DESIGN INstitute for HEALTH

Nursing Home System Study

Design & Development (Phase 3)

December 8, 2020

Deliverable 06
Agreement No. MA 4700 20052800052

Agenda

1. Objective
2. Track Approach
3. Design Direction Strategy
4. Prototype Development To-Date
5. Next Steps
6. Discussion

Study Objective

The Design Institute for Health will build on the immediate emergency COVID-19 response efforts of the City of Austin by analyzing, evaluating, and identifying approaches for broader-scale system improvements to protect residents and reduce the risks of the spread of COVID-19 in nursing homes, Assisted Living centers, and other long-term care facilities.

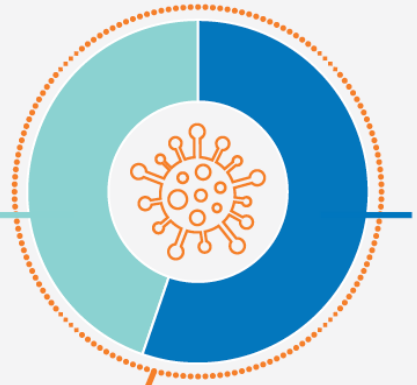
Phases 3-5 Objective

The objective of Phases 3-5 is to design, develop, implement, and evaluate potential solutions and responses to the needs, challenges, and opportunities identified in previous phases by leveraging a series of collaborative and generative co-design sessions with key stakeholders (e.g. facility administrators, facility staff, City of Austin, Austin Public Health, Health and Human Services, etc.)

Local and State Impact of COVID-19

Travis County Long-Term Care Staff and Residents

Positive COVID-19 Cases



850
STAFF
tested positive

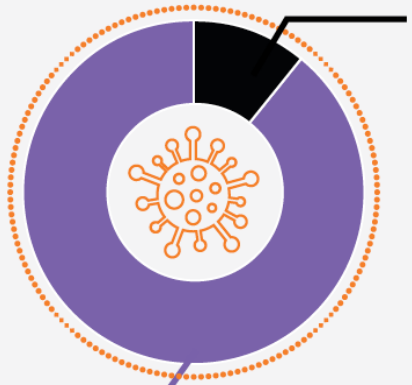
1053
RESIDENTS
tested positive

1903
TOTAL
Positive COVID-19 Cases

6.4%
POSITIVITY RATE
Staff and Residents

Travis County Long-Term Care Staff and Residents

COVID-19 Deaths



207
DEATHS
from COVID-19

↓

12.2%
death rate

1696
RECOVERED
Staff and Residents

Data is cumulative. Based on data as of 12/01/20. For current data, see (source).

Track Approach

TRACK #1: LONG-TERM CARE FACILITIES

Objective

Co-design, prototype, and pilot Now-term Strategic Opportunities with select, yet representative Long-Term Care facilities in greater Travis County / Central Texas in order to assess the potential to scale various implementations and/or identify necessary iterations and improvements

Target Partner

Long-Term Care Facilities

TRACK #2: REGIONAL COLLABORATION

Objective

Engage and collaborate with key local organizations and entities who have the potential to impact Near Term Strategic Opportunities primarily through the connection and coordination of local resources, initiatives, etc.

Target Partner

City of Austin, Austin Public Health

TRACK #3: POLICY & REGULATORY

Objective

Educate key stakeholders who are potentially involved in the upcoming 87th Texas Legislative Session on noteworthy Insights and Far Term Strategic Opportunities relevant to the long-term care space

Target Partner

State Policy and Regulatory Entities

Track Approach Rationale

TRACK #1: LONG-TERM CARE FACILITIES

Ensure a maximum number of partners and stakeholders can be involved in the co-designing, prototyping, and piloting processes though a variety of avenues that are tailored to their subject matter expertise, potential time commitment, and other duties.

TRACK #2: REGIONAL COLLABORATION

Allow for evaluation to be measured and iteration to occur over a longer period of time.

TRACK #3: POLICY & REGULATORY

Allow for a portion of the work to be developed and/or iterated in response to the 87th legislative session, which begins January 12, 2021.

What Strategic Opportunities did we identify?

In this body of work, the specific **Strategic Opportunities** our team identified are as follows:

1. Infection Control – COVID-19 and Beyond
2. Staff Wellbeing
3. Expansion & Evolution of Staff Roles
4. Staff Retention and Incentives
5. Resident Wellbeing

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Down-selection Process

- Reviewed the "Now term" Strategic Opportunities identified from the research in Phase 1 and Phase 2 and collectively did a down selection from a design feasibility and timeline lens.
- Consulted Dr. Liam Fry for her feedback on the down selection from a long-term care clinical, facility, and resident perspective to confirm our direction and rationale, or revise if needed.

