

LTC Bulletin

Autumn 2012



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<http://health.mo.gov/seniors/nursinghomes/providerinfo.php>

Reporting a Change of Administrator or Director of Nursing

Reporting a change of Administrator or Director of Nursing in your home is required per the Code of State Regulations, 19 CSR 30-81.010 and 19 CSR 30-82.010.

New forms for reporting these changes are now available on our website: <http://health.mo.gov/seniors/nursinghomes/appsforms.php>

The forms are called “*Change of Administrator/Manager in a Long-Term Care Facility*” and “*Change of Director of Nursing in a Long-Term Care Facility*.”

Reporting the personnel changes is mandatory, however use of these specific forms is not. These forms are provided as an option for your home’s ease and convenience and to improve communications.

If you have questions concerning these regulations or notification procedures, please contact the Section for Long-Term Care Regulation, Licensure and Certification Unit, at 573-526-8508, or send an email to: LTCApplication@health.mo.gov.

VOLUME 10, ISSUE 3

PAGE 2
RESIDENT SPOTLIGHT

PAGE 3
EMERGENCY PREPAREDNESS
SURVEY 2012

PAGE 4
ON THE ROAD...

PAGE 5
NATIONAL RESIDENTS’ RIGHTS
MONTH

PAGE 8
RESIDENT TRUST FUNDS

PAGE 9
PUP TIPS RETURN!

PAGE 10
CNA ONLINE TRAINING

PAGE 13
REGULATION UPDATES

PAGE 14
EMERGENCY PREPAREDNESS
AT BETHESDA MEADOW

Resident Spotlight

Mr. Alfred Lercher
Richland Care Center
Richland, Missouri



By Activity Director Kathy Haun

Alfred reminisces about his high school days playing basketball, his many occupations and all the services he provided to our community. He was city alderman for twelve years, town mayor for two terms and the Pulaski County clerk for nine years. He enjoyed working the elections.

Alfred is still interested in politics, but feels there is too much negativity. He says he has lived his life by following three simple rules: be truthful, honest and treat others as you would like to be treated.

Alfred was a route salesman for the Taystee and Wholesome Bread Company for more than 30 years. He also served on the utility board for 25 years. He spent time in shipyards building landing ships for the U.S. Navy. He also built foundations, culverts, and roads in southern Missouri and hauled dynamite for Bohannons Sons.

Alfred smiles broadly as he talks about his friends all over the country. He has gained wisdom through the years, evident as he plays pitch, watches his favorite baseball team on TV or thinks about some “strategic plan”.

Because of his likable qualities, Alfred is popular and has been selected to be our home’s “Christmas King” the last two years.

Do you have a special resident to nominate for the Resident Spotlight? Residents featured may have a special talent, lived an adventurous life, given back to their community or experienced other types of accomplishments. Nominations will be reviewed and selected by a team from the Section for Long-Term Care Regulation. Facilities should ensure that all privacy policies are followed. All submissions are subject to editing and approval by the DHSS Office of Public Information.

To receive a nomination form, please call 573-526-8514.

Long-Term Care Emergency Preparedness Survey 2012

By Planner Melissa Hope, Section for Long-Term Care Regulation

This fall, the Section for Long-Term Care Regulation (SLCR) will conduct the fifth annual emergency preparedness survey. Homes are asked to provide information concerning the development and contents of their emergency plans. The information will be compiled to assist homes and emergency planners in emergency situations. The survey is anonymous; no identification is required. As always, a home's confidential responses are for planning purposes only and will not be used for regulatory reasons.

All licensed homes in Missouri will receive the survey via regular U.S. mail, or homes may complete the survey online at: <https://webapp03.dhss.mo.gov/snapwebhost/surveylogin.asp?k=134944911998>

SLCR received 512 responses last year and hopes to increase that number this year. The section thanks homes in advance for their participation and welcomes questions at 573-522-1333. Emergency preparedness planning resources are also available at: <http://health.mo.gov/emergencies/readyin3/adultcare.php>.



