

### ▲ Could I adopt this **CHANGE** at my facility?

#### ▲ Are you a **facility leader inspired by the changes at Westview Care Community?**

The information that follows can serve as a resource about some of the ways you might be able to foster change in your facility to assist in optimizing resident, family, and staff experience.

Ensuring a change can be adopted and sustained in any long-term care facility requires certain conditions to be in place. Although these conditions cannot be summarized as a defined ‘recipe’, there are some important considerations that could support the creation of these conditions. In this document, we’ve included some of the things Westview Care Community did in their change journey to enable their success.

Where possible, we identify which of those things align with key principles to make improvement highly adoptable in practice, based on the HQCA’s interpretations of Dr. Chris Hayes’ work available at [www.highlyadoptableqi.com](http://www.highlyadoptableqi.com). We also highlight how some key components of the IHI’s *Framework for Improving Joy in Work*<sup>1</sup> were applied through this change process.

#### **Change initiatives are aligned with the organization’s and/or team’s values and goals**

As the mission statement of Westview Care Community suggests, its values are oriented towards providing a home-like environment with person-centred care. By listening to what matters to residents and staff with respect to living their values, the leadership at Westview could prioritize proposed solutions. This prioritization was done by aligning solutions with their core values, giving everyone responsibility for providing person-centred care in a way that works for all staff.

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**Change initiatives that are aligned with the organizations’ goals, values, and objectives, and that are planned and communicated ahead of time with staff and residents, avoids project/priority conflicts. This is likely to increase buy-in and support, and help sustain adoption.**

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Getting to this point was achieved by:

- building a standing agenda item into their regular staff meetings about living their values and creating space for identifying problems and solutions;
- delivering on a hiring process for new staff that reinforced the vision and values of the organization;
- providing an opportunity for leadership by, and mentorship with, experienced staff; and,
- creating opportunities for relationships to be fostered and a psychologically safe environment for sharing problems and working through solutions.

By aligning an organization’s cultural values and providing staff the time and space required to test and implement solutions, it is not uncommon for multiple problems to be solved in parallel. This alignment with the organizational goals, in combination with effective staff engagement in the process, results in no, or few, competing priorities or projects.

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<sup>1</sup> Perlo J, Balik B, Swensen S, Kabcenell A, Landsman J, Feeley D. IHI Framework for Improving Joy in Work. IHI White Paper. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017. (Available at [ihi.org](http://ihi.org))

### Staff members are **involved** in the change and removing pebbles from shoes

Empowering all employees to identify problems and design solutions was important to Westview's success. Facility leadership fostered this by encouraging all staff to think of ways to act out their mission and vision in their everyday work. Listening to the things that are important to staff, and making joy in work a shared responsibility, pave the way for success.

Staff played a continuous role in Westview's initiative including designing, piloting, revising the intervention, and implementing the changes. Their feedback was continuously sought and addressed.

At Westview, staff meetings and weekly huddles were designed to hear from everyone. When testing the idea of the buffet, the huddles were used to support planning the change. Here, dietary staff identified they could bring personal appliances, such as crockpots and thermoses. Later, huddles were used to adapt a change when unintended consequences were experienced. Of note were the job security concerns of staff supporting breakfast service. The team was empowered to identify new value-add responsibilities for the staff, such as helping health care aides with their (HCA) morning routines.

### **Required resources (training, equipment, time, personnel) are known and made available**

Prioritizing improvement efforts that align with organizational values and vision are a useful way to ensure projects do not compete for resources. It is often unpredictable what kinds of resources will be required to fully implement a change in the way care is provided. Using improvement science tools, like plan-do-study-act (PDSA) templates, can help determine resource requirements.

In Westview's case, the way they designed and prototyped the idea of the 'come-and-go breakfast buffet' set them up for success. Identifying small steps that simulate what it might be like to implement an idea was an important starting point, and included:

- having staff bring appliances from home;
- setting up temporary food stations;
- understanding the morning preferences of residents; and,
- receiving staff and resident feedback about the impact of the changes on various staff roles and responsibilities.

Through testing the idea, implications of the change became apparent. Further, the confidence in the team (and leadership) increased that the change would result in an improvement. A plan was made to provide the resources to implement the change, and was communicated with all staff.

### **Consider workload (cognitive, physical, time) associated with the change initiative**

In healthcare improvement, there is a common saying that 'those who do the work, change the work'. Westview leadership believe that changes must lead to an increased sense of purpose, enhanced joy in work, and speak to a concept around 'happy staff, happy residents'. Generally, this requires approaches that support ongoing staff engagement, identifying problems, testing and adapting the change ideas toward a solution that meets the needs of all staff involved.

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**Active participation of staff** in all aspects of the change – from design and testing through implementation – increases their support and buy-in, and often results in a solution that reduces workload. These factors lead to an increased likelihood of **successful adoption**.

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**Providing the necessary supports and resources** to aid understanding and implementation of the change initiative **increases the ability** for end-users to adapt the changes into their existing workflow.

