

Approved Minutes of LTCCC Meeting of May 9, 2007

**Meeting held at Berkshire Place Nursing Home, 455 Douglas Avenue,
Providence, RI**

Attendees:

Lt. Governor Elizabeth Roberts

Maureen Maigret

Maria Barros

Bonnie Sekeres

Jim Flanagan

Sr. Marietta Walsh

Dr. David Dosa

John O'Hara

Stefan Gravenstein

Raymond Rusin

Roberta Merkle

Christopher Novak

Cynthia Conant-Arp

Elizabeth Morancy

Jennifer Jaswell

Joan Kwiatkowski

Bonnie Larson

Analee Wulfkuhle

Susan Sweet

John Cabral

Robert DiCenso

Susan Saccoccia Olson

Senator June Gibbs

Jennifer Wood

Daniel Meuse

Meeting was called to order at 10:07am by Senator June Gibbs.

Upon a motion the minutes from the previous meeting were unanimously accepted.

The Chair called on Dan Meuse from the office of Lt. Governor to present an update of legislation supported by the council. Mr. Meuse presented a report on those bills on which action had been taken. An outline of the current status of the legislation was also distributed to the council. Mr. Meuse also offered copies of the letters sent by the Lieutenant Governor on behalf of the council to committee chairpersons holding the bills.

A question was raised as to why a letter regarding the CIS networks was not included in the list of bills. Mr. Meuse stated that the office of Lieutenant Governor was finalizing the drafting of that letter to ensure the letter captured the sense of the council. An additional question was raised about the department of elderly affairs proposal to consolidate the CIS networks into certain communities and how those communities would be chosen. It was stated that the

communities would be chosen by RFP process.

A statement was made that the Adult Day Centers have no objection to the budget article moving the licensing and regulation of adult day centers from DEA to Health. In addition, the association would like to see an amendment to ensure proper funding for Health to accommodate the additional responsibility as well as increased funding for adult day centers if additional mandates are imposed on centers.

The chair moved to the report on Perry/Sullivan implementation, starting with Roberta Merkel, who chairs the quality committee of the Perry/Sullivan workgroup. Ms. Merkel stated that the committee is working on quality indicators for home and community based services as well as engaging the community in getting involved to set these indicators.

Joan Kwaitkowski, chair of the finance committee of the Perry/Sullivan implementation workgroup began describing the work of the committee and was held by the chair who introduced Dianne Kayala of the Department of Human Services. Ms. Kayala described the status of Perry/Sullivan implementation. Ms. Kayala stated that while the Caseload Estimating Conference results were not available in time for the meeting, the Department of Human Services would suggest to the conference that savings realized through reduced institutional staffing levels should be shifted to support home and

community care. She also stated that grant funds will be used to meeting some Perry/Sullivan Requirements, including the following:

1) Complete statewide resource mapping, including where services are available, where money is coming from, and what other resources are available.

2) Cost Reports.

3) Program participant evaluation of entire long term care system and subsequent quality protocol management.

4) Web-based system for uniform assessment information and a single evaluation to be used system-wide.

Ms. Kayala also discussed the activities of the Access sub-committee of the implementation workgroup. The Access sub-committee has been working through the problem of funding a presumptive eligibility program. CMS will not financially guarantee presumptive eligibility for an adult, and as such, the state will need a pool of funds to hold providers harmless in order to implement presumptive eligibility. Comments on the presentation of Ms. Kayala were taken.

The chair called on Ray Rusin from the Department of Health to go over the current Nursing Home Substandard Care Report. Mr. Rusin reported that there were no citations and no deficiencies.

Jennifer Wood began a facilitated discussion on Nursing Home reporting, focusing first on what other states do and what a consumer can find in Rhode Island. There are six nursing homes in Rhode

Island are not certified by CMS, and therefore there is a different standard for reporting. The main source of information for nursing home reports are the resident surveys. These surveys focus on the quality indicators used by the MDS Repository.

The nursing home measures committee was trying to a separate web page for consumer information. Mr. Rusin stated that the Department of Health was still working on the web page, but that the web page would not be a comparison. Rather, the page would be compliance history and complaints without a timeline.

A question was raised as to what the purpose of making nursing home reports public would be? She suggested that the reports would be valuable for policy-makers as well as consumers. The value to consumers will be at many levels, including elders looking at options for themselves, and children or grandchildren looking at options for elderly relatives.

The Alliance for Long Term Care fields a number of questions regarding long-term care, including religious issues in nursing homes, language availability, transportation options and activities for residents. A question was raised as to who could potentially benefit from easy access to such information. Responses included consumers, including those who might be in distress, and discharge planners.

A question was asked if there is a difference in what information different groups of people need. The council discussed the fact that potential employees may use information to determine if they would want to work at a specific nursing home. There is a need for an information system that works for discharge planners and for elders, but there was a question of that being a viable solution. Consumers may focus on quality of life issues such as language or religious sensitivity, while discharge planners are more concerned with care needed and occupancy rates.

The council discussed home care, and it not being mentioned as a viable alternative to nursing homes to many patients. A question was raised as to whether there is a place to see alternative options and whether there might be a way to get information on community based care linked with institutional based information.

The council discussed the role of discharge planners in nursing home choice. One council member recalled a personal situation where a planner gave her a list of 95 nursing homes and told her to choose three options. The council discussed the medical questions faced by discharge planners as well, including whether a patient's doctor will travel to a nursing home, if the nursing home requires your doctor to visit or if the medical director of the facility will take on a patient's care.

The council also discussed the need for a fair system for placement

that does not rely on discharge planner's preferences. An important part of that system would be updated occupancy, insurance issues and family requests.

Ms. Wood concluded the discussion, stating that the office of Lieutenant Governor would continue to research other states and investigate possible programs in Rhode Island.

The chair allowed for public comment, and John O'Hara of Narragansett stated that he is opposed to the cuts to the Community Information Specialist network.

The chair adjourned the meeting