

Long-Term Care Survey Alert

Case Study: Get CNAs On The QA Bandwagon And Watch QIs Fall In Line

Tap frontline caregivers' real-world expertise and commitment to care.

To win the war against adverse resident outcomes and F tags, ask your frontline caregivers for "on the ground advice" in developing realistic care protocols - and give them clear marching orders for carrying them out.

That's the strategy that Nashville, TN-based **Bordeaux Long Term Care** has used with great success in devising and implementing performance improvement projects.

Example: As the first step in improving pericare, the nursing administration asked CNAs to observe each other doing the procedure and share feedback among each other and with the nurse managers.

The goal: The facility wanted to identify variations in how frontline staff was performing pericare - and obtain CNAs' suggestions - before designing a standardized, best-practice protocol.

The QA team learned some valuable lessons. "Some of the identified variation in pericare among CNAs raised some good questions about what the best practice should be within the practical realities" of care, reports facility administrator **May Bennett, NHA**.

For example, "CNAs raised a question about how they should meet sometimes conflicting needs for infection control and dignity/quality of life issues in terms of disposing of soiled linens and care items," Bennett tells **Eli**. That information led the QA team to consider ideal placement of hampers in order to be discreet, yet also comply with hygiene and IC requirements.

CNAs identified two other areas of practical concern in providing pericare:

1. Lack of sufficient numbers of laundry barrels to allow staff to consistently observe IC practices when they provided personal care.

Solution: The facility purchased more barrels for laundry disposal.

2. A need for a change in hygiene procedure to prevent staff from throwing away very soiled wash cloths. As a result of the CNAs' feedback, administrators found out that caregivers were discarding heavily soiled washcloths after pericare - a practice that was driving up the facility's linen costs unnecessarily.

Solution: The CNAs suggested a procedure that required caregivers to use toilet tissue or wipes prior to the washcloth, which the facility added to the pericare process. The change prevented heavy soiling of washcloths, which not only improved infection control but also lowered linen costs, reports DON **Shara Stodola, RN**.

Some of these "real world" issues raised by the CNAs wouldn't have come to light, Bennett contends, had the facility simply appointed a nurse manager to develop and hand out a pericare procedure to implement, no questions asked.

"Soliciting input from CNAs in developing best practices also empowers these frontline caregivers who have an incredibly difficult, yet potentially very rewarding, job," says Bennett.

Get Back to Basics

Bordeaux administrators have also learned frontline caregivers do best when they receive clear, simple directives and rationales for implementing care protocols.

Case in point: In a recent project designed to promote residents' optimal urinary continence, the QA team realized the facility needed to simplify the continence assessment for frontline caregivers.

"It's important for the nurse practitioners and physicians to identify the resident's type of incontinence in order to develop an individualized plan," says Bennett. "But we realized that the CNAs need clear directions ... about how to toilet the resident and what products to use, when to use them and how to use them correctly."

The nursing administration also learned some staff were confused about the terminology used in the toileting program.

For example, some staff didn't understand the term "prompted toileting," so the administration moved to simpler terminology to get everyone speaking the same language.

The facility's administration has also encouraged CNAs to take ownership of the continence program. After all, they are the ones providing the hands-on assistance in helping residents regain control of their elimination - and the sense of dignity, normalcy and pride that achievement brings.

"The CNAs identify the resident's progress in meeting goals in the continence care plan and celebrate those accomplishments with the resident in a respectful way," says Bennett. "Improved continence translates into a better quality of life for the residents - and it benefits the CNAs caring for the residents," she concludes.