ADVANCING EXCELLENCE:

PERSON-CENTERED CARE GOAL WEBINAR

MAY 2, 2013

Introduction
Welcome

Carol Scott

Field Operations Manager

Advancing Excellence in America's Nursing Homes Campaign

Advancing Excellence Campaign

- Advancing Excellence is helping nursing homes make a difference in the lives of residents and staff.
- Advancing Excellence provides free, practical and evidence-based resources to support quality improvement efforts in America's nursing homes.
- Advancing Excellence is committed to providing support to those on the frontlines of nursing home care.
- Advancing Excellence promotes open communication and transparency among families, residents, and nursing home staff.

Advancing Excellence in America's Nursing Homes

To Sign Up…

- Go to www.nhqualitycampaign.org
- Upper right hand corner select “Join the Campaign”
- You will need your M/M provider #
- Choose two goals:
  - 1 clinical
  - 1 organizational

Advancing Excellence in America's Nursing Homes

Why Sign Up?

- Be a part of the national effort
- Evidence shows that participants in the Campaign are improving at a faster rate than non-participants in the Campaign…
- And when they set targets, the participants improve even faster!

Advancing Excellence in America's Nursing Homes

www.nhqualitycampaign.org

- Lots of technical assistance tools
- All are free
- All are evidenced-based

Campaign does not endorse any one particular method to achieve your goals. Find the one that works best for you!

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

National Nursing Home Quality Care Collaborative

Advancing Excellence in America's Nursing Homes

Person Centered Care Webinar

May 2, 2013

Today

- National Nursing Home Quality Care Collaborative
  - Change Package
    - Strategy 3: Connect with residents in a celebration of their life.
    - Strategy 6: Provide exceptional compassionate clinical care that treats the whole person.

Our Charge

- Improve the Quality of Care and Quality of Life of residents across the country
- Focus on successful practices of high performers
- Utilize the findings to share with any nursing home seeking to improve their quality
- Be excellent everywhere! – Build Quality Centric Organizations

Collaborative Change Package

Strategy 3: Connect with residents in a celebration of their life.

Change Concept:

- 3.a Treat residents as they want to be treated, remembering that your facility is their home.
- 3.b Foster relationships.
- 3.c Create connections with the community.
- 3.d Provide compassionate end of life care.
  - Specific action items focused on Consistent Assignment

Collaborative Change Package

Strategy 6: Provide exceptional compassionate clinical care that treats the whole person.

Change Concept:

- 6.a Carefully build care teams and keep them together
  - Specific action items focused on Consistent Assignment

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Overview of Person Centered Care (PCC) Goal

Howard Degenholtz, Ph.D.
University of Pittsburgh

Advancing Excellence Campaign: Person-Centered Care Goal

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What is the Person Centered Care Goal?

- Person-centered care promotes choice, purpose and meaning in daily life.
- Person-centered care means that nursing home residents are supported in achieving the level of physical, mental and psychosocial well-being that is individually practicable.
- This goal honors the importance of keeping the person at the center of the care planning and decision-making process.

Background

- We reviewed what is out there
  - Artifacts
  - Staff report instruments
- Concluded that the industry is missing a way to incorporate resident voice into the process
  - There is a need for a resident-centered approach
- Facilities already involved in PCC
  - Continue using Artifacts if you are already using it;
  - Incorporate PCC concepts into staff surveys
- But to move the ball, to make the daily experience responsive to residents, then nursing homes need a way to incorporate that information into the assessment process

How does PCC benefit residents?

- Residents have autonomy and are able to direct care and services.
- Resident choice fosters engagement and improves quality of life.
- Residents live in an environment of trust and respect.
- Residents are in a close relationship with staff that are attuned to their changes and can respond appropriately.
- Residents continue to live in a way that is meaningful to them.

How does PCC benefit staff?

- Staff members are more comfortable caring for people they know.
- Staff form a strong partnership with residents and their families.
- Staff know a person's preferences, can anticipate the person's needs and adapt accordingly.
- Staff are highly valued in person-centered care organizations.
- Staff work more efficiently in person-centered care environments and can devote time where it is most needed.
- Staff retention/job satisfaction is associated with feeling connected and having a personal relationship with residents.

How does PCC benefit Nursing Homes?

