

Dedicated/Consistent Caregivers Tip Sheet

WHAT IS IT:

Dedicated/consistent assignment means residents have the same CNAs and nurses caring for them every day whenever these staff are working. **Rotating assignment** means rotating caregivers from one group of residents to the next after a period of time, whether daily, weekly, monthly, or even after 3 months. Best practice is dedicated assignment for housekeeping, activities, social services as well as CNAs and nurses.

WHY DO IT:

The research is now conclusive that dedicated/consistent assignment of CNAs and nurses improves clinical, workforce, and organizational outcomes. The results from 13 research studies show that dedicated assignments lead to enhanced relationships; improved staff attendance; improved staff, resident, and family satisfaction; lower staff turnover; improved accuracy and timeliness of screening and assessments; improved clinical outcomes; and improved quality of life. All the concerns – about staff burn-out, staff not knowing residents not on their assignment, unscheduled absences, and how to take care of the hardest people – exist when rotating staff and can be handled better with dedicated assignments.

Dedicated assignments transform caregiving from “tasks” to relationship-based care. Residents know *who* is taking care of them and feel secure in the consistency of the relationship. They trust that “their CNA” knows just *how* to take care of them. Families share that trust and feel they are in a “partnership” with “their caregiver.”

Dedicated assignments are the foundation for high quality individualized care and good teamwork because staff know residents so well that they can anticipate their needs and preferences. Dedicated CNAs have a finely-tuned awareness of residents’ needs and any changes in their condition. They can catch problems at the earliest warning signs and know how to respond.

Dedicated assignments provide stability – for residents and for staff. With consistent assignments, CNAs know how to plan their work day. Staff then are able to get into a good regular rhythm in their own work that gives them a good regular rhythm with co-workers. CNAs work better as a team when they work with the same co-workers regularly. And the trust between nurses and CNAs is stronger when they work together regularly and when nurses know how well CNAs know their resident, so that if they come with a concern, it is based on that deep knowing.

HOW CONSISTENT ARE YOU NOW? LOOK AT YOUR DATA!

- **Number of Different CNAs Who Care For A Resident:** Here’s an easy way to evaluate the extent to which you currently have consistent assignments. For a sample of residents, look at the CNA documentation for a month. Count how many different CNAs have signed off on care. Compare that with how many CNAs would be involved in a resident’s care if you were at 100% consistency. That number would probably be somewhere between 9 – 12 CNAs, depending on scheduling.

- **Number of Times CNAs are Moved From Their Consistent Assignment:** For a sample of CNAs, count how many times they are moved from their consistent assignment to cover another area due to another employee’s unscheduled absence.

HOW TO DO IT:

Make it Fair and Sensible:

The success of dedicated assignments depends on the effectiveness of the implementation process. It needs to be put in place through a process that ensures fairness of workload, compatibility of assignments, and supervisory practices that foster teamwork, conflict resolution, and problem solving, particularly in regard to care for residents who staff find challenging. It needs to be accompanied by regular team meetings where information about residents is shared among staff so that anyone can be a back-up in caring for a resident.

Assignments must be fair for staff and a good match for residents and for staff, playing to staff’s strengths. For fairness and compatibility, staff members need to be involved in determining assignments, and supervisors need to facilitate adjustments when assignments do not work or the resident population changes. Consider involving residents in choosing their caregivers. For residents that all staff find challenging to care for, consider a paired assignment, and involve all departments in trouble-shooting.

Steps in the Process

Pilot test with your best charge nurse and CNAs so that you can learn from the experience before you take it out to the rest of the organization.

1. **Meet:** Hold a meeting with staff who will be working consistently together.
2. **Scale:** Ask team to make a rating scale for the level of difficulty for each resident.

Resident	Physical	Non-Physical	Total

3. **Rate:** Have the team discuss and rate each resident by that scale.
4. **Select:** Have staff select assignments, making sure that all assignments have a fair mix of residents by degree of difficulty, and are well-matched based on which staff have best relationships with residents. Defer to any resident preferences.
5. **Pair-Up:** Double up for residents staff find physically or emotionally taxing.
6. **Be Fair:** Use a team process to monitor workload and make adjustments as needed, and as residents move out, come in, or have changes in condition.
7. **Trouble-Shoot:** Regularly talk through any situations that staff find challenging, so staff have assistance from co-workers and other clinicians to develop effective strategies to resolve these challenges.
8. **Have Back-Up:** Make consistent assignments of back-ups for when the first line dedicated staff person has time off. Give a solid orientation to any staff serving as back-up, and assure a good introduction is made between the back up and the resident if they don’t know one another.

