5th Annual Leadership Compendium

The Best Student Leadership Projects of 2006
Forward

We are pleased to be publishing our 5th annual Leadership Compendium, highlighting the best student leadership projects of 2006. One growth area for our students during the practicum year is focused in their leadership and management development. Our program has a strong commitment to allowing students to gain management experience by taking on significant projects during their practicum, and they have the opportunity to implement and complete projects of their own choosing related to advancing internal and external operations, improving customer service, and engaging in the execution of innovative new ideas in the field of health care.

The history of our program over the past 30 years has reflected a positive and respectful relationship with all of our practicum sites. The Center for Health and Aging Services Excellence (CHASE) is committed to putting resources toward serving health and aging service organizations as valued partners as we all continue to “reach new heights” of educating young professionals in this field. It is our hope that you will not only be impressed with the caliber of projects our students are undertaking at your facilities, but may also be inspired to implement similar projects.

We are continuing to provide this publication to our primary audience of participating practicum sites and students for use as a reference for current or future practicum students. This year we are also expanding the distribution to other colleagues and interested parties in the field as a potential tool to stimulate the ongoing exchanged of ideas. We appreciate our ongoing relationship with the health and aging services field and our practicum partners as we continue to strive to meet the future leadership needs of this noble profession.

Dr. Douglas Olson, Associate Professor & Dr. Jennifer Johs-Artisensi, Assistant Professor
Health Care Administration Faculty at the University of Wisconsin-Eau Claire

Edited by: Meredith Wolf
Comments provided by Dr. Douglas Olson and Dr. Jennifer Johs-Artisensi
## Table of Contents

Grant Project: Jennifer Allen .................................................. 1  
Survey Cabinet Leadership Project: Lindsey Arnold ...................... 3  
Spiritual Care Endowment Fund: Allan Barr ................................ 5  
Technology Update: Julie Bindl .............................................. 8  
Nurse Scheduling: Jordan Bruce ............................................. 11  
Resident Relocation: Sara Dzienkowski .................................... 13  
Social Accountability: Megan Fitzgerald .................................. 16  
Hug Fund: Danielle Hellenbrand ........................................... 19  
Dining Service Protocol: Heather Litzkow ................................ 21  
Practicum Student Best Practices Book: Ashley Misner ............... 24  
Summer Luau: Allison Murkowski .......................................... 26  
Nurse Call Pager System: Julie Otto ....................................... 28  
Lift Purchase Grant: Morgan Peters ....................................... 31  
Marketing Event: Sarah Plathe .............................................. 34  
Tobacco-Free Campus: Sarah Reese ......................................... 37  
Employee Satisfaction Survey: Erica Schmitt ............................ 39  
Resource Guide: Chanda Schmitz ......................................... 41  
Discharge Planner: Brandon Thorsness .................................. 43  
Laundry System Improvements: Lydia Waldera .......................... 45  
Hospice Guide: Julie Wanner .............................................. 48  
Revision of Emergency Manual: Laura Weiss ............................ 50  
Survey Preparation: Sara Williamson ...................................... 53

## Appendices

A-Grant Application .................................................................. 56  
B-Brochure ............................................................................. 57  
C-Hug Fund ........................................................................... 59  
D-Practicum Student Best Practices Book ............................... 60  
E-Brochure ............................................................................. 74  
F-Manager Guidelines .......................................................... 76  
G-Questionnaire ...................................................................... 83  
H-Resource Guide ................................................................... 84  
I-Flow Chart .......................................................................... 91
Introduction

Forming a cohesive team in a work environment is essential to the success of a healthcare organization and contributes toward the positive perception for the people that you work to serve. Aside from the internal staff of an organization, many long-term care facilities work with a variety of external vendors and organizations, where solid relationships are just as necessary. This project highlights one facility’s approach to create good-will with a community organization to promote a positive work experience.

Project Description

Greeley Healthcare Center’s relationship with the local Emergency Medical Squad had not been very strong. It was found that the facility’s staff and the EMS staff did not communicate effectively, and neither understood the other parties’ rules and regulations of their job. To build this relationship, it was decided that Greeley Healthcare Center would make use of a community support initiative grant that the facility’s parent company, Golden Ventures Corporation, offered. This grant money was set aside at the corporate level for facilities to use to give back to their communities. The hope was that by applying for and receiving this grant, Greeley Healthcare Center may establish a better relationship with the EMS, allowing for a better and more positive working relationship.
Tasks Involved

To begin, I contacted the EMS to tell them about this initiative and to see if there was anything that they needed funding for. They were very receptive, stating that they were in need of printers to go along with a new electronic patient charting system that they had recently acquired. I then worked with my preceptor to prepare a grant application and submitted it to the corporate office for approval (see attachment A). Two weeks later, Greeley Healthcare Center received a check in the amount that was requested to be applied toward the EMS printer purchase. From there, I arranged a luncheon to present the EMS team with a check. I then invited staff from Greeley so that everyone could get to know one another and to create a friendly environment in which to interact.

Outcomes and Recommendations

This grant has led to a more positive relationship between the EMS team and the staff at our facility. The grant money has been contributed to a worthy cause, and will contribute toward future success and a healthy working relationship.

Editors' Note

Long term care facilities have not historically reached out to the community health care vendors in effort to enhance relationships. Positive relationships foster better knowledge transfer that ultimately improves group or organizational performance, whereas negative relationships may impede this transfer of knowledge. Programs that promote goodwill between organizations and enhance work relationships, especially in a healthcare setting, are essential to the quality of care for the people that you work to serve.
Project Title: Survey Cabinet Leadership Project  
Student: Lindsey Arnold  
Practicum Site: Friendship Haven  
Preceptor: Craig Johnson

**Introduction**

It is important to stay aware of trends in long-term care. Particularly when there are resources in the field that provide specific information about survey trends within a defined geography and what you can do to improve quality within your organization. This project highlights a proactive quality improvement initiative to benefit all long-term care facilities within the state of Iowa.

**Project Description**

Every nursing home in the country has to have an annual survey to ensure they are providing residents with quality care and are in compliance with federal and state regulations. For this project, I was able to serve on the Iowa Association of Homes and Services for the Aging (IAHSA) survey cabinet, and we looked at every survey conducted in the state of Iowa and analyzed the findings to determine trends. The desired outcome of this project was to collect data about particular deficiency citations around the state, and then communicate the survey data in order to better help facilities prepare themselves for their annual survey.

**Tasks Involved**

To begin, I was assigned a region to analyze. From here, I gathered data every month from the surveys that had been conducted and emailed my findings to the Vice President
of Member Services for IAHSA. Then, this individual emailed everyone’s findings to me and I compiled and sorted the data to be shared. This data was then sent out through IAHSA communiqué quarterly.

**Outcomes and Recommendations**

Completing this project helped to arm me with the knowledge of what surveyors are looking for, and better acquainted me with the survey process. In addition to learning about this process, being a member of the survey cabinet gave me the opportunity to review current legislation and discuss it with professionals in the industry. The results of this survey provide valuable and current information to many organizations around the state, and it is a good way to inform members about current survey trends.

**Editors’ Note**

This example of continuous quality improvement on the part of long-term care providers is a best practice within the field utilizing government information and the network of associations. By examining surveys from across the state, and being tuned in to common survey deficiencies, long-term care providers are more aware and better equipped to avoid mistakes within their own organizations and ensure that quality care is being provided to residents.
Project Title: Spiritual Care Endowment Fund
Student: Allan Barr
Practicum Site: Presbyterian Homes of Roseville
Preceptor: Scott Welter

Introduction

A financial endowment is the transfer of money or property, donated to an institution, with the stipulation that it be invested and the principal remain intact. This allows for a donation to have a much greater future impact than if it were to be spent all at once. Frequently, endowments have stipulations attached, instructing how the money is to be spent. This project highlights the creation of an endowment fund focused on ensuring the availability of spiritual care by creating a brochure for use by a long-term care facility, so that potential donors can make informed decisions to designate their financial gifts toward specific purposes.

Project Description

The task for this project was to provide resources for spiritual care of residents, which is part of the mission of Presbyterian Homes and Services. By creating a “Spiritual Care Endowment Fund” donors will help to ensure that spiritual care will continue to be available for future residents and their families. The desired outcome of this endowment fund was to produce a brochure (see attachment B) to inform potential donors about the endowment fund and increase the number of contributors to the fund.

Many different best practices are often used for fundraising, including direct mail pieces and telethons. For our purposes, it was decided that an informational brochure would
give us the best opportunity to reach a wide variety of people and would also be most
cost effective. Furthermore, it would serve as a platform to communicate the intent of the
fund, and would give a consistent message to potential donors.

Tasks Involved

To begin, I worked with the facility's chaplain to develop the focus of the brochure. The
chaplain's expertise in spiritual care helped mold the brochure and also ensured that the
content would fit the purpose of the project. The facility's foundation then developed a
report that explained the Spiritual Care Endowment Fund and why it was essential to the
mission and purpose of Presbyterian Homes and Services. This report was a great
resource that helped to focus our content for the brochure. My next step was to take the
information that I gathered to the marketing and communications staff, and develop a
template that was consistent with the look and style of other Presbyterian Homes
literature.

Outcomes and Recommendations

The final product was a professional looking brochure that was appealing to potential
donors. We had the brochure printed by a professional printer, and made the brochure
available in the lobby of the facility. Through this endowment fund and the success of
the brochure, spiritual care can continue to be part of Roseville and other Presbyterian
Homes' facilities for the long term.
Editors' Note

Spiritual care is a focus that does not directly provide revenue to a facility, but it does provide a service to residents that cannot be underestimated. This is a creative alternative funding approach utilized by an organization to ensure this service will be available in the future. It also provides a way for residents and families who have benefited from pastoral care services to show their appreciation by giving back to others.
Project Title: Technology Update within Clement Manor
Student: Julie Bindl
Practicum Site: Clement Manor
Preceptor: Dennis Ferger

Introduction
New technological enhancements, including factors of accessibility and capability, will allow for the health care industry to increase efficiency, which will be necessary due to the rapid changes in demand and demographics. These programs create an easier method of communication through electronics, making it easier for organizations to function efficiently and effectively. They can also reduce clinical errors associated with the burnout of manual processes in a long-term care organization.

Project Description
With the exception of email as a communication tool, many of the facility’s systems were still done manually via paper through mail boxes. This project aimed to create more efficiency in the systems in place at Clement Manor by analyzing and striving for a paperless system campus-side for all employees, providing continuing education for technology use, and by creating and implementing an in-house TV satellite channel for all residents.

Tasks Involved
To begin examining how we could improve our organization’s communication, Clement Manor’s executive committee began planning the idea to enhance efficiency in all day-to-day activities. While the executive team formulated planning strategies, upgrading
technology campus-wide became my responsibility under the mentorship of our Controller. Together, we created a team referred to as “TechYES” to review all possibilities of implementation and change within the entire campus from both a resident and staff perspective.

In order to know what the facility’s needs were, we first had to know what we used and compare it to what we thought would be helpful to have. We examined Clement Manor’s current software program and its capabilities and gave each department a survey to help them examine what they currently used in terms of software, and what would be helpful for them to use in the future. This was also a critical step to obtain buy-in for the process.

Taking the results of the survey into consideration, the committee came up with a new vision for the future, to “lessen our paper trail through implementing an electronic interdisciplinary and integrated system into Clement Manor’s tracking, resident charting, admission and discharge process, care plans and medical records. In lessening our paper trail, our goal for Clement Manor is to be paperless in two fiscal years.” In addition, the facility began to offer technology in-services to educate staff on the use of technology in the workplace, while in the meantime planning the transition to a paperless facility.

**Outcomes and Recommendations**

As the rest of the healthcare industry begins to go more fully electronic, the health and aging services industry will be forced to do the same. In the coming years, all long-term care facilities will face the challenge of transitioning to Electronic Medical Record
(EMR) systems, which allow for data that is entered at a point of care to be shared through the facility. The transition to EMR will require careful planning, research, training, and perhaps, a whole new way of thinking from facility personnel. I believe that Clement Manor is in the right direction by forecasting these information system needs into the organizational goals for the 2006-2007 fiscal year. The steps to implementing such a technologically advanced system include researching the need, committing resources and energy to the need, planning for the need, and finally implementing the technological advancement. To do so, Clement Manor has already begun moving forward the right direction.

