

North Dakota Department of Health  
Division of Health Facilities

LONG TERM CARE ADVISORY  
COMMITTEE MEETING MINUTES

June 4, 2012  
10:00 a.m. – 3:00 p.m.

Committee Members Present:

Shelly Peterson, Executive Director, ND Long Term Care Association  
Gregory Salwei, Chairman of the NDLTC Association, CEO Wishek Home for the Aged  
Bev Herman, Education Director, ND Long Term Care Association  
Dr. Bruce Hetland, Bismarck Medical Director, Nursing Home Medical Directors Association  
Joan Ehrhardt, State LTC Ombudsman, ND Department of Human Services  
Darleen Bartz, Chief, Health Resources Section, ND Department of Health  
Lucille Rostad, Program Manager, Division of Health Facilities, ND Department of Health  
Barb Groutt, North Dakota Health Care Review, Inc.  
Michelle Lauckner, North Dakota Health Care Review, Inc.  
Rocksanne Peterson, Recorder, Division of Health Facilities, ND Department of Health  
Monte Engel, Division of Life Safety & Construction, ND Department of Health

Also Present:

Denise Nilsen, Student, University of Mary  
Julie Thrailkill, North Dakota Health Care Review, Inc.

Committee Members Absent:

Dave Remillard, Public Member, Minot  
Arvy Smith, Deputy State Health Officer, ND Department of Health  
Representative Gary Kreidt, ND House of Representatives (New Salem)  
Randal Albrecht, Chair, ND Board of Examiners for Nursing Home Administrators  
Bruce Pritschet, Director, Division of Health Facilities, ND Department of Health  
Karen Tescher, Assistant Director, LTC Continuum, DHS  
Carole Watrel, AARP

Welcome

A meeting of the Long Term Care Advisory Committee was called to order at 10:10 a.m. on June 4, 2012. The meeting was held in the AV 212 Conference Room at the State Capitol. Darleen Bartz welcomed everyone to the meeting and introductions followed.

Public Comment

No comments.

### Approval of Minutes

Two changes to the December 06, 2011 Long Term Care Advisory Committee minutes were identified. Joan Ehrhardt made a motion to approve the minutes, Carol Watrel second the motion. Motion carried.

### Standing Reports & Legislative Update

Legislative Update: No report was given.

North Dakota Long Term Care Association: Shelly Peterson reported.

- Shelly reported several facilities had administrator changes. Karen Terry, Wellington; Paul Schroeder, Good Samaritan – Mohall; Stuart Schneider, Lutheran Home of the Good Shepherd, New Rockford; Bruce Bowersox, Towner County Living Center, Cando; Jo Rudd, Richardton Health Center; Tim Olson, Kensington, Williston; Tanya Rickson, Country House, Dickinson; Mountrail Bethel Home, Stanley; Patty Dirk, Manor Care Health Services, Fargo; Maren Gemar, Sheyenne Care Center/TCU, West Fargo; Jeffery Lingerfelt, Heart of America Nursing Facility, Rugby; Tony Keelin, Rosewood on Broadway, Fargo; Brandon Eisenbies, St. Rose Care Center, LaMoure; Jordan Shipley, Rock of Ages, Jamestown; Jac McTaggart, Hillsboro Medical Center Nursing Facility, Jerry Lepp, Ashley Medical Center Nursing Facility; and Ashley Ylitalo, Good Samaritan Society – Arthur. Karen Boulden is retiring from St. Luke’s Nursing Home, Dickinson; Dennis Goebel will be the new administrator. Rod Alme, Lutheran Sunset Home, Grafton and Bob Owens, Elm Crest Manor, New Salem will also be retiring.
- The association recently held a regional meeting in Minot. They discussed looking at electronic medical record (EMR) collaboration with the North Dakota Health Care Review (NDHCR). Shelly is hopeful that a few of the facilities will sign up. EMR would be a big change for the facilities.
- A committee has been formed to look into re-hospitalizations as the issue is more than hospital related. Seventeen members on the committee have signed data share agreements. The Long Term Care Association is keep a log on all hospitalizations; the data will be submitted to NDHCR.
- The association continues to evaluate the legislative issues such as wage increases, support for another Gero-Psych facility, Basic Care and Long Term Care moratoriums.
- Upcoming conferences/presentations:
  - Basic Care Conference: June 20, 2012 – Seven Seas, Mandan, ND.
  - Medicare University: Presented by Ron Orth, June 26-28, 2012 – Ramkota Hotel, Bismarck, ND.
  - Quality of Care Series: July 11, 2012 – Ramada Plaza Suites, Fargo, ND  
July 12, 2012 – Ramkota Hotel, Bismarck, ND
- Bev Herman spoke about the “What if. . . I am the Resident?” project. The purpose of the project is to gain insight as to what a resident actually experiences by living in a long term care facility. Staff members over the age of 18 from Assisted Living, Basic Care and Nursing Facilities can participate. Participants become a resident in the facility they work at for four consecutive days and nights (96 hours). They will be asked to complete a questionnaire before and after their stay on what their feelings are about the care their facility

