# **Covid-19 Action Network**

### Week 6 QI Content

Revised by R. Scoville 12-14-15

AHRQ ECHO National Nursing Home COVID-19 Action Network





Agency for Healthcare Research and Quality



# Performance Improvement Project?

- Problem/Opportunity Identified:
- Cause of problem is obvious
  - Staff suggest obvious solution
  - "Just Do It"
- Cause of problem is not obvious (PIP?)
  - Ask 'why' five times
  - What would success look like? How would you know?
  - What could you try?
  - Try it once, with one staff, in one area. Adjust and try again.
  - When it works reliably, Do It!





## Simple 5-Step PIP

- 1. Get curious about the nature of the problem
  - Observe: walk rounds, conversations
  - Talk to staff (huddles!)
  - Map/diagram/brainstorm
  - Measure it
- 2. Set a goal for what you want to achieve
- 3. Decide what you want to try
- 4. Start by testing/trying it on a small scale...1 day, 1 resident
- 5. Measure your impact in ways that make sense



## PIP: A focus on isolation?

- 1. Opportunity: Isolation is impacting residents and families. Staff are anxious & unsure how to manage visits.
- 2. What is a reasonable goal for our facility?
  - All residents have at least 1 meaningful virtual or window visit with family per week by December 21
  - > All staff report they feel 'heard and supported' at work by Christmas
- 3. What can we try?
  - > Provide for easy virtual visits: (tablet, zoom account, instructions for families & residents)
  - Staff huddles for visit plans
  - ➢ Ideas from 'psychological PPE'

4. Pick something to try

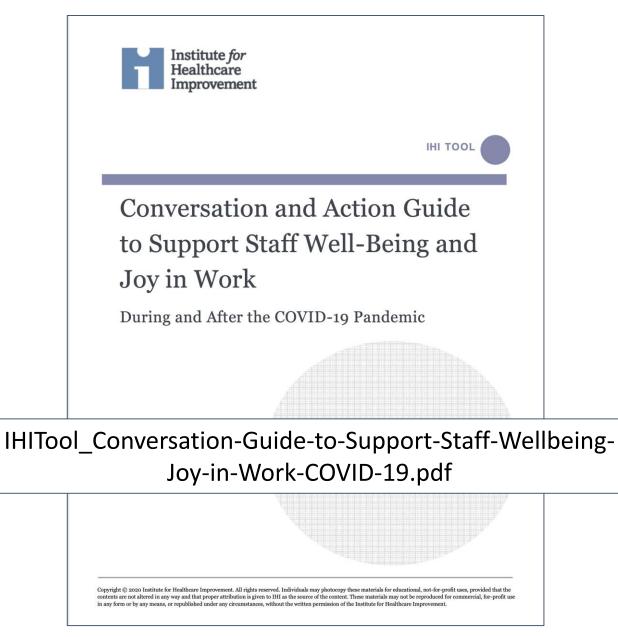
Develop and test a discussion prompt guide for staff to use with residents during virtual visits

5. How will you know it's working?

➤# of residents engaged in a virtual/window visit at least once/week

Staff absentee rates

# Resources



### Actionable Ideas to Test

This guide helps leaders get started quickly with conducting effective conversations, learning as they go, and resolving issues that arise from such conversations. The tables that follow include actionable ideas that leaders can quickly test during the COVID-19 pandemic and should support sustained actions in alignment with a joy in work strategy after this pandemic subsides.

#### Physical and Psychological Safety

Hear Me: Listen and act on lived experience to understand and address concerns to the extent organizations and leaders are able

Do	Don't	Steps to Try	Sustain Joy in Work
Conduct frequent, brief well-being huddles (at the beginning and end of work shifts) to learn about current pressing issues Listen, do not interrupt Learn what is going well, not just problems Acknowledge the complex emotions of delivering care in the face of uncertainty	Assume you know since concerns may vary by individual Ignore the strengths and bright spots Underestimate the learning required (and time it takes) to care for patients with COVID-19 in addition to other patients	<ul> <li>Ask: "What concerns do you have for patients, yourself, or the team?"</li> <li>Ensure you understand by confirming: "Here's what I hear you saying — do I have that right?"</li> <li>Ask: "What do we still need to learn?"</li> <li>Ask: "What can we do together that would help right now?"</li> </ul>	Continue well-being huddles to learn about current pressing issues for staff and focus on what matters most to care teams Try different small tests to identify the huddle time, agenda, and facilitation structure that works for each group
Recognize that frustration and anger are part of the upheaval, not a personal attack	Promise to fix an issue when you may not be able Make decisions that affect staff without their contribution	<ul> <li>Ask: "Are there steps we can take right now, as a team?"</li> <li>Ask: "How can we do this together?"</li> <li>Ask: "What can we stop doing? What makes no sense to continue?"</li> </ul>	Empathize with staff when they encounter change and invite them to co-design it Partner with staff in decisions that affect them
Recognize that individuals respond differently to stress, and fear may be expressed as concerns (e.g., with regard to PPE: "not enough, wrong sort, too flimsy")	Judge or deny	<ul> <li>Acknowledge and support: "No one has ever gone through what we're dealing with now. Together as a team we will take steps that make sense for us and we'll learn from others."</li> <li>Listen to the concerns and the emotion — "It sounds like you are very worried right now" — then address the facts</li> </ul>	Create a peer support and coaching network
Promote psychological safety	Be threatened by staff speaking up	<ul> <li>Affirm: "Never worry alone — if you have a question, so do others."</li> <li>Ask: "What are you most worried about right now?"</li> </ul>	Develop conversation skills that create a psychologically safe space for team members to share what matters and what's getting in the way of more good days
Invite staff to share positive stories with one another	Assume people have a way to process their unique experiences	Ask: "What good thing happened today?"	Conduct both one-on-one and team conversations about "What Matters to You"

