



AANHR

Arkansas Advocates for Nursing Home Residents

PROTECTING NURSING HOME RESIDENTS
March 2009

Conway (501) 450-9619 · Fairfield Bay (501) 884-6728
Conway (501) 450-7405

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

Next Meeting March 9

MEETING PLACE:

First Assembly of God Church
4501 Burrow Road
North Little Rock
Directions to church on back of Newsletter.

10:00 a.m.
Meeting for members, family and friends of residents (Closed to persons representing the nursing home industry).

11:00 a.m.
Public Meeting (see article at right)



Melissa Simpson

Simpson To Speak Monday, March 9, 2009 11:00 AM

Melissa Simpson, Director SHIIP (Senior Health Insurance Information Program) will speak at the March meeting of AANHR, Monday, March 9, 2009, about the services provided through this new program and answer questions regarding Medicare, Medicare Part D or Medicare Supplemental Insurance plans available in Arkansas.

Ms. Simpson has been the director of the Senior Health Insurance Information Program (SHIIP) since June 2007. SHIIP is a Medicare education and information program of the Arkansas Insurance Department and the Centers for Medicare and Medicaid Services. The SHIIP program provides free one-on-one counseling regarding Medicare health coverage, supplemental insurance, long-term care insurance, advantage plans, drugs plans and senior referral services. SHIIP also provides educational programs and information to individuals of all ages with Medicare

Prior to her current position, Ms. Simpson worked as the development director with Big Brothers Big Sisters of Central Arkansas and volunteer center director with the Heart of Arkansas United Way. She received her Bachelors degree from the University of Arkansas at Fayetteville and a Masters of Public Administration from the University of Arkansas at Little Rock. She resides in Sherwood.

DID YOU KNOW?
The AANHR Newsletter Is Available Online At aanhr.org


AANHR Videos for Loan



Nursing Home Care Plans
The Importance of Nursing Home Family Councils
Bathing Without a Battle



From the President's Desk . . . Martha Deaver

 Springtime, a time for new beginnings is upon us. If your nursing home does not currently have a Family Council, why not take the initiative to begin one. The first ingredient you must have are interested persons who realize the value of promoting the greater good as a means to an end. After all, actions that result in better care of all the residents at your nursing home benefit your resident family member as well.

If you need help with starting a family council, AANHR has several board members who are willing to meet with you at your nursing home to advise you on the process. Please feel free to call one of the numbers listed on the front of this newsletter to ask for help or advice.

Begin by setting a meeting time and place, then spreading the word by posting announcements on facility entrance doors and talking to acquaintances as you encounter them visiting their family members at the facility. The publication, "The Family Council Guide" located at www.medicaid.state.ar.us is a guide to organizing and maintaining an effective family council.

Family Councils play an important role in promoting good care for residents of nursing homes. It is the right of family members to have a family council and the facility must support it. Federal law requires all nursing homes that receive Medicaid or Medicare reimbursement to promote and support the right of families to organize and pursue positive change for the residents.

NCCNHR Conferences usually provide break-out meetings focused on Family Councils. At one such meeting a family member shared this observation about these groups.

"Susan's 58 year old father had suffered a stroke and after moving him into a facility, she realized that there was no Family Council and likened such an organization to the PTA at a local school. "Would you send your child to a school that did not have a Parent Teacher Organization?" She used that approach to enlist the help of the first members of her core group to establish the Council. They got advice from other Councils.

Her message is to let everyone take on a piece of the responsibility. She has a co-chair and a volunteer to keep minutes. Their minutes are kept simple and resident focused. They arrange for speakers, have membership drives with cookies and juice and pass out flyers in the lobby. There have been days Susan asks, "Who made this my job?", yet she continues to work to improve the care in the facility. The council members keep logs on each others' loved ones and they continue to document, document, and document.

