AHRQ Safety Program For Long-term Care: HAIs/CAUTI

Organizational Lead Operations Manual

*AHRQ National Implementation of Comprehensive Unit-based Safety Program (CUSP) to Reduce Catheter-associated Urinary Tract Infection (CAUTI) in Long-term Care Facilities

CONTENTS

INTRODUCTION

The Agency for Healthcare Research and Quality (AHRQ), as part of the U.S. Department of Health & Human Services' (HHS) National Action Plan to Prevent Healthcare-Associated Infections (HAIs), funded a three-year resident safety improvement collaborative—the *AHRQ Safety Program for Long-term Care: HAIs/CAUTI*. This initiative is designed to reduce catheter-associated urinary tract infections (CAUTIs) and enhance resident safety culture in long-term care (LTC) facilities, primarily nursing homes, over a 13-month period.

This national improvement program includes a change package that combines clinical and cultural interventions critical to reach the goal to improve care and prevent resident harm. The change package includes the following components:

- Evidence-based CAUTI and HAI prevention practices
- Safety culture improvement practices

The expected outcomes include:

- Improvement of safety culture, evidenced by enhanced teamwork and communication
- A reduction or maintenance of zero CAUTI rates
- Improved awareness and application of infection prevention and safety culture training that impacts other HAIs
- Infection prevention training for staff

HRET's national project team trains and coaches organizational leads (herein org leads) and LTC facility staff includes experts from the University of Michigan, Abt Associates, Society of Hospital Medicine, the Association of Professionals in Infection Control and Epidemiology, Qualidigm and Baylor College of Medicine. Additional support is available from HRET staff and an appointed advisor.

ABOUT THIS GUIDE

The purpose of this manual is to help org leads successfully manage and support LTC facilities that are recruited by respective org leads for the *AHRQ Safety Program for Long-term Care: HAIs/CAUTI* at a state/regional level. This manual is different from the Facility Implementation Guide, which explains the clinical and cultural interventions LTC facilities undertake to improve safety culture, enhance teamwork and eliminate CAUTIs.

INTENDED AUDIENCE

State-based and professional organizations are central project partners (i.e. lead organizations) that coordinate, promote and coach recruited facility teams as they implement the CAUTI prevention protocols and interventions. This Organizational Lead Operations Manual was created as a resource to org leads who have relationships with and support participating LTC facility teams.

HOW TO USE THIS GUIDE

Org leads should read through the entire manual and add to it as needed. Other staff who support this initiative, such as grant administrators, meeting coordinators and data entry support staff may also refer to specific sections for clarification on timelines and resource materials.

Each of the sections of this manual are further described:

Contract Expectations and Recommendations summarizes the subcontract requirements, recommendations for data collection and effective strategies that facilitate project success.

Communication and Support provides org leads with an overview of the primary resources available from the national project team.

Strategy and Timeline is organized according to three project phases: planning, execution and sustainability. Each phase includes a description of project activities. A month-by-month summary of all the activities is included in Appendix A. Overview of Project Activities Timeline.

Engaging LTC Facilities details the educational components of the program, including coaching calls, face-to-face training and distance learning opportunities.

Monitoring LTC Facilities describes the outcome and process measures needed to measure progress, the data collection and reporting schedule and sustainability plan development.

The final sections, Tools and Resources, Appendix A, and Appendix B, provide useful information and resources to implement and monitor project success.

CONTRACT EXPECTATIONS AND RECOMMENDATIONS

HRET SUBCONTRACT

The subcontract indicates the lead organization's commitment to the project. It includes requirements each participating organization must meet to join this initiative and receive funding. The subcontract should be completed before the first learning session by the president or CEO of participating organizations and sent to Jeanette Lyons at jlyons@aha.org.

A summary of the program requirements is listed below for quick reference.

REQUIREMENTS
- Recruit 15 LTC facilities and retain at least 10 LTC facilities throughout the course of the program
- Maintain a 70 percent submission rate for outcome data (i.e. CAUTI rates, resident days, catheter days and urine cultures)

RECOMMENDATIONS
- Conduct monthly coaching calls (optional on the month of Learning Session 2 and 3)
- 60 percent of participating LTC facilities complete 10 knowledge questionnaires (5 licensed/5 non-licensed) at three points during the contract period
- 60 percent of participating LTC facility staff (employed and contracted) completes the safety culture survey at the start and end of the project

ORGANIZATION PROJECT CHARTER

The project charter constructs the overall vision of the program, outlines initiative details unique to each organization and ensures alignment with the national project and other state/regional/organizational initiatives. Each organization project charter is specific to their organization and is drafted and submitted to HRET for approval. It aids org leads with the identification of target goals by outlining the project scope, measures, activities, partners, resources and timeline for successful execution. It also assists the appointed HRET advisor and coach in supporting successes and holding you accountable. The project charter template is discussed in further detail at the Org Lead Meeting in Chicago at the beginning of the program.

ORG LEAD EXPECTATIONS

The org lead, not HRET, is the primary communicator with facility team leads participating in the project. Org leads are responsible for the promotion and communication of all educational activities, program updates and resources available. HRET sends out a weekly newsletter update, as well as e-blasts for all distance-based national webinars and other educational opportunities that org leads should customize and share with participating LTC facilities.

Org leads are crucial to the facility teams' success in this initiative. In this role, the org lead can be seen as a coach and liaison to LTC facilities. Successful org leads are collegial in nature and have established relationships with their constituencies. Org leads coordinate all aspects of the project, from recruitment and registration to educational activity promotion, data submission and data review. The national project team, HRET staff and appointed advisor guide org leads, Facility team leads and other facility staff through logistics and the delivery of clinical and cultural interventions.

All project activities are explained in detail in the Communication and Support, Engaging LTC Facilities and Monitoring LTC Facilities sections of this manual. The Strategy and Timeline section provides a summary overview of the project activities involved in each phase of the program.

Lead organizations that participate in this program are expected to do the following:

- Complete and submit the project charter to HRET
- Recruit and register LTC facilities into the program
- Attend pre-training webinars and the one day org lead meeting in Chicago at the beginning of the program
- Broadly understand both the clinical and cultural interventions, as well as the data components
- Review and disseminate weekly newsletter updates and other e-blast announcements to participating LTC facilities
- Coordinate and facilitate three in-person learning sessions, with assistance from an HRET advisor and faculty coach
- Participate in the following activities: Connecting-the-Dots office hours, Safety Culture Survey Results Forum and the educational series' onboarding (4), training modules (4) and national content (9)
- Encourage participating LTC facility staff to complete and submit an evaluation for every educational activity they attend
- Ensure that all outcome and process measures are completed based on program requirements and recommendations
- Prepare for and facilitate monthly coaching calls
- Provide technical assistance and support to participating LTC facility staff
- Provide feedback to HRET on program materials to ensure relevance to the LTC setting
- Participate in peer networking and learning opportunities, such as the monthly org lead webinar.

TIME COMMITMENT

The estimated time commitment for an org lead is approximately 500 hours (.25 FTE) over the course of 15-months. However, this estimate may vary depending on the organization's infrastructure, relationships with recruited LTC facilities and LTC facility engagement level.

