Session 13: The Role of CNAs in Managing and Supporting Residents and Care Partners/Family Members during COVID-19

Key Takeaways:

- CNAs spend more hours with residents and care partners/family members than any other member of the nursing home care team.
- CNAs can provide a wealth of information about individual residents and their care partners, yet they are often overlooked and not asked for their input or opinions during care plan meetings.
- CNAs can learn about important goals, wishes and preferences for each person in their care, leading to more personcenteredness and desired outcomes in many cases.
- CNAs can be valuable partners and trusted advisors in helping residents focus on goal setting, designing care plans, and updating them over time as needed.
- Communication from CNAs regarding care and service options may enable residents' wishes to be more closely respected and followed.

The following question set can be used to facilitate discussions and reveal opportunities across and within key members of interprofessional teams, residents and care partners. Please consider using/adapting them in your next huddles or team meetings.

Resources and Questions by Content	
Role of CNAs with residents, care partners and on the Care Team Document and Report discussions and observations from conversations with residents and/or care partners	Are CNAs included as key members of the care team; that is, are they included in morning meeting, rounds and huddles? What written instructions/training, forms, checklists or other tools do CNAs have to document their observations about residents so that their input leads to meaningful actions by the care team? Do other team members (nurses, social workers, primary care clinicians) access CNA-provided information on all days/shifts? https://www.ltsscenter.org/wp-content/uploads/2020/09/Making-Care-Work-Pay-Report-FINAL.pdf Is each CNA asked to talk with residents about their goals, wishes, preferences? If a resident or care partner were asked, would they say that they have talked with one or more CNAs about the resident's goals, wishes and preferences?
	Do CNAs contribute to a Goals of Care/What Matters conversation and decisions/preferences for each of their residents? Are CNAs encouraged to communicate conversations with designated (invoked) health care agents/proxies? Where do CNAs document these discussions and to whom do they report this information?
Follow-Up Plan (monitoring over	What actions are taken (for example, providing re-education or 1:1 support) if CNAs do not share
time)	information from conversations with residents or care partners?
Improvement Concepts/Critical Questions for Leadership	Do leaders identify a 'lead' CNA and/or other team member who can mentor and support CNAs on the team in how to talk with residents and care partners about each resident's goals, wishes and preferences?
Key Concepts by Stakeholder Group	
What do Medical Directors Need to know and discuss with the team?	Medical directors or primary care clinicians should be able to answer CNA questions about individual residents, their diagnoses and chronic conditions, and goals of care. Medical directors and primary care clinicians should call CNAs by their preferred name and should include them in discussions related to each resident's care plan.
What do DONs and nursing supervisors need to know?	DONs must have a system for assessing and monitoring CNA knowledge and skills with respect to communicating with residents and care partners. Are there routine chart audits and discussions with CNAs about this part of their role? If asked by the DON, would CNAs say that they feel respected, and that they believe their role in talking with residents and care partners is recognized and valued by everyone on the care team? What would improve relationships among CNAs, nurses, social workers, and other members of the care team?
What does the interprofessional team need to know?	Team members must know where to find updated information on goals, wishes, preferences for each resident, including input from the CNAs. All team members should value one another's contributions equally, should respect what each CNA brings to goal setting/care planning discussions from the resident and/or care partners. Team members must consistently and reliably demonstrate that they document and report any ideas or concerns to their supervisor or leadership in a timely manner.