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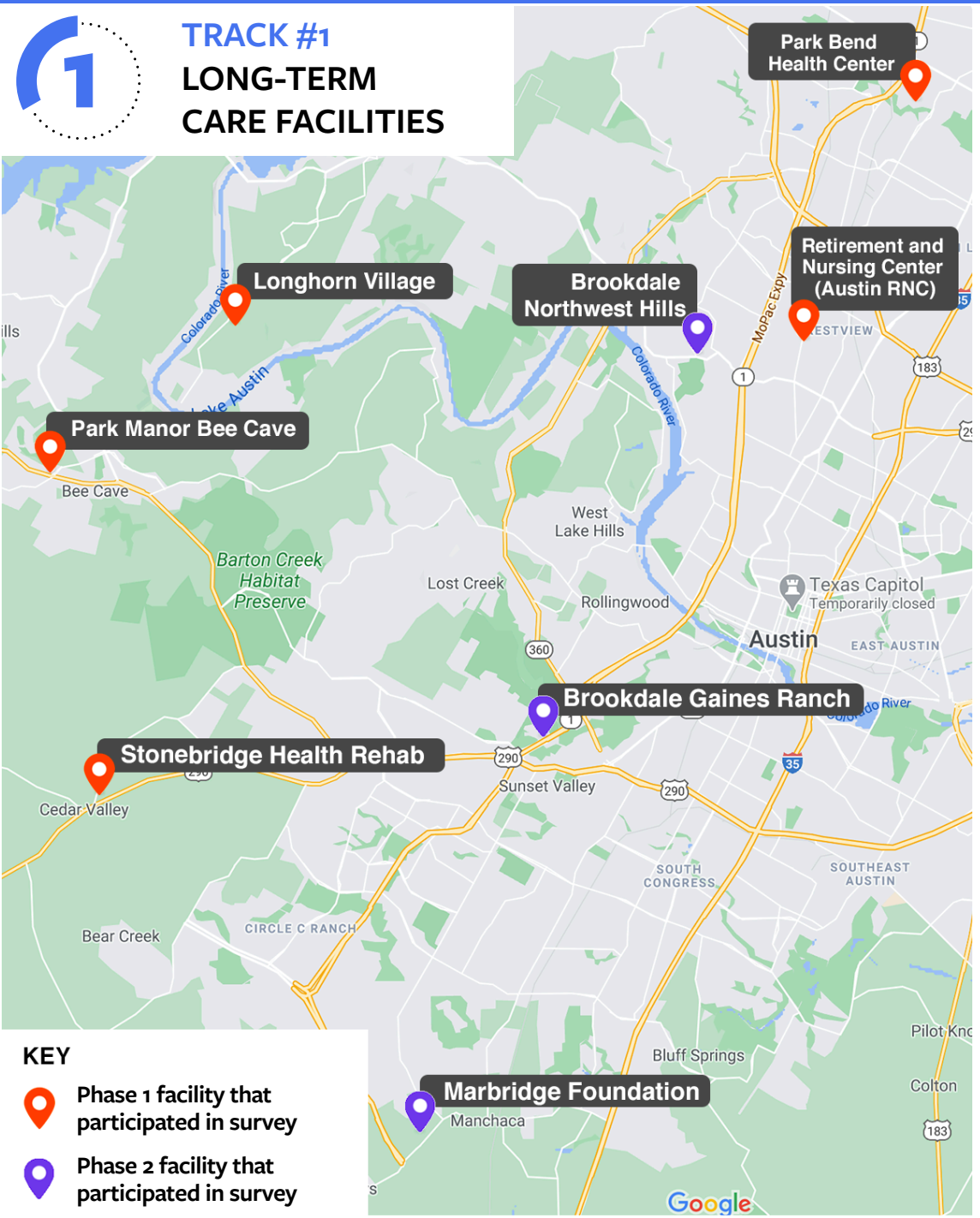
2. Staff Wellbeing
3. Expansion & Evolution of Staff Roles
4. Staff Retention and Incentives
5. Resident Wellbeing

Design Directions

1. Training
2. Helping with Infection Control
3. Preventing Staff Burnout
4. Building Staff Morale
5. Improving Communication Capabilities

