



# The Advocate

A Newsletter From Your Regional Ombudsman Program

JANUARY 2009

Serving  
Alexander,  
Burke,  
Caldwell,  
And  
Catawba  
Counties

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## ARE YOU SEEING STARS ??

The new Federal and North Carolina state star rating systems were created to help consumers, their families and caregivers compare facilities more easily and to help identify areas which they may want to ask questions. Here is a summary of the two systems:

**The STATE Adult Care Home Four Star Rating System, implemented January of 2009 is based on compliance with STATE rules or MINIMUM standards.**

Ratings will be posted on the N.C. Division of Health Service Regulation's (DHSR) Adult Care Licensure website. **Here are some highlights:**

- **Adult Care Home Star Ratings are based on the results of annual and follow-up survey inspections by State Surveyors,** and findings (Type A and Unabated Type B violations) by the local County Department of Social Services which have been reviewed and concurred by the Division of Health Service Regulation.
- **The ACH Star Rating System is not like a restaurant star rating system which gives maximum stars for going above and beyond minimum standards.**
- **This rating system is based on an evaluation of the homes compliance with MINIMUM standards or STATE rules and is based on a 100 point scale. All facilities start with 100 points.**
- **Ratings are not based on a facility's comparison with other adult care homes.**
- **The highest rating that an Adult Care Home can receive is 4 stars,** after scoring 100 or greater points on two consecutive annual surveys. No Adult Care Home will receive 4 stars until 2010.
- **Demerit points are subtracted from a facility's rating score for citations and violations of non-compliance cited during an inspection.** Demerit points may also be issued if action is taken by DHSR against a facility's license.

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- **Facilities can receive merit points, which will positively affect their ratings,** for correcting deficiencies and violations and for installing or contracting for a power backup generator or participating in a quality improvement program.
- **A facility may request a follow-up inspection** not less than 60 days after the date of the annual inspection if a facility receives citations on its annual inspection with no Type A or Type B violations and the rating from the annual inspection is one or zero stars. Follow-up inspections will be completed depending upon Division of Health Service Regulation (DHSR) staff availability.

Sources: NC DHSR letter to providers January 2009; TJAAA Ombudsman Program

**ADULT CARE HOME STAR RATING SCALE**



**4 Stars: 100 or more pts on 2 consecutive annual surveys**



**3 Stars: 90.0-99.9 points & for a facility whose score is 100 points or greater on one annual inspection**



**2 Stars: 80.0-89.9 points**



**1 Star: 70.0-79.9 points**

Facilities will not receive a rating until they have had their first annual inspection in 2009, therefore, there are currently no ratings to post. After the survey team has completed a survey and has mailed the survey report to the facility, the star rating certificate and worksheet must be sent to the provider within 45 days from the date the report was mailed. Ratings will be posted monthly, and we expect the first group of star ratings to be posted on the website at the beginning of February 2009.

**The FEDERAL Nursing Home Five Star Rating System, implemented December of 2008, is based on compliance with FEDERAL regulations or MINIMUM standards. Star Ratings can be found at: <http://www.medicare.gov/NHCompare>.**

**Nursing Home Ratings are based on three sources of data—*health inspections, staffing and quality measures*.** Here are some details:

