



ADVANCING EXCELLENCE
IN LONG-TERM CARE COLLABORATIVE

Mitigating Racial Inequities in Post-Acute & Long-Term Care Summit Summary and Next Steps

On December 9-11, 2020, The Advancing Excellence in Long-Term Care Collaborative held a virtual Summit on Racial Inequities in Post-Acute & Long-Term Care. The 3-day summit addressed the impact of racism and racial inequities on residents, families, staff, and organizational leadership in post-acute and long-term care.

Day 1 of the summit consisted of three keynote addresses and three panels. Keynote speakers included academics and leaders in LTC who provided an overview of issues. Panelists included representatives of each group: residents, families, staff and leaders, as well as academics with long standing involvement in long term care research and policy development.

Day 2 of the summit was designed as 3 separate working sessions; one focusing on each group (residents & families, care staff, and organizational leaders). Panelists, Advancing Excellence members, and registrants participated in the half day working sessions. The goals for day 2 were to: 1) determine and prioritize the most significant challenges faced by each of the three groups, 2) identify the most influential contributing factors for each challenge, and 3) select the most effective partners to work with on each priority.

Day 3 of the summit involved presentations from each of the three workgroups, summarizing the issues discussed and identifying priorities for action.

Videos of the three panel discussions and keynote addresses can be accessed on the [Advancing Excellence website](#), in case you missed any of the program or wish to send it on to others who might be interested.

Call to action was issued to encourage post-acute and long-term care industry professionals to support this important cause. Please email CAndrews@quantum-age.com if you would like more information or are interested in participating in an ongoing workgroup.



Summary of Summit Work

Overall Goal of the AELTCC Summit

Develop actionable strategies AELTCC can pursue to promote racial equity for PALTC residents, staff, and leadership.

Criteria for Strategy Selection

- > Urgency
- > Feasibility
- > Relevance to AELTCC mission and capabilities

Overview of Workgroup Outcomes

Resident and Family Workgroup (See further details in Appendix A)

- > Identified numerous challenges, but prioritized two during the Summit:
 - Social/Cultural Bias
 - Education, Training and Research
- > Identified actions to address the prioritized challenges:
 - Social/cultural bias
 - Collect and tell stories at all levels.
 - Continue difficult conversations post-summit.
 - Advocate for measures, policies and research.
 - Support person-centered and cultural competence training.
 - Promote expanded resident rights and documents.
 - Education, training, and research
 - Encourage staff education and training.
 - Empower residents to use their voices.
 - Support multi-method research.
 - Educate policymakers, regulators, and enforcers.
- > Prioritized four actions:
 - Engagement and coalition building
 - Schedule follow-up activities to “continue these difficult conversations” and broaden the network of participants.
 - Collect stories from residents, families, and staff to illustrate both inequity and improvement. Use these stories to foster action and change.
 - Education and advocacy actions
 - Promote education on implicit bias, cultural competence, and person-centered care for PALTC staff and leadership.
 - Advocate for measures, policies, and research related to racial equity in PALTC and engage in projects to develop them.





PALTC Staff Workgroup (See further details in Appendix B)

- > Identified numerous challenges, but prioritized three during the Summit:
 - Low salary including salary structure, assumptions related to capability, and reimbursement.
 - Disrespect including value of work, lack of zero tolerance, and “plantation mindset.”
 - Lack of opportunity including lack of training, mentoring, and turnover.
- > Prioritized contributing factors and actions related to the three challenges discussed:
 - **Salary** – form a workgroup, develop a policy statement, develop levels of certification.
 - **“Plantation Mindset”** – implement diversity and inclusivity training as a standard, develop formal training to respond to disrespect, identify best practices.
 - **Lack of relevant training** – collect best practices for the identified actions, recommend/ create a career pathway, raise awareness of opportunity.
- > Identified actions to address the challenges discussed, and prioritized the top three actions that could be implemented quickly:
 - Form workgroups within AELTCC and with key stakeholders to explore best practices to increase salaries, reduce plantation mentality, and improve training.
 - Conduct best practice research identifying successful programs regarding salaries, plantation mentality, and education.
 - Engage partners and key stakeholders related to the challenges identified to help to increase salaries, reduce plantation mentality, and improve training.

