

MARCH 2004

Arkansas Advocates For Nursing Home Residents



Conway (501) 327-3152 Fairfield Bay (501) 884-6728
Little Rock (501) 225-4082

NEXT MEETING March 8, 2004

MEETING PLACE:
First Assembly of God
Church
4501 Burrow Road
North Little Rock
Directions to church on
page 6

10 a.m.
Meeting for Members,
Family and Friends of
Residents
(Closed to persons repre-
senting the nursing home
industry)

11 a.m.
Public Meeting:
Kris Baldwin
Division of Aging and
Adult Services

12 noon
Bring a sack lunch.

**AANHR's Mission: "To
protect and improve the
quality of care and life
for residents in Arkan-
sas nursing homes"**

We're on the web!
www.AANHR.org

Kris Baldwin to be AANHR's March Speaker

Kris Baldwin, of the Division of Aging and Adult Services, will speak to AANHR about "Passages." Passages is a successful program designed to help nursing home residents who qualify to move back home or into a more familiar living arrangement. Kris will explain the program and relate some "success" stories.

Kris frequented our meetings when she was a social worker with the Office of Long Term Care. She is an old friend, and we look forward to seeing her again.

AANHR Special Thanks

We extend heartfelt thanks to the following people and groups who make our outreach possible:

1. First Assembly of God in North Little Rock for providing a meeting room free of charge.
2. Brian Reddick and Bob Edwards of Wilkes & McHugh for its generous donation toward the publication costs of this newsletter.
3. David Couch of Grayson & Grayson, PA, for employing Brent Birch of One6Media, LLC, to do AANHR's new website design.
4. Clark Mason of Hare, Wynn, Newell & Newton for financial and promotional support over the years.



Good Faith Fund CNA Training Program

By Nancy Johnson

Last month we brought you information about a good nursing home. This month, at our regular monthly meeting, we learned about an excellent CNA training program. This is offered by the Good Faith Fund, a not-for-profit program committed to improving the quality of life and increasing the incomes and assets of low-income residents in the Arkansas Delta. Our speakers were Stephanie Sikora, Senior Policy Analyst, and Lyric Seymore, Director of Industry Partners. As part of their Work Force Development efforts, a welfare-to-work program, they provide a CNA training course of 260 hours (8 weeks). This compares to the 75 hours of training required under federal and state regulations.

Classes are limited to 12 students and besides passing background checks and drug testing, applicants must be able to perform academically at an 8th grade level or above to be admitted. The course is free to the students if they meet low-income requirements. They are not paid while taking the course. However, instructional materials and uniforms are provided and if they need assistance with transportation or child care the Fund will provide assistance as their funds allow and with personal counseling

Half of the CNA training program is devoted to classroom instruction and half to practice under the supervision of the instructor. 20 hours are also devoted to basic employment skills. Following completion of the course and receiving certification, graduates receive assistance with job placement and are monitored for an additional two years to assist them in remaining in the work force. Graduates are also given every encouragement to further their training and to go on to become licensed as an LPN or RN.

The CNA training is only one aspect of the Work Force Development Program of the Good Faith Fund, although it was of primary interest to AANHR. Applicants may also receive training in other health care and manufacturing jobs. Beyond that, the Fund also provides programs in Asset Development, which teaches money management, spending habits, financial services, credit management, etc.; Women's Business Development, which encourages and supports women in their own businesses; and in encouraging changes in public policy that affect persons moving up the economic ladder. As part of the public policy effort, Ms. Sikora and Ms. Seymore are presently actively involved in working with the Office of Long Term Care and a committee appointed by Representative Stephen Bright to suggest changes in the requirements for CNA training.

FOOD FOR THOUGHT

“It’s cheaper to pay CNAs than attorneys.”

Joe Hudgens, Loyal AANHR Member



From the President's Desk: Autonomy and Mental Health Needs in a Nursing Home

Nancy Allison

When someone enters a nursing home they find themselves in a world where they are told what to do. Many times they are no longer given the choice regarding what social interaction and meaningful activity is available to them. Dr. Susan Wehry, a Director of Geriatric Psychiatry Training, states that mental disorders in the elderly are those disorders affecting thinking, feeling, and behaving. Dr. Wehry states there is good evidence that residents who are given real choices, maintain control over daily activities, are responsible for something, and maintain some social connection are less likely to suffer from depression. Depression is the most reversible form of dementia.

