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

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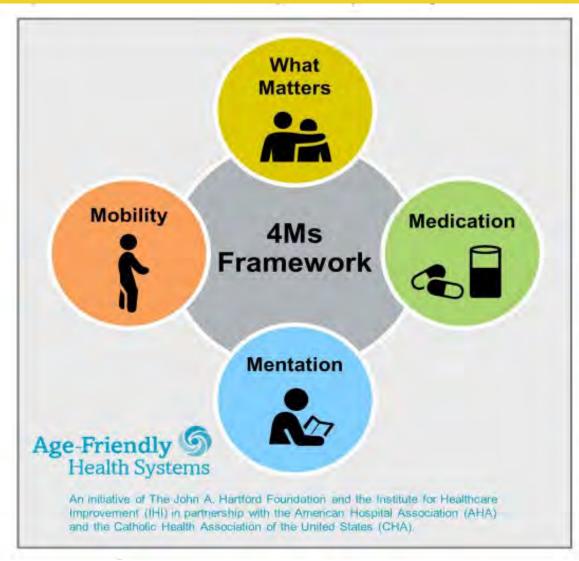
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## 4Ms Framework of an Age-Friendly Health System



#### **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.

## AFHS 4 Ms Applied to the Careforce

- What Matters (culture, compassion, respect, a voice)
- Medication (health promotion, wellness & workplace safety)
- Mentation (stress management, trauma-informed care for staff)
- Mobility (opportunities for career advancement, ongoing education and leadership)







## Key features of the roundtables....

- We are a community focused on co-design
- "All teach, all learn"1
- Small tests of change— "What can we do by next Tuesday?"
- Collation and dissemination of insights
- Moderated by JoAnne Reifsnyder, PhD, MSN, MBA, RN, FAAN







# **Roundtable Topics**

• April 28	Kick-off: The 4Ms Expanded for Staff (Emily Nicoli, MS, RN, CRNP, Chief Nursing Officer, UnitedHealthcare Retiree Solutions)
• May 26	Sustaining Compassion & Calling in the Midst of Crisis: Schwartz Center Rounds (Beth Lown, MD, CMO, Schwartz Center for Compassionate Healthcare)
• June 23	Career Mobility and Shared Governance (Erin Woodford, MSN, RN, VP of Population Health, Genesis Healthcare)
• July 28	Health Promotion and Stress Management (Kelly Doran, PhD, RN, Associate Professor, University of Maryland School of Nursing)
<ul><li>August 25</li></ul>	Trauma-informed Care for our Careforce (Nancy Kusmaul, PhD, MSW, Assoc. Prof. at UMBC and Paige Hector, LMSW, MSW)
• Sept 22	Developing Leaders for the Future (Nancy Istenes, DO, CMD, FACP and Shauna Assadzandi, MD)

## First "small test of change"...Lori Porter, CEO

Workforce



Careforce





#### What are Schwartz Rounds ®?

- Regularly scheduled, structured, facilitated conversations that bring caregivers together to discuss the most challenging and compelling aspects of what it's like to take care of patients and their families. Organizational teams are taught how to implement and facilitate these conversations, so participants can offer and receive support and feel heard.
- Caregivers who participated in multiple Schwartz Rounds sessions reported:
  - o Improved teamwork, interdisciplinary communication, and appreciation for the roles and contributions of colleagues from different disciplines.
  - Decreased feelings of stress and isolation, and more openness to giving and receiving support.
  - Increased insight into the social and emotional aspects of patient care; increased feelings of compassion toward patients; and increased readiness to respond to patients' and families' needs.

https://youtu.be/kVf23hY1g6o

Dawson, J., McCarthy, I., Taylor, C. et al. Effectiveness of a group intervention to reduce the psychological distress of healthcare staff: a pre-post quasi-experimental evaluation. BMC Health Serv Res 21, 392 (2021). https://doi.org/10.1186/s12913-021-06413-4



# What Matters: Sustaining Compassion and Calling in the Midst of Crisis

- Modified Schwartz Rounds moderated by Dr. Beth A. Lown, MD, Chief Medical Officer, The Schwartz Center for Compassionate Healthcare, Associate Professor of Medicine, Harvard Medical School
- A medical director, nursing assistant and nurse each shared their story about how compassion affected them personally during COVID-19 and how it had a positive impact on their lives
- Cultures of compassion are built on social support
- Does your long-term care community have a culture of compassion? Are there
  ways that you and other leaders could offer better support to staff to help
  cultivate this culture?