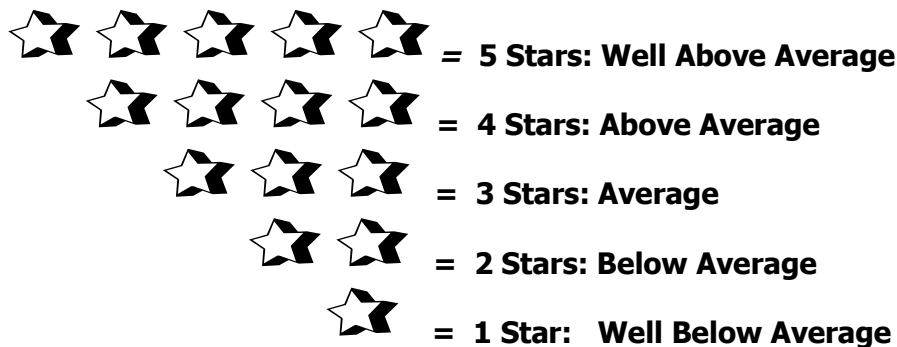
- **Health inspections** look at **ALL major aspects of nursing home care**, about 180 different items, and are conducted by trained state surveyors, looking to assure compliance with **FEDERAL** regulations.
- **Staffing ratings** are derived from a facility's self-reported staffing ratios **2 weeks prior to the (unannounced) annual survey**. Keep in mind that this is merely a 2-week view reported by the facilities themselves and may not be reflective of staffing on a long-term basis.
- **Quality Measures** provide an **in-depth look at how well each nursing home performs on ten important aspects of care**, including the residents' health, physical functioning, mental status, and general well being. Again, this is self-reported data and represents only a few of the many aspects of care important to residents.
- **Nursing Home ratings will remain in effect for one year, so consumers should check with their Ombudsmen to ask if anything has changed during that period of time.** Turnover in key administrative staff can affect quality of care fairly quickly. Just because a facility received 5 stars on its annual inspection does not mean that it is still providing 5-star care; the same holds true for a 1 star facility.

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- **Nursing Home Star Ratings** are based upon their comparison with other nursing homes.

Source: <http://www.medicare.gov/NHCompare>

#### **NURSING HOME STAR RATING SCALE**



According to the Division of Health Service Regulation December 18, 2008 posting, North Carolina has:

57	five star facilities
86	four star facilities
86	three star facilities
68	two star facilities
119	one star facilities

**Note:** Both the STATE Adult Care Home Star Rating System and the FEDERAL Nursing Home Star Rating System provide a "snapshot view" of facilities, and were designed to provide consumers information with which to make informed decisions about placement. While they provide valuable information, consumers should ALWAYS be encouraged to visit facilities, observe how residents are treated, speak with staff, ask questions and use their 5 senses when evaluating a facility. Ratings are one piece of the puzzle.

(Special thanks to the Triangle J Area Agency on Aging Ombudsman Program for the reprint of this information).

#### **LEGISLATIVE UPDATES**

**House Bill 2410—Special Assistance Income Disregard Study:** Directs the Department of Health and Human Services, Division of Aging and Adult Services and Division of Medical Assistance, to study the implementation of an income disregard policy for current State/County Special Assistance and Medicaid recipients who are adversely impacted due to the cost of living or other income increases. The findings and recommendations of the study are to be reported to the Study Commission on Aging, the Senate Appropriations Committee on Health and Human Services, and the House of Representatives Appropriations Subcommittee on Health and Human Services on or before October 1, 2009.

**Senate Bill 1796—Special Assistance/Income Disregard:** Directs the North Carolina Department of Health and Human Services to allow a certain income disregard under the Special Assistance Program. Specifically, the eligibility of Special Assistance residents in adult care homes on or after July 1, 2009, shall not be affected because of annual Social Security, SSI, Veteran, and Railroad Retirement Cost of Living Adjustments.



Advancing Excellence in America's Nursing Homes is a national campaign to improve the quality of care and life for the country's 1.5 million people receiving care in nursing homes. Nursing homes, their staff and consumers can join in this effort by working on the campaign goals, designed to improve quality.

[www.nhqualitycampaign.org](http://www.nhqualitycampaign.org)

## **Goal #8: Improving Consistent Assignment**

### **What does consistent assignment mean?**

Consistent assignment means that residents see the same caregivers (registered nurse, licensed practical nurse or certified nursing assistant) almost every time they are on duty. Many residents are more comfortable with caregivers who know and understand their personal preferences and caregiving needs. Consistent assignment is also called primary assignment.

