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PHCA ANNUAL CONVENTION 2017 Excellence in Quality Contest

Organization: Quality Life Services

Company/Corporation: Countryside

Storyboard Contact Information:

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Quality Category (Please select the one that best describes your storyboard):

Improved Person-Centered Care for Residents

Evaluation Criteria: (Insert responses in each section below)

I. Indicate the problem that the quality project was trying to solve/impact.

We noticed that our residents had minimal input on how their day was structured and when they participated in daily activities. Our staff was task oriented with all activities of daily living scheduled to conform to the schedule of the responsible staff members. For example, residents were getting up as early as 4:00 a.m., to shower and arrive in the dining room by 7:30 am to eat breakfast. Breakfast was delivered to the residents on a tray delivered by kitchen staff.

II. Outline the root cause analysis that occurred as part of the process.

The problem was the residents had minimal input on how their day was structured. Why: The residents' schedule was prepared solely by the staff. Why: This was the result of staff being task-oriented rather than person-centered. Why: Staff were task oriented as the result of tightly scheduled med passes and requirements that needed to be completed daily. Why: Each of the various tasks were scheduled at specific times starting with breakfast at 7:30 a.m. Why: "That's the way it has always been."

III. Describe the process that was implemented or adapted.

Goal: to allow for resident decision-making in daily life, "liberalization". Liberalized medication times allow residents to sleep in and staff to focus on a team approach to care rather than task. Upon awakening, residents choose what they would like to eat. Tray service was replaced with buffet service for meals, served by culinary staff on the unit allowing food to be served faster and hotter. The smell of freshly prepared foods, such as toast cooking in the dining room, stimulate appetites.

IV. Outline the monitoring plan, timeframe.

Monitoring has been ongoing since the onset of the liberalization process. We constantly evaluate what works and what doesn't. This will continue as this is expected to be an ever evolving way of life. As our resident population changes over time, so will the way we plan and deliver our services and care.

V. Identify challenges/pain points that occurred throughout the process.

The transition for therapy was a challenge, as they had to adapt their schedules to meet the desire of the residents. This meant not providing therapy at 6 o'clock in the morning, instead waiting until the resident started their day. Nursing staff had to adapt to doing more showers on day and afternoon shift since midnight shift would only shower residents who were awake and requesting a shower. The days of 'get-up lists' and scheduled showers ended. Care was no longer scheduled and predictable.

VI. Indicate any adaptations or modifications that were made throughout the process.

Kitchen assignments were redesigned to involve all culinary staff in the work flow. Block CNA assignments changed to team assignments allowing staff to work together, creating a team atmosphere and improving morale. Responsibilities blended and schedules adapted as there was no longer time constraints to get a med pass completed or to have all residents in the dining room by a specific time. Nurses were now able to help with a transfer and a CNA had time to allow someone to soak in the whirlpool

VII. Provide the plan for sustainability.

We are committed to this way of life, believing this is the right way to live and work. We expect the best for our residents and include all staff in doing our best to make life wonderful for all who live here. We constantly re-evaluate progress by taking immediate notice of problems or small issues that arise. Huddles address problems, determining if it is a “quick fix” or a “go back to the drawing board” type of issue. We are not afraid to change what “has always been done that way”.

VIII. Outline the status of the project (include progress towards goal).

We are fully integrated in to this way of life. Residents sleep until they are rested, participate in activities that make them happy, eat the food they want and when they want. The breakfast meal is calm and family-like as smaller groups of residents join together for their meal. More time is spent with styling of hair and personalized care. This is a project that will never be complete. There are constant revisions as issues arise or new ideas are presented.