

# PROVEN

PRagmatic Trial of Video Education in Nursing Homes

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*2020 NIH Collaboratory Steering Committee Meeting*

## **Lessons Learned**



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# It's ALL about IMPLEMENTATION

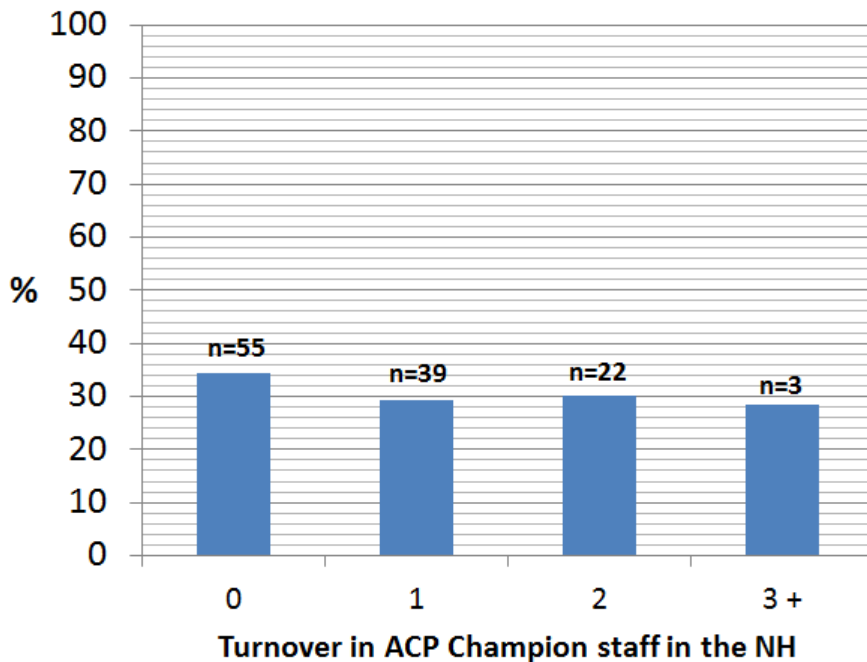
- Even simple adjustments in daily operating procedures are hard to achieve
- We adopted 2 strategies:
  - NEW Admission Patient Orientation was modified to include offering and showing the video to ALL
  - LONG Stay residents and families were to be offered video viewing during mandatory quarterly care planning sessions
- Pilot project experience very positive
  - BUT, most engaged sites VOLUNTEER to be pilots

# Implementation Challenges in the Nursing Home

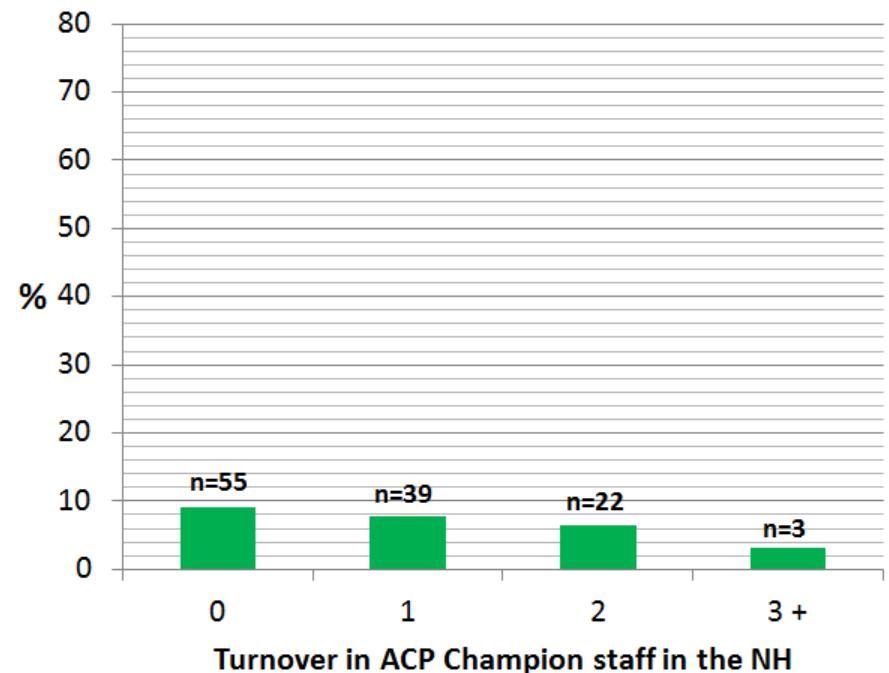
- “Check Box” Culture
- Teach to the test; High “offer” rate but many refusals to view
- High staff turnover, particularly in a full employment economy
- NH social workers often not clinically trained
- Ownership changes
- Sustaining engagement hard; sometimes the right person can make a difference

