



# FOCUS

The Source for Business,  
Management, News, and  
Policy Information

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## End-Of-Life Dementia Care Guidelines Released

The Alzheimer’s Association has released dementia care guidelines focused on improving end-of-life care practices in assisted living facilities (ALFs) and skilled nursing facilities (SNFs). The association released the guidelines at its 15th annual conference held in Chicago during late August.

The Alzheimer’s Association, through a collaborative consensus-building effort with dementia care experts and representatives from more than 30 national associations—including NCAL—translated the latest evidenced-based dementia research into specific care recommendations. “Real world” examples, developed by contributors, illustrate how caregivers can deliver the best quality care at the end of life to individuals with dementia and Alzheimer’s. The recommended care practices for end of life cover the following areas:

- Communication and decision-making strategies, including residents and family members.
- Assessment and care of behavioral and physical symptoms, including pain.
- Psychosocial and spiritual support of residents and families.
- Care provision, coordination, and communication when residents choose hospice services.
- Acknowledgement of resident death and bereavement services.
- Staff training.

The recommendations emphasize consistency in individualized and person-centered care approaches; development of relationships between staff and residents; and increasing staff knowledge of individual resident needs, abilities, and preferences.

“Our highly collaborative, consensus-based process ensures that the recommendations represent the best dementia care practices, and at the same time, are practical so that nursing

*Guidelines, continued on page 4*

## Creating A Successful Employee Awards Program

Successful employee recognition programs make assisted living facility employees feel special. Creating a successful program is a multi-step process that builds on the facility’s mission and values and requires staff leaders to work with employees to produce an award and reward that is meaningful to an employee.

Studies have shown that happy employees help assisted living communities retain staff, and produce residents who are highly satisfied with their care.

Pattie Oliver, director of communications and public relations for the Health Care Association of New Jersey (HCANJ), delivered a presentation titled, “Staff Recognition: Your Keys To Success” to her members. Prior to joining HCANJ, Oliver worked in marketing and community relations for Chelsea Senior Living as well as owned her own public relations firm. Oliver says assisted living members requested the presentation to learn how to meet the needs of their employees on a continual basis.

“Some of our members already have employee recognition programs in place, and some are doing different smaller pieces, but our membership wanted to learn how to attend to the needs of their employees on an ongoing basis,” says Oliver. “In addition, they wanted to learn how to infuse a community’s work culture into an employee recognition program.”

In her presentation, Oliver used Southwest Airlines to explain how a company’s culture can be integrated into an employee recognition program. Southwest trains supervisors to treat its employees as its No. 1 asset, because Southwest believes that employees who are treated well will treat their customers well. Employees are well aware

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2. NCAL: Comments Submitted About ALF Designs To AIA

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4. Care: Learn Warning Signs And Risk Factors To Prevent Suicide

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## NCAL Submits Proposed Changes For Architects' 'Guidelines On Design And Construction Of Health Care Facilities'

NCAL has submitted several proposed changes to the American Institute of Architects' (AIA) "Guidelines for Design and Construction of Health Care Facilities."

NCAL submitted comments during the updating phase of the AIA guidelines. Revising the guidelines is a multi-year process.

NCAL will participate during all phases of AIA's revision process.

An AIA committee will consider NCAL-submitted proposed changes along with its own proposals and vote on whether to accept or reject them

or accept them with modifications. Based on this work, the AIA committee then will draft a revised edition of the guidelines, which will be posted next year on AIA's Web site for public review and comment.

NCAL's proposed changes to the guidelines' chapter on assisted living facilities would:

- Promote "universal design" practices (such as appliances/storage areas/spaces that can be utilized by people with various types of disabilities);
- Make the recommended number of parking spaces more flexible;

- Facilitate designs that combine activity and dining areas; and
- Promote residents' control of their environment, including artificial and natural lighting.

Changes to the AIA guidelines can be proposed and viewed at: [www.fgiguideines.org/](http://www.fgiguideines.org/).

Although the guidelines carry no direct authority, many states and localities use the AIA guidelines to develop building codes and regulations.

The 2006 edition of the guidelines featured a chapter on assisted living for the first time.

*Employee, continued from page 1*

of the philosophy but in addition, supervisors show they value employees by encouraging employees' creativity and innovation. In cases where an employee's innovation results in improving the airline's efficiency, the company recognizes the employee.

Oliver translated Southwest's experience into an assisted living setting so that assisted living supervisors, administrators, and executives could learn how to build an employee recognition program based on their community's work culture.

According to Oliver, supervisors must understand their community's mission and values, and then those ideals need to be communicated to employees. Communicating these ideals can occur during group meetings, in a private meeting with an employee, or during an interview with a job candidate, she says.

Supervisors can ask questions that allow job candidates or employees to talk about themselves and what moti-

vates them. She recommends the following questions: What is your background and your values? Why do you want to work here? Why did you choose our company? What do you expect to gain?

Oliver suggests that supervisors ask themselves the following questions about an employee or potential employee: Is there an understanding of our customers? Does this person possess the attitude we expect from staff? How will the candidate fit in? What does the community expect of the employee? What can the employee expect in return?

By knowing the answers to these questions, supervisors can then relay the information within the context of the company's mission to the employee or the job candidate. In addition, the supervisor can discuss the direct link between the employee's work and the community's ideals, says Oliver.

Employees can feel valuable if the community establishes an employee recognition committee consisting of

staff leaders and employees. Through committee meetings, administrators ask employees for their ideas about developing an employee recognition program. Recently, the New Jersey Department of Health & Senior Services gave its best practices award to The Orchards at Bartley in Jackson, N.J., and Monmouth Crossing in Freehold, N.J. The theme of the award was, "Staff Recognition: Programs that motivate and keep your employees happy."

Both these residences have established employee recognition committees that consist of staff leaders and employees. During the committee meetings, administrators ask the employees for input on the kinds of rewards and how supervisors should recognize employees. This ensures that the rewards are meaningful to the employees. