



# Embrace!

Newsletter of the NC Coalition for Long-Term Care Enhancement

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## Special points of interest:

- Enhancing the staff's environment
- Why employees are key to culture change
- Just what is a Person-Centered system?

**Embrace!** is a project of the N.C. Coalition for Long-Term Care Enhancement. To respond to articles, contact the editor:

Jill Nothstine,  
(704) 637-2870 or at  
j.nothstine@lsanc.net.

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## North Carolina New Organizational Vision Award (NC NOVA)

By Erin Russell, MS

Direct-care workers are certified nursing assistants, personal care attendants, and other unlicensed paraprofessionals who provide 90 percent of the hands-on daily care for people receiving formal long-term services and supports, whether at home or in a residential setting. An adequate, well trained, and stable direct care workforce is important to quality care. North Carolina is one of approximately 12 states that annually track turnover data on direct-care staff working in one or more long-term care settings. In 2006, average annual turnover rates by setting were as follows: nursing facilities, 111 percent; adult care homes, 117 percent; and home care agencies, 50 percent. North Carolina has been working collaboratively with diverse stakeholder groups to address known causes of turnover among the direct-care workforce.

The North Carolina New Organizational Vision Award, or NC NOVA, is one attempt by the state to address this workforce issue. NC NOVA was developed by a broad-based partner team and focuses on improving the recruitment and retention of direct-care workers and the quality of care they provide.

Effective January 2007, the NC NOVA program offers a special state license to home care agencies, adult care homes, and nursing facilities that voluntarily meet higher standards to support their workers on the job by providing opportunities for personal and professional growth and creating a team environment to deliver better care. This focus on an improved workplace environment is designed to help facilities develop and retain a stable, satisfied, and well-trained

workforce, leading to greater satisfaction among residents, clients, and their families. Ultimately, it is the goal of the Partner Team that organizations meeting NC NOVA's raise-the-bar standards receive a reimbursement differential for attaining the NC NOVA special licensure designation.

There are currently five NC NOVA designees - three are nursing facilities and two are home care agencies. The names of these organizations, as well as detailed information about the program can be found on the NC NOVA website at <http://www.ncnova.org/home.html>. In addition, the NC NOVA Partner Team has been working on a "Getting Started" DVD and a written document based on insight and lessons learned from some of the NC NOVA pilot sites. If you're interested in these resources, contact the NC NOVA office .

Erin Russell is a social research associate with the NC Division of Aging and Adult Services and can be reached at <Erin.King@ncmail.net>.



Angela Gossett, RN and Brenda Edwards, CNA, members of the 3rd floor Decor Team at Longleaf Neuro-Medical Treatment Center in Wilson, decide if this is the right spot to hang a picture bought with grant funds. Engaging all staff in culture change makes them more likely to embrace and support the project.

## Staff Empowerment: The Wellspring Philosophy and Care Resource Teams

By Jill Nothstine, R.N.

Several long-term care facilities in North Carolina have adopted the Wellspring Model as part of their commitment to quality care and culture change. This model integrates the concepts of resident directed care, federal quality indicators, national best practices, and a new leadership paradigm. Wellspring believes that one key to improving resident outcomes is through staff collaboration and empowerment. This empowerment is achieved through staff education programs in the form of “care resource teams.”

Lutheran Services for the Aging homes have been participating in the Wellspring Alliance for three years. One home that has particularly embraced the idea of CRTs, or Care Resource Teams, is the Lutheran Home at Hickory. Shellie Moore, the ADON and designated Wellspring Coordinator at LH Hickory, notes that the home has 10 CRTs, all of which meet at least monthly. The teams have adopted their own catchy names, such as The Dripsy Chicks for the Incontinence Management Team. The teams are chaired by a team leader, and are comprised of members of line staff in all departments, as well as department managers.

Each team is responsible for not only reviewing and investigating resident outcomes related to their area, but also for coming up with plans of action that may involve individual residents, or system processes that impact a large number of residents. For example, the Drispy Chicks recently implemented the use of magnets that attach to the over bed light to identify residents on various toileting programs. The Drama Club, the CRT responsible for working with residents that have behavioral concerns, was instrumental in implementing the new Bathing Without a Battle Program on the dementia unit. The POPS Club (short for Packing on the Pounds) has initiated fund raisers and solicited donations to obtain small refrigerators to place in the rooms of residents who require thickened liquids. They also had input on the buffet dining program.

