

## Lifesharing Coalition Training 6/18/15

Matt Jones - Director of Bureau of Human Services Licensing Presentation

**APS** – APS Liberty Health Care- goal to use existing services to help persons in need of help. APS has not created any new “programs”.

April to 6/17/15- 900 calls to APS thus far. Investigators were higher based on the number of calls they can take and investigate. At this time the investigators are able to handle the volume of calls. Once that number is reached more investigators will be hired.

What if there is already Another investigation going on? APS investigations do not negate other investigations such as BHSL, DHS, Criminal, County.

APS is actually under the Bureau--- BHSL. Kathy Zumbarini is the BHSL APS Director. Kathy has a good background in ID services. Katy was actually the ODP lead for Lifesharing in one of the regions for a period of time. Kathy is working with Matt and BHSL staff to try to be sensitive to the fact there are at times multiple investigations. Matt does not believe that limiting investigations will happen. Licensing regulatory, APS are looking at the safety of person, Law enforcement –criminal acts, DHS and AE looking for program issues. No one agency can ask all the questions needed for all the purposes. Matt said there will be frustration because of the new system and the multiple entities involved.

AAA nighttime coverage was not completely aware of taking the calls in the beginning, this has now been resolved. Older Adult Dept of Aging has helped APS during the startup of APS and has been very helpful.

Mandated reporting requirements are listed in the bulletin. BHSL did send out info to agencies. BHSL will not cite until November 1 for APS reporting.

APS in BHSL staff of 5 persons, 3 of the staff are charged with monitoring Liberty and the timeframes of investigations and regional effectiveness, hooking people up with services. The other two persons are attorneys.

Working with Police: There will be times when the police are involved and BHSL will ask the law enforcement agency s if they want to subordinate BHSL investigation to the law enforcement investigation. BHSL asks the police to put that in writing and if they do that BHSL will back off. Typically the police do not want BHSL to subordinate their investigation. They like to use the BHSL files as part of their investigations. They at times interview the BHSL investigators on criminally related investigations.

Current Status of Report Data:

20% of cases called in have been shown NOT to be meeting the criteria of APS; remaining 80% are investigations . APS is finding cases of both unlicensed and licensed services that are meeting the criteria. Matt has seen certain issues arise since Liberty started that have caused him to believe this is a very needed service and it is doing the job it was designed to do.

Background of APS – Regional Directors and investigative supervisors have experience. Many have financial exploitation, criminal investigation backgrounds, Older Adult Protective Services, and ID services.

Outcomes of Investigations: Many agencies want to know how they will hear the outcome of the investigations. APS act has extremely ridged requirements related to releasing the outcomes. There will be times that APS will not be able to share their investigations with provider agencies who are also doing investigations.

APS- do they have access to HCSIS?

Answer: Right now they do have access and will soon be having more access with Enterprise Incident Management. In the future EIM will also give access to BHSL related to licensing issues. Right now BHSL depends on providers to call BHSL.

APS – They ask questions about provider investigations that may not be concluded. Do agencies have to follow up with APS if the investigation ends up showing a criminal issue is at hand.

Answer- Matt said APS designed to get in and get out. The goal is to have a substantive outcome within 30 days. Their goal is a person safe? Are they safe ongoing? If so, they move on to the next report they have to handle. Matt believes he would like to see a closer relationship and future determination that BHSL would get involved with longer term outcomes

BHSL Investigations: How do you determine if BHSL will investigate something?

Answer: Complaint and investigations policy in BHSL that classifies items. 20 point investigation scale that determines what to investigate and when to investigate. Major issues such as unexpected death will cause licensing to go within 24 hours, sometimes the same day. More detail a provider puts in the BHSL HCSIS report the better for BHSL. If a provider does not list enough detail BHSL will definitely come out to the provider agency. If they see risk they will look at imminent risk of death, injury, ect. Could be same day BHSL gets it or if risk is lower it could be looked at the annual inspection even if that is 10 months from the incident.

Question: People who live in rural areas unknown to most services, will APS have the ability to hold on until services are coordinated. Example of person admitted to nursing home due to neglect, horrible case. APS was able to hold on to her in the nursing home until services could be wrapped around. Family was not able to go in and get the consumer out of the nursing home and take them home.

Answer: Two APS staff are liaisons between APS and program staff in counties. APS is trying to build local relationships with AE, law Enforcement, providers. APS state office is involved in cases such as the one described.

## Chapter 6500 Licensing Questions:

Matt does not use the LII he used the PA code. He suggests we use the PA Code.

121 c 9- medical exams for prostate exam 40 older- what happens if doctor writes not needed

When a doctor writes that it is not needed, seen typically with gynecological when doctor says the period of time can be extended. Matt thought this was not coming up in BHSL. Matt felt the doctor written not medically necessary and recommends a different schedule for a prostate exam he felt BHSL should accept.