- Nursing homes have better quality outcomes due to the ability of staff to identify and respond appropriately to changes in a resident's condition.
- Nursing homes gain referrals from people who have a good experience and recommend the nursing home to others as a place for care.
- Nursing homes have better staff retention due to a strong relationship between staff and residents.

What resources does AE provide for PCC tool users? Getting ready to start……

- Who is your champion? Who is on the core team?
- AE provides a list of questions to consider in examining your current processes
  - How do we know if there is a gap in meeting our resident's needs?
  - What staff communication practices do we use to support a person-centered focus?
  - What organizational policies and procedures are we using?
- AE provides Person Centered Care Fact Sheets as a way to get all your stakeholders involved in the process
  - Staff Fact Sheet
  - Leadership Fact Sheet
  - Consumer Fact Sheet

What resources does AE provide for PCC tool users?

Getting started on the journey…

- AE provides an Excel workbook that gives you step by step instructions to begin your quality improvement journey in enhancing person centered care in your community.
  - We will review this tool in today's webinar

PCC Tool and Resources

Kimberly Van Haitsma, PhD

Scott Crespy, PhD

Sarah Humes, MS, CTRS

Susanne Morganstein, MS

Polisher Research Institute

Abramson Center for Jewish Life

North Wales, PA

http://www.polisherresearchinstitute.org/

Topics

1) Brief overview of PCC concept
2) “Walk through” of PCC tool
3) Logistics of gathering data to input into tool
4) Leveraging tool output to enhance PCC care delivery and benchmark progress

How is Person Centered Care Measured?

1. Delivery of Preference Congruent Care
   a) Extent to which care is tailored to fulfilling important resident preferences
   b) 1 measure
2. Attendance in Care Conference Meeting
   a) Extent to which resident, family/friends, and staff routinely attend the care conference
   b) 3 measures

What is Preference Congruent Care?

- "Preference Congruent" care is care that *fulfills important resident preferences for personal care and recreational activities.*
  - Utilizes MDS 3.0 Section F items that staff ask on a routine basis
  - Interviews resident to discover:
    - which preferences are "very" or "somewhat" important to him/her
    - how satisfied s/he is with each of the important preferences being fulfilled
  - Provides critical visual feedback to staff:
    - which preferences are being fully met and which require further follow up for each individual resident's care plan
    - which preference gaps may be affecting many persons residing together in a household, floor or unit
    - overall measure of quality that can be benchmarked and tracked over time

