

PROTECTING NURSING  
HOME RESIDENTS  
1995-2005

June  
2005

Www.aanhr.org

# Arkansas Advocates for Nursing Home Residents

*Celebrating our Tenth Year  
1995-2005*



## NEXT MEETING

Monday, June 13, 2005

## MEETING PLACE:

First Assembly of God  
Church  
4501 Burrow Road  
North Little Rock  
Directions to church on  
page 2

### 10 a.m.

Meeting for Members,  
Family and Friends of  
Residents (Closed to  
persons representing  
the nursing home  
industry)

### 11 a.m.

Public Meeting:  
**Scott Fletcher of  
Fletcher Law Firm**

### 12 noon

Meeting Dismissed;  
**CNA Awards lunch-  
eon**

**12:30 p.m.**

**Make Reservations!**

## AANHR's Mission:

**"To protect and im-  
prove the quality of  
care and life for resi-  
dents in  
Arkansas nursing**

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

**A** ANHR'S June meeting will feature Scott Fletcher, the principal in the Fletcher Law Firm, who will speak on Advanced Directives. Mr. Fletcher is a frequent author and speaker on topics pertaining to taxes, estate planning, trusts, probate estates and charitable giving. He has taught numerous continuing legal education courses to lawyers due to his expertise, experience and reputation, including being a featured speaker at the Thirty-Seventh Annual Arkansas Federal Tax Institute for Certified Public Accountants and Tax Attorneys.

## **Awards Luncheon for CNAs—12:30 p.m.**

**June 13, 2005**

## **First Assembly of God Church, North Little Rock**

On **Monday, June 13, 2005** Arkansas Advocates for Nursing Home Residents will be hosting an **awards and appreciation luncheon for Certified Nursing Assistants (CNAs)** and recognizing the very important roles they play in nursing homes.

The special awards ceremony and luncheon will be held at **First Assembly of God, 4501 Burrow Road, North Little Rock at 12:30 p.m.** (Directions to Church on Page 8)

**Senator Mary Ann Salmon** will speak about CNAs who went the extra mile in caring for her father, a nursing home resident, before his recent death.

**Savanna Knight**, Ms. Teen Lakes of the Northwest, will be speaking of her personal experiences as a CNA. She is now a Certified Nursing Assistant at Greenhurst Nursing Center where she has volunteered since age seven. Savanna's mother has worked as a CNA for twenty years and is an inspiration.

**The Governor has honored these dedicated employees by signing a proclamation recognizing National CNA Week.**

**Reservations Due Before June 6**

**\$10.00—Pay at the door**

**Free to CNAs nominated for Awards**

**Call**

**(501) 450-9619 (Conway) or (501) 225-4082 (Little Rock)**



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## From the President's Desk

Nancy Allison

**H**ave you ever been pushed naked down a cold hallway in a hard plastic chair with a hole in the bottom of it? Have you been held in that chair shivering while someone pours hot water over you and tells you "you have to have a shower"? What if you don't want a shower! When CNA's in a nursing home were asked how they would feel when asked the above questions, their answers were "embarrassed, mad, uncomfortable and cold".

Residents in nursing homes refuse, scream, hit, struggle and bite when told it is time for them to have a shower. Surveys show that 50% of nursing home residents get highly distressed during bathing and it is particularly distressing to Alzheimer's patients.

An educational video, *Bathing without a Battle*, developed by University of North Carolina at Chapel Hill, was sent to 18,000 nursing homes in the United States. It is an excellent example of what can be done to make bathing a pleasant experience for residents. Many of the ideas have come from caregivers who took the time to make the experience person-centered vs task-centered. They took the time to adjust the routine to the person's wishes and soon noticed a decrease in complaints.

The CNA's found that allowing flexibility in the time of each person's shower made the task easier, they got to know the person, used the expression "just a wash-up" when there was objection to the word shower. They asked the resident about their family, about pleasant things that they could use to develop a conversation during the bath. They kept the resident covered and warm, allowed them to wash themselves if able and did the hair last in order that they were not cold during the "wash-up".

They found that padding the seat of the shower chair with towels (or adding a soft child's potty-seat) made it more comfortable. Putting a towel over the back and arms and using a basin turned over as a stool to keep the feet from dangling made the chair comfortable. CNA's also found a bed bath using a warm shower blanket and no-rinse soap gave the resident a feeling of warmth, gentleness and comfort.

