

Success Story:

Quality Improvement Processes Better Services and Lead to Increased Resident and Family Satisfaction

Through quality improvement methods and tools, the Powell Valley Care Center of Wyoming improved its laundry services to increase satisfaction among facility residents and their families.

Background

The Powell Valley Care Center is a 100-bed facility located in Northern Wyoming in the community of Powell, located roughly 75 miles from the Northeast entrance of Yellowstone National Park. The Powell Valley Care Center's Quality Assurance Performance Improvement (QAPI) committee identified the need to increase resident satisfaction and decrease the amount of resident items lost during the laundry process.

Using measureable data from surveys that started in 2013, the facility realized laundry was one of the top three areas to improve. The 2015 survey had the lowest scoring for laundry services since the measurement began, which spurred the facility to take action.

Forming a committee to focus on needed changes

In May of 2015 the Powell facility created a laundry committee to focus on remedying the issue. Lorraine Steppe, director of social services and recreation, was tasked with leading the committee, a natural fit, since she has close involvement with the facility's resident council and was familiar with the issue.

Steppe recruited other members to the committee who were open to change and viewed things from different perspectives. The transportation aide, recreation coordinator, plant operator, director of nursing and manager of housekeeping/laundry were brought in for their input. The committee also included a resident.

"We were hoping the resident would be willing to help us and could provide authentic first-hand information on the problem," Steppe said. "She agreed, and she was an asset to the group."

Quality improvement tools and processes to the rescue

Mountain-Pacific's Wyoming State Director Pat Fritz visited the facility and provided a day-long training for the staff about quality improvement methodologies and tools. That training proved valuable to the Powell Valley Care Center, and many of the methodologies and tools the team learned have been used across a spectrum of projects.

Throughout Powell's improvement processes they used SMART (Specific, Measureable, Action-oriented, Realistic and Time-bound) goals to evaluate and measure the problems and solutions. Using the SMART

goals methodology is a way to measure goals and outcomes and can be applied to numerous applications or projects.

The team also used another quality improvement method called Plan, Do, Study, Act (PDSA), often called an iterative lifecycle, in unison with the SMART Goals. The PDSA cycle is a systematic series of steps to test changes, carry out tests, observe and learn from the changes to finally determine what modifications should be made to improve outcomes. The committee methodically explored and detailed options to improve the delivery of services using the PDSA cycle and SMART criteria.

To capture and document the processes, the committee used a performance improvement plan (PIP), which was provided by Mountain-Pacific. The PIP is a template that lists the committee members, has start and end dates and details the outcomes of the processes.

“It has become my gold standard,” Steppe said about the PIP. “It held us accountable for the projects that each individual member was working on. The PIP also helped our meetings. People knew what they were supposed to be doing, and it reduced our meeting times, too.”

The committee explored and detailed options in the PIP which could improve services, they were:

- Tracking missing items using an electronic tracking method
- Creating missing items postcards for tracking them
- Holding lost items, explored how long to hold them
- Examining policies and procedures for laundry handling
- Looking at the way personal effects are inventoried
- Laundry marking at time of move in
- Providing markers to families (which was aborted due to low use)
- Using iron-on labels (labels fell off and others in the industry use markers)
- Double checking laundry with names on rooms signs
- Providing staff education on double-checking laundry placement
- Studying the process of how laundry is delivered (e.g., double checking names, greeting residents, returning if the resident is not in his or her room)
- Employing an unclaimed clothing rack (which was discontinued due to dignity issues)
- Using a “found items” board
- Using mesh laundry bags
- Conducting closet checks to ensure the right items were in the right location

After implementing various changes in the process of delivering laundry services, staff determined the mesh bags were the solution to their issue. The committee chose two rooms and four residents to pilot the solution. After the mesh bags worked successfully, they rolled the method out to the entire hallway and eventually the entire facility. The residents preferred the mesh bags, and laundry services thought the bags were more efficient as well.

Communication throughout the process was vital

Throughout the process, the committee communicated with all relevant stakeholders to keep everyone apprised of the project's progress by recruiting one of the director's of nursing to inform staffers. Even between committee meetings, the committee communicated with each other to keep everyone in the loop and to keep the momentum of the project.

The committee also reported details and updates in their newsletter to residents, families and staffers. The resident council was also updated as well as the resident services team, and committee members attended nursing meetings and provided information on training and process changes as they happened.

The PIP was also used as a vehicle to communicate progress to the facility's leaders, the QAPI committee and medical directors. The document helps to monitor progress and outcomes, hold people accountable for their work and communicate to others while work happens.

Greater resident and family satisfaction obtained

The outcome of the of the laundry committee's work created a measurable success—a 10 percent gain in the 2016 resident satisfaction survey.

"The residents and their families were very surprised that we were going to the effort we did," Steppe said. "Even if their laundry went missing, the residents were more forgiving."

Staff also saw the value of the process. Developing and implementing the processes took time, but Steppe kept the momentum while bringing in some humor. At one point, she draped a laundry line around herself with clothes pinned to it to work with the floor nursing staff and housekeeping. Other departments did skits about the missing laundry. These approaches lightened the mood and made the discussions fun. In time, staff at the facility saw the value of the processes and the end result.

"People were very dedicated and very proud," Steppe said. "We were the first people who increased the score this much. This was really their work. There was not a person who was on our committee who didn't work. People were honored to be on this committee."

The committee is still moving forward to improve services even more.

Lessons learned and advice to others

Steppe said the biggest lesson learned is to fully engage frontline staff and bring a good representative from that staff to the committee. They did not have a frontline staff on the committee, and that may have stunted the work and created disappointment throughout the committee.

Getting started on the process and trusting the process itself was an obstacle, too. Steppe recommends questioning everything and trying different solutions during the process while being consistent and taking the time to meet regularly.

"You cannot wait one, three or six months to start your improvement plans. Start now," said Steppe.

"If you have not done performance improvement or quality assurance before, get a hold of a PIP guide

and start writing. Get a ‘champion’ who understands or feels a sense of urgency. Find champions who are willing to stand strong while everyone else rolls their eyes and dismisses the efforts of the group to instill changes, should this happen.”

The 2016 satisfaction survey said 91 percent of families rate overall satisfaction as “excellent” or “good,” and 95 percent of residents and families reported they would recommend Powell Valley Care Center. These are the highest ratings in the facility’s history.

About Mountain-Pacific Quality Health—Mountain-Pacific is a 501(c)(3) nonprofit corporation and holds federal and state contracts that allow its staff to oversee the quality of care for Medicare and Medicaid members. Mountain-Pacific works within its region (Montana, Wyoming, Alaska, Hawaii and the U.S. Pacific Territories of Guam and American Samoa and the Commonwealth of the Northern Mariana Islands) to help improve the delivery of health care and the systems that provide it. Mountain-Pacific’s goal is to increase access to high-quality health care that is affordable, safe and of value to the patients they serve. www.mpqhf.org