TRACK #1
LONG-TERM
CARE FACILITIES



KEY

- Phase 1 facility that participated in survey
- Phase 2 facility that participated in survey

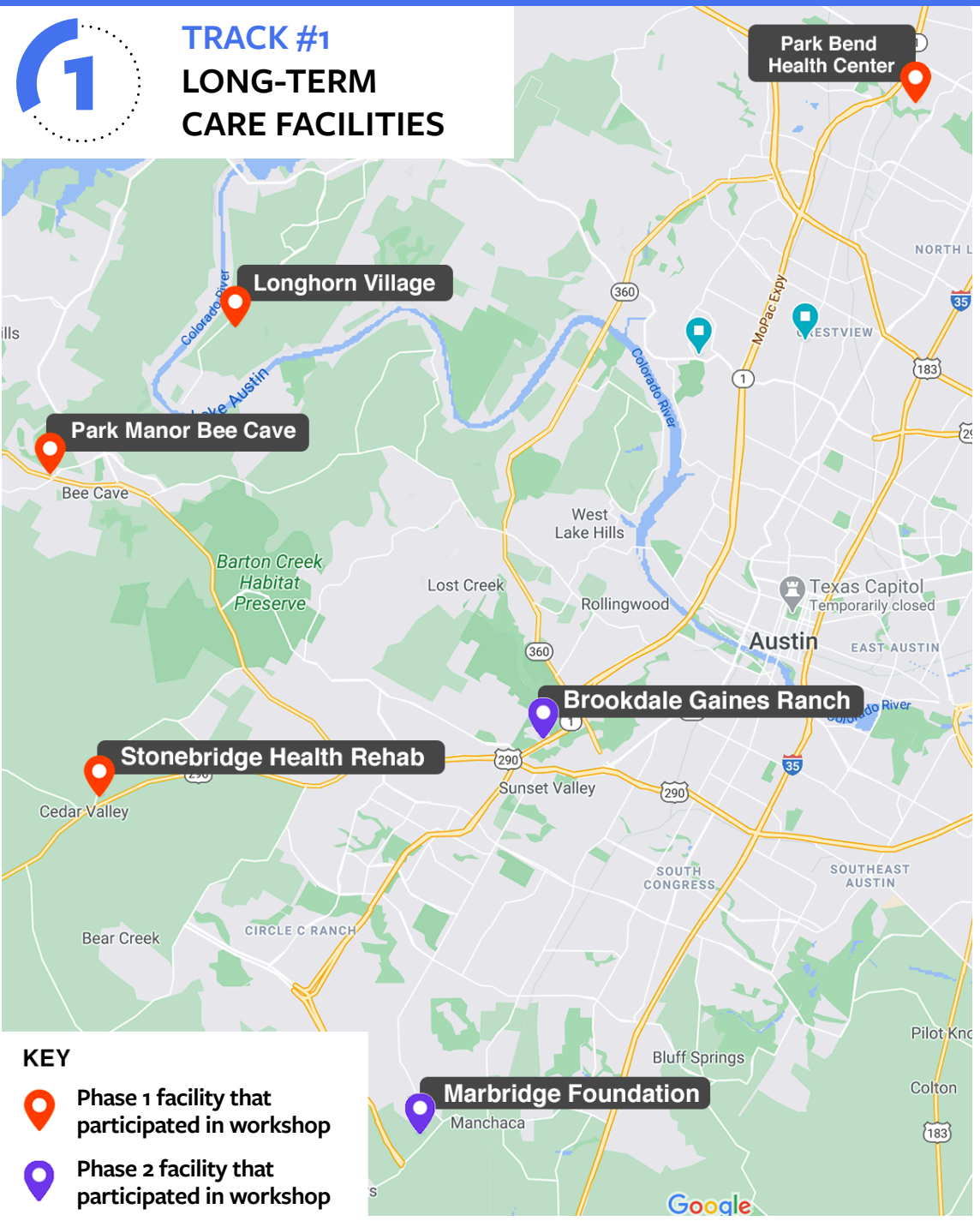
Facility Feedback Participants – Survey

In terms of our team's onsite engagement with 8 of the 9 long-term care facilities visited during Phase 1 and Phase 2 for input and feedback on potential design directions:

SURVEYS

- Print and digital surveys were shared with 8 facilities.
- 140 survey responses received thus far (print and digital combined).
- Wide variety of staff completed the survey.