### **What should you know about consistent assignment?**

Consistent assignment is a key step in giving care that is individualized (resident-centered). Consistent assignment builds strong relationships between residents and staff. Strong relationships are central to quality care for residents and family.

A nursing home adopts "consistent assignment" to strengthen relationships between individual residents, their families, friends and the caregivers. Staff who take care of the same residents are happier in their jobs and tend to stay in their jobs.

### **Benefits for Residents:**

- Residents don't have to explain to new staff how to care for them day after day.
- Residents feel more comfortable with the intimate aspects of care when they know their caregivers.
- Residents feel more secure with caregivers they know.
- Residents with dementia are much more comfortable with familiar caregiver faces.
- Consistent caregivers know what residents' behaviors mean.
- Residents and their families develop relationships with staff over time.

### **Benefits for Consistently Assigned Caregivers:**

- Caregivers know what each resident wants and needs. They can give better individualized care. They are more organized in their work.
- Nurses and nursing assistants who work with the same residents most of the time are more likely to notice slight changes in their health. This can prevent larger health problems.
- Caregivers are more likely to understand and respond to the behaviors of residents with dementia. This is important because residents often let others know what they want and need through their actions.

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- Many staff members like consistent assignment because they are able to really help the residents and make a difference in their lives. These are the reasons why they like working in a nursing home.

### **Benefits for Nursing Homes:**

- Staff get to know each resident's routines and develop a relationship with him or her. This makes a better workplace.
- Caregiver absences are reduced. They are more likely to stay in the job when meaningful relationships develop. Caregivers know they are being counted on by the team members and residents.

### **How do nursing homes achieve consistent assignment?**

Many homes that use consistent assignment stop rotating nursing assistants and nurses from one neighborhood, wing or floor every few weeks. Staff are assigned to one area of the home so that they can serve one group of residents. These consistent assignments apply to nurses and nursing assistants. Sometimes housekeeping, dietary and other members of the caregiving team are also consistently assigned.

Of course, it is not possible for the same nursing assistant or nurse to work the same shift every day of the week. Staff need time off or may need to change their work hours. As a result, residents may see the same team of caregivers during the week. But, they may see a different team on weekends and holidays.

For the Advancing Excellence campaign, a nursing home is successful using "consistent assignment" when staff are caring for the same residents on at least 80% to 85% (percent) of their shifts. This means on at least four out of five days, evenings and nights the resident has the same caregivers.

### **How can you find out whether a nursing home uses consistent assignment?**

- Talk with residents about whether they have a nursing assistant who cares for them most days. If the resident cannot answer or has dementia, talk with the family.
- Ask nursing assistants if they work with the same residents daily over the long term or whether they sometimes rotate to another group of residents.
- Ask the director of nursing and the nursing home administrator how nursing assistants are assigned to care for certain residents.
- Ask if the nursing home uses consistent assignment.

### **How can you encourage consistent assignment?**

- Encourage the nursing home to join Advancing Excellence and chose consistent assignment as a facility goal.
- If the nursing home does not currently use consistent assignment, talk with the director of nursing and the nursing home administrator. Ask them to test it on a small scale (one neighborhood, wing or shift of the nursing home). In this way, problems that are likely to come up can be solved on a small scale. Management and staff can see how it works. Then, they will feel more comfortable using consistent assignment in the whole building.

***Find out if your nursing home is part of the Advancing Excellence Campaign.  
To sign up or get more information, go to [www.nhqualitycampaign.org](http://www.nhqualitycampaign.org)***



**Patient Safety Awareness Week (PSAW)** is a national education and awareness-building campaign for improving patient safety at the local level. Hospitals and healthcare organizations across the country are encouraged to plan events to promote patient safety within their own organizations. Educational activities are centered on educating patients on how to become involved in their own health care, as well as working with hospitals to build partnerships with their patient community.