Editors' Note

Paper reduction saves money, increases staff efficiency, and makes a great deal of common sense in the information and technology age that we live in. The shift to using Electronic Medical Records and more fully using automated information systems will help address problems of litigation, insurance costs, staff shortages, low reimbursement, and challenges with HIPAA recordkeeping in long-term care organizations.
Project Title: Nurse Scheduling  
Student: Jordan Bruce  
Practicum Site: Dove Healthcare  
Preceptor: Jim Diegnan

Introduction

Employees of a healthcare organization comprise an important resource. According to Charles Austin and Stuart Boxerman, most organizations spend 60 to 70 percent of their operating budget on employee salaries and benefits (Information Systems for Healthcare Management, 2003). Therefore, an efficient human resources information system is essential to assist administration and human resources personnel in planning, staffing and productivity analysis.

Project Description

For this project, I explored the current nurse scheduling system that Dove Healthcare had in place, which was a paper system. Since upgrading to a computerized charting system the previous fall, we wanted to find ways to become more efficient using the latest technology available to us. After some research, I found a staff scheduling system that would allow our scheduler to be more efficient, since scheduling on a manual system is time-consuming, inefficient, confusing and sometimes inaccurate.

Tasks Involved

To begin, I worked closely with the nurse scheduler and dietary director of the facility to research the best scheduling software that would fit the needs of Dove Healthcare. Then, I contacted local hospitals and other large facilities in the area to inquire about their
experiences with scheduling software to determine if it would be beneficial for us to use what other health care facilities were using. From there, I generated a list of software companies and I began to inquire with them about their capabilities.

Eventually, I was able to work with a software representative who was able to come up with a software system that would work for our type and size of facility. This software was also such that it could be tailored to fit our specific needs.

**Outcomes and Recommendations**

At the current time, employees of two of our departments are in the process of learning the new software via web-based training. Employees felt the new system was relatively easy to use, and were excited to start implementing it because of the efficiency that it would bring.

**Editors’ Note**

Since the financial impact and positive outcome of implementing new software systems are so great within a healthcare setting, it is essential that facilities do adequate research when making large information technology purchases. Due to the significant investment in labor management, and the efficiency that human resources information system applications can bring, they are well worth the time and investment.
Project Title: Resident Relocation
Student: Sara Dzienkowski
Practicum Site: Lakeside Health, LLC and Benedictine Health Center at Innsbruck
Preceptor: Debra Boyd and Susan Ager

Introduction

The closing of a nursing home is a stressful and emotional time for residents, family members and staff. Any relocation plan must be resident focused, and all parties involved in the relocation of a resident must work together, despite difficult circumstances, to ensure a smooth transition to the resident’s new home. This project describes best practices as they pertain to resident relocation upon the closure of a nursing home in Chippewa Falls, Wisconsin.

Project Description

Due to substantial financial losses, operational struggles, and the change in demand for long term care in the Chippewa Valley, Lakeside Health announced the closure of the facility. As a result, all residents needed to make discharge plans and arrange to find another appropriate setting to call home.

In helping residents find comfort in their new homes, I implemented two programs that encompassed best practices for resident relocation. The programs were the “Lakeside Lookout” and the “Same Day Follow Up”. The “Lakeside Lookout” was a program where I kept a record of employees who visited relocated residents at their new homes two weeks after discharge. The “Same Day Follow Up” program was a phone
conference with the admitting facility of our relocated resident(s) regarding resident concerns and questions.

In creating these programs, we wanted to ensure a smooth transfer for our residents to another facility. It was a very difficult process to achieve, but by providing these programs it positively affected our residents and their families in transitioning to a new provider, due to the responses that we heard from families and residents after the relocation was complete.

**Tasks Involved**

During the time of relocation, Lakeside worked in conjunction with the Community Relocation Initiative proposed by Governor Doyle from his 2005-2007 Biennial Budget. This initiative gives elders and persons with physical disabilities the opportunity to relocate from nursing homes into less restrictive environments. According to the plan, people being cared for in nursing homes have a choice—either to remain in that setting or move if their care needs can be met in a home-based setting. If Medicaid was paying for the resident’s stay, Medicaid would possibly be available to provide needed help at home through Wisconsin’s Community Options Program Waiver, otherwise known as CIP II. As a result, Lakeside residents were given more opportunities on choosing where to call home during this transition.

As mentioned earlier, two quality best practice programs were developed during this relocation, but many others followed. HMD Consulting, a state appointed monitoring
team, also offered additional recommendations. To assist with the relocation effort, I helped tour facilities that would be potential new homes for residents, coordinated staff to help residents during their first day in their new homes, assisted with transferring residents to their new facilities, and with helping them to become adjusted once they arrived. Throughout the process of relocating residents, the administrator, assistant administrator, and chaplain were all heavily involved.

**Outcomes and Recommendations**

These programs were supported by all employees at Lakeside, and despite the difficult circumstances, the process of relocating residents was as successful as it could have possibly been. Looking back now, six months later, I wonder how our former residents are really doing. There has been much research done on the effects of relocation on a person’s physical and mental well-being. Some research shows negative effects, but a large part in the adjustment is the role that the receiving/admitting facility takes. The more involved a new home can be in the resident’s first year, the better the chances for success.

**Editors’ Note**

For many residents, why a nursing home closes is not as important as how a nursing home closes. When a nursing home closes, what becomes important is how the individuals who live there are relocated—and whether or not they receive the services they need to mitigate the effects of transfer trauma.
Project Title: Social Accountability  
Student: Megan Fitzgerald  
Practicum Site: Augustana Care Corporation  
Preceptor: Gerry Berglin  

Introduction  
Non-profit health care facilities have a social responsibility to give back to their communities. As a result, collecting and reporting their contributions must become an integral part of operations. This project highlights a facility’s approach to capture, educate staff about, and determine social accountability within a non-profit health care organization.  

Project Description  
Non-profit health care providers exist to fulfill a mission that goes beyond the normal scope of health care delivery. In the case of Augustana Care Corporation, we also have a religious mission, and as a non-profit organization we devote a portion of our revenue to providing a vast array of health services and related activities to (or for the benefit of) our community. In return for providing health care and other socially desirable activities in a manner that benefits the community as whole, nonprofit providers are exempt from paying income taxes. As the scrutiny of nonprofit healthcare organizations has increased since the 1980’s, Augustana’s goal has been to ensure that we capture all activities that provide a community benefit. Meanwhile, healthcare has evolved to become a highly competitive business, and facilities are often competing for the same customers in a community. This drive to attract customers and contain costs can marginalize the health care needs of the low income or underserved patient. As a result, providers can appear to
be nearsightedly focused on the business of health care rather than the health of the community. The “community benefits process” provides guidance for non-profit health care providers as they develop a uniform method to address the health care needs of everyone in the community. This process provides a standardized approach to creating a report of what the health care needs are for the underserved within a community, what expenses can be counted to justify a tax exempt status, what community assets are, and how the overall health of a community can be improved.

**Tasks Involved**

The project aimed to capture and collect data as it pertains to community benefits. To begin, I worked with the corporate compliance officer and her assistant to compile information regarding Augustana’s social accountability. We also came up with a plan to educate all management about the need to document, report, and plan for more community events, since there have been many times when staff members have been unsure about what activities constitute as a community event. To assist staff, we compiled a list of activities that would constitute as a community event, and sent out reminders to staff so that they would not forget to document their activities.

**Outcomes and Recommendations**

This ongoing project will continue as long as the facility is of a non-profit status, and education for staff will be needed on a regular basis to serve as a reminder and to clarify the goals of social accountability within Augustana Care Corporation.
Editors' Note

Not only is social accountability important in a non-profit facility in terms of how it benefits the community, but the facility may also benefit as well. Significant indirect revenue may be captured as a result of positive public perception, thereby serving as a powerful marketing and public relations tool within a community.
Introduction

Fundraising for any non-profit organization is both a privilege and a challenge. Many nonprofits address human needs that are sometimes overlooked. This project illustrates a fundraising initiative to assist those who are experiencing hardship—the organization’s own staff members.

Project Description

The HCR ManorCare Hug Fund is a charitable fund that provides financial assistance to employees of the organization who are experiencing financial hardship due to an unexpected crisis. The Hug Fund is supported through donations of employees, and campaign drives occur once a year to ensure the fund’s existence. At ManorCare of Hinsdale, I was asked to lead the yearly fund raiser. Although employees can donate to the fund anytime of year, campaign week raises awareness in order to collect as many donations as possible. In 2005, our facility raised just over $1,000 during the Hug Fund campaign week. My goal was to raise more money than the previous year.

Tasks Involved

I worked with our human resources director to explain the intent and purpose of the hug fund and campaign week to all staff members. From there, the administrator helped by motivating the department head team to donate during their morning meetings. My role
was to determine what I could do during campaign week in order to raise money. I gathered ideas and suggestions from staff regarding what would motivate them to donate to the Hug Fund. Some staff indicated that if they were allowed to help establish criteria for Hug Fund grants, they would be more likely to donate. I then created a document that explained the Hug Fund (*see attachment C*) and included grant stories from the previous year, including how to qualify to receive a grant from the Hug Fund. That way, all employees had plenty of information in order to make an informed decision about contributing toward the cause.

**Outcomes and Recommendations**

Our facility was very successful in raising donations during campaign week. By the end of the week, 100 out of 221 employees (nearly 50%) had donated to the fund, and we raised $5,425. A barrier to raising more money could have been that employees had hardships of their own, and some of our employees may simply not have had the financial means to donate.

**Editors' Note**

The spirit of caring and sharing in the workplace promotes a positive work environment, and charitable giving helps those who are in need. Together, these two elements create a system of support. In a healthcare setting where there are many people with many needs, putting effort towards a philanthropic fund focused on staff needs during times of financial hardship is a best practice to ensure that all customers, including staff, are supported and have their needs met.
Project Title: Dining Service Protocol
Student: Heather Litzkow
Practicum Site: Christian Community Home and Services, Inc.
Preceptor: Dan Goodier

Introduction

To achieve the best quality of life for residents in a long-term care facility, many organizations are looking for ways to create a more home-like atmosphere. One approach is to change the way in which meals are served to residents, thereby encouraging and honoring independence by offering open dining hours and more choices. This project highlights a facility's approach to provide increased quality of care for its customers.

Project Description

It came to our attention that there were a number of residents “parked” around the nurses' station in the morning waiting for breakfast to be served. The problem that the facility recognized is that some residents are ready to get out of bed at 5 or 6 a.m., and have to wait for breakfast to be served two or three house later; while others prefer to sleep later in the morning, and have to be woken so they do not miss breakfast. To stand out in the healthcare industry, and to offer more choices for residents, it was decided to provide more options in terms of dining.

Tasks Involved

As a short term goal, the leadership team decided to extend the breakfast dining hours from 8-9 a.m. to 7-9 a.m. to accommodate those individuals who woke up earlier in the
morning. Also, activities were pushed back to later in the morning so that residents who slept later did not have to rush through breakfast in order to attend an activity.

In addition to the new hours, and with the help of the dining service coordinator, we rearranged the dining room. Although residents would have a choice of where to sit and eat breakfast, we decided to designate a smaller portion of the dining room for residents that needed assistance, and opened up the larger area to more independent residents. This then opened up the back wall by the patio doors so that residents could enjoy their breakfast outdoors if they wished. We also adopted a restaurant style menu so that residents could choose the meals that they wanted to eat.

**Outcomes and Recommendations**

After much hard work and planning, the new dining service protocol was a success. However, as it is with everyday life, nothing is perfect and barriers arise. With the new dining service protocol, the same applied. The first hurdle that I had to address was how the new dining schedule affected housekeeping’s cleaning schedule in residents’ rooms. Fortunately, housekeeping was able to adjust their schedule so that they cleaned rooms a bit later in the day for the residents who chose to wake up later.