COMMUNICATION AND SUPPORT

COMMUNICATION

HRET ADVISOR
Throughout the project there will be support from an **HRET advisor**. The HRET advisors' contact information is listed below. Please contact the appointed HRET advisor only.

HRET advisor name, phone and email:

Ashley Hofmann	**Katie Johnson**	**Anna Wojcik**
(312) 422-2647	(312) 422-2814	(312) 422-2656
ahofmann@aha.org	kjohnson@aha.org	awojcik@aha.org

NEWSLETTER UPDATES
HRET will remind the org leads of activities and due dates via an electronic weekly newsletter. These updates will highlight upcoming opportunities for education and training which includes onboarding webinars, training modules and national content webinars. The weekly updates will also provide information on deliverable due dates, data submission rates, resource materials, successful facility practices and new additions or updates to the project.
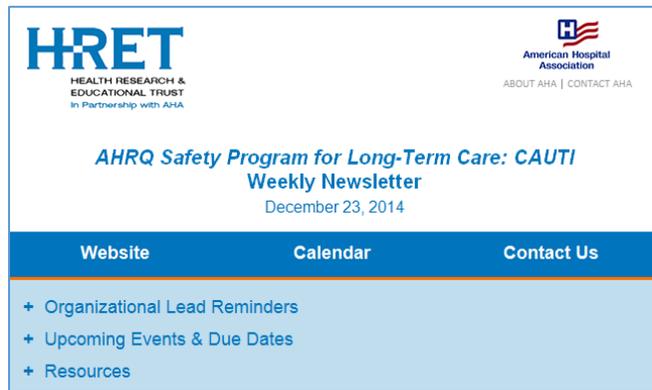
The org lead should read these weekly updates thoroughly and share information with LTC facility teams on a weekly basis. The org lead may customize the information to fit their facilities' specific needs. Org leads can forward the newsletter, summarize it or cut and paste sections from these updates into weekly communication messages.

PROJECT WEBSITE

The LTC Safety website (www.ltcsafety.org) provides org leads, facility teams and national project team members, including faculty coaches, with information and resources to implement the project and complete activities. It features a calendar of events and links to register for webinars, educational and outcome and process measure tools and resources, data dashboards, copies of the weekly newsletter and coaching call

materials. It is a password-protected site and only accessible to org leads and LTC facility project teams.

Please enter the username and password (all lower case) listed below:
Username: ltcsafety
Password: ltcsafety

File Sharing

HRET encourages org leads and LTC facilities to share tools, strategies and resources by posting items in a centralized location. Email templates and tools to the appointed HRET advisor or to ltcsafety@aha.org. Items submitted will be reviewed and posted on the national project website upon approval from the national project team's content and materials subcommittee.

SUPPORT

TEMPLATES AND MATERIALS

HRET developed materials for org leads to share or customize with LTC facility teams for all aspects of the project. Electronic and print versions of materials are available for:

- Recruitment and LTC facility enrollment
- Educational activities, such as presentation materials, tools and train-the-trainer materials
- Outcome and process measure materials
- Coaching call outlines and guidance
- Templates for email communication
- Facility participation and progress tracker
- Data dashboard

FACULTY COACH

Expert faculty will train staff of participating LTC facilities on how to implement and effectively use HAI elimination practices and safety culture tools. In addition, org leads and LTC facility teams will receive ongoing coaching support on data collection, report analysis and recommendations on how to improve safety culture, reduce CAUTIs based on results and monitor progress.

PEER NETWORKING AND LEARNING

Through activities such as web meetings and in-person meetings, org leads have the opportunity to network on a national level with other org leads across all cohorts, HRET staff and members of the national project team for peer-to-peer learning.

Org Lead Informational and Pre-Training Webinars

The Org Lead Informational Webinar provides incoming org leads with an overview of the program requirements and timeline. This webinar is held at the launch of the planning phase and will last approximately 45 minutes.

A 90-minute pre-training webinar helps incoming org leads understand the project goals, structure and requirements of the program and will be held before the org lead meeting. The webinar details through

the project requirements and timeline as they relate to the educational components of the project. It provides pearls to recruit and retain LTC facilities in the project, and then how to engage them in distance learning using the resources available on the project website.

Org Lead Training

The Org Lead Training is an in-person event that provides an in-depth orientation about the project goals, structure, data collection requirements and the org lead's role in managing facilities to meet the program requirements.

This day-long meeting is held in Chicago, usually lasting seven hours. Unless your organization is based locally, please arrive the evening before and depart the evening of the meeting.

Org Lead Webinars

Org lead webinars are informal, interactive web-based meetings to share experiences, ask questions of the national project team and engage in peer learning. HRET staff also share aggregate feedback from the monthly org lead status report. These webinars are held the third Monday of the month from 12:00-1:00 p.m. CT.

LTC Facility Webinar Participation

It is expected that org leads participate in educational activities geared toward LTC facility staff to ensure familiarity with facility-level program expectations, including the clinical and cultural interventions. Participation in these educational webinars will sharpen coaching skills and increase the likelihood of success in this program. Review the training and education section of this manual, the Facility Implementation Guide and the calendar on the project website for more information.

OPTIONAL WEBINAR OFFICE HOURS

Many facility team leads will have questions related to how the education is delivered and designed, as well as general project questions related to the data elements, project timelines and how to use the distance learning platform. To answer their questions, HRET will hold an informal and optional Connecting-the-Dots office hours the week before onboarding process. Facility team leads and org leads are encouraged to attend.

STRATEGY AND TIMELINE

Org leads must engage and recruit interested LTC facilities to participate in this national collaborative immediately. Throughout the course of this project, org leads are encouraged to monitor LTC facility teams' progress through each phase of the project life cycle. While expert faculty supports the org leads and LTC facility teams through the cultural and clinical interventions, members of the national project team work closely with org leads on operational aspects addressed in this manual.

INTERVENTIONS

Clinical and cultural interventions are assessed for improvement in the safety culture and reduction of CAUTIs in LTC facilities. Each of these interventions was developed and/or adapted based on evidence-based CAUTI elimination and safety practices for LTC facilities. Org leads can obtain a general understanding of the interventions described below by participating in educational activities and requesting support from their faculty coach and HRET adviser.

CLINICAL INTERVENTIONS

This project tests whether the following interventions (the C.A.U.T.I. Intervention) listed below can be effective in reducing CAUTIs in LTC facilities:

- **C**atheters in newly admitted and re-admitted residents should be assessed to determine if they are still needed and removed promptly if not indicated
- **A**septic insertion of indwelling catheters and hand hygiene before and after resident or catheter contact should be practiced
- **U**se regular assessments to insert new catheters only if indicated for appropriate conditions and re-assess periodically
- **T**raining of staff, resident and family on catheter care and appropriateness
- **I**ncontinence care planning to address individual resident conditions

CULTURAL INTERVENTIONS

This project also assesses the safety culture at LTC facilities. The safety improvement intervention, T.E.A.M.S., is designed to assist facilities in developing skills and strategies to improve all aspects of resident safety, not just infection prevention.

