PROTECTING NURSING HOME RESIDENTS
February 2015

AANHR
Arkansas Advocates for Nursing Home Residents

Proctor (501) 450-9619

AANHR’s Mission Statement:
“To protect and improve the quality of care and life for residents in Arkansas nursing homes.”

News
February 9th Meeting Topic:
C.V.O. Goals 2015

Speaker: Kathie Gately, AR State Ombudsman

Are you familiar with the role a Certified Volunteer Ombudsman plays in your local nursing home? Do you have two hours per week that you would be willing to spend with nursing home residents who would love to have a listening ear? If so you will gain valuable insights on serving our sometimes forgotten seniors by attending our February 9th AANHR meeting where Kathie Gately will share her 2015 goals for the Volunteer Ombudsman program in Arkansas.

Kathie received her Bachelor’s degree in Social Work from Arkansas State University, beginning her career by holding positions within the long-term care facility environment. She then transitioned to Adult Protective Services within the Department of Human Services. Since 2003, Kathie has served Arkansas long-term care residents as the State Long-Term Care Ombudsman, where she has dedicated more than 30 years of experience in the long-term care field to advocating for the rights of all older Arkansans in long-term care. She received the Cernor Johnson Memorial Advocacy Award in 2009, including supportive recommendations from Attorney General Dustin McDaniel and Governor Mike Beebe.

Ms Gately states, “certified volunteers are critical to those we serve as they are an extension, the eyes and ears, of the Regional LTC Ombudsman. They assist the Regional Ombudsman by having the capability of tangible outreach through weekly visits.”

Please join us on Monday, February 9th, as Kathie shares her 2015 goals for our advocates for family members in nursing homes in the ongoing struggle to improve quality of life for nursing home residents in their later years.

BREAKING NEWS: As this newsletter goes to press we have learned KARK Ch 4 News is doing a feature on Advocacy groups for their spring sweeps schedule. KARK plans to cover AANHR’s & CVO’s advocacy roles at February 9th meeting. So, be present to be included in this very important outreach.
Frank,  
1. Do you have information -data- on involuntary nursing home closures that have occurred in AR related to the process of how the closure was handled and the impact on residents that you can share?  
2. Does AR have a requirement (in state law, rule, or policy) that a nursing home that is involuntarily closing develop a closure plan?  
3. Does AR have any model practices regarding involuntary nursing home closures?  

**Mr. Gobell's answers:**  
1. The Office of Long Term Care does not keep data on involuntary closure of facilities. We don't differentiate between involuntary or voluntary closure. Regardless whether a facility is closing voluntarily or involuntarily, the primary concern for the Office of Long Term Care is the appropriate care and relocation of residents.  
2. Yes. Ark. Code Ann. § 20-10-1005 requires that when a resident is transferred or discharged - regardless of the reason - the "facility shall provide preparation and orientation to residents to ensure a safe and orderly transfer or discharge." OLTC's regulations at 318.7 states, "Except in the case of an emergency or voluntarily discharge, the resident, responsible party, attending physician, and the responsible agency, if any, are consulted in advance of the transfer or discharge of any resident. The resident and/or responsible party will be provided written notification of his/her transfer, ten days prior to the transfer." Section 3016 states, "Reasonable notice of transfer or discharge means the decision to transfer or discharge a resident shall be discussed with the resident and the resident will be told the reason(s) and alternatives available. A minimum of thirty (30) days written notice must be given. Transfer for the welfare of the resident or other residents may be affected immediately if such action is documented in the medical record." Section 3018 states, "The facility shall provide preparation and orientation to resident designed to ensure a safe and orderly transfer or discharge." Additionally, facilities participating in the Medicare or Medicaid programs must comply with federal requirements. Under sections 1128I(h) and 1819(h)(4) of the Social Security Act (the Act) and regulations at 42 CFR 483.75(r) and (s), individuals serving as the administrator of a SNF, SNF/NF or NF must provide written notification of an impending closure of a facility which also includes the plan for relocation of residents at least 60 days prior to the impending closure; or, if the Secretary terminates the facility's participation in Medicare or Medicaid, not later than the date the Secretary determines appropriate. Notice must be provided to CMS, the state long term care ombudsman, all the residents of the facility, and the legal representatives of such residents or other responsible parties.  
3. No. Each case of involuntary closure has unique facts. As a practice, the Office of Long Term Care assigns staff to monitor treatment of residents and to ensure proper transfer of residents. The Office of Long Term Care works closely with both the Arkansas Health Care Association and individual facilities to identify facilities in close geographic proximity, when possible, that are willing and capable or accepting transferred residents. Additionally, the Office of Long Term Care ensures lines of communication with the closing facility's staff and ownership to ensure that they are aware of the requirements to provide discharge planning and appropriate placement of residents.
FREEDOM OF INFORMATION (FOI) ACCESS

