



Weekly Roundup

...Reporting the state and national long term care news

Please disseminate relevant information to the appropriate department.

- Administration Nursing Dietary Activities Social Services
 Rehabilitation Housekeeping Maintenance Laundry

Friday, August 2, 2013

ANHA NEWS

Ms. Alabama Nursing Home Ready to Visit Facilities/Attend Special Events *Contact Enterprise Health & Rehab Center to Book an Appearance*



Over 250 people from across the community recently attended a reception at Enterprise Health & Rehab Center in honor of Ms. Alabama Nursing Home 2013 Verdell Goodson. Pictured is Enterprise Mayor Kenneth Boswell congratulating Mrs. Goodson on behalf of the city.

Mrs. Goodson is ready to travel the state to visit your nursing home or attend community events. Please contact Brenda Cooley at Enterprise Health & Rehab Center at (334) 347-9541 or bgccac@gmail.com.

ANHA Office Schedule

The Association Office will be closed Thursday, August 8 through Friday, August 9 due to the ANHA Owners' Meeting. The office will re-open on Monday, August 12 at 8:00 a.m.

Seminars for 2013 ANHA Owners' Meeting & Educational Symposium

Join ANHA for the 2013 Owners' Meeting and Educational Symposium. The event will be held August 8-10 at the Inn on Biltmore Estate in Asheville, North Carolina. The annual owners' meeting and breakfast will be held on August 10.

Overnight group rates have been negotiated with the hotel for this meeting at a rate of **\$249** per night. To make overnight reservations, please contact the hotel at 866-779-6277 and identify yourself as being part of the Alabama Nursing Home Association.

This entire event has been approved for a total of four (4) hours of continuing education credit for nursing home administrators. *Please see the attached flyer for more details.*

Sponsored by:

American Medical Technologies
Associated LTC Insurance Company
Felder Services
Gericare Medical Supply
Healthcare Services Group, Inc.

AJG/Robinson-Adams Insurance
Senior Care Pharmacy
Sherlock, Smith & Adams
Starnes Davis Florie, LLP

Registration Open for Alabama's Best Practices

Registration is open for the Alabama's Best Practices Program on August 29, 2013, at the Cahaba Grand Conference Center in Birmingham. The event has been approved for six (6) hours of continuing education credit for administrators, risk managers and social workers. Approvals are pending for assisted living administrators and activity professionals. It has also been approved for 7.2 contact hours of continuing education for nurses. The Alabama Nursing Home Association is an approved provider by the Alabama Board of Nursing (ABNP0151- expires 3/12/2017). *Please see the attached flyer for more details.*

Congratulations to the following facilities that have been chosen to make presentations for the 2013 Best Practices Program:

"Serenity Suite"	Oak Park Nursing Home
"Caring Paws"	Arbor Springs Health & Rehab Center
"5-Alive"	Hanceville Nursing and Rehab Center
"Off the Chain"	Coosa Valley Nursing Home
"Young Bloods"	Athens Rehabilitation Center & Senior Care
"Weight Watchers' Happy Hour"	River City Center
"Hicks & Giggles"	Haleyville Health and Rehab
"DARE to Care Program"	South Haven Health & Rehab - Birmingham

Participants will also receive information from twelve other facilities about their Best Practices.

CNA and Employee Recognition at Alabama's Best Practices

Alabama's Best Practices will continue the tradition of recognizing Certified Nursing Assistants and other outstanding staff members for their contributions to the high quality of care our residents receive and the successful operation of our nursing homes. The deadline for submission is August 16. *Please see the attached form for additional information.* If you have questions, contact John Matson at the Association office at (334) 271-6214 or jmatson@anha.org.

NATIONAL NEWS

CMS FY 2014 SNF PPS Final Rule

The Centers for Medicare & Medicaid Services (CMS) issued a final rule (http://www.ofr.gov/OFRUpload/OFRData/2013-18776_PI.pdf) outlining fiscal year (FY) 2014 Medicare payment rates for skilled nursing facilities. Below are major provisions of the final rule.