She argued that the care of these residents was not about mediocrity – it was about excellence. She advocates choosing and defining winnable issues -- taking on one issue at a time. Her group acknowledges improvements the facility makes and employees doing a good job. They have developed a "working relationship" with the administrator by coming up with a strategy where they speak with surveyors while they are there and follow up with a conference call to the administrator. One facility has tried occasionally inviting employees to take part in the meeting and has them report on what is going on in the facility. Then council members can ask questions and discuss areas that may be of concern. They point out that visitors see things differently than employees do."

When you stay involved in the Family Council at a nursing home, you become a first-hand grassroots representative. You are able to speak with others about issues of care in nursing homes. We can make it better, but it will take all of us working together. If you do not have a family council in the facility you visit, ask the Ombudsman or contact an AANHR member to help you get one started.

If you would like your family council members to be added to our AANHR newsletter mailing list, please call one of the numbers on the front of this newsletter or send your name and address in an email to marthadeaver@sbglobal.net.



Aid to Elderly Victims of Crime is Available

AANHHR members at the monthly meeting on February 9th were privileged to hear of the work of a program called *Healing Place Ministries*. The Rev. Edna Morgan is co-founder of this program, whose purpose is to help elderly crime victims claim their legal rights and to advocate on their behalf.

Just as nursing home residents and their family members often do not know of their rights or the proper avenues for correction of problems that arise, so too victims of crime often are not aware of the resources available to them. This is especially true for elderly victims. Rev. Mor-

gan and her staff of trained volunteers hope to fill this void.

The first step in helping elderly victims is to become knowledgeable about the resources available and to work closely with all the agencies available. The second, because the elderly are reticent to admit to victimization, is proper training of volunteers to listen carefully for underlying tension which may not be verbally expressed without careful questioning. Often it is only after establishing rapport with the person that he or she will trust anyone enough to admit that a crime has taken place.

This program is based in Pine Bluff but its services are available state-wide and can be a valuable resource when a crime has taken place. They are also available to speak to Family Councils and to train workers and visitors in active listening techniques.

Healing Place Ministries

200 West 6th, Pine Bluff, Arkansas 71601

Phone: 870-535-0101 Fax: 870-535-0103 Email: healingplacem@sbcglobal.net

Local Support Agencies Police Emergencies Dial 911

State & Local Victim Services

AR Crime Victims Reparations Board (Attorney General)	501-682-1020
LR Victim Services (LRPD)	501-244-5482
Victim Services (NLRPD)	501-812-2560
Pulaski Co. Clerk's Domestic Relations	501-340-8411
Women & Children First Court Advocate	501-372-5630
Prosecutor's Victim/Witness Program	501-340-8000
VINE Notification Service	800-510-0415

Hotlines

Adult Abuse Hotline	800-482-8049
Child Abuse Hotline	800-482-5964
Domestic Violence Hotline	800-269-4668
Women & Children First Hotline	800-332-4443

Domestic Violence Shelters

Dorcas House	501-374-4022
Women & Children First	501-376-3219

Other Support Services

Adult Protective Services	501-682-8491
Bereaved Parents of Central AR	501-944-9007
Center for Healing Hearts and Spirits	501-372-2150
Coalition Against Domestic Violence	501-907-5612
Coalition Against Sexual Assault	866-632-2272
Commission On Child Abuse. Rape & Domestic Violence	501-661-7975
Healing Place Ministries	501-454-2995
Mothers Against Drunk Driving (MADD)	501-376-6100
Parents of Murdered Children (POMC)	501-375-7662
Rape Crisis	501-801-2700
Safe Places	501-374-7233
Partners for Inclusive Communities (Disabilities)	501-682-9900

Credit Fraud Alert

Equifax	800-525-6285
Experian	888-397-3742
TransUnion	800-680-7289

NCCNHR The national consumer voice for quality long-term care 1828 L Street, NW, Suite 801 Norma H. Atteberry, President Washington, DC 20036 Sarah F. Wells, Executive Director 202 332-2275 Fax 202 332-2949 www.nccnhr.org *NCCNHR (formerly the National Citizens' Coalition for Nursing Home Reform) is a nonprofit membership organization founded in 1975 by Elma L. Holder to protect the rights, safety, and dignity of America's long-term care residents.* (Article reprinted from NCCNHR.org)