The T.E.A.M.S. intervention includes the following processes:

- **T**eam formation to plan and implement program
- **E**xcellent communication skills learned
- **A**ssess what's working and plan to expand
- **M**eet monthly to learn together
- **S**ustain efforts and celebrate success

PROJECT TIMELINE

The project lifecycle for org leads (Figure 1) is 15 months that begin with project planning activities and the recruitment of LTC facilities into the program (phase 1) through the completion of the program

activities to reach a point of sustainability (phase 3). A description of the baseline activities, data collection requirements, training and educational opportunities and technical assistance are highlighted below. The cohort-specific timeline and details of the specific activities are linked to corresponding sections of this guide.

Figure 1. Org Lead-specific Timeline for the *AHRQ Safety Program for Long-term Care: HAIs/CAUTI*
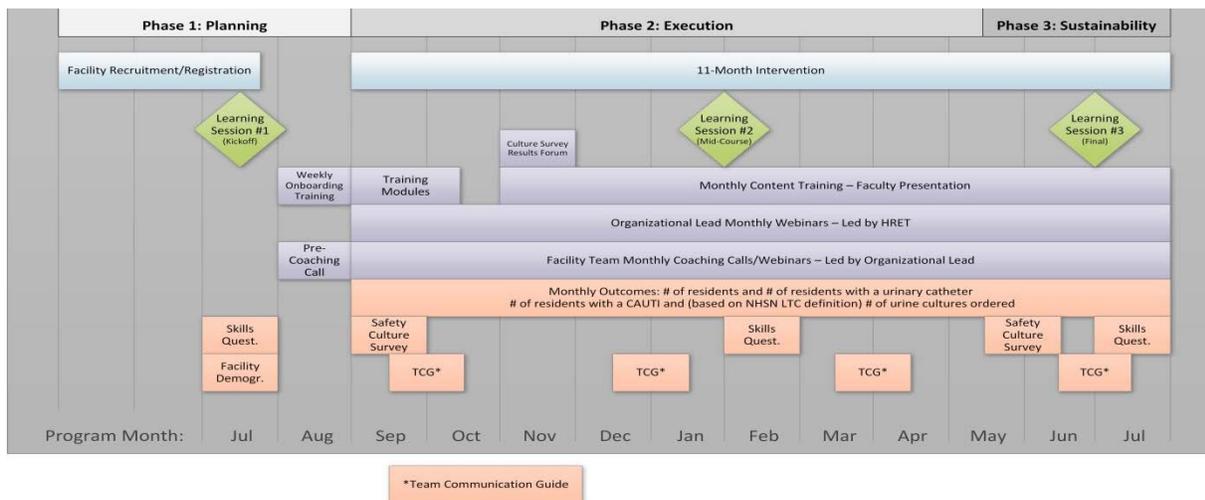
PHASE 1: PLANNING

Phase one is the first three months of the project and two months of org lead onboarding which is not considered part of the formal timeline. This means that org leads participate for 15 months; LTC facilities participate for 13 months. The planning phase gives org leads an opportunity to learn about the program, commit to goals and participation requirements, develop a project charter and recruit LTC facilities.

Activities to Complete
☐ Submit letter of organization commitment to HRET
☐ Participate in the Org Lead Informational Webinar
☐ Complete and submit HRET subcontract and project charter
☐ Participate in the Org Lead Pre-training Webinar
☐ Attend Org Lead Training
☐ Review this operations manual and the Facility Implementation Guide
☐ Participate in both Facility Informational Webinars
☐ Recruit at least 15 LTC facilities
☐ Monitor LTC facility registration process, including the facility demographics assessment
☐ Set-up group email distribution list of all LTC facility team leads
☐ Obtain a copy of the Facility Administrator Commitment Letter, Data Use Explanation and team roster from each enrolled facility
☐ Coordinate and host an in-person Learning Session #1 Kick-off Meeting for LTC facilities
☐ Monitor knowledge questionnaire and safety culture survey submission rates
☐ Participate in Connecting the Dots webinar

- [ ] Participate in Introduction to Coaching Call webinar
- [ ] Participate in 4 onboarding webinars and disseminate training materials to LTC facility team leads

Engaging LTC Facilities

Recruiting LTC Facilities

The enrollment packet includes marketing materials tools, such as the program flyer and email templates that can be customize to recruit and register LTC facilities in this program. Participating facilities must register online. It also includes required documents that each participating LTC facility must complete and submit to the org lead. See Enrollment Packet for materials, activities and timelines.

During the planning stage, it is important to build relationships with the LTC facility administrators, project teams, faculty coaches and the HRET advisor. Identify the reasons why participating LTC facilities are interested in this project and what they are hoping to get out of participating in the project.

Supporting LTC Facilities

Org leads play a vital role to assure that facility teams are engaged and retained in the project. It is important for org leads to attend all educational activities with facility team leads. Furthermore, it is important that all train-the-trainer materials are reviewed and discussed with facility team leads to ensure that they educate their front-line staff on the curriculum within the given time parameters.

Monitoring LTC Facilities

Org leads are responsible for monitoring facility teams' registration and completion of the Facility Demographics Assessment, team roster and action plan. In addition, org leads monitor submission rates for the knowledge questionnaire results and safety culture survey.

National Project Team Support to Org Lead

Throughout the planning phase, HRET staff provides weekly updates in a newsletter specific to the cohort. It features registration and facility demographics assessment, safety culture survey and knowledge questionnaire submission rates. The national project team and HRET staff developed tools and templates for org leads to use in communicating with LTC facilities, and supports org leads in a variety of ways:

- [ ] Enrollment Packet with marketing materials and email templates for recruitment
- [ ] Safety culture survey instructions
- [ ] Learning Session #1 template agenda, standardized presentations on the clinical and cultural interventions, as well as data collection and other customizable templates and handouts
- [ ] Weekly newsletter updates
- [ ] Regular support from a HRET advisor and coach

PHASE 2: EXECUTION AND MONITORING

Phase two features national webinars with other cohorts, coaching calls for LTC facility teams and initiates outcome data collection to measure progress. With the support of the org lead, faculty coach

and HRET staff, facilities implement clinical and cultural interventions and share in peer-to-peer learning. The safety culture survey results identify opportunities for improvement.

Activities to Complete

☐ Disseminate and monitor LTC facility-level engagement and use of Training Module 1 through 4

☐ Participate in national content webinars and disseminate training materials to facility team leads

☐ Coordinate and host Learning Session #2

☐ Monitor safety culture survey, outcome data submission, team communication tracking, onboarding/training module/content series evaluation and knowledge questionnaire submission rates

☐ Send weekly updates and promote educational activities to LTC facility team leads

☐ Lead monthly coaching pre-calls and develop coaching call agenda

☐ Host and facilitate monthly coaching calls

☐ Provide technical assistance and support to LTC facilities

☐ Submit monthly Org Lead Status Report after coaching calls

Engaging LTC Facilities

During phase two, org leads and facility team leads are expected to participate in all educational programming, including national content webinars and learning sessions. Org leads are responsible for ensuring that facility teams complete evaluations following each educational session. Org leads should communicate this expectation to facility teams through email, coaching calls and conversations.

