

The Impact of Training on Long Term Care Quality

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PRN

(Specific to In-Home Care)

PRN: Introduction

- Public Contractor since 1993
- Providing Fundamentals of Caregiving since 1997
- Participation in ADSA Training Steering Committee
- Assisted ADSA with Revision of RFOC Manual
- Assisted HCQA with Revision of the Safety Training Manual

Introduction Continued

- Trained over 30,500 in the Fundamentals of Caregiving and 56,000 in Various CE Subjects
- Provides training in Adams, Chelan, Clark, Douglas, Grant, King, Lewis, Lincoln, Mason, Thurston, Okanogan & Pierce Counties
- Offers RFOC in 13 Languages
- Has conducted over 620 RFOC classes in a language other than English.

Students Trained in FY '06-'07

	RFOC	MFOC	CE	Totals
English	2,662	151	7,011	9,824
Amharic	3			3
ASL	1		1	2
Bosnian			6	6
Cambodian	24		175	199
Cantonese	53		158	211
Farsi	2		2	4
Korean	180		529	709
Laotian	1		60	61
Mandarin	36		58	94
Russian	266		1,143	1,409
Serbian	1			1
Somali	70		59	129
Spanish	31		99	130
Tagalog	4		20	24
Vietnamese	118		489	607
Totals	3,452	151	9,810	13,413

Impact of In-Class Training on Quality of Care

- Transfer of Knowledge
 - Facts
 - Do's & Don'ts
 - Physical Skills
- Support for Caregivers
 - Ask questions specific to their client's needs
 - Good opportunity to meet other caregivers and establish positive and supportive relationships
 - Caregivers coordinate their trainings to be together
 - Spontaneous formation of support groups

Impact of In-Class Training on Quality of Care

- Qualification & Screening Process
 - RFOC Instructors
 - 15 of 16 are RNs: Korean, Mandarin, Vietnamese speakers.
 - 16th is Russian speaker trained as an RN in Russia
 - Train the Trainer: Principles of Adult Learning
 - Orientation
 - Formal: Written & Skills Testing per ADSA Standards
 - Informal: Early Identification of Behaviors of Concern

Behaviors of Concern

- Signs & Symptoms of Caregiver Stress & Burn Out
- Disruptive to Learning Environment
- Disrespectful to other Attendees & Instructor
- Anger Management / Use of Profanity
- Aggressive / Intimidating / Threatening
- Impersonation of Another

Behaviors of Concern: Continued

- Falsification of Records
- False Reports
- Substance Abuse
- No Shows to Training
- Persistent Tardiness
- Other Inappropriate Behaviors

Impact per Caregivers' Evaluations

- Common Themes
 - Overall: Very Positive
 - Didn't want to go, but glad I went
 - Will help me provide better care
 - Learned a lot
 - Wish I'd taken this sooner
 - Thank you for offering this training in my language
 - All content was valuable
- Treinen Associates' Summary of Caregiver Training Evaluation Summaries

Comments per Caregivers

- More time for: discussions, skills practice, group work, etc. Tends to Vary between Urban & Rural. Not necessarily more class time.
- Manage Disruptive Attendees
- Moderate Attendees Who Dominate Discussions
- Recommendations for New CE Topics
- Classroom Environment, Locations and Schedules

Impact per Consumers/Clients

- Objective Data From:
 - Clients / Consumers
 - ADSA
 - Adult Protective Services
 - Area Agencies on Aging
 - Department of Health
 - Division of Developmental Disabilities
 - Home Care Quality Authority: WSU Study
 - Office of State Ombudsman
 - Summary of findings by Treinen Associates, Sept 10th, 2007.

Recommendations

- Other than English Speakers are and will most likely remain an integral and valuable component of in-home based long term care. Any certification process must address this important issue. English only is not a valid option.
- Access to Training for Rural Areas: consider a cost reimbursement process vs. per student.

Recommendations (Cont.)

- Discussion regarding a closed loop Quality Assurance Program for in-home care:
 - On-site supervisor/trainer component
 - Formal evaluations of caregiver by Consumers/Clients
 - Provision for Consumers/Clients who have a limited ability to manage their own care
 - On-site evaluations of care by unbiased 3rd party professional free from Conflicts of Interest: ADSA, AAA, DDD, Dept. of Health, Ombudsman's Office
 - Identify needs best addressed through training
 - Capture of Q/A Data in electronic form for Analysis & Reporting

Recommendations (Cont.)

- Content and duration of current 28 hour RFOC course appears to be appropriate. May consider merging 4 hour Safety Training into RFOC for in-home caregivers.
- Allow Case Managers to authorize additional training above current state guidelines based upon Consumer/Client identified needs. First year of caregiving is critical.

Impact of Training on Quality

Summary

- Positive per caregivers
- Positive per clients/consumers
- Good opportunity for early identification of Problem Behaviors
- RFOC is a good start. Additional training focused on specific client/consumer needs during first year would be helpful.

Contact Information

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