On the Road... to Culture Change

By State Culture Change Coordinator Sam Plaster, Missouri Department of Health and Senior Services

Visit to Barathaven Alzheimer's Special Care Center

In May, I visited Barathaven Alzheimer's Special Care Center in Dardenne Prairie. Barathaven is a 66-resident, state-licensed-only, assisted-living home. Ever since they opened two years ago, they have provided person-centered care. However, Barathaven understands that culture change is a journey, not a destination. They recognize the need for ongoing improvement and participate with MC5, Missouri's Culture Change Coalition.



Administrator Felieta Boaz showed me around. The beautiful home has private and semi-private rooms and two dining rooms, each equipped with ovens for baking. There is a very homey feel. Residents can relax or visit with their loved ones in several living rooms, sit outside in an enclosed courtyard or stroll along a walking path.



WIFI exists throughout the building. There is no overhead paging. They do have an audible call system, but it is only heard at the nurses' work area.

Residents can furnish and decorate their rooms as they wish. They can have personal refrigerators and adjust their own heating and cooling. Resident rooms feature bathrooms with walk-in showers, heat lamps and motion sensors that automatically turn on the lights. Residents are provided with bathing assistance as needed and according to their preferences.

Barathaven has consistent staffing assignments, and staff members are expected to know residents' life stories. Residents go to bed and rise when they choose. A dining schedule exists, but residents are served whenever they go to the dining room. Snacks are available at all times.

continued on Page 6

October is National Residents' Rights Month

A national effort to celebrate and honor those living in long-term care facilities occurs every October. Known as Residents' Rights Month, this year's theme is "*My Voice, My Vote, My Right.*"

The month calls attention to residents' rights to vote and participate in the political process. Information and materials for Residents' Rights Month, designated by the National Consumer Voice for Quality Long-Term Care, are available at: www.theconsumervoice.org.



Ways Facilities Can Help Residents:

- Assist residents in registering to vote
- Assist residents in acquiring absentee ballots
- Invite candidates to come to the facility and speak to residents
- Host debate watching events
- Host weekly discussions on political issues and candidates
- Work with the community to provide mobile polling
- Become a registered polling place
- Assist residents in maintaining their voter registration cards or identity cards to present at the polls
- Provide transportation to the polls
- Provide mail-in ballots if requested by residents and assistance in filling them out
- Ask resident and family councils to include information about voting and elections on their meeting agendas
- Provide information on upcoming elections and candidates
- Distribute sample ballots prior to elections so residents are familiar with voting procedures
- Post reminders about voter registration deadlines
- Share tip sheets on how to register to vote, qualify to vote and vote early

On the Road *(continued from Page 4)*

Ms. Boaz told me that some residents enjoy doing laundry. Barathaven used to give those residents “fake” laundry to fold and unfold. One day the activity director came to Ms. Boaz and stated the residents were not going to fold “fake” laundry anymore. Now the residents truly contribute by folding real laundry. The home has a large volunteer program and residents who do volunteer work.

The activity staff offers two outings per week. Each resident has a party on his or her birthday. Invitations are sent to the resident’s family members.



Activity Aide Anne O’Connell

During my visit, I met Activity Aide Anne O’Connell. Born and raised in St. Louis, Ms. O’Connell was the eighth child. She had nine sisters and two brothers. Her husband of five years is a musician and also volunteers at Barathaven. He has been practicing old-time songs favored by residents.

Ms. O’Connell began as a caregiver at Barathaven shortly after it opened. Before Barathaven, she worked as a home care worker and also cared for her mother and a sister, who died from cancer. Those experiences convinced her to become a caregiver for others. Passionate about what

she does, Ms. O’Connell says, “I love my job so much, I feel like I’m in heaven already.”

Ms. O’Connell enjoys discovering something that people like to do. She struggled to find that special something for one female resident. And then four days before my visit, the resident just sat down and started rolling silverware.