Audience stated that provider agency was cited and told they should have gotten a second opinion.

Matt will put in Q and A for June/July month so it is clear to inspectors. He restated that a doctor's written reasons for extending prostate exam should be expected. PSA doctor, BHSL should accept this. He will include in the Q and A when he writes it.

Question- TB for 6 month year old, doctor says not medically necessary at this time.

Answer: Matt said to send him the example and he would look further into this with his team.

Questions: Legal guardians at times will not schedule appts according to the regulations. Provider does not have control of when legal guardians actually schedule appts.

Answer: Matt says he wants to review this with his legal team at BHSL. He thinks that even the legal guardian cannot say this. He would like the situation explained in writing and he will review and then get back to us.

Question: Immunization was reviewed by doctor says they did not need the TD after 65 years old because he cannot get it after 65 years old. If there was not an issue of an actual scratch or cut they said it was not needed.

Answer: Matt had not heard of this. He wondered if this is an example when a second opinion was needed. If in writing Matt believes BHSL should accept this but then said he felt he needs to review with the new ODP medical director. He will get back to us with the guidance. He will put this in the Q and A when he gets the information.

Question: 6500.101

Deck/Balcony off second floor exit.

Answer- no not an exit and has not been an exit. Might be a good idea when person moves to have this noted as not a way out of the house. Matt says it is not an exit. Tell the licensing he said it is not a problem. They should call him if needed.

Question: 125 c **A** physical exam should have exam 12 months prior to living in the home.

Answer: One TB test for the provider 12 months prior to individual living in the home. For the duration of the time the consumer lives in the home one TB satisfies all the requirements. If the individual moves out and a NEW individual moves in another exam is needed. Break in service triggers a requirement for a new exam .

If the original person is there and a new person moves in the licensing should not cite. Refer to the Q and A. Matt will assure something is written there.

Question: Providers often say how can we challenge a violation?.

Answer: If you disagree with a citation, and the licensing representative still feels it is a violation they do not have the discretion to leave the item off a citation. There are 80 licensing representatives and none have the ability to do leave a cite off the instrument. Primary goal in licensing is consistency, he knows this is not attained at this time but it is goal and he is trying to work towards it. Home office or regional must review and make determination.

Licensing representatives should be telling the agency as soon as they find the problem. You have the right to demonstrate compliance. Agency needs the opportunity to show compliance. Licensing representatives have been trained on this. They should be telling the provider agency of the issue and not leaving without stating potential problems.

Provider agency should expect to also hear all preliminary citations in the exit conference. Everything in the exit conference should already have been discussed during the survey visit.

They do have the availability to talk with the regional supervisor when they get back and tell them they feel that some violations should NOT be included.

Take the initiative to call the supervisor and talk to them about the citations that you find are of concern.

Question: Sometimes reports from the region include citations that were not discussed at the meeting. This happens when a supervisor goes through the licensing surveyors notes. If this happens they are to call agency and tell the agency what the citation is that has been found or if they change the location of the citation in the regulations. If you do not get a call provider agencies should call the regional supervisor and talk about this. They are trained to call.

Question: Plan of correction is submitted and inspector does not like your plan of correction.

Answer: RLA will look at it, not a matter of the plan being liked or not. Question is does the Correction of the violation that was seen on-site, have plans or elements of a plan so violation is not repeated ( check outside of house one time per week), timeframe and who is responsible for each of the elements. If all these items are there it is acceptable. If it is not sufficient to just correct the item cited, plan or elements could be repeated, the plan will be rejected. A letter will be sent. If you are uncertain of what is not acceptable ask.

“Directed plan of correction” – These are written by BHSL –sign and return to BHSL. OR you can submit an acceptable plan, or, you will not get a renewed license.

Question: What if licensing re-writes a part of the plan of correction?

The agency should talk with the licensing person and then the RLA. Matt said that in most cases the BHSL staff should not write a large part of the plan.

Question: Physical move of a Lifesharing family from one agency to another agency. If the family and individual move from one agency to the next what is needed? Send that one to Matt for talking to the policy director and operations director.

Matt was asked whether a BHSL representative could attend the Lifesharing Coalition. BHSL will be hiring a new person that Matt hopes will have ID experience and that person may do it. He will consider once it gets closer to the time.

Question: Many consumers and Family Living homes have cellphones only is this ok?

Answer: Must be a traditional landline in the home. It is about access for emergency situations, it does not need to be charged, and it does not get lost.

Question: Not gotten citations from a February Inspection? Does this seem right? Four situations where agency did not agree on citations. A letter was written to BHSL. No response as of yet. How long should this take? Blank on physical for one physical not an issue on all physicals. Not heard whether or this will actually be a citation.