TRACK #1
LONG-TERM
CARE FACILITIES



KEY

- Phase 1 facility that participated in workshop
- Phase 2 facility that participated in workshop

Facility Feedback Participants – On-sites

ON-SITE WORKSHOPS

A total of 31 interviews were conducted with long-term care staff for feedback and input on potential design directions. Specifically, based on 6 facility on-sites our team conducted, we met with:

12 LEADERSHIP & MANAGEMENT STAFF

- 4 Facility Administrators
- 1 Executive Director
- 1 Director of Nursing
- 1 Director of Health and Wellness in Assisted Living
- 1 Human Resources Manager
- 1 Staffing Coordinator
- 1 Life Enrichment Coordinator
- 1 Director of Memory Care
- 2 Social Workers
- 1 Activities Director

12 FRONTLINE STAFF

- 1 Nurse Manager
- 3 Licensed Vocational Nurses
- 5 Certified Nurse Aides (CNA)
- 2 Certified Medication Aides (CMA)
- 2 Medication Techs

4 SUPPORT STAFF

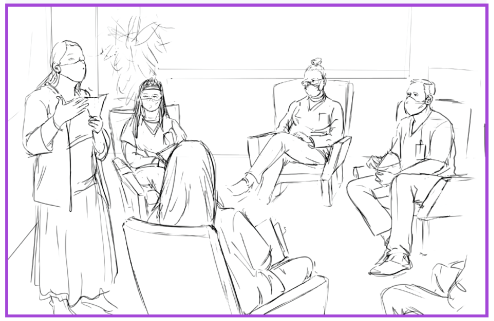
- 1 Activities Assistant
- 1 Housekeeping Manager
- 2 Dining

TRACK #1
LONG-TERM CARE FACILITIES

On-Site Workshop Tools

CATEGORY 3: Preventing Staff Burnout

1. Staff support groups via Zoom to share experiences, struggles, and successes in a confidential space. Led by a social worker 1x/week with staff from other facilities

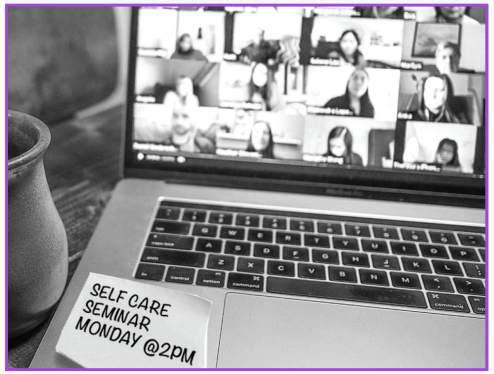


A During lunch

B Join from home after work hours (e.g., after shift or on day off)

CATEGORY 3: Preventing Staff Burnout

2. In-services focused on self-care and/or mental health resources. Led by outside facilitator 1x/month



A In person with a small group

B Online webinar to do on your own time

CATEGORY 3: PREVENTING STAFF BURNOUT

How can we better support you both at work and outside of work hours to reduce burnout?

1. Staff support groups (share experiences, struggles, successes, personal stories – confidential space) via Zoom; 1x/week with staff from other facilities led by social worker

   A. During lunch

   B. After shift or on days off and join from home

2. Self-care and/or mental health focused in-services; 1x/month led by an outside facilitator

   A. In-person

   B. Online webinar

Follow-up questions:

- Do you have other ideas for how to prevent staff burnout?

TRACK #1
LONG-TERM
CARE FACILITIES

Overview of Design Directions

Design Directions	1. Training	2. Helping with Infection Control	3. Preventing Staff Burnout	4. Building Staff Morale	5. Improving Communication Capabilities
Example design prototype ideas for feedback and input	1. Hands-on training during an in-service • Competition • Observe and fix on the spot 2. Resources and/or training materials following an in-service • Online database in a Google Drive folder to refer to on your own time • Resources sent via email 1x/week • A daily text reminder with an important infection control fact 3. Online collaborative groups to share ideas, tips, and strategies with staff in other facilities • Use during work hours • Use at home after work hours (e.g., after shift or on day off)	1. Flyers around the facility to help with infection control protocols • Change existing flyers with more visuals, less text • Add more flyers 2. Visual reminders in staff spaces for social distancing • X's on chairs in staff break room • Colorful dots 6 feet apart in outdoor spaces 3. Hand sanitizer accessibility around facility • Change current locations of hand sanitizer dispensers • Add more dispensers near high-touch surfaces (i.e., resident rooms, screening, time clock)	1. Staff support groups via Zoom to share experiences, struggles, and successes in a confidential space. Led by a social worker 1x/week with staff from other facilities • During lunch • Join from home after work hours (e.g., after shift or on day off) 2. In-services focused on self-care and/or mental health resources. Led by outside facilitator 1x/month • In person with a small group • Online webinar to do on your own time	1. Staff appreciation campaign informed by staff preference on how you like to be recognized and thanked • An event with food 1x/month (i.e., BBQ, potluck) with all COVID precautions (i.e., one person serving food) • Individual recognition 1x/month (i.e., handwritten card from supervisor or gift card for something to do outside of work) 2. Media campaign to change the public perception about long-term care staff members • Individual interviews or surveys • Group interviews with multiple staff members via Zoom	1. Share community resources (i.e., food assistance, transportation, housing assistance) with facility staff • Weekly newsletter via email • Paper flyers available to you at screening check-in • Text 1x/week with a different resource 2. Improve communication protocols/systems in the facility • Consistent communication about essential caregivers (For example: a text every morning at the beginning of your shift with the schedule for the day) • Email templates for family communication 1x/week