Ms. O’Connell also learned how to get more residents involved in activities. She’s more likely to get a response if she says, “Come with me, we are going to have fun,” rather than explaining an activity and asking for participation. She took me to the activity room and showed me that residents enjoy big puzzles and books with old pictures. Ms. O’Connell loved discovering that many of the residents are excellent at sketching. She’s collecting their sketches for a book, which will include a sketch from Barathaven’s first resident.

continued on Page 7

On the Road (continued from Page 6)

Resident Margaret Gross

I also met Resident Margaret Gross during my visit. Ms. Gross is a real character. She took me by the arm to her room, showed me pictures and reminisced about earlier days. Born in Weldon Springs in 1926, she loved and misses the family farm. It included a big, beautiful nine-room house, dairy, riding stables, riding trails, an orchard and a big garden. The house had electricity and a bathroom, which was a big deal in those days. Women from Lindenwood University came to her family's stables to ride. Ms. Gross' eyes really lit up when she told me about all of the horses and how they rode in parades. She showed me a childhood photo of herself and her siblings on their pony, Teddy.

Besides operating their dairy and stables, Ms. Gross' father was a mail carrier. Her mother was a housewife "and a good cook." Ms. Gross was also very fond of her Aunt Mim, a teacher in St. Louis County. During "the war," Ms. Gross moved to California and worked in a bar. However, she liked Missouri better and moved back to the St. Louis area and worked at Thro's Clothing Store. Her husband was a successful lawyer and they loved to travel. Ms. Gross seems very happy at Barathaven, but she was more interested in talking about the farm, horses and her family.



Childhood photo of resident Margaret Gross with her siblings and their pony, Teddy

The culture of long-term care is undergoing profound change. Philosopher Eric Hoffer once said, "In times of profound change, the learners inherit the earth, while the learned find themselves beautifully equipped to deal with a world that no longer exists." I hope you will find something here that inspires you to either take your first step on the culture change journey, or your next one. If you are interested in sharing your culture change experience, please contact Sam Plaster at 573-522-8318 or email Sam.Plaster@health.mo.gov.

Resident Trust Fund Tips

By Auditors Lynn Gilmore and Rosemarie Nichols, Section for Long-Term Care Regulation

Resident trust fund management may appear to be a time consuming task. However, if maintained on a monthly basis, the task will become a trouble-free process. Here are some tips for facility administrators and their management teams to help them ensure federal and state regulations are being followed.

Personal Needs Allowance: Effective Jan. 1, 2012, the MO HealthNet Personal Needs Allowance was increased to \$35 per month. This increase affects all Medicaid participants residing in nursing facilities and also individuals who receive Personal Care Services through the Medicaid program.



Keeping Residents' Funds Separate from Facility Funds: There's a simple way to ensure resident and facility funds are separate. Review the "Aged Accounts Receivable" report. If a resident's money appears as a credit balance in the facility's operating account, explore the reason why and take steps to ensure the resident's money is being held in the right account.

[F159 – Management of Personal Funds & 19 CSR 30-88.020 (4) - Resident's Funds and Property]

Basic Haircuts: Medicaid and Medicare residents are entitled to routine personal hygiene services, such as basic haircut services, as part of their Medicaid and/or Medicare benefits. The facility is required to provide a basic haircut for all residents who receive Medicaid or Medicare benefits.

[F162 – Limitation on Charges to Personal Funds]

Authorizations: Funds that belong to a resident must be used only for the resident, and only when authorized by the resident or his/her legal guardian or designee. In order for funds to be taken out of a resident's trust fund, the resident or his/her legal guardian or designee must authorize the purchase/withdrawal, including petty cash withdrawals and beauty shop charges. Facilities often have residents sign a receipt to indicate resident authorization. However, if a resident is not alert and oriented, the facility should have a policy/procedure in place to assist the resident in obtaining necessary items and prevent misappropriation of funds. Having two facility staff members authorize a withdrawal or purchase is a common way to prevent misappropriation.

