

Independent Review Worksheet

This sample reflects the thinking of a single examiner and should not necessarily be viewed as a "right" or "wrong" assessment of the applicant.

Item 5.1

List the 4–6 key business/organization factors that are most relevant to this Item.

- 1. SNF Facilities, Seg., & Service Offerings (P.1-1)** - All Medicare and Medicaid certified; 6 facilities offering post-acute care; 1,941 beds, including 48 post-acute beds; SNF Segments:
Long-term medical care for chronic illness (e.g., diabetes, multiple sclerosis, respiratory diseases); Alzheimer's disease and other dementia care;
Traumatic brain injury (TBI) care;
Post-acute/post-hospital care (e.g., follow-up for knee surgery, hip replacement, stroke care, acute illness)
- 2. Mission, Vision, Values (Figure P.1-2)** - Mission: Provide ageless care and timeless living to individuals in a homelike environment that supports their lifestyles and need for care with dignity and respect
Vision: Be among the top 10% of Skilled Nursing Facilities (SNFs) and Assisted Living Facilities (ALFs) and be a top choice for care
Values: Agility, Patience, Empathy, and excellence (APEX)
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- 3. Core Competencies (Figure P.1-2)**
Designing, innovating, and managing facilities to support various lifestyles and deliver excellent clinical outcomes
Developing clinical and service competencies for a caring and exceptional staff
Designing and delivering rehabilitation services to support residents' activities of daily living
Creating an educational environment to support a sense of mastery for residents
- 4. Employee and Workforce Demographics (Figure P.1-3)** - 3,718 employees; F 86%, M 14%;
< 20 1%, 21–39 32%, 40–59 56%, > 60 11% ;
Caucasian 74%, African American 15%, Hispanic 8%, other 3% ;
No HS degree 1%, HS diploma 48% , some college 41%, college degrees 10%;
Nursing: 76% (RN 13%, LPN 10%, CNA 53%), other professional 8%, other technical 3%, service 9%, office/clerical 4% ;
< 1 year, 15%; 1–10 years, 54%; 11–25 years, 25%; < 26 years, 6% ;
Full-time, 53%; part-time, 29%; per diem, 18%
Day, 72%; evening, 16%; night, 12% ;
91% of employees live in communities surrounding facilities;
Physicians from partner groups and under contract, as well as community-based attending physicians and nurse practitioners – applicant views physicians as partners and collaborators who participate in strategic planning and improvement activities;
700 volunteers help residents use technology, administer surveys, transport residents to therapy, support special events at the facilities;
No bargaining units
- 5. Workforce Groups:** Employees, physicians, volunteers
Engagement Factors: Good work environment; Good benefits; Positive relationships with coworkers; Pride in the organization; •A voice in resident care
- 6. Workforce Health and Safety Requirements** - Protection for exposure to communicable diseases; Protection form injury while assisting and lifting residents; Support in managing residents (including agitated residents); Support for a healthy lifestyle; A voice in resident care

List approximately 6 of the most important strengths and opportunities for improvement (OFIs) for this Item in order of their importance to the applicant. Base these strengths and OFIs on the applicant's response to the Criteria requirements and its key business/organization factors. Refer to figures when appropriate.

- In the first column, record the numbers of the most relevant key factor(s).
- In the ADLI columns, check the process evaluation factors that your statement addresses:
A = Approach D = Deployment L = Learning I = Integration
- In the last column, record the Item reference(s) for the strengths and gaps/OFIs.

Strengths/OFIs should be placed in order of importance to the applicant.