PALTC Leadership Workgroup (See further details in Appendix C)

- > Identified numerous challenges, but prioritized three challenges and the contributing factors (themes) during the Summit:
 - **Motivating/incentivizing leadership and ownership** – including the power differential between leadership and staff, board/ownership motivations and composition, as well as general and self-awareness of racism.
 - **Lack of access to leadership opportunities** – including composition of organizational leadership, lack of trust, and empowering leadership at all levels of the organization.
 - **Resources** – including how leadership prioritizes resource allocation, appropriate language to discuss racism, and recognition of the link between race and access to funding.
- > Identified actions to address the challenges discussed, and selected five to prioritize:
 - Seek grant funding to radically impact minority resident outcomes and/or minority leadership.
 - Motivate leadership by identifying and sharing resources, including continuing education (CE) content; connect with universities.
 - Convene workgroups to identify effective strategies—then share.
 - Create a directory of mentorship/internship opportunities.
 - Potential partners were identified by the workgroup.





Next Steps

AELTCC Commitment: We are committed to transforming the good work of the Summit into actionable strategies. Our goal is to both reduce racial inequity and mitigate the effects of long standing racial injustice in long-term care for residents, family members, and staff. With guidance from the expert testimony and existing evidence, we intend to make a real difference. Achieving our goals requires strong partnerships across individuals and organizations who are committed to the same ends.

We will be reaching out to potential partner organizations and to individuals who expressed interest in continuing to work together. We invite you to participate, to help change the culture of long-term care, to reduce the inequities, and to improve the quality of care and work life in our nation's long-term care organizations.

Please email CAndrews@quantum-age.com if you are interested in participating in an ongoing workgroup and indicate which of the three groups you are most interested in (resident/family, staff, leadership). We plan to begin convening work groups focused on individual strategies in the near future.




Residents and Families Workgroup



Day 1 Reflections: Residents and Families

- We need to incorporate residents' voices in creating solutions and address the intersectionality of racism, ageism, classism
- Many residents of color live in "majority minority" nursing homes that have fewer resources, including lower staff levels
- Residents are already vulnerable and may feel controlled or exploited by institutions that profit from their care (plantation syndrome)
- Leadership may not be people of color, though many staff are, this includes many immigrants
- When leadership is more diverse and "culturally competent", residents and families of color may have louder voices
- Culture change practices can help promote an atmosphere of respect where residents can live their lives
- Challenges for residents, staff, and leadership (like implicit bias) are interlinked, and solutions may be, too
- One devalued, disenfranchised population takes care of another
- COVID has exacerbated power differences; even when they "look alike", residents and staff are not peers

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Identified Challenges

Policy/
Regulatory

Social/
Cultural Bias


Institutional
Medical
Model

Education,
Training, and
Research

Inequality of
Power

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Prioritized Challenges

Social/ Cultural Bias

- Isms: racism, ageism, ableism, sexism
- Lack of mutual respect
- Implicit bias
- Plantation mentality
- Lack of strong relationships
- Lack of cultural understanding
- Socioeconomic differences
- Resource disparities
- Expectations of role/ability of nursing homes
- Lack of family voice and support

Education, Training, and Research Gaps

- Insufficient staff and leadership training re. cultural competence, implicit bias, patient-centered care
- Residents and families don't know rights or what they can reasonably expect
- Health services research focused on secondary, quantitative data sources. Often not include qualitative data and what is meaningful to residents and families

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Identified Actions to Address Social and Cultural Bias

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Collect and tell stories at all levels

- Collect stories shared at the summit and distribute to broader audience
- Use social media listening to hear stories
- Create a marketing campaign around racial equity in PALTC

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Continue difficult conversations post-summit

- Prioritize this topic through everything AELTCC puts out there
- Continue to push for person-centered care through our members, specifically for POC

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Advocate for measures, policies, and research


- Related to person-centered care, health equity, and cultural competence
- Promote funding to address resource disparities
- Look for funding to support research, measure development, and education

Support person-centered and cultural competence training

- Identify core categories
- Encourage members to incorporate these trainings into their meetings
- Present as AELTCC

Promote expanded resident rights documents

- Include information on topics related to microaggression, racism, discrimination, etc.
- Explore ways to better educate residents and families