[F159 – Management of Personal Funds & 19 CSR 30-88.020 (2) - Resident's Funds and Property]

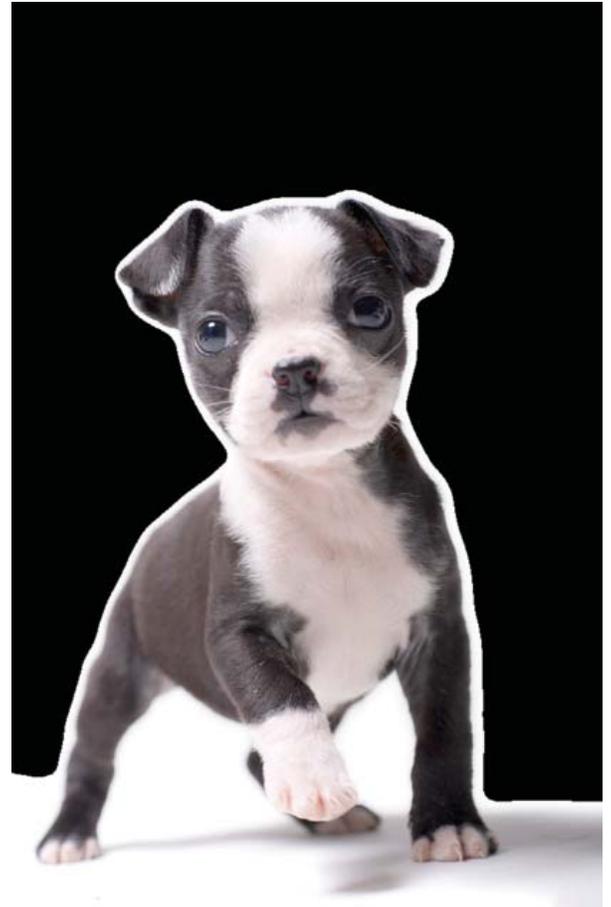
continued on Page 12

Pressure Ulcer Prevention (PUP) Tips Return

Pressure Ulcer Prevention

Primaris has re-launched *Pressure Ulcer Tip of the Month* with pointers to help fight and prevent pressure ulcers in your nursing home.

Please visit the website at www.primaris.org/pup_tips to view the new update each month on this successful education campaign, originally published in 2009.



PUP protects your skin

The Missouri Local Area Network for Excellence (MOLANE) is the state coalition for *Advancing Excellence*. MOLANE will provide a new tip each month through the end of March 2013. Additional resources are available at www.primaris.org

Visit the ***Advancing Excellence*** website at:
www.nhqualitycampaign.org/

Online Training Program for Certified Nurse Assistants Expands

By Executive Director Cindy Wrigley, Missouri Association of Nursing Home Administrators

On Sept. 1, 2012, the Missouri Association of Nursing Home Administrators (MANHA) launched the expanded Certified Nurse Assistant (CNA) online training program. The program includes 75 hours of classroom training and updates the CNA manual to 2012 practice standards. The program also gauges CNA competency on new technology products used in long-term care.



An additional unit, “Unit IX: Person Centered Care,” has three lesson plans.

The first covers person-centered care and how a CNA can organize time around resident choices. The second lesson plan is “Person-Centered Bathing”; the third, “Person-Centered Dementia Care.” An additional lesson plan in Unit I helps CNAs understand MDS 3.0. To support a CNA’s professional development, an orientation series and online mentor program have been developed.

Regional training sites are being established in every Department of Health and Senior Services (DHSS) region to support the 100-hour clinical component. If you are interested in becoming a regional training site and receiving a 25 percent discount, please contact MANHA.

continued on Page 11

Visit us on the web at: www.mlnha.org
4100 Country Club Drive, Jefferson City, Missouri 65109
Telephone: 573-634-5345, Fax: 573-634-8590

MANHA's Train the Trainer Series, approved by DHSS, has been available and includes the CNA Instructor/Examiner and Clinical Supervisor. The other offerings in this series will include:

1. Certified Medication Technician Instructor/Examiner
2. Level 1 Medication Aide Instructor
3. Insulin Instructor Certification
4. End of Life
5. Dementia Care
6. Restorative Instructor

MANHA's Support Staff Educational Training Series (approved by DHSS)

1. End of Life Care/Certification
2. CNA Leadership Series – Mentor Program 3 levels
3. Charge Nurse Leadership Series
4. DON Leadership Series
5. Dementia Care Certification
6. CPR
7. IV Certification
8. Feeding Tube
9. PIC Line
10. Bariatric Care
11. MDS Intensive
12. Care Plan Team Intensive
13. Dietary Managers
14. Safe Food handlers
15. Non-Nurse Aide Orientation
16. Restorative Nursing
17. Person Centered Care Series – 13 Modules
18. ALF Assessor
19. TPN
20. Mental Health and Behavior Training