- The final rule provides for a **net market basket update for SNFs of 1.3% beginning October 1, 2013**. The 1.3% market basket update reflects a full market basket increase of 2.3%, less a 0.5% multifactor productivity adjustment (MFP) required by Section 3401(b) of the Affordable Care Act (ACA), and a 0.5% adjustment to correct for an error in forecasting the market basket in FY 2012. CMS estimates that the net market basket update would **increase SNF payments by approximately \$470 million in FY 2014 (about \$7 per Medicare patient day)**.
- The 1.3% update is 0.1 percentage points lower than the 1.4% update noted in the proposed rule due to an updated projection of the MFP adjustment. The MFP adjustment of 0.4 percentage points set forth in the proposed rule was based on IGI's first quarter 2013 forecast. The 0.5 percentage point MFP adjustment set forth in the final rule is based on updated IGI data from their second quarter 2013 forecast.
- The final rule reduces the market basket update by 0.5 percentage points to correct for an error in forecasting the market basket in FY 2012. The SNF PPS includes a provision to adjust payment rates for market basket forecasting errors whenever the difference between the forecasted and actual change in the market basket exceeds a 0.5 percentage point threshold. Since the 0.51% error in forecasting the FY 2012 market basket exceeds the 0.5% threshold, CMS will reduce the market basket by 0.5 percentage points in FY 2014.
- CMS will rebase and revise their market basket update methodology for the SNF PPS to use more current Medicare cost report information for FY 2014. The rebasing will modify and update the weights of the various cost categories to reflect FY 2010 Medicare cost report relative costs rather than the current 2004 Medicare cost report based market basket cost weights, and modify some of the price proxies used to forecast increases for the various cost categories.
- In the final rule, CMS clarifies that the qualifying condition for the Rehab Medium RUG categories require 5 distinct calendar days of therapy and that the Rehab Low RUG categories require 3 distinct calendar days of therapy. As such, CMS will modify the RUG-IV grouper and add an item to the MDS (O0420) to record the number of distinct calendar days of therapy provided by all rehabilitation disciplines to a beneficiary over the seven day look-back period.

A detailed overview of the final rule will be available for download on the AHCA SNF PPS web page (http://www.ahcancal.org/facility_operations/medicare/Pages/SNFPSS.aspx) soon. The final rule will be published in the Federal Register on August 6th.

OIG Releases Report Regarding Observation Stays

The Department of Health and Human Services' Office of the Inspector General (OIG) has released a memorandum report (<http://oig.hhs.gov/oei/reports/oei-02-12-00040.pdf>) which focuses on years of concerns by both provider and beneficiary organizations about the fact that the distinction between an inpatient and observation stay is not always clear, and outlines that the recent Centers for Medicare and Medicaid Services' (CMS') proposed rule on the issue would not reduce the number of observation stays. According to the OIG report, beneficiaries had 617,702 hospital stays that lasted at least 3 nights, but did not include 3 inpatient nights; these beneficiaries did not qualify for SNF services under Medicare.

AHCA/NCAL continues to diligently work to urge lawmakers to count all days spent in the hospital towards the three-day stay required for beneficiaries to be eligible for Medicare coverage of subsequent post-acute care in a skilled nursing care center. AHCA/NCAL has had

hundreds of its long term and post-acute professionals in DC this year storming Capitol Hill to advocate for the [Improving Access to Medicare Coverage Act of 2013](#) (S. 569/H.R. 1179), which would deem time an individual spends under observation status eligible to count towards satisfying the three-day requirement.