Answer: Matt said that SE is a little behind. When the choice is investigation or writing report it has to be investigations.

Mental Retardation Licensing rep will go away if approved. They will all be Human Services licensing reps. Civil Service has closed the tests. No way to get the jobs filled. Starting to get positions off a comp list. Big vacancies in SE and Western regions. Call the regional directors if it has been months.

CLS has an open certificate and open addendums which is going to cause a problem going forward. Two ID persons are working on CLS cite management.

Question: Central region cite for fire safety training – child one year old that was not trained. Per BHSL Child should have signed fire safety training sheet that the whole family signs.

Answer: Matt said to send him the information and he will get out a Q and A out on this.

Question: 68 B Water temps what is the methodology for BHSL to test it? Digital thermometers are being recommended by licensing.

Answer: You must assure the water is in compliance. Digital thermometers are not the best/accurate. Matt will require all representatives to have non-digital thermometers that can be calibrated and will require them calibrated two times per year. He will have thermometers purchased that are calibrated.

Fill with ice first, run cold water into ice water, should read 32 degrees, if not you turn the face to calibrate to the ice water temperature of 32. He knows that digital thermometers are not accurate. Matt says people should not be using their hand or finger to test water. We should call and tell RLA that a licensing person tested incorrectly.

Question: 121 c 8- mammogram. 123 (a) refusals of medical treatment

Question asked if Court appointment legal guardian is permitted by law to refuse routine medical treatment for an individual. Deferment of mammogram, is that only possible for a medical reason but not for emotional trauma.

Answer: If a doctor says it is not medically necessary BHSI will accept it. If an attempt to do the appointment and the consumer shows they are upset and there is a refusal then 123 a kicks in. That is acceptable. A PCP that does not know the person well or has not been present during a mammogram to see what happens is not acceptable. Effort must be made with the person to show the indication of the refusal.

If there is a history of behaviors and outbursts that indicate refusals that would be a refusal.

Question: Would an ultrasound be acceptable if the doctor says it is acceptable because a mammogram cannot be done due to body contracture.

Ultrasound could be done for the refusal if the desensitize plan is continuing.

Question: Helmets and or walking belts. Is it required that documentation is noted on a physical examination or notice from the primary doctor?

Answer: If medical device and not a restricted procedure – yes

Question: LII obsolete ?

Answer: LII Obsolete and Licensing guides –it is what we have and it is still being used. The Q and A on the website is the best information and should be consulted.

Compliance guide – Chapter 3800 comments are back July 28<sup>th</sup>, Tara will then begin work on Chapter 6400. After that then 6500, then 2380 then 2390. Chapter 6400 RCG by approximately Sept 2015. Early next year Chapter 6500. RCG will mirror the Personal Care chapters. Matt would see that many items will be inunisine such as temperatures in the home, water temperatures. Matt says there will not be One regulation. He feels that is not able to be done effectively.

Chapter 6100 workgroup discussed using the promulgation process to go through specific sections of the 4 Chapters and looking to have them more standard. Reportable incidents, Person Centered Plan (ISP), rights, and staff training are possible to mirror the Chapter 6100. Only way this works if we lift the exact language from Chapter 6100 and drop it in. Licensing standards are supposed to be the very basics to allow provider to provide service legally (licensed) and give basic life safety in place. Funding standards are higher.

Question: How are licensing staff trained and do they have IDD experience?

Answer: At this time, must have 2 years' experience working with cognitive disability. If new generic class of inspector is approved that requirement will go away. Program experience is not as important as observation skills. They will be trained in the culture of ID. This experience in the Chapter 3800 regulatory inspection is working well. Get smart people and teach them what they need to do.

Licensing requirements are the same across state. First 6 months run through orientation. First year all get 120 hours of training not just in the field training. Week of June 22, 4.5 days for 20 new folks not yet been oriented. Start off concepts of licensing, licensing law, regulatory development, licensing ethics. Everyone comes in to BHSL and goes through this first week of orientation. Next specific curriculum at regional offices trained by RLA. Documentation in files of this training. June 2,3,4<sup>th</sup> there is a State Licensing annual training with subject matter experts, Some things trained on every year, some particulars are done every few years. Licensing and social media training. Example person training on physical management.

Questions: Is the BHSL Electronic records policy in effect ? Electronic records and electronic signature can be used for training verification during survey review of training?

Answer: **Yes**

Question: comment look at opening up qualifications for PS candidates beyond 2 years in ID alone.

Answer: Valid point, consider it.

Question: Can Chapter 5100 requirements count to 24 hours of required human service training? Incident management, , conflict interest, grievance??

Answer: Matt will get a Q and A on this.