DELAWARE NURSING HOME RESIDENTS QUALITY ASSURANCE
COMMISSION
Emily P. Bissell Hospital
3000 Newport Gap Pike
2nd floor conference room
Wilmington, DE 19808
FINAL

Meeting May 13, 2014
Minutes

Commission Member(s) Present: Brian L. Posey, Chairman; Lisa Furber; Melissa Heck; and Yrene Waldron.

Commission Member(s) Absent: Kyle Hodges, Representative Michael Barbieri, Senator Bethany Hall-Long; Vicki Givens; Karen Gallagher; Amy Milligan; and Patricia Dailey Lewis, Esquire.

Others Present: Margaret Bailey; Carol Lovett; Consumer; Tom Murray, DLTCRP; Quinesha Harris, Governor Bacon and DHCI; Sharon Garrick, Season’s Hospice; Dana Camoirano, Homewatch Caregivers; Sheila Grant, Coalition to enact DMOST; Glyne Williams, DMMA; Staci Marvel, DMMA; Ronnette Anderson, MFP; Jean Youkers, Arden Courts; Stacey Weisman, Arden Courts; Tiffany Taylor, Interim Healthcare; and Patti Newcomb, Interim Healthcare.

1. Call to order

   The meeting was called to order at 9:32 AM by Brian Posey, DNHRQAC Chairman.

2. Approval of the Minutes for the meeting of:

   Not voted upon at this time.

3. Discussion of:

   QART Report

   Tom Murray, DLTCRP Deputy Director, stated that in the first quarter 2014, the QART Team reviewed seven surveys involving “G” level deficiencies. As a result of the QART review, three “G” level deficiencies were downgraded. The deficiencies were downgraded because:

   • It was determined that one wound could have been caused by factors other than unalleviated pressure.
   • There was no record of this particular pressure sore until after the 2nd hospitalization, no evidence that the sore worsened.
   • It was determined that this fall could not have been anticipated.

   Division of Medicaid & Medical Assistance (DMMA)

   Glyne Williams, Chief Medical Management Administrator for DMMA, mentioned there will future changes to the Diamond State Partners relationship. As a result:

   • July 2014 – new selection process
   • July - Dec 2014 - transition process
• Sept - Oct - review process
• Jan. 1, 2015 - new or other managed care organization(s) rolled out

Currently there are 186,826 individuals enrolled in Managed Care – 11,075 in LTC (April 2014) and 88 PACE clients.

The relationship with Managed Care Organizations (MCO’s) began April 2012 - United and Aetna.

Joint visits are made with DMMA nursing staff every 90 days for clients receiving HCBS and every 120 days for clients receiving NH services - if so desired. The purpose of the visits is to make sure the clients are receiving the services they need.

DMMA provides on-site: monitoring client medical records and making sure social/transportation needs are met. An external quality review (CMS requirement) is performed yearly.

Ms. Waldron mentioned that it is her understanding that MCOs meet with different agencies within DHSS on a regular basis. It was recommended that provider representation be added to the State agency group discussions and include DLTCRP.

Ms. Waldron further added that some MCO practices are based on contractual requirements with the State and/or CMS – and can conflict with current State Statute. It was suggested that if all players are around the table, all can collectively identify issues and seek common ground on how to correct. One such conflict is with the Discharge Statute in Delaware and the potential impact on the system – should an MCO discharge a patient from LTC after what was expected to be a short term rehab stay and the patient refuses to leave.

The Delaware Quality Management Strategy (QMS) is a comprehensive plan incorporating quality assurance monitoring and ongoing quality improvement processes to improve the delivery of quality care. The QMS covers services to members in Medicaid managed care, the Children’s Health Insurance Program, and Medicaid Long Term Care and community-based services. The QMS is the framework through which the State shares its objectives and strategies to address health care costs, quality and timely access in a collaborative approach with its partners and stakeholders. DMMA has reorganized the QMS for 2014. While the 2012 QMS strategies remain the same, the format has been changed slightly in some parts of the document to create an easier flow of information for interested users.

The goals of the QMS: timely access, quality of care, cost of care and satisfaction. The Long Term Care performance measures appear on DMMA’s webpage:
http://dhss.delaware.gov/dhss/dmma/dshpplus.html

Stacy Marvel, Chief of Long Term Care Operations for DMMA, provided an overview of the long-term care application process in Delaware. There is a LTC Operation Unit in Smyrna/Dover, Wilmington and Milford.

During April 2014, DMMA received 421 LTC referrals (250 NCC & remainder K/S combined) and 203 LTC applications. The average number of days to process a LTC application – 64.