Monitoring LTC Facilities

Similar to phase one, it is critical that org leads attend all educational activities with facility team leads. Furthermore, it is important that all train-the-trainer materials are reviewed and discussed with facility team leads to ensure that they educate their front-line staff on the curriculum within the given time parameters.

Org leads are responsible for monitoring facility teams' monthly outcome and process data submission and CAUTI rates. Facility-level data is recorded in CDS and HRET will provide a data dashboard in Cvent to monitor progress. Regularly review the data and continue to coach teams with individual phone calls or site visits and, if appropriate, connect them with the faculty coach or a high-performing facility team leader for peer-to-peer learning.

National Project Team Support to Org Leads

The national project team and HRET staff developed the following tools and templates to communicate with LTC facilities:

- Descriptions of coaching call roles and responsibilities and agenda templates
- Faculty coach support
- HRET advisor support for the first four coaching calls and beyond if needed
- Learning session #2 template agenda, an org lead-specific data presentation and other customizable templates and handouts

- Weekly newsletter that includes updates on deadlines, webinar announcements, resources and special features, as well as outcome data and knowledge questionnaire submission rates
- Monthly org lead webinar

PHASE 3: SUSTAINABILITY

The *AHRQ Safety Program for Long term Care: HAIs/CAUTI* was designed to help ensure sustainability. The goals of this phase are to sustain CAUTI prevention improvement efforts and resident safety after the project period. This phase entails: continued participation in educational activities, including the completion of Learning Session #3, knowledge questionnaire and the safety culture survey; regular review of data submission rates; and an assessment of proposed sustainability plans.

Activities to Complete
☐ Participate in national content webinars and disseminate training materials to facility team leads
☐ Coordinate and host Learning Session #3
☐ Monitor safety culture survey, outcome data submission, team communication tracking, content series evaluation and knowledge questionnaire submission rates
☐ Send weekly updates and promote educational activities to LTC facility team leads
☐ Lead monthly coaching pre-calls and develop agendas
☐ Host and facilitate monthly coaching calls
☐ Provide technical assistance and support to LTC facilities
☐ Submit monthly Org Lead Status Report after coaching calls
☐ Develop a sustainability plan to support LTC facilities
☐ Assist LTC facilities with the development of a sustainability plan
☐ Provide technical assistance and support to LTC facilities

Engaging LTC Facilities
During phase three, encourage facility teams to continue the improvement. Org leads and facility teams should participate in all educational programming, including national content webinars and learning sessions. Org leads are responsible for ensuring that facility teams complete evaluations following each of these educational sessions. Org leads should communicate this expectation to facility teams through email, coaching calls and conversations.

Monitoring LTC Facilities
As in phase two, org leads are responsible for monitoring facility teams' monthly outcome and process data submission and CAUTI rates. Regularly review the data and continue to coach teams through phone calls or site visits and, if appropriate, connect them with the faculty coach or a high-performing facility team leader for peer-to-peer learning.

National Project Team Support to Org Leads
The national project team and HRET staff developed the following tools and templates for org leads to use in communicating with LTC facilities:
- Faculty coach support

- HRET advisor support
- Learning session #3 template agenda, org lead-specific data presentation and other customizable templates and handouts
- Sustainability assessment and planning tool
- Weekly newsletter that includes updates on deadlines, webinar announcements, resources and special features, as well as outcome data, knowledge questionnaire submission rates
- Monthly Org Lead Webinar

ENGAGING LTC FACILITIES

In prior cohorts, the most successful org leads use a multi-faceted approach to communicate with and engage LTC facilities in the project. Group emails and calls, as well as encouraging facility team leaders to share lessons learned/best practices during educational and coaching activities are effective and keep facilities involved in the project. For facilities that may be lagging in their participation in either educational or coaching activities or data submission, previous org leads called the faculty team lead to figure out the barriers. When necessary, administrators were contacted to request their support and remind them of the importance of the project. Successful org leads also conducted site visits to meet with LTC facility staff and obtain buy-in for the project.

COACHING CALLS

Coaching calls are an opportunity for the org lead and assigned faculty coach to work with LTC facility teams to review data trends, overcome barriers, share successes and further discuss the clinical and cultural interventions to support facility teams.

The roles and responsibilities of the org lead, faculty coach and HRET advisor are described below.

Organizational leads are responsible for hosting and facilitating the coaching calls, with the support of the faculty coach and HRET advisor. As the org lead, it is important to coach LTC facility teams to improve resident safety culture and prevent CAUTIs through the reduction or maintenance of near-zero CAUTI rates. It is essential to reinforce org lead expectations of each facility team leader, who is expected to reinforce program expectations with their facility team members.

A faculty coach and HRET advisor will work closely with org leads to identify relevant topics, address data submissions and trends, troubleshoot and answer questions from the teams on these calls.

Faculty coaches participate in the recurring coaching calls to facilitate the teams' access to project resources, explore challenges and identify opportunities to improve the use of clinical and cultural interventions.

HRET advisors are liaisons who provide technical assistance and support to org leads and faculty coaches. HRET advisors participate in the first four coaching calls and provide support upon request.

The coaching calls are monthly calls, lasting 30 to 60 minutes. Peer-to-peer learning is very powerful; teams share challenges and successes on the coaching calls throughout the project. It is recommended that data trends, common themes from facilities' "Nursing Home Survey on Patient Safety Culture" results and sustainability planning be used as discussion topics for these calls.

Approximately one week prior to the call, the org lead, faculty coach and HRET advisor conduct a planning call to review data and educational deliverables and develop an agenda. Training is provided to org leads via a coaching call webinar, which provides a better understanding on how to successfully execute and manage these calls.

LTC FACILITY TRAINING AND EDUCATION

A training and educational events calendar is on the project website. The project uses Adobe Connect, a web-conferencing platform, to host webinars and record the training videos. HRET advertises the webinars through the project newsletter and website, as well as through calendar invitations. Org leads should make sure facilities receive the webinar information. HRET does not send facilities direct invitations.

While a majority of the educational programming for LTC facilities is distance-based, the national project team found that an in-person meeting is very important to enable peer learning and create a peer-support network that will continue past the program participation period. It is essential for org leads and facility team leads (and other available staff) to attend the educational activities outlined below in the order they are presented. The sessions prepare org leads and the LTC facility teams in utilizing data to inform and implement CAUTI prevention and resident safety skills and techniques. The activities also present methods to collect, submit and track data to assess progress.

Org leads are responsible for the promotion of all educational activities, including program evaluation. HRET will send out calendar invites to org leads for all distance-based national webinars and other educational opportunities—do not forward. Org leads should create and send calendar invites for each event to facility team leads. In addition, every educational activity includes an evaluation component that should be completed by all participants, presenters and lead organization staff at the conclusion of each activity. We encourage you to review the evaluation results posted on the project website for national activities or shared with you on the dashboard for local/regional activities. In doing so, it may help understand how facility teams are progressing and what additional support they may need.