NCCNHR Member Groups Approve 2008 Resolutions

NCCNHR consumer group members have overwhelmingly approved the following resolutions, which were adopted at the NCCNHR Membership Meeting on October 16, 2008, in Indianapolis. NCCNHR and its members use resolutions in promulgating and advocating for national and state policies to improve the quality of care, quality of life, and rights of long-term care recipients.

Resolution #1

Equal Rights for Medicaid Beneficiaries in Community-Based Settings

WHEREAS CMS and the Administration on Aging are promoting community-based care options through a variety of programs such as "Choices for Independence," "Money Follows the Person," and "Project 20/20," which promote Medicaid-funded community-based care options, and

WHEREAS consumers often prefer these community-based care options, including facility-based care, such as assisted living, and

WHEREAS states that have a long history of providing Medicaid waiver community-based care options are finding that waivers allow for discrimination against consumers of community-based care options, and that in particular there are no protections for residents of assisted living when an assisted living facility decides to terminate its Medicaid contract,

NOW THEREFORE BE IT RESOLVED that Congress require the same rights and benefits to persons who choose community based facility settings (often known as Assisted Living, Board and Care, or Adult Family/Foster Homes) equal to nursing home entitlements under Title XIX of the Social Security Act (Medicaid).

Resolution #2

Non-payment for Preventable Injuries and Illnesses in Nursing Homes

WHEREAS the US Congress has recently enacted legislation that precludes hospitals from receiving reimbursement from the Medicare program for specific preventable injuries or illnesses and, whereas the majority of skilled nursing home care is paid for by the Medicare and Medicaid programs and,

WHEREAS many nursing home residents suffer from preventable injuries and illnesses such as hip fractures, bed sores, malnutrition, dehydration, contractures, and/or infections resulting from poor care or lack of appropriate care provided by the nursing home, and

WHEREAS a dually eligible resident who suffers from preventable injuries or illnesses may have to be hospitalized, and may return to the nursing home qualified for a higher payment under Medicare, the current reimbursement system provides economic incentives to nursing homes either to provide poor care, or to fail to provide good care, which results in preventable injuries or illness to residents,

NOW THEREFORE BE IT RESOLVED that the federal government undertake a study of the cost of preventable injuries and illness to the Medicare program, the Medicaid program, and to the victims of such situations, and develop appropriate legislation to preclude unnecessary cost and suffering from preventable injuries and illnesses in nursing homes; **BE IT FURTHER RESOLVED** that nursing homes be required to notify their state licensing agency of the occurrence of preventable injuries and illnesses, and that the number and type of such preventable injuries and illnesses be aggregated and reported to the public, specific to the nursing homes, on a regular basis.

Resolution #3

Refunds for Care and Services Not Provided to Nursing Home Residents

WHEREAS the majority of skilled nursing home care is paid for by the Medicare and Medicaid programs, and

WHEREAS nursing homes often fail to provide the care and services required by the residents in their care, and

WHEREAS nursing home admissions are elective and at the discretion of the nursing home, and

WHEREAS nursing homes should not be allowed to economically prosper when failing to provide the care and services to residents they are paid to care for,

NOW THEREFORE BE IT RESOLVED that the U.S. Congress and state legislatures enact legislation that allows the party responsible for payment for a nursing home resident's care (be it Medicare, Medicaid, insurance, private pay, or other payer) have the right to receive a refund for care and services identified in the resident's care plan that is either not provided or not competently provided, resulting in resident injury, illness, or lack of dignity or enjoyment of life.