CMS Issues MLN Matters Regarding Outpatient Therapy

The Centers for Medicare and Medicaid Services (CMS) has issued a new MLN Matters Article SE1307 regarding Outpatient Therapy Functional Reporting Requirements. A copy of the article can be located at: <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/SE1307.pdf>

CMS Issues MLN Matters Regarding Bundled Payments

On July 29th The Centers for Medicare and Medicaid Services (CMS) published an MLN Matters Article on the Bundled Payments for Care Improvement (BPCI) demonstration, including operational details for Model 4 participants (hospitals only). Although the publication only discusses how Model 4 of the demonstration will be operationalized, insights can be drawn as to how the other the models will work as well, including those involving SNFs and other post-acute providers. Our member facilities still moving forward with the BPCI demonstration will be very familiar with this information, but it may be new to the membership in general.

The publication can be accessed by clicking here: <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM8070.pdf>

Of note, the publication goes into detail on the following issues:

- How beneficiaries will be determined eligible for inclusion in the bundled payment;
- How cost-sharing obligations will be managed under bundled payments;
- Claims submission, payment, and appeals issues;
- The Notice of Admission (NOA) process;
- How readmissions will be identified and addressed; and
- Details on payment rates and adjusters.

OIG Releases Exclusion Guidance

HHS, Office of Inspector General (OIG) recently released *Updated Special Advisory Bulletin on the Effect of Exclusion from Participation in Federal Health Care Programs*, which is OIG's first published guidance on "exclusions" since 1999. By way of background, the effect of an OIG exclusion is that no federal health care program (*e.g.*, Medicare or Medicaid) may pay for items or services: 1) furnished by an excluded person, or 2) directed or prescribed by an excluded person. The new guidance emphasizes that the payment prohibition applies to all methods of federal health care program payment, whether from itemized claims, cost reports, fee schedules, capitated payments, a prospective payment system or other bundled payment, or other payment system and applies even if the payment is made to a state agency or a person that is not excluded.

Under the federal civil monetary penalty ("CMP") rules, a provider may be liable for up to \$10,000 for each item or service furnished, directly or indirectly, by an excluded person, and up to three times the total amount claimed for such items or services. The new guidance casts the exclusion net very wide, offering examples of a number of excluded individuals with indirect

relationships to providers to which the prohibition applies, including health care professionals that volunteer at hospitals or skilled nursing centers. The new guidance also provides guidance regarding best practices for screening current and potential employees and contractors for excluded status. OIG recommends searching the OIG-administered List of Excluded Individuals and Entities (“LEIE”) prior to hiring or contracting with an individual or company. OIG also suggests that providers review LEIE for current contractors and employees on a monthly basis, for any job category or contractual relationship where the item or service being provided is payable by a Federal health care program. OIG also cautions against relying on other databases, such as the GSA’s System for Award Management (“SAM”) or the National Practitioner Database, as a provider’s primary source for exclusion screening. To obtain the OIG guidance click <http://oig.hhs.gov/exclusions/files/sab-05092013.pdf>.

CMS Guidance on Medicare Demand Letters Associated with an Item or Service Provided to Incarcerated Beneficiaries

Important guidance from the Centers for Medicare and Medicaid Services (CMS) regarding Demand Letters to Medicare Providers and Suppliers Associated with an Item or Service Provided to Incarcerated Beneficiaries has been issued. Link to the guidance: <http://www.cms.gov/Medicare/Medicare-Contracting/FFSProvCustSvcGen/Downloads/DemandLetters.pdf>

SNFs to Receive PEPPER Postcard

ANHA has been notified that a CMS contractor, TMF Health Quality Institute [HQI], that HQI had sent out, via regular mail, an informational postcard to all 15,000+ SNFs. The postcard indicates that all SNF providers will soon receive a report called the Program for Evaluating Payment Patterns Electronic Report (PEPPER). This report provides Medicare claims data in specific targeted areas comparing the SNF to other SNFs throughout the US. The Report will be mailed to SNFs via regular mail on August 30.

