As more long-term care organizations transition into the household model and focus on the culture within their organizations, initial focus on building team and empowering staff is paramount. Stable and active staffing enhances an organization’s ability to live its culture and fulfill its mission. At the same time, household teams must be based on a financially feasible model to preserve the long-term sustainability of the organization. This session will discuss a household staffing model that has enabled Meadowlark Hills to better deliver resident-directed service. The Household Coordinator role will be a focal point of the discussion.
Meadowlark Hills... Who we are.

Objective #1: Develop consistent staffing patterns.
- Basic staffing model: roles of team members
- Training & skills checklists

Objective #2: Discuss the role of the Household and Clinical Coordinator.
- Job descriptions
- Skills required, training, & role/team development

Objective #3: Discuss the financial components of this staffing model.
- Hours per resident day
- Reporting Tools
- Wage structure

Benefits of the model

Q&A and Evaluations

Meadowlark Hills is a not-for-profit CCRC located in Manhattan, KS
- Founded by six local churches in 1975
- Independent Living opened in 1980
- Healthcare opened in 1982
- Special Care opened in 1985
### Meadowlark Hills... Who we are.

**Expansion in 2001**
- 50 IL Apartments and 25 IL Duplexes
- 24 AL Apartments
- 14 AL Memory Support Apartments
- Transition to Household Model in Healthcare

**Expanded again in 2008**
- 2 Healthcare Houses, 1 of which is our transitional care house
- 2 IL Duplexes
- Physician Practice
- Community Center

**Currently:**
- 164 IL Apartments/Duplexes
- 2 AL Houses
  - Miller – 24 Apartments
  - Tinklin – 14 Memory Support Apartments
- 7 Healthcare Houses
  - 4 LTC Houses (80 beds)
  - 2 Special Care Houses (33 beds)
  - 1 TC house (21 beds)
Meadowlark Hills… Who we are.

Currently:
- Home Health Agency
- Physician Practice
- Outpatient Therapy
- Parkinson’s Program
- Fitness & Massage Services
- Restaurant & Pub
- Grosh Cinema

Objective #1
Develop consistent staffing patterns
Roles of each team member
- Homemaker
- Enrichment Aide
- CNA
- CMA
- Household Nurse
- Clinical Coordinator
- Household Coordinator

Training Grids & Skills Checklists
- Each role is trained on every role within the house up to their certification level so each person can perform all of the tasks their certification allows.
- Examples of Training Schedule:
  - CNA
  - Household Nurse
- Skills Checklist

Household Staffing Model
Objective #1
Develop consistent staffing patterns.
### Meadowlark Hills

#### RN/LPN SKILLS CHECKLIST

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**Comments:** __________________________________________________________________________
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I verify that I have completed the Nurse Skills Checklist. I realize that I am held responsible for all subject matter contained on the checklist.

---

Employee Signature/Date

Preceptor Initials: ____________  Preceptor Name: ____________

Clinical Coordinator Signature/Date

Preceptor Signature: ___________________________  ____________

(To be reviewed with Meadowlark RN/LPN or Clinical Director Manager)
Objective #2
Discuss the role of the Household & Clinical Coordinator

Job Description: Household Coordinator

Position Summary
The Household Coordinator facilitates a self-lead team, ensures compliance within the allocated budget, and emphasizes a high quality of care through appropriate staffing models, and increased involvement of daily life activities within the household. The Household Coordinator ensures, with the clinical coordinator, that each resident receives daily nursing care and other desired services in accordance with the resident’s assessment, choices, and care plan. The Household Coordinator also leads housekeeping, laundry, maintenance, and the social and recreational services directly affecting the residents’ environment, assuring that the household is maintained in a clean, safe, comfortable, and orderly manner. Such leadership must be in accordance with current federal, state, and local standards, policies, and regulations that govern our facility to ensure that the highest degree of quality care is maintained at all times. The Household Coordinator leads by example, maintaining a professional work relationship with the household team and residents, and remains knowledgeable of residents’ responsibilities and rights, including the right to determine their own preferences.