With incredible teamwork from all individuals, the dining service protocol has easily settled into the daily routines of staff and residents. I gathered opinions from residents by administering and collecting surveys and the results pointed to the tremendous success of this project.
Editors’ Note

Offering choice to residents not only creates a home-like atmosphere, it also increases satisfaction and is the right thing to do. Creating a more customer focused environment is also a powerful marketing message for an organization within a community. A facility is well-served by providing additional services for residents in today’s competitive health care environment.
Introduction

Providing students with greater awareness and support when faced with new challenges is one way to alleviate stress and uncertainty, and provide clarity and direction for success. There are many platforms that can be used to prepare individuals as they embark on a new experience. This project illustrates the implementation of a resource that helps students understand the practicum experience (from the perspective of other practicum students) to better arm them with the tools that they need to succeed during the practicum year.

Project Description

This project focused on developing a booklet of best practices for practicum students, focusing on some of the main areas involved with the internship and providing a resource for incoming students to read.

Tasks Involved

To begin, I involved students who were currently in or who had recently been through the practicum experience. I received a lot of feedback from students stating that they thought it was a good idea and who were willing to help out in any way. Then, I compiled and sent out questionnaires that allowed for open-ended responses to questions that pertained to the first week of the practicum, the resident for a day experience, work atmosphere,
interactions with co-workers, taking the licensing exam, and many more. The responses that I received were creative, informative and funny (see attachment D).

**Outcomes and Recommendations**

Although I wish that more alumni of the program had participated, I received a good amount of information to assemble the book. The booklet is available online to practicum students during their practicum year. It is also routinely distributed at the pre-practicum orientation to help new students adjust to their upcoming experience.

I think that the students who shared their responses were true believers in the ultimate success of this project because they knew that it could help future practicum students. Everyone returned their questionnaires in a timely manner and gave plenty of opinions about their experiences. Since students go through many of the same experiences and emotions, and I felt it would be helpful to let others know what to expect from the practicum in order to help foster a positive experience for them throughout the year.

**Editors’ Note**

This unique approach of going directly of the source, practicum students of the health care administration program, has become a helpful resource to assist students as they embark on their practicum year. When students take the time to give back to their program, it makes it stronger for all students to come.
Project Title: Summer Luau Celebration
Student: Allison Murkowski
Practicum Site: St. Louis Park Plaza
Preceptor: Tony Johnson

**Introduction**

Hosting special events for the purpose of having fun is one way to encourage residents, staff and their families to interact with each other and raise the level of camaraderie within the health care community. Special events can also serve as a public relations tool to create awareness of a facility within a community. This project highlights a special event for the purpose of having fun in order to create community awareness.

**Project Description**

St. Louis Park Plaza had not held a large-scale community and facility event for several years. Therefore, the goal of this project was to organize and host a summer luau event for the community and all facility residents, their families, and St. Louis Park Plaza staff to enjoy. The event aimed to raise awareness of the facility, market our services, and provide an atmosphere of fun, outside of the normal day for residents, families, and staff.

**Tasks Involved**

The marketing team for the facility met to plan the event, which included determining the date, time and theme for the party. The team included human resources, the TR Director, the Director of Dining Services, and me. However, many other people within the facility helped out, including maintenance, housekeeping and the dietary department. We planned the celebration to run from 4:00-7:00 p.m., and many of the staff were willing to
work late that day to help pull off the event. We rented a smoothie machine, a large tent, games for children, and had great food available for everyone to enjoy.

**Outcomes and Recommendations**

Due to the fact that this was the first time that we had planned an event such as this, we came in over-budget. Also, the tent that we rented was placed on a grassy area, and this made it difficult for maneuvering wheelchairs. Aside from these things the event was a huge success, and we will take what we learned from this year and apply it to planning an event for next summer.

**Editors’ Note**

Enhancing the social environment of a health and aging services organization is an important goal, and adding a sense of fun and liveliness by hosting a party is an excellent approach. Special events can have results that are two-fold. First, parties and events promote socialization and a sense of fun for residents, families and staff. Second, this creates an environment where people want to be and want to stay, which is an excellent marketing approach within a community and a retention tool for staff.
Project Title: Nurse Call Pager System  
Student: Julie Otto  
Practicum Site: Linden Grove  
Preceptor: Michael Zimmerman

Introduction

Regardless of the patient satisfaction measurement tool that is used, it has been found that there are some key points that are most important to a patient’s perception of care. One of these is the attention that is given to the patient’s personal needs. Another significant factor, which ties directly to the first key point, is the staff’s response to call lights (StuderGroup, 2006). Thus, the call light process and system are a quality of care issue that patients use to effectively measure service, and it influences the perception of the overall quality of care that they receive. The following project illustrates how one facility addressed the perception and quality of care issues by implementing a new nurse call pager system.

Project Description

LindenGrove New Berlin receives completed Press Ganey resident satisfaction surveys from discharged patients on a regular basis. These surveys provide essential information to the assessment and enhancement of the health care experience. After studying the completed surveys and tracking trends for a period of time, it became evident that noise was a reoccurring complaint. Our scores were consistently low in the area of unnecessary noise from outside the rooms. The major culprit of this noise was from our audible call light system. Many residents and family members have a misconception of why this noise is necessary, mistaking it for one call that is just never answered. In
actuality, the same buzzer will sound with each call that is placed since they are connected in a series. When residents misunderstand the purpose of the noise, it reflects poorly in the area of poor nursing staff performance. It also creates a very noisy and irritating environment.

To increase the quality of life that our residents are exposed to, a consensus was reached that an alternate call light system was needed. This system would not have an audible alert, instead a light would be triggered and a page would be sent to all C.N.A.s responsible for the unit. The pager would then beep and display a message of what room was in need of help. The dome lights outside of the residents’ rooms would still light up, and serve as a visual reminder that a call had been placed. This new system would also track all call light response times in the computer.

**Tasks Involved**

Our sister facility, Linden Grove in Menomonee Falls, was in the process of implementing a similar system. To begin, I spent time at their facility observing and learning about the implementation process. From there, our facility’s team worked with a vendor to set up a start date for installing the new system. After the system was installed, I had to schedule and conduct in-service training sessions to train the nursing staff on how to utilize and operate the pagers. After one week of using both the new pager system and the old, overhead audible alert system, we “went live” with the new system in the facility. I evaluated the progress by tracking call times using the new computer system and by working with the nursing staff.
Outcomes and Recommendations

Other than a few program glitches, the nurse call pager system has been a successful venture for the facility. There are some ongoing factors to consider, including the fact that the system will need continuous maintenance, just as any other software program does.

Editors’ Note

Delivering a quality service and fostering a positive public perception is essential in long-term care. Taking steps to increase quality service, along with the perception thereof, can ensure that your customers’ perception of their care also increases…and in this case perception is reality.
Project Title: Lift Purchase and Grant Proposal
Student: Morgan Peters
Practicum Site: Lutheran Homes of Oshkosh
Preceptor: Kris Krentz

Introduction

Obtaining grant money is one way that non-profit organizations can support their operational goals, and the United Way is one funding organization that many non-profits can turn to for assistance. This project highlights a United Way grant that was awarded to support Bethel Home’s efforts to decrease injuries of residents and staff through the use of mechanical patient lifts to transfer patients.

Project Description

At the time this project began, Bethel Home was using stand-up patient lifts, but they were proving inadequate for staff due to their need for frequent repairs. Since one of the increasing trends is heavier residents, a major issue for staff in nursing homes is the frequent heavy lifting and repositioning of residents that exceeds the lifting capacity of most caregivers, it was decided to purchase four new resident lifts. Moreover, the facility would plan to apply for a grant through the Oshkosh Area United Way Health Fund to partially cover the cost of this expense. The desired outcome of this project was to obtain a grant from the United Way, and purchase new resident lifts through trials of alternative brands, ultimately choosing the lift that would best suit staff and resident needs.
Tasks Involved

The accomplishment and completion of the project included a submission and approval of the United Way grant proposal, price comparison and demonstrations from different vendors, and an agreement on the patient lift that would best suit the needs of the residents and staff of the facility. Information that would be pertinent to making a decision would be collected by obtaining references from other organizations, surveys of caregivers, and a committee review of all available information.

Once the committee was established, surveys were collected to gather information from caregivers who would be using the lifts that were in question. To accurately gauge the performance of each lift, representatives from the lift companies brought in lifts that the staff were able to test out using a 160-pound “test dummy”. Attendees were then urged to fill out a survey to rate the lift that they had used, and the survey also double as a raffle ticket for a flower basket. All attendees who participated received a candy bar and a pizza chain gift certificate.

Outcomes and Recommendations

The project was successful on a variety of fronts. A grant form the Oshkosh Area United Way Health Fund was awarded to cover the cost of one patient lift. Additionally, after many trials and re-trials, the staff found and agreed upon a brand of lifts that were comfortable and user-friendly. Lastly, better care is being given to an ever-increasing subset of the resident population.
Editors' Note

The ability to find alternative sources of funding to support organizational initiatives is critical to the overall delivery of services for an organization. Health and aging services organizations will be well served by exploring a variety of funding sources, researching their options for products during the grant application process, and by incorporating staff feedback regarding the product purchase.
**Project Title:** Marketing Event  
**Student:** Sarah Plathe  
**Practicum Site:** Heritage Health Centre  
**Preceptor:** Robert Campion

**Introduction**

Marketing is defined as "the process of planning and executing the conception, pricing, promotion, and distribution of ideas, goods and services to create exchanges that satisfy individual and organizational objectives" (American Marketing Association). The purpose of marketing for a health care organization is to build a profitable business and to set yourself apart from your competitors. This project highlights a marketing approach in partnership with another medical service provider to host an event to invite potential consumers and their families into their facility.

**Project Description**

Heritage Health Centre decided to host a marketing event by inviting a local orthopedic surgeon to come to the facility to give a free seminar to the community regarding his practice in computer-assisted surgery for total knee replacement. This seminar was specifically targeted toward the elderly, and the purpose was to make the public aware of this new knee replacement surgery, while at the same time marketing Heritage Health Centre to the public.

**Tasks Involved**

Our marketing group consisted of the administrator, human resources director, admissions director, a social worker, and me. Since our facility does not have its own
marketing department, the marketing team had already been established prior to
beginning this initiative. Together, we developed our marketing plan for the seminar and
delegated tasks to those involved. First, we made tri-fold brochures and flyers (see
attachment E) and distributed them to local businesses around the community and also to
our residents and their family and friends. I then put together informational folders for
our guests, which included facts about the orthopedic surgeon, knee replacement surgery,
and our facility. From there, we ordered chairs for guests and planned and ordered food
and door prizes for the day of the event.

Outcomes and Recommendations

The desired outcome of this marketing event was to inform the community about our
facility and the services that we offer, while at the same time forming a partnership with
the orthopedic surgeon. Since we are a sub-acute facility the majority of our residents are
here for rehabilitation services, which means that forming a close relationship with the
doctor could potentially increase our business.

In the end, the seminar was a success. Our guest speaker was able to market his services,
we were also able to market ours, and the attendees received some valuable information.
The seminar ran smoothly, without any major glitches. After the survey was over, we
solicited feedback from the attendees by administering a survey. The feedback that we
received indicated the event was perceived to be informative and useful, and the program
was overall very helpful.
Editors' Note

Special educational events are often overlooked marketing tools that can support marketing efforts in a number of ways. Depending on your organization's goals, educational or community events can increase perception and awareness by creating a timeless memory in the mind of the consumer.
Project Title: Tobacco-Free Campus  
Student: Sarah Reese  
Practicum Site: Spooner Health System  
Preceptor: Len Meysembourg

**Introduction**

Tobacco free environments make life healthier and safer and many healthcare organizations are rising to the challenge of being leaders with this initiative. This project highlights a tobacco-free program within a long-term care facility.

**Project Description**

Spoonер Health System had been a smoke-free building for a number of years; however, the facility began to receive complaints about the staff smoking in front of the building. This was reason enough to propose that the facility become entirely smoke-free, and a proposal was submitted to the Spooner Health System's Board of Advisors. The motion was unanimously approved, and a date was set for the facility to become a smoke-free campus within a year’s time.