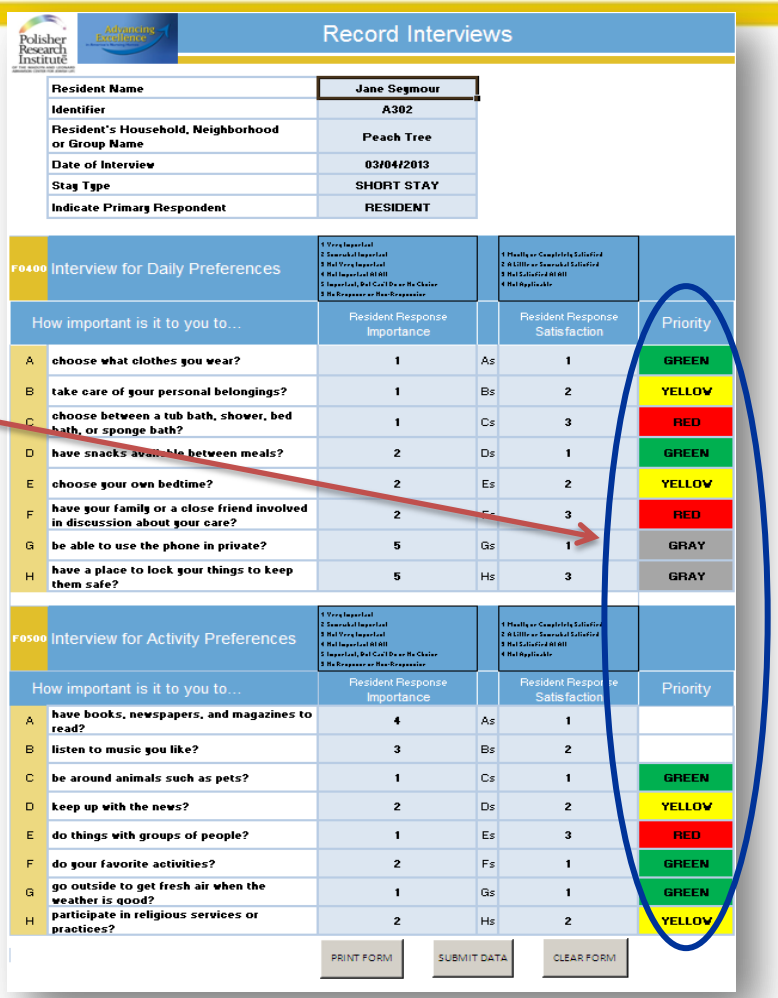
A Walk Through of the PCC Tool

- The PCC tool
  - Provides instructions for how to collect the data
  - Once data is entered into the tool, the tool automatically provides you will actionable information
  - Gives guidance on how to use the information to enhance care planning processes within your community
  - Provides you with a quantifiable indicator to track your quality improvement over time (state and national benchmarks)

How "Preference Congruent" is your Care for an Individual Resident?

Interviewing Residents

- Resident interview occurs PRIOR to care conference
- Data entry form provides:
  - Instant feedback on how well care team is meeting a resident's individual preferences
  - "**Red**" & "Yellow" – these areas are opportunities for improvement
  - See Implementation guide for tips on how to use this information to enhance care planning



Record Interviews

Resident Name	Jane Seymour
Identifier	A302
Resident's Household, Neighborhood or Group Name	Peach Tree
Date of Interview	03/04/2013
Stay Type	SHORT STAY
Indicate Primary Respondent	RESIDENT

F0400 Interview for Daily Preferences

	How important is it to you to…	Resident Response Importance		Resident Response Satisfaction	Priority
A	choose what clothes you wear?	1	As	1	GREEN
B	take care of your personal belongings?	1	Bs	2	YELLOW
C	choose between a tub bath, shower, bed bath, or sponge bath?	1	Cs	3	RED
D	have snacks available between meals?	2	Ds	1	GREEN
E	choose your own bedtime?	2	Es	2	YELLOW
F	have your family or a close friend involved in discussion about your care?	2	Fs	3	RED
G	be able to use the phone in private?	5	Gs	1	GRAY
H	have a place to lock your things to keep them safe?	5	Hs	3	GRAY

F0500 Interview for Activity Preferences

	How important is it to you to…	Resident Response Importance		Resident Response Satisfaction	Priority
A	have books, newspapers, and magazines to read?	4	As	1	
B	listen to music you like?	3	Bs	2	
C	be around animals such as pets?	1	Cs	1	GREEN
D	keep up with the news?	2	Ds	2	YELLOW
E	do things with groups of people?	1	Es	3	RED
F	do your favorite activities?	2	Fs	1	GREEN
G	go outside to get fresh air when the weather is good?	1	Gs	1	GREEN
H	participate in religious services or practices?	2	Hs	2	YELLOW

PRINT FORM SUBMIT DATA CLEAR FORM

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How "Preference Congruent" is your Care for a Group of Residents?

Polisher Research Institute SM OF THE MADLYN AND LEONARD ABRAMSON CENTER FOR JEWISH LIFE

Household/Group information:

- Select which household you would like to view from drop down menu.
- See "at a glance" particular preferences that are not being met for several persons who live in a common location.
- Assists with program and service planning and evaluation.