TRACK #1
LONG-TERM
CARE FACILITIES

Overview of Design Directions

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Why the focus on Staff Burnout & Morale?

- Burnout continues to take a drastic toll on our entire healthcare workforce, with long-term care staff integral to their facility's COVID-19 response being some of those who feel it most acutely and are the most dissatisfied with their jobs.
- Staff experiencing burnout are five times more likely to finish a shift without completing necessary care – a concerning fact when increased infection control care needs due to COVID-19 are taken into consideration.
- While root causes of long-term care staff burnout and dissatisfaction have been known for years – low pay, high turnover, staffing ratios, stressful and challenging work – progress to change these circumstances has been limited, and unfortunately these challenges have only been exacerbated by the pandemic.

White, E.M., Aiken, L.H. and McHugh, M.D. (2019), Registered Nurse Burnout, Job Dissatisfaction, and Missed Care in Nursing Homes. J Am Geriatr Soc, 67: 2065-2071. https://doi.org/10.1111/jgs.16051

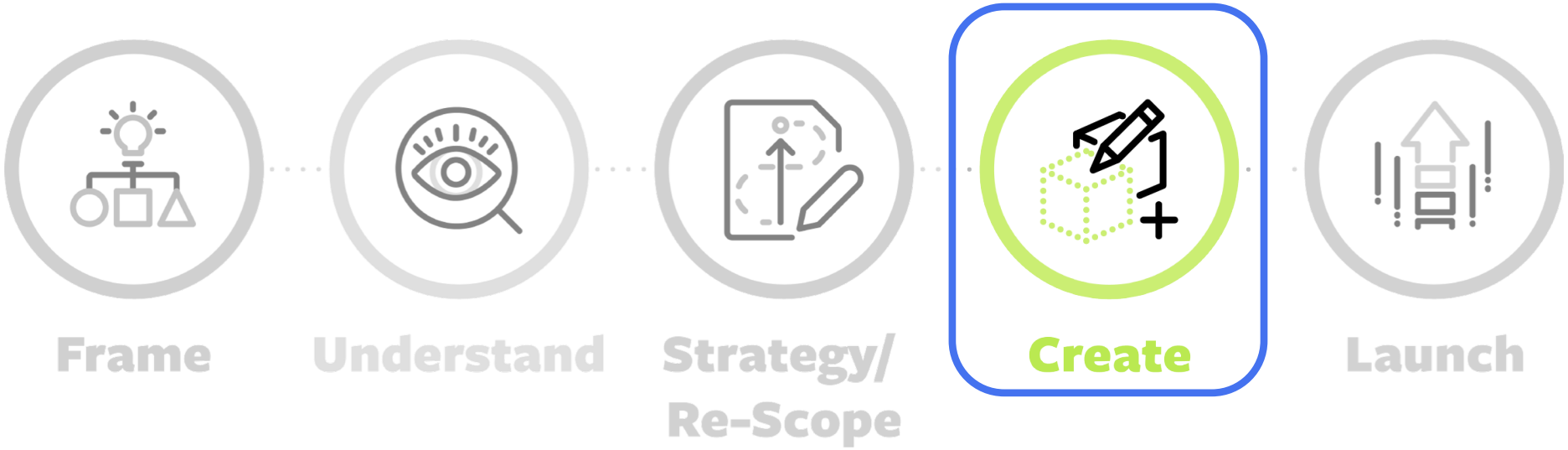
We need to care more about staff providing long-term care..