SYSTEMS TO SECURE DEDICATED ASSIGNMENTS

Your scheduling and hiring practices have an impact on consistency of assignments.

Scheduling for Dedicated Assignments by Providing Dedicated Back-ups: A 4 on 2 off schedule:

Your scheduling has a significant impact on your ability to make the math work to support consistent assignments. David Farrell, with SnF Management in California, uses a 4 days on, 2 days off schedule for CNAs, in which 3 CNAs cover two resident assignments with the third CNA having a split assignment. Here’s how it looks:

CNA	M	T	W	TH	F	SAT	SUN	M	T	W	TH	F	SAT	SUN
Mary	1	1	1	1	Off	Off	1	1	1	1	Off	Off	1	1
Jane	2	2	Off	Off	2	2	2	2	Off	Off	2	2	2	2
Beth	Off	Off	2	2	1	1	Off	Off	2	2	1	2	Off	Off

- Mary has resident assignment 1, Jane has resident assignment 2, and Beth has two days with assignment 1 and two days with assignment 2.

David suggests you invite staff to trial this approach for 3 months. They’ll likely love it and not want to go back because it provides consistency in care and among co-workers. Staff have fewer weekends off than in a traditional alternate weekend schedule but they get real rest. Everyone works weekends, rather than having a separate, disconnected, weekend staff. The stability and consistency work for staff and for residents.

Dedicated Back-ups: A key to success in maintaining consistency of assignments is having consistency of back-ups, such as having “floating” or per diem staff who always work in the same area so they are familiar with the residents and co-workers.

Daily Huddle: Starting and ending each shift with a huddle in which all residents are discussed will give a dedicated back-up staff person valuable information and support.

Maintain Consistency When There Are Staff Absences:

- This is the time to walk the talk. If one group of assignments is affected by an absence, do not compound it by taking another CNA away from her assignment to fill the gap. This will create two groups of residents without their dedicated caregiver. Instead, have an “All Hands on Deck” approach where department heads and nurse managers help out at the busiest times. Ask food service and housekeeping staff to pitch in at meal times. Your actions show your dedication to consistent assignments.
- Develop a pool of consistent back-ups who know the residents they will care for.
- Have a longer huddle at the beginning of the shift to help any CNA who is serving as a substitute be made familiar with the residents they are caring for.

- Make staff assignments by resident group so that the same CNAs always back each other up. Encourage them to work together to work out schedule substitutions for each other so that residents still have consistency.

Hiring for Dedicated Assignments:

Connie McDonald at Glenridge Living Community in Augusta, Maine, hires into resident assignments. Here's how:

- Each 8 hour shift x 7 days = 56 hours
- 56 hours are shared by 2 CNAs, one at 32 hours and one at 24 hours; they alternate weekends
- Note that 32 hours is full-time with benefits at this home
- Hire into 32 hr or 24 hr positions by assignment
- CNAs who share a group of residents can switch days if they need to.
- Have CNAs who want to pick up extra hours become the back-up pool for any co-workers working on the same neighborhood/household/unit

Resident Assignments	32 hrs Days	24 hrs Days	32 hrs PMs	24 hrs PMs	32 hrs. nights	24 hrs. nights
Group One	CNA 1	CNA 2	CNA 3	CNA 4	CNA 5	CNA 6
Group Two	CNA 7	CNA 8	CNA 9	CNA 10	CNA 11	CNA 12
Group Three	CNA 13	CNA 14	CNA 15	CNA 16	CNA 17	CNA 18

Support Dedicated Assignments with Other Organizational Practices:

Consistent assignment works best when it is supported by:

- Leadership to trouble-shoot problems and foster teamwork within/across shifts.
- Collaboration among clinical and operations staff, CNAs and nurses to problem-solve difficulties and maximize opportunities, identify effective interventions and work together to implement them.

Involve Dedicated CNAs in Care Conferences

- Have the care conference in a location easy for CNAs to get to
- When residents are in their ARD period, let CNAs know. (Morningside Heights in NYC changes the CNA assignment sheet to green when residents are in their ARD and adds documentation that mirrors the MDS on Mood and Functional Status)
- At the shift huddle let the CNA know when their resident's care conference will be.
- Have CNAs routinely share about residents at huddles so they are used to doing so.
- Provide guidance to CNAs on what kinds of information are useful to share.
- Have members of the interdisciplinary team use non-technical language.
- When CNAs bring up issues about how residents are doing, discuss and explain.
- Follow-up, closing the loop so that CNAs know that the information they share is used and so they know what they are seeing.

For more information, go to Advancing Excellence - www.nhqualitycampaign.org
See resource section, Goal 2 for consistent assignments.