The Pepper program was initiated in 2003, but since 2003 has focused on other types of providers over the years. It is now adding SNFs. PEPPER gives provider-specific Medicare data statistics for services vulnerable to improper payments, according to the federal government, and allows providers to see how their facility compares to all other SNFs across the state, nation or MAC jurisdiction. For SNFs, the targeted areas were determined by recent OIG reports in 2010 and 2012 and conversations with CMS staff, and include: a) Therapy RUGs with High ADLs; b) Nontherapy RUGs with High ADLs; and c) Change of Therapy Assessment.

PEPPER data will be shared with both the MACs and the Medicare Recovery Auditors (RAs); but not the Zone Program Integrity Contractors (ZPICs). HQI did acknowledge, however, that CMS contractors have much more sophisticated databases and systems for looking at SNF Medicare claims data. To obtain more information on SNF PEPPER, you may visit <http://www.pepperresources.com/>.

STATE NEWS

New Alabama Law Permits Employees to Have Guns in Vehicles on Employer Property

Editor's Note: This article was provided by ANHA legal counsel and Associate Member Johnston Barton Proctor and Rose, LLP.

Starting on August 1, 2013, Alabama employees have the right to lawfully possess guns in their vehicles on company property. Although employers may still prohibit guns in the workplace and prohibit workplace violence, employers may no longer have a blanket prohibition on all guns on their property.

According to new amendments to Section 40-12-143 of the Alabama Code made by Senate Bill 286, an employee may bring a gun to work in a vehicle if he or she (1) drives or parks in the parking lot or other place where employee vehicles are allowed; (2) hides guns from ordinary view and locks them up when the vehicle is unattended; and (3) has a valid concealed weapon permit or a valid hunting license and meets other requirements for possessing hunting firearms during hunting season only.

Limitations Based on Risk of Harm

If an employer believes that an employee presents a risk of harm to him or herself or others, then it may lawfully ask whether the employee has a firearm in his or her vehicle. If an employee does have a firearm in his or her vehicle, then the employer may make any inquiry to determine whether the employee meets all of the law's requirements. For example, an employer may prohibit an employee who does not have a concealed weapon permit from having a hunting firearm if the employee has documented incidents of workplace threats or violence, mental health issues, violent criminal conviction, or a domestic violence order. If the employee fails to comply with the law's requirements, then the employer may discipline or take other employment action against that employee.

As always, employers may report potential criminal activity to law enforcement. For example, an employer may report an employee's threats to harm him or herself or others, or that the employee's vehicle contains an illegal firearm, stolen property, or other illegal items. If law enforcement officers discover illegal items in an employee's vehicle, then the employer may discipline or take other employment action against that employee.

However, an employer may not discipline or terminate an employee based solely on the presence of the firearm, if an employee is in compliance with the law's requirements regarding gun possession in his or her vehicle. After a forty-five (45) day demand period following discipline or termination, an employee may sue his or her employer to recover compensation for lost wages, benefits, or other damages to enforce this provision.

Further Limitations at Certain Healthcare and Other Sensitive Facilities

Despite the law's new rights to lawfully possess guns, certain healthcare facilities may be able to prohibit individuals from possessing firearms inside and on their premises, even persons with lawful concealed pistol permits. The Act prohibits knowingly possessing or carrying a firearm inside or on the premises of facilities providing inpatient or custodial care of those with

psychiatric, mental, or emotional disorders. This provision also applies inside and on the premises of jails and prisons, and inside courthouses and police stations. Facilities covered by this provision must place a notice at the public entrance of such premises or buildings alerting those entering that firearms are prohibited. A violation of this provision is a Class C misdemeanor.

New Protections for Employers

The new law provides employers with immunity from liability for damages relating to a firearm brought onto their property, as long as the employer does not commit an affirmative wrongful act that causes harm to another. Employers have no duty to patrol or inspect employee parking areas, or to investigate whether an employee meets requirements for possessing a firearm in his or her vehicle. Also, the presence of a firearm on the employer's property does not constitute a failure to maintain a safe workplace.