Neighborhood Report

Household / Neighborhood / Group Name: Peach Tree

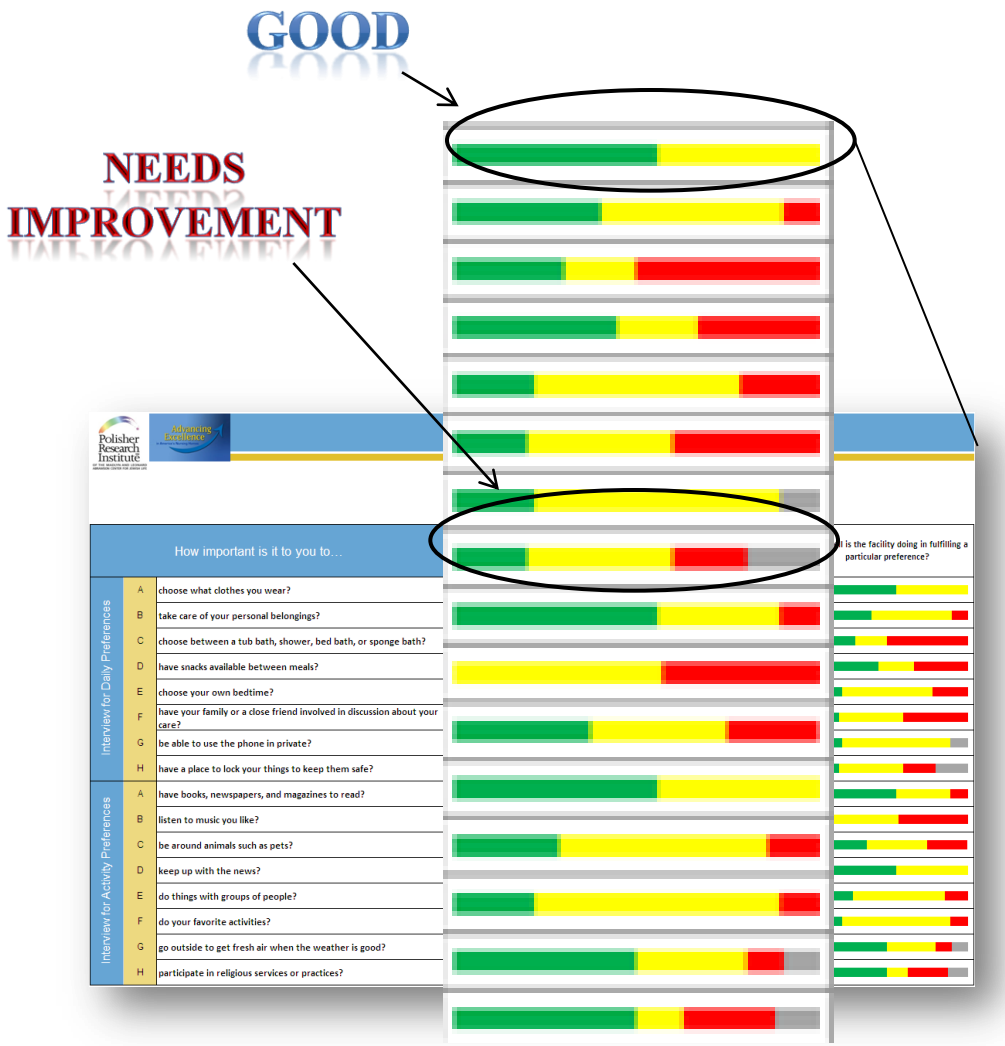
March 2013

Resident Data	Resident Name	SALLY STAR	WILLIAM DIXEY	DENNIS QUAID	JANE SEYMOUR
	Identifier	P102	P100	B201	A302
	Date	3/5/2013	3/6/2013	3/12/2013	3/4/2013
	Stay Type	LONG STAY	SHORT STAY	SHORT STAY	SHORT STAY
Interview for Daily Preferences	A choose what clothes you wear?	YELLOW	YELLOW	GREEN	GREEN
	B take care of your personal belongings?	GREEN	GREEN	YELLOW	YELLOW
	C choose between a tub bath, shower, bed bath, or sponge bath?	YELLOW	YELLOW	RED	RED
	D have snacks available between meals?	RED	RED	GREEN	GREEN
	E choose your own bedtime?	YELLOW		RED	YELLOW
	F have your family or a close friend involved in discussion about your care?		YELLOW	YELLOW	RED
	G be able to use the phone in private?	YELLOW	GREEN	GREEN	GRAY
	H have a place to lock your things to keep them safe?	YELLOW	RED	RED	GRAY
Interview for Activity Preferences	A have books, newspapers, and magazines to read?	YELLOW	YELLOW	GREEN	
	B listen to music you like?	YELLOW	YELLOW	YELLOW	
	C be around animals such as pets?	GREEN		RED	GREEN
	D keep up with the news?	GREEN	YELLOW	GREEN	YELLOW
	E do things with groups of people?	YELLOW		YELLOW	RED
	F do your favorite activities?	YELLOW	YELLOW	RED	GREEN
	G go outside to get fresh air when the weather is good?	GREEN	GREEN	GRAY	GREEN
	H participate in religious services or practices?	RED		GRAY	YELLOW

How "Preference Congruent" is your Care for each Type of Preference?