Another innovative program that came from the pain and palliative care CRT, otherwise known as the Rescue Squad, is the prayer quilt. This quilt is made by the residents and is personalized for the terminally ill resident’s family. This CRT is also responsible for seeing that the family of the dying resident is made comfortable with snacks, beverages, extra pillows, and blankets.

The Blazing Razors, the CRT for falls and accidents, recently began a BINGO game for the staff. Each staff

member is given a BINGO card, and if no resident falls in a 24- hour time period, a letter is drawn.

ERAC (Employee Relations and Action Committee) has begun a positive links chain that works like this: a compliment is written about a person on a strip of paper; that person must then write something about another person on another strip of paper and link them together, forming a chain. The home hopes to have a paper chain extend around the entire building or, as Shellie put it, “out the doors and over the roof.”

The Golden Threads is the CNA Leadership Team. This team attended a Wellspring workshop in Charlotte and returned highly motivated to improve the mentoring program for their peers. Other CRTs at Hickory are the Wound Warriors, Germ Busters, and the Implementation Team, which includes the department managers who oversee the activities of all the teams.

To get more staff involved in the process, the home held a very successful CRT fair. Each CRT designed a booth, which included posters, displays, and give-aways. Many of the CRT members also dressed up in costumes. Each staff member was given a card when they entered the fair, and they received a sticker at each booth they visited. After completing the card, they were given a polo shirt.

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Shellie reported that the fair was well-attended and a lot of fun for all. To keep up the momentum, town meetings, including contests and games, are held each quarter to keep all staff up-to-date on what each CRT is working on.

Shellie states that the CRTs and the Wellspring philosophy have definitely played a role in employee satisfaction and retention at the home; staff members stay because they feel empowered to make changes that directly affect their residents, and because they “get their voices heard.”

For more information on Wellspring, visit [www.wellspringis.org](http://www.wellspringis.org).

Jill Nothstine is a nurse consultant for Lutheran Services for the Aging and can be reached at <[JNothstine@lsanc.net](mailto:JNothstine@lsanc.net)>.

## Reaping the Rewards of Low CNA Turnover Rates

By Anna Marquez Cook

In an industry where many skilled nursing facilities are struggling to recruit and retain CNAs, there is one nursing home in North Carolina that has achieved positive results with its staff retention program.

Alarmingly, the average turnover rate for certified nursing assistants (CNAs) in North Carolina is 111 percent. Low wages, unrealistic workloads, political issues, and management philosophies are just some of the factors contributing to job dissatisfaction

among CNAs. According to the General Accounting Office’s “Nursing Workforce: Recruitment and Retention of Nurses and Nurse Aides is a Growing Concern,” by W.J. Scalon, while the need for long-term care services is expected to increase dramatically as baby boomers age, the supply of workers traditionally relied upon to fill these direct care positions—women ages 25 to 54—is expected to remain relatively unchanged until 2030.

Today, many nursing homes are making it a priority to invest in staff retention programs. At Sardis Oaks, a 124-bed skilled nursing facility in Charlotte, NC, the CNA turnover rate is exceptionally low at only 9 percent, with the average length of service for CNAs at 6 years. Sardis’s strategies for success include improvements in hiring practices, establishing an employee value system, promoting leadership training sessions, promoting consistent staffing, and incorporating employee mentoring programs. Basically, every member of Sardis’ staff—regardless of title—is committed to making the facility a great working environment. Two long-time staff members, Janet Farrar and Valerie Burton, will mark their 32nd and 17th years as CNAs respectively, while a former employee had recently re-applied to Sardis, deeming the facility as “the best place to work..”

“A former employee wants to return to work here, in the same unit during the same

shift that she used to have,” said Heidi Goss, BSN, RN, director of nursing at Sardis Oaks. “She said she loves the residents and staff at the facility. From my standpoint, I like the reward of seeing one of our CNAs go off to school, become a nurse, and want to return to work here. It’s very gratifying.”

