

Disclosure of Commercial Interests

- Susan D. Gilster
 - Executive Director
 - The Gilster Group
- The Gilster Group – Consultants with **30 years** of proven success in:
 - person-centered memory care training and sustainable programs
 - transforming cultures for staff retention and improving customer satisfaction
 - providing leaders an organizational process designed to meet regulatory requirements and drive census.
- Author: “Changing Culture, Changing Care: SERVICE First” and “A Way Life: Developing an Exemplary Dementia Program”

Focused Dementia Care Survey Outcomes

ACHCA Winter Marketplace
 Las Vegas
 December 9, 2016
 (3:30-5:00 pm)

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CMS Pilot Project

- 2012 CMS - National Partnership to Improve Dementia Care
- 2014 Dementia Focused Survey Pilot
 - Surveyor feedback - positive
 - **Dementia - integrate into annual survey/focused**
- 2015 Expanded Focused Survey Pilot
 - Intensive effort for citing poor care/medication
 - **16 of 20 surveys (80%) cited F309/care, F329 meds**
 - 11 of 20 (50%) cited both tags
 - Other tags cited – F520/assessment, F279/care plans

2016 CMS Pilot Project - Next Steps

- Examine variation in enforcement:
 - California 54 cites in 5 surveys
 - Nebraska & Mississippi 29 in 5 surveys
- Focus on surveyor effectiveness:
 - In citing poor care
 - Identifying change in resident status, non-pharmacological approaches
 - Unintended consequences antipsychotics: shift to anxiolytics, sedative, hypnotics

What drove the pilot/regulations?

- Multiple complaints and concerns from consumers, organizations and dementia care outcome research
- Care issues, safety concerns, quality of care, deaths



Memory Loss in Long-Term Care

- Nursing Homes - 50-80% residents have cognitive impairment
- Assisted Living – 46% to high of 71%
 - (Zimmerman 2015)

- What are the essential components of an excellent memory care program?



Research: SCU's – “Best Practice”

- NIA 1991 research – SCU
 - Residential environment
 - Consistent staff
 - Training on dementia – all departments
 - Ongoing education/support for staff
 - Individualized care – “person-centered”
 - Meaningful activities
 - Engaged families

What Customers Want (2015)

- Caring and concerned staff
 - Know the “person”
- Competent staff – adequate levels
- Respectful and responsive staff and management

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CMS: What They Want...Expect...

- Person-Centered Care – Know the “Person”
 - History – personal, medical, behavioral, who they are/were, likes...
 - Activities – individualized, meaningful
 - Understand individual’s behaviors – triggers, patterns, strategies

Meeting customer and CMS desires and expectations are dependent upon a stable staff and an organizational approach

Staff Research - What Staff Want

They want non-tangibles:

- **Respect and appreciation**
- Meaningful work-to make a difference
- **Education** and to know expectations
- Input into decisions and plans -a” **voice**”
- **Communication** - routine, open, honest
- Competitive pay/promotion - health benefits
- **Caring, nurturing leadership**
- Fun!

Employee Satisfaction

- Most important measure of quality care
- High employee satisfaction:
 - Engaged staff, person centered care
 - High customer satisfaction
 - Better CMS Five Star ratings
 - Less survey deficiencies, citations, fines, law suits
 - Maximized reimbursement
 - Partnerships-Hospitals, ACOs, Mg Care, etc.
 - Higher census

CMS Dementia Focused Regulations

- Dementia training
 - All staff
 - Initial and annual requirements for nursing
 - Abuse training mandatory
- Interdisciplinary team – care planning
 - To include CNA's, SW, etc.
- Foods, more choice – individual likes/dislikes
- Infection control – requires an "officer"

CMS to Surveyors: What surveyors are looking for...