Chronic dementia, such as Alzheimer's, requires the caregiver to understand what it is like to not know where you are. They must understand that the ability to communicate is lost and the resident has difficulty organizing his thoughts. Individuality and personal history seems to be lost and sometimes family connections are lost. These people may act out their frustration by throwing things, screaming, and even wandering. Caregivers must recognize the person is saying, "please help, something is wrong with me." The resident doesn't know how to explain it any other way.

Dr. Wehry states time and again that nursing home caregivers and owners must understand the symptoms and look at recreating the entire nursing home atmosphere. Promoting autonomy by seeking out life stories and active engagement with the resident in planning and carrying out activities is a good start. There must be a balance between helping and "letting be," but the resident can be given control over something (caring for a plant, a doll, a stuffed animal).

Autonomy is a right—freedom to choose, freedom to make decisions, to have some input into your own life. Loss of autonomy can be the cause of mental illness in LTC facilities and is completely treatable.

IMPORTANT NUMBERS

Office of Long Term Care

The Arkansas OLTC has a toll-free number for information, assistance, and complaints for residents and family members between 8 a.m. and 4:30 p.m. on weekdays:

1-800-LTC-4887

A social worker or nurse will be available to answer questions and address concerns. You may also write to: **Office of Long Term Care, P.O. Box 8059, Slot 400, Little Rock, AR 72203-8059**

NOTE: YOU SHOULD ALSO

REPORT COMPLAINTS TO THE ATTORNEY GENERAL'S OFFICE:

The Arkansas AG has a number to investigate adult abuse and Medicaid fraud. Please do not hesitate to call them:

**TOLL FREE
1-866-810-0016**

**Little Rock local number:
682-7760**

For additional assistance or a listening ear, call AANHR at
(501) 327-3152
Conway

(501) 884-6728
Fairfield Bay

(501) 225-4082
Little Rock

For instructions on how to file a complaint with OLTC, visit our website at www.AANHR.org or e-mail us at info@AANHR.org.

Bedsores/Pressure Sores/Decubitus Ulcers*

Family Members Can Be Key to Prevention

Bedsores, sometimes called pressure sores or decubitus ulcers, are open draining sores caused by the blood supply being cut off over bony prominences where the skin is in close contact with the underlying bone. When one's position is not changed, gravity causes the body's own weight to cut off the circulation of blood to the area. Once the circulation of blood is cut off, oxygen is unable to enter into the area of increased pressure and the skin and underlying muscle begins to die. This frequently happens if someone is immobile, unable to move themselves, or may have mental deficits in which the brain does not recognize the signals being sent from the body that pressure needs to be relieved by changing position. Sores may begin to develop in as little as one to two hours, especially if the patient's immune system is weakened from disease or malnutrition. If this is allowed to happen, a bedsore is extremely difficult to heal and may result in an infection which overtakes the entire body and causes death.

Bedsores are entirely preventable. The cause of bedsores is well known. All that is necessary is frequent and proper repositioning of immobile residents and keeping the skin clean and dry. Residents at risk for bedsores should have the condition of their skin monitored daily for reddened areas over pressure-prone areas such as the tail bone, heels, hips, even sometimes the ears. Any part of the body where there is pressure along with moisture and heat is susceptible to the development of a bedsore. When pressure is alleviated and circulation restored to the affected area, a bedsore can be averted.

This is an area where family members can play an active part in the care of their loved ones by careful examination of your loved one's body from head to toe at every visit if he or she is sedentary, unable to shift position, eating poorly, or has lost the cognitive ability to recognize the need to move. Do not be embarrassed about examining your loved one's private areas because these are the areas most prone to skin breakdown. This is one time when modesty must be sacrificed for the sake of the resident.

If you detect a suspicious reddened area, promote increased circulation by positioning him or her so that there is no longer pressure on the area and by rubbing gently around - not over - the area. Immediately notify the nursing staff of your concerns and follow up to see that treatment is given before skin breakdown actually occurs. Keeping the area clean and dry and frequent change of position is a must. A special mattress may be obtained (upon a doctor's order) which will alleviate pressure. Such a mattress cannot, by itself, be relied upon to control the problem, however. Frequent repositioning and keeping the area clean and dry is still a must.

Another aspect that family members should watch closely is the nutritional status of their loved one. Because malnutrition is a major risk factor in the development of bedsores, preventive measures include careful monitoring of loss of appetite, eating or swallowing difficulties, and weight loss. Concerns that any of these are occurring should be brought to the attention of the staff and corrective measures taken.

If a bedsore does develop, ask questions. Ask "why did this develop?", "what treatment is being done to heal this?", and "what is the status of the sore?". Monitor the healing process yourself; do not be satisfied with a clean bandage every day without seeing what is occurring under it. You may find it helpful to photograph the sore with a camera which dates the photos to measure healing or lack thereof. Remember that an improperly treated bedsore can rapidly become a life-threatening situation.