INFORMATIONAL WEBINARS

During phase one, there are multiple facility informational webinars available to interested LTC facility leadership to better understand the project goals, structure and requirements of the program. Org leads should invite interested facility leaders and leaders of registered faculty to one of the two webinars, which are 60 minutes long.

LEARNING SESSIONS

Org leads are responsible for hosting three learning sessions where all the facility teams meet with the org lead, faculty coach and other invited guests. The LTC facility team lead should attend, along with all available team members. Each learning session is typically a one-day, in-person meeting. Org leads should work with participating LTC facilities to identify a convenient date (based on the schedule) and location for the meetings.

The lead organization subcontract includes attendance from an HRET representative and faculty coach who will present and network with LTC facilities. In addition, the faculty coach or another content expert member of the national project team is supported to attend either the second or third learning session.

The org lead is responsible for, and should execute the following activities prior to each learning session:

- ☐ Confirm meeting logistics with the HRET advisor to confirm the date for each learning session
- ☐ Procure meeting space and identify lodging space
- ☐ Participate in a planning call with the HRET advisor and faculty coach to discuss and finalize the agenda, the presentation templates and other resources that the HRET advisor provides 4 to 6 weeks in advance of each learning session
- ☐ Confirm that all participating LTC facilities complete the required knowledge questionnaire
- ☐ Plan, host and facilitate each learning session
- ☐ Ensure that all participants and presenters complete and submit an evaluation of the program

It is also recommended that org leads:

- Hold a call two weeks prior to the first learning session to introduce LTC facility teams to one another, outline the project goals and timeline, review the importance of the learning session and reiterate the process measure deadlines for the facility demographics assessment, safety culture survey and knowledge questionnaire.
- Discuss and promote agenda items during coaching calls for subsequent learning sessions.

Learning Session #1 kicks off the program. It introduces the project and explains the clinical and cultural program interventions, including the data collected for outcome and process measures associated with the interventions. During the session, the org lead facilitates a group discussion on anticipated challenges and ways to overcome these barriers. Org leads may also guide LTC facilities through the process of drafting a facility action plan.

LTC Facility Action Plan
At the conclusion of learning session #1, facility team leads take the action plan back their facility for review management buy-in. The national project team recommends that the final action plan be submitted to the org lead within one month of this learning session.

Learning Session #2 occurs during phase two, addresses current data trends and includes peer presentations to share lessons learned. Topics include project data trends, discussion of clinical topics, sustainability planning and opportunities for peer-to-peer learning. Learning session #2 occurs in the middle of the project to provide the participating LTC facilities an opportunity to use lessons learned and best practices to adjust the facility action plan, assess and develop a sustainability plan or try new strategies to achieve project goals.

Learning Session #3 is conducted in phase three of the project and focuses on spread and sustainability. It is also a celebration of the work accomplished. Topics include project data trends, discussion of clinical topics, sustainability planning and opportunities for peer-to-peer learning.

CURRICULUM

The distance-based curriculum is designed for two different audiences—the LTC facility team lead and the front-line staff. The facility team leads are administrators, directors of nursing, infection preventionists and/or quality improvement or risk managers. Front-line staff include: certified nursing assistants, technicians, floor nurses and others who provide direct care or services to residents. The design takes into account the challenge of removing front-line staff from the floor to attend educational sessions and the needs of the staff that are responsible for infection prevention and safety culture in LTC facilities.

For LTC facility team leads, much of the content is taught by national project team faculty and experts via live webinars and videos. For each topic, the LTC facility team lead will also receive train-the-trainer materials and an instructional guide on how to use the materials to teach front-line staff. Each topic is designed as short education segments to maximize engagement. Continuing nursing education (CNE) credits are available for several learning activities as a benefit to those who need CNE for maintenance of licensure and certification.

The train-the-trainer materials can be customized to fit the educational needs and training processes of front-line staff; the facility team lead can choose from slides, videos and activities to meet the needs of the team. The facility team lead can use the flexible curriculum design to determine how best to deliver the education to front-line staff, including in-services, stand-up meetings, rounds and daily huddles.

Name of Series	# of Topics	Frequency	Topic	Format for Facility Team Lead	Format for Front-line Staff
Onboarding	4	Weekly	Project orientation	Webinar	Videos, trained by Facility Team Lead
Training Modules	4	2 modules every 4 weeks	Infection prevention	Videos	Videos, trained by Facility Team Lead
Safety Culture Survey Results Forum	1	Once	Safety culture	Webinar	N/A
National Content	9	Monthly	Clinical and cultural interventions	Webinar	Videos, trained by Facility Team Lead

After Learning Session #1, facilities are given access to eight education modules—four onboarding topics and four (infection prevention) training topics.

Onboarding Series

Four weekly onboarding webinars are offered at the beginning of the program. These webinars provide fundamental information needed to get started in the project, such as how to build a culture of safety team, what criteria defines a CAUTI, how to collect and enter data and how to incorporate surveillance strategies into existing workflow.

A one-hour webinar is held on the third Thursday of the month from 1:00-2:00 p.m. CT for facility team leads on each topic. It includes the content, train-the-trainer guidance and an open forum for questions and answers. A train-the-trainer resource manual and materials accompany this webinar. It contains

materials on how to teach the material and engage front-line staff. Additional materials, including a slide set, a 15-minute training video for front-line staff, quiz, discussion guide or team activity and resource materials are also included.

Org leads should attend the onboarding webinars with facility team leads, and ensure that facility team leads educate front-line staff on each topic before the training module series begins.

Training Module Series

After the onboarding series, facility teams will begin a four-part training module series. This series is intended to strengthen knowledge and skills related to CAUTI reduction and HAI prevention. There will be no live webinars associated with this series; instead the modules are released biweekly as pre-recorded content on each topic (i.e. hand hygiene, environment and equipment, standard and isolation precautions and antibiotic stewardship). The train-the-trainer format for each topic includes:

- A 20-minute training video and instructional guide for facility team leads and core team members that summarizes what the all staff training covers; things to consider before executing the delivery of the material, such as equipment and supplies to practice skills, current policies and resources; and recommends how the facility team lead should teach and engage front-line staff with the content
- One 15 to 20-minute instructional video for the facility team leads to use to deliver the content to front-line staff
- Suggested team skills practice activities, a quiz or discussion guide and resource materials.

Org leads should watch all the videos for each training module and disseminate training materials to facility team leads. Org leads should ensure that facility team leads and their front-line staff are educated on each training module topic. Training modules one and two will be released at the same time with a month to complete training of all staff, followed by the release of the third and fourth module. It is best to complete all of the training modules prior to the start of the national content series.

National Content Series

Org leads and facility team leads participate in monthly and national content webinars after onboarding and complete training modules. The webinars are designed to provide additional education on the clinical and cultural interventions and present information on evidence-based practices. Facility teams are invited to present their experiences implementing the project. Core team members are invited to these webinars, but certain topics may lend themselves to select staff attendance.

