

North Dakota Department of Health

LONG TERM CARE ADVISORY
COMMITTEE MEETING MINUTES

June 15, 2016
10:00 a.m. – 3:00 p.m.

Committee Members Present:

Darleen Bartz, Chief, Health Resources Section, ND Department of Health
Shelly Peterson, Executive Director, ND Long Term Care Association
Peggy Krikava, Education Director, ND Long Term Care Association
Lucille Rostad, Program Manager, Division of Health Facilities, ND Department of Health
Rocksanne Peterson, Recorder, Division of Health Facilities, ND Department of Health
Bruce Pritschet, Director, Division of Health Facilities, ND Department of Health
Craig Christianson, Chairman of the NDLTC Association, Sheyenne Care Center, Valley City
LeeAnn Theil, Administrator, Division of Medical Services, DHS
Karla Backman, State LTC Ombudsman, ND Department of Human Services
Michelle Lauckner, Quality Health Associates
Randal Albrecht, Chair, ND Board of Examiners for Nursing Home Administrators
Dr. Bruce Hetland, Bismarck Medical Director, Nursing Home Medical Directors Association
Monte Engel, Division of Life Safety & Construction, ND Department of Health
Arvy Smith, Deputy State Health Officer, ND Department of Health
Carole Watrel, AARP

Committee Members Absent:

Dave Remillard, Public Member
Barb Groutt, Chief Executive Office, Quality Health Associates
Representative Gary Kreidt, ND House of Representatives (New Salem)
Joan Ehrhardt, Consumer Representative

Welcome

A meeting of the Long Term Care Advisory Committee was called to order at 10:05 a.m. on June 15, 2016. The meeting was held in the AV 212 Conference Room at the State Capitol. Darleen Bartz welcomed new members to the committee and introductions followed.

Public Comment

No comments.

Approval of Minutes

The minutes from the March 22, 2015 Long Term Care Advisory Committee meeting were distributed and reviewed. Shelly Peterson made the motion to approve the minutes with changes; Randy Albrecht seconded the motion. Motion carried.

The committee discussed reaching out to Dave Remillard to see if he is still interested in being a part of the committee since he has not been to the meetings in quite some time.

Standing Reports & Legislative Update

Legislative Update: Representative Gary Kreidt.

- There was no legislative report.

North Dakota Long Term Care Association: Shelly Peterson.

- Shelly briefly talked about the outcome of the election results and was impressed with Doug Burgum, Republican Governor Nominee. She feels it will be an interesting election year.
- Shelly reviewed the reductions and/or cuts that will take place on January 1, 2017. Eighty percent of all nursing home costs are related staffing and therapy services. Ninety-six percent of all nursing homes in North Dakota are non-profit organizations and are looking for different ways to recoup the lost revenue. One way is to possibly implement a provider tax.
- Shelly reported the Department of Justice is visiting three facilities again today. They are the Baptist Health Care Center, St. Gabriel's Community and Good Samaritan Society Bismarck.
- Shelly stated there are still issues with the MMIS and is hoping it gets worked out.

Quality Health Associate of North Dakota: Michelle Lauckner.

- Michelle reported 54 of 81 nursing homes are involved in the collaborative. She stated more and more facilities are reaching the goal benchmarks.
- Michelle gave an update on the National Partnership to Improve Dementia Care in Nursing Homes. North Dakota has reduced their use of antipsychotic medication by 14.5% since 2011.
- Michelle reported that Clostridium Difficile (C. difficile) has recently been added as a task order. C. diff is a germ that causes colon inflammation and diarrhea. This task is an opportunity for nursing facilities to work with Quality Health Associates on a QAPI initiative to prevent and reduce C difficile in nursing homes. The initiative will support the submission of data into the CDC's National Healthcare Safety Network (NHSN) databank. The databank will provide an analysis and create a national baseline for C. difficile infections in nursing homes. It will also provide LTC facilities with a system to track infections, identify problems and track progress toward stopping infections.
- Quality Health Forum will be held on August 17, 2016.

State Ombudsman: Karla Backman.

