ICan: Driving Quality and Innovation from the Frontline

2018 Rural Health Conference
Monday, June 25, 2018
10:45 a.m. – 11:45 a.m.

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University of Minnesota

Carin Leeb
Essentia Health Oak Crossing
Detroit Lakes, Minnesota
Objectives

• Discuss the vital role frontline staff and leadership play in implementing QI projects
• Explain ICan strategies used to implement quality improvement in long term care
• Describe proven strategies and practical methods from a MN based ICan case study
• Identify quality improvement projects through interactive sessions
Old Concept of Quality Improvement
New Approach to Quality Improvement
• ICan worked with CNAs, nurses, to redesign their work so that more time could be spent with residents and families
  
  ▪ Gave staff the tools to innovate, re-design and improve their work.
  ▪ Improved safety and enhances person-centered care.
  ▪ Used an evidence-based improvement model.
• Teams participated in trainings to learn ICan Quality Improvement principles & strategies
• Teams applied strategies to improvement opportunities they identified within their organization
• Provided support and sharing with colleagues
• Tracked progress and impact
Overall Project Goal

Improve resident/client and staff experience and organizational culture in LTC by engaging frontline staff to identify opportunities for improvement and develop and implement action plans to improve.
ICan Timeline

**Spring 2017**
- ICan Curriculum Development
- Redesign of the survey instrument

**Fall 2017**
- Dissemination and Presentation
- Outcomes: 9 aging services organizations

**Spring 2017**
- Buy In
- Health Support Specialist Leadership

**Summer 2017**
- ICan Training Across Minnesota
ICan Minnesota Participants

1. Fairway View Senior Communities
   Ortonville, MN
2. Good Shepherd Lutheran Services (GSLS)
   Rushford, MN
3. Good Shepherd Lutheran Services (GSLS)
   Rushford, MN
4. Essential Health Oak Crossing
   Detroit Lakes, MN
5. Traverse Care Center
   Wheaton, MN
6. Avera Morningside Heights Care Center
   Marshall, MN
7. Three Links Care Center
   Northfield, MN
8. Mother of Mercy Campus Care
   Albany, MN
9. Augustana Care
   Minneapolis, MN

- 16 organizations trained
- 9 teams completed QI projects
Methods for Pilot

• Sample and Setting
  – 16 local organizations
    • Nursing homes, home care/assisted living organizations, and adult day services organizations.
  – 60 individuals
    • Health Support Specialist (HSS), nursing assistants, home health aides, managers, and directors.
ICan Project Steps

1. Identify Problem(s)/Barrier(s)
2. Select Specific Problem
3. Brainstorm Solutions
4. Select One Solution
5. Test Solution (PDSA)
Intervention

- 9 months and 7 phases

- Team Vitality Survey Instrument: baseline and post intervention
ICan Modules

Introduction to Quality Improvement

Core Module
Safety, Vitality & Teamwork, Person Centered Care, Value Added Processes, Resident and staff satisfaction, Efficiency, Collaboration between leadership and frontline staff, Leadership Development, Empowerment, QI, PDSA, Snorkeling, Small Tests of Change, Dealing w/resistance, Communicating Progress, Recognition & Dissemination of Findings, Enhancing the experience of aging, Innovative Healthcare Delivery

Communication of Findings

ICan Pilot Project Implementation

Health & Wellbeing of Residents and Staff
Module Design

1

Introduction to Quality and ICan
- What is QI
- Vital Role of Frontline Staff
- What is the ICan Program
- Snorkeling, PDSA, Small Tests of Change
- Multi Voting to Select Top Ideas
- Matrix of Change: ETI with High Impact
- Handling Resistance

2

Toolkits to ID & Implement QI
- Review of ICan and Expectations
- Project Planning & Steps
- Formulation of Teams w/Tasks
- Writing SMART Goals
- Data Collection
- Track & Communicate Updates
- Tools:
  - ICan PowerPoints
  - Webinar
  - Sample Templates
  - Monthly Connect
    - Magic Wand Exercise
    - Project Checklist
    - Monthly Project Update
    - Sample PDSA & Project Plan
    - How and When to Snorkel
    - Snorkeling Supply List
    - WB & Sample Template
    - Innovation Contest

