

*Memorandum*

To: Members of the Policy Work Group

From: Karyl Lee Hall

Date: April 21, 2004

Re: Notes from the Meeting of April 7, 2004 at CAHCF

Present: Maggie Ewald, Jennifer Glick, Rick Brown, Jan Van Tassel, Gene Hickey, Julie Robinson, Karyl Lee Hall

1. Correction to Minutes of March 10 Meeting: Jennifer Glick was present.
2. The group discussed possible sources for data concerning characteristics of individuals with behavioral problems in Connecticut nursing homes. Among the sources mentioned were: Incident Reports, MDS, and data collected by OPM. Will Waldo Klein be looking at these sources as part of his upcoming study for the CT LTCOP? Julie will contact Waldo as she has already undertaken considerable research in this area to prevent duplication.

OLR Study of the Rate System for Nursing Homes, circa 1995. Can Rick post this on the groups' new website?

Maggie will talk to Valerie Bryan about incident reports. What is the volume of incident reports? Can we study them in some way? What might be useful information?

3. Rick called our attention to his posting of Connecticut Public Health Code definition sections and on Procedures for Reporting Nursing Home Reportable Events on the new website. The B, D and E categories are probably of most interest to our group.

Discussion as to whether there may be incentives to over-report incidents due to new penalties which may also result in more restrictive admissions and/ or re-admissions screening. How to determine if more restrictive than in past?

4. Discussion of Specialized Units centered on several needs:
  1. Standards for units; possible need for enforcement of standards
  2. Staff training
  3. Survey analysis of physical environment.

Also, possible incentives to promote facility willingness to admit/ readmit individuals

with behavioral issues were raised. For example, Dementia and Alzheimer's patients may present unpredictable symptoms and therefore may be hard to place due to liability concerns). Such incentives might include:

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- a. DSS rate incentives.
- b. Consumer-directed services (such as Cash for Counseling; Money follows the Person models).

Issues: Will an emphasis upon case management and individual consumer choice cause services to be more expensive? Should enforceable standards be set for specialized units?.

5. Jan Van Tassel suggested an informational forum and dialog with legislators to raise the level of comprehension on behavioral issues in nursing homes. Related suggestions included:

Dialogue with Committees of Public Health and Aging. Perhaps a Legislative Breakfast at the LOB? Solicit support of chairs.

Recent Alzheimer's Association Event raised need to inform/educate individual legislators. Julie will talk to a nurse from the Alzheimer's Resource Center. Perhaps, nurse/ expert along with a constituent/ consumer might meet with individual legislator(s).

Community education as outreach to public will be necessary as well.

6. Best Practices as a Response to Behavioral Issues:

Physical Plant - environmental improvements

Nursing Homes fear reprisal from DPH as inhibits creativity and experimentation regarding the admission of difficult patients. Perhaps, Paul Miller at CMS could address federal requirements, their interpretation and how the state administers them.

Consideration given to inviting Paul Miller to attend one of committee meetings as well as possible discussion with Norman Gyle by end of month. Maggie will ask Teresa to contact.

7. Jan reported on Home and Community-based Services Waiver. There is a narrow definition of the target population. The reason some individuals are ending up in nursing facilities is because there are no outside community resources. This is the significance of the waiver. However, waiver does not cover supportive housing.

8. Julie will invite Michael Smith to the next meeting.

9. Other issues to think about:

Adequacy of psychiatric services available to residents of nursing facilities  
What about timeliness and accuracy/perspective of incident reports?  
Should time criteria be considered (ie.should facilities be able to consider historical behaviors not evidenced in last six months as reason not to admit/readmit?)

Next meeting of Large Group is April 30, 2004 at Greater Hartford Legal Aid, 999 Asylum Avenue, 3<sup>rd</sup> . Floor, Hartford, Ct at 9 am.

Next meeting of the Policy Work Group is on May 19, 2004 at CAHCF at 9 am.