you through monthly virtual learning sessions where you will learn about the high-performance areas. Share with each other how you are using these practical strategies to strengthen frontline staff retention during monthly group coaching sessions.


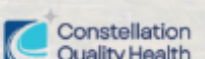

2024 KICK-OFF: April 3rd @ 1pm EST

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
LS6: Oct. 23rd In-Person Outcomes Celebration

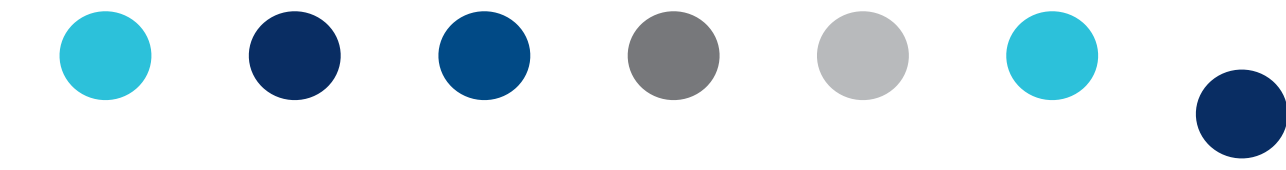
Beth Hercher, CPHQ
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 ACELTC.org

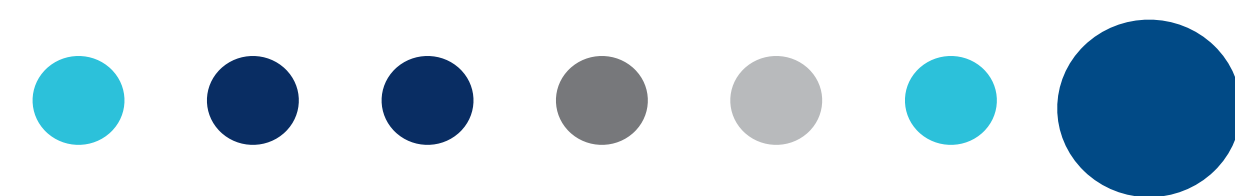
Active Participation Accelerates All Participants

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



Frontline Supervisor Support Training Series

Developed and offered phase 3 participants a free nurse leadership training series –

- The purpose of the series is to share necessary skills to boost or reinforce the leadership competencies of frontline supervisors.
- Self-paced, online learning series.
- Seven (7) modules.
- Pre-test, learning module, post-test.
- Each learning module (video) is about 10 minutes in length.
- Brief course evaluation.

Frontline Supervisor Support Training Series

- **Leadership topics included:**
 - Building relationships and effective teams
 - Qualities of leadership
 - Delegation
 - Coaching vs. supervising
 - Communication wins
 - Managing and organizing your day
 - Conflict resolution

Frontline Supervisor Support Training Series

Data to date:

- 4 organizations have signed up, 2 pending.
- 30 staff enrolled.
- 18 learners have completed the course (60%).
- 94% of enrollees rate the overall experience of the course as “Good” or “Very Good”.

“Leadership is unlocking people’s potential to become better.”

Bill Bradley, American politician

Keeping New Hires Requires A Warm Welcome from Management

Help new staff feel welcomed.

- Leadership:
 - Administrator personally tunes into new staff.
- Supervisor:
 - Introductions, check-in at unit stand-up meeting.
 - Assign support.
- Co-workers:
 - Picture of new staff with bio.
 - Pizza party welcome.
 - Reward unit when new staff stay.



When Onboarding for Retention



Stable and
consistent
assignment



Flexible and
protected learning
time – from 3
days to 2 weeks



Extend the
orientation until
they're solid





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Peer Mentors for Staff Retention

- Have the right people as your peer mentors:
 - Have an application and selection process
 - Hold interviews and ask for recommendations
- Developing peer mentors together:
 - Interactive process
 - Everybody teaches and learns



National Association of Certified Nursing Assistants (NAHCA) Turnover Management Program

Participating nursing homes received the following free benefits:

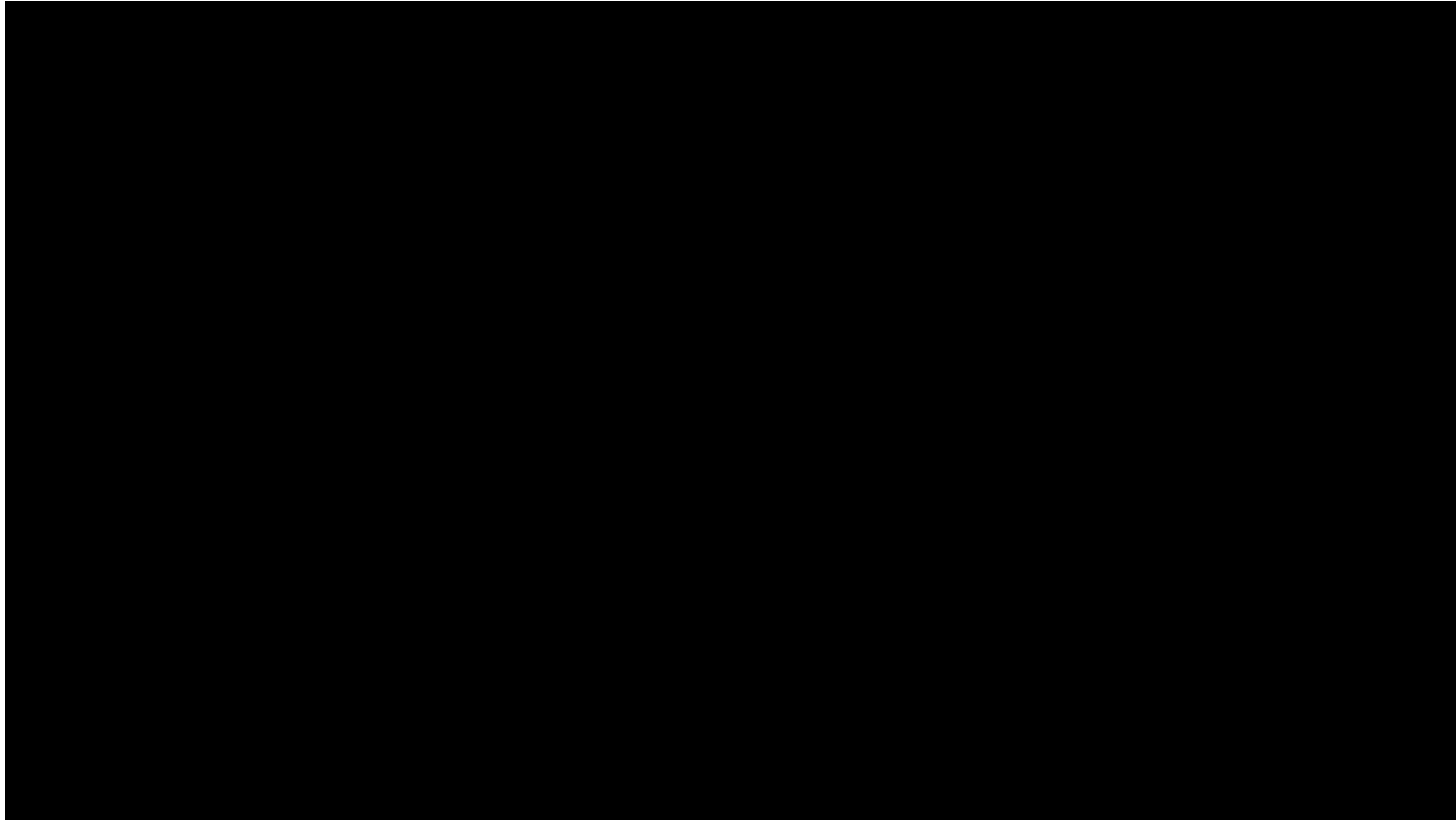
- Received up to 6 access licenses to the NAHCA preceptor trainings.
- Received personalized and branded portal until the end of this year.
- Were able to certify up to 6 preceptors in the facility.

National Association of Certified Nursing Assistants (NAHCA) Turnover Management Program

