Facilitator's Guide

How to Use this Guide:

This guide offers learning material that can be used in part or whole, depending on the needs of the group. Each section after the Introduction can stand alone.

Teaching Method:

The guide includes opportunity to stop the webinar for a small group discussion and learning experience for participants to apply what presenters have said to the their own experience. Adults learn best through applied learning so the guide's learning experiences support reflection and time for participants to think about how to use what they have learned.

Background:

This webinar series supports nursing homes to engage staff closest to the residents in problem solving for better outcomes. It applies a core principle of quality improvement – results depend on systems, and systems depend on the relationships among those involved in the systems. This is called *relational coordination*. To be most effective, assessment, care planning, and quality improvement systems need the information and ideas from the staff closest to the residents to guide and document delivery of care.

The webinar series was part of a core curriculum used by forty-nine nursing homes who participated in the Pioneer Network's National Learning Collaborative on *Using MDS 3.0 as the Engine for High Quality Individualized Care.* Using B&F Consulting's method for activating high performance, the homes incubated four systems to strengthen their working relationships - consistent assignment, huddles, involving CNAs in care planning, and QI closest to the resident – and, as a result, reduced falls, alarms, pressure ulcers, hospitalizations, and antipsychotic medications The webinar series guides homes through B&F Consulting's 3 step method: (1) strengthen relational coordination systems, (2) apply systems to priority clinical areas, and (3) use staff's knowledge of residents to individualize care to improve outcomes. The webinars feature nursing home teams sharing how they use relational coordination to improve outcomes.

For the collaborative's free Starter Toolkit on *Engaging Staff in Individualizing Care* go to www.PioneerNetwork.Net

A word about language:

You'll notice that as the staff tell their stories, their language is sometimes less person-directed than their actions. Explain this to participants and use any examples from their language that provide learning opportunities.

FACILITATOR INSTRUCTIONS

MATERIALS NEEDED:

Hand-outs:

- a. PowerPoint slides from webinar
- b. Provider magazine article on relational coordination
- c. QC + QL worksheet
- d. Organizational Practices Self-Assessment
- e. Template for Sharing Experiences

SPECIAL NOTE:

This last series brings the collaboration to a conclusion. If you have watched all the webinars, use the exercises at the end to bring the series together. If you are not watching the whole series, then adapt this guidance to suit the needs of your group.

Closing exercises are structured to: (1) ingrain and sustain gains and help participants maintain their new relationships with each other; and (2) bridge to QAPI (Quality Assurance Performance Improvement)'s call for the very organizational practices they have adopted in this collaborative.

Opening Process and Explanation:

Mix the group so that people sit with people other than their co-workers. While people might have some initial discomfort, they will benefit from talking with people they don't usually work with and will learn new ideas they can bring back to co-workers.

If people don't know each other, to get more comfortable sharing, ask participants to spend the first few minutes in a go-around sharing who they are, where they work, what their position is, and how long they have worked there.

Introduction to Topic: It Takes a Team to Prevent and Heal Pressure Ulcers

Time: 5 minutes

Content: Explain the following to your group:

Throughout this collaborative, we have presented three keys to high quality care:

- 1. <u>Relational Coordination</u> practices that support teamwork (consistent assignment, huddles, CNAs involvement in care planning, and QI among staff closest to the resident);
- 2. <u>Individualized Care</u> practices, using residents' customary routines as the basis for planning care: and
- 3. <u>Performance Improvement</u> practices for problem-solving among the team of care partners to individual care and improve outcomes

Now in this last series we bring these concepts together and look at how working better together leads to better outcomes. In this webinar, we apply the concepts to prevention and healing pressure ulcers. While there are many sources for information about the clinical protocols for preventing and treating pressure ulcers, this webinar focuses on the teamwork needed to implement these protocols in an individualized way that uses each resident's customary routines as the guide for planning care.

It takes a team... When CNAs interviewed for this webinar were asked what was the most important factor in preventing and healing pressure ulcers, they said, "Teamwork!" Two teams describe how they work together to identify residents at risk and implement effective interventions to prevent pressure ulcers from occurring and heal those that do. They use the four key "relational coordination" practices everyday to hear what the CNAs are observing, determine together the underlying causes and effective interventions, and then monitor continuously. With these systems in place for staff to work together, and with support from management and all departments, staff closest to the resident are able to individualize care to each resident's customary routines, and prevent or heal pressure ulcers. The outcomes are great because, as one CNA said, "If it's a sore, it's everybody's sore. We want to get rid of it...We all work together to make sure we get to that goal quicker." Relational coordination in action: frequent, accurate, timely, problem-solving communication for shared goals, knowledge, and respect.

Objectives:

- 1. Describe how relational coordination practices prevent and heal pressure ulcers.
- 2. List ways of individualizing care to prevent and heal pressure ulcers.
- 3. Identify leadership practices that are key to success in pressure ulcer prevention

As we draw the collaborative to a close, we want to help you solidify these practices within your own organizations. By having them solidly in place, you'll be in a good position to implement the new QAPI (Quality Assurance Performance Improvement) requirements that emphasize having high involvement from staff, residents, and families, and having an approach to improvement that integrates quality of life and quality of care.

Learning Experience #1: Sharing Experiences in Implementing Key Organizational Practices of Consistent Assignment, Huddles, CNAs involved in care planning and QI among staff closest to the residents

Time: 20 - 40 minutes

Material:

∞ Provider article on Relational Coordination

Content:

Throughout the collaborative, we've focused on putting in place these four relational coordination practices. Now let's explore what you've learned about how to make these practices solid and the benefits of doing so.