- As the approval of a COVID-19 vaccine is steadily becoming a possibility in the near-term, it raises the question of how can we have the most sustainable impact today?

- Arguably, needs for PPE, spaces for donning and doffing, and infection control trainings will still be critical, but the daily focus and emphasis placed on them will fade as we adapt to our new normal and integrate our learnings from COVID-19 into daily practice.

- Yet, what will be left unchanged is the overworked, overburdened, underpaid long-term care workforce - a notion that will continue to impact the quality of resident care for years to come, unless we begin to care more about those providing care.

What can design do?



What is a prototype?

An initial realization of an idea or concept as a tangible creation – something people can experience, engage with, and respond to – in service of identifying ways to improve the idea.

TRACK #1
LONG-TERM
CARE FACILITIES

Prototype Development: Progress To-Date

Essential Care Pantry

Prototype 1

Gratitude Portal

Prototype 2

Service Connection

Prototype 3

One-on-One Support

Prototype 4

Essential Care Pantry

Prototype 1

Description

The Essential Care Pantry is a refuge for front-line staff and long-term care workers. It is a dedicated, physical space in a long-term care facility set up like a mini-grocery store stocked with an assortment of everyday essentials such as food staples, cleaning supplies, toiletries, snacks, seasonal items, such as back-to-school supplies, and other "little luxuries" and self-care resources - all free to long-term care staff!

TRACK #1
LONG-TERM
CARE FACILITIES

Essential Care Pantry

Prototype 1

TRACK #1
LONG-TERM
CARE FACILITIES

Why?

Long-term care staff members are acutely aware of the risk of COVID-19 transmission in the community. Many staff members identified home and work as their two safe spaces and actively try to reduce their time in public places. Frontline workers are underpaid and tend to work multiple jobs to support themselves and/or their family.

The goal of the Essential Care Pantry is to not only bring necessary, basic items to the staff in their workplace, but to also create a physical space in long-term care facilities that offers self-care and mental health materials/resources, a wellbeing check-in, and other "little luxuries" for staff.

How would the Essential Care Pantry work?

- Identify available physical space in or adjacent to our participating long-term care facilities in order to stand up the pantry with attention to accessibility and privacy
- Determine the needs of the staff members - ask staff what they need/want/if they can contribute
- Recruit a staff member to act as the point person for pantry logistics and stocking
- Solicit donations from local partners to stock the pantry
- Iterate on the items in the pantry based on staff feedback and popularity
- Create sustainable partnerships with local organizations and corporations to ensure longevity for the pantry

Essential Care Pantry

Prototype 1

TRACK #1
LONG-TERM
CARE FACILITIES

How does the Essential Care Pantry grow?

Based on a successful pilot, we see the opportunity to grow the Essential Care Pantry in the following ways:

CORPORATE PARTNERSHIP

We will need outside support in order to successfully maintain and grow the Essential Care Pantry, primarily from groups familiar with food distribution, such as HEB, Whole Foods, Central Texas Food Bank, or Meals on Wheels. There is also the opportunity for businesses within the Austin community to contribute to the Essential Care Pantry program either through direct donation of goods or sponsorship (ex: The HEB Essential Care Pantry sponsored by Kendra Scott).

EXPANSION & EVOLUTION

Once a pilot proves viable, we hope to expand this initiative to other long-term care facilities. Beyond the current pandemic, the Pantry could evolve to meet staff needs post-COVID, shifting from tactical necessities to long-term emotional support and growth, and adding value and appreciation for the long-term care workforce.

If this model is successful, we see the potential of expanding it to various communities and other crisis scenarios.

MOVING ONLINE

The initial focus of the Essential Care Pantry is to provide easy, free, and low-barrier access to basic needs. Our long-term goal is to evolve the Essential Care Pantry into a digital platform allowing for essential care workers to post needs to the Pantry and to then receive support from their community.

Gratitude Portal

Prototype 2

Description

The Gratitude Portal celebrates the long-term care community by profiling front-line staff from facilities across Travis County. Through the Portal's website and social media presence, the public can read staff and facility stories and show their gratitude by publicly thanking these dedicated health heroes.

TRACK #1
LONG-TERM
CARE FACILITIES

Gratitude Portal

Prototype 2

TRACK #1
LONG-TERM
CARE FACILITIES

Why?

Morale amongst long-term care staff is low. The institutions they have dedicated their lives to are consistently demonized in the media, and they haven't received the same public recognition and appreciation of other frontline healthcare workers. Many staff simply feel unacknowledged for the work they do.