**Tasks Involved**

The change to become smoke-free was very dramatic for some of the facility’s employees, so it was important for them to know well in advance that this change would be occurring in the future. The CEO wanted to ensure that the facility offered resources to the staff to assist them with quitting smoking if they were interested. I then created a Tobacco-Free committee to assist us in our goal, and created a Manager’s Guide (see
attachment F) to help educate managers on the new policy that would be taking place. I also presented this information at the Manager’s Meeting.

This project involved many people. In addition to myself and the staff at the facility, I arranged for a representative from the Wisconsin Tobacco Outreach Program to speak about their work with assisting people to stop smoking. Meanwhile, the committee set up policy guidelines and a timeline for implementation. I created posters to hang within the facility and posted information on nicotine replacement therapies available through the pharmacy. One staff member had experience hosting smoking cessation classes within the community, and then offered smoking cessation courses within the facility.

**Outcomes and Recommendations**

Since our implementation date will occur after my practicum ends, I unfortunately will not be here to see the end results. However, we have received a lot of good feedback, and many employees throughout the facility have quit smoking. To date there have been nine employees, who have quit smoking, along with their significant others.

**Editors’ Note**

Tobacco-free campuses and smoking cessation programs are excellent best-practices for any organizations, especially health care organizations. By eliminating tobacco everywhere in a long-term care facility, residents, staff and guests are protected from the dangerous effects of second-hand smoke.
Project Title: Employee Satisfaction Survey  
Student: Erica Schmitt  
Practicum Site: Colonial Manor Medical and Rehabilitation Center  
Preceptor: Terry LaMantia  

Introduction  

Employee satisfaction surveys allow for an organization to gauge the level of commitment a staff member has to their work. A high-level of commitment is directly related to quality, and in a long-term care facility, this commitment to quality service is the key to providing high quality care to residents. This project highlights the use of an employee satisfaction survey to measure the level of quality and commitment on behalf of the staff.

Project Description  

My task was to create an employee satisfaction survey for employees at Colonial Manor Medical and Rehabilitation Center, and distribute the survey to all staff in order to identify issues with quality and their experience(s) with the facility. The ultimate goal of the satisfaction survey was to develop processes to measure and improve employee satisfaction for staff in terms of their work and environment, and to identify and correct any areas of concerns that employees might have.

Tasks Involved  

To begin, I researched other employee satisfaction surveys to determine what survey process would best fit my current application. There are a variety of credible surveys available to use within organizations. From here, I compiled twelve questions (see
attachment G) that would allow me to determine employees who were satisfied and employees who were not. I then distributed the survey to all the staff and gathered the results from the survey. After I analyzed the data and reviewed it with the administrator, I took the results to the department heads to discuss the areas that needed improvement and how we would work to increase staff satisfaction.

Outcomes and Recommendations

I received a high amount of staff participation--119 of 175 employees participated in the survey. By using the results of the survey, it was determined that we needed to increase the amount of recognition and praise that employees were given. As a result, we enacted a weekly “caught in the act” program, and gave out lottery tickets to employees who were “caught in the act” doing something positive.

Editors’ Note

It is essential that all organizations conduct regular staff satisfaction surveys, since the underlying results of these surveys frequently relate to the overall work culture, which ultimately has an impact on the quality of care that residents receive. Furthermore, it is crucial that information and results are shared, and adjustments are taken to improve staff satisfaction and morale once specific areas are targeted.
Introduction

It is essential to provide your customer base with resources to inform and explain processes and procedures that are in place. Doing so will help to establish mutual expectations at the beginning of your relationship, and will ensure successful communication to eliminate misunderstandings. This project highlights the implementation of an effective resident communication tool, a facility-specific resource guide.

Project Description

At the Cornell Area Care Center, we wanted to ensure that new residents and family members have a positive experience with us. For the convenience of these individuals, we decided to put together a facility-specific resource. Extendicare, the corporation that we belong to, provided a resource guide for the entire corporation. Since this guide was not specific to our facility, I created a facility-specific resource guide that would give residents and their families' insight into the specific services that are offered at Cornell Area Care Center. The guide also provided answers and explanations for some of the common questions and concerns that they may have regarding their stay.
Tasks Involved

The project aimed to gather and organize the facility-specific information in a way that would be helpful to new residents and their family members. First, I discussed with the administrator and social worker what was currently being given out to the residents in terms of a resource guide. It was discovered that this guide was too general, and from there I began to write a draft that was more specific to the facility. I obtained feedback from all departments, and worked closely with the administrator during the proofreading and review process. I then selected a printing company to professionally duplicate the manual (see attachment H for condensed manual).

Outcomes and Recommendations

The final guide turned out very well. There were many steps involved and it was a lengthy project to accomplish. However, this manual will need to be updated at least once a year as people, processes or rates may change. To make updating easier in the future, I compiled the manual in the form of a 3-ring binder so that one page may be changed at a time instead of having to change the entire guide.

Editors' Note

This project illustrates the use of an effective organizational communication tool with customers. Since good communication is an essential part of any organization, including long-term care organizations, it is important to have a clear and effective approach for sharing information with your customers.
Project Title: Discharge Planner
Student: Brandon Thorsness
Practicum Site: Chippewa Manor Nursing & Rehabilitation
Preceptor: Karen Robinson

Introduction

For many individuals, admission to or discharge from a skilled-nursing facility can be a confusing and complex transition of life. It is a care provider's responsibility to establish effective lines of communication, provide educational materials and instruction, and help facilitate hospitable and safe environments for residents.

Project Description

Since quality should be at the forefront of all aspects of care for a resident, I sought to establish increased consistency and formality within interdepartmental communication, thereby aiding in the more effective discharge of residents.

Chippewa Manor had procedures and guidelines in place that required staff to instruct, educate, and otherwise prepare a resident to care for themselves after discharge. Although this practice was being followed, it was not consistent in terms of delivery or communication. As a result, I created a worksheet for the nursing, social service, dietary, and therapy departments to use to ensure that a variety of issues were covered with each resident before they were discharged. Depending on their specific needs, each department would instruct and educate residents on how to properly care for themselves upon discharge. Direct caregivers and family members were also made aware of these issues, which is extremely important.
**Tasks Involved**

To begin, I met with each of the departments that would be utilizing this worksheet. One of the first steps I took was to gather feedback from each of the departments on topics they felt were crucial to address before a resident was discharged. Then, these suggestions were incorporated into the worksheet. Once compiled, this worksheet was distributed on paper to all parties involved. However, after a trial run, I could tell that it would be more accessible and efficient if I were to put it into our electronic charting program. I was able to do so, and it is now even more efficient with the addition of our wireless internet system.

**Outcomes and Recommendations**

I am confident that this program will ultimately be successful and that it will be a true benefit to our residents. My only recommendation is that I should have saved myself the time by putting the document into our electronic charting program right away.

**Editors’ Note**

In an increasingly competitive market, driven by census and reimbursement, a facility must constantly be riding the crest of innovation and leading a path toward increased consumer satisfaction. Residents that have experienced a successful discharge from a facility fostered by the extra efforts of the staff will probably speak highly of that organization, and promote informal positive public relations. A coordinated effort toward planning the discharge of resident from a facility is an effective way to promote their health and well-being.
Project Title: Laundry System Improvements  
Student: Lydia Waldera  
Practicum Site: Lake Ridge Health Care Center  
Preceptor: Cyndi Seiwert

**Introduction**

Management and quality professionals agree that 85% of an organization’s problems lie in organizational system failures and not with its employees. In fact, less than 15% of an organization’s problems are within the control of its employees. Numerous systems work within a long term care facility, and the laundry system is just one of those. This project highlights an approach to reduce the quantity of lost laundry in order to improve the overall quality of care and services provided to residents.

**Project Description**

Lake Ridge Health Care Center had been experiencing verbal complaints from residents, families and staff regarding missing personal laundry items. There have been several attempts and small incremental changes made in the past to correct such problems, however, these attempts were not successful. There are acceptable and unacceptable standards to follow as related to the “timely” return of laundry, and I have defined three goals for this project in quality:

1. To reduce laundry turnaround to 48 hours or less
2. To reduce the number of unclaimed, lost and unlabeled laundry items to five or less per day, striving for zero at the end of the quality improvement process
3. Within six months, reduce the number of average visits to the laundry department from two per day to zero.
These were the driving forces of the project and also helped rally the efforts of everyone involved.

**Tasks Involved**

I began this project by researching best practices in quality improvement in health care, and decided to use Deming’s Plan-Do-Check-Act cycle of quality improvement to address the issue of missing laundry. I developed a flow chart and found possible areas of error in the laundry system *(see attachment I)*, and then used the four steps of the quality improvement cycle to address our identified system problems.

By analyzing each step in the laundry process and using our flow chart as a guide, our quality improvement team (made up of myself, the Director of Housekeeping and Laundry, and representative nursing assistants) were able to develop many hypotheses regarding opportunities for improvement in the process. Our changes are as follows:

1. Come up with a laundry labeling schedule so all residents' clothes are labeled, especially upon admission
2. Use individual sock/undergarment bins for each room to help with organization and to ensure they are not being ignored
3. Update the “find me” reports to be more user-friendly and educate staff and residents on their use
4. Revise the laundry schedule; it is currently not used because it is unrealistic
5. Update white census board containing room numbers and resident names on a daily basis

6. Order dividers for clothing on racks that have every room number written on them to eliminate mix-up and guessing upon delivery of clothing

7. Adjust the routine for evening housekeeper so time can be committed to delivering personal laundry and to allow an additional hour for sorting, washing, drying and folding personal clothing

**Outcomes and Recommendations**

The completion of this project has been successful, and the outcomes that have not met performance standards have been identified throughout the process by continuous monitoring. For example, the average turn-around time for laundry has decreased from 5.8 days to 2.0 days, and the frequency of lost laundry items per day has dropped from 4 to 1.2. An annual in-service and new hire training of laundry staff will be conducted to communicate best practices, suggestions for improvement, and to determine whether the facility has met performance goals.

**Editors' Note**

The issue of lost personal laundry is one of the most frustrating challenges in many long term care facilities. Any efforts to reduce the frequency of lost articles of clothing are worthwhile, and should improve the quality of service that is provided to residents of a healthcare facility.
Project Title: Hospice Guide
Student: Julie Wanner
Practicum Site: Marquardt Village
Preceptor: Kyran Clark

Introduction

Death is an eventual part of life and people working and living in long-term care settings are exposed to this final outcome on a regular basis. Supporting individuals, their families, and staff during this time of transition is a good programmatic decision for any organization. This project describes the establishment of a hospice program in a long-term care facility.

Project Description

Marquardt Village chose to begin an in-house hospice for many reasons. Most importantly, the staff wanted to increase the residents' quality of life. Secondly, a hospice program would help employees learn and better understand end-of-life care themselves. Finally, the hospice program would bring in a new form of reimbursement and serve as a marketing tool within the community.

From here, I worked to create a guide that would assist our facility, and others, when seeking answers and recommendations to implement a hospice program. In addition to serving our own facility, the hospice guide could also allow Marquardt Village to provide other facilities with essential information to walk them through the licensure process.
**Tasks Involved**

After much research, I formed a team of people that included all those involved in the application process. To begin, we toured a large hospice in Milwaukee, to grasp the true meaning and services of a hospice program. From there, we developed policies and procedures before they were sent in for licensing review. As a final step, I accompanied the CEO to the Marquardt Village board of advisors' meeting for approval of the hospice. The board was very supportive of this new service.

**Outcomes and Recommendations**

There were minimal barriers to success for me while completing this hospice guide. During the process of working on this project, I kept in mind that I was not an expert and therefore was willing to listen to the staff and incorporate their feedback and input. By creating the guide, I was not necessarily influencing immediate change, but rather, learning about how to facilitate and make changes happen in an organization. It has been rewarding to see the success and development of Marquardt Village's hospice program.

**Editors' Note**

It is important to ensure that individuals are treated with dignity and respect in a hospice setting. To do so, it is essential that much attention is given to all of the formal and informal aspects of putting together a hospice program to ease burdens among residents and families. Formally integrating hospice into a long-term care environment has multiple benefits for all parties involved.
Project Title: Revision of Emergency Manual
Student: Laura Weiss
Practicum Site: Presbyterian Homes of Arden Hills
Preceptor: Traci Mosoti

Introduction

In today’s ever-changing climate, awareness and planning are the best defenses against disaster. Hopefully, emergency procedures will never be needed. But if they are, a carefully followed plan of action is an essential route to safety. This project highlights the importance of updating and revising an emergency manual for a long-term care facility.