Essential Job Functions
- Facilitates and leads the household team while supporting a self-lead team.
- Facilitates healthy relationships within the household and rest of organization; serves as a resource to team members, families, and residents alike while being a positive role model and service area.
- Leads household within the allocated budget (billing processes, payroll variance reporting, time and attendance, and budget monitoring). Outputs are measured based on efficiency and productivity. Household Staffing Model
- Ensures proper household team education and competencies, (in-services, trainings, orientation) as well as facilities, policies, procedures and operations in the household are followed in compliance according to federal, state, local, and Meadowlark Hills regulations.
- Maintains a high quality of care through appropriate team models (self-scheduling, skill utilization and development).
- Performs leadership responsibilities including but not limited to planning, delegating, and evaluating work. Coordinates, monitors, and evaluates household team members. Addresses complaints and resolves concerns. Participates in team problem-solving methods, and mediates conflict resolution among household team members, residents, and family members as needed.
Household Staffing Model

Objective #2
Discuss the role of the Household & Clinical Coordinator.

- Job Description: Household Coordinator

  Essential Job Functions (continued)
  - Conducts performance evaluations, providing timely feedback through coaching and counseling, celebrating individual and team success.
  - Maintains working relationships and promotes residents’ well-being, and advocates for resident and family preferences through clear and effective communication.
  - Observes the status of residents as necessary, recognizes early signs of changing conditions, and alerts clinical team members immediately.
  - Maintains a safe, comfortable, and functional home environment by assessing the household for potential hazards, encouraging continuous quality improvement.
  - Supports representation of household team on all appropriate councils, including sending a representative when unavailable themselves, investigates and reports all incidents and accidents, observes the team for safe work habits, and addresses needs and concerns.

Household Staffing Model

Objective #2
Discuss the role of the Household & Clinical Coordinator.

- Job Description: Household Coordinator

  Essential Job Functions (continued)
  - Responsible for staff scheduling processes within the house and for staffing processes including but not limited to hiring, terminating, communication with Human Resources for staffing needs, posting positions, etc.
  - Uses confidentiality and proper chain of command when passing along information, changes, or concerns of residents.
  - Personally responsible and held accountable for following Meadowbrook Hills’ mission and values while maintaining and living out our philosophy of person-centered care - person first.

Household Staffing Model

Objective #2
Discuss the role of the Household & Clinical Coordinator.

- Job Description: Clinical Coordinator

  POSITION SUMMARY
  The Clinical/MDS Coordinator provides clinical leadership to the households ensuring that the mission, vision, and values of the organization are supported through the clinical services given. The Clinical/MDS Coordinator participates in planning, organizing, directing and facilitating the operations of the household, ensuring regulatory compliance while nurturing a person-centered and resident-directed culture. The Clinical/MDS Coordinator ensures timely and accurate coordination and completion of the MDS (Medical Data Set) and care plans. The Clinical/MDS Coordinator provides each resident with professional licensed nursing assessments and evaluations, works with Household Coordinators and coordinates their care with other household team members.
**Objective #2**

**Discuss the role of the Household & Clinical Coordinator.**

**Job Description: Clinical Coordinator**

**Essential Job Functions**

- Responsible for all clinical leadership, clinical outcomes and functions in the household. Guides the care planning process ensuring all residents’ needs and preferences are addressed in his/her plan of care.
- Guides the RAI process by working with all disciplines to ensure accurate, timely, and complete record keeping.
- Ensures the household team is providing medical treatment in a manner that honors resident preferences and individuality. Ensures all resident rights are upheld, including the choice of when and how medications are administered.
- Assures that all documentation, medication administration, nursing care, safety, sanitation, team development, RAI processing, materials management, CQI, and resident rights are in compliance with Meadowlark Hills’ standards.
- Provides leadership to the clinical team from all households on specific areas of clinical accountability; specific accountability may include infection control, safety, wound management, falls, RAI processing, or other areas as determined by nurse council.
- Guides household clinical team to ensure proper hiring, orientation, training, clinical competency, coaching, educating, counseling and performance evaluations are maintained in a consistent supportive manner and professional standards of practice, while providing productive feedback.
- Assures regulatory compliance by encouraging appropriate record keeping and charting in all households and by maintaining appropriate files to document compliance on specific areas of clinical accountability.
- Guides the clinical component of continuous quality improvement in the household with support of a systemic approach to quality care. Ensures that all households participate in quality improvement measurements, addressing issues and concerns, and following up in a timely manner.
- Performs professional audits and observations to confirm the competency of all household guides and household team members.
Objective #2
Discuss the role of the Household & Clinical Coordinator.