MANHA's Administrator Support Series - Live

1. LTC Administrator State & National Study Courses
2. ALF/RCF State & National Study Courses
3. Administrator 40-hour Intensive

Resident Trust Fund Tips *(continued from Page 8)*

Petty Cash: Each resident may keep a petty cash fund of up to \$50 in a facility. This petty cash fund should be maintained separately from the facility's funds. A written account of each resident's petty cash fund, showing receipts and disbursements, should also be maintained. The account should include the dollar amount of the transactions, the date they occurred, and the resident's written authorization for the disbursement.

[F159 – Management of Personal Funds & 19 CSR 30-88.020 (5) & (6) – Resident's Funds and Property]

Notification Upon Admission: When a resident is admitted, the resident and his/her designee or guardian shall be provided a statement explaining the facility's policies and residents' rights regarding personal funds.

[19 CSR 30-88.020 (3) – Resident's Funds and Property]

Notification to MO HealthNet's Third Party Liability Unit: Upon the death of a resident receiving governmental assistance, certified facilities must provide a final accounting of the resident's funds (if greater than zero) to the Third Party Liability Unit within 30 days. Residential care and assisted living facilities have up to 60 days to provide the final accounting.

[F160 – Conveyance Upon Death & 19 CSR 30-88.020 (11) – Resident's Funds and Property]

Balance Returned with 5 days of Discharge: Within five (5) calendar days of a resident's discharge, the facility must give an up-to-date accounting of the resident's personal funds and return the balance of the funds to the resident or his/her designee.

[19 CSR 30-88.020 (10) – Resident's Funds and Property]



Reconcile Monthly and Provide Statements Quarterly:

Residents' accounts shall be brought current monthly and a written statement showing all transactions and the balance must be given to the resident or his/her designee or legal guardian on a quarterly basis.

[F159 – Management of Personal Funds & 19 CSR 30-88.020 (9) – Resident's Funds and Property]

If you have any questions regarding resident trust funds, please contact the Section for Long-Term Care Regulation at 573-526-8508.

Regulation Updates

The revisions to regulations 19 CSR 30-81.015 *Resident Assessment Instrument (Rescinded September 30, 2012)*; 19 CSR 30-86.043 *Administrative, Personnel and Resident Care Requirements for Facilities Licensed as a Residential Care Facility II on August 27, 2006 that Will Comply with Residential Care Facility II Standards*; and 19 CSR 30-86.047 *Administrative, Personnel and Resident Care Requirements for Assisted Living Facilities*, were published in the Code of State Regulations on Aug. 31, 2012, with an effective date of Sept. 30, 2012.

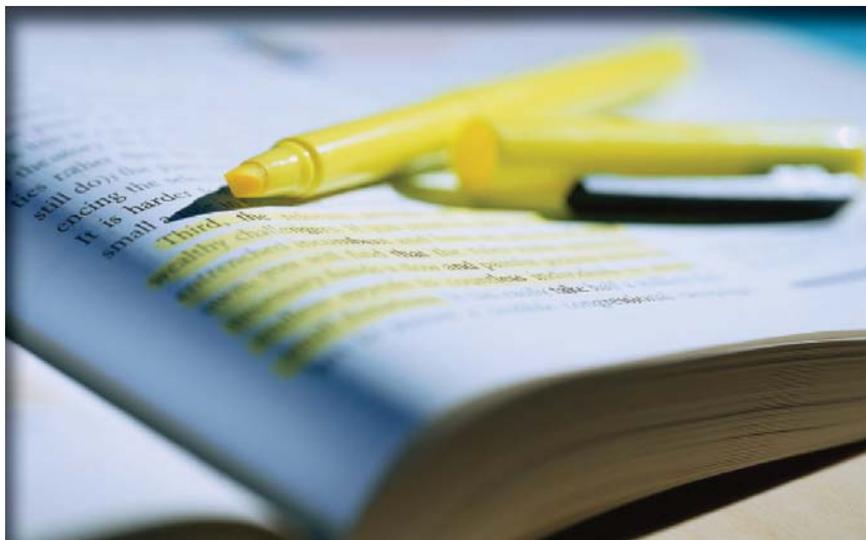
The revisions to regulations 19 CSR 30-85.022 *Fire Safety and Emergency Preparedness Standards for New and Existing Intermediate Care and Skilled Nursing Facilities*; 19 CSR 30-86.022 *Fire Safety and Emergency Preparedness Standards for Residential Care Facilities and Assisted Living Facilities*; and 19 CSR 30-88.020 *Residents' Funds and Property*, were published in the Code of State Regulations on Sept. 30, 2012, with an effective date of Oct. 30, 2012.

