
**Minutes 01-08-13 DELAWARE NURSING HOME RESIDENTS QUALITY ASSURANCE
COMMISSION**

**Emily P. Bissell Hospital
2nd floor conference room
3000 Newport Gap Pike
Wilmington, DE 19808
FINAL**

Meeting July 9, 2013
Minutes

Commission Member (s) Present: Brian L. Posey, Chairman; Karen Gallagher; Yrene Waldron; Kyle Hodges; Lisa Furber; Representative Michael Barbieri and Patricia Dailey Lewis.

Commission Member(s) Absent: Wayne Smith; Senator Bethany Hall-Long; and Vicki Givens.

Others Present: Margaret Bailey; Lisa Barchi, DOJ; Lisa Taylor, Aide to Ms. Gallagher; Kim Marsh, United Health Care; Victor Orija, State Ombudsman; Quinesha Harris, Governor Bacon; Lena Lynch, Serenity Gardens; Jennifer Mulrooney, CC Wound Care Center; Matt Either, DHCFA Intern; Lisa Satterly, DHCI; Esther Curtis, Point of Hope; Dana Casey, Home Watch Caregivers; and Tom Murray, DLTCRP.

1. Call to order:

The meeting was called to order at 9:34 AM by Brian Posey, DNHRQAC Chairman.

2. Approval of the Minutes for the meeting of:

January 8, 2013 and March 12, 2013 meeting minutes were approved without changes.

3. Discussion of:

Delaware Culture Change Coalition – Lisa Satterly, DCCC President

Lisa Satterly, President of the Delaware Culture Change Coalition, provided Commission members with an overview of the organization. A multi-disciplinary team approach addresses awareness and direction regarding culture change in Delaware. Members include: Activity Directors, Social Workers, Nurses, Home Health Care providers, State Ombudsman's Office, DNHRQAC staff, nursing home/assisted living providers and others.

"Culture change" is the common name given to the national movement for the transformation of older adult services, based on person-directed values and practices where the voices of elders and those working with them are considered and respected. Core person-directed values are choice, dignity, respect, self-determination and purposeful living.

Culture change transformation supports the creation of both long and short-term living environments as well as community-based settings where both older adults and their caregivers are able to express choice and practice self-determination in meaningful ways at every level of daily life.

Culture change transformation may require changes in organization practices, physical environments, relationships at all levels and workforce models – leading to better outcomes for consumers and direct care workers without inflicting detrimental costs on providers.

The group meets monthly to provide awareness of culture change and therefore create a more home like environment for residents in Delaware. The Fire Marshall's Office attended the last DCCC meeting to discuss Life Safety Codes. Christiana Care Hospital representative also attended and presented about the Just Culture principles. Onix Group (owns Cadia facilities in DE) presented on dining experience and provided suggestions as to such.

DCCC held an annual conference July 2012 at Cokesbury Village. Senator Bethany Hall-Long and Representative Valerie Longhurst sponsored HCR 44 to mark the inauguration. The theme was: “It starts with me”. There were approximately 90 participants.

DCCC held an open house February 2013 and invited all long-term care and assisted living facility representatives to attend. In addition, home healthcare agencies and other providers were invited to the event. There were 15 facilities represented at the open house.

The group is currently planning the 2nd annual conference – Spring 2014. The theme: “The Journey Continues....”.

Delaware Culture Change Coalition started producing a quarterly newsletter - Spring 2013 edition, to address culture change. The newsletter features best practice ideas. The Summer 2013 edition was emailed to interested parties last month.

Ms. Satterly mentioned that the group would like to increase their membership attendance – often facilities do not permit employees to attend off-site meetings. At times, employers require that an employee takes time off of work to attend meetings such as DCCC.

DCCC’s contact information: delawareculturechange@gmail.com or <https://www.pioneernetwork.net/Coalitions/Find/Delaware/>.

CCHS Wound Care Center – Jennifer Mulrooney, Program Director

Jennifer Mulrooney, Executive Director for Christiana Care Wound Care & Hyperbaric Medicine Center, provided an overview of the program. The Center offers outpatient services to address wound care. The average number of visits an individual receives to address their needs is nine. The Center has been open for 18 years.

Common wounds include: venous stasis, pressure ulcers, osteoradionecrosis and diabetic foot ulcers.

Wound care needs are growing in Delaware because of: aging population, higher rate for diabetes, chronic disease and obesity. There are challenges in treating wounds and often the cost to treat wounds is significant.

Currently, 11.3% (29 M) of Americans have diabetes and 30% lead to amputation.

The Center often uses a multi-disciplinary healthcare provider approach in treating nursing home residents (private and state owned). The nursing home residents often have co-morbidities which impact the wound healing process.

The Center uses a systematic approach: comprehensive evaluation & assessment; defining etiology for the wound; designing an individual treatment plan; and following the evidence-based clinical practice guidelines.

The Center also offers wound care services at: Bayhealth Wound Care Center, St Francis Center for Advanced Wound Healing, Wound Healing & Hyperbaric Center at Nanticoke and Beebe Wound Care Services. In addition, the Center provides home health care and physical therapy service(s) throughout the state.