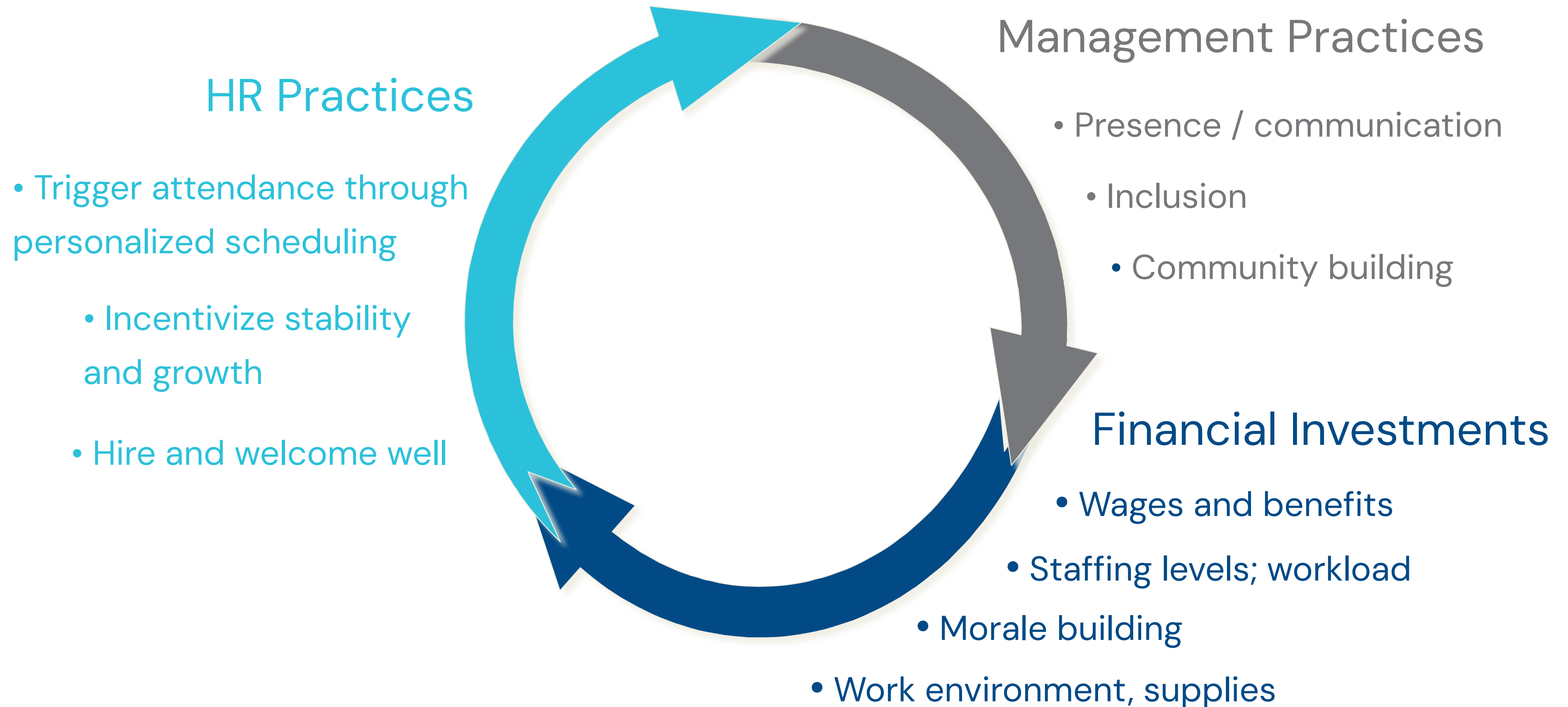
Progress Update:

| Number of Participating Nursing Homes | Number of Preceptors Enrolled | Number of Certified Preceptors |
|---|-------------------------------------|--------------------------------------|
| 20 | 15 | 11 |

NHC Sumter: Partner Engagement Program



Mutually Reinforcing High Value Bundle



Change Starts with One Step



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









Don Berwick, Quality












Improvement Champion

Former President, IHI

Resources

Tip Sheets and Links to Resource Page on ACE

-  [Refer a Friend](#) (Docx 259 KB)
-  [First 24 Hours](#) (Docx 80 KB)
-  [CNA Mentor Program](#) (Docx 84 KB)
-  [Morale Tip Sheet](#) (PDF 134 KB)
-  [Management Tip Sheet](#) (PDF 139 KB)
-  [HR Practices Tip Sheet](#) (PDF 125 KB)
-  [Nurse Leadership Development](#) (Docx 289 KB)
-  [People Bingo](#) (Docx 106 KB)
-  [CNA Mentor Programs](#) (PDF 81 KB)
-  [Stay Interviews Quick Tips](#) (PDF 78 KB)
-  [Assessment Tools](#) (PDF 533 KB)
-  [ACE Worksheet Guide 2024](#) (PDF 181 KB)

-  [More of a Good Thing Online Video](#)
-  [Outliers: Lessons Learned from the Pandemic](#)
-  [Leadership Rounds](#) (PDF 102 KB)
-  [Watch List Huddles Quick Tips](#) (PDF 79 KB)
-  [QI Closet to the Resident Tip Sheet](#) (Docx 76 KB)
-  [More of a Good Thing: Roundtable Series](#) (PDF 3 MB)
-  [ACE Learning Session 1](#) (PDF 5.1 MB)
-  [ACE Learning Session 2](#) (PDF 5.2 MB)
-  [ACE Learning Session 3](#) (PDF 3.4 MB)
-  [ACE Learning Session 4](#) (PDF 2.1 MB)
-  [ACE Learning Session 5](#) (PDF 5.2 MB)

[Click Here to View All Resources](#)

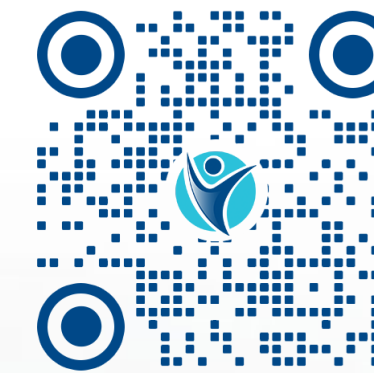




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Pilot of High Value Business Model in Nursing Homes

Change Package



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