Project Description

The emergency procedure manual at Presbyterian Homes of Arden Hills was inadequate and outdated. With the recent issue of Hurricane Katrina and a 40 hour power outage at the facility, there was a strong need to update this important information. In addition, a new wireless pager call light system needed to be installed during construction renovations during the year. Because of this, procedures also needed to be installed specifically for this new system in the event of an electrical outage. The campus administrator understood this need and realized that survey may place a stronger emphasis on our emergency procedures at the facility’s upcoming annual review.

The primary goal of this project was to modernize the current emergency manual at the site. Along with this, many phone numbers in the contact list needed to be added and/or removed. When a survey team walks in the door of a facility, this is one of the first
things they ask for: names of important personnel, locations of workers, and contact numbers. Another objective for this project was to add a section specifically for the new wireless pager system at our facility. Finally, an educational in-service for employees to teach them of new changes in the manual was developed and delivered. Not only would this train employees of the new modifications, but it would also remind everyone of the previous emergency protocols at the facility.

**Tasks Involved**

To begin, I benchmarked with other Presbyterian Homes and Services sites to evaluate alternate emergency manuals. As of now, the manuals for every Presbyterian Homes site vary. From here, I discussed the project with the campus administrator and decided to base this manual off of other Presbyterian Homes’ emergency manuals that already had a wireless pager system in place. However, contracts with other sites, vendors, and transportation systems did need to be site specific. Two sites were set up as resident housing in case of emergency evacuation: Presbyterian Homes of North Oaks and Presbyterian Homes of Bloomington. These two sites were chosen for specific reasons such as location, common space size, and available beds of the facility. A list of transportation companies was also added to the updated emergency manual. I then researched many transportation companies for reliability, availability and quality based on input from staff at the facility and their past experience with the companies. Vendors and their contact numbers were also introduced in this emergency manual. For every type of emergency, there is a contact number and contract set up for Arden Hills. The call light system company was also contacted for this emergency manual. Previous
facilities have been cited for no backup of their wireless pager system; I wanted to ensure that this would not occur at Arden Hills. Overall, there was a lot of investigation and problem solving involved with the development of the emergency manual.

Outcomes and Recommendations

This project was a definite improvement over the previous manual in place at Presbyterian Homes of Arden Hills. Employees were made aware of the changes in the new manual, and everyone now has an updated emergency contact number list. Now, at the new employee orientation staff members are shown the emergency manual and where it is located on each floor. Our site is now better prepared for survey this year, but more importantly for the tests of an emergency situation.

Editor's Note

A carefully thought-out plan for what to do in case of emergency provides clarity and safety for residents and staff. Not only will it prepare a facility for a successful state survey, but it can also be a life-saver if an emergency does occur. In this day and age of more publicly reported disasters and emergencies, every organization should take another look at their plans to see if they are ready.
Project Title: Survey Preparation  
Student: Sara Williamson  
Practicum Site: St. Therese Home  
Preceptor: Denise Juday Barnett

Introduction

Nursing home surveys evaluate the quality of care provided by the state's Medicare and Medicaid certified nursing homes. These surveys are conducted, unannounced, every 9-15 months to assess compliance with federal and state standards of care. Advance survey preparation can help alleviate the stress and anxiety associated with these evaluations, which may in turn allow the process to be more productive for everyone involved.

Project Description

St. Therese Home already had an educational packet, given to all staff, to help prepare for state surveys. The packet contained reading material related to different topic areas covered during the survey. It was decided that we would change the way that we prepared staff for state surveys by using different methods, such as Jeopardy-style cards. This idea of a new survey preparation process became my leadership project, in order to create a fun, interactive way for staff to prepare for survey.

Tasks Involved

Since I had never been through a survey before, I needed to do research in order to prepare for this project. I worked with the Staff Development Coordinator and QI Manager to begin. It was decided that I would use an active learning approach to help the staff better prepare, since learning is about more than just memorizing facts. We wanted
to make learning interactive by creating an environment where discussions could be generated from Jeopardy-style cards so that the staff could learn and apply it to their daily routine.

We decided that survey prep card and a question/answer sheet would be used, along with prizes and themes. The themes to be covered included Emergency Plans and Life Safety Code, Vulnerable Adults and Resident Bill of Rights, HIPPA and several others. A bulletin board was posted to announce the weekly themes and to announce previous prize winners. Every two weeks, I created a worksheet with questions to match the week’s theme and I also made CEUs available to staff for completing the worksheets. For each theme, I kept track of how many worksheets were handed in and the CEU hours. The number of worksheets returned progressively became higher over time. The survey prep cards were a creative and fun approach to learning as well. We also created a mock survey and an auditing tool so that we could rate the facility.

**Outcomes and Recommendations**

Judging by our most recent survey, our preparation was well worth the effort. I also received a lot of positive feedback as a result of our active learning approach. People were very receptive to the idea of a fun survey preparation process. I involved others in the planning and implementation process, but I should have delegated more responsibilities to others.
Editors' Note

A regular focus on survey preparation can help refresh and remind staff about regulations and familiarize them with the survey process so as to increase their confidence when interacting with the survey team. A well prepared staff will not only ensure a positive survey outcome, but more importantly will also have a positive impact on staff morale and ultimately residents' quality of care.
GOLDEN VENTURES COMMUNITY SUPPORT INITIATIVE (CSI) 
GRANT APPLICATION FORM

Grant Request From: Sharon Thole  
Title: Executive Director

Facility: Greeley – Linden facilities together

Address: 313 S Greeley St Stillwater MN 55082

Amount Requested: $1750 (Each Printer is $350, they need 5) Date Submitted: 11/17

Briefly describe your request (the organization you wish to, the purpose of the grant and why it is a good idea) for a CSI Grant: My two facilities (Greeley & Linden) are collaborating on this request to provide a CSI Grant to Lakeview EMS. We work closely with the Lakeview Hospital EMS, and wish to continue building our relationship with them and show our appreciation for their services. The money would be used to purchase five mobile printers for the ambulances to go with their new electronic patient care charting system.

Name and complete address of organization receiving the check:
Lakeview Hospital EMS
927 Churchill St
Stillwater MN 55082

Is the grant receiving organization a non-profit? Yes X No 

To whom should the check be made payable? Lakeview Hospital (Same address as above).

To whom should the check be mailed?
Sharon Thole, Executive Director
313 S Greeley St
Stillwater MN 55082

Please describe how the check will be presented:
The check will be presented by me to the Lakeview EMS team at Lakeview Hospital. The EMS Director will invite the local newspaper to the check presentation and encourage them to do a story on the grant. The EMS Director will also be responsible for inviting local legislators and other dignitaries and has already invited our facility teams over for coffee and muffins during the check presentation.

(Note: The grant recipient, not you or your facility, is responsible for arranging the check presentation, inviting dignitaries, coordinating media coverage, etc. Please describe what arrangements have been made and by whom).

Date check is needed: December 5th, 2006

After completing this grant request form, please email to: Jim Wahner, Golden Ventures, Regional Director of Government Relations, at For more information on CSI grants, call Jim at
**Spiritual Care Purpose**

Presbyterian Homes & Services was built on a foundation of spirituality. Through this foundation, Presbyterian Homes & Services' commitment to spiritual care was derived. The purpose of spiritual care is to provide residents and staff with spiritual and emotional support, to help call forth the faith that is within them, and to provide religious services that facilitate spiritual growth and maturity.

**Giving Options**

Designating the Spiritual Care Endowment Fund in your will is another way to give a gift that keeps on giving.

Gifts may be made in honor or in memory of a loved one.

**Contact Information**

Presbyterian Homes Foundation
651-631-6132
Or visit us at:
www.preshomes.org/foundation

---

[Address]
2845 Hamline Avenue North
Roseville, MN 55113
THE NEED

Spiritual care is closely linked to better physical health and mental health, lower use of health services, and a higher quality of life. Spiritual care is called on as a way for older adults to cope with illnesses, change, and death. A chaplain’s role is to offer comfort, solace, and support to those in need, in a way that is accessible and meaningful to people of all faith communities, as well as to those with no faith tradition. Spiritual care is used as another service that can provide comfort to both the body and the mind during difficult times.

RESPONDING TO THE NEED

Spiritual care is an integral part of Presbyterian Homes & Services mission, “…providing compassionate and highly competent care with the inspiration of God’s love and word.” Our chaplains provide both shared and individual spiritual services, including conducting chapel services, arranging for spiritual leaders of other religions to visit or conduct services, leading spiritual study groups, and providing one-on-one counseling to residents and their family members, who may also need assistance coping with the changes their family member is experiencing. Chaplains serve as the primary source of spiritual care to many of our residents and through this connection, they build spiritual relationships.

YOUR HELP IS NEEDED

Despite their immense value to physical, emotional, and spiritual well-being, spiritual care activities are not reimbursable by health insurance or government programs. Because no reimbursement is available for spiritual care, many senior communities outside of Presbyterian Homes & Services are reducing or eliminating spiritual care. Philanthropy is a way to help ensure that Presbyterian Homes can maintain and enhance their spiritual care services. To support the vital spiritual care needs of our residents, we have created an endowment focused specifically on supporting our spiritual care programs.

AN ENDOWMENT

Gifts to the Endowment Fund are held in a separate endowment account. The Fund is prudently invested under the advisement of our Board of Directors’ Investment Committee. The annual distributions earnings from the endowment provide a permanent source of revenue for spiritual care services.
Second Annual Hug Fund Campaign
June 26th – June 30th

Agenda
❖ Wednesday June 28 - Bake Sale
   1pm-3pm in the break room
❖ Thursday June 29 - Ice Cream Social
   1pm-3pm in the break room
❖ Friday June 30 - Thank You!
   Casual Day

What is Hug Fund?
It is a non-profit, tax-exempt, charitable fund created by and for employees. It is supported and operated by the employees of HCR Manor Care and its affiliated businesses for an unexpected catastrophic event such as a natural or civil disaster of severe economic hardship.
See HR for more details.
Practicum Students Best Practices Book

Written By: Ashley E. Misner

My first week
Be prepared! Some preceptors include you in projects right away and it can seem overwhelming! Some of you may be a little less busy, but be patient because the ride has just begun.

It is very overwhelming but just stay upbeat with a smile on your face. Don’t be afraid to approach people and just introduce yourself. I met a lot of people doing that.

I was nervous and worried, but everyone was really nice and helpful. Most people were excited I was there. I took the time to introduce myself to everyone I saw – staff, family, residents, etc.

Try to get Acquainted—Say ‘Hi’ to people in the hallway even if they don’t know you or you’re name, they’ll start to learn your face and names will come later.

I rotated through each department with the Director of the department to get to know employees. I spent a day or two doing this.

I felt very overwhelmed with information (i.e. the guide) and behind in terms of understanding the buzz words and the overall operation of the nursing home.

In my first week I was able to meet with every department head and ask them questions about what I’ll be looking for during my rotation. Get on the floor and really make a good impression and get everyone to know about you and why you’re there.

You will get to know everyone faster than you may think … go around and introduce yourself. Some associates will make you feel welcome others may not even recognize your presence.

Like many, I spent my first week in activities. It was a great way to get to know the residents right away, as well as to familiarize myself with the building. It was pretty hectic and I spent a lot of time just trying to remember names and faces. I constantly reminded myself that things will probably normalize within a few weeks to avoid getting too stressed out about it all.

Good and Bad of first week:
Good: The good part of the first week is that you see some things in the facility that you actually discussed in class. It is nice to finally put your knowledge to the test. The good was I felt comfortable getting to know the staff. I was well received by the staff and I felt that they brought me into their family right away. That took a lot of weight off my shoulders.

Others in the facility will help welcome you. Keep a positive attitude-If you’re energized to be there and take an active role in your learning, you’ll influence and motivate others to help you out.

