

## Long-Term Care Survey Alert

### STAFF MANAGEMENT: Ditch The Snitch Mentality--Develop A Culture of Commitment And Accountability

**Enlist staff as problem-solvers to improve patient care.**

Does your facility have anyone on staff just itching to call the facility on the carpet behind its back by reporting something--anything--to the state or a plaintiff's attorney?

If you're not sure of the answer, read on. Disgruntled employees who complain to authorities can be your worst nightmare, says **Loretta LeBar, JD**, with **Stoll, Keenon & Park LLP** in Lexington, KY. LeBar should know. While serving as a deputy attorney general, she received many calls from current or past nursing home employees with an axe to grind. And many of the complaints had nothing to do with patient care or well-being. "Usually just listening to the people would take some of the steam out of [such] complaints, and rarely did they take the next step and call the state agency where reports are filed," LeBar notes.

**Beware:** "When the state survey agency receives such reports they must, in many states, conduct an investigation, solely on the ranting of an individual that was usually not given the time of day by management," says LeBar.

**The good news:** Facilities can take steps to manage staff's concerns internally, which can go a long way toward avoiding that unexpected knock at the door from surveyors or other government agents acting on a tip.

#### Consider 5 Proactive Strategies

**1. Set the tone for a caring environment that nurtures staff and residents and enables them to propose solutions to problems.** Managers should learn to use active listening techniques where they enlist staff as problem-solvers and get back to people about their concerns, says LeBar.

Be on the lookout for signs where staff doesn't treat other staff well. That can be a sign of burnout, signaling staff are on overload or aren't receive the nurturing they need to care for themselves, residents--and fellow staff. It's also a recipe for an environment where people become angry and "tell" on each other to managers and even government authorities.

The facility administrators have to find ways to teach staff to nurture each other and communicate positively in what's a difficult emotional environment, says LeBar.

**2. Implement a Problem = Solution environment so that if someone brings up a problem, that person is also expected to propose a solution,** suggests **Clint Maun**, a management consultant with **Maun-Lemke Inc.** in Omaha. "The solution may not be the one that the team or facility ultimately adopts, but it starts the process of searching for a solution as a group," he says.

Empowering staff to propose solutions to problems eliminates the parent-child model that actually encourages staff to "flush up" a problem to authority figures, suggests Maun. Following that model, staff may move up the chain of command to government authorities if they don't get the response they want from the nursing home administration, Maun says.

**3. Teach and reinforce the key elements of root-cause analysis.** The root-cause process discourages finger-pointing when a resident has a negative outcome, suggests attorney **Adam Balick** in Wilmington, DE.

Include staff at all levels in solving identified problems. "If the facility has a staffing problem, then a team of staff addresses that," says Maun. "If it's a survey issue, a team can tackle that," he suggests. Reward and recognize teams and individual people for their solutions.

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**4. Always fix identified problems.** If you do a root-cause analysis and pinpoint the cause of a near miss or accident--and then don't address the issue timely--you're begging for staff invested in residents' wellbeing to air their concerns to the state or surveyors.

**Real-world example:** A nursing facility built a ramp to connect an old building to an addition. Realizing the ramp posed a safety hazard, the administration decided to put a sign at the top of the ramp saying, "Residents must be assisted to go down." But the facility had a couple of minor incidents that showed the ramp needed a barrier at the top, according to **Bonnie-Lou Binnig**, director of compliance and quality improvement for **VanGuard Healthcare Services** in a presentation at the recent fall annual **National Association for Subacute and Post Acute Care** conference in Washington, DC. "One day, an elderly person in a wheelchair went down the ramp, hit her head, suffered a subdural bleed--and died," Binnig relayed. Only after that incident did the facility put a coded-entry door at the top of the ramp.

**5. Conduct exit interviews that encourage staff to air their real concerns so you can make proactive changes moving forward.** "Facilities should sit down with every employee who leaves their position to ask them to share what they think the management or care team could do to improve," advises LeBar. "The person's immediate supervisor should not conduct the interview," she emphasizes.

**Fend off whistleblowers:** Also use the exit interview to find out if the employee believes he or she witnessed anything illegal or improper in the facility. If the employee says she did witness something unethical or illegal, ask her if she told someone about the improper act and, if not, why.

"If the person denies ever seeing anything improper or illegal in the facility, ask her to sign a statement to that effect," advises LeBar. "Then if the person later lodges a complaint, you have that signed statement to impeach him or her," she adds.