

## **Additional Resource:**

### *Brief Description:*

*A geriatrician's view of consistent assignment: Dr. Mary Jane Koren reflects on the use of consistent assignment in long term care.* Mary Jane Koren, M.D., M.P.H., is a geriatrician, formerly on the faculty of Mount Sinai School of Medicine. Has served as; assistant medical director of the Montefiore Medical Center in the Bronx, NY home care agency, Associate Chief of Staff for Extended Care at the Bronx Veterans Administration Medical Center, and New York State Department of Health Director of the Bureau of Long Term Care Services.. Is currently vice president for the Picker–Commonwealth Fund Long-Term Quality Improvement Program and the Dual Eligibles initiative.

### *Text of article:*

#### ***Predictable scheduling:***

***Nursing homes can boost quality, bottom line with 'consistent assignment'***

***By Mary Jane Koren***

***Posted:***

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An aide notices an untouched cup of coffee sitting on the bedside table near an elderly resident I will call Mrs. Jones. This break in the routine troubles her. She has been caring for Mrs. Jones for three years and knows that she loves her morning coffee. So, she offers to bring her a hot cup. But Mrs. Jones just shakes her head and says she doesn't feel up to it. As it turns out, Mrs. Jones is getting pneumonia and the untouched coffee, as insignificant as it seems, has alerted the nurse that something is wrong. She pages the doctor and Mrs. Jones gets prompt—and possibly life-saving—medical care.

Similar situations play out again and again in nursing homes that assign an aide or a nurse to regularly care for an elderly, frail resident. The practice is called “consistent assignment.” It is one of nine critical quality topics chosen by Advancing Excellence, a 6-year-old national campaign aimed at helping nursing homes become high performance organizations. To date, over 56% of the nation's nursing homes have joined the campaign, which is the largest voluntary effort of its kind in the field. But administrators of all 15,800 nursing homes in the U.S. should sign up today and pledge to make performance improvement a top priority.

The campaign provides free tools for successful performance improvement and works through state coalitions of key stakeholders, called Local Area Networks for Excellence (LANEs or LANs) to help nursing homes improve in several ways. For example, the campaign's website, [www.nhqualitycampaign.org](http://www.nhqualitycampaign.org), includes archived webinars and short video clips of successful providers, a step by step framework called the Circle of Success for getting started and nine goal “packages” or tool-kits including:

- A set of “probing questions” which guide the process of problem identification and root cause analysis specific to that topic area,
- A tracking tool to help gather data and monitor progress, along with easy to follow instructions and Frequently Asked Questions;

- A list of informational materials and embedded links to useful articles and suggestions on well-tested interventions;
- Fact sheets which explain the goal and its purpose in language accessible to residents and their families and front line staff and one for the home's leadership
- An uploading function that enables data gathered on the tracking tool to be de-identified (to protect confidentiality) and uploaded onto the campaign website to follow outcomes. This is a powerful tool not only to measure performance but it also makes it possible for homes to compare their performance with others in their region, state or nationally.

These resources help staff gain confidence and improve their competencies which leads to greater satisfaction with their work and better care for their residents. Nursing homes that fully participate in the campaign will find themselves well positioned to be compliant with CMS's Quality Assurance/Performance Improvement requirements.

Data collected over the course of the campaign shows that nursing homes can make significant strides in improving quality outcomes. They've decreased the use of physical restraints, improved pain treatment and shown a reduction in the development of pressure ulcers. Those are all indicators of a higher standard of care. They're often found in facilities with low staff turnover and better retention and in homes that rely on consistent assignment. For example, a decrease in the use of physical restraints might be found where regular caregivers have learned the most likely causes of agitation in their residents and therefore know what to do to calm them without resorting to physical restraints.

They often catch medical problems in the early, treatable stages. For example, an aide who is regularly assigned to Mrs. Jones might notice a slightly pink patch of skin on her heels where they touch the bed, the first sign of a developing bedsore, and let the nurse know. The nurse could immediately begin treatment to prevent the skin from breaking down. That pro-active approach impacts the bottom line because once a bedsore forms and becomes advanced, it can cost \$19,000 to treat, especially since not all of that expense can be passed on. Additionally, because the problem was caught early before skin breakdown developed, the facility's pressure ulcer rate stayed low – which is reflected in calculation of the 5 star ratings and noted by surveyors.

Nursing home residents always rate relationships with caregivers as extremely important to them. Therefore, nursing homes that adopt consistent assignments often gain a competitive edge in a tough market— one that's filled with other options for discerning consumers. Many go to assisted-living facilities or will comparison shop before they pick a nursing facility. CMS collects data on nursing home outcome measures, and increasingly consumers will check the publicly available ratings before choosing a facility.

Nursing homes that decide to adopt consistent assignment will have to change the way they schedule and deploy staff but once the initial kinks are smoothed out staff is usually extremely enthusiastic. Nursing homes that rely on short-term employees or temporary staffing might not invest in competitive salaries, benefits and other factors that keep staff satisfied and on the job for the long run. The CNA turnover rate for many nursing homes exceeds 50% per year, which carries a high price tag: finding and training a single aide can cost \$3,000 or more in some job markets. In contrast, there are nursing homes which have made changes that keep turnover rates in the single digits.

High turnover rates lead to more than just demoralized, dissatisfied employees – they are also one of the root causes of quality problems. An aide assigned to different residents every day or every couple of days can't possibly be familiar with each resident's life story, health history or personal preferences. For

example, they may not know that Mrs. Jones grew up in Oklahoma and becomes agitated when she hears alarms or sirens because she thinks a tornado is coming, screams when she lays flat on her back because of a pinched nerve in her neck, or fights staff when being bathed because she hates showers. Consistent assignment gives an aide time to really get to know their residents and what works to keep them comfortable and content. Families appreciate the difference too – instead of being asked, “Which one is your mother?” when they inquire about their mother they can talk to someone with whom they are familiar who cares about, not just for, their mother. They feel welcome and become an important member of the resident’s care team.

In the end, nursing homes that adopt consistent assignment and are able to retain good workers are in a position to not just improve other quality measures but to become high performing organizations, putting residents at the center of the endeavor, fostering strong relationships between caregivers and residents, and delivering the highest standard of care.

Mary Jane Koren is a geriatrician and immediate past-chair of the Advancing Excellence in America's Nursing Homes Campaign, as well as a vice president at the Commonwealth Fund, an independent philanthropy based in New York City.