Resolution #4

Requiring Owners of Nursing Homes to Be Responsible for the Licensees' Actions

WHEREAS states require nursing home operators to be licensed in the state in which they operate, and
WHEREAS nursing home buildings are required to meet certain building and environmental requirements, and
WHEREAS in the last two decades the nursing home industry has developed complicated legal structures including, among others, separating the owner of the real estate in which the nursing home operates and the entity that operates the nursing home, and
WHEREAS the complex legal structures and layered companies and entities can shield both the assets of these companies and their identities from the public, and
WHEREAS the bifurcation of the building from the operations can have the effect of insulating the property assets when residents are harmed,
NOW THEREFORE BE IT RESOLVED THAT the US Congress and state legislatures enact legislation requiring that both the owner of the real property of a nursing home and the licensee of a nursing home be legally accountable for the quality of care and services provided to the residents.

Resolution #5

Consumer Participation in Informal Dispute Resolution (IDR)

[This resolution was originally passed in 2004 but resubmitted to the membership with an additional provision (underlined) by the Resolutions Committee because of the continuing priority consumers assign to this issue.]

WHEREAS nursing homes that receive Medicare and Medicaid funding are surveyed by the State survey agency at least every 15 months to determine compliance with federal regulations, and
WHEREAS federal regulations provide for an Informal Dispute Resolution (IDR) process so that nursing homes may dispute any deficiencies found during their annual survey, and
WHEREAS this IDR process can result in deficiencies being removed or downgraded, and
WHEREAS the nursing home industry is allowed to have representatives present at the IDR hearings, including their employees, attorneys and representatives of their professional associations, and
WHEREAS nursing home residents, their family members and friends, ombudsmen and advocates are often first-hand observers of conditions in nursing homes that are the subject of deficiencies, and
WHEREAS residents, family members and friends, ombudsmen and advocates are not currently permitted to participate in IDR hearings, AND
WHEREAS currently there is no comparable process for residents, families or advocates to dispute survey findings,
THEREFORE BE IT RESOLVED THAT the Centers for Medicare and Medicaid Services amend its regulations to specify that residents, resident councils, family members and friends, family councils, ombudsmen and advocates have the right and opportunity to participate actively in IDR proceedings, and to be informed as to the time frame and method for doing so.
BE IT FURTHER RESOLVED that CMS should establish a separate and distinct IDR process that can be initiated by residents, family members and friends, ombudsmen, advocates, resident councils or family councils to submit additional evidence and dispute survey findings or the absence of cited deficiencies, including complaint surveys.
BE IT FURTHER RESOLVED that CMS require states to inform families and residents when a facility requests an IDR, and that they inform families and residents of the results of an IDR. Any notification to residents and families pertaining to IDR must be written, must be accessible, and must be written in easily understood language.

(continued on pg. 6)

(continued from pg. 5)

Resolution #6

Protection of Family Councils

[This resolution was passed in 2003. Because of its continued timeliness and importance, the members participating in the Membership Meeting voted to re-offer it.]

WHEREAS the passage of the 1987 Nursing Home Reform Law brought important standards and regulations to “care and services to attain or maintain the highest practicable physical, mental and psychosocial well being;” and

WHEREAS the 1987 Nursing Home Reform Law, following the recommendations of the Institute of Medicine, included for the first time in federal law the right of residents’ families and friends to organize and participate in groups in the facility; and

WHEREAS families and friends of residents need to have opportunities to make and execute meaningful decisions to benefit the residents; and

WHEREAS it is essential for members of the family council to define and control all aspects of a the family council, which can evolve into any number of forms and adopt any combination of functions if they are desired by the members on behalf of the residents; and

WHEREAS a family council can enhance a facility by offering residents and staff the benefits of group problem-solving, enhance facility-resident-staff-family communications,

WHEREAS a successfully implemented family council can provide important advocacy on behalf of the residents of a nursing home

NOW THEREFORE BE IT RESOLVED THAT Congress, the Centers for Medicare and Medicaid Services, Administration on Aging and other federal and state departments and agencies foster and provide incentives for incorporating the philosophy that effective family councils are an important component of quality of care and quality of life for individuals in all applicable long-term care settings with appropriate laws, regulations, initiatives and policies, and enact specific and meaningful penalties for interference with and/or retaliation by the facility, its management or staff towards any resident or family member for participating in a family council.