At first the employees of the facility depicted in the video were concerned they would be cited for not following regulations. They realized the regulations don't specify "shower or tub", they are required to *meet hygiene needs*. They have individualized care, become more efficient and have happier residents. Change is needed and expected. Wouldn't it be exciting if surveyors could cite for not instituting a better system?

Talk to your Administrator or DON and ask about this video. Is he/she trying to individualize care? I hope to show this video to our members at a meeting in the very near future.

### National Nursing Assistants' Week: June 9—16, 2005

National Nursing Assistants' Week is a good opportunity to show appreciation for Certified Nursing Assistants and recognize those who have been faithful workers. Some suggestions are:

- Write a letter of praise and ask that it be included in her/his file.
  - Give a gift of flowers or food.

*Just a simple gesture will be adequate.  
Your appreciation is what counts!*



## *Charitable Transfers at Death* Explained by Dr. David Moore

By Nancy Johnson

A very informative presentation of estate planning with the emphasis on charitable giving was presented by W. David Moore, PhD., CFP at the April meeting of AANHR.

At death, a person's assets may be distributed in three ways:

1) as set forth by law. This occurs, for example, when there is joint ownership of property with the right of survivorship. If a couple jointly owns property; i.e., puts both names on the deeds to their property, then that property continues to be owned by the surviving spouse when death occurs. Probate is not necessary. It is not possible to leave a gift to a charity by this method.

2) by contract. Examples of contracts that transfer money or assets at death are the proceeds of life insurance, death benefits from retirement plans, pre- and post-nuptial agreements, and trusts. A gift to charity can be made by designating the charity as a beneficiary of these instruments. There are many forms these contracts may take. One of the

nicest is a charitable gift annuity, in which the donor gets an income tax deduction for the gift, the donor(s) is paid an income for as long as he (they) lives from the interest on the gift, and at his (their) death(s) the charity receives the gift outright. Trusts may also be set up to benefit chosen charities. No court oversight or action is necessary to enact the provisions of a contract.

3) in a will. Probably the most familiar way of leaving money to a charity is by making a bequest in a will. Wills, however, must be probated and the dispersal of funds is overseen by a court. This involves oversight by an outsider and takes time. Probate proceedings may last months or even years. If a person dies and there is no will (and assets are owned which do not otherwise pass by law or contract) the state steps in and disperses property as the law directs, which may not be to the decedent's wishes. For instance, the majority of the assets may go to children, leaving a widow in financial need. It is very important to be as specific as possible about bequests. Names of non-profit

organizations may be very similar or may even change over the years, which may make it difficult to ascertain to whom the gift was intended.

There are different types of charitable gifts. The outright gift, such as a specific sum, is simple and unambiguous. It provides immediate one-time support. Or one may give an endowment, which provides on-going perpetual support. In an endowment, the original gift is invested and the proceeds of the investment are dispersed monthly or annually. To make an endowment worthwhile, the original gift needs to be a sizeable sum (at least \$10,000) and the details of the administration of the fund need to be clearly spelled out.

If planning to make a sizeable donation or bequest to a favorite charity, one really needs to consult with the charity and with his/her financial planner or other financial expert who can explain the various methods of giving and the risks and benefits of each.

### AANHR Special Thanks

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

1. **Darren O'quinn**, of The Law Offices of Darren O'Quinn for assistance in the publication of this newsletter, meeting rooms, lunches and numerous other helps to AANHR.
2. **Brian Reddick** and Bob Edwards of Wilkes and McHugh for the generous donation toward the publication costs of this newsletter.
3. **Jack Wagoner** for keeping AANHR supplied with copies of the book, DANGER ZONE.
4. **David Couch** of Grayson and Grayson, PA, for employing Brent Birch of One6media, LLC to do AANHR's new website design.
5. **First Assembly of God** in North Little Rock for providing a meeting room free of charge.
6. **Clark Mason** of Hare, Wynn, Newell & Newton for financial and promotional support over the years.

## Review: 2005 Legislative Session's Effect on Nursing Home Care from AANHR's Standpoint

By Nancy Johnson

The recent legislative session resulted in one potential step forward in nursing home care, several dangerous steps backward, and an object lesson in how good intentions can go awry.

We consider that the session handed nursing home residents two major defeats. The first was debated and passed before we were even aware of it. This is **Act 680** (SB386) which allows old sick prisoners to be transferred from prisons to "community housing" including nursing homes. The bill makes no provision for notification of other residents or the public when a convict is transferred to a nursing home. And, it appears, such a resident would remain under the authority of the Department of Corrections, not the Office of Long Term Care. AANHR is very concerned about the potential for harm to other residents of such transfers.

