

LNHA Agency Liaison Meeting | MINUTES

August 28, 2018 | 3:00 pm | LNHA Office

Committee members present: Jamie Shelton (Central Management), Steven Boulware (Priority Management), Lannie Richardson (Central Control), Marcus Naquin (Hammond Nursing Home), Wayne Plaisance (Archdiocese of New Orleans), Phyllis Chatelain (Lakeview Manor), Dale Hewitt (Senior Village Nursing & Rehab), Russell Suire (TrustCare Management), Jamie Copeland (Heritage Manor South)

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).

Status of Rulemaking for Electronic Monitoring Devices in Residents' Rooms

[Act 596](#) from the 2018 Louisiana Regular Session states that LDH will promulgate the rules regarding the use of electronic monitoring devices in residents' rooms. LNHA requested the status of the rulemaking and LDH noted that there is a draft of the policies and procedures that will be disseminated as an emergency rule later this fall. LDH stated that the draft rule will closely follow the statute. LNHA requested an advanced draft of the proposed rules prior to publication.

Overview of CNA testing with Prometric

LDH contracted with [Prometric](#) as the exclusive provider of standardized testing for certified nursing aides (CNAs) as a way to prevent fraudulent CNA certification. Prometric testing sites will be available throughout the state. A list of testing sites can be found [here](#). Click [here](#) to view a presentation from the Prometric stakeholder meeting. If a provider has concerns regarding Prometric's testing process, the process of utilizing a host facility or the availability of Prometric testing sites, contact Ms. Castello at LDH.

Level of Training Required to Administer Total Parental Nutrition (TPN) in Nursing Facilities

LNHA requested clarification regarding the level of training required to administer total parental nutrition (TPN) to a resident. LDH stated the ability to administer TPN depends on the nurse's individual knowledge, skills, ability, training and competency to perform the task. Most registered nurses should have the requisite skill and training to perform the task.

Reporting of falls or neglect in the OTIS System

LNHA requested further clarification of how LDH surveyors interpret the rule about reporting falls in Online Tracking Incident System (OTIS) for Nursing Facilities system. LDH noted that the topic of falls in skilled nursing facilities is a high-level focus of the Office of Inspector General (OIG) due to their initiative to reduce elder abuse and neglect. Facilities should always internally document the circumstances of a fall, the internal investigation which took place, and the rationale in determining there is no indication of abuse or neglect. However, an OTIS entry for every fall is not always necessary. Surveyors want to see the root cause analysis and how the facility can prevent similar

future occurrences. LDH acknowledged that a fall resulting in an ER visit does not necessarily equate to abuse and neglect and agreed that the federal definition of abuse and neglect is vague.

LDH is creating a guideline for abuse and neglect to give providers guidance. The document should be published in late September. LDH recommends that facilities should seriously consider reporting all falls in OTIS until further guidance is published. LDH will meet with their survey staff to review the proper identification and enforcement of deficiencies regarding falls and OTIS reporting.

LDH was also asked to clarify the specifics regarding neglect in reporting for a resident needing changing. LDH stated that a resident should be changed within 20 minutes of the event or otherwise noted in OTIS.

[Ombudsman reporting requirements of discharge or transfer \(RoP Part 2\)](#)

LNHA requested clarification regarding reporting requirements of nursing facility discharges or transfers to the Louisiana Ombudsman which are stated in the CMS Requirements of Participation (ROP) Phase II. LDH referred to this May 2017 [CMS S&C: 17-27-NH](#) memo which provided the following clarification. For facility-initiated discharges, the facility must provide notice of discharge to the resident and the resident's representative along with a copy of the notice to the Office of the State LTC Ombudsman at least 30 days prior to discharge or as soon as possible.

When a resident is temporarily transferred on an emergency basis to an acute care facility, the notice of transfer may be provided to the resident and the resident's representative as soon as practicable.

Copies of notices for emergency transfers must also still be sent to the ombudsman, but they may be sent when practicable, such as in a list of residents on a monthly basis. (Click [here](#) to see a sample emergency transfer log created by the Louisiana State Long-Term Care Ombudsman.)

[Proposed rule published regarding MCOs utilizing nursing facilities for a step-down continuum of care](#)

A proposed rule was published in the July 2018 [issue](#) of the *Louisiana Register* regarding managed care organizations (MCOs) utilizing skilled nursing facilities for patients who transition from acute care hospital services as a step-down continuum of care. LDH stated the rule was designed to better facilitate the interactions between MCOs and nursing facilities being utilized in step-down care. Read the LNHA State Regulatory Update for July [here](#).