KF Ref.	++	Strengths	As Evidenced by ...	A	D	L	I	Item Ref.
1, 2, 3, 4, 5		<p>Applicant uses interdisciplinary Collaborative Care Teams to organize employees and reinforce resident and health care focus</p> <p>Workforce requirements: positive relationships with coworkers, voice in resident care</p> <p>Resident requirement: resident-centered care and services</p> <p>Family requirement: attentive staff</p>	Daily rounds and huddles to plan care and identify resident needs	X			X	a(3)
2, 3, 4		Continues assessment and monitoring of workforce capability and capacity is supported by multiple processes to ensure adequate staffing and capabilities are continuously available. Formal plans are developed during the SPP and aligned with each employee's Performance Goal Plan based on information gathered from the APEX Performance Management System. Daily adjustments are made based on acuity levels to support individualized care delivery by interdisciplinary Collaborative Care Teams.	<p>Formal plans created during annual budget planning</p> <p>APEX scorecard results monitored to identify capacity and future needs</p> <p>2005 implementation of acuity system</p> <p>Capability assessments: APEX Performance Management System, quality monitoring, skill and competency assessments, peer evaluations, and resident satisfaction scores</p> <p>Float pool in SNFs; universal cross-trained employee (?); recreation therapists cross-trained as CNAs</p> <p>2006 implemented interdisciplinary Collaborative Care Teams (RN case mgr, pharmacist, CNA, OT, dietary, housekeeper, maintenance and technology team members)</p> <p>Daily huddle to plan personal and environmental needs of residents</p> <p>Results on annual Caring Colleagues survey have increased to top decile levels since implementation</p> <p>Individual APEX Performance Goal Plans linked to facility strategic and action plans linked to incentive pay</p>	X		X	X	a(1,3)
4,5,6		The applicant organizes support of the workforce via services, benefits and policies around four identified factors related to employee satisfaction and	Cafeteria plan: medical, dental, and prescription insurance; includes domestic partner coverage; disability insurance, retirement plans; life insurance flexible spending accounts,	X			X	b(2)

		engagement [P.1a (3)]. The array of offerings cover the major areas identified and allows for individualization to support the needs of a diverse workforce and contribute to employee retention, a recognized strategic advantage.	discounts on landline and wireless telephone services; free parking Incentives for precepting-tuition waivers EAP available for employees and volunteers Volunteers who contribute at least 100 hours of service/year and residents may audit courses under tuition waivers					
2,4,5,6		Systematic, integrated approach to employee health, & safety	Exec dir of each facility=risk management/safety officer, serve on systemwide Safety Committee Review all facility/system health, safety, security policies and procedures Meet monthly to review key measures APEX goals Integrated with daily rounds by Collaborative Care Teams Use of data to drive improvements -- safety training, smoking cessation	X			X	b(1)

KF	--	Gaps and OFIs	As Evidenced by ...	A	D	L	I	Item Ref.
1, 2, 3, 4, 6	X	The applicant's approaches to manage workforce capability and capacity and maintain a safe, secure and supportive work climate do not address physicians.	No discussion of physicians Unclear if security is an issue at some of the locations (e.g. ALFs) Approach for capacity planning is somewhat unclear – they just post the positions and move people around?		X			a,b
4, 5, 6		Unclear about diversity: A systematic approach to recruit, hire, place, and retain members of the workforce that represent the diversity of the ideas, culture and thinking of the community and residents is not evident. Addressing these issues may support the applicant's efforts to retain the strategic advantage of high employee retention.	Want to attract employees who demonstrate passion for care of individuals who need SNF and other assistance but no process is described Expected to demonstrate APEX values; recruits locally Hiring and orientation developed at corporate level and managed by corporate HR Recruitment methods include fairs, employee referrals; advertising; search firms, and local high schools and universities; civic organizations All attend NEO for system and facility Diverse needs of segments: Hispanic staff, physicians, students, and volunteers?	X				a(2)

7		It is unclear how the applicant's approaches to work accomplishment and workforce change management address the strategic challenge of right-sizing for performance excellence.	No evidence				X	a(3-4)

Concisely state the feedback in the first sentence of the comment. Provide additional key evidence such as 1–2 examples or evidence that addresses the most important evaluation factors (e.g., approach, deployment, learning, or integration). Limit the length of the comment to less than 75 words or 500 characters of text.

Double ?	Feedback-Ready Comments (one strength, one OFI)	Item Ref.
	A system-wide Safety Committee composed of executive directors from each facility supports employee health, safety, and security through review of system and facility policies, procedures and related measures, and identification of best practices. Collaborative Care Teams and the APEX performance measurement system reinforce a system and facility focus on meeting key workforce health and safety requirements.	b(1)
X	The applicant's approaches to managing workforce capability and capacity, as well as maintaining a safe, secure, and supportive work climate, do not address physicians. As examples, the applicant does not appear to address physician competency in assessing workforce capability needs at newly acquired facilities, it is not clear how physicians are included in capacity planning, and it is not evident that physician workforce key requirements have been identified. Without including physicians, the applicant may miss opportunities to prepare for anticipated growth and deliver excellent outcomes.	a,b

Scoring Range

- 0–5%
- 10–25%
- 30–45%
- 50–65%
- 70–85%
- 90–100%

Percentage Score: 50%

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