The goal of the Gratitude Portal is to shift the narrative around nursing homes by humanizing the staff and providing a way for the public, other long-term care staff, and family members to acknowledge the hard work that they do day-in and day-out.

How would the Gratitude Portal work?

- The team will travel to the initial set of 3-5 facilities participating in the Gratitude Portal pilot, profiling and photographing the staff to capture their stories for the site and social media outlets.
- Those stories and photos will form the basis for the Gratitude Portal website and social media platforms. We will build out these platforms, focusing on accessibility and ease of use, while also providing easy ways for the community to share stories through their own social media channels.
- To kickstart this appreciation campaign, we will solicit "letters of thanks" from UT and other relevant stakeholders (i.e., our Steering Committee).
- Share and advertise the Gratitude Portal to long-term care facilities, staff, families, and the public to continue populating the website and social media platforms.

Gratitude Portal

Prototype 2

TRACK #1
LONG-TERM
CARE FACILITIES

How does the Gratitude Portal grow?

Based on a successful pilot, we see the opportunity to grow the Gratitude Portal in the following ways:

DONATIONS & GIFTING

A fast follow to the initial launch of the Gratitude Portal could be the added ability for visitors of the site to make donations, both material and financial. Those donations could take the form of direct contributions to facilities or charities in individual staff members' names.

PHYSICAL THANKS

While digital kudos are worthy, time and again, we heard from the staff how valuable a hand-written note can be. With this in mind, the Gratitude Portal could promote letter writing as a form of thanks and celebration of the long-term care community, soliciting messages from site visitors, and coordinating letter-writing campaigns amongst the public.

WHITE LABEL GRATITUDE PORTALS

Based on the pilot's success, the Gratitude Portal could be formalized into a template and shared among other long-term care facilities to promote their employees and share their stories. In the future, this template could be utilized by other industries (i.e., restaurant and service industry, education) to humanize their workforce.

Service Connection

Prototype 3

Description

The Service Connection is an online hub connecting long-term care workers to businesses and individuals offering their COVID-safe services at discounted rates, exclusively for the long-term care community.

TRACK #1
LONG-TERM
CARE FACILITIES

Service Connection

Prototype 3

TRACK #1
LONG-TERM
CARE FACILITIES

Why?

Long-term care staff are underpaid and underappreciated in their contribution to our communities. They bear the same burdens and risks as the rest of the medical community but are inundated with highly-critical news stories and negative public perception. Many staff members spoke of not just the stress of their work but also their stressful home lives.

The goal of Service Connection is to provide an easy way for workers to access critical services for their families but also help bolster the reputation and respect that these vital workers receive within our community. While we can't directly supplement staff pay, we can augment the value of their position through community-contributed benefits.

How would Service Connection work?

- Build the Service Connection website with a focus on accessibility, ease of use, and future expansion.
- Recruit local businesses and individuals to contribute their services to the site. Our initial focus will be on the following services:
  - Tax preparation
  - Children's tutoring services
- Advertise the site and services to workers and facilities.
- Refine the website's design and add additional services based on feedback from the long-term care community.
- Explore alternative delivery mechanisms, such as physical pamphlets or text messaging to engage a broader, less tech-savvy audience among the long-term care community.

Service Connection

Prototype 3

TRACK #1
LONG-TERM
CARE FACILITIES

How does Service Connection grow?

Based on a successful pilot, we see the opportunity to grow the Service Connection in the following ways:

SERVICE EXPANSION

The needs of long-term care staff and their families are multifaceted, and so as Service Connection grows, it needs to diversify the services it offers. In the near term, Service Connection could expand to include social services and access to basic necessities. Still, longer-term, the platform could expand to have creature comforts such as cooking classes for families and nail spas, all informed by and curated towards the needs of the long-term care community.

DONATIONS & GIFTING

The initial launch of Service Connection would focus on connecting long-term care staff with service providers, but the format makes it an ideal platform for gifting and donations. A future iteration of Service Connection could include the ability for facilities, families, or members of the public to sponsor or donate services to long-term care staff and their families.

ALTERNATIVE CURRENCIES

Service Connection is a marketplace, and marketplaces often develop financial models and currencies that best suit the needs of the communities they serve. We know that money is only part of the way the long-term care community measures value. As Service Connection develops and evolves, there is an opportunity to explore alternative payment methods and exchange, including sliding-scales and models that prioritize time and service over cold hard cash.