Guidance to Surveyors:
Quality Assessment & Assurance

- Evaluation of facility's **systemic, organizational** approach to dementia care
 - Care policies reflect facility overall approach to dementia care
 - How facility monitors staff compliance

Guidance to Surveyors:
Individualized Approaches & Treatment

- Staffing & staff training
 - Provide staff in “**quantity and quality**” to meet the needs of residents
 - Facility must strive to staff in a way that optimizes familiarity with residents (consistent assignment?)
 - Surveyors to **focus on observation of staff interactions** with residents with dementia

Guidance to Surveyors:
Care and Services

- Recognition & management of dementia
 - Staff understand the disease process and behaviors - triggers
 - Detailed cultural, medical and psychosocial information about person to prevent or reduce behavior

Guidance to Surveyors Assessment

- Caregivers/practitioners to know:
 - Past life experiences, history – work, etc.
 - Preference - routine, food, music, etc.
 - Oral health
 - Presence of pain
 - Cognitive status
 - Behaviors, describe individuals
 - Medical conditions, abilities, medications

Guidance Surveyors Therapeutic Interventions

- Caregivers/practitioners expected to know:
 - Interventions and effectiveness
 - Details and consequences of behavior
 - **Identify frequency, intensity, duration and impact of behaviors, location, surrounding or situations...**
- “Individualized person-centered interventions” must be implemented

- Symptom Medication and Quality of Life



Guidance to Surveyors Medication

- Facilities must be able to identify:
 - Involvement of residents/families in discussions about approaches to behaviors, risks and benefits of medication, proposed course of treatment, duration...
 - Individualized approaches, evaluation of effectiveness and alternatives

Guidance to Surveyors Medication Initiation cont.

- Interview staff:
 - What was the person trying to communicate
 - Reasons for behavior
 - Interventions attempted first
 - Family contacted first

Guidance to Surveyors Initiation Medications cont.

Is medication clinically indicated?

Lowest dose possible

Dose reduction plan

Interdisciplinary team involved?

Monitor effectiveness

- So, how do you create a compliant, successful, person-centered memory care program?



What I Know...

- Impossible to offer person-centered memory care program with high staff turnover
- Staff retention is critical - “regulations,” quality measures, hospitals, ACO’s, reimbursement, PBJ, 5 star...
- Staff satisfaction, retention and compliance requires an **organizational approach**, plan

What I KNOW I Know...

- Individual staff satisfaction programs are like “throwing darts”



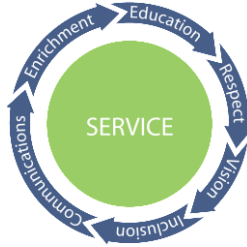
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SERVICE – Systemic Model

SERVICE:

- Service
- Educate
- Respect
- Vision
- Inclusion
- Communication
- Enrichment

Organizational Process Model



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SERVICE – Organizational Model

- Service orientation
- **Education and expectations**
- Respect – all
- Vision - shared
- **Inclusion – input - ownership**
- **Communication – systems/staff**
- Enrichment – care, celebrate, fun

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What are you doing to achieve staff retention, quality initiatives/goals and prepare to succeed in the new regulatory environment?

Person Centered Care "Know the Person"

- Systems for gathering/communicating person centered information to direct care staff, all staff
 - Staff will not dig through EHR for information
 - Method to update information/communicate?
- Consistent Assignments - Relationships
- Enhances relationships with families too

Organizational Systems Orientation/Training

- Orientation thorough - despite tenure
- **Expectations** for performance – service, respect, "all hats"
- Dementia training initial and **ongoing**
 - Document attendance/completion

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Organizational Systems Inclusion/Communication

- Routine, sustainable meetings - education and communication – **all staff, departments, shifts**
- Open, honest, input – safe to voice concerns
- Share strategies, solve problems, make decisions, improves interdepartmental relationships

Integrating Families – Person-Centered

- Encourage input and involvement-“experts”
- Be proactive with concerns/complaints
- Routine family meetings agenda – education and communication

Research outcomes of an organizational approach



Research - Organizational Approach

- Increased census - more private pay residents
- Multiple deficiency free surveys
- Staff retention 93%
- Customer satisfaction 98.5%
- Less than national average use antipsychotics
- Hospitalization rate 3-5%
- Re-hospitalization rate 0-0.3%

- It is not only about regulations – it is about creating a quality of life for those who **live and work** in your facility

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