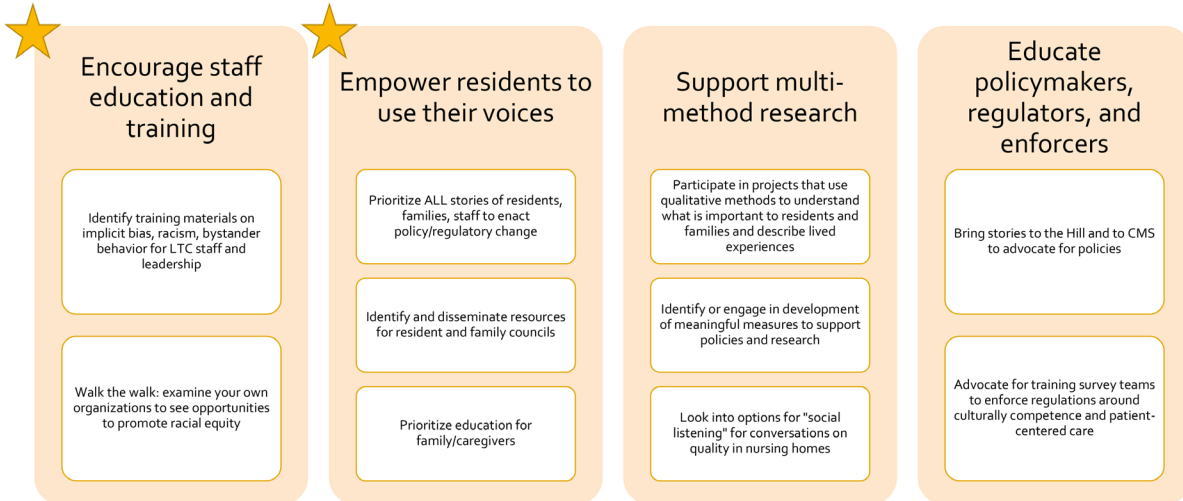


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Identified Actions to Address Gaps in Education, Training, and Research



Top 4 Prioritized Actions

Engagement and Coalition-Building Actions

- Schedule follow-up activities to "continue these difficult conversations" and broaden network of participants to...
- Collect stories from residents, families, and staff to illustrate both inequity and improvement. Use these stories to...

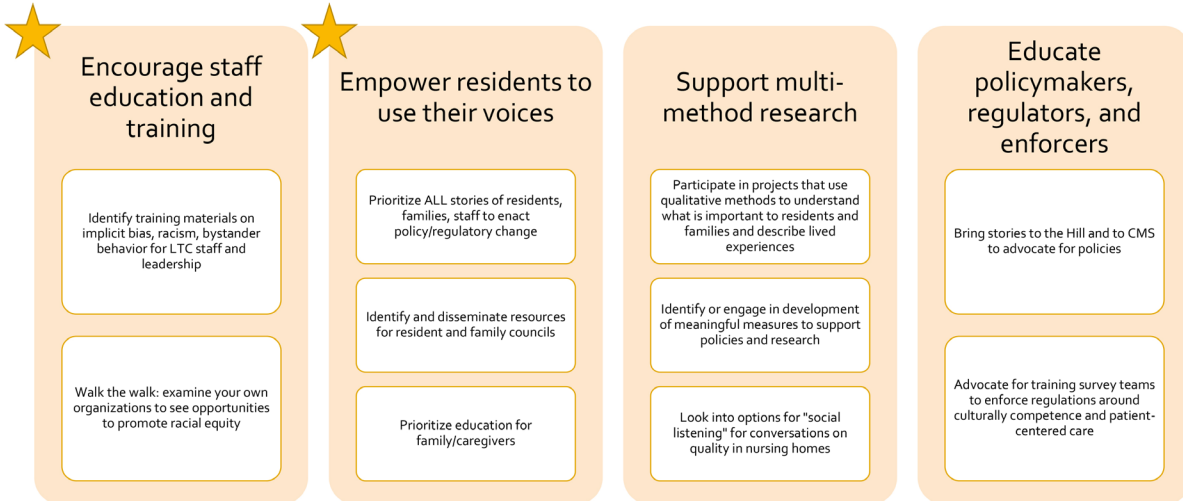


Education and Advocacy Actions

- Promote education on implicit bias, cultural competence, and person-centered care for PALTC staff and leadership
- Advocate for measures, policies, and research related to racial equity in PALTC.
- Engage in projects to develop.