One-on-One Support

Prototype 4

Description

One-on-One Support connects long-term care workers with a licensed mental health professional for convenient phone-based short-term case management (i.e., connecting to community resources, applying for government programs such as WIC or SNAP) and/or mental and emotional support. This service focuses on short-term crisis prevention for long-term resilience and stability.

TRACK #1
LONG-TERM
CARE FACILITIES

One-on-One Support

Prototype 4

TRACK #1
LONG-TERM
CARE FACILITIES

Why?

Long-term care staff are dealing with many of the same challenges that others are experiencing during the pandemic – increased financial stress, juggling virtual learning, reduced or cut hours, and so many more. However, they have many other added stressors: a constant fear of contracting or transmitting COVID-19 both in the facility or at home, the pressures to keep the residents safe and healthy with limited or reduced family interactions, the trickle-down effect of negative press surrounding nursing homes, and a lack of appreciation from the broader community.

The goal of One-on-One Support is to reduce the barriers to ask for help and to provide tangible and actionable help based on the staff members' readiness to engage with services and/or mental health support.

How would One-on-One Support work?

- Recruit and hire a licensed mental health professional to facilitate the one-on-one calls
- Share this opportunity and service to staff through a variety of channels: flyers, text messages, newsletter with introduction, email, virtual meet and greet
- The licensed mental health professional will send out a weekly text to ask staff if they would like to sign-up for a one-on-one call
- Staff will pick a time that works for their schedule (i.e., driving home from work, lunch break, after dinner)
- The licensed mental health professional will call the staff member during their chosen time

One-on-One Support

Prototype 4

TRACK #1
LONG-TERM
CARE FACILITIES

How does One-on-One Support grow?

Based on a successful pilot, we see the opportunity to grow the One-on-One Support in the following ways:

REGIONAL EXPANSION

Once a pilot proves viable, we hope to expand this initiative to other long-term care facilities to share this service with other long-term care staff members.

CREATING SUSTAINABILITY

We believe this service is a first step towards normalizing mental health support in long-term care. However, we first need to create a sustainable system for One-on-One Support. This could be included in the existing benefits plans currently offered by long-term care facilities with the goal of making this a permanent and formalized service available to staff as they need it post-COVID.

FACILITY INTEGRATION

As mental health support and staff wellbeing are more prioritized and integrated into long-term care facility culture, this service has the potential to extend beyond one-on-one support for staff. Ideally, each facility would have an embedded licensed mental health professional to assist with staff and resident needs as they arose.

TRACK #1
LONG-TERM
CARE FACILITIES

Prototype Development: Progress To-Date

Essential Care Pantry

Prototype 1

Gratitude Portal

Prototype 2

Service Connection

Prototype 3

One-on-One Support

Prototype 4

Next Steps

TRACK #1:
LONG-TERM CARE FACILITIES

June 2020	July 2020	Aug 2020	Sept 2020	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	March 2021
Phase 1 **Focused Investigation**		Phase 2 **Broadened Investigation**		Phase 3 **Design & Development**		Phase 4 **Prototype & Pilot**			Phase 5 **Implementation & Recommendations**

- Continue prototype development
- Finalize prototypes after facility/key stakeholder feedback in preparation for pilots
- Finalize measuring & evaluating plan for pilots
- Pilot launch mid-January 2021; pilot conclusion end of March 2021
- Share out of learnings and potential for scale to key partners & stakeholders

Next Steps

TRACK #2: REGIONAL COLLABORATION

June 2020	July 2020	Aug 2020	Sept 2020	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	March 2021
Phase 1 **Focused Investigation**		Phase 2 **Broadened Investigation**		Phase 3 **Design & Development**		Phase 4 **Prototype & Pilot**			Phase 5 **Implementation & Recommendations**

- Support Austin Public Health existing identified needs and partnerships to augment efforts and facilitate potential for scale, such as their collaboration with Integral Care to create support groups / offer group therapy to long-term care staff
- Share out of learnings and potential for scale to key partners & stakeholders

Next Steps

TRACK #3:
POLICY & REGULATORY

June 2020	July 2020	Aug 2020	Sept 2020	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	March 2021
Phase 1 **Focused Investigation**		Phase 2 **Broadened Investigation**		Phase 3 **Design & Development**		Phase 4 **Prototype & Pilot**			Phase 5 **Implementation & Recommendations**

- Generate tools, resource documents and/or white papers that explore conceptual facility financial models wherein current resource and financial waste are repurposed as avenues to increase staff pay and/or retention
- Share out of learnings to key partners, stakeholders & committees

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Questions?

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Thank you.