- Karla reported their annual report has been finalized and will be disseminated next week.
- Karla report the new online reporting system for reporting suspected abuse, neglect or exploitation of vulnerable adults went live in May. The website to use to file a report is www.nd.gov/dhs/services/adultsaging/reporting.html.
- Nancy Nicholas-Maier is the new director for Aging Services. She started on June 1, 2016.

Division of Health Facilities: Bruce Pritschet

- Bruce reported the average number of deficiencies for this quarter is 6.17. This is based the traditional survey (See Reports).
- Bruce reviewed the Citation Frequency Report for the nation, region and North Dakota (See report). F0323, Free of Accident Hazards/Supervision/Devices is the top citation for

North Dakota and the Nation; F0441 Infection Control, Prevention and Spread, Linens is the top citation for the Region.

- Health Facilities currently has two surveyor openings.

Division of Life Safety & Construction: Monte Engel.

- Monte reviewed the average number of Life Safety and Construction (LSC) deficiency and citation frequency reports (See reports). The average number of deficiencies for North Dakota is 1.98. K0038 was most frequently cited in North Dakota and Region. K0062 was the most frequently cited deficiency for the Nation.
- Monte has hired two plans reviewers, Jill Yri and Dave Nelson.
- Monte briefly talked about the adoption of the 2012 Life Safety Code Standards. The standards go into effect in July.

Old Business

Sharing of Staff in Co-Located Facilities:

- Bruce Pritschet reviewed a letter Darleen Bartz received on May 19, 2016, regarding sharing of staff in co-located facilities. CMS stated that there is no waiver that would allow the sharing of staff between a CMS certified provider and a non-CMS certified provider. CMS funded resources must be used for those programs and beneficiaries to which they are assigned. Staff should be clocking out of one area and clocking in another area.
- The group discussed the effects this is having on the facilities and the communities with the loss of this level of care. Shelly reported three facilities will be closing their basic care units; Good Samaritan Society Mott, Four Seasons – Forman and Pembilier Nursing Center.

NDDoH LTC Collaborative Update:

- Darleen gave an update from our last collaborative workgroup meeting on May 26, 2016. The workgroup began meeting March 5, 2015. Five key areas of concern were identified and thoroughly discussed and 21 action steps were identified to be addressed by the workgroup.
- During the May 26, 2016 meeting, the workgroup members agreed that all five key areas of concern had been discussed and addressed. They determined that there was no need for further meetings. They also indicated that the discussions and actions taken had been beneficial.
- The summary report of the collaborative will be printed and presented at the NDDoH and CMS Provider Update on June 29, 2016. Darleen reviewed the agenda for the day.
- Darleen reported the MPRO contract is moving forward and the option will be available in July. Shelly asked if Health Facilities information regarding the 2567 will be changing. Darleen stated that the letter will change and there may be a form that will be sent as well.
- June 29, 2016 will be the conclusion of the workgroup.

New Business

Status of Nursing in North Dakota Presentations and Discussion:

