



## Care Practice/Workplace Practice/Environment

# Change Ideas for Consistent Assignment

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### Typical issues and evidence of discordance:

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When employees are not given a consistent assignment, they do not build relationships with their co-workers or with residents. Rotating staff means that each time there is a rotation or change in assignment, the staff person has to take the time to figure out what the needs are of each new resident they are caring for and how to work with their co-workers for the day. This constant changing is hard for both residents and staff. Most of the care being done is very intimate personal care, and residents find it hard to have strangers caring for their intimate needs and to explain their needs time after time to new caregivers. When staff are unfamiliar with one another, it is harder for them to have good teamwork together.

### Barriers:

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Many times, frequent changes in shift and assignment are the result of short staffing. When there is not enough staff, the organization responds by plugging holes in the schedule with an available CNA. In other situations, the policy of the nursing home is not to let people get attached to one another in the mistaken belief that if a close relationship develops and the resident dies, the staff member will be inconsolable. Certain nursing homes don't think friends should work together. Still others prefer that everyone is trained on every unit and available everywhere. Others do not want staff to be "stuck" with "hard-to-care-for" residents. Ironically, inconsistent assignment exacerbates instability in staffing and conversely, consistent assignment fosters stability. Call-outs and turnover are reduced when meaningful relationships develop in which workers know they are being counted on and respond by making sure that the needed care is given.

### Goal:

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- To strengthen and honor care-giving relationships
- To stabilize staffing and establish strong relationships between residents and staff and among co-workers to provide continuity, consistency and familiarity in care giving.

### Infrastructure helpful to support the change:

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Consistent staffing is stable staffing. Its implementation is hardest to achieve in homes that have high turnover and frequent call-outs. By instituting consistent assignment, homes will stabilize their staff because staff are more comfortable caring for the same people every day—they get to know their routines and form genuine bonds with them that enhance their working conditions.

To attain a consistent assignment, the nursing home needs to build stabilizing influences into their workforce. Instead of using "agency" or "pool" assistance when there are call-outs, the home can institute an in-house pool of people who agree to work in certain areas. The in-house pool is familiar with the residents. Monetary incentives are recommended to favor stable assignments instead of providing bonuses for per diem



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schedules or last-minute work assignments. Supervisors need to create a team approach to the workforce. Management needs to provide employee assistance and flexibility when staff encounters family or financial problems that interfere with work attendance. These include employee loan programs and links with social support programs.

### Measurement possibilities:

- Number of shifts per week with unscheduled absences
- Number of shifts staffed below the scheduled staffing level
- Staff turnover
- Staff workload
- Resident and staff relationships

### PDSA Cycles:

**PLAN:** Engage a team of staff, residents and family to create an in-house “pool” to assist with any call-outs.

**DO:** Provide monetary incentive

**STUDY:** Keep a log of facility call-outs for a set amount of time. Determine what is working and what is not working.

**ACT:** Continue using the in-house “pool” and take additional steps to provide incentive.

### Questions to consider:

- How does familiarity and routine help increase comfort and competence?
- How important are relationships to residents? To caregivers? To co-workers? To quality care?
- How does teamwork help improve care?
- Would you like different people toileting and bathing you each day?
- Would you like having a different team each day?
- What do residents experience when they have frequent changes in their caregivers?
- What do staff experience when their assignment is routinely changed? How does that affect their relationship to their work?

### Change Ideas:

- Make a mutual commitment to consistent assignment – for staff that commit to a certain set schedule, commit back that they can count on that schedule.
- Find out from staff what their preferred schedule and assignments would be.
- Create teams that regularly work together.
- Ask teams to work with each other to provide back-ups and substitutes for when they need to change their schedule or call in on a scheduled shift.



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- Find out who on staff enjoys floating or prefers various assignments rather than destabilizing the whole staff by making everyone float.
- Have inter-shift communications among all staff from each work area, in which personal information about how each resident did for the day is shared to ensure a smooth hand-off.
- Figure out when the busiest times are in accordance with the residents' patterns and adjust schedules to have the help that's needed during those times.
- Have regular housekeeping and food-service staff working with each care area.
- When new staff is brought on, assign them to one work area so that they are familiar with a group of residents and co-workers well and acclimate to the work with them. Have the entire workgroup help, welcome and mentor their new co-worker.

### Associated principles:

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- Relationships are the cornerstone of culture change.
- Residents who are cared for by the same staff members come to see the people who care for them as “family.”
- Staff that care for the same residents form a relationship and get great satisfaction from their work.
- When staff care for the same people daily, they become familiar with their needs and desires in an entirely different way—and their work is easier because they are not spending extra time getting to know what the resident wants—they know from their own experience with the resident.
- When staff and residents know one another well, their relationships make it possible for care and services to be directed by the resident's routines, preferences and needs.
- Relationships form over time – we do not form relationships with people we infrequently see. To encourage and support relationships, consistent assignment of both primary staff and ancillary staff is recommended.
- When staff routinely work together, they can problem-solve and find creative ways to re-organize daily living in their care area.
- Consistent assignment forms the building block for neighborhood-based living.

### Resources:

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1. Centers for Medicare & Medicaid Services (CMS). 5.0. What a difference management makes! Nursing staff turnover variation within a single labor market [Online]. From: Appropriateness of Minimum Nurse Staffing Ratios in Nursing Homes. Phase II Final Report, Dec 2001. Available: <http://www.cms.hhs.gov/medicaid/reports/rp1201-5.pdf>, 15 Sep 2004.



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2. Weech-Maldonado R, Meret-Hanke L, Neff MC, Mor V. Nurse staffing patterns and quality of care in nursing homes. *Health Care Manage Rev.* 2004 Apr-Jun; 29 (2): 107-16.
3. “*What a difference management makes!*” by Susan Eaton, Chapter 5, Appropriateness of Minimum Nurse Staffing Ratios in Nursing Homes (Phase II Final Report, December 2001). U.S. Department of Health and Human Services Report to Congress.
4. “PEAK: Pioneering Change to Promote Excellent Alternatives in Kansas Nursing Homes” by Lyn Norris-Baker, Gayle Doll, Linda Gray, Joan Kahl, and other members of the PEAK Education Initiative. <http://www.ksu.edu/peak/booklet.htm>