3

Dissemination
- Innovation Contest Rules and Judging Process
- Poster Presentation Expectations
- Oral Presentation and Expectations
- How to Make Effective Presentations
Results: Site Specific Outcomes

Results obtained from participating organizations
# ICan Pilot Project Presentation

## Summary

<table>
<thead>
<tr>
<th>Team (s)</th>
<th>Project Title</th>
<th>Project Description/Goal/Outcomes</th>
<th>Pillar (s) Addressed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Oral Care Improvement</td>
<td>Increase the number of residents with good oral care from 40% to 90% by October 1. Met and exceeded goal from week 3 onwards.</td>
<td>Person Centered Care</td>
</tr>
<tr>
<td>2.</td>
<td>Toiletry Organization: Providing Bathroom Caddy’s to Help Organize Residents Personal Supplies</td>
<td>Organize residents personal care items by providing 70 residents with their own individual caddy by December 2017. In 1 month, 16% of residents had caddies. By 4 months, 47% of residents had a personal caddy.</td>
<td>Person Centered Care</td>
</tr>
<tr>
<td>3.</td>
<td>Caring Hands</td>
<td>Contacted the director of volunteering at Mayo Clinic to obtain implementation permission. Already has supplies (oils for sensitive skin, gloves, and hand sanitizer). About 10 employees from different shifts (7-3, 3-11, 11-7) and 10 residents are signed up to start the free program in January 2018.</td>
<td>Person Centered Care</td>
</tr>
</tbody>
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## ICan Pilot Project Presentation
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<td>4.</td>
<td>Creating a Legacy of Confidence Through our Helping Hands</td>
<td>Reduce new employee turnovers to boost employee morale and enhance quality of services for residents. This group created a new training guide to help staff handle workplace demands.</td>
<td>Safe and Reliable Care Staff Vitality</td>
</tr>
<tr>
<td>5.</td>
<td>Grooming Improvements: Working Together to Improve Resident Care</td>
<td>Over a 3-month period, small baskets were used to organize supplies and supplies were consistently stocked in resident bathrooms. This also led to an increased use of grooming supplies like razors and brushes.</td>
<td>Person Centered Care</td>
</tr>
<tr>
<td>6.</td>
<td>Effective Communication Boards</td>
<td>Ensure communication boards are current and correct 95% of the time by Oct 1, 2017. Daily audits indicated 100% compliance during the entire month of September.</td>
<td>Safe and Reliable Care Person Centered Care</td>
</tr>
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<td>7.</td>
<td>Rounding up the Essentials</td>
<td>Staff left residents unattended in the bathroom to look for personal care supplies and this increased falls. After implementing plastic containers that contained resident supplies, fall rates reduced from 25% to 4%.</td>
<td>Safe and Reliable Care Value Added</td>
</tr>
<tr>
<td>8.</td>
<td>Knowledge is Power</td>
<td>Create resident and facility orientation checklists to help new staff identify where things were located, complete facility tasks, and complete specific resident cares. After implementation, knowledge of resident and facility items increased by 42% and 47% respectively.</td>
<td>Safe and Reliable Care</td>
</tr>
<tr>
<td>9.</td>
<td>Care Suites Supplies Room Clean up and Maintenance</td>
<td>To have clean, organized supply room at least 18 days/month. Project started in May and goal was surpassed for the next 4 months thereafter.</td>
<td>Value Added</td>
</tr>
</tbody>
</table>
Team Vitality Survey Results

Results obtained from baseline and post intervention
Overall Averages
Frontline Staff

Frontline Staff

- Support structures: HSS Pre 84%, HSS Post 86%
- Engagement and empowerment: HSS Pre 81%, HSS Post 81%
- Resident care transitions: HSS Pre 81%, HSS Post 81%
- Team communication: HSS Pre 88%, HSS Post 90%
Limitations

