Welcome to mosAIC’s Regular Reads*

This list contains links to free journal articles on: Management Skills

Updated: January 2014

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Gerontology / Geriatrics / Psycho-Geriatrics / Geriatric Nursing, Infection Control, Integrated Care, Palliative Care, Quality Improvement, Rehabilitation / Geriatric Rehabilitation and Technology Applications / Innovations

at aic-learn.sg/resources/regular-reads

*Regular Reads is a supplement of mosAIC, the Agency for Integrated Care’s quarterly publication for the community care sector. Filled with information such as programmes, good practices, book and journal summaries as well as stories from the sector, mosAIC is available free for ILTC staff. For more information, visit aic.sg/mosaic or contact Belinda Lim at 66036991 or mosaic@aic.sg
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mosAIC’s Regular Reads aims to bring to intermediate and long-term care (ILTC) providers’ attention care-related knowledge that may be relevant and useful to their operations. This section features journal articles that highlight latest research findings as well as good, evidence-based and innovative practices. While the articles aim to keep ILTC providers informed of current developments in the community healthcare sector, the views and opinions expressed or implied do not necessarily reflect those of the Agency for Integrated Care (AIC), its directors or editorial staff.

Updated in January 2014

Administrator turnover and quality of care in nursing homes

This report examines the impact that the turnover of nursing home administrators has on the quality of care at long-term care facilities in Iowa. It studied 151 facilities and found that administrators have a significant impact on the quality of care at LTC facilities as they heavily influence overall facility operations. They manage the budget; implement and oversee staff training; decide on care practices and their implementation; address issues raised in meetings; communicate with staff; resolve facility and staff problems; and initiate quality assurance projects.


Search for the full-text article at http://www.annalsoflongtermcare.com/

Care Update – Issue 2: March 2013

This update provides an overview of the performance of care services in England from April to December 2012. It finds that the health and social care sector are struggling to care adequately for those with dementia. People with dementia living in care homes are more likely
than those without dementia to go into hospital with avoidable conditions such as urinary infections, dehydration and pressure sores. The system also faces the challenge of integrating care across hospitals and care homes. While care homes showed improvement in training and supervision of care workers, assessing the needs of their residents, delivering personalised care and support, and detecting and preventing abuse, the progress needs to be much quicker. There was no real change in the number of nursing homes registered but the number of nursing home beds increased by 1.4 percent.


Search for the full-text article at http://www.cqc.org.uk/

**Premium-only aged residential care facilities and stand-down provisions for mixed facilities: Discussion document**

This document discusses whether aged residential care facilities in New Zealand should be allowed to be “premium-only”. “Premium-only” facilities, where residents pay an additional fee, will encourage greater private sector investment in aged residential care facilities. It will provide residents with a choice of facilities and give providers greater freedom to design and operate their facilities. However, this needs to be balanced with sufficient standard rooms within the facility to give prospective residents a real choice of facility without necessarily having to pay extra. This document seeks the views of those involved in the industry as consumers and providers.


Search for the full-text article at http://www.health.govt.nz/

**Updated in September 2013**

**Moving into 2013: Major issues facing long-term care providers**

This report highlights that 2013 is expected to be an even more turbulent year for the long-term care sector in the United States as it is getting closer to the implementation of major provisions of the Affordable Care Act, scheduled to occur in 2014. This year, it expects to focus on four areas: insurance expansion preparation, reimbursement changes, expansion of accountable outcomes and increased use of electronic health record (EHRs). This article provides a review of the events that happened in 2012 to understand where the healthcare environment is heading and outlines the four major impact areas for LTC providers.

The aged care workforce 2012: Final report
This report provides detailed information about the workforce that delivers aged care to older Australians in both residential and community care. It looks at the total employment and main workforce characteristics; the main characteristics of work; career paths; experiences of working in residential aged care and community aged care; work-related injury and illness; work and non-work responsibilities; cultural and linguistic diversity. It also details interviews conducted with direct care workers. It concludes by exploring ways to retain existing workers and recruit new ones.


Search for the full-text article at http://apo.org.au/

The effect of foot massage on long-term care staff working with older people with dementia: A pilot, parallel group, randomized controlled trial
Caring for dementia sufferers can have a detrimental effect on the physical and emotional well-being of long-term care facility staff, with many experiencing increased stress levels and burnout. Massage has been shown to be one way of helping nurses manage stress. This article seeks to establish the effectiveness of massage for care staff looking after the elderly who are afflicted with dementia in long-term care facilities.


Search for the full-text article at http://www.biomedcentral.com/

A new tool for rapid geriatric assessment in the elderly
This research aims to assess the design, application, validity and reliability of a new tool for rapid geriatric assessment in the elderly. It measured activities of daily living scores using a new tool compared with a well-known tool in a population study of 90 elderly subjects in four long-term care departments of a governmental geriatric centre. Results showed that there was a good correlation between the two tools as demonstrated by the correlation curve. The new tool for rapid geriatric assessment was able to evaluate the same and additional parameters measured by traditional tests and did so in much less time with equivalent validity and reliability.