Process:

Have a table discussion in a learning circle in which each person can talk about any of the four practices and answer the question:

What are keys to success and what are the benefits?

If you have time for an open discussion to follow the table discussion, make sure someone is taking notes because we'll ask you to share what they say with us.

A discussion method option: Invite people to group by practice and discuss one area in depth. Have someone take notes.

Discussion:

Hone in on how-to's and benefits. Invite people to problem-solve together in any areas where people are hitting snags.

Close:

This is what you'll need to succeed at QAPI – for a high involvement approach where staff learn and use critical thinking skills.

- Show the first 17 minutes of webinar: An introduction and two videos, one on teamwork closest to the resident and one on teamwork through a Pressure Ulcer Prevention (PUP) team. Note the role of the PUP team as a resource and support to the work of the staff closest to the residents.
- Ask people, as they watch the videos, to make note of good practices.

Learning Experience #2: What are the Keys to Their PUP Committee's success

Time: 20 min.

Content:

At Glenridge teamwork and problem-solving occurs both (1) among staff closest to the resident and (2) through the Pressure Ulcer Prevention Team whose role is to provide all support needed by the primary dedicated CNAs to prevent and heal pressure ulcers. Their success begins with having dedicated CNAs and having huddles at change of shift and mid-shift to share information and problem-solve together. Their Pressure Ulcer Prevention team helps them access whatever resources or adjustments in services they need. It's an excellent model of Quality Assurance Performance Improvement in action. So let's explore what they did and identify the keys to their success.

Process:

In a learning circle at each table, have participants share what they took note of about the keys to the success of the staff closest to the resident and the PUP team?

Invite a room wide discussion.

Ask for any other keys to success in involving staff in performance improvement that anyone in the group wants to share based on their own experiences?

Emphasize how it all starts with consistent assignment, and also how important it is to support dedicated staff so that they can do what they know their residents need.

Close:

Note that QAPI asks for effective Performance Improvement Projects (PIP) involving all departments and services, with an emphasis on individualized care.

The keys to success identified in this discussion will help them in their upcoming PIPs.

- Return to webinar: Tell participants: The next segment is 26 minutes of audio from the Oakview Terrace team. They present common sense practices in a common sense way. There are two key areas to emphasize: their teamwork and how they individualize to each resident.
- Ask participants to note examples of how their care is individualized.
- As an option, use the Quality of Care + Quality of Life = Better Outcomes worksheet. This was originally introduced in Webinar 5 on Individualized Dining. It guides participants to see how to apply clinical knowledge and strategies through methods shaped around each person's unique needs an preferences.

Learning Experience # 3: Individualizing Care for Pressure Ulcer Prevention

Time: 20 - 40 minutes

Materials Needed:

- ∞ QC + QL = Better Outcomes Worksheet (Optional)
- ∞ QAPI 5 Elements

Process/Content:

Individualized care has been the key to success in promoting mobility, providing a good welcome, and reducing off-label use of antipsychotic medications. It's the key, too, in preventing and healing pressure ulcers.

Have participants share at their tables examples of ways the team from Oakview individualized care to get better outcomes and their own experiences individualizing care to prevent or heal a pressure ulcer.

If you have time, have an open room discussion about the keys to success in individualizing care and strategies for overcoming challenges. Take notes.

OPTIONAL:

The webinar contains an additional short video in which the Glenridge team discusses how they individualize nighttime rounds. Play this clip and invite discussion among participants about how their own experience with individualizing nighttime rounds and what ideas this clip gives them.

Close:

QAPI's scope is all care and services. QAPI elements emphasize resident choice, dignity and involvement, just as was done in this webinar and in the examples you cite.

- Return to webinar: The last 17 minutes includes 3 video clips from Glenridge, one on their process with new residents, one on huddles and documentation for communication and teamwork, and one on empowerment.
- All three videos illustrate a high level of critical thinking, heart, and teamwork –
 none of which occurs by accident. Staff are at their best because leadership
 supports them to be that way.
- Ask participants to note lessons in leadership as they watch these videos.

Learning Experience # 4: Leadership Lessons: Empowering Staff to Be Their Best

Time: 20 minutes

Materials Needed:

∞ QAPI 5 Elements

Process/Content:

As Connie notes, when CNAs are dedicated to their residents, and the rest of the care team is dedicated to supporting the CNAs, everyone is able to do their best with the best results.

This is the result of a consistent, deliberate approach to leadership that sets high expectations and then enables staff to reach those expectations, and rewards them for doing so.

At tables or in the whole room, invite participants to share and discuss what they saw in the webinar on leadership and what they've seen and learned in this work.

Close:

Note how these lessons will serve them well in meeting the QAPI expectations for leadership.

SESSION CLOSING - ORGANIZATIONAL PRACTICES SELF-ASSESSMENT AND TEMPLATE FOR SHARING LESSONS LEARNED AT LAST SESSION

In the final webinar, homes incubating these practices in this collaborative will be sharing their stories. We'd like you to share yours as well and we will use the last webinar viewing to hear from you.

Please use the attached template to capture your experience. Make a display on cardboard paper. Please include photographs and quotes from residents, families, and staff about what you've done, the benefits, and the lessons. You're also welcome to send video clips to the Pioneer Network for inclusion in materials we share about the collaborative.

At the beginning of the collaborative, we asked you to complete this organizational practices self-assessment. Please complete it again, this time rating where you are now and where you were at the start of the collaborative. We encourage you to get input from residents, families, and staff. Bring it with you to the last session.