



AGENCY LIAISON MINUTES

September 10, 2013

The meeting was called to order at 2:00 p.m. Tuesday, September 10, 2013 by Jamie Shelton, Chairman of the Agency Liaison Committee.

Committee/LNHA Members Present:

Jamie Shelton, Phyllis Chatelain, Kit Gamble, Dale Hewitt, Matt Machen, Dave Rambo, David Stallard and Joy Russo.

LNHA Staff:

Laurie Hinrichs

DHH-Health Standards Guests:

Cecile Castello RN, Margie Huguet RN, Catherine Williams RN, and Mary Perino who represented OAAS.

Committee Members Absent:

Scott Broussard, Michella Ford, Harold Gamburg, Ronald Goux, Marcus Naquin and Jack Sanders.

Replies to Agency committee questions were supplied by Cecile Castello, Director of Health Standard. Discssion questions were answered verbally during the meeting.

In addition to the answers provided with these minutes, discussions included:

1. Mary Perino stated if facilities were having problems with getting residents qualified for Medicaid they needed to contact Christopher.Chase@la.gov. She is over the LOCET office and they have a 48 hour turn around time.. She also stated she was very concerned at the facilities that were no longer taking Medicaid residents, and that very few facilities were taking residents with behavior issues.

2. The surveyors see any revisions to the original 2567 as more of a quality improvement tool from the state . The state office also uses the IDR results to check for survryor patterns, poorly written deficiencies or any other issues that the state office feels it needs to address with the regional office. The surveyor would not hold the facility responsible for the IDR results or be upset with the facility as it would have been the IDR team that was responsible for making any changes to the deficiencies.
3. See the documents included with this memo on dementia guidelines. Cecile also stated that facilities with locked units OTHER THAN a specialized Alzheimer's/dementia unit must be very careful with their policy and procedures and admittance criteria for a unit as it could easily be considered a physical restraint. She said a facility MUST follow the regulations for a locked unit criteria.
4. Included are the most cited deficiencies from 2012 and 2013. Margie stated the deficiencies were consistent across all the states in region 6. The main problem is RN delegation to other staff memebers that do not seem to be trained in the nursing process, are not reassessing problems, care planning them, evaluating and re-assessing or changing the plan of care when there are revisions needed. A RN cannot delegate a task to a LPN unless the LPN is competent in the task that is being delegated.
5. See answer provided.
6. See answer provided.

Discussion:

Cecile stated that the Nursing Home Minimum Requirements have been revised and are now being sent to the legal department for final revisions before submitted to the rule making process.

LA currentlly has three nursing facilities that are special focus facilities. Their goal is to graduate the facilities off of the process in hopes they will continue to improve their compliance history.

There was discussion about the increased need for behavior interventions and need for more places to treat residents with mental illness and behavior issues. Cecile cautioned facilities for strictly follow the involuntary discharge regulation with the 30 day notice, right to appeal, and the other requirements. She also reminded facilities that the staff must help the resident find alternative placement after the completion of the involuntary disharge.

The subject of unpasteurized eggs was short as it does not appear to be an issue for Louisiana Nursing facilities.

There was no further discussion. The meeting was adjourned at 4:10 pm.

Submitted by,

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