Finally, Alabama's self-defense law, AL 13A-3-23, will be amended as of August 1, to permit owners and employees to use deadly force in self-defense or the defense of another during an attempted or actual serious crime when the business is closed. This includes crimes involving death, serious physical injury, robbery, kidnapping, rape, sodomy, or a crime of a sexual nature involving a child under the age of 12.

In conclusion, employers should consult an attorney about integrating the new law's provisions into any existing workplace safety policy. It is also advisable to consult with attorneys before an employer makes inquiries into an employee's possession of a gun in his or her vehicle. At the same time, employers will receive some new protections from liability for guns in their parking lots and to use deadly force in defense of themselves or others.

ANHA Encourages Use of Medicaid EXPEDITE System

Members of the Alabama Nursing Home Association have been meeting regularly with Medicaid since last fall on ideas and ways in which we can improve the current Medicaid Nursing Home Eligibility process. As a result of our joint efforts, we now have an online web portal (EXPEDITE) for nursing facilities and residents/sponsors to use in order to complete the Medicaid application online and submit it electronically. Submitting a hard copy of the application is still an option.

We held 8 webinars during the month of June and a copy of Session #3 Expedite Nursing Home Training delivered Tuesday, June 4, 2013, is now available on the public Alabama Medicaid site at this address:

http://www.medicaid.alabama.gov/documents/3.0_Apply/3.5_Expedite/3.5_EXPEDITE_Web_Portal_6-13-13.wmv

For more information please visit the Medicaid website at www.medicaid.alabama.gov, click "Apply for Medicaid", then "Expedite On Line Nursing Home Application System". You may also try this link: http://medicaid.alabama.gov/CONTENT/3.0_Apply/3.5_Expedite.aspx. ANHA encourages you to utilize this tool and submit applications via the EXPEDITE System.

Alabama Board of Nursing: LPNs Must Have Citizenship Verified

Renewal for licensed practical nurses will begin September 1, 2013. The Alabama Board of Nursing (ABN) must have verified citizenship or the LPN will not be able to renew. As of Friday, July 12, 2013, the numbers are as follows:

- Total Active and Active Probation LPNs: 18,711
- Total Active and Active Probation LPNs Verified: 3,450
- Percentage Verified: 18.43%

While ABN has a few more to verify, it will not come close to the total that are eligible to renew. **If you have LPNs in your organization, please remind them to get their citizenship verification in ASAP.** LPNS and RNs can check to see if their citizenship has been verified by going to <https://www.abn.alabama.gov/abnonline/MyprofileLogin.aspx> and using the license number and last 4 digits of the social security number, signing in to the profile. For citizenship purposes, this will be what the licensed nurse will see (with the information filled in) and if citizenship has been verified, it will reflect “yes” in the citizenship verified box. If the citizenship has not been verified (meaning ABN has not entered it in the licensing database), it will say “no”. However, ABN is sending hundreds back because the submitted documents are illegible or the wrong checklist was sent in or the checklist without documents. If ABN sends the information back to the licensed nurse, it should be returned to us as soon as possible so they can verify citizenship.

Changes to Medicaid Hospice Election and Physician’s Certification Form 165

Hospice providers are required to include within the medical record a Medicaid Hospice Election and Physician’s Certification form (Form 165) that has been signed and dated by the physician. The exception to this is when an individual is eligible for Medicare as well as Medicaid. In that case, the Medicare election form will continue to serve as election for both hospice programs.

Form 165 was recently revised to include blanks to enter the ***Date of Benefit Period*** and the ***Date Physician Signed***. Effective September 1, 2013, all Hospice Providers should discard all copies of the previous Form 165 and utilize the revised form.

The revised Form 165 and the *Instructions for Completion of Hospice Election Form 165* will be located on the Agency’s website, effective September 1, 2013 and can be accessed at the following:

http://medicaid.alabama.gov/CONTENT/5.0_Resources/5.4_Forms_Library/5.4.3_LTC_Forms.a_spx, then go to the Form 165.