Major defeat #2 was passage of the medication aides bill (SB424), now **Act 1423**. In spite of fierce opposition from the state associations of Registered Nurses, LPNs, and advocates for nursing home residents,

CNAs will now be able to pass medications in nursing homes after completing an additional 100-hour course. To be eligible for the course the aide must have worked for at least one year after being certified. Proponents for the bill state that this will alleviate the shortage of nurses, relieve charge nurses for "more important duties", and add nursing staff. We believe that none of these reasons will prove to be true and that the giving of medications by minimally trained persons poses a real threat to residents.

The one good thing that occurred was the passage of **Act 1184** (HB1442) which increases the minimum training requirement for CNAs from 75 hours to 90 hours. The additional 15 hours of training will be devoted to the ramifications of Alzheimer's Disease and related dementias. Advocates for nursing home residents were highly supportive of this bill. AANHR is happy it was passed because we want CNAs to be as well trained as possible but we wish the requirement could have been much higher. We want people to realize that 90 hours amounts to less than 12 days of training, which of course is still most insufficient.

A bill (HB2577), now **Act 1411**, clarifies the definition of "direct care staff". Now only licensed nurses and CNAs can be counted as direct care staff which is a good thing.

What happened to **HB 1392**, the surveillance camera bill, is an object lesson in how good intentions can be twisted until the finished product has the opposite effect of those originally intended. Advocates for nursing home residents worked with Rep. Stephen Bright in the drafting of this bill and enthusiastically supported it. However, after offering the same courtesy to the nursing home industry, and meeting their demands, the bill was changed to give all the protections to the nursing facility. In addition to prohibiting the use of taped footage as evidence in a trial, it imposed severe restrictions on handling of the tape and reporting of suspected abuse. Mercifully, this bill failed to pass the Senate.

### 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. A social worker or nurse will be available to answer questions and address concerns. 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://www.medicaid.state.ar.us/general/units/oltc/index.htm>. **You should also report complaints to the Attorney General's office!**

The Arkansas Attorney General's office has a toll free 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 in Conway; (501) 884-6728 in Fairfield Bay; or (501) 225-4082 in Little Rock. For instructions on how to file a complaint, visit our website at [www.aanhr.org](http://www.aanhr.org) or e-mail us at [info@aanhr.org](mailto:info@aanhr.org).

Your local Ombudsman's number should be posted in the nursing home. You may also call your local Area Agency on Aging to secure the name and phone number of the Ombudsman.

### HELPFUL/IMPORTANT NUMBERS

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**You should also report complaints to the Attorney General's office! (OLTC no longer alerts that office to suspected criminal activity.)**

### Respecting Residents with an Emerald Ribbon\*

By Savanna Knight, Certified Nursing Assistant

Have you ever sat down and let an elder spill their heart to you? Have you ever listened to what they said? I'm sure if you are reading this article then you have. I'm sure that some of their stories and their emotions touch your heart and reach out to your soul. When these residents tell you their life stories, you can't help but respect them for the lives they have lived, the experience they are blessed with, and the people they have influenced. Some people though, are not fortunate enough to have heard these stories or to have met these people. They don't understand that nursing home residents are our own source of living history; therefore some may find it difficult to treat them with the utmost respect. With AANHR, we can all pull together and achieve the necessary strength

in numbers to gain some of the lost respect back for Arkansas' seniors.

Some tend to forget about the nursing home residents. They are secluded from their surroundings in a special home. They aren't seen while in the mall, or at church on Sundays, and especially not in high schools! As an advocate for such valuable resources, I believe we should let an emerald ribbon symbolize nursing home residents. Breast cancer awareness is raised through a pink ribbon. We show our support for the troops with a yellow ribbon. What do we have to show for the 18,000 nursing home residents living in Arkansas? I say an emerald ribbon.

Emerald is the color symbolizing hope, new growth, and eternal life. It has a brilliance not found in most colors. Seen first

in Romanesque murals, emerald is the one color that withstood almost anything.

Through the duration of time, it can still be seen. It also has a calming, healing affect when worn and is proven to be the least fatiguing color on the eyes. I for one can say that the memories I have volunteering in nursing homes can withstand anything through the duration of time. I know that it is calming and healing to have someone to talk to and to respect you. The healing color of emerald is perfect for this particular cause. We need something to represent our elderly, and the emerald ribbon is a perfect solution!