https://www.theschwartzcenter.org





#### More in common than we realize...

"It was in that moment, in December 2020, when we were talking about the vaccine and the CNAs and nurses were telling me about their fears, what their families were worried about—it was then when I realized we were trusting one another and developing something authentic. It was my proudest moment as a Medical Director. The next week, those same CNAs and nurses lined up to get their COVID-19 vaccine and I thought to myself, 'building these trusting relationships is everything."

-Leslie Eber, MD, CMD





## Career Mobility & Shared Governance

- Career mobility can be upward, downward or lateral movement of employees across positions;
   need input from employees; programs that support ALL/ ANY movement desired by an employee are ideal
- Programs must be structured, communicated and sustained
- Destigmatize stepping down from a higher position to one of less responsibility (such as DON to floor nurse) if that is what is best for that employee at the time. Better than losing them altogether, and you still retain their leadership skills and expertise
- Allow career flexibility; observe staff, note skills and talents and offer opportunities to use those in other roles within the facility, i.e., dietary staff can help plan social activities
- Center based programs that support career mobility can be a cost-effective strategy to increase morale, retention and attract future employees to our careforce





### Career Mobility.....Make it Visible & Tangible

#### KUDOS TO US!!!!!!







Elevate employees through recognition. Celebrate all achievements, large and small!





### **Medication: Health Promotion**

- Start <u>small</u> with one program that <u>staff</u> has indicated is their priority (diet, exercise, quitting smoking?)
- Allow flexibility (i.e., staff can use the residents' gym before or after shifts)
- Make it FUN! That's why staff said they stayed engaged; they don't want to compete against each other
- Education often needed around health topics, such as what makes a healthy diet?
- Only 20% of employees offer mood/stress/depression programs for staff, yet staff consistently say
  this is what they most want help managing; lots of free resources available; make mental health
  visible, destigmatize, and prioritize
- Leadership support is critical

Linnan, Laura A et al. "Results of the Workplace Health in America Survey." American journal of health promotion: AJHP vol. 33,5 (2019): 652-665. doi:10.1177/0890117119842047





# Worksite Wellness in LTC Settings: Program facilitators based on CNA feedback

Simple changes

Behavior awareness

Constant edu and tip infusion

Prizes/competitions

Fun

Teamwork/support

Share with family and friends

Low pressure

Flannery, K., & Resnick, B. (2014). Nursing assistants' response to participation in the pilot worksite heart health improvement project (WHHIP): a qualitative study. *Journal of community health nursing*, 31(1), 49-60.

#### **Barriers**

### **Solutions**

Staff coverage

Engagement

Too much time away from residents

Staff could not leave the unit for PA breaks

Rotating staff "buddies"

Staff sign out board

Cover pager system

Screening and report cards
Competitions (self goals) and raffles

Handouts (condensed to 1 page)

Simultaneous interventions

Drop in/flexible model - staff could come when free

Sustainability planning / text/ phone coaching / videos

Set PA times so staff could plan their day

Peer champions / team lead for the day / stakeholders

After work and weekend activities

Different staff wanted to do different forms of exercise

First person to come to session got to pick type PA

Post an exercise schedule with a consistent time slot for dance

Pair participants based on PA preference

# What changes can you make now?

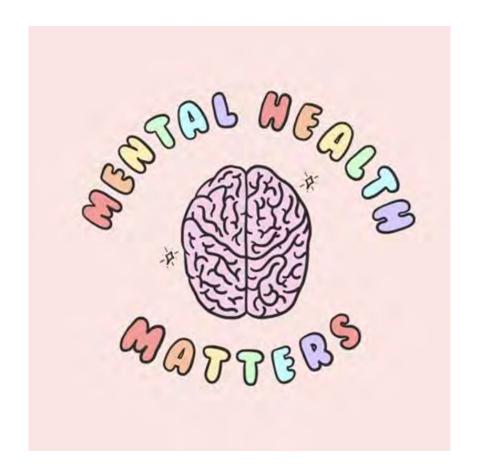


### **Mentation: Trauma Informed Care**

- Trauma-informed care is the adoption of principles and practices that promote a culture of safety, empowerment and healing (SAMHSA)
- We cannot expect our staff to provide traumainformed care to residents if we are not prepared to provide trauma-informed care to staff
- Grieving and mourning is difficult, and leadership can help by showing vulnerability, transparency, and empathy