- Patricia Moulton, PhD, Executive Director, ND Center of Nursing

- Four primary areas of emphasis: nursing education and faculty resources, workplace planning, practice and advocacy, research and development.
- Nursing Education:
 - Increase in number of admission slots since 2009
 - Number of male students increased in the RN programs, LPN minorities increased
 - Increase in masters and graduates
 - Each program has their own criteria or qualifications for enrollment into their nursing program. GPA requirements 2.75.
 - NDSU nursing program has become very competitive and has had more students applying than they can take.
- Nursing Supply:
 - In 2014, ND had 1.389 RNs per 1,000 people; 4.23 LPNs per 1,000 people
 - In 2015, ND had a total of 706 Nurse Practitioners, 321 Certified Registered Nurse Anesthetists, 55 Clinical Nurse Specialists and 17 Certified Nurse Midwives
 - Average age of a RN is 43 years, LPN is 44 years and APRN is 46 years.
 - Projected retirement age is 67 years.
 - Nursing has become more diverse in 2015.
- Nursing Demand:
 - The percentage of nurses working full-time increased over the last five years and dipped slightly in 2015.
 - A greater percentage of LPNs are unemployed, but increased for both LPNs and RNs in 2015.
 - Large number of RNs are employed in a hospital or other settings.
 - Average number open positions in 2014-2015: 111.8 LPN jobs/month and 511 RN jobs/month.
 - Darleen asked why the LPN slots aren't being filled. Many times the candidate has not taken the required pre-curriculum or courses. Some may have decided to get a two year RN degree. Tammy stated a lot of the LPNs go on to get their RN BSN. Many students who don't get into the NDSU nursing program will get their LPN and then apply for the BSN program. NDSU will also pre-admit some of the applicants for the next semester or year to make sure some of the student get into the program.
 - Craig asked if there is anything that can be done to increase the number of slots that universities have for the nursing programs. Stacey stated that the Board of Nursing is working on system for students to help them into programs and expanding slots in the programs.
 - Tammy and Stacey spoke about the shortage of clinical instructors and faculty especially the Tribal Universities. Distant and online education is the way of the future.
- Stacey Pfenning, PhD, Pat Hill and Tammy Buchholz, ND Board of Nursing
 - Stacey reviewed the nursing statistics from the last five years. She is seeing a growth for LPNs. She also stated that LPNs need to feel valued and important.
 - North Dakota is one of the enhanced nurse compact states and will be bringing forward the advanced practice compact state in North Dakota as well.
 - The shortage of nursing is causing shortage of staffing and seeing a trend of zero tolerance. There has been an increase in complaints with travel nurses. Stacey stated there is very little orientation when the travel nurse enters a facility and many do not

- feel welcome. She feels there is a lot of contention. Being a travel nurse allow nurses more flexibility and they can set their own schedule.
- Stacey talked about the loan program through the Board of Nursing if nurses stay in North Dakota.
 - Darleen asked Stacey what recommendations she would have for the long term care industry. She said supporting the compacts.
 - Carla Gross, PhD, NDSU Nursing Program, President CUNEA
 - Carla stated NDSU will be increasing the number of applicants they take in the nursing program. There are more applicants for the nursing program that there are slots available.
 - Carla talked about the option of partnering with the nursing program at Wahpeton to provide BSN education to those who want to further their degree.
 - Increasing Behavior Health Nursing Workforce Capacity and Removing Barriers Policy Brief
 - Patricia Moulton reviewed the policy brief regarding increasing behavior health nursing workforce capacity and removing barriers. The mission of the North Dakota Center for Nursing is through collaboration to guide ongoing development of well-prepared and diverse nursing workforce to meet healthcare needs in the state through research, education, recruitment and retention, advocacy and policy. This policy brief was developed by nurses across the state in many different settings to provide a list of possible solutions. There are four main solutions and fifteen actions plans.
 - North Dakota has multiple challenges in delivering quality behavioral and mental health services. This is due to a shortage of mental health professionals.

Discussion/Other:

Lucille Rostad reviewed the following S & C documents:

- S&C: 16-14-NH: Release of 2015 Nursing Home Data Compendium
- S&C: 16-15-NH: State Operations Manual (SOM) Surveyor Guidance Revisions Related to Psychosocial Harm in Nursing Homes
- S&C: 16-21-ALL: Guidance to Surveyors on Federal Requirements for Providing Services to Justice Involved Individuals
- S&C: 16-26-NH: Fiscal Year (FY) 2016 to FY 2017 Nursing Home Action Plan
- S&C: 16-27-NH: Public Release of Nursing Home Enforcement Information Announcement
- S&C: 16-28-NH: Update Report on the National Partnership to Improve Dementia Care in Nursing Homes

Next Meeting

- Date and Time:
 - Tuesday, September 6, 2016, 10:00 a.m. – 3:00 p.m., AV Room 212, State Capitol

Future Agenda Items:

- Dr. Jurivich, Gerontologist Best Practices (Michelle Lauckner has contact information).
- Report from the Mental/Behavioral Health Collaborative Workgroup Subcommittee.
- Dr. Attila Dalmi communication tool between discharge planners and LTC facilities.
- Admission-Discharge-Transfer QA
- Legislative Update
- Budget Update – Arvy/LeeAnn

Meeting adjourned 3:05 pm.