For questions or concerns regarding the Medicaid Hospice Program, please contact Felicha Fisher at (334) 353-5153.

Update on New Power of Attorney (POA) Law

Governor Robert Bentley signed the “Protecting Alabama’s Elders Act” into law in May 2013. This act makes misuse of the POA a felony. As with most new laws, there is a waiting period for the effective date. The effective date for this new law is September 1, 2013. While we will have more guidance for you nearer to the effective date, we think it is important to let you know that the September 1, 2013, effective date will be an important date for you to remember. This is because the law applies only to POA’s who misuse an individual’s funds/property AFTER September 1, 2013. Those who have used funds or transferred properties inappropriately prior to September 1, 2013, will fall under the old laws which require that the individual actually file a lawsuit in Circuit Court to attempt to have resources returned or to gain financial compensation for assets which were misused by the POA. It is also important to note that this law does not change the existing Adult Protective Services laws and there will continue to be the need to

contact DHR for assistance in all appropriate cases. *Editor's Note: This article was provided by ANHA Associate Member Healthcare Compensation Solutions.*

Nurse Aide Abuse Registry

Please note that the following individual has been placed on the Alabama Nurse Aide Abuse and/or Sanction Registry. This individual is prohibited from working in any long-term care facility. To check nurse aides, you can use the nurse aide web site at www.adph.org (Click on Contents A-Z - located in the dark blue at the top of the screen - then Click on Nurse Aide Registry - then Click in the white box and type in the Social Security Number of the person you are trying to find. Be sure and include the dashes in the SSN.)

<u>Name</u>	<u>Effective Date</u>
Jessica Moten	7/31/2013

OTHER NEWS

ADPH Offers Webcast on Beliefs about Death

The Alabama Department of Public Health's Training Network is offering a live webcast called, "Changing American Beliefs about Death: It's OK to Die." This program will take place on Tuesday, August 20 from 1:00 p.m. until 3:00 p.m.

To see the conference flyer for this program [click here](#). To register for this program [click here](#). To view all upcoming programs, visit: www.adph.org/alphntn.

New AHCA Resource - CHATs

A Communicating Health Assessments by Telephone (CHATs) has been posted on the AHCA Quality Initiative website at http://www.ahcancal.org/QUALITY_IMPROVEMENT/QUALITYINITIATIVE/Pages/default.aspx. Click on Safely Reduce Hospital Readmissions, look under Resources, and scroll down to the 3rd resource. The CHATs are linked to the AHCA website under Clinical Practice and they can be found there as well.

The CHAT is an alternative to SBAR and is used for reporting assessment information to the physician. There are 16 CHATs and each one is related to a common geriatric condition. In testing, clinicians found the CHATs easy to use. Thus, the CHAT can be used as the nurse/physician communication tool or as a beginning step in preparing clinicians to eventually use SBAR.

The webpage contains all the CHATs, each containing a progress note, for completing and inserting in the medical record. In addition, the website contains a one-page on What is CHAT and a one-page on How to Use CHAT.

We encourage members to use the Quality Initiative and Clinical Practice websites, the CHATs and all the other available resources.

Changes Coming to AHCA Quality Award Program

The AHCA National Quality Award program is introducing a new recertification policy effective for the 2014 award cycle that impacts all current and previous AHCA National Quality award recipients. Under this policy, Bronze and Silver Quality Award recipients will have a limited amount of time to apply for the next award level (Silver or Gold) before being designated as a “past recipient” of the award, a status that requires the facility to reapply at the Bronze level if it decides to participate in the program again.

Currently, award recipients are not limited to the number of years they can promote their center as a Quality Award recipient. Centers are responsible for reading and complying with the recertification policy, which is available in full on the [AHCA/NCAL National Quality Award website](#).

Please contact quality-award@ahca.org with questions about the new policy, a center’s current status, or general questions about the National Quality Award program.