Content webinars are offered monthly for nine months, beginning in November 2015 and ending July 2016. These webinars occur on the third Thursday of each month from 11:15 a.m. – 12:15 p.m. CT. Each national content topic includes a one-hour webinar for facility team leads, train-the-trainer instructions and an open forum for questions and answers. A train-the-trainer guide includes information on how facility team leads can teach and engage front-line staff with the content, a slide set, a 15-minute video for front-line staff, a quiz, discussion guide or team activity and resource materials.

Org leads should attend the content webinars with facility team leads, and ensure that facility team leads educate their front-line staff on each topic within one month of its release.

Safety Culture Survey Results Forum

The Safety Culture Survey Results Forum webinar provides facility team leads and LTC facility administrators with information on how to interpret and use the survey results to engage staff and resident/family councils in order to leverage culture change in their facility. A review of the 12 dimensions of the "Nursing Home Survey on Patient Safety," strategies to implement change and an opportunity for an open forum to review approaches to develop an action plan for high priority areas will be available.

This one-hour webinar will be conducted within one month of the release of the baseline safety culture survey results data, approximately two months after the safety culture survey deadline.

Org leads should communicate to facility teams the value of this webinar for senior leadership and administrators. Org leads should also attend this webinar with facility team leads. There are no train-the-trainer materials on this topic for front-line staff.

LTC SAFETY TOOLKIT

The "Long-term Care (LTC) Safety Toolkit" is designed to support learning and implementation efforts to improve safety culture. In six learning modules, the toolkit provides concepts and tools to change the way facilities do their work and provide care, allowing better outcomes and higher quality of care for residents. The toolkit is a set of educational materials that can be used by facility's educators, team leaders, quality committee leaders, directors of nursing and others. All toolkit modules and materials are available on the LTC Safety website.

SITE VISITS

Site visits are a useful tool to build relationships and engage LTC facility throughout the course of the project. Site visits are an opportunity for org leads to understand facility-level challenges to assess gaps and to obtain leadership buy-in. It is recommended that org leads consider visiting every facility at some point time. Previous org leads found that by conducting site visits around learning sessions, faculty coaches are able to attend, as well.
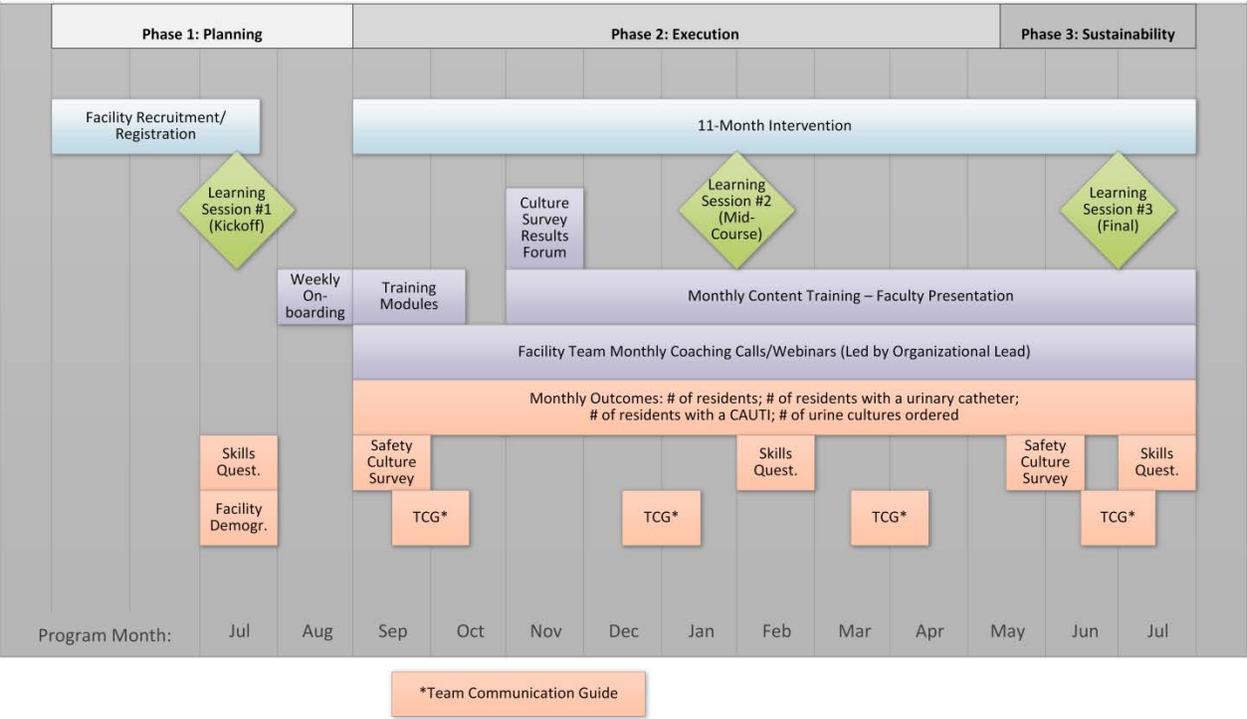
Monitoring LTC Facilities

Measuring Progress

Establishing, standardizing and tracking data measures are necessary for effective program management to drive project implementation success. The measurement goals for the project determine CAUTI rates, monitor urine culture requests and catheter utilization rates and assess team safety culture. All data collected for this project are kept confidential and no resident-level or protected health information is collected. Facility-level data is made available only to the facility, the org lead and the national project team—all have signed confidentiality agreements. Additionally, HRET provides ongoing support to org leads and facility teams as it relates to data management. HRET staff and the faculty coach are available to support org leads in this effort.

Data

Data collection occurs as part of the responsibilities of *AHRQ Safety Program for Long-term Care: HAIs/CAUTI* participation. The timeline (Figure 2) details data collection.

Figure 2. Facility-Specific Timeline for the *AHRQ Program for Long-term Care: HAIs/CAUTI*

Data Collection Schedule

Figure 3. Data Collection Overview

Measures & Data Entry	Data Collection Schedule*	Who Collects It	Report
Registration http://www.cvent.com/d/r4qzhs	Planning: One time per facility at start of project	Facility Team Lead	N/A
Facility Demographics http://www.cvent.com/d/h4q2mw	Planning: One time per facility at start of project	Facility Team Lead	~1 month after submission deadline
Knowledge Questionnaire http://www.cvent.com/d/y4qwdq	Planning: Learning Session 1 Execution: Learning Session 2 Sustainability: Learning Session 3	5 licensed staff 5 non-licensed staff	~1 month after each Learning Session
AHRQ Nursing Home Survey on Patient Safety Culture http://www.cvent.com/d/54qwvz	Planning: Month 1 Sustainability: Month 13	At least 60% of staff working ≥ 8 hours per week (contracted and employed)	6-8 weeks after submission deadline
Team Communication Guide https://www.hretcds.org/	Execution/Sustainability: collected quarterly and entered by the 15th of the following month	Facility Team Lead or Survey Coordinator	Learning Session 2 and 3
Outcome Data https://www.hretcds.org/ • Number of new symptomatic CAUTIs attributable to your facility each month during the intervention period • Number of urinary catheter days (number of residents with an indwelling urinary catheter is collected daily at the same time each day during the intervention period) • Number of resident days (number of residents is collected daily at the same time each day during the intervention period) • Number of urine cultures ordered for every resident (i.e. with and without catheters)	Execution/Sustainability: collected monthly and entered by the 15th of the following month	Data Coordinator	1st week of each month for the month prior

*For cohort-specific dates, teams are instructed to consult their cohort-specific project calendar.