The revisions to regulations 19 CSR 30-84.030 *Level I Medication Aide Training Program*, will be published in the Code of State Regulations on Oct. 31, 2012, with an effective date of Nov. 30, 2012.

The official new rules can be found on the Missouri Secretary of State's website at:

www.sos.mo.gov/adrules/csr/current/19csr/19csr.asp. The rules are located under Division 30, in Chapters 81, 84, 85, 86 and 88.

If you have any questions regarding implementation of the rules, please contact the Section for Long-Term Care Regulation, Policy Unit Manager Carmen Grover-Slattery, at 573-526-8520.



Emergency Preparedness at Bethesda

Bethesda Meadow Stages Second Evacuation Drill with Metro West Fire Protection District

By Steve Vagnino

Ellisville, MO

An article is also available online: www.bethesdahealth.org/communities/news.html?resID=1



For the second consecutive year, in keeping with Joint Commission accreditation protocols, Bethesda Meadow staged an evening time fire-evacuation drill with the Metro West Fire Protection District and the Ellisville Police Department.

Thirty-three volunteers with community emergency response training played the roles of residents who needed to be evacuated during a simulated fire emergency. Bethesda Meadow staff members, aided by a Metro West Incident Command Post, set up in the parking area and began helping the “actor residents” down stairwells to safety outside the building.

The drill began with the arrival of multiple emergency vehicles, including three fire trucks, an ambulance, command vehicles and police cars. A team of firemen in full gear entered the main building and assessed the threat. A simulated electrical fire was detected and three upper floors of the south wing were determined to require evacuation.

“Our staff was instructed to use one of the back stairwells away from the threat,” says Marty Schenk, RN, vice president and administrator of Bethesda Meadow. “The volunteers were assigned one of four scenarios - uses walker, uses wheelchair, Alzheimer’s with confusion, or bed-bound and unable to speak. These different issues provided varying challenges to staff members to get everyone down flights of stairs.”



continued on Page 15

Emergency Preparedness *(continued from Page 14)*

At the conclusion of the hour-long exercise, staff and Metro West team leaders participated in an evaluation. The evaluation helps ensure that in a real emergency, resident safety will be maximized. This year's drill was smoother and more efficient than last year's. Staff members were commended for their organization and coordination.



Lessons Learned

By Kevin Curry, corporate director of Performance Improvement, Bethesda Health Group, Inc.

Emergency preparedness in long-term care can seem like a daunting task. As you prepare for a drill, you may be worried about things going wrong, but having things go wrong creates great opportunities for educating your staff. In spite of a great deal of preparation, communication problems occurred during the Bethesda exercise described above. For instance, we discovered:

- We did not have enough electronic devices for staff members when they reported to Incident Command;
- We did not have a system to identify residents who had been evacuated;
- We need to add a phone list of residents' families to our Incident Command box; and,
- We need a process to help the fire department quickly identify bedridden residents by wing and neighborhood.

While not an all-inclusive list, these issues point to opportunities for improving the next evacuation drill. As the old saying goes, "look for the silver lining" when things go wrong. Making mistakes is how most of us learn best.

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If you have suggestions for future articles, please contact Lisa Veltrop at 573-526-8514 or send an email to: Lisa.Veltrop@health.mo.gov.