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### Consider workload – continued

The assertion that ‘no one is going to lose their jobs’ created a significant opportunity for the facility to optimize the workload and roles of staff during this project.

At the outset of the breakfast buffet idea, the HCA to resident ratio was 9:1. To manage this workload, Westview had bathing teams (composed of HCAs) as well as unit aides to provide support for the HCAs. Once resident preferences were identified, the morning schedule became much more efficient and effective for person-centred care. Using a creative approach, the bath team was dismantled and moved to the floor to provide more assistance with other resident care. Further, when a vacancy opened for a casual recreation aide, that role was taken on by HCAs with the additional hours that were given to them, providing more recreation therapy assistance.

All of this creative shuffling ultimately resulted in:

- improving the ratio of residents to HCAs to 6:1 – creating space for more whole-person care including completing their own baths and having **more time for personal interactions**.
- residents no longer needed to be pushed quickly through the shower/bath list by unfamiliar staff members, but are bathed **according to preferences**, by staff members known well to them
- the HCAs have the **added time to interact** on a social level with the residents and follow the model of ‘caring for the whole person’ instead of leaving that primarily to the recreation team, as was done in the past.
- allowed the unit aides, together with volunteers, to remain in the Garden Breakfast Room to assist the residents as they arrive from 7:30 a.m. to 10:30 a.m., and in turn allows HCAs to continue to get the residents up in the morning **at their preferred time**.
- the dietary staff found that with this arrangement they also **have more time to assist** the residents, which they say adds value to their job experience and satisfaction.

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Change initiatives that have **less workload** or make the current **workflow easier** to perform are more likely to be **sustainably adopted and reliably performed**.

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### Keep it simple

The change initiative at Westview was comprised of relatively few steps and processes that could be tested and performed reliably under most circumstances. Each staff member on the project team had a role to play in preparing and testing the changes. Having as many staff as necessary involved for one cycle of the improvement idea to be performed, and realizing the intended benefits or lessons, is important. Engaging staff in planning and studying the test, while ensuring resources and time were freed up to adapt as necessary supported the collective learning of the facility. With everyone involved, what could have been a complex change, was simplified by the enabling conditions created by leadership.

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Change initiatives that are **simple in design and application** are more likely to be sustainably adopted and reliably performed.

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### Evidence and belief that the intervention will lead to the intended outcome

The belief that the change idea will lead to improvement, will be supported and resourced by leadership, is in alignment with organizational vision and values, and ultimately increases a sense of purpose or joy in work, is essential for improvements to be obtained and sustained.

In the Westview example, creating the conditions for change within the facility culture, and the outcomes experienced by staff and residents, is demonstrable evidence that a staggered, or come-and-go, breakfast concept was viable. In addition, it demonstrated that delivering person-centred care and possibly unleashing further improvements within Westview Care community was not impossible, but a reality.

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Perceptions of the **quality and validity of the evidence**, supporting the belief that the intervention will achieve the desired outcome, are more likely to be adopted and produce **less change fatigue and cynicism**.

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### Taking steps toward testing change ideas

Where this work might inspire others, there are opportunities to replicate or adapt the experience into other facility contexts. In the presence of these enabling conditions, it is possible for other facility administrators, directors of care or HCAs to use the experience of Westview to do something similar within, or across other long-term care facilities.

Would your team like to make a change important to them or the residents in your facility, but don't know where to start? Many quality improvement tools will help you to start by using small iterative tests of change with staff, or residents, in a similar way to that described in the previous section. A common approach in healthcare is the Plan-Do-Study-Act cycle (PDSA). The following resource list is an example of how a tool, like a PDSA template, can be used to engage staff and discuss how you might go about designing and testing a change in your facility. For corporate memory, it's encouraged that each change project, and each test of change be documented. It may seem like heavy lifting at the beginning, and it won't always come naturally. With practice, however, it will become a much more effective and efficient way of continuously improving in alignment with your facility or organizational goals and values.

## Resources

There are a number of resources in Alberta available to continuing care providers via the Continuing Care Desktop that may be helpful to quality improvement.

<https://improvement.nhs.uk/documents/2142/plan-do-study-act.pdf>

<http://www.ihf.org/resources/Pages/Tools/PlanDoStudyActWorksheet.aspx>

### Video:

<http://www.ihf.org/education/IHIOpenSchool/resources/Pages/AudioandVideo/Whiteboard5.aspx>

<http://www.health.state.mn.us/divs/opi/qi/toolbox/pdsa.html>

### References:

Hayes, C. Highly adoptable improvement [Internet]. 2015 [cited 2018 July 19]. Available from <http://www.highlyadoptableqi.com>

Perlo J, Balik B, Swensen S, Kabacennell A, Landsman J, Feeley D. IHI Framework for Improving Joy in Work. IHI White Paper. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017. (Available at [ihf.org](http://www.ihf.org))