

**Cassie Stern Healthcare Workers
Education & Training Center**

Final Project Report
for
Nursing Facility Enhancement Project

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Executive Summary

Over the past year and a half the Cassie Stern Healthcare Workers Education and Training Center, through a partnership with the Detroit Area Agency on Aging (DAAA), has provided enhancement training to certified nurse aides (CNA) and certification training for new CNAs. The trainings were offered to direct care workers at facilities in the DAAA's service area: Detroit, Highland Park, Hamtramck, and the five Grosse Pointes.

As a result of the enhancement training, we **improved six quality measures** above the service area average at facilities with a high rate of participation in the training. The enhancement also appears to have **improved retention** of direct care workers. Of direct-care workers who completed the training at the high-participation facilities the **turnover rate was only 4%**, over ten times less than the Michigan average of 54%. A lower turnover rate has a number of positive effects on resident care at nursing facilities through more experienced staff providing care, and developing stronger relationships and better communication with residents.

In addition to enhancement training we provided coursework to train new CNAs. As a result of that training:

- 298 completed the nurse aide coursework
- 156 have passed the state certification exam
- 59 CNAs have been hired at facilities in the DAAA's service area

We achieved these outcomes through participation from nursing facility owners and operators in the DAAA's service area. Of the 36 homes, we developed particularly strong partnerships with seven facilities: Hartford Nursing and Rehabilitation Center, Luther Haven Nursing Home, Redford Geriatric Village, Elmwood Geriatric Village, Park Geriatric Village, Sheffield Manor Nursing and Rehab Center, Law-Den Nursing Home, and St. Joseph Healthcare Center. We also relied on a strong relationship with the nursing home operator Nexcare Health Systems and their Nexcare Training Institute. As a result of the trainings, nursing home administrators reported that trainees **improved their skills** and were **better able to communicate with residents and their families**, leading to a better quality of care. Fully 97% of training participants found the training very useful and would recommend it to their coworkers.

In addition to the trainings outlined above, the Cassie Stern Center provided comprehensive support services to participants. Prior to the nurse aide training courses, we offered academic enrichment and counseling services to ensure that they were prepared to be successful in the coursework. During and after training we provided additional counseling and job development skills such as resume and cover letter writing, interviewing practice, and time management to assist participants in finding and maintaining employment.

Employer Partnerships

A key reason for our success in this project is the relationships we have built with employers. While employees from all 36 facilities participated in our enhancement training, workers at 7 of these facilities participated at a much higher rate because the administrators of these homes actively encouraged, and at times mandated, that their staff attend: Hartford Nursing and Rehabilitation Center, Luther Haven Nursing Home, Redford Geriatric Village, Elmwood Geriatric Village, Park Geriatric Village, Sheffield Manor Nursing and Rehab Center, and Law-Den Nursing Home. These 7 homes represent nearly 20% of the region’s facilities and account for 25% of the participants in our enhancement training; even more significantly, the retention rate of these participants is double the average for all Detroit facilities (see section on retention).

We have also built an important partnership with the Nexcare Training Institute, the proprietary school of Nexcare Health Systems. They provided the actual technical training for our new Nurse Assistants, a 90-hour, adult learner-centered course, meaning that each class session requires active participation by students to ensure maximum learning. This partnership was effective because the Cassie Stern Center provided a rigorous screening process prior to training; thereby sending well-qualified candidates into CNA training. The Center also provided an academic preparedness course, job development, and counseling services, important factors in our 83% course completion and pass rate (see “Cassie Stern Support Services” and “New CNA Training” sections).

In addition, our job placement counselor helped 59 new CNAs find employment in Detroit area homes. She did this by building strong relationships with both nursing home administrators and newly-trained CNAs, and was therefore able to send them highly qualified candidates for employment. Many employers reported that they are eager to hire our graduates because they know these workers are well-trained and have already fulfilled many of the prerequisites for hiring. In fact, St. Joseph’s Healthcare Center has hired 14 of our graduates.

New CNA Training

Over the course of the grant we trained 298 direct care workers, with 156 receiving their CNA certification (See Table 1). Of these, our job development counselor helped 59 find employment in Detroit area nursing homes and helped 15 retain their jobs. There were a total of 610 applicants who made appointments for the program; of these 409 showed up for their appointment and 366 passed the screening process (see Table 2).