- The convenience sample
- Small sample size
- Response bias
- Lack of a formal readiness assessment
- Short duration of pilot project
Discussion

- Perception of support structures, team communication, engagement and empowerment, and resident care transitions increased
- ICAn empowered HSS to identify, implement, analyze, & present findings from QI projects (9)
- Variability between frontline staff and leadership in their perception of engagement and empowerment
  - Leadership assigned higher scores than HSS frontline staff
- 60 participants received ICAn education and training
- ICAn was a successful pilot to engage front-line staff in Quality Improvement in aging services organizations
Insights Gathering Information

*Information obtained from informal discussions with frontline staff and leadership*
Barriers

1. Time is short to complete project
2. Not enough staff to work on project
3. We do not want to display resident info on the whiteboard.
4. We have no place to put the whiteboard
5. We would like our supervisors to tell our coworkers so that they are aware of our involvement with the HSS program
6. QI should be taught as part of our HSS coursework
7. Data is hard for some of our folks. Simpler examples would be helpful.
Takeaways

1. Our supervisors and ICAn staff help us with the data.

2. The ICAn binder helps us stay organized.

3. I am more able to voice my opinion.
Selecting a QI Project

1. Identify Problem(s)/Barrier(s)
2. Select Specific Problem
3. Brainstorm Solutions
4. Select One Solution
5. Test Solution (PDCA)

Magic Wand Exercise
SHARING THE MAGIC WAND
Create a Project Plan

PDSA Project Plan

Complete a PDSA Project Plan for each new project

Complete PDSA Project Plan: Problem Statement and Proposed Solution
SHARING STATEMENTS AND SOLUTIONS
Identify Team Members

- Assemble a team with a good mix of skills
- Do their skills/roles fit the project?
- Do they have integrity?
- Do they have positive energy?
- Are they team players?
- Are they easily approachable?
Assigning Tasks & Responsibilities

• Determine the tasks and the roles to be assigned
• Communicate clear expectations of what team members need to do
• Ask for feedback

Complete PDSA Project Plan: Assign Project Roles to team members {get their input!}
Creating a legacy of confidence through our helping hands

Essentia Health Oak Crossing
Detroit Lakes, MN
# Essentia Health Oak Crossing ICan Team

<table>
<thead>
<tr>
<th>Team Member</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hayley-Jo Rue HSS</td>
<td>Team Lead</td>
</tr>
<tr>
<td>Carin Leeb HSS</td>
<td>Secretary</td>
</tr>
<tr>
<td>Christine Scoles HSS Student</td>
<td>Meeting Facilitator</td>
</tr>
<tr>
<td>Alicia Suhl HSS Student</td>
<td>Data</td>
</tr>
<tr>
<td>Laurie Erdall HSS Student</td>
<td>Team Member</td>
</tr>
<tr>
<td>Katie Lawrence HSS Student</td>
<td>Data</td>
</tr>
</tbody>
</table>
Problem Identified

• Snorkeling, snorkel again, and again, input from staff, prioritize using prioritizing matrix, and project plan.

• Problem:
  – High employee turnover
Project Statement

- We have found that the turnover rate for our neighborhood assistants (C.N.A’s) has increased. Our data shows the majority of our neighborhood assistants quit within 3 months or less of their hire date. We want to start an ICan project that will help us reduce turnover of our neighborhood assistants. We believe that by reducing new employee turnovers we will boost employee morale and enhance the quality of our services that we provide for our residents.

Voluntary quit

- <3 months
- <6 months
- <9 months
- < 1 year
Project Goal

• Decrease Neighborhood Assistant turnover by approximately 1/3 (8 employees) within a rolling year using quarterly checks.