### **Actions to take to help protect yourself**

- Rid your medicine cabinets of old or expired medications.
- Bring your medications to your doctor or pharmacist for review.
- Obtain copies of all your healthcare records and keep them in a safe place.
- Write down and carry with you all of your prescription and over the counter medications (including doses), as well as any allergies.
- Write down and carry with you the names and numbers of all of your healthcare providers and pharmacies.
- Identify an advocate (either family member or friend) who can accompany you and ask questions on your behalf.
- Talk with your family or other close individuals about what your preferences are for your healthcare, in case you are unable to speak for yourself.

### **Communicate and partner with residents and families**

- Offer a suggestion box for residents and families.
- Hold an open house, brown bag lunch, or round table discussion for residents and families with a resident safety topic of discussion.
- Conduct surveys for the public to express their concerns about healthcare safety.
- Provide a journal or message board for patients to write down their stories and/or concerns.

### **Increase resident safety in your hospital or organization**

- Announce award programs and incentives.
- Provide a drop box for suggestions from staff to improve patient safety.
- Conduct a survey of staff about their safety concerns and recommendations.
- Hold an information session about resident safety.
- Hold a round table discussion with staff to discuss safety concerns.
- Bring in a resident/family speaker to speak to staff about an experience with a medical error and about prevention.
- Establish a Resident and Family Advisory Council in your facility.
- Show educational films.
- Have a pharmacist available to answer questions in the lobby.

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### Educate residents and families

- Distribute literature in the lobby.
- Distribute medication safety pamphlets.
- Host a panel presentation and discussion.
- Invite speakers to come and speak about healthcare issues.
- Invite residents to bring their medications for review by a pharmacist.
- Empower residents by providing information on what they can do if they experience an error.

For more information visit the website: [www.npsf.org](http://www.npsf.org)

### DID YOU KNOW?

Over 50 residents shared their ideas about this year's Residents' Rights Week theme, "Recipe for Home: Defining and Creating Home in Long-Term Care Facilities." Entries ranged from scrapbook pages to poetry. Read what residents have to say by going to: [www.ltcombudsman.org](http://www.ltcombudsman.org) for more information! Here is a great example:

10 cups of Residents  
 3 shifts of loving and caring CNA's  
 8 people who work in the front office  
 1 Administrator who leads them all  
 4 Ladies who take care of our clothes  
 5 People who take care of our cleaning  
 A handful of people who make sure we eat

Put this all together with love and care that comes with these amazing people when they come to work. There is a bond that I as a long-term care resident have, I feel the love that they have for me and I'm sure they feel my love.

I watch how hard they work to take care of us. There really isn't much to say about these people except I'm glad God gave me the best guardian angels He had to watch over me.

Thanks guys, I love all of you.

Brenda Yates  
 Sunbridge, Lexington, KY

## EVENTS AND TRAINING OPPORTUNITIES

Geriatric Mental Health Workshop  
Catawba Valley Medical Center  
AHEC 112  
810 Fairgrove Church Road SE  
Hickory, NC  
April 2 - 3, 2009 and May 7 - 8, 2009

The curriculum provides an overview of mental health disorders in the older adult; intimacy issues; challenging behaviors; geriatric assessment; psychopharmacology and older adults; transitions; legal issues; and the impact of hearing impairment on mental health. It addresses a wide range of issues related to geriatric mental health from the perspective of both prevention and intervention. For registration information, contact Libby Phillips of CARES (Center for Aging Research and Educational Services) at (919) 962-0650 or visit the CARES website (<http://www.ncswLearn.org>)

**The North Carolina Guardianship Association 2009 Annual Conference**  
**University Place Hilton**  
**Charlotte, NC**  
**April 22 - April 23, 2009**

DVD available from our Library: Strength in Numbers: The importance of Nursing Home Family Councils (2008) - 21 minutes. This DVD provides an overview of the focus, techniques, and strategies of effective family council development. If interested in checking out this DVD please contact Roxanne Powell, Ombudsman, 828-485-4213.

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