Table 1: Training Enrollees Certification and Employment Status

	Number	Percentage of Enrollees
Enrolled in Training Course	360	
Completed and Passed Course	298	82.78%
Passed State Certification Exam	156	43.33%
Employed at Detroit Facilities	59	16.39%

Table 2: Applicants in the Screening Process

	Number	Percentage of Applicants
Appointments	409	
Passed Screening Process	366	89.49%
Reasons for Not Passing:		
<i>Failed Literacy Test</i>	17	4.16%
<i>Failed Background Check</i>	16	3.91%
<i>Failed Drug Test</i>	10	2.44%

To train new CNAs, we developed a rigorous screening process, consisting of an application, writing sample, reading and math test, interview, drug screening, criminal background check, physical and lift test, and TB screening. Our intention was to make sure that from the outset, people who completed the training course and passed the state certification exam would also have already fulfilled the other prerequisites that employers require prior to hiring. It did not take long for word to spread that we were providing a free training program for CNAs, and we quickly had a long wait list. There are currently 600 people on the wait list.

Cassie Stern Center Support Services

Another factor contributing to the success of this project is our comprehensive support services. Our Center provides counseling, job development and academic enrichment services that wrap around the 90-hour training course. The orientation prior to training shows students how to study a textbook and stresses the importance of taking the state exam soon after completing the training (rather than waiting up to the 12 months allowed by the state). Many of the people who attend this training do not have much formal schooling and lack the study skills necessary to succeed. Large numbers of them also suffer from test anxiety and need our staff to walk them through the steps involved in registering for and taking the exam. We also provide job development services, such as resume and cover letter-writing, interviewing skills, time management skills, and communication in the workplace. In addition, by making the necessary referrals, our counselor helps students overcome the barriers that often keep them from succeeding in training and in the workplace: lack of child care and/or transportation, utility shutoff, and mortgage or rent non-payment among other issues.

Enhancement Training Curriculum & Recruitment

Curriculum

We provided enhancement classes in dementia, mental illness, improving communication, and developmental and physical disabilities with a skills review. These topics were selected based on the suggestions laid out in the DAAA report *Dying Before Their Time* that direct care workers in the DAAA's service area most need improvement in these areas to improve the quality of

care they provide. The classes promote person-centered care, meaning that students are taught to view each resident as a unique individual with his own needs, hopes and fears. In total, we provided enhancement training to 320 direct care workers from all 36 facilities in the DAAA's service area of Detroit, Highland Park, Hamtramck, and the Grosse Pointes.

Recruitment Process

It was initially difficult to persuade incumbent CNAs to attend enhancement trainings. A staff member from the Cassie Stern Center visited every facility in the DAAA's service area in order to build relationships with administrators, in-service directors and directors of nursing, and to encourage them to have CNAs attend the training. She carried out a sustained outreach campaign consisting of visits, follow-up phone calls, faxes, and emails, and her efforts soon paid off. While our first series of workshops had just six attendees, we began to average 15 to 20 participants per series, seven months into the program. We have found that both CNAs and their supervisors now spread the word about how useful the trainings are and encourage direct care staff to attend. In June 2009, we started holding the trainings at various facilities rather than only at the Cassie Stern Center due to administrator enthusiasm about their staff attending.

