

# LNHA Agency Liaison Meeting | MINUTES

---

February 20, 2018 | 2:00 pm | LNHA Office

**Committee members present:** Ron Goux,  
Jamie Shelton, Scott Broussard, Phyllis Chatelain  
Dave Rambo, Marcus Naquin, David Stallard

**Staff members:**  
Mark Berger, Wes Hataway, Karen Miller

**Guests:**  
Cecille Castillo, Catherine Williams, Jim Taylor  
(by phone)

## Call to order

Committee Chairman Jamie Shelton called the meeting to order and the following topics were discussed.

## Alternate Bed Use Requirements

The Louisiana Department of Health (LDH) stressed the importance of reviewing licensed beds being utilized in the alternate bed use program. Specifically, LDH requested that facilities review the process by which beds are placed into alternate use and the process by which beds are removed when alternate use has ended.

Alternate bed use is addressed in La. R.S. 40:2116 (K) and LAC 48:II.12513. The provisions address placing a licensed bed into alternate use as well as the process for removal from alternate use and re-enrollment as a licensed bed. Facilities are also allowed to take beds out of alternate use and use them as licensed beds. If a facility elects to do so, the facility has 120 days from removal of alternate use to relicense and re-enroll the beds.

LDH's LTC 1 report provides an inventory of licensed and alternate use beds. LDH suggests that facilities review the report, ensure its accuracy and notify the Department if the information needs to be updated to maintain correct accounting. LNHA said that it would assist in reminding member facilities to provide a correct accounting.

## Updated License Renewal Requirements – New Emergency Preparedness Regulations

License renewal packets will contain an attestation regarding compliance with the new emergency preparedness regulations. Facilities are required by CMS to perform at least one tabletop and one community-wide exercise each year. Participation in an emergency counts towards the requirement. Facilities are required to attest to the completion of the required training to be relicensed.

## Reporting of Injuries into OTIS if Cause is Known

A question was raised concerning whether witnessed falls in which the injury was sustained still requires an entry into the OTIS system. LDH reports that a witnessed fall with no visible reason or indication that there are abuse and neglect is not expected to be reported. Facilities should always internally document the circumstances of the fall, the internal investigation which took place and the reasons for no indication of abuse or neglect, but an entry into OTIS is not necessary.

## Designated Smoking Areas

A question was raised whether facilities can limit smoking to a designated area. LDH stated that smoking could be limited to a certain designated area. Facilities have the right to forbid residents to smoke outside if they choose to go beyond the designated smoking area.

### **Early Observations of the New Survey Process**

The logistics and look of the new survey process are different than the previous survey process. The average survey team consists of approximately five people; an average survey lasts about five days. One surveyor is assigned to each hall. Surveyors will conduct observations and speak to all residents residing in the hall. They will also conduct a 70% sample on the first review. Work will be done prior to entry into the facility which will result in a limited record review. The record reviews will primarily be focused cases which may have potential issues. The surveyors are also given much greater freedom in their questions. Thus far, LDH has not seen an increase in deficiencies or immediate jeopardies (IJs).

### **Electrical Power Strips in Residents' Rooms**

A discussion was held with the Office of the State Fire Marshal (OSFM) regarding the use of electrical power strips in residents' rooms. The office will research the issue and will provide additional guidance on the matter.

### **PASSR Level 1 and 2 Information**

LNHA requested information from LDH which could further explain the PASSR Level 1 and 2 examinations. LDH said it would provide the requested information and LNHA will disseminate the information to its membership.

### **CMS Identifies Late Adopters Regarding Antipsychotic Medication**

CMS has identified nursing facilities whose use of antipsychotic medications have increased or have not decreased as "late adopters." LDH stated it has contacted late adopter facilities, informed them of the free training and encouraged them to familiarize themselves with the initiative to reduce antipsychotic medication in their facilities.