Nursing home information:

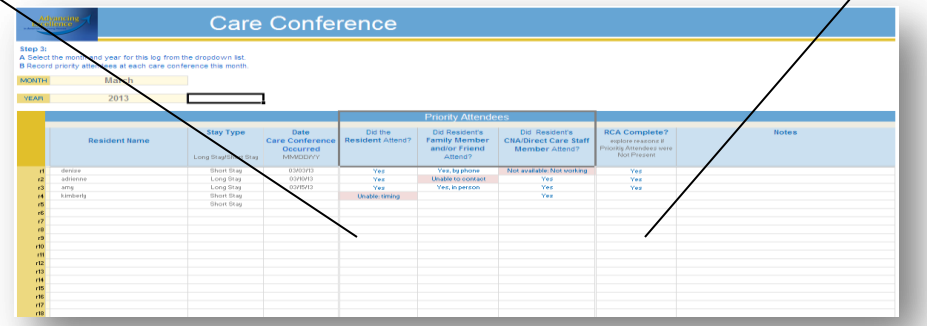
- Review areas of importance and satisfaction within entire nursing home.
- Assists with program and service planning and evaluation.



Care Conference: Attendance

- Resident Attendance at Care Conference Meeting
- Family Member and/or Friend Attendance
- CNA/Direct Care Staff Member Attendance

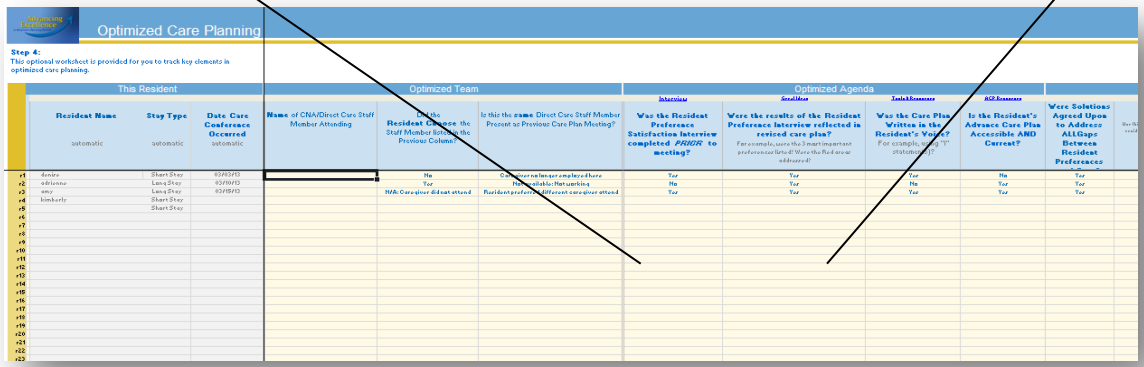
Priority Attendees		
Did the **Resident** Attend?	Did Resident's **Family Member and/or Friend** Attend?	Did Resident's **CNA/Direct Care Staff Member** Attend?
Yes	Yes, by phone	Not available: Not working
Yes	Unable to contact	Yes
Yes	Yes, in person	Yes
Unable: timing		Yes



