

**PERSON-CENTERED STAFF ENGAGEMENT PROJECT
4TH SEMI-ANNUAL REPORT
MAY 15, 2019**

The Office of the State Long-Term Care Ombudsman is pleased to submit to the Ohio Department of Medicaid (ODM) the fourth and final semi-annual project status report on the use of Resident Protection Funds. As proposed, the Office has launched an ambitious project, bringing person-centered staffing solutions and leadership development to Ohio nursing facilities in spring of 2017. With the critical participation of regional project ombudsman, the project has seen proactive activity on the part of participating nursing homes. Nursing facilities have attended the statewide conference and quarterly regional roundtables, created project specific action plans and are developing the staff stability “bundle” of practices to fully realize the intent of the project. We thank them for their trust in this project to achieve their organizational goals.

PROJECT STATUS

The Person-Centered Staff Engagement Project closed the project with a remarkable capstone event at which homes shared their accomplishments in the grant activities with one another through storyboards and “elevator-speech” presentations. We were pleased to host key stakeholders to demonstrate what the project entailed and how homes improved their staff engagement to benefit residents. The SEP capstone event was held February 13, 2019 at which homes highlighted accomplishments in approximately 10 project areas. The Ohio Departments of Medicaid, Health and Aging, regional ombudsman programs, provider associations, MyCare Ohio Plans and other stakeholders were invited to learn more about the project activities and accomplishments.

The same storyboards and short presentations were offered at the final Ombudsman Continuing Education event held during the project period. More than 50 other long-term care ombudsmen were able to experience a similar sharing of information in each of the project topics in a smaller and more collaborative environment. Evaluations revealed that this was one of our most popular presentation topics for many ombudsmen who will take their learning into the field in future complaint handling and provider consultation opportunities.

The SEP liaisons hosted in regional ombudsman programs have completed their work on the grant activities and have either left the program or shifted into traditional ombudsman roles as complaint handlers or, in one case, as a volunteer coordinator. Those staying with the program retain the knowledge and skills developed through the course of the project and remain enthusiastic about the

246 N. High St. / 1st Fl.
Columbus, OH 43215-2406 U.S.A.
<http://ombudsman.ohio.gov>

Main: (800) 282-1206 (TTY dial 711)
Fax: (614) 644-5201
Email: OhioOmbudsman@age.ohio.gov

project’s mission and have offered to continue to share that knowledge through outreach with troubled nursing homes and with other ombudsmen in training opportunities.

PROJECT ACCOMPLISHMENTS

As described above, the final statewide training session was held February 13, 2019 at the Courtyard by Marriott West, a larger venue suitable for the day’s program of events. Attendees represented the participating facilities, regional project ombudsmen and program directors, the MyCare Ohio Plans, the Ohio Department of Health, the Ohio Department of Medicaid, HSAG and the Office of the State Long-Term Care Ombudsman. CEUs were offered for Licensed Nursing Home Administrators and through the Ohio Board of Nursing.

In this period, each regional program ombudsman has held at least one quarterly roundtable attended by participating facilities. Agendas included follow-up and discussion of lessons learned at the February event and other topics at the request of the homes to meet their needs. Project ombudsmen have completed a final project evaluation of communication infrastructure and Person-Centered Care Index to be included in the project evaluation data. They summarized the project topics in one- to two-page documents to be included in a future Ombudsman Resource Library currently under development for future ombudsman reference.

The State Office continued the monthly SEP ombudsman teleconference, a monthly teleconference with B&F Consulting and a monthly open-line call between SEP ombudsmen for cross-regional sharing. The State Office has also compiled project evaluation data to be shared with the evaluation team at Scripps Gerontology Center.

PARTICIPATION UPDATE

The regional project ombudsmen are working with 113 nursing facilities (goal was 100) in the Nursing Home Quality Improvement Project. With an original participation of 121 nursing facilities, the project has seen 93% retention rate in the project despite remarkable turnover in key leadership positions (discussed below).

REGION	TOTAL	COUNTIES REPRESENTED
1	10	Clermont, Clinton, Hamilton, Warren
2	10	Clark, Darke, Greene, Montgomery
3	12	Allen, Auglaize, Hancock, Hardin, Mercer, Putnam
4	11	Defiance, Erie, Fulton, Lucas, Williams, Wood
5	9	Ashland, Crawford, Knox, Richland, Seneca, Wyandot
6	8	Delaware, Franklin, Licking, Madison, Pickaway
7	10	Adams, Brown, Gallia, Highland, Pike, Ross, Scioto
8	4	Athens, Morgan, Perry, Washington
9	10	Belmont, Coshocton, Guernsey, Holmes, Jefferson, Muskingum, Tuscarawas
10a	10	Cuyahoga, Medina, Lake, Lorain, Geauga

10b	10	Portage, Stark, Summit, Wayne
11	9	Ashtabula, Columbiana, Mahoning, Trumbull
Grand Total:	113	

As in the prior grant period, significant staff turnover in key positions of administration has been a challenge to the project. In almost two years of active project work, the Staff Engagement Project Ombudsmen have reported the following turnover in the following areas in still-participating homes:

Change in the LNHA	Change in the DON	Change in other significant management personnel	Facility owner or operator change
43.4%	55.8%	18.6%	15.9%

In the homes with turnover in these positions, facilities have ranged from 2 to 6 licensed nursing home administrators (LNHAs) and directors of nursing (DONs) in two years. One home had 6 LNHA's. Two others had 5 LNHA's and 4 DONs. It was a source of frustration for both the facility staff and the project ombudsmen.