Search for the full-text article at [http://www ima org il/](http://www ima org il/)

**Older patients' attitudes towards and experiences of patient-physician end-of-life communication: A secondary analysis of interviews from British, Dutch and Belgian patients**

This study examines older patients' attitudes towards and experiences of, patient-physician end-of-life (EoL) communication in three European countries. A secondary analysis of interviews from British, Dutch and Belgian patients over the age of 60 with a progressive terminal illness was conducted. Confidence and trust were reinforced by physicians’ availability, time and genuine attention and hindered by misdiagnoses and poor communication style. Most participants preferred full disclosure, though some wished to be deliberately ill-informed to avoid distress. Patients expressed a variety of preferences for and experiences of involvement in medical EoL decision-making and a few complained that information was only provided about the physician's preferred treatment.


Search for the full-text article at [http://www biomedcentral com/](http://www biomedcentral com/)

**End of Life Care Facilitator Competency Framework**

The framework is designed to support the development of End of Life Care Facilitators by identifying the extent of knowledge and skill required for that level of practitioner. It recognises that to be effective, practitioners must be competent to fulfil the functions of their role. In addition, it is essential that facilitators expand their area of competence by developing the breadth and depth of their knowledge, and their skill and expertise. It sets out key components for the following core competency areas: communication, facilitation, audit; and learning and development. It includes a template to negotiate a learning and development plan, as well as a template to undertake reflective practice based on the competency framework.


Search for the full-text article at [http://www endolifecareforadults nhs uk/](http://www endolifecareforadults nhs uk/)

**Medication incident reporting in residential aged care facilities: Limitations and risks to residents' safety**

Medication incident reporting (MIR) is a key safety critical care process in residential aged care facilities (RACFs). This study undertook an in-depth exploration of the information exchange process involved in MIR and identified factors that inhibited the collection of
meaningful information in RACFs. The study was undertaken in three RACFs in New South Wales, Australia. Study results emphasised the need to: design MIR artefacts that facilitated identification of the root causes of medication incidents; integrate the MIR process within existing information systems to overcome key gaps in information exchange execution; and support exchange of information that can facilitate a multi-disciplinary approach to medication incident management in RACFs.


Search for the full-text article at http://www.biomedcentral.com/

Read a complete summary of this article in mosAIC.

Updated in March 2013

After you: Conversations between patients and healthcare professionals in planning for end of life care

This study provides insights into the complexities surrounding the initiation of Advance Care Planning involving conversations about end of life care preferences with patients who are identified as having palliative care needs. It adopted an exploratory case study design using qualitative interviews across five services delivering palliative care to cancer and non-cancer patients within an urban and rural English region. The study found that patients demonstrated varying degrees of reticence, evasion or reluctance to initiate any conversations about end of life care preferences. Most assumed that staff would initiate such conversations, while staff were often hesitant to do so.


Search for the full-text article at http://www.biomedcentral.com/

Case management the panacea for aged care?

This study seeks to evaluate the influence of case management on family member or other care-giver involvement in residential aged care settings, staff-family relationships and family satisfaction with residential care. A controlled before and after study involving pre and post intervention testing and comparison between intervention and control groups was conducted. The Family Involvement Questionnaire and the Family Perception of Care Tool was used pre and post intervention to determine the level of family involvement and their perception of care provided. Although there were no statistically significant results due to the sample size, there were positive changes at the intervention site. The study concludes that case management is a potentially suitable model of care in the aged care setting.

Search for the full-text article at http://www.ajan.com.au/

Updated in December 2012

Care home sweet home: Care home of the future

This ‘Futures’ report looks at the challenges and trends residential care homes will face in the next 20 years and how they will need to change to respond to the changing world. It explores issues such as changes in the workforce, resident care, technology and environment and suggests potential responses. It encourages looking at policy and practice initiatives that focus on recruitment and retention of care home staff, engaging communities, implementation of new technology, finding sustainable funding models for care, creating an informed care consumer, protecting vulnerable adults, sustainability of the environment and tackling societal ageism.


Search for the full-text article at http://www.ilcuk.org.uk/

Read a complete summary of this article in mosAIC. (http://www.aic.sg/newsletter/mosaic/mar2013/#/14)

Job satisfaction of Australian nurses and midwives: A descriptive research study

This paper describes the development and implementation of a questionnaire to provide information and insight into sources of stress for Australian nurses and midwives, and their impact on job satisfaction. The five main subscales used for the questionnaire were work environment, psychosocial effects of stress, job satisfaction, exhaustion, and pressure and motivation. Questionnaire returns found that the majority (96 percent) of nurses and midwives were moderately or highly satisfied with their work and the major contributory factors for their job satisfaction were the enjoyment of the work and perceiving themselves as well-suited to it. The questionnaire also found that experiencing moderate amounts of work-related stress did not diminish job satisfaction. This finding is important because it challenges the existing belief that stress may be a cause of job dissatisfaction.