Some managers have had several interns come through already so they know how it goes and are very welcoming and helpful.

Everyone was welcoming and it was great for me to go around with my preceptor to get acclimated.

Bad: You don’t know who you are going to each lunch with. haha

You need to get to know names RIGHT AWAY...it’ll make it so much easier. After you meet someone and walk away, repeat their name to yourself. Forgetting names made my first week very challenging.

It is a little intimidating because you are the new thing there, the intern. So people are definitely watching you, so remember to act professional!

It’s hard to fit in. You might feel left out in conversations and other such things, just remember, you’ll be a part of the ‘team’ in no time. Be patient.

The bad was I felt overwhelmed with all the items that go on in each department, but I knew I would spend more time later on learning the information.

I was worried about what to wear because I didn’t want to be underdressed on my first day. I was also in orientation on my first day, which was overwhelming because I learned all about the facility in a short period of time. You lack direction, and do not know your place. You will be very bored and wonder what you have gotten yourself into.

I’m horrible with names, so I had to learn quickly the importance of memorizing the names of over 200 staff and residents to show some respect.

Resident for a day:
Go in with an open mind to really go through some humbling experiences. Try the pureed diet and a mechanical lift... these are sure to give you a rude awakening!

I did this about 4 months into my practicum. I enjoyed this experience very much because you get to see both sides of being a resident and being an employee. You get a feel for what someone really goes through when they are a resident. I think everyone should have this experience. They would appreciate their life more.

I personally have not done mine ... and feel like it would be weird having been here for 4 months to pretend to be a “resident”. I think it would confuse a lot of individuals.

Believe it or not, the resident for the day activity was good. It was a very eye-opening experience which made me relate and be able to sympathize better with the residents. Everyone was extremely nice to me, but I was intimidated with the longevity of the management staff and I didn’t really know too much about myself. During the practicum you begin to understand your path in life and why you have chosen HCAD as a major.

I found this to be very insightful and I think it’s a great part of the practicum experience. I had it pretty easy – good roommate, didn’t have to eat the special diet food products, as well as didn’t have to get a bath. I spent my day doing every activity offered. When evening rolled around and there wasn’t as much going on I spent time talking to the PM shift staff. I was wheelchair bound, and I did this within the first two months, so it was a little awkward for the staff. I had trouble sleeping during the night because of noise and temperature issues, but I guess that was somewhat expected.

DO IT early, before everyone knows you! It gives you a great understanding of what these residents go through everyday.

Make sure at some point during the experience that you allow the C.NA’s to feed you. It gives you a great idea of how important dignity issues are.

I didn’t do this my first week but it was an excellent experience. It taught me a lot about how we need to look at residents and how we treat them. It really is all about person-centered care.

Great experience to go through. It makes you realize what your residents feel like and what its like to live in the environment we are providing them.

Do it early for the real experience. Really try and rely on the staff for help to get the full effect of what the residents really go through.

I lucked out because my facility has all private rooms. I did my resident for a day on the second day of my practicum. I felt like a real resident because I didn’t know my way around or any of the staff. I still feel it was a valuable learning experience. It’s all what you make of it.

I went into it with the mindset that in order to fully experience this activity, I need to “be a resident.” I “had” a broken patella and clavicle. I allowed CNAs to dress/undress me and toilet me.

Business Attire/atmosphere:
Always over dress. Some of you may not feel as confident, so wearing a business suit might help overcome some of those insecurities initially. Make sure you also get involved in the special apparel days ie. Halloween, Hawaiian day, etc. The residents get a kick out of the employees acting silly.

I enjoyed dressing up like a professional. While it was expensive at first, you can buy nice dress clothes periodically throughout the practicum to keep you looking fresh. Dressing up demands attention from peers and coworkers and also earns you respect.

The atmosphere is professional and everyone gets their work done, but you can still have fun. Business attire takes some getting use to, but it’s not so bad because everyone else is dressed in business clothes too.

The dress is different at every facility. Make sure you find out the dress code before your first day, just slip your preceptor an e-mail or stop in and pick one up. It is a bit of a hard adjustment at first but now I enjoying dressing professional.

It is my opinion that looks play a part in what people think of you. I was apprehensive about wearing a business suit the first day, but in the end was glad I did. The student before me did not dress professionally, and from conversations, it had a negative effect on people’s perceptions of her. I think the atmosphere is casual, but if you want to be taken professional, you need to dress it.

The business attire and atmosphere is very professional. In most cases you will be one of the youngest in the building, or at least in management. You will find that others may be quick to judge, but just try and get to know everyone.

I thought I wouldn’t have enough “business” type clothes when I started. Little did I know you just need a few pairs of nice pants...and then you pair them with a ton of different shirts. No one notices if you are wearing the same pair of black pants on Monday and Thursday! ;)

Be professional to get the respect you deserve and should have. Remember what your Mom always told you: Sit up Straight, Listen, Wait your turn, don’t eat with your mouth full, ETC. First impressions are everlasting.

Sit down and ask your administrator what he/she considers business attire and stick to their description, EVERY day!

We are business casual but most of the people wear scrubs- it definitely separates people and I don’t know that I like it. The atmosphere/culture is very comfortable- you feel comfortable asking questions and approaching any staff member. It is a very relaxed atmosphere where people can have fun with the residents and their job- which is vital to loving your job.

**Essays and making time for them:**
Plan ahead…keep a “to-do” list! That way you won’t get behind.

Essays have their purpose, but to what extent I’ve yet to determine. It was hard to balance “schoolwork” during the beginning of the practicum because there was so much going it was a challenge to remember you have a paper to write on top of it all.

I tried to hammer them out right before the due date. I would try and write the papers one by one throughout the entire month so you aren’t writing papers for an entire week.

You tell yourself that you are going to get them all done early, that usually doesn’t happen. So many things come up so don’t wait until the last minute. Really try to schedule them evenly between the times they are due.

Hard to do but by writing on the sections you’ll find that you’ll have gained a ‘global’ understanding and will be able to look at things more conceptually.

My preceptor was really great about allowing me the time to work on them. Also, interview and/or talk to the people at your facility! There are GREAT resources with valuable input. Don’t put off the essays until the last week. It takes a lot longer and you can’t pull an all-nighter and skip work the next day!

EXTREMELY time consuming. I was able to make time for all the essays at work, however the reports and leadership project summaries are something I have had to make time for (a lot of time for) outside of work. The earlier on, the more time you have to work on things at work. It becomes very difficult to find time at work to complete reports after the first half of practicum.

The more you get done in advance the better!!! I am a true procrastinator, so I did not do anything in advance. I had many a sleepless nights due to this…so avoid if possible. Make sure you read the required activities while you are doing your rotations! This helps with writing your broader knowledge reports.

This was too much! For one thing, we do so much at our practicum site, that finding the time to actually sit down and type up all of these essays was the worse part. It would be better to have essays but not so many or a longer time span.

I always did these at home but when I had a free time I would do them at work. I would suggest asking many people for their opinions because it gives you a broader range of ideas and intellect which is very helpful in writing them.

I’ve found that the best time to do my schoolwork is in the first hour of my day before stand up. If it still requires more of my time I usually save it for Sunday evenings. It may seem overwhelming, but try to take it one assignment at a time.

MAKE time for your essays. You don’t have to finish them right away but begin thinking about what you want to talk about and ask people at your practicum site.

Rotations:
Felt like my head was in a spin cycle! Although a whirlwind of information, I found them to be fun for the most part. Some days are boring, while others you might find it hard to get more than 10 minutes to sit. Don't rush in and out of departments — stay until you feel you've pulled as much information out of the employees as you can. I spent a week in some departments and six weeks in others. It isn't as important as you might think to plow through all your rotations in the first four months just to say you're done with them.

Really spend some time working in the department so no one can say you don't understand what I go through. This also gives you knowledge of every position in a facility.

Everyone does them differently. You get out of them what you put in. Spending a few hours in a department is not going to give you the same experience as spending a few days, a week(s), or parts of the days for a duration of time.

Definitely a learning experience. The biggest thing for me was going into each rotation with a positive attitude. If you are not looking forward to doing your rotation in laundry or dietary or whatever, it will show to the other staff and in your work. Have fun with your rotations!

This is really where you need to put your energy. As an administrator it is important to know how each department is run and what they are responsible for, this is a good insight for that.

Be engaged and ASK questions. You're here to learn and everyone is very acceptable to engaging the student in their everyday tasks.

The rotations were mostly fun. Some departments you like better than others but you can't like everything — that would be too perfect. The rotations did help me a lot in getting to know staff so now when I walk around the facility, I know most of the staff, which is always nice to be able to say hi to someone using their name.

Go in with intentions to learn everything possible. Make sure you do not intimidate the employees, simply explain you are a student and you are merely interested in learning about their job and you are not trying to point out what they are not doing or try to get them in trouble. The employees also will share more with you, if you are especially helpful. Sometimes being helpful calls for photocopying papers or filing, whatever the case maybe, be gracious. The positive attitudes you take in these situations will take you a long way.

Get the Department heads to tell you what they do and how to their daily tasks as if you were going to be doing the job for them. You'll gain an advantage this way to knowing how the workplace operates.

Spend a lot of time in Nursing and HR. I learned the most in these two rotations. It's a lot of learning how to deal with people, and it really connects you to both the residents and the staff.

These were great! They gave a feel for each area of the facility. I definitely enjoyed doing these rotations.

They are a good experience overall. It really gives you a great understanding of everyone's role within the facility. Some may take more time than others. Make sure to revisit those that you want to lean more about.

Personal Grieving:
(Either with work or personal life)
It's ok to grieve, whether you need to cry or hug someone. It's a part of the job. It will definitely get easier as time moves on. I think it is also nice that if you are especially close with the resident, to attend their memorial. This type of support is often very healing for the family members of the resident and yourself.

Getting close to the residents is the best part, but losing someone is the hardest.

Attend memorial and funeral services if at all possible. When a special resident passes, this is a good way to say goodbye.

If a resident you are close to passes, try to attend at least the wake. You have no idea how grateful families are for that and what it says about you but also because you are representing your facility.

Realize it is a part of what you do and that everyone dies. Death is never easy but it has helped me deal with loss.

Personal grieving is an individual emotion and each resident's situation is different. Coming from a strong catholic family, I believe your life lies in the hands of God.

I had to adjust my lifestyle to working 40+ hour weeks and juggle school work. It was an adjustment to have new co-workers, boss, schedule, etc.

Keep in touch with your classmates! I have kept in touch with a group of people from my practicum class and we all keep each other sane. Also, sometimes it has helped me to talk with my administrator or other department heads to see how they handle some of the workplace situations. Keep your personal life like out of work!
Be polite and don’t seem like a know-it-all. Often times, department heads can be intimidated with your position, so be cautious with how you communicate with them. Be a listener and friend with them, because they will be willing to share more important information with you.

I would be honest and learn from each dept head. You will get the most respect from them if you follow through on what they ask you do to in a timely matter. Make it a priority!

This is who will keep you afloat. Respect them and try to learn as much as you can from them. Many of them have been there for a long time and could do their jobs in their sleep! They usually do enjoy showing you what they do.

Respect them and learn from their experiences. Don’t come in talking about getting drunk over the weekends. You are their peer and need to act appropriately.

Everyone was easy to talk to. If you are approachable in their eyes, and do not cross the fine line that your position presents you with, they too are willing to work with you.

It is hard when there are conflicting personalities. For me I enjoyed everyone I worked with. Some I felt gossip too much, but you will have that. You just ignore it and don’t repeat it.

Spend lots of time with the DON…at my facility, I share an office with her. It is so awesome to be at the hub of the facility.

I interact with nearly every department head at least once a day. It’s very important that you start building good relationships with them from day one. Show you are interested and that you want to probe their knowledge — especially those that have been at the facility most of their life!

Coming from an organization where the longevity of the staff have been here for as long as I’ve been alive it was extremely important for me to come in with a positive attitude and begin to appreciate the number of years they have been here. You must learn to understand their role as a department head and become aware and respectful for their duties in the organization. Take their style and focus on positive changes if they must arise.

The department directors are great to work with- some of them are more willing to work with you than others but that just differs based upon their personalities. It is definitely good though to get to know the department directors because as an administrator you need to know your staff and those in charge of departments.