"I can't talk about this enough. Turnover for LNHA's and DONs with my ten homes is at 310%. Even for those new administrators who truly embraced the Project, participation was difficult given the amount of work they were facing due to turnover in management."

-PROJECT OMBUDSMAN

The regional project ombudsmen have offered review of project materials to incoming management staff and have reported mixed results in project momentum as new staff must prioritize other critical areas than working on communication infrastructure or staff retention techniques. Many incoming administrative staff embraced the project but some were not interested or invested in the project's success. The evaluation may reflect outcomes varying in those homes with lower turnover.

The major barrier was turnover in leadership staff. Out of eleven (11) participating homes, nine (9) had leadership turnover in either the Administrator role, Director of Nursing Role or both. Many homes had turnover in those leadership roles multiple times. When turnover in the leadership roles exists, it has been a challenge to have new leadership fully invest in the project. Their understanding of the purpose, requirements, and missed learning sessions, no matter how often we reviewed and updated, seemed to get lost in translation. Many time, the new leadership staff were overburdened with learning a new building, fixing broken systems, or responding to poor state surveys, they did not have the time nor attention or ability to invest fully in the project dynamics.

-PROJECT OMBUDSMAN

PROJECT ADJUSTMENTS

Staff turnover in the SEP ombudsman role was far less than expected at the end of the grant period. As the State Office had anticipated ombudsmen leaving for other opportunities, the workload had been mostly completed by the end of March. Several shifted into traditional ombudsman roles earlier than anticipated, shifting their time allocations to ombudsmen funding sources rather than grant funds. With ODM support, the grant will permit other ombudsman staff to assist with project activities with strict “firewall-like” processes so that complaint-handling ombudsmen were not serving as project ombudsmen in their currently assigned buildings. Other project ombudsmen were let go early from the project if their work was complete and the program could not support them in a more traditional ombudsman role. The State Office is extremely grateful for all the work the project ombudsmen were able to do during this project.

Action plans

Each participating facility has focused in this reporting period on a collection of staffing interventions to move their performance toward better staff retention and training and reduction of staff turnover. Project ombudsman worked with the homes toward developing those action plans and reported the highest priority areas for those homes.

Key Action Plan Areas by priority level	1st	2nd	3rd	Total
Staff recognition	20	20	17	57
On Boarding/Training/Mentoring new employees	10	21	14	45
Huddles	22	11	6	39

Consistent Assignment	17	8	11	36
Recruitment	16	7	7	30
STNA in care plan mtgs	3	10	15	28
Other Staff Communication	6	5	5	16
Resident preferences (PELI)	5	4	7	16
Interviewing	3	6	5	14
Other (explain in narrative)	5	1	5	11
Stay/Exit Interviews	1	3	3	7
Tracking Turnover/Retention	0	4	2	6
Total	108	100	97	

Subjective evaluation by the regional project ombudsmen indicates that homes have been successful in accomplishing their short-term action plans in each of these areas. Ombudsmen reported successful movement in more than 93% of facility’s highest priority area. As the priority given to an area declines, the less successful the perceived improvement.

Perceived positive movement by priority level	1st	2nd	3rd
Consistent Assignment	88.2%	87.5%	81.8%
Huddles	95.5%	100.0%	83.3%
Interviewing	100.0%	100.0%	80.0%
On Boarding/Training/Mentoring new employees	100.0%	95.2%	78.6%
Other (explain in narrative)	60.0%	0.0%	100.0%
Other Staff Communication	83.3%	80.0%	80.0%
Recruitment	100.0%	85.7%	85.7%
Resident preferences (PELI)	100.0%	100.0%	100.0%
Staff recognition	95.0%	80.0%	94.1%
Stay/Exit Interviews	100.0%	100.0%	33.3%
STNA in care plan mtgs	100.0%	90.0%	73.3%
Tracking Turnover/Retention	N/A	50.0%	100.0%

The project evaluation team at Scripps Gerontology Center is working on final data analysis to report on the project’s impact on outcomes affecting the facility’s quality performance. Early results do not show significant change in the number of citations the facility was given during state survey among participants and non-participants but the number of citations for those who disenrolled from the project were higher than those that completed it. Additional analysis of complaints to the ombudsman program and performance in quality measures may be more telling.

SPENDING

See attached Disbursement Activity Report

Contact

Erin Pettegrew

Deputy State Long-Term Care Ombudsman

Epettegrew@age.ohio.gov

1-800-282-1206