Companion Aide Pilot Summary - January 2016

In March 2015, Vermont implemented a Companion Aide Pilot Project to provide assistance to nursing facilities in advancing culture change with a focus on person-centered dementia care through June 2017. The goal of the pilot is to provide an enhanced Medicaid rate to five interested and eligible facilities that are committed to person-centered dementia care through dedicated “Companion Aide” staff. The Companion Aide is a trained licensed nursing assistant (LNA) who will champion person-centered dementia care with the goal of improving the lives of people with dementia, as evidenced by positive changes such as a reduction of the use of psychotropic drugs, incidence of resident to resident altercations, and improved staff satisfaction.

The following 5 facilities were chosen to participate in the pilot using pre-determined criteria:

- Brookside in White River Junction, VT (3 aides)
- Derby Green in Derby, VT (1 aide)
- Helen Porter in Middlebury, VT (4 aides)
- Mayo in Northfield, VT (2 aides)
- Mountain View in Rutland, VT (7 aides)

Due to a shortage of staff and hiring competition with surrounding medical providers, Brookside nursing facility was unable to successfully hire backfill employees for the three companion aide staff that were identified for the pilot. On July 24, 2015, Brookside notified DAIL that they were voluntarily withdrawing from the pilot. DAIL is working with the Division of Rate Setting to review the currently regulations and determine whether or not to approve another provider.

Pilot facilities have submitted quarterly summary reports and participated in training and State facilitated peer sessions to learn from each other’s experiences. Facilities also submitted their first annual report in for data collected March - November 2015. NOTE: While the facilities spent the first 1-4 months hiring and training staff for the pilot the initial data showed the following:

**Target #1**: Reduction in resident to resident incidences by ten percent in the first year; additional 25 percent in second year for a total of 35 percent by end of year two.

- November 2015: Reports increased 100% from an average of 5 to an average of 10, varying widely between providers. Two homes had an increase, one had a 60% decrease and one remained the same.

**Target #2**: Reduction in antipsychotic use to at least five percent below the state average by the end of the pilot

- November 2015: Use of antipsychotics declined 18% from an average of 11 to an average of 9. An average of nine uses of antipsychotics were reported with an

**Target #3**: Ten percent reduction in LNA turnover each year.

- November 2015: Two facilities had a reduction in LNA staff turnover, one had no change and one had increase with an average 10% reduction in turnover rate.

**Target #4**: Reduce involuntary discharges based on behavioral issues to zero by the end of the pilot

- November 2015: Involuntary discharges declined by 25% from an average of 1 discharge to zero discharges.

**Target #5**: Maintain or improve overall satisfaction of residents and employees by the end of the pilot

July 2016
November 2015: Resident/family survey responses showed an average of 90% excellent to good overall satisfaction. NOTE: facilities unable to report employee satisfaction, therefore the element will be removed.

Target #6: Increase Care Practice Artifact score by the end of the pilot.

November 2015: Care Practice Artifacts of Change scores ranged from 45 to 58 out of a possible 70, showing an overall average increase of 6%.

Target #7: Increase Family & Community Artifact Target score by the end of the pilot.

November 2015: Family and Community Artifact of Change scores ranged from 0 to 20 out of a possible 30, showing no change.

Challenges identified to date:

- LNA staff shortages
- State of VT staff reductions due to budget reductions
- Adapting the Companion Aide role within the facility and amongst peers
- Unclear why reported resident to resident incidents increased. Will discuss with facilities and determine whether it was a reporting artifact and other ideas of what may have contributed.
- Unable to capture employee satisfaction and no baseline available.

Online References:


Success Stories

The reported success stories are many. Here are a few:

Success Story #1: One facility was able to accept a female resident from our local hospital. She had a diagnosis of dementia with both anxiety and behaviors. She had been transferred to the hospital from her a residential care home due to overall decline including her cognitive status/behaviors. The residential care home was unable to accept her back. Both in the home and hospital, this resident had behaviors ranging from refusals of care to verbal/physical altercations. At the time of transfer, the hospital was unwilling to let the family transport in private car due to her behaviors as it was felt it was unsafe. As a result, she had to be transferred by ambulance. Since admission, the Companion Aide has been working with this resident. At first, just to build a relationship then she took over her care. As of this time, her physical and verbal behaviors have almost completely resolved. Her psychotropic medications have been decreased twice, she is accepting more care, and her family has been able to take her out of the facility without incident.

Success Story #2: A Companion Aide started a reading program for two residents with end stage dementia. Both of these residents were non-verbal except for a rare word a few times a month. Since she has been reading to these residents, both are more alert and talking almost daily. As a result of the Companion Aide reading to the above two residents, another resident has started reading herself. Her primary care physician stated she could not believe the change in her.
Success Story #3: One Companion Aide has been completing life stories and starting the Music and Memory program with residents. When meeting with one family along with the resident, the family expressed how elated they were with their loved one’s response to the music.

Success Story #4: One facility noticed a decrease in all resident-resident incidents in their “Memory Care Neighborhood” for the time period since they started using companion aides. They have also experienced great family satisfaction with the individualized attention for residents involved.

Success Story #5: One facility described the entire atmosphere on their Dementia Care Unit as “quite remarkable”. This facility said: “It’s difficult to pin point exactly what it is other than the added attention and support provided by the companion aides. Being a secured unit the companion aides provide the ability to assist residents off the unit more frequently to other activities, walks, visits etc. The 1:1 attention continues to enrich the lives of those living on the Dementia Care unit as well as throughout the Center. Each neighborhood will frequently call and request a companion aid throughout the day for residents around the building with dementia who would benefit from some extra support.”

Success Story #6: One facility reported that they have a long term care resident who often presents with challenging behaviors. With the support of the Companion Aides, this resident has had a decrease in her antidepressant medication and her behaviors have also decreased despite the reduction in medication. This person is described as “remarkably more pleasant and engaging with others”. Though she has a history of only liking to sit in the recliner by the nurse’s cart, she has recently participated in activities and stayed at the dining room table for lunch positively interacting with the other resident’s. Prior to the companion aid project and med changes, this person was agitated every day primarily in the late afternoon and evening. Each day there would be a nurse’s note in regards to her behaviors. Now the nurse’s notes reflect a decrease in behaviors with the occasional agitation. Social Services, her primary care physician and nursing recently met with family. Family commented on how much of a change they’ve seen in their mother and how happy they are to see their mom doing so well.

Success Story #7: One gentleman has a history of increased anxiety and weeping. Since the Companion Aide program started, the facility has reported that his anxiety has decreased a great deal and he has begun to enjoy activities such as checkers.

Success Story #8: One Companion Aide employee has started to experience “buy-in” from her LNA peers who are now witnessing the positive changes in residents. Family, visitors and other residents have commended on the positive changes as well. She did this by:

- Providing CMS “Hand in Hand” training to staff.
- Updating care plans to add “What works well for...” instead of “What does not work well for....”
- Providing education to staff around using labels with residents.
- Participating in all care plan meetings.