Get your co-workers to trust you and depend on you. Offer a lending ear about a topic that troubles them, treat them as kind of like a classmate-be a friend, offer advice, offer the ‘other side’ of the story, give suggestions.

- Line Staff:
Show compassion for the work they do, lend a listening ear. More than half the time, an employee just wants to be heard.

I think I have good rapport with all the staff, and have spent a fair amount of time specifically with line staff. I probably sought their assistance and advice more than I did any manager. Often the managers weren’t as clear on some of the intricacies of an operation because they aren’t performing them everyday. The line staff appreciates you coming to them and asking questions because it helps to validate their performance and knowledge about a specific subject. Not everyone gives you “good” advice though, so it’s important to ask several staff members to get a good idea of how you are supposed to think about something.

This is really where you learn about the interaction and situations you will have with employees. I felt at times that I may not have been respected because of my age (many times about the same for C.N.A.s) however if you put your foot down you will gain that respect. I was disrespected by a C.N.A. and it was really hard but I decided to write her up, which she then apologized and treated me with respect as did others from seeing that you will get punished for inappropriate behavior.

Work with them and ask them questions. Make them aware that you are interested in what they do. Be polite and never think you are better than them. They are in the same ship. They row the oars while you lead them towards an outcome. Without them you would get nowhere and without you they would row in circles. They need your leadership.

It is important to be visible and on the floor in order to make a good connection with the line staff.

Don’t come in acting like you are better than the housekeeper, C.N.A., kitchen staff, etc. Some of them have been doing these jobs longer than we have been alive! We are learning to do a job where we will be their boss, but we still need to treat the employees with respect. It’s not your job to be their best friends, but they do need to respect you.

Do not act better than them! Ask them thoughtful questions about their jobs and compliment them. They are often the most under-recognized staff...also share the good things the line staff does with their department head.

I believe you must gain appreciation for what they do and show them you have the dedication and commitment to exceed in what you do. RESPECT and appreciate their background, education, home life, and personal interests.

Dig into their jobs, during your rotations with them, be willing to get your hands dirty. They will RESPECT you for that!

It is very important that the line staff see you (and the administrator!) so that they know that you are involved, that you do care and that they can feel comfortable enough to say hi and have a great working relationship.

Are often times confused about you position. Make sure to stay on a professional level with them, yet understating.

~ Fellow HCAD students:~
I didn’t rely on other students a lot, but when I did have a question it was nice to know there were individuals who were willing to help. Other students often sent “mass” emails to all the practicum students when they needed advice or help on a project. I think for the most part they benefited from doing so.

*Keep in touch* as much as you can. I would not have made it with the help of fellow students. No one - your parents, your siblings, non HCADers can identify with you like your fellow HCAD students. Many times I thought I was crazy for thinking something but then talked to someone and *they felt the same way!* It just helped a lot!

Use your classmates for information, questions, venting, etc. They feel the same way you do! **Don’t hesitate to ask** your classmates opinion or feelings on assignments, essays, rotations, projects, etc.

Some of you will find that is it easier to get feedback from some more than others, but all in all, they are a *tremendous resource* for you now and in the future. They are also good resources for you facility.

My practicum classmates have been awesome at helping me **keep things in perspective.** It has really helped to know that they are going through the same experiences you are. They are also *great resources* for finding out what other facilities do and sharing information.

Don’t forget about their lives prior to the practicum. When you get together for the modules, don’t just talk about what is going on in your facility. But also be free with sharing information, it **helps relieve stress** when you can share what is happening in your practicum with someone who is going through a similar situation.

I have a lot of close friends in my practicum!! I am very grateful for that because you **help each other** out and you need to have that.

A great reference and *way to network.* Compare often!

Find out what worked for them and **ask ANY questions,** we’re all in this together.

I think it is important to help out your fellow HCADers because in the future, these are the people you can **turn to and ask for advice.** You have this network of people that you have already known now for a few years so you should feel comfortable asking them for advice or giving them advice.

Ask them as many questions as you can. **Respond to their questions in a timely matter** like you would want them to respond to you.

Keep in touch with your peers, **they are so important.** The modules are like breaths of fresh air for us to interact together.

---

*Advisors:*
Sometimes hard to get a hold of. But will offer the best advice you could receive. E-mail or call them about ANYTHING-they’ve heard it before.

I frequently relayed questions to both professors seeking their advice. Responses weren’t always the timeliest; however I eventually got the information I needed.

They are not always easy to get a hold of so I think this is where it helped the most to keep in contact with fellow students.

It has been beneficial to me to keep in contact with the advisors between modules. Although it is best to figure out the advisors preferred mode of contact to receive the best feedback in terms of communication.

Nice to have. I can look to them for help and advice.

If you run into any problems or are expecting to have a problem ask them for guidance, that’s what they are paid to do.

If you’re ever uncertain about anything, don’t hesitate to call or ask, just remember you won’t be hearing a response for a week though.

Use your advisors. They may not be that quick to respond but they do eventually. They have good advice and good insights and different views that can be very helpful.

Be patient with them, they are very busy. When in doubt, ask a fellow HCAD student first then if needed contact the advisors.
Leadership Projects:

Have an idea of what you want to do early on in your practicum. Slowly build up the documents that you need to support your paper, this makes it easier when it close to due time to have everything organized. The earlier you get them done the nicer, that way it makes it easier and less stressful for you when you start preparing for the licensure exam.

I think these really help to gain confidence in your abilities. Don’t think that you have to pick all four right away. Some of the best opportunities for leadership projects came in the middle of my practicum.

I find the summaries difficult to work on while you have other deadlines to meet. It is impractical to think you can begin and end all of the deadline requirements in succession.

At the beginning of the practicum, I was really worried about finding leadership projects, but things do end up falling into place. I have all four of my leadership projects picked out and it was not the stressful situation I was anticipating.

These are very beneficial to do because you get very involved in your organization.

Take advantage of projects that your preceptor may assign to you … use them as projects just as long as you are the key player.

Get started as soon as you have an idea!!! I can’t stress this enough. Even if more ideas or projects come up later, you will already have leadership projects started and ongoing and can get involved later in the others. You could always switch which ones you want to do as a leadership project later. Just don’t reject something because it doesn’t seem interesting- often the ones that seem uninteresting are the ones you learn the most from.

Talk with your preceptor about this early, so you can both be on the lookout for opportunities

These are the most fun but also the most time consuming. Find out what you can do to make your facility better than what it is today. These improvements will earn respect from your company.

Leadership projects are both exciting and can be a major challenge for your professional growth. You absolutely want to spend quality time developing your project ideas. I never wanted to regret not doing something at the conclusion of my practicum, so I made sure I picked projects that would really challenge me. I have always felt that in choosing a more challenging project you will test your capabilities, and it can be a decisive tool to determine if you can handle the responsibilities of an administrator.

Facilities have many opportunities for projects. Don’t be too concerned on defining them right away, the projects will come to you.

Begin to think of personal interests in the organization. However, don’t stress out about not having any in the end because opportunities arise when you’re least expecting them to.

Taking Licensing Exam:
Make sure that you find out about it at least half way through your practicum. I would advise to start studying at least 6 months before you intend to take the exam- this way you have more time to study and won’t have to cram. Also, make sure you know what study materials you need for the state exam. You usually have to order your study materials online because we do not get them as schoolbooks.

Make sure you understand the process. Most people don’t take them until spring, so I suggest putting some money each month so you will be able to pay for them when you want to take them!

I would wait until you are absolutely ready. I would take the State exam first. But make sure you are ready to take both. I wouldn’t try and take them both them same day. Just take your time and read over each question carefully. If you are unsure, try and answer the question by thinking about what would be most beneficial for the resident.

Process is a little confusing. Start to research it early!

Start reading NAB material within the first 6 months of your practicum, even though this material seems like it has no relevance to you, IT DOES! I would start studying for your exam in the beginning of the year (January if you’re an August student).
HEALTHCARE CENTRE
HERITAGE SQUARE
6:30 pm
WEDNESDAY, JULY 12
ORTHOPEDIC SURGEON
MARK A. BAYER, MD

SPEAKER:
SURGEON?
COMPUTER-ASSISTED
ABOUT
SEMINAR AND LEARN
COME TO A FREE
SURGERY?
JOINT REPLACEMENT
PEOPLE UNDERGO
EVERY YEAR 750,000

GETTING YOU DOWN?
JOINT PAIN
ARTHRITIS?
WITH
ONE IN THREE
ARE YOU THE

FAX (414) 421-2163
(414) 421-0088
Greenfield, Wisconsin 53229-1411
2404 West Loomis Road

INSIDE
DETAILS
MORE

RESERVATIONS RECOMMENDED—

HEALTHCARE CENTRE
HERITAGE SQUARE

between 8 AM and 8 PM
Please call our receptionist

74
This seminar will provide an opportunity to learn about a procedure that many may not have heard about: computer-assisted surgery. Increased accuracy of the patient and the surgeon and the advantages it offers to how the computer works will include:

- Knee replacement surgery for total knee replacement.
- "Computer-assisted surgery often makes arthritis sufferers feel pain and joint stiffness."
Tobacco Free Workplace Manager Guidelines
Appendix F

To all Management Staff:

As you are aware, all of the Spooner Health System staff received a memo from Mike Schafer, CEO, announcing the new tobacco-free campus initiative becoming effective April 1st, 2007.

In making this decision, Spooner Health System is stepping forward again toward improving the health of its community by prohibiting all tobacco use on its campus.

We are asking that you discuss this policy with your employees prior to the implementation date. This guideline will help you understand the policy and help you talk to staff about the policy and its implications. We want to ensure that every employee is aware of the policy and has had the policy and the reasons for instituting it explained to them prior to the implementation date.

As a member of the management team, we need your help to enforce this policy as you enforce other policies. Individual employees are responsible for awareness of the policy, adherence to the policy and for helping visitors and patients understand the policy. They are empowered to remind anyone seen using tobacco of the policy. However, the enforcement of this is the manager’s responsibility.

It has been shown that the first two to three weeks after implementation is the critical time period. As long as the policy is fairly and universally enforced during the beginning weeks, compliance with it will become the norm. Employees will be watching to see if this enforcement takes place. It cannot be stressed enough that all management staff must adhere to the enforcement of this policy. Employees have the right to expect that policies will be enforced fairly and uniformly in all departments.

We recognize that this new policy places supervisors and managers that smoke in a difficult situation. Your actions will set the stage for how your employees react to the new policy.

If you have any questions please contact Mike Schafer at Ext 245 or Cindy Rouzer Ext 224.

Thank you in advance for helping us make this a healthier workplace.
Why did Spooner Health System institute this policy?

- Spooner Health System is committed to improving the health of its employees, patients and community by promoting and providing quality health care. Tobacco use is a major cause of lung disease, lung cancer and heart disease. Tobacco use is the number one cause of preventable illness and death in Wisconsin and across the nation. We cannot promote health while at the same time allowing something on our campus that goes against this same principle.
- Studies have shown that employees who would like to quit are more successful in quitting when smoking is prohibited in their workplace.
- The littering of cigarette butts on the property does not enhance the professional image of our organization.
- The sight of employees smoking on our property and surrounding areas does not reflect the image of health promotion and professionalism that we would like to see from all our employees and on our campus.

What does the policy really mean?

- It means that no tobacco product use will be allowed on our campus at any time by any employee, patient, resident or visitor. This also applies to contract workers such as agency staff, contractors or sales reps, etc. It also applies to physicians, or medical students even though they are not our employees.
- Employees are prohibited from using tobacco products on paid time (break time) and are strongly encouraged not to use tobacco products on unpaid time (lunch). If employees use tobacco products on their unpaid time (lunch) they cannot return to their job with the odor of smoke on their clothing. This is a violation of the new dress code policy from HR.
- If employees choose to use tobacco products on their unpaid time (lunch) they must leave the campus and are not to smoke on the property adjacent to the facility.

Smoking is an addiction and it is very hard for people to quit. We understand this and know this will be a hardship on many people. Employees who smoke are not required to quit smoking, only to abide by the policy during work hours.
Appendix F

Questions?