Enhancement Training Outcomes: Improved Quality Measures

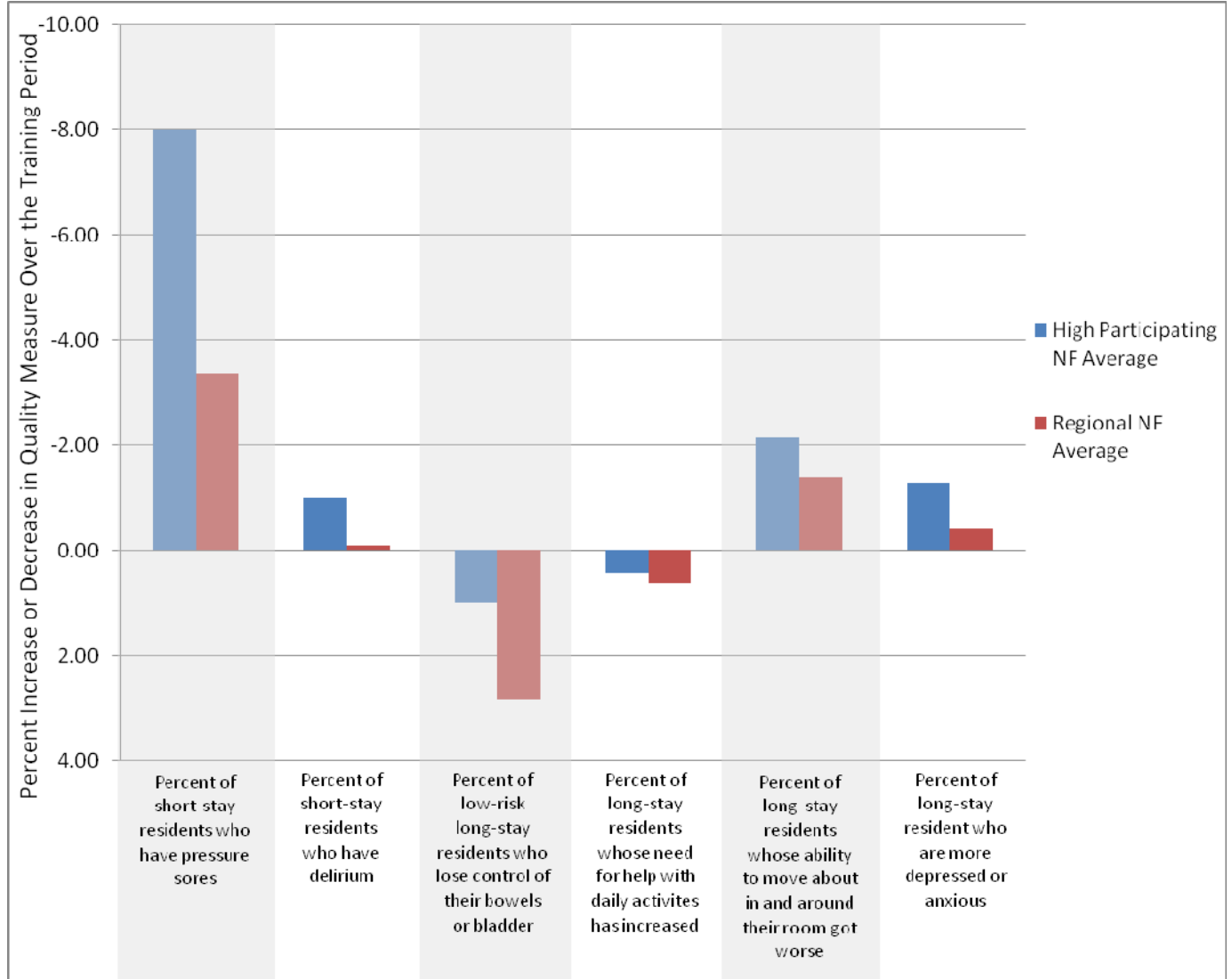
Facilities regularly report quality measures data on their residents through the Minimum Data Set assessment tool. CMS aggregates this data and makes it available, allowing for standardized, risk-adjusted quality indicators that can be used to gauge improvements in resident care at facilities. While we provided enhancement training for direct care workers at all 36 facilities in the DAAA's service area, there were seven facilities that participated in trainings at a higher rate than the rest of the region. One way to assess the effectiveness of the trainings provided is to examine the improvement in quality measures at these seven facilities and compare that improvement to the greater regional average.

In these seven facilities, representing nearly 20% of the region's facilities, six quality care measures improved beyond the regional averages over the course of the enhancement classes we provided to staff at these homes (see Chart 1). These increases in quality measures can be attributed, in part, to the enhancement training provided to staff at these facilities.

The enhancement classes specifically address many of the contributing factors that could have led to an improvement of the quality care measures in the homes with a higher participation rate. The skills review and physical disabilities course teaches CNAs the proper methods to reposition patients to prevent pressure sores, skills to improve resident mobility, and addresses the needs of residents with disabilities. This coursework appears to have had an impact in these seven facilities through a decreased percentage of short-stay residents with pressure sores and better than average changes in quality measures relating to residents' activities of daily living. Likewise, the dementia and mental illness coursework may have played a role in the better than average changes in the quality measure assessing resident depression and

anxiety. The communications coursework contributed to improvement in various areas, including a decrease in those residents who are anxious or depressed and those who lost control of their bowels or bladder.

Chart 1: Quality measures on which participating facilities outperformed the Detroit facilities average



The improvement is only noted for 6 of the 19 total quality measures, and with reason. While the seven participating homes all outperformed the average regional change in quality measures for pneumonia and influenza we chose not to include it in training outcomes because it was not covered in our trainings. Likewise, these seven facilities performed below the average regional change on some quality measures that we didn't cover in our trainings; for a further discussion of how we envision future trainings addressing additional quality measures see the "Areas of Improvement" section below.