### Session 6: COVID-19 Testing for Nursing Homes

#### Key Takeaways:

- Know the purpose for and differences among types of COVID-19 tests in nursing homes (e.g., antigen/molecular/viral tests vs antibody/serologic tests); diagnostic vs serial tests, testing in response to an outbreak, etc.
   <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html?CDC\_AA\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Fclinical-critteria.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html?CDC\_AA\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Fclinical-critteria.html</a> (see sections on nursing home workers and residents).
- Ensure that the center has written policies and procedures for how to obtain current CDC, CMS and state department of public health/local boards of health recommendations on testing, including immediate response to an outbreak.

Being visible on the units during the pandemic promotes teams' accountability to identify and manage risks, understand testing that may help to limit COVID-19 spread. The following question set can be used to facilitate discussions and reveal opportunities across and within key members of interprofessional teams, residents and visitors. Please consider using/adapting them in your next huddles or team meetings.

Questions	hu	Contont
Questions	D y	Content

Questions by Content			
Integrate testing protocols into overall infection prevention and	Who is responsible for implementing testing protocols for residents and staff (e.g., infection preventionist or appropriately trained designee)? How frequently is the plan reviewed and		
management plan	updated?		
	If the IP is not available, who else has access to the testing protocols (e.g., on off shifts or		
	weekends)?		
	Is there an external consultant - local or national infectious disease expert - who is available (part		
	of the center's network or contracted) to respond to questions about COVID-19 testing in the		
	center?		
Reporting Test Results	Who is the person accountable for appropriately reporting test results (sharing with all relevant		
	center staff, reporting positive COVID-19 cases to the state department of public health/local		
	boards of health)?		
Follow-Up Plan (monitoring over	Is there a COVID-19 Team or Task Force that reviews test results, actions taken, documentation		
time)	on a regular basis? Are updates/changes to processes and systems made in a timely manner?		
Improvement Concepts	Are residents and care partners/family members asked about receiving regular communication on		
	testing and test results? Do they have any recommendations for improvement?		
	Are there daily huddles or stand-up meetings specific to COVID-19, including testing protocols?		
<b>Critical Questions for Leadership</b>			
	Is there evidence that the IP or appropriately trained designee is following center protocols for		
	routine and diagnostic testing?		
	Do all relevant staff state that they have a basic understanding of testing protocols and procedures		
Key Concepts by Stakeholder Gro	up		
What do Medical Directors Need to	Medical directors must have current knowledge related to CDC, CMS and state department of		
know and discuss with the team?	public health recommendations for COVID-19 testing in nursing homes, including diagnostic,		
	serial (routine based on county positivity rates) and testing related to an outbreak.		
	Medical directors must meet or speak regularly with DON, Administrator and the center's		
	COVID-19 Team or Task Force.		
What do DONs and nursing	DONs must have contact information for individuals at the state department of public health who		
supervisors need to know?	can answer questions about COVID-19 testing in nursing homes in that state.		
	DONs must have a system for assessing and monitoring staff knowledge and skills related to		
	identifying anyone at increased risk for COVID-19, anyone with COVID-19 symptoms, and		
	immediate actions to take (including testing, possible resident re-location, and need for staff to		
	leave the center until test results are back).		
What does the interprofessional	Staff must know how to recognize potential signs/symptoms of COVID-19 and how to report and		
team need to know?	document (to whom and how soon).		
	Teams must demonstrate open, frequent, supportive communication across and within department		
	and between point-of-care (direct care) workers and leadership/administration.		
	Team members (all departments) must be able to articulate and describe immediate actions to take		
	if a new or suspected new case of COVID-19 is identified. Team members must consistently and		
	reliably demonstrate that they document and report any concerns that might require COVID-19		
	testing to their supervisor or leadership.		

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### Session 6\_Take-Aways.pdf

### Leave in Action

Think about your conversations, discoveries and observations over the past few weeks and months and identify one opportunity that you might want to focus on through a PIP versus a 'just do it' approach.

Connect with 2 other staff members to ask their opinion on what success could look like, and you might be able to try to impact this issue.

Share your ideas with the group next week.



