Communication Map for Engaging Staff in Individualizing Care

Consistent Assignment

Huddles for Regular within Shift Communication Among Staff

Huddles for Communication Between and Across Shifts

QI and Care Planning with Staff Closest to the Resident

OUTCOMES

- Clinical – prevent avoidable decline; maximize opportunities for improvement; provide a good welcome and smooth transition
- Satisfaction – honor customary routines and promote quality of life
- Human Resource – build teamwork and trust; close communication gaps; value and engage staff closest to the resident

Developed by Amy Elliot, PhD, Sonya Barsness, MSG and Barbara Frank. Based on B&F Consulting’s method for Engaging Staff in Individualizing Care, incubated in Pioneer Network’s National Learning Collaborative on Using the MDS as the Engine for High Quality Individualized Care. Funded by The Retirement Research Foundation.
Without Consistent Assignment and Huddles
Lack of Communication of Crucial Resident Information

Within Shift

CNA
CNA
CNA
Resident
Nurse
Nurse
Nurse

Resident care and communication not consistent or stable. Crucial information isn’t noticed or acted on.

Across Shifts

Day CNA
Evening CNA
Night CNA
Day Nurse
Evening Nurse
Night Nurse

Nurses interact with the resident but do not communicate in a systematic way with care staff. Communication on resident care and observations is left to chance. Early indications of acute conditions fall through the cracks.

Conference Room

DON
Dept. Heads
NHA
Other Staff

Management teams have daily meetings, such as the 24 hour report, on unusual occurrences/adverse events but those closest to the staff are not involved. Other meetings, such as QI and care plan meetings, may also occur but without direct, firsthand information from CNAs. Team is constantly putting out fires but unable to prevent adverse events.

Issues

• Communication gaps lead to delays in addressing emerging issues until they becomes acute situations.
• Staff and management are reacting to problems after they have occurred instead of catching them early.
• Proposed interventions are not consistently used and often not in keeping with true root cause or individualized needs.

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