# Relationship between turnover and ACP Video Program compliance for long-stay

Long-stay - Average % video offered



Long-stay - Average % video shown

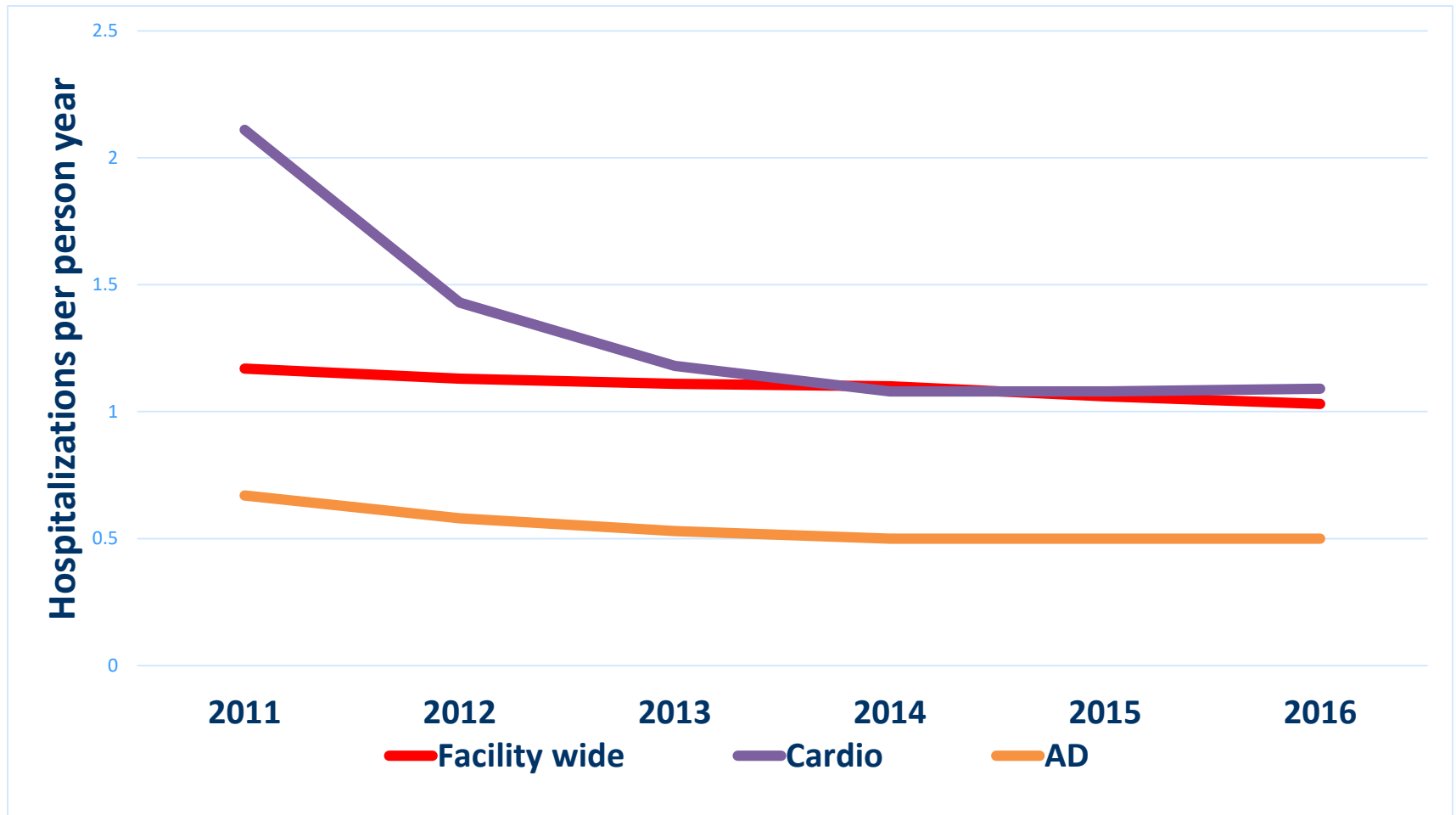


Data as of 12/31/2016

# Complicated & Changing Policy Environment

- Early 2016 MD/NP visits for Advance Care Planning reimbursed; even for 2nd visit/day
- Emergence of Institutional Special Needs MA Plans offer more incentives not to transfer
- One partner initiated first nursing home based Accountable Care Organization with own MDs
- Continuing increase in hospice use among long stay NH resident

# Average facility-level Hospitalization/per person year trends



NIH Collaboratory Steering Committee Meeting  
Top Barriers/Challenges and Recent Generalizable Lessons Learned  
May 15, 2018

# Summary

- Interventions must be better integrated into staff work flow
- Organizational attention span often limited since so many new initiatives are tried
- Real world (both policy and clinical emergencies) distract attention from add-ons
- True for any change in care processes, not just ePCTs