Hyperbaric oxygen therapy (HBOT) is also provided at CCHS Wound Care Center. HBOT is a powerful adjunctive therapy, reimbursed by Medicare and most insurance providers - indicated for 10-15% of patients with chronic wounds.

There is a specific criteria used to determine HBOT eligibility. Often, an individual must endure 4-6 weeks of regularly wound therapy before being considered for hyperbaric oxygen therapy.

It is often challenging to treat a wound: patient non-compliance, lack of professional training in the community, hospitals, clinical personnel and accommodations to treat a wound.

Ms. Mulrooney mentioned that if an individual has an amputation (due to the severity of a wound), there is also a psychological component the patient and care giver(s) must consider during the healing process.

Early detection is important in the prevention of wounds, and as a result, the Center will be offering educational outreach opportunities - in the near future. Medical Directors and other long-term staff do consult with the Center on specific wound cases.

Ms. Mulrooney mentioned that recent changes (within the past three months) to Delaware ambulance transportation services should be explored. Often the Centers population needs assistive walkers, wheel chairs or stretchers to get to/from the Center for wound care services.

If an ambulance company transports an individual on a stretcher, they will not leave the stretcher or wait with the person. As a result, the patient is turned away since the receiving health care provider does not have the accommodations (stretcher and/or staff to wait with the person).

Kyle Hodges stated that accommodations need to be made for individuals with disabilities – regardless whether they reside in a licensed facility or in the community.

Ms. Waldron will contact Division of Medicaid & Medical Assistance (DMMA) to discuss and rectify the ambulance transportation issue.

QART Report – Tom Murray, DLTCRP Deputy Director

Tom Murray, DLTCRP Deputy Director, provided Commission members with the 2nd Qtr 2013 QART Report. During 2nd Qtr 2013, the survey teams recommended 11 “G” level citations. After the Quality Assurance Review Team reviewed the recommended citations, it was determined that one of the citations was downgraded/reduced to a “D” level, because the panel was not able to determine the precise cause of the residents bruising.

The scope (# of residents affected) and severity are two factors considered when a surveyor recommends a deficiency.

Staffing Report – Tom Murray, DLTCRP Deputy Director

Tom Murray, DLTCRP Deputy Director, provided Commission members with the 2nd Qtr 2013 Staffing Report. Eagles Law requires facilities to maintain at least a 3.28 staffing ratio. It appears one facility fell below (3.12) the minimum required during 2nd Qtr 2013 and were cited with a statutory civil monetary penalty of \$6,000. The facility submitted a Plan of Correction to the Division of Long Term Care Residents Protection.

4. Old Business/New Business

2014 DNHRQAC Meeting Schedule

2014 meeting calendar (draft) was distributed to Commission members. It was suggested that Commission meet in Dover for the September 10th meeting. Ms. Bailey and Ms. Waldron will contact facilities in the Dover area to see if they have a room that can be used for the meeting.

Ms. Bailey also asked Commission members to decide whether the January 14, 2014 (1st day of Legislative Session) and November 11, 2014 (Veterans Day – holiday) meetings should be modified.

DNHRQAC 2013 Annual Report

Ms. Bailey and Chairman Posey will prepare the 2013 DNHRQAC annual report (draft form) and forward to Commission members, for review.

Wilmington University Class – Elder Abuse: Identification, Detection & Intervention

Wilmington University will be offering a class to promote awareness surrounding neglect, abuse and financial exploitation of the elderly and infirmed. The class will be held at the Brandywine Campus in the Fall 2013. Sherri Hageman, Court of Chancery Guardianship Monitoring Executive Director, will be the instructor.

5. Public Comment

Senate Concurrent Resolution 23

Senator Bethany Hall-Long, Representatives Michael Barbieri & Valerie Longhurst and other Legislators sponsored SCR 23, recognizing June 15, 2013 as World Elder Abuse Awareness Day.

DNHRQAC Membership Vacancies

The Commission is comprised of 12 members that work closely with reviewing policies and laws to implement changes/improvements for Delaware nursing home and assisted living residents.

Currently, DNHRQAC has two vacancies:

1. Nursing Home Provider
2. Consumer

If interested, please contact Lydia Prigg: (302)744-4101, Governors Office, to obtain an application or visit: http://governor.delaware.gov/forms/board_and_commission_application-form.pdf.

Oral Health Workshops

The Division of Public Health partnered with the Center for Disabilities Studies (UD) and hosted a training program for caregivers of people with disabilities and frail elders called “Overcoming Obstacles to Oral Health. The five training session were held in June 2013 (state-wide).

6. Next meeting will be **Tuesday, September 10, 2013** at 9:30 AM. The location:

To be determined

6. Adjournment

The meeting was adjourned at 11:06 AM by Brian Posey, Chairman.

Attachments: January 8, 2013 meeting minutes – draft
March 12, 2013 meeting minutes - draft
2014 DNHRQAC meeting calendar – draft
CCHS Wound Care Center presentation
QART Report – 2nd Qtr 2013
Staffing Report – 2nd Qtr 2013
DCCC Summer 2013 Newsletter