provides. The results of the project will be reviewed at the fall conference. It was felt that it will be a tremendous learning experience and a very exciting and worthwhile project.

North Dakota Healthcare Review, Inc.: Barb Groutt.

- Michelle Lauckner continues to support nine facilities with their quality improvement for pressure ulcers and/or restraints. NDHCRI is working on a collaborative effort with nursing homes and wound nurses from Sanford health to reduce the number of pressure ulcers.
- Phase 2 initiative is slow to start. NDHCRI has not heard from CMS as to what they will be recruiting for. They do know it is something with the Advancing Excellence in America's Nursing Homes.
- MDS 3.0 data is finally available. Participants finally understand some of the issues.
- Continue to work on care transitions with several counties, communities and facilities to reduce hospital re-admissions.
- Barb spoke about HRSA having a meeting sometime in July 2012 regarding care transitions and hospital re-admissions in ND in the Grand Forks area. Dr. Bruce Hetland reported that there would be a presentation regarding care transitions at Medical Directors Association and American College's conference in October 2012.
- NDHCRI started working on care transitions with Darleen Bartz and Shelly Peterson, which has been a nice fit. Since CMS has made care transitions a priority, the NDHCRI has been doing what they can. The healthcare system is pretty fragments and could be better. The committee discussed what the real issues are and felt that every community has different issues. Shelly felt it was important that patients have written instructions when they leave the clinic. Often the patient is confused or didn't understand the physician or nurse's instructions. Denise Nilsen spoke about what MedCenter One is doing for the patient in regards to their care transitions.
- Barb thanked Shelly and Bev for presenting the care giver awards at their conference in May.
- NDHCRI will be hosting a quality of care forum on August, 15, 2012 in Bismarck, ND. Information regarding the forum will be sent out.
- CMS had wanted to centralize the function of the Beneficiary Care Plan but it did not work out. The Beneficiary Care Plan is now back to the state level. The Beneficiary Care Plan is for family members to make sure the patient or resident is getting quality of care. Legislation was passed that impacted the QIO and the Secretary of Health and Human Services the flexibility to outsource issues to the region versus the state organizations. Barb would like it to stay with the state so the patient or resident would get the services and attention they deserve.
- Rolette Community Care Center has come off as a Special Focus Facility and the Baptist Home was added as a Special Focus Facility. Special Focus Facilities are surveyed every 6 months to keep up on the issues that keep getting deficiencies. A facility can be terminated if the issues continue.

State Ombudsman: Joan Ehrhardt reported.

- Pushing for a July 1, 2012 JDQ and trying to maintain classification across the board.
- Aging Services is still trying to get additional ombudsman staff.
- Discussed Protection & Advocacy (P&A) issues in a facility. Health Facilities received a complaint but it was not substantiated. The complainant has not been satisfied and has contacted Aging Services several times. The resident/patient of the original complaint has since died. It is felt that once an individual dies there is no reason for Aging Services to be

involved. It was recommended to have Teresa Larsen attend the next meeting to discuss the issue and possibly set up a meeting to discuss the complaint investigation process and how all entities can work together.

- The National Ombudsman Conference was held in April. The Administration of Aging Services, Developmental Disabilities, and Protection & Advocacy have been consolidated into one federal agency.

Division of Health Facilities: Darleen Bartz reported.

