

## **Long-Term Care Survey Alert**

## Staffing Management Tips: Give Staff 2 Vital Resources to Provide Optimal Care: Knowledge and Time

Skimping on this essential activity up front can cost the facility down the road.

Ensuring your facility has nurse staffing well equipped to care for residents can go a long way in staving off F tags and civil litigation. Here are three ways to pull off that feat.

**1. Provide a top-notch orientation.** "The majority of facilities that find themselves in trouble are ones that provide on-thejob (OJT) orientation, which sets up new staff for failure," says **Janet Gerber, RN-BC,** president and CEO of Gerber Consulting Services in Clymer, Pa.

"There are some fairly good computerized orientation systems that allow you to individualize the training to some extent," Gerber adds. "But that's not the same as having someone walk the person through the unique features of the building." Gerber advocates providing comprehensive orientation with lesson plans that answer two key components -- "why and how" staff should do things. For example, make sure that staff members understand the federal and state regs and know where they are located on the unit, she advises. The approach helps "alleviate the negativity inherent with anything new," Gerber relays." She notes that such negativity "is sometimes portrayed as the need for more personnel" because disenchanted staff members lose time standing around complaining.

Tip: Gerber has seen people come up with creative ideas to teach people the F tags, such as developing crossword puzzles and hanging posters in the bathrooms.

Calculate the payoff: Gerber often challenges CFOs to "crunch the figures on the turn-over that occurred prior to a comprehensive orientation programming investment -- and the results within three months afterwards."

2. Identify and implement efficiency-boosting strategies. A building's layout can affect staff time requirements in terms of how "user friendly" it is, including placement of supplies and linen, Gerber notes. And sometimes you're stuck with certain features in the building. But you can eliminate frustrating practices that tie up caregivers unnecessarily, such as requiring staff to hunt down the licensed nurse with the key to the supply room and then return the key, she adds. "There are many other successful mechanisms to safe-guard supplies that in the long run save time and money."

Also look at equipment the facility uses, such as a "probe style thermometer like the IVAC versus a tympanic" thermometer, Gerber suggests. "Using the latter, a nurse's aide can obtain temps for the entire floor in a fraction of the time." A good tympanic thermometer does cost more and requires training to use, she concedes. "But doing a cost comparison where you factor in staff time tells the true tale." And obtaining a tympanic temperature "is fast becoming a standard for accuracy and reliability."

Teamwork can also save time and improve outcomes. "If you have an LPN or RN who truly leads by example, answering call bells and helping out with care," you'll see better outcomes at the end of the shift than you would without that type of leadership -- even when working short, says Gerber.

3. Perform this litmus test. Gerber likes to challenge directors of nursing to complete a "personal time study" of what they are expecting a nursing assistant to accomplish during a shift. Then answer the question: "Can I do what I am expecting the nursing assistant to do?"

If the answer is no, you have to address that problem, Gerber says. Otherwise, "all you will do is succeed in making matters worse by chasing that person out the door and becoming even more short-staffed."

