



The Business of Caregiving



Ararat Nursing Facility

Overview*

Organization: Ararat Nursing Facility is a 196-bed skilled nursing facility with 215 staff, 100 of whom are CNAs. The nursing facility was established in 1993 under the auspices of the Ararat Home, a not-for-profit organization founded in 1949 to care for elderly Armenians in Southern California. Of resident stays, 95 percent are funded through Medi-Cal (California’s Medicaid program).

Business challenge: Ararat’s primary aim is to create an environment consistent with its core values of compassion, dignity, respect, integrity, self-determination/choice, empowerment, flexibility, and vision of excellence. Success depends upon high-quality staff and services.

Resources/technical support: Some grant funding for CNA training for staff (\$1,000 per trainee). Ararat has signed the Aging Services of California’s and AAHSA’s Quality First Covenant (reinforces the commitment that not-for-profit aging services providers must maximize quality of care and quality of life for older adults).

Initiative	Description
PIQI (Performance Improvement – Quality Improvement)	The overarching strategy that encompasses all of the approaches outlined below. Ararat’s PIQI encourages and empowers all staff to address the performance and quality of Ararat’s systems and processes. A cross-functional/cross-departmental PIQI committee meets quarterly to review data and develop action plans.
Career ladder	A five-tiered career ladder for CNAs with associated hourly wage increases of 50 cents for each level. Ararat managers look for opportunities to promote from within.
Resident-Centered Care Teams	Resident-centered care teams provide care to a consistent group of residents. Each of two units has smaller care teams comprised of a charge nurse, CNAs, and representatives from social services, food and nutritional services, laundry, environmental services, and therapeutic activities. Teams are empowered to handle operational issues and scheduling within the team. CNAs care for the same residents consistently (consistent assignment), which enables them to fully understand and honor resident preferences.
Multidisciplinary meetings	Care conference meetings for each resident take place quarterly. The meetings are facilitated by the executive director and attended by the resident and family (if they choose to attend), the director of clinical services, the CNA assigned to the resident, the restorative nurse, and representatives from nutritional services, social services, and activities. Each resident has an “I Care” plan that specifies his or her preferences, interests, and care needs (medical, nursing, psychosocial, activities).
Recognition	Ararat has established many systems to recognize the accomplishments and contributions of staff: letters to staff from the executive director; “pins of excellence” awarded at daily stand-up meetings; “wall of fame” with plaques honoring employees of the month; as well as ongoing acknowledgements of birthdays, weddings, anniversaries, and other significant events for staff and their families.
Coaching, mentoring, 360 evaluations	Ararat leadership’s style is one of coaching, mentoring, and modeling good practices, as well as establishing trust and open communication. Employees are given the opportunity to provide anonymous written feedback to leadership on their performance. CNAs evaluate their charge nurse.
Monthly Status Reports	Resident-centered care managers and team leaders submit monthly status reports to the executive director. Reports include observations regarding residents, family members, and team members. They are a mechanism for communicating staff accomplishments and any PIQI suggestions. They also ask the employee to reflect on his or her own stress level, leadership practices, and professional growth.

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Initiative	Description
In-service training	All staff receive training in conflict resolution. All care staff receive training to sensitize them to the experience of elders living in a congregate care environment.
Benefits	Annual merit wage increases. Health insurance. Retirement plans. Vacation and paid time off. Flexible schedules. Tuition assistance.
Employer Outcomes	
<ul style="list-style-type: none"> Consistently low turnover: 3% overall. CNA turnover 0% to 4%. Occupancy rate is 99%-100% with waitlist Increased efficiencies as employees are empowered to solve problems, freeing up leadership to focus on broader strategy 	
Employee Outcomes	
<ul style="list-style-type: none"> Consistently high employee satisfaction, measured by annual surveys – 95% on average Career advancement opportunities with associated wage increase. For CNAs, 50 cent hourly increase per level; 42% of CNAs have climbed the career ladder 	
Resident Outcomes	
<ul style="list-style-type: none"> High resident and family satisfaction (98-100% family satisfaction on annual satisfaction surveys) Five out of five stars on CMS's Nursing Home Compare rating system Patient outcome measures (e.g., pressure sores, pain, urinary tract infections) that outperform state and national averages With a goal of a restraint-free environment, restraint rate has been reduced to 0% (prior to 1996, rate approached 40%) Low rate of "hypnotic" (sleeping aide) use: only 6 out of 196 residents (prior to 1996, rate was 20%) 	
Community Recognition	
<p>Among Ararat Nursing Facility's many awards:</p> <ul style="list-style-type: none"> The National Association Directors of Nursing Administration in Long Term Care, Excellence in Service Award 2003–2008 Aging Services, Quality First Award, 2008 California Association of Homes and Services for the Aging (CAHSA), Quality First Award, 2006 American Society on Aging Extendicare Award, Innovative Programs in Recruitment, Retention and Promotion of CNAs, 2003 California Association of Health Facilities, Excellence in Programming Award, 2003 American Psychiatric Nurses Association, Best Practices Award for Behavioral Management Program for Dementia, 2002 California Department of Health Services, Exemplary Care of Residents, 2002 (cash award of \$1500 to each full-time employee; \$700 to each part-time employee) California Department of Health Services, Best Practices Award, 1998, 2002 Advance for Providers of Post-Acute Care, Best Nursing Home Team, 2001 	

*NOTE: To read the full case study go to www.PHInational.org/casestudies/ararat.

The Business of Caregiving is a series of case studies that showcases exemplary employers in the eldercare/disability services industry. The organizations featured in this series have been selected to illustrate a "quality care through quality jobs" approach to sustaining and growing a long-term care business. All case studies, along with slide shows and podcasts, are available online at: www.PHInational.org/casestudies. The development of these case studies, along with web-based best practice descriptions, have been funded by the Hitachi Foundation (www.HitachiFoundation.org).



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