Upcoming AHCA Webinars

Webinar: Implementing the Affordable Care Act: Countdown for Understanding Employer Requirements

Date & Time: Tuesday, August 6, 2013, 1:00 p.m.–2:00 p.m.

Speakers: Nancy Taylor, Attorney, Greenberg Traurig

Registration Link: <http://webinars.ahcancal.org/session.php?id=11155>

Session Description: Beginning in 2014 employers with 50 or more full-time or “full-time equivalent” employees during the previous calendar year must offer minimum essential health care coverage or pay a penalty. However, simply offering coverage to employees may not be enough to comply with the law.

Learning Objectives:

- What kind of coverage do you need to offer to you employees?
- Does your plan measure up to the minimum value requirements?
- Is your health care plan affordable, according to the ACA employer–mandated definition? What types of plans can continue into 2014?
- What can a self-insured group do with wellness incentives?

Save the Dates and Listen to Pre-recorded Webinar Events – August 6, 20, September 4, 10

Be Prepared. Don’t Let New Surveyor Guidance for F309 Catch You Off-Guard!

The Centers for Medicare and Medicaid Services (CMS) recently released new surveyor guidance to assess compliance with F309 and F329 as they relate to residents with dementia and use of antipsychotic drugs. AHCA is pleased to offer a series of six, brief, fast-moving and content-rich webinars to help your nursing center ensure that you are well-prepared for these changes. Webinars will be grounded in a QAPI approach and provide strategies for achieving compliance with the new guidance. **Each webinar is 30-minutes and will be available on-demand.** The first webinar in the series will be available during the week of July 9. Please visit the American Health Care Association (AHCA) website <http://webinars.ahcancal.org/index.php> for more information.

Week of August 6

F 309 & Antipsychotics?! Compliance?! QAPI?! : Your Integrated Pathway to Dementia Care.
Part Three: Mining the Family Gold

Speaker: Marguerite McLaughlin, Senior Director of Quality Improvement, AHCA

Session Description: New guidance at F309 anticipates families being engaged and providing information to nursing centers about helpful approaches when caring for their family member. The information the families possess is equivalent to gold nuggets. What they know is boundless and immensely helpful in providing individualized care. Creating a climate where families are regarded as allies and partners who not only enhances care but also makes great business sense! Join us for this short and energizing session that offers insights into engaging families.

Learning Objectives:

1. Explore ideas that enhance the level of family engagement
2. Examine ways that families skills and talents can be put to use in your setting
3. Consider small steps that can more fully engage families

AQAF Offers Hand-In-Hand Training

The Alabama Quality Assurance Foundation (AQAF) would like to help you comply with Section 6121 of the Affordable Care Act of 2010. The *Hand in Hand Training Series* is being made available to you and your staff as part of AQAF's Statewide Learning Action Network events. AQAF is offering 25 "Train the Trainer" educational events over the next 12 months, beginning July, 10 2013. The first training session will be held in the Mobile area at Allen Memorial Home.

As many of you are aware, CMS, supported by a team of training developers and subject matter experts, created the *Hand in Hand Training Series* to ensure that nurse aides receive regular training on caring for residents with dementia, and on preventing abuse. Additionally, the series aligns with the National Partnership to Improve Dementia Care.

CMS provided to every nursing home in the country a copy of the Hand in Hand Training Series Toolkit. The toolkit is contained within a very large binder. Do you know where your binder is? Have you had the opportunity to start training? Not to worry – let AQAF help you!