Data Entry

Training and instructional guides are available on how to submit data through the project database—Comprehensive Data System (CDS). There are many resources available to support data collection, including the Data Collection Tool to document data over the course of the month.

Obtaining Data Reports

Facility teams can access data reports in the project database (CDS) for outcome data, safety culture survey and the knowledge questionnaire. Org leads also have access to these reports, which can assist with reporting questions. Org lead-level reports on facility demographics, knowledge questionnaire and safety culture survey reports are sent directly to org leads from HRET staff via email and can also be accessed in Cvent. National project summary reports are available in the newsletter and posted on the project website.

Using Data Reports

HRET provides data reports for org leads to monitor results and progress of each of their participating facilities. Because the data collection and monitoring process is critical to the project, it is important to review reports on a regular basis and provide consistent feedback. Org leads should ensure that LTC facilities submit the appropriate data according to the schedule. Org leads should follow-up with facility team leads that are either behind in data submission or if their data results indicate the need for additional support.

The national project team encourages org leads to be creative and brainstorm ways to utilize reports that may not be listed below as suggested steps.

1. Review report information at the monthly coaching call with the faculty coach and HRET advisor. Org leads can pull the reports before the call, determine data trends and list interventions to discuss.
2. Possible items to review monthly:
   a. Are CAUTI rates decreasing?
   b. Is catheter prevalence increasing or decreasing?
   c. What are teams doing to improve outcome measures?
3. If the report shows that CAUTI rates are decreasing or have dropped below the national average, ask the facility to share successes with other facilities on the coaching calls.
4. Distribute information to facility team leads.
5. Use the reports to guide questions for coaching calls. The team communication guide can be useful in identifying successes and barriers.

FACILITY ENGAGEMENT

It is critical that org leads participate in webinars and review the train-the-trainer materials and the training modules. Org leads should communicate with facility team leads to ensure that they are educating front-line staff on each topic, ideally before the next webinar of the. To keep facilities involved in the clinical and cultural interventions, org leads should consider reviewing the material during monthly

coaching calls. A discussion on how they delivered the educational materials to front-line staff and what activities were used may help teams incorporate the interventions into their workflow to build a strong foundation for sustainability.

The **Facility Participation Tracker** is a customizable template used to track facility attendance for key project events.

The **Facility Progress Tracker and Communication Log** is a template to document communication with facility team members.

The monthly **Org Lead Status Report** provides the national project team with information on participating facilities successes or concerns, as well as identifying overall project improvements opportunities. Org leads must submit this report within 24 hours of each month's coaching call.

Throughout the course of the project, facilities may disengage periodically for various reasons. An outlined process to assess and retain a facility's participation in the project—Facility Reengagement Guide— is available. If after multiple attempts to engage a facility in the project fail and the facility withdraws from the project, a Facility Withdrawal Form should be completed and submitted to HRET, following the instructions outlined in the guide.

SUSTAINABILITY PLAN

Although the sustainability phase occurs in the final three months of the national project, org leads and facility teams begin planning for sustainability at the beginning of the project. Org leads should develop a plan for when the project period ends to support and guide LTC facilities on next steps based on the final results of the safety culture survey and knowledge questionnaire results.

LTC facilities should develop a plan to sustain changes made in clinical and cultural interventions to improve resident safety culture and reduce CAUTI. Steps to sustain efforts and celebrate successes should be done early with small tests of change throughout the course of the project so successful changes become part of a facility's culture.

There are several critical success factors to sustain the clinical and cultural interventions. Org leads should ensure that the following elements are in place in every participating LTC facility.

1. **Program champions are identified and developed.** Staff and administrators are motivated and enthusiastic about the practices.
2. **Implementation team is identified and developed**. The team includes key staff and administrators and works to engage front-line staff, residents and families.
3. **Staff are empowered.** Staff are commended, not punished, for speaking up for resident safety.
4. **Processes for data collection and reporting are established.** Data are used to continuously improve performance by providing feedback to the facility staff.
5. **Barriers to sustainability are identified and addressed.** Common barriers like skepticism and resistance can be managed through the active involvement of administrative and clinical champions. Motivate team members to try the program interventions and provide dedicated time and adequate resources.

6. **Staff are engaged with stories.** Encourage facility team leads and front-line staff to discuss actual resident stories to drive home important lessons. Share stories of "good catches" when resident harm is prevented to inspire and motivate staff.
7. **Staff are engaged by the data.** Encourage facility team leads to discuss data reports to drive home important lessons in ways that stories cannot.
8. **Successes are recognized and celebrated.** Communicating success will help staff gain the courage to speak up and reinforce for the entire team the importance of program interventions.
9. **Use Tools.** The sustainability assessment tool was created and refined by prior cohorts based on best practices.

TOOLS AND RESOURCES

All tools and resources referenced in this manual can be found on the LTC Safety Website.

PROJECT IMPLEMENTATION

- Educational Materials
- Facility Implementation Guide
- HRET Comprehensive Data System (CDS)
- Surveys and Questionnaires
- Tools

ORG LEAD-SPECIFIC RESOURCES

- Coaching Call Materials
- Dashboards
- Monitoring Progress
    - Facility Re-engagement Guide (and withdrawal form)
    - Facility Progress Tracker and Communication Log
    - Facility Participation Tracker
    - Organizational Lead Monthly Status Report
- Organizational lead contact Lists
- Recruitment Materials