Stormy Smith, Office of Long-term Care, Freedom of Information Program Manager, addressed what information is public for our use as advocates. He also explained how to FOI records. All record requests for OLTC records have to go through him where they are sorted for section assignments.

Records generated during the Medicare/Medicaid survey process are the property of CMS, who are Custodian of the Records even though OLTC maintains the records. OLTC has permission from CMS to release federal deficiencies with plans of correction and any letters associated with the deficiencies. Any documentation generated during the federal survey by OLTC that contains Protected Health Information can only be released by CMS after determining what information must be marked out.

The OLTC state survey section maintains monthly staffing reports and they may be requested under the Arkansas FOIA. The OLTC nursing facility licensure section, governed by federal regulations, maintains records regarding ownership information. These records may be released without an FOIA request.

The Centers for Medicare and Medicaid Services (CMS) requires a letter from the requestor under the Freedom of Information Act (FOIA) when requesting survey records belonging to CMS. The letter must have a return address and must be signed. It should tell OLTC the name of the resident, the name of the nursing home, the approximate date of the event and that you are requesting a copy of the report. While this letter requirement is for CMS survey records only, it is advisable to follow this format for any records requested from OLTC.

Stormy Smith’s contact information:
P.O. Box 8059, Slot S-409
Little Rock AR 72203-8059
Phone: (501) 320-6287
FAX: (501) 682-6171
Email: stormy.smith@dhs.arkansas.gov

Volunteer Ombudsmen Needed

Regardless of whether or not you end up becoming a volunteer ombudsman, your knowledge will increase greatly by attending an ombudsman training session. Volunteer Ombudsman training takes only one day and can make an incredible difference in the life of a nursing home resident. A volunteer ombudsman is authorized to help the residents with any concerns. Protecting the resident’s rights is a priority. The volunteer ombudsman is authorized to take complaints and report things they see that are questionable to their regional ombudsman, who can take steps to remedy the situation. A volunteer ombudsman can make a big difference brightening the life of a nursing home resident. After the day of training and a short orientation period one can become a Certified Ombudsman and can choose to be assigned to a specific nursing home where just two hours service per week is expected. If interested, please contact Martha Deaver at 501-450-9619; she will put you in touch with your regional ombudsman.
Money Follows the Person (MFP)
Could it be your ticket out of a nursing home?

At the November 2014 monthly meeting Ramona Sangalli, Program Coordinator for Money Follows the Person (MFP), provided details on this program that began in 2005 as part of the Deficit Reduction Act. MFP is one-hundred-percent federally funded as a Demonstration Project until September 2016 and may possibly be extended through 2020. The program goal is to help expand options for elderly people and individuals with disabilities to receive care in the community rather than in an institution.

To be eligible for MFP one MUST be an institutional resident for ninety consecutive days and be Medicaid qualified for at least one day. Length of time in the program is 365 days per participant which begins with the day the resident leaves the facility. Most of the MFP clients in Arkansas come from Assisted Living Level 2 facilities and presently 85% of current clients are still in the community at twenty-four months out. MFP participation goal in Arkansas for 2015 is 150 clients. Last year MFP served 152 clients.

MFP funds can be used to support a client to live in a home that is owned or leased by the individual or family member, an apartment with an individual lease that has lockable access, an assisted living facility, or a residence in a community-based setting- where no more than four unrelated individuals reside. These qualified residences offer much more privacy than sharing a room at a nursing facility where one is subject to the infringements on personal freedom required to protect all residents from the "what ifs“ inherent with mass impersonal care.