Search for the full-text article at http://www.ajan.com.au/
Newfoundland and Labrador: 80/20 staffing model pilot in a long-term care facility

This paper describes a project in Canada that set out to increase capacity for registered nurse leadership, training and support and to enhance the profile of long-term care (LTC) as a place to work. The project implemented an 80/20 staffing model, which allowed nurse participants 20 percent of their paid time pursuing a professional development activity instead of providing direct patient care, at a long-term care facility in Canada. The positive outcomes from the project suggest that staffing plans such as the 80/20 model are an effective means to improve work life in the LTC setting. However, the 80/20 model is not perceived to be sustainable from a financial and human resource perspective. Alternative models being explored include an 85/15 or a 90/10 format that could be offered to a limited number of nurses.


Search for the full-text article at http://www.longwoods.com/

Updated in October 2012

Advanced care planning in care homes for older people: A qualitative study of the views of care staff and families

The aim of this study was to explore views on advance care planning (ACP) in care homes for older people. The study undertook a qualitative exploration of views from care home staff and the family of residents in care homes for older people in all care homes for the elderly in two London Boroughs. Staff (care managers, nurses and care assistants), community nurses and families participated in the study comprising individual semi-structured interviews. The results revealed that staff and family voiced positive opinions towards advance care planning. Staff felt that it provided choice for residents and encouraged better planning. However, staff and families perceived residents as reluctant to discuss advance care planning. Some care assistants were reluctant to be involved.


Search for the full-text article at http://ageing.oxfordjournals.org/

The fundamentals of hospice compliance: What is it and what are the implications for the future? An overview for hospice clinicians, Part 1

Part 1 of this article provides an overview of the current Medicare compliance climate in the United States of America and outlines the implications for hospice providers. It explores the seven areas of a comprehensive compliance framework outlined in the 1999 Compliance Guidance for Hospice by the Health and Human Services Office of the Inspector General. These include implementing written policies, procedures and standards of conduct;
designating a compliance officer and committee; conducting effective training and education; developing effective lines of communication; enforcing standards through well-publicised disciplinary guidelines; conducting internal monitoring and auditing; and responding promptly to detected offenses and developing corrective action. The article also provides a case example to set the stage for Part 2 of the article that explores hospice-specific risk areas and specific risk-reduction strategies.


Search for the full-text article at http://journals.lww.com/

**What is case management in palliative care? An expert panel study**

This paper provides insights into the aims and characteristics of case management in palliative care in the Netherlands. The expert panel reviewing this issue was made up of 76 healthcare professionals, researchers and policy makers. Case management is a heterogeneous concept of care that consists of assessment, planning, implementing, coordinating, monitoring and evaluating the options and services required to meet the clients’ health and service needs. The panel agreed on nine out of the ten aims of case management. There was disagreement on the characteristics of case management that included hands-on nursing care by the case manager, target group of case management, performance of other tasks besides case management and accessibility of the case manager. Case management in palliative care varies in implementation choices.


Search for the full-text article at http://www.biomedcentral.com/

**Updated in August 2012**

**Caring for older Australians: Productivity Commission draft report**

This report provides in-depth information of the Australian governments’ understanding on aged care. It outlines the existing aged care system highlighting the care and support services, financing, regulations and social policies on aged care. It anticipates the future demand for such services and provides a framework for assessing aged care using indicators such as access, continuity and choice; pricing, subsidies and co-contributions; regulatory burdens; and reforms needed. Reaching out to diverse groups, developing age-friendly housing and retirement villages, and workforce issues are also covered. It indicates the implementation of a reform framework and sees its implication for the elderly and their service providers.

Search for the full text article at http://www.pc.gov.au/

**Job satisfaction among health professionals of Home Hospice for Children of Lodz Region**

This report studies the job satisfaction of the team working in Home Hospice for Children of Lodz Region in Poland. The questionnaire administered covered evaluation of self-abilities; evaluation of job responsibility; relationships within the team; relationships with patients and their families; work organisation and social conditions and general work evaluation. The study found that the staff experienced highest satisfaction in their relationship with patients and their families and lowest satisfaction in their relationship within the team and general work evaluation.


Search for the full text article at http://www.advpm.eu/

**Urgent care in the nursing home: Aligning the incentives**

This article states that more incentives need to be introduced to raise the level of clinical services especially when it comes to providing urgent care to a nursing home resident. Currently sending the resident to another facility or the hospital for treatment reduces the workload of the nursing staff, who then does not need to complete an assessment, obtain tests and treatments. However, it increases the healthcare costs related to acute hospitalisation and adds to the emotional trauma of the resident and family. This article talks about aligning incentives in order to reduce costs and provide appropriate care during times of limited healthcare resources.


Search for the full text article at http://www.annalsoflongtermcare.com/

Free registration required.