- Darleen spoke about recent concerns that Health Facilities surveyors had encountered during a recent survey. An administrative staff person had refused to leave a resident room even though the resident had requested they do so. This can hinder the survey process. Darleen had contacted CMS for guidance on how to handle the situation and was informed that the surveyors could end the survey and leave the facility. Before taking this action, Lucille went to the facility to speak with the administrator and let him know impeding the survey process was considered a violation with their agreement with CMS and could place the facility on a termination track. The administrator visited with his staff, and the survey was able to continue.
- There was also a discussion regarding accessing the electronic medical records. The majority of the facilities are working with the surveyors in accessing the electronic medical records.
- The State Survey Agency just received notice that our budget for FY 2012 was accepted.
- Darleen gave an update on survey staff. Health Facilities had just hired two surveyors and had two resign so still have two vacancies.
- Life Safety & Construction has received permission to double fill two of their surveyor positions.
- Health Facilities received a letter from Good Samaritan Society – Mohall regarding an individual who had been cited in their recent deficiency going into a psych facility. Darleen had inquired as to what was going on with the gero-psych facilities. Discussion took place regarding the need for more gero-psych beds in North Dakota.
- Health Facilities has received notice that Good Samaritan Society – Osnabrock Skilled Nursing Facility is closing.
- The group talked about West Central Human Service Center, the dementia patient and meeting the needs of residents/patients with behavioral issues that skilled nursing facilities are not equipped to handle. It was felt that we as a state need to lobby for people with more intense behavioral health and safety issues.

LTC Health Survey Data Report: Lucille Rostad reported.

- Lucille Rostad discussed and presented handouts on the most current deficiency citation reports. She stated in North Dakota we have an average of 3.77 deficiencies per health survey. The National average is 5.8 in the past the average has been about 2.5. She felt the implementation of QIS has impacted the National average. She also felt that North Dakota won't be impacted too much when we go with QIS as we have been identifying some of these any way. Lucille has not heard when North Dakota will be going to QIS.
- The top five tags in the nation, region and state are pretty much the same, just in a different order. F0371 will always be in the top five. Having the deficiencies on the Department of Health website is helpful.
- North Dakota has one facility that had a double G deficiency.

Division of Life Safety & Construction: Monte Engel reported.

- Monte Engel provided handouts on the most current Life Safety Code deficiency citation report. North Dakota is listed as having 38 surveys with 1.16 deficiencies average per survey.
- Monte talked about the top 25 tags in the nation, region and the state. Some of the tags have been cited twice, but K0064 and K0147 have been cited three times.
- Monte reported on the three Federal monitoring surveys done this quarter.

### Old Business

- No old business to report.

### New Business

North Dakota Center for Nursing: Dr. Patricia Moulton

- The mission for the ND Center for Nursing is to guide the ongoing development of a well-prepared and diverse nursing workforce to meet the needs of the citizens of North Dakota through research, education, recruitment and retention, advocacy and public policy.
- The center is strategic planning for nursing education and faculty resources, health care promotion (workplace planning), practice and policy group (advocating for nurse and developing best practice information) and research development.
- The center is also developing plans communications, marketing and finance.
- Patricia review the center's organizational chart and website.
- Patricia encourages people to sign up for their email list. The website has had over 20,000 hits.
- Practice and policy group is working on a nursing funding proposal.

Basic Oral Screening Survey for Older Adults: Gregg Reed

- Gregg Reed gave an overview on the Oral Health Program. The program is funded by a grant from the Centers for Disease Control and Prevention (CDC). One of the goals of this grant is to prevent and reduce oral disease by monitoring public health through a National Oral Health Surveillance System. The Basic Screening Survey (BSS) is an integral component in this system.
- Gregg reviewed North Dakota Department of Health Oral Health Program Basic Screening Survey for Older Adults. There isn't a lot of information on the older population in North Dakota. Shelly had inquired about the number of facilities that have accepted to participate in the survey. Six out of ten facilities have accepted to do the survey. One facility has declined. The principle investigator is Kimberlie Yineman, NDDoH Oral Health Program Director. The forms for the survey are still being distributed by the facilities.
- No screenings have been done as of June 4, 2012. Gregg anticipated that the screenings will take place within the month. The facility will retain the consent forms and placed in the residents chart. Information on whether or not the resident has a dentist and dental insurance will also be collected. It is very difficult to find a dentist that will provide services in a

nursing facility. There is a dental program, Bridging the Gap, where a dentist will go into the nursing facility to provide services.

- Gregg will share the results of the survey with the committee once they have their data collected.

#### CMS Update – Survey and Certification Letters

- Lucille provided one CMS Survey and Certification Letter for the committee to review. It was in regards to the use of insulin pens in health care facilities on more than one patient.

#### Next Meeting

- Date and Time: September 27, 2012, 10:00 a.m. – 3 p.m., AV Room 212, State Capital
- Potential Agenda Items:
  - Teresa Larson, P & A, and Joan Ehrhardt, State Ombudsman to present on the Complaint investigation process.

Meeting adjourned at 2:35 pm.

DRAFT