MFP funds can be used for community transition services but not ongoing support. For instance, MFP funds can be used for rent security deposits but not rent itself, for utility deposits but not monthly utility bills. Funds can be used for furniture and furnishings to establish a residence. Individuals must be evaluated to qualify for the MFP program and have the means to support themselves outside the institutional setting. Ramona Sangalli's contact info:

AR DHS- Division of Adult Services (DAAS)
MFP Program Coordinator
P.O. Box 1437, Slot S-530
Little Rock, AR 72203-1437
Phone: (501) 320-6579
Fax: (501) 682-6658
email: ramona.sangalli@arkansas.gov

“Speak up for those who cannot speak for themselves, for the rights of all who are destitute. Speak up and judge fairly; defend the rights of the poor and needy.”
Proverbs 31:8 NIV
Over the 65-years of my life, I have noticed significant changes in medical care. As a little girl, my mom accompanied me to my doctor’s appointments. Most conversations regarding my care were with his nurse, Loretta. This doctor delivered me and made house calls when I had chicken pox and scarlet fever. My mom made him a fruit cake every year. He was a good doctor and we always just did exactly as he said. Over the years, however, my approach to health care has changed. I now go to appointments and ask many questions. Doing Internet searches has increased my knowledge about medical issues, which helps me actively participate in my health care, rather than just blindly following doctor’s orders.

This has also made me wonder about patient participation in health care generally, and its potential effect on nursing home care, particularly since I have a disabled son in a nursing home. Are the residents and the resident’s families accessing the Internet to increase their knowledge about medical issues? What if, for example, a nursing home resident or family member reads about a new medication, or as a result of viewing a government website have questions regarding the nursing center ratings? Is there an easy way for them to have these questions addressed at that particular nursing home? Is the staff at the nursing center equipped to modify individual care based upon input from its residents and their families? Is patient participation encouraged or discouraged there? If patient participation is encouraged, who does the family talk to, and how do they go about arranging it? Is this an issue involving the administration, the family council, the doctor, the nursing staff, or all of the above?

It would be easier for this feedback and participation between the nursing center staff and resident if there were websites established that allowed direct communication. It would also be helpful if the administration and staff of the nursing center provided communication tools to the residents and families such as newsletters and brochures that describe good medical websites and information about how the nursing home is responding to feedback, for example.

From my experience at Greenhurst Nursing Center, I have been able to use care conferences and direct communication with the administration quite successfully when I have questions. However, since resident/family participation in all health care is starting to become more the rule than the exception, my challenge to nursing homes is to design formal ways that make it easier for patients and families to give them feedback. Satisfaction surveys and feedback forms for residents and families would increase participation at both the nursing home staff and resident level. I don’t believe that optimal health outcomes are possible without this participation. I know this because our family has encountered countless examples of how our participation has made a difference in our son, Jordan’s, care.
Here is a checklist for families contemplating the placement of a loved one in a nursing home

*Obtain a Durable Power Of Attorney with provision that does **not** allow the DPOA to sign an arbitration clause.

*Determine how nursing home bill will be paid: Medicaid? private pay? Medicare usually pays only for a limited amount of time in a nursing home, usually for rehabilitation after a hospital stay.

*Go to [www.medicare.gov/nursinghomecompare](http://www.medicare.gov/nursinghomecompare) to view past history of nursing home

*Find out whether the prospective nursing home has liability insurance coverage.

*Visit after hours & weekends

*Are there smells of urine and other bad orders present?

*Speak with other families in nursing home

*Read latest survey required to posted in the nursing home

*Observe whether call lights are going unanswered.

*Do residents look sedated or alert?

*Are residents clean?

*Are residents happy/content?

*Check staffing posted log sheet….required to be posted within twenty feet from the front entrance

*Visit during meal time to observe how food is presented and served.

*Check to see if residents that need assistance with eating are being fed.

*Check to see if rooms have fresh water in arm’s reach in pitchers located in residents’ rooms.

*Are employees taking care of the residents needs? Are the employees relating to the residents?

*Does the nursing home have an active Family Council?