FAQs

APPENDIX A. OVERVIEW OF PROJECT ACTIVITIES TIMELINE

Figure 4. Cohort 4 Org Lead Timeline for the *AHRQ Safety Program for Long-term Care: HAIs/CAUTI*
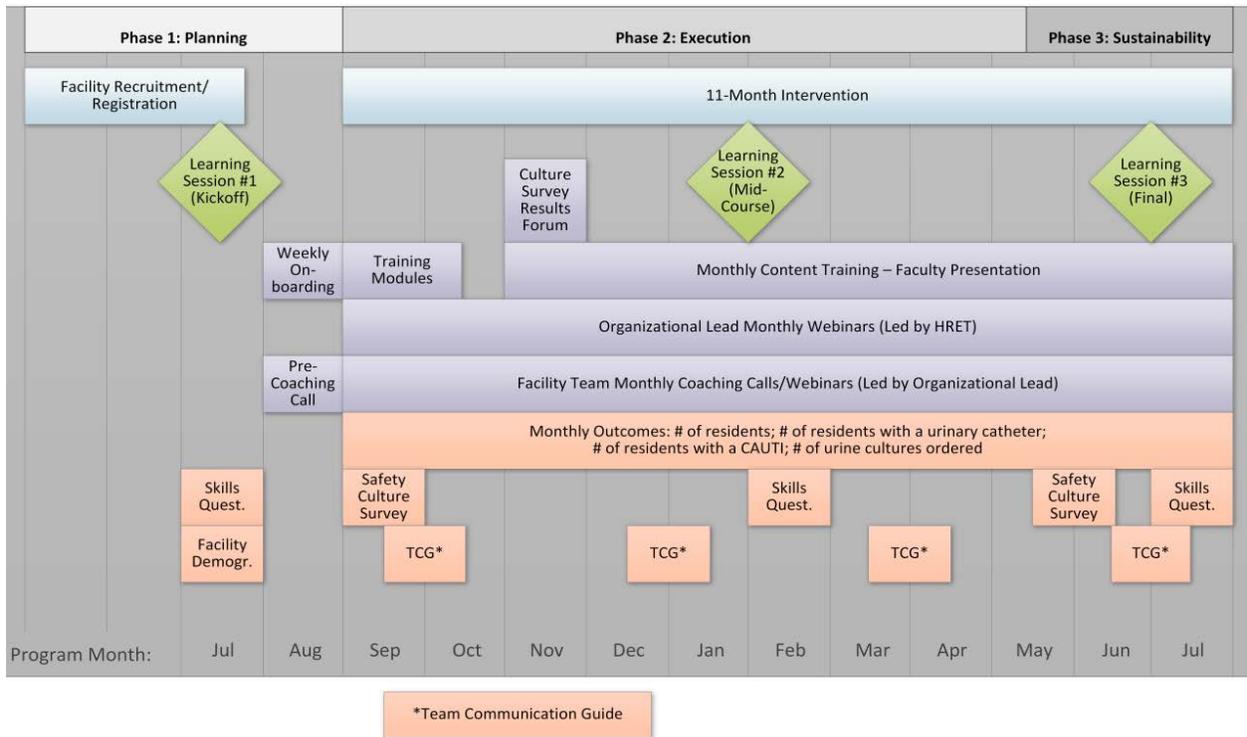
LEGEND		
Phase	**Months**	**Cohort 4**
1. Planning	1-3	June-Aug
2. Execution	4-12	Sep- May
3. Sustainability	13-14	Jun-Jul

AHRQ Safety Program for Long-term Care: HAIs/CAUTI
Cohort 4 Organizational Lead Schedule

Phase 1: Planning

June 2015	July 2015	August 2015
ACTIVITY	**DUE**	**ACTIVITY**
☐ Facility Informational Webinar, Option A & B	☐ LTC Facility Registration	☐ Onboarding 1 Webinar
☐ Org Lead In-person Meeting*	☐ Facility Demographics	☐ Onboarding 2 Webinar
	☐ Baseline Knowledge questionnaire	☐ Onboarding 3 Webinar
	ACTIVITY	☐ Onboarding 4 Webinar
	☐ Learning Session #1	☐ Introduction to Coaching Call Webinar*
	☐ Connecting-the-Dots (office hours) Webinar	☐ Safety culture survey promotion and administration

Phase 2: Execution

September 2015	October 2015	November 2015
DUE	**DUE**	**DUE**
☐ Monthly Org Lead Status Report*	☐ Team Communication Guide (1st Qtr)	☐ Outcome Data Collection
☐ Onboarding Series Aggregate Evaluation	☐ Outcome Data Collection	☐ Training Module Series Aggregate Evaluation
☐ Baseline Safety Culture Survey	☐ Monthly Org Lead Status Report*	☐ Monthly Org Lead Status Report*
ACTIVITY	**ACTIVITY**	**ACTIVITY**
☐ Training Module 1	☐ Training Module 4	☐ Safety Culture Survey Results Forum
☐ Training Module 2	***Recurring Activity***	***Recurring Activity***
☐ Training Module 3	☐ Pre-Coaching Call*	☐ National Content Webinar
Recurring Activity	☐ Coaching Call	☐ Pre-Coaching Call*
☐ Pre-Coaching Calls begin*	☐ Org Lead Webinar*	☐ Coaching Call
☐ Coaching Calls begin	☐ Data collection	☐ Org Lead Webinar*
☐ Join Org Lead Webinar*		☐ Data collection
☐ Data collection begins		

December 2015	January 2016	February 2016
DUE	**DUE**	**DUE**
☐ Outcome Data Collection	☐ Team Communication Guide (2nd Qtr)	☐ Knowledge questionnaire
☐ Monthly Org Lead Status Report*	☐ Outcome Data Collection	☐ Outcome Data Collection
Recurring Activity	☐ Monthly Org Lead Status Report*	☐ Monthly Org Lead Status Report*
☐ Pre-Coaching Call*	**ACTIVITY**	**ACTIVITY**
☐ Coaching Call	☐ Learning session #2	☐ Learning session #2
☐ National Content Webinar	***Recurring Activity***	***Recurring Activity***
☐ Org Lead Webinar*	☐ Pre-Coaching Call*	☐ Pre-Coaching Call*
☐ Data collection	☐ Coaching Call	☐ Coaching Call
	☐ Org Lead Webinar*	☐ Org Lead Webinar*
	☐ National Content Webinar	☐ National Content Webinar
	☐ Data collection	☐ Data collection

APPENDIX B. ORGANIZATIONAL LEAD SCHEDULE

March 2016	April 2016	May 2016
DUE	**DUE**	**DUE**
☐ Outcome Data Collection	☐ Team Communication Guide (3rd Qtr)	☐ Outcome Data Collection
☐ Monthly Org Lead Status Report*	☐ Monthly Org Lead Status Report*	☐ Monthly Org Lead Status Report*
Recurring Activity	☐ Outcome Data Collection	**ACTIVITY**
☐ Pre-Coaching Call*	***Recurring Activity***	☐ Safety culture survey promotion
☐ Coaching Call	☐ Pre-Coaching Call*	***Recurring Activity***
☐ Org Lead Webinar*	☐ Coaching Call	☐ Pre-Coaching Call*
☐ National Content Webinar	☐ Org Lead Webinar*	☐ Coaching Call
☐ Data collection	☐ National Content Webinar	☐ Org Lead Webinar*
	☐ Data collection	☐ National Content Webinar
		☐ Data collection

Phase 3: Sustainability

June 2016	July 2016	August 2016
DUE	**DUE**	**ACTIVITY**
☐ Safety Culture Survey (Follow-up)	☐ Team Communication Guide (4th Qtr)	☐ Sustain efforts made in the program
☐ Monthly Org Lead Status Report*	☐ Knowledge questionnaire	☐ Celebrate success
☐ Outcome Data Collection	☐ Monthly Org Lead Status Report*	
Recurring Activity	☐ Outcome Data Collection	
☐ Pre-Coaching Call*	**ACTIVITY**	
☐ Coaching Call	☐ Learning session #3	
☐ Org Lead Webinar*	***Recurring Activity***	
☐ National Content Webinar	☐ Pre-Coaching Call*	
☐ Data collection	☐ Coaching Call	
	☐ Org Lead Webinar*	
	☐ National Content Webinar	
	☐ Data collection	

June and July Data are due with July 2016 being the last set of Monthly CAUTI data

* denotes activity specific to Org lead only