Burton, who began working at Sardis from the first day the facility opened in 1990, never thought she would work at one place for so long. “We started with only one patient here, and I saw the facility grow,” she said. “We’ve become very close-knit, and I enjoy working with the residents.”

Farrar, who has been a CNA since 1977, is the longest long-term care CNA within the elder care community of Carolinas Medical Center. Farrar joined Sardis Oaks in 2001. “I’ve developed a deep relationship with my residents, and I look forward to seeing them every day,” she said. “I eat lunch with my residents, because I really enjoy that time with them. They’ve become a part of me.”

## In the Beginning

Sardis, a long-term care facility and rehabilitation nursing home, set a course to improve its staff retention program in 2002. Before that time, 30 vacancies at the facility were regularly being filled by outside agencies. The high turnover rate had led to a host of systemic problems over the years, including inconsistent

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staffing, concerns on customer satisfaction surveys, flagged quality indicator reports, and unmotivated staff.

“We knew it was going to be a long process—a process that would not happen overnight,” said Renee Rizzuti, MHA, administrator at Sardis Oaks. “When I came to work here five years ago, we immediately saw an opportunity to take action. We implemented action-planned items with the different departments and support services and, as a team, we aligned our goals toward performance appraisals. We also implemented an open-door policy for input and encouraged a proactive leadership and staff. It was our priority to ensure that Sardis Oaks had a great working environment.”

To further improve the quality of care in its nursing home, Sardis also participated in two initiatives by The Carolinas Center for Medical Excellence (CCME). During the first initiative, a national pilot project called the Person Centered Care Collaborative, sponsored by The Centers for Medicare & Medicaid Services (CMS), Sardis was one of eight North Carolina nursing homes that tested interventions to assist nursing homes in beginning the process of culture change. Completed in July 2005, the Collaborative addressed three critical areas that recognize the residents’ needs, interests, and choices: workplace practices, care practices, and environment of care.

“The best pilot study that I’ve participated in during my 11 years in this line of work has been CCME’s Person Centered Care Collaborative,” Rizzuti said. “There were so many helpful tools that we took back to our monthly employee forum. We had a lot of fun and really learned about each other.”

Sardis was also one of 53 nursing homes that participated as a partner with CCME in a second initiative by CMS, entitled the Nursing Home Quality Improvement (NHQI) Collaborative. Modeled after the Institute for Healthcare Improvement’s Breakthrough Series, which is designed to promote a series of rapid changes that produce significant or “breakthrough” results, NHQI focused on reducing pressure ulcers, restraint use, and depression among nursing home residents. During the 18-month NHQI Collaborative, CCME helped facilities, like Sardis, address resident and staff satisfaction and staff turnover.

### **Sardis: How to Achieve Low Turnover**

In the five years it has been working to improve the turnover rate at the facility, the staff members at Sardis have learned a lot, and they have many recommendations for other nursing homes struggling with staff retention.

Rizzuti’s advice is to promote accountability and commitment among staff. “Commitment is not something you can train people to do, nec-

essarily, but the key is to attract employees who have that innate response to another human being,” she said. “Otherwise, we have to teach them that improvements start with ‘me.’”

In addition, Rizzuti recommended publicly recognizing and rewarding employees who are high performers, promoting education, ensuring that leadership is accessible and visible, and encouraging an open-door policy. Rose Balch, RN, ASN, nurse manager of the day shift, said that since she had started working at the nursing home two years ago, she has felt supported and valued as an employee. “They’re very conscientious of their staff here,” she said. “If I have a problem or a situation, Heidi or Renee will jump in and help out. We’re always trying to find out where problems exist among employees, so we can correct them before they erupt like volcanoes. It makes me feel good to work here.”

Goss’s advice to other nursing homes is to promote consistent staffing among CNAs and residents as much as possible. “The CNAs really take ownership of their residents,” she said. “They get to know them, because they care for them day in and day out. That provides a lot of job satisfaction for them.” Goss also recommends implementing a solid orientation program for new employees, ensuring that staff has good working equipment, and encouraging “staff time” for feedback by employees to administration.