The training is best done with relatively small groups due to the nature of the training and the interactive component. They plan to limit attendance to 30 per session. AQAF encourages you to take advantage of this educational opportunity! Do not wait to register as it is anticipated that the sessions will fill up quickly. *Please refer to the attached flyer for event details.*

Funding Available for Applied Research Projects to Advance Person-Centered Care

The Harvey Picker Center of Innovation and Applied Research Program is seeking proposals for specific interventions and innovations within long term care settings that facilitate the development and advancement of person-centered cultures and person-centered care within the healthcare delivery system. The expected outcome of a grantee's project will be a demonstration, including a robust dissemination plan, of the measurable effects, affordability and sustainability of the effort to advance person-centered cultures and/or the implementation of person-centered care. The project must be consistent with one or more of the Planetree or Picker Principles of Patient-Centered Care. Details regarding the application process and eligibility can be found in

the Request for Proposals at
<http://newsmanager.commpartners.com/ahcamemo/downloads/Ruta01.pdf>.

The purpose of the Harvey Picker Center of Innovation and Applied Research Program is to provide annual grants to support research of innovative projects which are designed to facilitate successful initiatives that will advance the development of person-centered cultures and implementation of person-centered care across the spectrum of long-term care settings and services.

AHCA Quality Improvement Toolkits/Webinars

The 4 Key Strategies to Retain New Hires and Reduce Employee Turnover (toolkit and webinar) and the *Clinical Considerations of Antipsychotic Management* (Toolkit and webinar) are available (free) to all AHCA members at: <http://qualityinitiative.ahcancal.org>. This resource uses a process framework, based on the Nursing Process, to identify care objectives and expectations. It identifies tools and resources to help providers successfully manage antipsychotic medication use at the resident and facility level. The guide focuses on 7 critical steps needed to ensure quality outcomes that are successful and continuous.

Members will need to log-in to access the toolkits, as it is a member-only benefit. If log-in information is needed, please contact your facility Administrator or State Association and they can give you the information you need.

AHCA Expo Hall has Cutting-Edge Solutions for Long Term Health Care More Than 50 New Companies to Attend

The Expo Hall is a big part of the AHCA convention experience, and it is setting it up to be value-packed for you. See demonstrations, pick up sample products, and meet and talk to the experts and suppliers who are working to provide you with exactly what you need to meet today's challenges in the industry. Over 250 companies specializing in everything from transportation to furniture and equipment to the latest technology solutions for long term health care will be there for you to explore. You're sure to hear about money-saving ideas and learn about new products and services that will make your job easier. Don't miss all the special prizes, give-a-ways, and fun events.

Enjoy a Complimentary Lunch in the Expo Hall

The Expo Hall is also a great place to network with your peers and catch up with people from all over the country. Enjoy a plated buffet-style lunch with a variety of great food choices, complimentary to attendees.

Expo hall hours are Monday, October 7, 11:00 a.m.-2:30 p.m. and Tuesday, October 8, 11:30 a.m.-2:30 p.m.

Find out more and see which vendors will be attending by visiting the convention web site at ahcaconvention.org. Register for convention today. Advance Registration runs through September 9, but don't delay. Hotel rooms are going fast!

CALENDAR OF EVENTS

<u><i>Date</i></u>	<u><i>Event</i></u>	<u><i>Location</i></u>	<u><i>Time</i></u>
August 9	ANHA Region VII Meeting & Election Meal Sponsored by RxAdvantage	Felix's Fish Camp Mobile	12:00 p.m.
August 13	Ribbon Cutting & Open House For New Rehab Unit	Jacksonville Health & Rehab Jacksonville	4:00 p.m.
August 14	ANHA Region II Act/SS Auxiliary Meeting RSVP: Mary Anne Parsons (256) 599-4895 Speaker Topic: Music Therapy	Catfish Cabin Albertville	11:00 a.m.

Alabama Nursing Home Association
 4156 Carmichael Road ♦ Montgomery, AL 36106 ♦ PH: (334) 271-6214 ♦ FAX: (334) 244-6509
 Links:
 Alabama Nursing Home Association <http://www.anha.org>
 AL Board of Examiners of Nursing Home Administrators <http://www.alboenha.state.al.us>
 AL Dept. of Public Health <http://www.adph.org>
 CMS <http://cms.gov>