BE IT FURTHER RESOLVED THAT CMS promulgate and enforce regulations that strengthen the ability of independent family councils to improve the quality of care and life and to provide families the opportunity to make and execute meaningful decisions to benefit the residents.

Join the *Advancing Excellence in America’s Nursing Homes Campaign* as a Consumer to make a difference for resident-directed care.



Name: _____

Email Address: _____

Address: _____

I would like to be included on the Arkansas LANE electronic mailing list to receive updates on educational opportunities and events.

I do not wish to be included at this time.



RETURN TO:
Arkansas LANE
Advancing Excellence in America’s Nursing Homes

4301 West Markham Slot 748
Little Rock, Arkansas 72205
Phone: 501-686-7984
Fax: 501-686-8350

Email: SRBennett@uams.edu
LubinSandraA@uams.edu
www.arkansaslane.org
www.nhqualitycampaign.org

“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

AANHR Special Thanks

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

- Hare Wynn Newell & Newton for financial and promotional support over the years.
- Todd Griffin of The Law Offices of Todd Griffin, PLLC, for advising AANHR's Board of Directors.
- Jack Waggoner and Gene Ludwig for keeping AANHR supplied with copies of the book *DANGER ZONE*.
- Brandon Clark of the Law Offices of Brandon Clark, PLLC, for ongoing support of AANHR activities.
- David Couch of The Law Offices of David A. Couch, PLLC, PA, for employing Brent Birch of One6 Media, LLC, to create and maintain AANHR's website.
- Darren O'Quinn of The Law Offices of Darren O'Quinn, PLLC, for assistance in the publication of this newsletter, meeting rooms, lunches and donations.
- First Assembly of God Church in North Little Rock for providing AANHR a meeting room.
- Bob Davidson of the Law Offices Of Bob Davidson, PLLC, for advising AANHR's Board of Directors.
- Chad Trammel and Don Sorey of The Law Offices of Nix, Patterson and Roach for gift memorials and financial support.
- Brian Reddick and Bob Edwards of Wilkes and McHugh for its financial assistance in the printing and mailing of AANHR's newsletter and other publications as well as financing the attendance of two board members to the annual NCCNHR conference.
- Eric Wewers of The Law Offices of Eric Wewers, PLLC, for advising AANHR's Board of Directors.

AANHR Officers and Board Members

- President** - Martha Deaver, Conway
- Vice President** - Nancy Johnson, Fairfield Bay
- Program Chairman** - Nancy Allison, Conway
- Secretary** - Betty Buckta, Judsonia
- Treasurer** - Nancy Johnson, Fairfield Bay
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- Honorary Board Members:** Jim and Faye Sandstrum, Searcy.
- Newsletter Editors:** Martha & Ernie Blount, 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:

<https://www.medicaid.state.ar.us/InternetSolution/General/units/oltc/index.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;

(501) 884 - 6728 in Fairfield Bay;

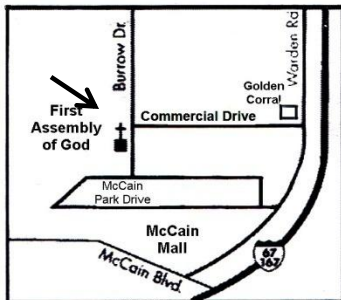
Visit our website at www.aanhr.org or e-mail us at Info@aanhr.org

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.

Address Service Requested

Place label here



**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, 2009.

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.
- \$4 per student or CNA membership.
- Waive dues because of financial hardship.

Please make checks payable to: AANHR and mail to
135 Hillside Dr #112 Fairfield Bay AR 72088-4026

**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 #1 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.