Optimized Care Planning Options

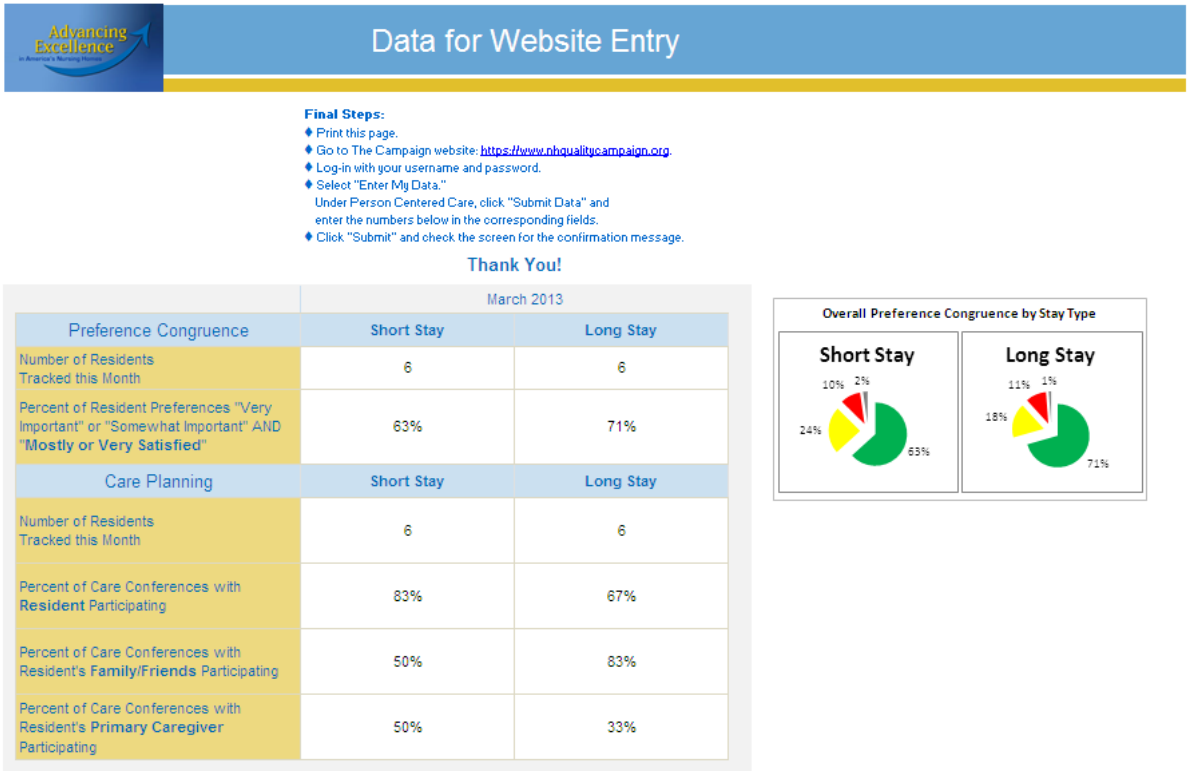
- Care Plan written in Resident Voice
- Advance Care Planning
- Root Cause Analyses Conducted for Gaps in Care Delivery

Was the Care Plan Written in the Resident's Voice? For example, using "I" statements)?	Is the Resident's Advance Care Plan Accessible AND Current?	Were Solutions Agreed Upon to Address ALLGaps Between Resident Preferences and Care?
Yes	No	Yes
No	Yes	Yes
Yes	Yes	Yes



Entering quality indicators into Advancing Excellence Website

- Long-stay vs. Short-stay
- Preference Congruence
- Care Conference Attendance



Data for Website Entry

Final Steps:

- Print this page.
- Go to The Campaign website: https://www.nhqualitycampaign.org.
- Log-in with your username and password.
- Select "Enter My Data."
  Under Person Centered Care, click "Submit Data" and enter the numbers below in the corresponding fields.
- Click "Submit" and check the screen for the confirmation message.

Thank You!

	March 2013	
Preference Congruence	Short Stay	Long Stay
Number of Residents Tracked this Month	6	6
Percent of Resident Preferences "Very Important" or "Somewhat Important" AND "**Mostly or Very Satisfied**"	63%	71%
Care Planning	Short Stay	Long Stay
Number of Residents Tracked this Month	6	6
Percent of Care Conferences with **Resident** Participating	83%	67%
Percent of Care Conferences with Resident's **Family/Friends** Participating	50%	83%
Percent of Care Conferences with Resident's **Primary Caregiver** Participating	50%	33%

Overall Preference Congruence by Stay Type

Short Stay

10% 2% 24% 63%

Long Stay

11% 1% 18% 71%

Pilot Evaluation of PCC Tool
12 Nursing Home Communities Across 3 States

Advancing Excellence PCC Tool
Nursing Home Pilot Participants (n=12)