*Make sure you are **NOT** required to sign a arbitration agreement. Simply state during admission document signing process that you do not desire to sign. Request a copy of all admitting documents.

*Remember, this nursing home will become your family member's next home, whether temporary or permanent. Stay involved. Visit often. Speak up when problems arise.

*Always attend Care Plan meetings and follow up on plans for action.
AANHR Special Thanks

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

Paschall Strategic Communications for their continued assistance with public relations needs.

The Law Office of Bob Edwards for providing AANHR Good Care Booklets

First Assembly of God Church in North Little Rock for providing AANHR a meeting room.

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M. Darren O’Quinn, Attorney, Little Rock, for his continued assistance to and support of AANHR.

AANHR Officers and Board Members

President - Martha Deaver, Conway (501-450-9619)
Vice President - Nancy Patterson, Searcy (501-305-4034)
Secretary - Nancy Allison, Conway (501-327-3152)
Treasurer - Frances Walker, Benton (501-316-0260)

Members of the Board: Martha Blount, Searcy (501-278-9168); Linda Brimer, Searcy (501-268-4699); James Brooks, North Little Rock (501-454-6279); Pat McGuire, Alexander (501-847-1016); and Ann Pinney, Benton (501-249-1084).

Newsletter Editors: Ernie and Martha Blount, Searcy.

Honorary Board Members: Faye Sandstrum, Searcy.

Helpful/Important Numbers

The Office of Long Term Care (OLTC)
has a toll-free number for information, assistance and complaints for residents and family members:
1 - 800 - LTC - 4887 between 8 a.m. and 4:30 p.m. on weekdays.

You may also write to: Office of Long Term Care (OLTC) P.O. Box 8059, Slot 400 Little Rock, AR 72203-8059
OLTC website: Http://humanservices.arkansas.gov/dms/Pages/oltcHome.aspx
You should also report complaints to the Arkansas Attorney General
Toll Free: 1 - 866 - 810 - 0016
Little Rock Local: 682 - 7760
For additional assistance or a listening ear, call AANHR at (501)450 - 9619 in Conway

Visit our website at www.aanhr.org or e-mail us at Info@aanhr.org
Your local Ombudsman’s number should be posted in a prominent place in the nursing home, preferably near the front entrance. You may also call your local Area Agency on Aging to secure the name and phone number of the Ombudsman.

The UALR Senior Justice Center can be reached at: 501 - 683 - 7153.
www.uarl.edu/senior justice
Strength in Numbers, AANHR Needs You!!

AANHR is a nonprofit organization run by non-paid volunteers dedicated to protecting and improving the quality of care and life for Arkansas residents in long term care facilities.

Won’t you please lend your support to us by joining our organization? Your membership dues help to pay for our activities that support our mission statement. Memberships are available on a calendar year basis. Join now and you will be a member through December 31, 2015.

Today’s Date____________________________________

Name__________________________________________

Mailing address__________________________________

City/State/Zip__________________________________

Phone_________________________________________

Email__________________________________________

( ) I wish to receive the AANHR newsletter.
( ) $15 per individual membership enclosed.
( ) $20 per family or corporate membership.
( ) Waive dues because of financial hardship.

Please make checks payable to: AANHR and mail to 2336 Riverview Circle, Benton AR 72019

Driving directions to
First Assembly of God Church,
4501 Burrow Road, North Little Rock

Coming from the North:
When driving South on Highway 67/167, take exit #1A onto Warden Road. As soon as you safely can, move into the right-hand lane, as you will be turning right at the Golden Corral Restaurant onto Commercial Drive.

Coming from East, West or South:
If you are on either I-30 or I-40, take Highway 67/167 North. Take exit #2 onto Landers Road. Stay in the left-hand lane, as you will be turning left and going under Highway 67/167 and enter Warden Road going southbound. As soon as you safely can, move into the right-hand lane, as you will be turning right at the Golden Corral Restaurant onto Commercial Drive.

Commercial Drive terminates at the church. Proceed straight across Burrow Road into the church’s parking lot and turn right at the far side of the building into the narrow alley-like drive.

The entry door is located about half-way down this side of the church and the meeting room (#113) is immediately inside the entrance door.