Goss also encourages ongoing  
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(continued from page 4) programs that are focused on promoting “fun” in the workplace, which include quarterly potluck luncheons for staff in each “neighborhood unit” and monthly recognition days to celebrate birthdays and employment anniversaries. There are also opportunities during these get-togethers to nominate co-workers for Values in Action certificates. During employee forums, staff may receive recognition on one or all of the four values: teamwork, integrity, caring, and commitment.

Tiffany Elliott, CNA, has worked at Sardis for more than five years and was nominated by her peers for the 2007 Fabulous 50 Awards Program. The program, established by the North Carolina Health Care Facilities Association (NCHCFA), recognizes nurse aides across the state for excellence in care. Elliott received the nomination for District II, which is composed of nine counties.

“We’re like family here at Sardis,” said Elliott. “We work well together and do a lot of things together outside of the office. It’s really a great place to work.”

Despite how well the staff retention program is working, Rizzuti said there is always room for improvement at Sardis. The staff is proud of the low turnover rate they’ve achieved, but “we are not putting the number on a pedestal,” she said.

“What matters at the end of the day is working together as a team and caring for 124 patients, 124 families, and 140 co-workers,” Rizzuti said. “We focus on the accomplishments of each day and the positive stories that are shared. That’s part of who we really are at Sardis Oaks.”

Anna Marquez Cook is a senior associate for corporate information with CCME. For more information about Sardis Oaks, please contact Renee Rizzuti at 704-365-4202. For more information about CCME’s Nursing Home Quality Improvement Program, contact Debra Markley at 800-682-2650, ext. 2505.

## **Key Values and Principles of A Person-Centered System for The Department of Health and Human Services**

*These guiding principles apply to the system serving all people who need long term services and supports and their families. A person-centered system acknowledges the role of families or guardians in planning for adults who need assistance in making informed choices.*

To be person-centered means:

Treating individuals and family members with dignity and respect

Helping individuals and families become empowered to set and reach their personal goals

Recognizing the right of individuals to make informed choices, and take responsibility for those choices and related risks

Building on the strengths, gifts, talents, skills, and contributions of the individual and those who know and care about the individual

Fostering community connections in which individuals can develop relationships, learn, work/produce income, actively participate in community life and achieve their full potential

Promising to listen and to act on what the individual communicates

Pledging to be honest when trying to balance what is important to and important for the person

Seeking to understand individuals in the context of their age, gender, culture, ethnicity, belief system, social and income status, education, family, and any other factors that make them unique

Acknowledging and valuing families and supporting their efforts to assist family members

Recognizing and supporting mutually respectful partnerships among individuals, their families, communities, providers and professionals

Advocating for laws, rules and procedures for providing services, treatment, and supports that meet an individual’s needs and honor personal goals

Endorsing responsible use of public resources to assure that qualified individuals are served fairly and according to need

Adopted by the Long Term Services and Supports Cabinet January 10, 2008

**THE NORTH CAROLINA COALITION FOR  
LONG-TERM CARE ENHANCEMENT**

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To contact the Coalition, please email us at [alice@lctenhance.com](mailto:alice@lctenhance.com).



*Enhancing the lives of residents and staff in  
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The North Carolina Coalition for  
Long-Term Care Enhancement  
2711 Mail Service Center  
Raleigh, North Carolina  
27699-2711

**SPECIAL ANNOUNCEMENT**

This fall the North Carolina Coalition for Long-Term Care Enhancement will sponsor our second educational conference on culture change. Sessions will include information on various change models as well as special guest Jack York from Its Never 2 Late.

We'll hear from people around the state who've successfully incorporated culture change within their environments and can provide practical advice on how anyone can change the atmosphere within their settings. The cost will be \$35, which will include lunch and CEU's for administrators and nursing staff. The event will be held at Croasdaile Village in Durham on September 25, 2008. Also included in the event will be a tour of Croasdaile's sensory room. Facilities are encouraged to send staff from the various disciplines within their organizations who are the major stakeholders with respect to any successful enhancement process. Watch for more information later this summer, but set this date aside right now so you can attend this important and informative conference. We hope to see you there!



State of North Carolina  
Department of Health and Human  
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[www.dhhs.state.nc.us](http://www.dhhs.state.nc.us)