Advancing Excellence Nursing Home Pilot Participants	
Nursing Home Name	**Address**
Abramson Center for Jewish Life	North Wales, PA
Aviston Countryside Manor	Aviston, IL
Buckingham at Norwood	Norwood, NJ
Green Hill Retirement Community	West Orange, NJ
Homewood at Martinsburg	Martinsburg, PA
Liberty Lutheran Services (Artman)	Ambler, PA
Liberty Lutheran Services (Paul's Run)	Philadelphia, PA
Mt Hope Nazarene Retirement Community	Manheim, PA
St. Anne Home	Greenberg, PA
The Hill at White Marsh	Lafayette Hill, PA
The Rouse Warren County Home	Youngsville, PA
Wesbury United Methodist Retirement Community	Meadville, PA

How should I begin using the PCC tool?

1. Staged Implementation
   - Select one household or neighborhood as a pilot site
2. Assemble your core team
   - Most common configurations include social services, therapeutic recreation and nursing
3. Review the implementation guide!
   - Yes, it is long, but will give you great ideas that will save you time in the long run

Interviewing Residents or Family Members

1. Select staff members who will do the interviews
   - For the administration of the satisfaction portion of the interview, select staff members who can promote resident comfort in the interview process to allow honest and candid responses.
2. For the satisfaction portion of the interview, reassure residents that there are no wrong answers and that you really want to hear their honest assessment of their care.
3. Decide when to do the interviews
   - Short-stay or new long-stay: Preferences upon admission, satisfaction 5-7 days later
   - Long-stay: Plan interview to coincide with resident's next care planning date

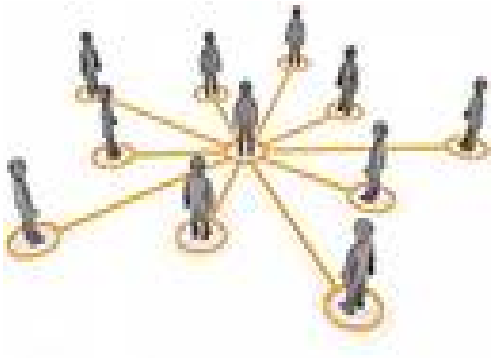
Using PCC information to "Advance Excellence" in Person-Centered Care

1. Individual Care Planning

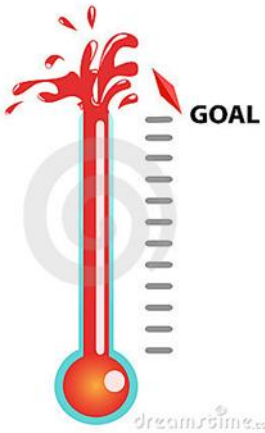
   - Bring Individual Resident Preference Congruence interview results to care conference to be discussed by the entire team and immediately included in the plan of care.

Using PCC information to "Advance Excellence" in Person-Centered Care

2. Household Program Development- Look for Patterns!



- Use "Household Reports" to problem solve areas for improvement that may affect many residents in a given household.
- Set goals for care conference attendance by residents, family members and direct care staff.



Using PCC information to Advance Excellence in Person-Centered Care

3. Incorporate results into ongoing QAPI efforts in your community.
   - Celebrate your success!

Why should you consider using the PCC Tool?

Feedback from Pilot Communities

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Why Should I Use the PCC Tool?

- Increases the understanding of Person Centered Care
  - Person Centered Care is an abstract concept, this tool makes it more concrete.
- Increases awareness and communication of resident preferences
  - Resident preferences are often known to some, but not all staff. This tool makes it easier to share these preferences all staff.
- Enhances quality of Resident & Staff Relationships
  - Tool can serve as a "conversation starter" and a vehicle for getting to know more about what is important to each resident.
- Enhances quality of care conferences
  - This critical meeting can be "super-charged" by following optimized quidelines outlined in the tool.

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Why Should I Use the PCC Tool?

- Provides a way to "connect the dots" to see at a glance how well each household is providing care.
- The Tool facilitates a nursing home's compliance with QAPI quidelines and serves as a specific Performance Improvement Program (PIP).
- Provides direct feedback on what the community is doing well and what can be an opportunity for improvement.
- Provides a way to track a nursing home's Person Centered Care levels over time so that early declines can be identified, analysed and specific issues can be addressed.

Please stay on the phone for questions and answers!