

LNHA Agency Liaison Meeting | MINUTES

February 12, 2019 | 2:00 pm | LNHA Office

Committee members present: Jamie Shelton (Central Management), Steven Boulware (Priority Management), Marcus Naquin (Hammond Nursing Home)

Guests present: Chris DeLaune (Priority Management)

Staff members:

Mark Berger, Wes Hataway, Karen Miller

LDH Guests:

Cecile Castello, Catherine Williams

Call to order

Committee Chairman Jamie Shelton called the meeting to order and discussed the following topics with the Louisiana Department of Health (LDH).

Trilogy ventilator use in nursing facilities

A member inquired if nursing facilities and their staff are required to have specialized training to care for residents with trilogy ventilators. LDH responded if the facility staff has the capacity, ability and knowledge to work the equipment, follow the manufacturer's guidelines, has a written policy for the equipment, and maintains the equipment, the facility can provide the care. LDH emphasized that staff needs to be familiar with the manufacturer's guidelines for trilogy ventilators as with any other medical equipment used in the facility.

Issues with electronic surveillance (granny cams) since implementation

LNHA asked LDH if surveyors have heard issues with the implementation of monitoring devices (granny cams). LDH noted the rule and forms were disseminated and noted they received requests for clarification. The emergency rule will be extended to provide LDH additional time to review LNHA's and others' comments and determine what should be revised. LDH also noted that they have not received many calls or issues regarding this topic.

LDH noted a scenario where the nursing facility told a family member that a licensed contractor or an electrician should install the monitoring device. LDH noted that if a monitoring device is nothing more than hanging a picture they do not deem a contractor to be necessary. The Department will continue to connect the family member and the administrator so they can communicate and problem solve.

LNHA members reiterated that the rule states the device should be in a "fixed, stationary position."

Some member facilities noted that they require a signature in their admissions packet declining the installation of a monitoring device.

Prometric / nurse aide testing

LDH contracted with [Prometric](#) as the exclusive provider of standardized testing for certified nursing aides (CNAs). LDH addressed some of the timing issues with Prometric and said they have worked with the company to add more proctors which allow for more testing dates. LDH also is monitoring test scores to ensure they continue to rise. LNHA noted that decreasing the time between training and testing helps raise the scores. LDH encouraged facilities to become a facility testing site. Review the Prometric requirements [here](#). LDH will send information to nursing facilities regarding Prometric specifics and how to become a testing site. Mr. Berger and LDH will conduct a call to answer specific questions and concerns about Prometric.

CNA Reciprocity

LDH reminded members that CNAs licensed in other states may work in Louisiana nursing facilities provided they follow the already established reciprocity [procedure](#).

What is the protocol if the resident's family requests not to be contacted regarding minor falls, injuries, or incidents?

A member inquired what the protocol is if the resident's family requests not to be contacted regarding minor falls, injuries or other incidents. LDH noted that the facility should continue to contact the family member because LDH surveyors will check to see if the facility made contact with the family or responsible party.

LDH expectation for Requirements of Participation Phase 3 implementation and expectations on meeting the requirements for 42 CFR 483.40 Behavioral Health Services

LNHA asked LDH for recommendations or advice prior to implementation of Phase 3 of CMS' Requirements of Participation in November 2019. Ms. Castello contacted CMS regarding Phase 3 for behavioral health services and is awaiting additional guidance from CMS. LDH will alert members when CMS provides guidance.

LDH advice for Requirements of Participation Phase III implementation

LDH noted that quality assurance (QA) will be significant in Requirements of Participation (RoP) Phase III. Facilities should conduct a facility assessment which includes assessing residents and looking at the facility's performance on CMS quality measures.

LDH believes that CMS will continue to emphasize falls and antipsychotic use. The Department, at this time, has no plans to require specific trainings or programs to be completed for Phase III. LDH advised facilities to assess their residents and examine what can be done to improve their quality of life.

Trends identified by LDH in most recent survey findings

LNHA requested that LDH share trends in the most recent survey findings. Ms. Williams noted the following:

- Maintain vigilance regarding skin conditions. CNAs should be reminded to communicate with the nursing staff when they discover a skin issue.
- CNAs should be reminded to follow the resident's care plan regarding lifts and two-person procedures. Facilities are encouraged to assess residents for fall risks and implement care plans accordingly.
- LDH noticed an increased usage of bed rails. Facilities are reminded that bed rails cannot be used as a restraint and should review alternate procedures for ensuring the resident's safety.
- CMS is emphasizing verbal abuse including profanity and name calling. Nursing facilities are encouraged to review procedures to prevent the occurrence of verbal abuse with facility staff.
- LDH sees an increase in immediate jeopardy (IJ) tags. LDH suggests better staff communication and reviewing staff competencies to reduce the risk of an IJ.
- LDH suggested including a root cause analysis when submitting an OTIS. This will facilitate LDH's understanding of the issue and possibly prevent an onsite visit.
- LDH suggests that facilities should follow through with family members when the facility has indicated further follow-up with a family member on an incident. LDH believes this will reduce LDH's involvement in an issue.

RN weekend staffing and the recording of the eight-hour requirement in the Payroll-based Journal (PBJ)

State surveyors are not examining PBJ data and will continue to examine payroll records to determine staffing compliance. CMS will examine PBJ data and will notify LDH if data indicates a significant decrease in staffing on weekends. LDH will devote 50% of its off-hour surveys to facilities which data suggests has incurred a significant decrease in staffing on weekends.

A discussion was also held regarding the entry of 7.5 hours (rather than eight hours) into PBJ due to the required .5 deduction for a meal break. LNHA noted that the American Health Care Association (AHCA) spoke with CMS regarding this matter. CMS informed AHCA that surveyors will view an entry of 7.5 hours as meeting the eight-hour requirement.

Necessity of continuing to complete a Form 671 (in light of PBJ reporting)

LDH stated that CMS is still requiring [Form 671](#) to be completed in its entirety.

Question regarding laptop access for surveyors

LNHA noted a recent instance where surveyors requested eight laptops for their use during a survey which would have hindered the normal operation of the facility. LDH advised that surveyors need to review electronic records during the course of the survey. The facility and the surveyors should work cooperatively to accomplish this review. A facility can support surveyors by assigning staff to assist surveyors in locating medical records or it may be less burdensome to the facility to provide surveyors with laptops in order to access information. LDH stated surveyors should never need more than two to four laptops and facilities can take steps to limit access to only information needed to conduct the survey. Facilities should cooperate with surveyors to ensure information is provided in a timely manner.

LNHA inquired about the difference between skilled beds in nursing facilities and skilled beds in hospitals

LNHA asked LDH to review the wording of [RS 40:2109](#) regarding a hospital's ability to open a skilled (Medicare) nursing facility bed considering the moratorium on opening nursing facility beds that is currently in place.