Job Description: Clinical Coordinator

Essential Job Functions (continued)

- Sees leadership of the household team as a role of service, rather than one of authority. Seeks to support team member’s ability to succeed. Willing to do any task needed, including those that may seem menial or unpleasant. Advocates for resident preferences when communicating with physician or other medical personnel.
- Oversees residents’ changing medical needs and able to act swiftly without regard to amount of time or effort it will require. Recognizes early signs of changing conditions and uses all available and appropriate resources to resolve needs.
- Uses confidentiality and proper chain of command when passing along information, changes, or concerns of residents.
- Personally responsible and held accountable for following Meadowlark Hills’ mission and values while maintaining and living out our philosophy of person centered care – person first.

Household Staffing Model

Objective #2
Discuss the role of the Household & Clinical Coordinator.

- Skills we look for when hiring
- Training & Orientation
- The Household & Clinical Coordinator partnership
- Household team development
- Organizational development of Household and Clinical Coordinator teams

Household Staffing Model

Objective #3
Discuss the financial components of this staffing model
Objective #3
Discuss the financial components of this staffing model.

- Hours Per Resident Day (HPRD)
  - Total Hours Worked / Total Residents
  - Example:
    - 20 Residents in House
    - 3 Aides and 1 Nurse on all shifts
    - 96 hours (4 staff x 24 hours) / 20 residents = 4.80

- Factors to Consider
  - Area of living and the needs of the residents in those areas
  - Size and physical layout of houses

Factors to Consider
- Area of living and the needs of the residents in those areas
- Size and physical layout of houses

Household Staffing Model

Objective #3
Discuss the financial components of this staffing model.

- Census Staffing
  - Required in order to keep the HPRD at budgeted levels in times of lower census
  - Organizational decision
    - Impact on staff morale/turnover and resident life
  - Use of staffing grids to simplify for staff member responsible for scheduling
    - Breakdown for each specific shift at each census level

Household Staffing Model

Objective #3
Discuss the financial components of this staffing model.

- Basis census staffing grid

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Objective #3
Discuss the financial components of this staffing model.

- Payroll Reporting
  - Largest expense for any organization so it is important to know where you stand on a daily, weekly, monthly basis.
  - Example

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<table>
<thead>
<tr>
<th>Household Staffing Model</th>
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Example

- Household Staffing Model
  - Strategies
    - Stand by scheduling for call-offs/no-shows
    - PRN usage
    - Avoid overtime
    - Avoid paying higher wage position for role needed
    - Use Household & Clinical Coordinators to fills shifts
    - Consistent staffing – proactive hiring practices
Objective #3
Discuss the financial components of this staffing model.

- Wage structure for Household & Clinical Coordinators
  - Base Pay
  - Area of Living
    - Assisted Living
    - Healthcare (Long-Term Care)
    - Assisted Living Memory Support
    - Transitional Care
    - Healthcare Memory Support
  - House Differential
  - Years of Service

Benefits of This Model

- Universal Worker Concept
  - Re-allocation of job duties and positions
    - Housekeeper, Activities Aide, Restorative Aide, Cooks
  - Affect on household culture

- Self-Led Teams
  - Empowered to make decisions
  - Leadership teams

- General Financial Performance
  - Quality of care and service leads to high resident/family satisfaction
  - Equals higher occupancy rates
  - Rates

Questions & Evaluations