Identified Actions to Address Gaps in Education, Training, and Research



Top 4 Prioritized Actions

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Learnings

- Person-centered care and “cultural competence” or racial equity are not the same
- Must intentionally acknowledge race when we think about person-centeredness
- CMS definition of person-centered care: focus on the resident as the locus of control and support the resident in making their own choices and having control over their daily lives
- Guidance to Surveyors: F726 requires staff to be competent, including “cultural competency”
- Expand the definition of person-centered care to explicitly include cultural competence and rights of persons of color and intentionally acknowledge race
- Advocate for policy to include required training for implicit bias and cultural competence
- Create a statement for nursing schools re. including education on these principles


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Staff Workgroup



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- Culture change practices can help promote an atmosphere of respect where residents can live their lives
- Challenges for residents, staff, and leadership (like implicit bias) are interlinked, and solutions may be, too
- COVID has exacerbated power differences; even when they "look alike," residents and staff are not peers

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Prioritized Challenges and Top Contributing Factors (themes)

Low Salary	Disrespect	Lack of Opportunity
Salary structure	Value of work	Lack of Relevant Training
Assumptions related to Capability	Lack of Zero Tolerance	Lack of Mentoring
Reimbursement (% Medicaid)	"Plantation Mindset"	Turnover

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Other Challenges and Factors Discussed

Other Challenges (not prioritized)

- Inadequate learning platform – understanding the “why”
- Relationship between desires of CNA and career goals (e.g. nursing home administrator vs nurse)
- Title (CNA, keeping credentials rather than resident care specialist, etc.)
- Need for reframing of perceptions of CNAs? (e.g. Sabazim in Greenhouse Model)
- Liability concerns among state/facilities (e.g. STNA); maintain credentials
- Considerations of staff that are not CNAs but still active in resident lives

- Determine how to incorporate CNAs in daily care of residents including feedback and participation in decision process in care team
- Siloing of the workforce
- Credentials
- Adequate workforce across facility (e.g. short staffing of CNAs, other positions)
- Lack of resources
- Configuration of staff (titles, roles, labels)
- Attracting - How to garner interest in role of CNA, direct care/support care in LTC
- Need to develop a Career LTC CNA - Better marketing , recruiting, perception of LTC

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Prioritized Contributing Factors and Actions

Salary

Form a work group

Develop statement (e.g., minimum \$16/hours with path to \$22)

Develop levels of certification

“Plantation Mindset”

Diversity and inclusivity training

Develop formal training to respond to disrespect

Identify Best Practices for CNA Involvement in Care Plan Meetings

Lack of Relevant Training

Collect best practices for the identified actions

Recommend/Create a career pathway

Raising awareness of opportunities

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Top 3
Prioritized
Actions

Form Workgroups

Best Practice Research

Engage Partners

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Discussion: Potential Partners and Other Considerations

- What organizations, individuals, and tactics will increase likelihood of success?
- Is there a potential for unintended consequences?

Salary	Disrespect	Opportunities
<ul style="list-style-type: none"> • Collaborate with Live Oak Project • Pioneer Network • PHI • IHI • Other associations/professions • MedPAC • Consumer Voice • Policy Makers • NAHCA • 1199/Union • Leaders, management companies 	<ul style="list-style-type: none"> • Literature review for current policies, practices, training program that are already developed • LeadingAge and their document • Create a subgroup <ul style="list-style-type: none"> • Jennifer Kraft Morgan and Elisabeth Burgess – GA State gerontology Institute • NAHCA • Government and State Agencies that oversee LTC 	<ul style="list-style-type: none"> • Pioneer Network • State Coalitions • PHI • Funding – government and public

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Leadership Workgroup

Day 1 Reflections: Leadership Panel

- Structural racism in leadership in post-acute and long-term care is a microcosm of the rest of our society
- This is compounded by the unconscious bias of many leaders and managers
- Staff feel undervalued; they do not feel that they are listened to
- Leaders are challenged:
 - to walk the walk as well as talk the talk
 - to affirm and acknowledge their staff's feelings about structural racism in society at large as well as in the nursing home
- These four strategies can address this:
 - Develop and provide education, sponsorship, and mentorship
 - Seek partnerships with allies in education and philanthropy
 - Promote interactive communication with staff
 - Engage with staff in activities to establish trust and relationships

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Prioritized Challenges and Top Contributing Factors (themes)

Motivating/
Incentivizing
Leadership &
Ownership

- Power differential between leadership & staff
- Board/Ownership motivations & composition
- General & Self Awareness of Racism

Lack of access to leadership opportunities

- Composition of organizational leadership
- Lack of trust
- Empowering leadership at all levels of the org.

Resources

- How leadership prioritizes resource allocation
- Appropriate language to discuss racism
- Recognition of link between race and access to funding

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