Enhancement Training Outcomes: Improved Retention

Of the 79 workers who attended the trainings from the facilities with a high rate of participation, 76 (96%) are still working at the same facilities. This surpasses Michigan's 2007 retention rate of 45.6%.ⁱ A higher turnover rate has a number of negative effects on the quality of care provided in a facility: less experienced staff providing more care, fewer experienced staff available as mentors, remaining staff providing care in a rushed or unsafe manner, and the inhibition of the development of strong relationships between residents and caregivers.ⁱⁱ Previous studies have suggested, and our experience over the last year appears to offer some affirmation, that turnover rates can be decreased through the provision of enhanced training opportunities to direct care workers in nursing facilities.ⁱⁱⁱ

Post-Training Survey Results

Surveys taken at the end of our training series revealed that 97% of the participants found the training very useful and would definitely recommend it to coworkers. CNAs report that they received practical suggestions for how to deal with the challenging behaviors exhibited by residents, and that the material was presented in an engaging and easy-to-understand way. They found the skills review especially helpful. The workshops gave them an opportunity to reflect on their experience, listen to one another, and hear about best practices.

Similarly all the administrators who responded to our survey were very positive, reporting that employees improved their hands-on skills and were better able to communicate with residents, residents' families, supervisory staff, and one another. The enhanced communication raised morale among staff, leading to a better quality of care for residents. One facility owner noted that retention has improved, and felt the trainings "helped CNAs get past the 'burnout stage,' gave them a wider perspective on the challenging behaviors that residents exhibit, and enabled them to understand how to better respond to those behaviors."

Areas of Improvement

Our outstanding outcomes prove the validity of this project. Our partnership with the DAAA has been productive, and we are eager to continue the training of both new and incumbent CNAs. We have learned much in the past year and a half about providing effective training that raises the level of care received by the residents of Detroit area nursing homes. With continued funding the Cassie Stern Center is poised to:

- Offer workshops on new topics that would enable us to help facilities improve additional quality care measures, as well as dealing with residents who are formerly homeless and/or ex-offenders.
- Build partnerships with more employers: through other projects, we have built relationships with additional employers who are now more likely to send their CNAs through enhancement training and hire our newly-trained CNAs

- Continue providing enhancement training on our current topics to those direct care workers who have not yet received it
- Train several hundred more new CNAs
- Continue to help CNAs find employment in facilities located in the DAAA's service area

Quality Improvement Methodology

To determine the improvement in quality measures at facilities with a high rate of participation in the training program, we compared data downloaded from Medicare's nursing home compare website in August 2008 and April 2010.^{iv} The August 2008 data represents a baseline for Detroit facilities prior to the beginning of training in November 2008; the April 2010 data covers the fourth quarter of 2009 after the majority of trainings had been conducted. The available quality measures data is drawn from the Minimum Data Set (MDS), a standardized assessment tool that nursing facilities use regularly to collect information on residents.

Using the 2008 data as a baseline, we compared 2010 data to determine the increase or decrease in each quality measure for the 36 nursing facilities in the DAAA's service area.^v Averages were then determined for all Detroit facilities and only those facilities with a high rate of participation in the training program.

Additional anecdotal data was collected through interviews with nursing home administrators at facilities with a high rate of participation. These interviews further probed administrators on their perception of the impact of the training series on quality measures, nurse aide retention, and improvement in nurse aide communication with residents and family members.

ⁱ American Health Care Association Department of Research, *2007 AHCA survey: Nursing staff vacancy and turnover in nursing facilities*, 21 July 2008.

ⁱⁱ National Center for Health Workforce Analyses, Bureau of Health Professions, Health Resources and Services Administration; *Nursing Aides, Home Health Aides, and Related Health Care Occupations: National and Local Workforce Shortages and Associated Data Needs*; February 2004.

ⁱⁱⁱ Committee on the Future Health Care Workforce for Older Americans, Institute of Medicine, *Retooling for an Aging America: Building the Health Care Workforce*, 2008.

^{iv} This data is available to download at <http://www.medicare.gov/Download/DownloadDB.asp?%20language=English&version=default>

^v At the start of the training, there were 37 facilities in the service area, and there are currently 34. St. Michael Nursing Center, New Detroit Nursing Center, and Barton Nursing Home have closed since November 2008. For the purposes of this analysis, New Detroit and Barton are included because they reported quality measure figures in the database downloaded in April 2010.