Failure to prevent bedsores is inexcusable and shouldn't be tolerated. If they do develop, they must be detected and treated early. Failure to do so can cost a life.

*This is AANHR's newest handout. We'll have some available for pickup at the March meeting.



**KELLY O'QUINN —
New AANHR Board
Member Biography**

Kelly O'Quinn came onto the AANHR Board after the October election of officers and board members. She was born on November 1, 1960 in Warren, Arkansas. She moved to Fayetteville in 1963 and her father, Dr. Michael V. "Mickey" O'Quinn, coached the Arkansas Razorbacks Football Team. (By the way, they were National Champions while he was coaching under Frank Broyles).

Kelly moved to Arkadelphia in 1969 and graduated from Arkadelphia High School. She attended Henderson State University in Arkadelphia where she earned a B.S.E. She taught school for 14 years before becoming a paralegal to her brother, Darren O'Quinn. While at Henderson, she served as president of Delta Zeta Sorority, was a Representative of the Student Government Association, and she was a HSU Cheerleader.

Kelly is the godmother of Olivia Grace O'Quinn (Darren's new daughter), and she has two brothers and a sister. Her hobbies and interests include church, water activities, shopping, and spending time with her family and friends.

Office of Long Term Care Website

The Office of Long Term Care Website address is:

<http://www.medicaid.state.ar.us/general/units/oltc/index.htm>

Don't let the long address scare you off from looking at this site. Among many things, it has all the information you ever wanted to know about nursing home law, enforcement, regulations, and training of CNAs. It explains what happens during survey inspections and the report form used when citations are given. Most recently the *Family Council Guide* has been added.

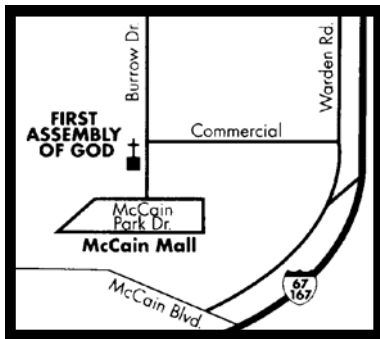


**Arkansas Advocates
For
Nursing Home Residents**

P. O. Box 22421 Little Rock, AR 72221-2421

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U.S. POSTAGE PAID
LITTLE ROCK, AR
PERMIT NO. 1886

**PROTECTING THE RIGHTS OF
NURSING HOME RESIDENTS FROM FRAUD, ABUSE, AND NEGLECT**



MAP TO MEETING

**Strength in Numbers,
AANHR Needs You**

Please take a moment to find out if you've renewed your AANHR membership. (Our fiscal year began on November 1, 2003. If you have not paid your dues since August 2003, then you are past due.) We are so appreciative of people like you who support us because together we can make a difference.

- () I wish to receive AANHR newsletter
- () \$15 per individual membership enclosed
- () \$20 per family membership enclosed
- () \$ 4 per student or CNA
- () Waive dues because of financial hardship

Please make checks payable to:
AANHR P. O. Box 22421 LR, AR 72221-2421

AANHR Officers and Board Members

- President** – Nancy Allison, Conway
- Vice President** – Nancy Johnson, Fairfield Bay
- Secretary** – Kelly O'Quinn, Little Rock
- Treasurer** – Ralph Erwin, Little Rock

Members of the Board of Directors:

Marce Best, Maumelle; Betty Buckta, Fairfield Bay; Virginia Cross, Little Rock; Martha Deaver, Conway; Catherine Donovan, Little Rock; Fred Plant, Little Rock; Larry Wakefield, Fairfield Bay

AANHR MEETING DIRECTIONS

**First Assembly of God Church, 4501
Burrow Road, North Little Rock, AR**

(See Map Above)

From Little Rock, on Highway 67-167 take the West McCain Blvd. exit. Immediately after crossing the overpass, turn right (North) on Warden Road (the access road that parallels the divided highway and McCain Mall). Stay on Warden Road for three blocks.

Turn left on Commercial Street, the street with the Golden Corral Restaurant on the corner. Commercial Street ends three blocks later at Burrow Road.

The church is at the end of Commercial Street and is easily recognized by three large crosses. Proceed ahead in the parking lot (do not turn right) past the crosses to the Southwest corner of the building. Turn right on the narrow alley-like drive. Enter the door halfway down this side of the church. The Meeting is in Room No. 113 (immediately inside the entrance door)