My break and lunchtime are my own time, why can’t I smoke then if I leave the property?
Your break times are paid time. It is a work rule that you can’t use tobacco on paid work time. Your lunch break is not paid time. Employees are strongly encouraged not to use tobacco products on their lunch breaks, but if they do they must leave the campus. They will not be allowed to smoke on adjacent property. However, according to the new Dress Code Policy from Human Resources, smoke odor is prohibited. Employees will be violating the policy if they return after lunch with a smoke odor.

What will patients/residents do that want to smoke?
Physicians are prohibited from writing orders for a patient to smoke. Patients/residents will not be allowed to smoke on campus and will have to leave our campus to smoke. Nicotine replacement products are available to patients on the floor.

What if a patient leaves the campus to smoke and something happens to them?
It is not considered leaving AMA if a patient chooses to go off campus to smoke. We encourage all caregivers to talk with patients before they leave and to encourage them not to leave. We provide nicotine replacement products for patients to use while they are hospitalized.

What about visitors that are in crisis and want to go out to have a cigarette?
We realize that this is a hardship on many people. Unfortunately, we cannot distinguish between those in crisis and those not in crisis. The rule must apply to everyone at all times. Visitors must leave our campus to smoke and then return.

I am in a union and this was not negotiated in my union contract.
This is a work rule that is applied to all employees. Union contracts state work rules apply to union members.

Can I smoke in my car?
Not if your car is parked on Spooner Health System property.

What if I leave campus to smoke and am injured?
You will not be covered by worker’s compensation if you are off our property on unpaid break/lunch time or before or after your scheduled shift.

**How will the tobacco use policy be enforced?**
All employees are expected to follow the policy.

Any employee observing a violation of the policy should report to that individual’s supervisor/nurse manager. A violation form will be completed and sent to that individual’s department manager. The employer shall adhere to a policy of progressive discipline.

**Are employees and managers expected to enforce this policy if they see someone smoking?**
- Employees may approach an individual who is violating the policy and voice a short, simple, friendly reminder that “Spooner Health System is a tobacco free campus”.
- If the person is a visitor they may not be aware of the policy.
- If the person is a fellow employee they need only remind the person that “Spooner Health System is a tobacco free campus” and continue on.
- If employees see someone who is repeatedly violating the policy, employees are encouraged to contact a Human Resource representative.
- Managers are to contact a Human Resource representative as well.
- Managers are also expected to follow the disciplinary process if they receive report of employees violating the policy.

**A reminder that all employees are encouraged to be supportive and respective to co-workers who smoke as the transition is made to the new policy. Smoking is a powerful addiction, and people who smoke will have an adjustment time when the new policy is effective.**
Facilitation Guide for Managers
Dress Code Policy and Smoking Odors

Please use the following as a guide when talking with employees about the dress code policy as it relates to smoking odors.

Points to keep in mind:
- The provision that prohibits smoking odors was placed in the new dress code policy in response to complaints by patients/residents and employees about the strong smell of smoke on employees.
- This provision should be enforced fairly and uniformly along with rules prohibiting strong perfumes, colognes and aftershave.

If you notice the strong smell of smoke or become aware of an employee that has smoke odors on his/her clothing or breath please follow these guidelines:
- Have a private discussion with the employee immediately
  1) Review the policy to ensure the employee is aware of the policy
  2) Ask the employee if they are aware that others can smell smoke when around them
  3) Talk with the employee on how to eliminate the smoke odor. Suggestions for eliminating smoke odors can involve the use of commercial sprays such as Febreeze, leaving a set of clothing or scrub jacket at work and changing upon arrival, gum or mints for smoke odors on breath.
  4) Emphasize to the employee that the policy applies to all employees and that whatever the solution they decide to use is their choice but that smoking odors are not allowed and need to be eliminated.
  5) Acknowledge that assistance is available should the employee desire to stop smoking.

Please use understanding and empathy during this transition stage. Coaching might need to occur several times before the problem is solved. If you need assistance with this issue please feel free to talk with Human Resources.
Appendix F

Smoking / Tobacco Use Violations
Responsibilities

Department Manager / Supervisor
Managers should review the policy and implications of non-compliance with staff members in their department. Discussion at staff meetings should address the importance of patient care issues and tobacco use.

- Patients express concerns when they smell smoke on a caregiver.
- No one entering this facility should be confronted by smoke at building entrances.
- The message the sight of people smoking or using tobacco products on Spooner Health System grounds sends to our visitors and community.

Managers are expected to enforce the tobacco free policy and to follow the current disciplinary procedure policy:

- The first violation
  - will result in the employee being counseled by the manager and issued an internal report.
  - the policy reviewed with the employee.
  - referral to Employee Assistance Program for resource if needed.

- The second violation
  - will result in the employee being given a documented verbal disciplinary notice.
  - the policy will be reviewed with the employee.
  - performance improvement plan initiated.
  - referral to Employee Assistance Program for resources if needed.

- The third violation
  - will result in the employee being given a documented written disciplinary notice.
  - policy will again be reviewed with the employee.
  - performance improvement plan followed.
  - referral to Employee Assistance Program for resources if needed.

- The fourth violation
  - may result in the employee being given a three (3) day suspension.

- The fifth violation
  - may result in the employee being terminated.

Human Resources is available to assist managers with employee concerns regarding the tobacco free policy.
# Colonial Manor Employee Satisfaction Questionnaire

**Date:**

**Length of Employment at Colonial Manor:**

For each item identified below, circle the number to the right that best fits your judgment of its quality.

Use the scale above to select the quality number.

<table>
<thead>
<tr>
<th>Description/Identification of Survey Item</th>
<th>Scale</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do you know what is expected of you at Colonial Manor Medical and Rehabilitation Center?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>2. Do you have the materials and equipment you need to do your work right?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>3. Do you have the opportunity to do what you do best every day?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>4. In the last seven days, have you received recognition or praise for good work?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>5. Does your supervisor, or someone at work, seem to care about you as a person?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>6. Is there someone at work who encourages your development?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>7. Do you have a best friend at work?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>8. At Colonial Manor do your opinions seem to count?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>9. Does the mission/purpose of Colonial Manor make you feel your job is important?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>10. Are your co-workers committed to doing quality work?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>11. In the last six months has someone at work talked to you about your progress?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>12. In the last year, have you had opportunities at work to learn and grow?</td>
<td>Poor</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

Source: *First, Break All the Rules*

*Marcus Buckingham and Curt Coffman*
Welcome Letter ............................................. 2
Management Team ........................................ 3
Schedule of Charges ...................................... 4
Services ...................................................... 6
Lifestyle ...................................................... 17
Policies ...................................................... 22
Financial Programs ....................................... 26
Questions ................................................... 28
Conclusion ................................................ 29
Appendix H

Services

Cornell Area Care Center is comprised of a team of professionals who specialize and focus in different areas to provide you with the care and comfort you are looking for. The following descriptions give you an idea of how our departments work together to coordinate your care.

Nursing Services

Cornell Area Care Center provides 24-hour nursing services by licensed nurses, certified nursing assistants and other nursing personnel, including the services of registered nurse at least eight hours per day. These staff members will work with your physician to implement your plan of care.

Charlene Shane, Director of Nursing
Sharon Polanski, Clinical Reimbursement Coordinator
Mari Park, Education and Training Director
Appendix H

Dining Services

Our Nutritional Services Department creates nutritious meals that meet your individual needs as well as your personal preferences. We encourage you to eat your meals with other residents in the dining room. We think you'll agree meals are more enjoyable when you join your loved ones, friends, and acquaintances. You may invite your family and friends to join you for meals. Guest meal tickets are available for purchase at the nurse's station.

Meal Times

<table>
<thead>
<tr>
<th>Breakfast</th>
<th>Lunch</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 a.m.</td>
<td>11:45 a.m.</td>
</tr>
<tr>
<td>Dinner</td>
<td>5:15 p.m.</td>
</tr>
</tbody>
</table>

Nutritional Services Manager
Carol Lee

Registered Dietician
Janice Janc

Social Services

The Social Worker will assess your medically-related social and emotional needs, as well as help you adjust in your new surroundings. Our goal is to maintain or improve your independence and sense of wellbeing. If you have a question or concern, the social worker will serve as your advocate. If your goal is to return home, our social worker will assist you with planning for a safe discharge to home.

Social Services Staff
Lynne Stanger, Social Worker
Recreation Services

Our activities department offers a variety of recreational programs. Some programs are enjoyable physical activities or social get-togethers. Other programs can help you explore your creativity, self-expression, and personal growth. Activity outings are scheduled weekly during the summer months. We encourage community volunteer organizations to participate with our residents and help to develop new activities for the enjoyment and education of our residents. Let us know about your interests and how you would like to participate.

A monthly activity calendar is posted in each resident’s room and is also posted on a bulletin board down the wing outside the dining room. Some activities at the Cornell Area Care Center include but are not limited to:

- Monthly Birthday Parties
- Seasonal Events
- Trivia
- Games of Chance
- Dice
- Bingo
- Road Trips
- Baking Club
- Social Hour
- Balloon Toss
- Current Events

Activity Staff

Brenda Liddell, Activity Director
Holly Czech, Activity Aide
Barbara Walters, Transportation
Appendix H

Housekeeping Services

The housekeeping staff works to keep the facility comfortable and clean. We consider a pleasant environment important to your well being.

Each day your room and bathroom will be cleaned. Also, a monthly deep cleaning and bed wash will be done.

Housekeeping Manager

Jennifer Husmann

Maintenance Services

The maintenance director works to keep the facility safe and secure. Work order forms are available for the nursing staff to fill out if you find something that needs to be fixed or is a hazard to you.

Personal electrical appliances such as radios and fans are welcome. For your safety as well as the safety of others, we require our maintenance director to inspect your electrical items prior to use at the facility.

In order to ensure that our life safety systems are fully operational, several checks are completed throughout the month such as: smoke detector tests, fire drills, generator load tests, etc.

For your safety, we do not permit extension cords, electric blankets or space heaters.

Maintenance Director

Dave Sargent
Appendix H

Conclusion

Thank you for selecting Cornell Area Care Center as your facility of choice. As you make yourself at home here, we hope that you will begin to feel comfortable and cared for. We are committed to providing the necessary healthcare and services, to help ensure your short or long term stay with us is enjoyable. We look forward to developing a friendly, respectful relationship based on open communication. Remember the one question we can never answer is the one you don't ask. The one situation we can never resolve is the one we don't know exists. And the one request we can never fulfill is the one we don't know you have.

We take great pride in our staff and realize it is their positive attitude, caring touch and generous nature that can make a difference in your life every day. We ask for your help in identifying those members of our staff who go above and beyond your expectations to make your stay with us special. Please contact our Caring Plus Customer Service Representative at 1-888-789-3870 to recognize someone who really brightens your day!

We appreciate the opportunity to serve the healthcare needs of the Cornell community. We enjoy meeting new people and helping them achieve their independence to return home, as well as developing family-like relationships by providing ongoing support for those who stay with us. If in the future, you, a friend our loved one is in need of the services we offer, we hope you will return or recommend us. Sharing with others the positive experience you have with us is our daily reminder of the important role we play in peoples' lives and the significance of the contributions we are able to make. We will work hard to earn your trust and succeed in being the facility of choice in our community.

Thank you for this opportunity to serve you.
Appendix I

**Labeling**

- Labeling is not 1st step for new admissions
- Marker washes off unlabeled clothing
- Lack of commun. to get new clothes labeled

- No labeling schedule
- No tag or label on item, may wash off

**Transfer to laundry**

- Clothes may not be taken to laundry dept. often enough
- Lost/left in laundry dept.
- Clothing Inventory Sheet filled out before clothes are taken from room?

**Wash/Dry**

- House linens usually washed 1st, personal laundry 2nd
- Socks/underwear not on schedule
- Laundry schedule is unrealistic

**Sorting**

- Find me. Reports under-utilized
- Socks/underwear sorted when time permits. Crammed in large bin
- Clothing not organized by room# on racks
- White census board not being updated, (admissions, room changes, deaths, discharges)

**Missing/Delayed Delivery of Personal Laundry**