*\* At the CNA Luncheon on June 13 green ribbons will be distributed to be worn in honor of nursing home residents.*

#### ***Glimpse into the call of duty—Nursing Home Employee's Letter to the Editor\****

In light of all of the negativity surrounding nursing homes, I would like to provide a glimpse into the day of a nursing home employee.

We get to share in the good times, like celebrating birthdays, which often run into the triple digits. We get to sit back and watch the loving married couple continue their love into the next stage of their lives. Holding hands as they walk down the hall to get their morning cup of coffee, they are happy just to be able to watch the sun rise one more morning. We get to hear stories of the trials and tribulations of years gone by.

We also share in the not so good times. We stand by and hold the hand of the lady who struggles to take each breath, not knowing when she will take her last one. It is holding the hand of the grieving son or daughter who so diligently stands watch at a loved one's side to ensure that the loved one is not alone when this transition takes place. It is sharing a tear with the family as they say good-bye to their loved one, whom we also loved.

We become their family. They accept us into their lives when there is no one else for them to turn to. Instead of focusing on the few who have truly committed horrendous acts upon these precious people in their home, let's focus on the nursing home employees who work above and beyond the call of duty.

**Brooke Webb**  
England

**\*Reprinted with permission from Arkansas Democrat Gazette**

## Oldest Family Council in Arkansas - A Historical Perspective

The Family Council of Little Rock Nursing Center was originally formed in 1982. This was the very first Family Council in the State of Arkansas. In 1987 Human Services of Arkansas, Incorporated Quapaw Family Council at Little Rock Nursing Center (Now Quapaw Quarter Nursing Center). The mission was to focus attention on problems of abuse and neglect and to promote a unified concern for the care and well-being of all residents. The councils' goals included *stimulating the residents' social interest through individual contact and group functions, encourage employee performance excellence through respect and appreciation, and foster goodwill toward all service providers*. Their primary function was to raise money to purchase clothing; personal aids (wheelchairs and walkers); dental care, beauty and barber shop products; and other items needed by residents that are not provided by the facility or required by state or federal regulations. To meet those ends, they solicited donations of money and property from private individuals and businesses. They also raised money to pay for prescription drugs not covered by Medicaid.

The original members were composed of area residents, representatives of human and social service agencies, state and local elected officials, religious and civic representatives, and organizations as well as relatives of the residents. These 25-30 members provided moral support and grief counseling for one another, and hosted seminars on legal aspects of guardianship and estate planning, etc. The activities and events included sharing special skills and crafts; sewing, mending, mixing and matching garments; reading and writing; facial care, cleaning fingernails; cleaning eyeglasses; polishing shoes; transporting residents to doctor appointments and functions away from the facility; and hosting "Coffee and News". They worked out a staggered schedule to ensure that Family Council members were patrolling the nursing home during all shifts to supervise the care of every resident.

*In 1988, under the leadership of Mavis Posey, the goal of Incorporated Family Council was to help organize Family Councils in at least 10 central Arkansas nursing homes and then branch out over the state. In 1988 and 1989 numerous presentations were given and the*

*organization was recognized by the then, Attorney General, Steve Clark, for leadership in consumer education, protection, and help in efforts to clean up Arkansas nursing homes.*

*From 1986 to 2001 the Family Council was recognized by Senator Dale Bumpers, State Representative Dr. William H. Townsend, Governor Bill Clinton, and Attorney General Steve Clark for the statewide development of family councils to assist in the improvement of nursing homes in the state. Mrs. Mavis Posey coined the phrase, 'Making Nursing Homes Better...ONE MAY BE YOUR NEXT HOME'.*

*Presently, as a result of the efforts of the original Family Council, many Family Councils have been developed statewide. Several of the original members are still active with Quapaw Family Council. Mrs. Posey remains as President Emeritus and has passed the torch to other Presidents who rely on her and the experience and wisdom of the original members as they deal with new nursing home legislation and policy as it relates to ensuring quality care of residents of Quapaw Quarter Nursing Center.*

## Arkansas Long Term Care Ombudsman Program prevails on behalf of British born nursing home resident\*

By Kathie Gately

**T**he Arkansas Long Term Care Ombudsman Program achieves significant accomplishments everyday on behalf of nursing home residents. The Regional Long Term Care Ombudsmen positively impact our nursing home residents through addressing Quality of Life, Quality of Care and Resident Rights issues. However, it is not often that the Ombudsman Program is given an opportunity to assist a nursing home resident to return to their native country.