Substance Abuse and Mental Health Services Administration. (2014). *SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach*. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration. https://ncsacw.acf.hhs.gov/userfiles/files/SAMHSA Trauma.pdf







# The Role of the Medical Director & Others in Leadership

- Be visible and create an intersection between leadership and frontline staff
- Hold "medical director hours" to encourage staff to stop by and get to know their medical director
- Encourage CNAs to speak first during team rounds as it helps them feel valued, heard and confident
- Build relationships with nurses and CNAs. Search them out to hear their observations and thoughts about status changes in residents, and let them know when their observations and feedback have positively impacted a resident's care



"You show great leadership potential. Whenever a firetruck drives by, the whole office starts howling."

# The Role of the Medical Director & Others in Leadership

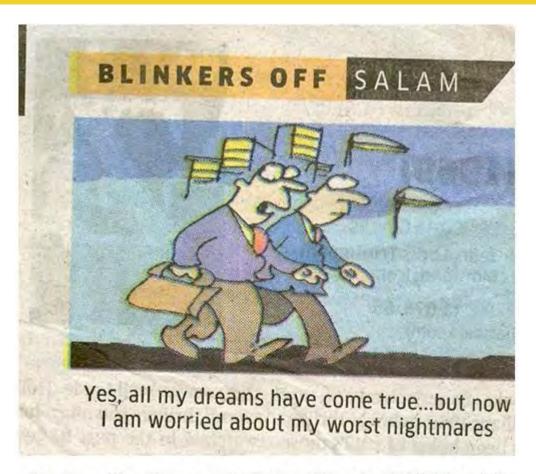
- Show staff you are approachable:
  - Have lunch in the breakroom
  - Have conversations with staff that aren't work related
  - Stay at the facility to do documentation where you can be seen more readily and are more accessible to staff.
- When you ask employees questions, they will start to ask you questions!
- Promote the benefits of working in the setting: more flexible work hours than acute care settings (tired of 12-hour shifts?), no overhead, no office needed
- Raise awareness of staffing needs at the national level. Political advocacy is needed around issues like federal funding and loan forgiveness for education and training

# Appreciative Inquiry: A Philosophy, Not a Technique

- Focus on STRENGTHS instead of weaknesses.
  - What is your LTC community doing right?
  - What are your LTC community's ideals and goals?
  - What are the employees' dreams and plans?
  - What was your best day at work, and what made it so great?
  - How can you have more "best days"?
- Appreciative inquiry creates an atmosphere of possibility, bringing excitement and enthusiasm back into the organization.
- Appreciative inquiry methods place great importance on an entire system, ensuring that all employees feel heard and acknowledged.
- Result is happier employees and lower turnover, higher performing employees, more collaboration with leadership, more creativity (yes, in a nursing home!), and a stronger community.

### Why Does Appreciative Inquiry Work?

- People like talking about their successes and actively engage in conversations that focus on what works
- When sharing positive stories, people gain confidence in their ability to deliver—it's their experiences, not someone's else's best practice



Source: The Economic Times [Sunday] 20 May 12

# Key takeaways...Look Up!

- Evidence-based strategies to grow and strengthen the PALTC careforce are out there.
- Start tomorrow. Each of the 4Ms we discussed includes something you can begin doing immediately.
- Use the appreciative inquiry philosophy: why are staff staying? What are you doing right that you can expand upon?
- Which of the "4Ms" will you choose to focus on next week?
- Which idea presented today most resonated with you?
- Who will lead the implementation of the strategy you choose? Who will be on the team?



Opportunities are all around you.

## https://paltc.org/goodthing

#### Register for the series at:

https://us02web.zoom.us/meeting/register/tZYsce-rrTkoH9KwXQ3PQFDnQGTVWtf2RHGV

#### Join email list serv:

https://groups.io/g/moreofagoodthing