November 18, 2013, a new web-based designed eligibility system was rolled out. Ms. Marvel mentioned that individuals are being approved but it is taking longer to move applications through the series of screens – an hour glass/spiral appears for end users.
DMOST

Shelia Grant, Ambassador for Hospice & Palliative Nurses Association, provide members with an update about the Delaware Medical Orders for Scope of Treatment. DMOST is a portable medical order set that directs health care professionals on which treatments a patient wants and does not want. Specifically, DMOST is for individuals that: Have serious advanced illness or frailty, or a life expectancy of less than one year.

Currently, End of Life is documented through: Living Wills, Powers of Attorney for Health Care or Do Not Resuscitate (DNR) Orders.

Barriers faced with the current end of life forms:

1. Living Wills cannot be followed by health care professionals until they are converted into a medical order.
2. No patient signature is required on a DNR order in a hospital or facility.
3. A DNR order is not portable (when a patient moves, the order loses force and must be rewritten).
4. No orders to withhold life-sustaining treatment are valid during transport in DE.

Currently 15 states actively utilize Physician’s Orders for Life Sustaining Treatment (POLST) and another 20 states are in the process of developing POLST-type programs.

Use of the DMOST form is voluntary and may capture wishes such as: Full Treatment, Limited Treatment(s) or Comfort Care Treatment(s).

Important facts about DMOST:
1. A copy has the same force as the original
2. DMOST travels w/pts. to a new setting
3. DMOST does not expire, but should be reviewed w/any change in: a patient’s condition, location, or preferences for care.

In order to advance forward, stakeholders have been seeking community/legislative support and working with the 147th General Assembly to pass a bill about DMOST.

Namaste

Jean Youkers, Marketing Director at Arden Courts, and Stacy Wiseman, Arden Courts Executive Director, provided Commission members about the Namaste Care Program. The program is designed for later staged dementia residents – so they may benefit from activities in a calming, inviting and relaxing environment. This is achieved by using creative techniques to connect with the residents - presenting familiar objects that summon memories from earlier times (cold cream, fuzzy afghans, etc) and by providing personal care (neck massage, nail care, etc). A two hour session is provided in the morning and afternoon.

Arden Court began offering the Namaste Care Program two years ago. Joyce Simard, MSW and internationally acclaimed dementia consultant provided training to all Arden Court staff. Ms. Simard also wrote “The End-of-Life Namaste Care - Program for People with Dementia”.
Qualified Arden Court residents receive one-to-one attention during each session. Currently, 11 Arden Court residents utilize the Namaste Care program.

4. Public Comment

**National Nurses Week**

National Nurses week was observed May 6 – 12, 2014.

**National Nursing Home Week**

Nat’l Nursing Home week is being observed May 11 – 17, 2014.

**Dementia Awareness**

Dementia Awareness is being observed May 18 – 24, 2014. The Delaware Veterans Home is hosting a free seminar on May 13, 2014: Understanding Memory loss, Dementia and Alzheimer’s Disease at Dover Downs.

**WEAAD 2014**

World Elder Abuse Awareness Day is June 15, 2014. Senator Bethany Hall-Long and Rep(s) Michael Barbieri and Valerie Longhurst sponsored SCR23 to commemorate the day.

**Delaware Culture Change Coalition Conference**

DCCC hosted their 2nd Annual Conference on April 9, 2014. The theme, “And the Journey Continues….“ provided participants with a better understanding of: Age Irrelevance, Caring for People with Dementia without Antipsychotics, Residents Rights in LTC Setting and DMOST. Senator Bethany Hall-Long and Rep(s) Michael Barbieri and Valerie Longhurst sponsored HCR 42 for the event.

**Oral Health Summit**

June 6, 2014, a group of stakeholders will meet at Dover Downs (Dover) to discuss Delaware’s Oral Health Plan. The summit is being hosted by the Division of Public Health.

**All Star Awards – Delaware Health Care Facilities Association**

The 14th Annual All Star Awards ceremony will be held May 14, 2014 at Dover Downs. The ceremony provides recognition to individuals for their excellence in providing quality care and services to the elderly and the disabled in long term care facilities across Delaware.

6. Next meeting will be **Tuesday, July 8, 2014** at 9:30 AM. The location:

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

The meeting was adjourned at 11:15 AM by Brian Posey, Chairman.

Attachments: March 11, 2014 meeting minutes draft
QART Report – 1st Qtr 2014
Namaste Program Literature
DMOST presentation
Home and Community-Based Services – CMS Final Rule
Health Advocate E-Newsletter of the National Health Law Program