Ms. Pamela Arnold was born in England and became a Registered Nurse along with her twin sister. Both served in the British Nurses army during WWII. They moved to Canada, New Zealand, Australia and eventually to the United States of America where she worked in several hospitals during the past 20 years. Ms. Arnold and her sister were both very dedicated nurses in each country in which they served. Ms. Arnold never married and lost her twin sister about five years ago.

Ms. Arnold's health problems have increased over time resulting in the need for her to undergo a below the knee amputation. She now requires the services of a twenty-four hour nursing facility located in Little Rock, Arkansas. It was at the nursing home facility that Ms. Arnold came in contact with the Ombudsman Program. Seeing her life savings being depleted rapidly and feeling very lonely, she asked the Regional Ombudsman for help in arranging her return to her native land.

Ombudsmen are very familiar with assisting residents desiring to transfer from a nursing home to a nursing home within the state and even at times to a facility in another state. Transferring Ms. Arnold to a nursing home in another country however, proved to be quite a challenge.

The Regional Ombudsman in cooperation with the Office of the State Long Term Care Ombudsman assisted with locating an appropriate nursing home facility in England, with contacting British social services and securing funding for her journey.

Over a period of eight months, the Office of the State Long Term Care Ombudsman along with the Regional Ombudsman spent numerous hours corresponding with the British Social Services, British Red Cross, private donors and recruiting a Registered Nurse to volunteer as her companion.

To say that this was a small task would definitely be an understatement. There of course were disappointments and obstacles during those months. Yet, the end results were magnificent. As Ms. Arnold was assisted by Delta Airline personal, she leaned down and with a tearful, British accent stated, "Thank you for everything that you have done and I will never forget." Ms. Arnold arrived safely to her homeland on March 23, 2005.

The Ombudsman Program and Ms. Arnold are grateful to a special anonymous donor who contributed 92,000 frequent flyer miles and a financial contribution. We are also grateful for the financial contributions made by the following individuals: an additional anonymous donor; Senator Randy Laverty; Jon Fitch; and Jim Medley, CEO/Pres. of Western Arkansas Area Agency on Aging.

Last but absolutely not least we are especially grateful to Ms. Virginia Vollmer, Ph.d, who gave of herself. Virginia is a Volunteer with the Arkansas Hospice and did not hesitate to volunteer her nursing skills and time to be the traveling companion for Ms. Arnold. Virginia instantly began visiting Ms. Arnold at the nursing home not only to understand her medical needs, but to build a trusting relationship. Ms. Arnold could not have asked for a better companion.



Photo by Ron Tatus

### Herman Estaun, Virginia Vollmer and Kathie Gately plan the complicated transfer of a Little Rock nursing home resident back to her native England.

made a difference for that ONE."

The Regional Ombudsman may be contacted in your area through an Area Agency on Aging or you may go onto the Arkansas Ombudsman website at [www.arombudsman.com](http://www.arombudsman.com).

Herman Estaun, Regional Ombudsman is employed by the Central Arkansas Area Agency of Arkansas – CARELINK.

The Office of the State Long Term Care Ombudsman is a part of the Division of Aging & Adult Services which is housed under the Department of Human Services.

\*Reprinted with permission: *Aging Arkansas*, March 2005

**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 January 1, 2005. If you have not paid your dues since August 2004, 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 the 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 Little Rock, AR 72221-2421

**AANHR Officers and Board Members**

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

**AANHR Meeting Directions**  
(see map below)

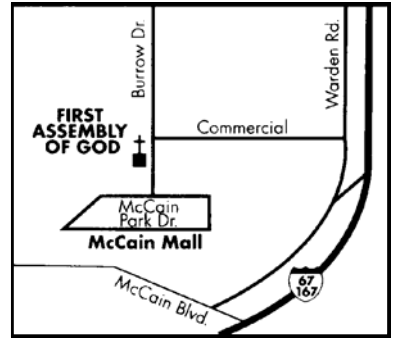
**First Assembly of God Church, 4501  
Burrow Road, North Little Rock, Arkansas**

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 113 (immediately inside the entrance door).

**MAP TO MEETING**



Arkansas Advocates For  
Nursing Home Residents  
P.O.Box 22421 Little Rock, AR 72221

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