Introduction
Refer to this fictional case study when reviewing the examples of tools throughout this toolkit.

Mary B., age 82, is admitted to the transitional care unit at White Pine Rehabilitation and Care Center from the hospital for rehabilitation. She was hospitalized for a left total hip replacement after falling and fracturing her hip. Prior to her fall, Mary lived independently. Mary is a widow and has three children. All of her children live over 500 miles from Mary. One of Mary’s daughters has taken time off work to assist her mother as she recuperates from her surgery.

Mary’s physician writes an order for a physical therapy evaluation. The physical therapist completes Mary’s initial evaluation following her admission to the nursing home. The therapist recommends twice daily physical therapy for Mary and explains the therapy plan to Mary and her daughter. The therapist emphasizes that recovery from the hip replacement will occur faster if Mary is diligent about participating in physical therapy. Following the appointment, the therapist sends the therapy recommendation to the physician for an order and asks the therapy assistant to schedule Mary for twice daily therapy appointments.

The therapy assistant places Mary on the therapy schedule for 8:30 AM the next morning. She looks to see if there is an opening in the afternoon schedule. The schedule is full for the next afternoon, but looks to be open the following day. The therapy assistant decides she will talk with the therapist about the need to schedule Mary for another appointment time in the morning.

The next morning, the therapy assistant comes to pick up Mary for therapy. She’s awake, not dressed, and still in bed. The therapy assistant tells Mary that she will see if the therapy appointment can be rescheduled for later in the day. There is a full schedule in therapy that day, so the therapy assistant returns to Mary and tells her she will see her the next day. Mary’s daughter visits her mother at 11:00 AM and asks her how therapy went. She is very upset when Mary says she was not up in time for therapy. Mary’s daughter marches out of the room and asks to see the administrator. Her discussion with the administrator is heated: “My mother just got here and already things are messed up. I bet you just want her here longer so you can get more money. How is she going to recover if she stays in bed all morning and your staff doesn’t help her to therapy?” The administrator apologizes to Mary’s daughter and reassures her: “I will look into this and something will be done. It won’t happen again.” Mary’s daughter returns to her mother’s room.

The administrator is disappointed that Mary did not receive her scheduled therapy. This has not been a good start for Mary’s stay at the nursing home and her daughter was very upset. The staff has not followed the plan and this incident could have a negative impact on Mary’s stay. There’s also the lost reimbursement for a missed therapy appointment. This is not a new problem. The administrator was made aware by the physical therapist that missed appointments occur several times a month. The issue had been discussed at their last leadership meeting, but the administrator never checked to see if things had improved. The administrator contacts the nursing director and tells her about the conversation with Mary’s daughter. The nursing director says she will try and find out what happened. Returning to the neighborhood, the nursing director
finds Mary’s assigned nursing assistant. The nursing assistant tells the nursing director that she wasn’t aware that Mary’s therapy was scheduled for 8:30 AM and says, “I guess I missed that in report. I'm sorry, I won’t let it happen again. Mary seemed so tired. I thought it would be nice to let her sleep in.”

The next day, the nursing assistant awakens Mary at 7:30 AM and assists her in washing and dressing. She is able to eat breakfast and is ready in time for therapy. She receives therapy that morning and afternoon without any problems.

The following day is the nursing assistant’s day off. The nursing assistant taking care of Mary is David. David checks on Mary at 7:30 AM and she is sound asleep. He checks on her several times before 8:30 AM and she is still sleeping soundly. David does not want to wake Mary up. When the therapy assistant comes to take Mary to the therapy gym, she is not ready. Mary misses another therapy session. When Mary’s daughter arrives later in the morning and talks with her mother, she is not happy. Once again she finds the administrator and complains. The administrator tells Mary’s daughter: “I don’t know what happened. I know we dealt with the nursing assistant on this. I promise you I will get to the bottom of this.”

The administrator calls the nursing director, physical therapist, nurse, and David, nursing assistant to a mandatory team meeting later that afternoon to discuss this event.

The administrator explains to the team that she would like to discuss the reason that Mary has missed two therapy sessions in the last three days. The physical therapist notes that Mary is not the only one that has missed therapy sessions. In the last month, there have been eight occurrences of a missed therapy session. Six occurred during the early morning time slots. A few were rescheduled for later in the morning. But, lately, it has been busy. There is not time to make up missed appointments.

David, the nursing assistant says he is frustrated: “We’re supposed to be providing person-centered care, but then we are told we have to wake up people for therapy. It’s never clear when individuals are supposed to go to therapy anyway. This was the first time I cared for Mary. I know there is a list of therapy times hung in the neighborhood. But in the morning when everyone needs you at the same time, I don’t always have time to check the list. Sometimes the nurse mentions the therapy times in report, but I don’t remember her mentioning it for Mary this morning.”

The nurse says that she intends to include therapy schedules during morning report. However, she can’t remember if she discussed Mary’s schedule this morning. Her routine is to look at the therapy schedule list in the morning so she can share the information with the nursing assistants. She says: “It was kind of crazy today because we were sending someone to the hospital at shift change, so there’s a good chance that I missed that step.” She adds that she thinks the nurses should have more say in the therapy schedule. “Mary has been in a lot of pain since her hip replacement so we have been giving her quite a bit of pain medication. This morning she woke up at 5 AM in pain, so she received some pain meds. I think the medication is contributing to her fatigue.”

The administrator decides that missing appointments is a recurring event. It seems to be a system issue. She asks if those in the meeting are interested in helping her conduct a root cause analysis of the problem.