   – Why They Leave:
     • In past studies, it has been found, that the four big causes of leaving a facility were:
       – Problems with their physical health
       – Health benefits and paid leave
       – Low job satisfaction
       – Low pay

http://cnaclassesnearyou.com/general/why-is-there-such-a-high-turnover-rate-for-cnas/#ixzz4p4mpP4rj
Proposed Solution

• **Create and provide staff with new training guides**
  - CNAs reported that low job satisfaction was due to emotional distress from dealing with patients every day, the constant demands of the job and too little respect of supervisors.
  - The new training guide will aim to help bridge the gap between management and new staff, and help equip new employees with the tools needed to handle the constant demands of their job.

http://cnaclassesnearyou.com/general/why-is-there-such-a-high-turnover-rate-for-cnas/#ixzz4p4ngELJc
Steps to Improvement

- Identify focus areas to improve during orientation
  √ - Complete
- Integrate improvements into Neighborhood orientation checklist
  √ - Complete
- Create Training (1st PDSA study C.N.A. graduates August 2017)
  √ - Complete
- Administer survey to Neighborhood Assistants
- Pick Preceptors
- Training Preceptors
  - SABA
  - Standard of Care
- Competency of Preceptors
Lessons Learned

- Challenge 1: Identifying the problem.
- Challenge 2: Collecting data and identifying sample size.
- Challenge 3: Communicating the implementation of training guide.

http://studio.usgbc.org/2015/07/the-art-of-brainstorming/
<table>
<thead>
<tr>
<th>Old</th>
<th>New</th>
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<tbody>
<tr>
<td><strong>Employee</strong></td>
<td><strong>Employee</strong></td>
</tr>
<tr>
<td><strong>Job Title</strong></td>
<td><strong>Job Title</strong></td>
</tr>
<tr>
<td><strong>Department</strong></td>
<td><strong>Department</strong></td>
</tr>
<tr>
<td><strong>Manager Name</strong></td>
<td><strong>Manager Name</strong></td>
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<tr>
<td><strong>Manager Phone</strong></td>
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**Employee Assistant Department and Safety Orientation Checklist**

<table>
<thead>
<tr>
<th>Day 1</th>
<th>Day 2</th>
</tr>
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<tbody>
<tr>
<td>Identify by staff</td>
<td>Identify by staff</td>
</tr>
<tr>
<td>Explain parking for O/C</td>
<td>Explain parking for O/C</td>
</tr>
<tr>
<td>Neighborhood info back/box board</td>
<td>Neighborhood info back/box board</td>
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<tr>
<td>Core of planning/meetings</td>
<td>Core of planning/meetings</td>
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<tr>
<td>Wireless call light system, involve tenants</td>
<td>Wireless call light system, involve tenants</td>
</tr>
<tr>
<td>Site of illness</td>
<td>Site of illness</td>
</tr>
<tr>
<td>Cell phone safe zone</td>
<td>Cell phone safe zone</td>
</tr>
<tr>
<td>Check in residents</td>
<td>Check in residents</td>
</tr>
<tr>
<td>Maintain log in and charting</td>
<td>Maintain log in and charting</td>
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<tr>
<td>Privacy and respect</td>
<td>Privacy and respect</td>
</tr>
<tr>
<td>Knock on doors/pull curtains</td>
<td>Knock on doors/pull curtains</td>
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<tr>
<td>Communicate with resident and co-workers</td>
<td>Communicate with resident and co-workers</td>
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<tr>
<td>Breaks/Meals</td>
<td>Breaks/Meals</td>
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**New Employee Assistant Department and Safety Orientation Checklist**

<table>
<thead>
<tr>
<th>Date Completed</th>
<th>Prescription</th>
<th>Employee Name</th>
<th>Required Training</th>
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<tbody>
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</table>

**Required Training**
- How to use equipment and machinery
- How to care for patients and objects
- How to use equipment and machinery
- How to care for patients and objects
Outcome (Data)

Turnover Rate

Essentia Health

Lower is better

Target/Goal = 15

- Actual Data
- Trendline
- Target/Goal = 15
We Can!