

MEETING THE LEADERSHIP
CHALLENGE IN LONG-TERM CARE

What You Do Matters

Everyone Stands Up Together

What is it?

“Everyone Stands Up Together” takes the management team’s morning stand-up meeting out to where staff closest to the resident work so that CNAs, nurses, and managers meet at the same time to share information needed by everyone.

Why do it?

This way of meeting together closes the communication gap that many homes experience.

It saves time: Many items typically covered in the management team’s morning stand-up meeting – such as the 24 hour report, unusual occurrences, and care areas such as falls and pressure ulcers – require conversation with CNAs and nurses to learn more about what happened, share information, and problem solve. By having the discussion with the staff who work most directly with the residents and their situations, issues are resolved in that one conversation, instead of the multi-step process of having the morning stand-up meeting, then having the management team track down the CNAs and charge nurses involved, and then having to close the loop by communicating back to the others.

Everyone solves problems together: By having everyone meet together the information shared is heard by those in a position to implement needed changes first hand. When all departments are included, interdepartmental solutions can be arranged on the spot. This way of meeting together routinely gives everyone a way to develop true relational coordination, i.e. communication and relationships where staff actively problem solve together. In this process, communication between departments is seamless.

It builds trust: By meeting together, the staff have a different relationship with those in management. CNAs and nurses can count on the regular communication and know that the issues they need help with will be addressed and resolved. The benefits include:

- Residents’ care needs are better met
- Managers hear about needed changes quickly and can act immediately to resolves issues
- Managers get first-hand knowledge of the workload and workplace dynamics
- Teamwork is lived
- Builds different and better relationships with staff and between staff and management
- Care-planning can be done on the spot as needed

Who is included?

Include all CNAs and nurses from the unit/neighborhood, and all who regularly attend your management meetings, such as nursing management, and the leads for the business office, admissions, food services, housekeeping, maintenance, activities, and rehabilitation services. If you have consistently assigned social workers, activities staff, and housekeepers, include them in their unit’s meeting as well.

How often and how long should the meetings be?

Consider having the meetings two or three times a week, and traveling to each unit/neighborhood. Figure out with your staff what works for your home. Meetings on each unit/neighborhood should be completed in 10 to 15 minutes. (Initially your meetings will be a little longer because people will be a bit unfamiliar

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with the concept. Managers are not used to giving report in this manner, and those who are working directly with residents may not be sure what to bring up.)

Where should the meeting be?

Find a private space on the unit where you can share resident information without concern about HIPAA. You may have a quiet space is available or you may have to look for an empty resident room, space behind the nurses' station, or even the shower room!

What to Include?

1. **Use your morning meeting agenda.** Discuss the 24-hour report, residents' arrivals and departures, and significant happenings staff need to know about or have input on.
2. **Resident care related issues.** Discuss clinical areas such as wounds, nutrition, weights, falls, and pressure ulcers. Once again close the gap between the discussion among a few staff monitoring issues and the staff closest to the residents having the issues.
3. **Residents coming in or leaving.** Let staff know about new residents, including their social history, care needs, and customary routines. Staff will be able to share their thoughts about the best room arrangements, help prepare residents for incoming roommates, and prepare for a good welcome.
4. **Residents in their ARD window.** Let staff know who's care plan meetings are coming up and when, so they can have input and/or attend.
5. **Quality Assurance/Performance Improvement.** Discuss any relevant performance improvement projects that staff can contribute to.

Steps for Successful Implementation

1. **Stay on track.** By having an agenda and sticking to it you establish a routine. It can be easy to get off track and an agenda is a tool for staying on topic. Start with the 24-hour report as a way to discuss any resident-related issues first.
2. **Cover call lights so CNAs and nurses can attend.** Have managers answer call lights and pick up what needs to be done so that those closest to the residents can be a part of the meeting.
3. **Stick to resident care issues.** Don't let the meeting be derailed by issues that may need to be discussed, but are better discussed at another time, such as concerns between staff members. Stick to the agenda, and if other items get brought up, gently bring it back to resident care.
4. **Be reliable and consistent.** Set a schedule and keep to it. Routines that are established where everyone benefits become part of the norm when you are reliable and consistent. People will come to count on being able to share the information they have; you want to be counted on to provide the forum for them to give it.
5. **Support those who are new to this kind of meeting.** While those in management are used to sharing in morning meeting, the staff may be hesitant to give report to the Director of Nursing or the Administrator. Make it easy by guiding them into the sharing. Develop nurses' and CNAs' abilities to share and encourage their sharing.

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6. **Care planning on the spot.** This can be done quickly and efficiently saving staff time and will be far more effective because it becomes a care plan that truly reflects needs.
7. **Keep it constructive.** This is not a time for negativity either by management or by staff. If there are concerns, there are other means of discussing them. This is a time to stand-up together for the work everyone has in common.

Thanks to Stacey Johnson, Director of Nursing, Liz Bomkamp, Asst. Director of Nursing, and Jack Mueller, Administrator at Holy Cross Village at Notre Dame, South Bend, IN for initiating this practice and sharing about it in the film, *Everyone Stands Up Together*, and to American Senior Communities in Indiana for adopting it company wide as the *Gemba Walk*, the Japanese term for “the place where the truth is.”