Monitoring Residents Well-being

An in-depth review of WAC 388-78A-2120

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Learning Outcomes

• Upon completion of this session, you will:

  • Review the subsections of WAC 388-78A-2120
  • Identify the areas of concern that impact compliance
  • Create or strengthen a system to address each area of concern
  • Develop or strengthen a monitoring program to ensure continued compliance
The assisted living facility must:

(1) Observe each resident consistent with his or her assessed needs and negotiated service agreement;

(2) Identify any changes in the resident's physical, emotional, and mental functioning that are a:
   (a) Departure from the resident's customary range of functioning; or
   (b) Recurring condition in a resident's physical, emotional, or mental functioning that has previously required intervention by others.

(3) Evaluate, in order to determine if there is a need for further action:
   (a) The changes identified in the resident per subsection (2) of this section; and
   (b) Each resident when an accident or incident that is likely to adversely affect the resident's well-being, is observed by or reported to staff persons.

(4) Take appropriate action in response to each resident's changing needs.
OBSERVE
IDENTIFY
EVALUATE
TAKE APPROPRIATE ACTION
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Definition of “Observe”

To notice or perceive something and register it as being significant.

To compare norms to outliers; to notice something out of the ordinary.
Observations Can Be...

• Seen
• Heard
• Felt
• Smelled
• Tasted
• A gut instinct
• Marge is a 78-year-old resident living in a memory care unit. She typically spends her day wandering outside near the fence, stomping her feet and singing songs. When she is inside, she follows staff and other residents around, telling them they are pretty and trying to touch their hair.

• Over the past week, Marge has become more somnolent, sleeping in late and barely opening her eyes for meals. She is quiet, spending most of the days inside now, resting in the recliner near the community’s big screen TV.
Observe for Changes

• A housekeeper who’d been on medical leave returned to find Marge in this condition. She notified the nurse, who assessed Marge and called 911.
OBSERVE - Why Did This Happen?

- Staffing Issues
  - New staff:
    - Lack of training, experience
    - Didn’t know Marge’s norm
    - Didn’t grasp their responsibility or who to report these observations
  - Inconsistent staffing:
    - Staff who knew Marge had their schedules changed
  - Inadequate staff numbers
- Convenience
  - Marge was quiet, easier to care for

- DIDN’T OBSERVE THE CHANGE
- OBSERVED BUT IGNORED
• Hire right
• Full and complete orientation to residents, their NSAs, and the expectations of the job
  • Documentation with dates, signatures
  • Make it a game with prizes
• Consistent staffing
OBSERVE

IDENTIFY

EVALUATE

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Definition of “Identify”

To associate or connect one thing with another

To point out a connection between cause and effect
Identify Changes

NEW CHANGES
• Illness, infection
• Change in ADLs
• Confusion
• Grief

EXISTING CHANGES
• Complications of:
  • CHF
  • COPD
  • Diabetes
  • Depression, anxiety
  • Seizures
  • Hypertension
  • ANYTHING!
• *Marge has a history of UTIs; this was on her move-in paperwork from her PCP.*

• *Marge was admitted to the local hospital with sepsis from an untreated UTI. She remained in ICU for four days, before being transferred to a rehab center.*
IDENTIFY - Why Did This Happen?

- H&P information didn’t reach the assessment, or
- Assessment information didn’t reach the NSA
- Staff didn’t read the NSA
- No communication system in place to notify someone who could connect the dots

OBSERVED THE CHANGE, BUT DIDSN’T CONNECT IT TO ANYTHING (IDENTIFY WHAT/WHY IT WAS HAPPENING)

DIDN’T COMMUNICATE TO SUPERVISOR
IDENTIFY - Systems Fixes

• Thorough orientation, training, with expectations
  • Documented, dated, signed
• Review past “misses” as case studies at staff meetings
  • Brainstorm with staff, come up with a plan
• Create/enhance a culture of curiosity and follow-through
• STOP and WATCH form
  • Close the circle
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Definition of “Evaluate”

To determine the significance of something

To appraise a situation so that one may identify a course of action
“Evaluate” ≠ “Assess”
Evaluate

• Marge returned to the ALF after 10 days spent at the rehab center. Staff continued caring for her as they had prior to her hospitalization. She continued to decline, no longer able to walk or feed herself.
EVALUATE - Why Did This Happen?

• Changes in condition not evaluated to determine best course of action
  • Ongoing assessment was warranted, with change in NSA

• No communication system in place to notify someone who could connect the dots

CHANGES WERE NOT EVALUATED TO DETERMINE SIGNIFICANCE AND NEXT STEPS

DIDN’T COMMUNICATE TO SUPERVISOR
• Thorough orientation, training, with expectations
  • Documented, dated, signed
• Policies and procedures to determine what constitutes a change in condition, and what to do
• Create/enhance evaluation tools to determine next steps
• STOP and WATCH form
  • Close the circle
Evaluate

**Identified Changes**
- New or Current
  - Are these identified changes significant?
  - Do they warrant attention?
  - Can I do something to get the person back to baseline?

**Possible Changes**
- Falls (NIF, too)
- Appetite
- Loss
- What else?
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Definition of “Appropriate Action”

Steps taken that are reasonable in intensity, duration, and magnitude based on all the facts known at the time
Appropriate Action

• *Staff left a sticky note on the nurse’s desk on Friday afternoon, letting her know that Marge still “wasn’t right.”*

• *By Sunday, Marge was not able to be aroused; her husband came to visit and called 911. Marge died at the hospital.*
APPROPRIATE ACTION - Why Did This Happen?

- Staff not trained on what to do in a major health crisis
- Policies and procedures vague, not considered a resource
- Communication system ineffective

STAFF WERE NOT EMPOWERED TO TAKE ACTION

DIDN’T COMMUNICATE APPROPRIATELY TO SUPERVISOR
APPROPRIATE ACTION - System Fixes

• Thorough orientation to roles/expectation of advocating for residents
• Strong paper-trail systems that end in a closed circle
• Policies and procedures/protocols that outline when to:
  • Call the supervisor
  • Leave a note for the supervisor
  • Notify supervisor via other routes (email, scan, text, other messaging program)
OBSERVE

IDENTIFY

TAKE APPROPRIATE ACTION

EVALUATE
Envision an Alternate Reality

O • Care staff and the housekeeper noticed that Marge wasn’t outside singing this morning, and she was too tired to eat breakfast.

I • The caregivers know that Marge has a history of UTIs, and she tends to get tired and doesn’t do a whole lot when a UTI is starting.

E • The lead aide observes the new caregivers providing perineal care, and provides an in-service to improve infection control practices.

A • Caregivers put Marge on alert and start tracking her vital signs and encouraging fluids. A caregiver calls Marge’s husband and lets him know that Marge will need to be seen by a doctor ASAP.
Questions?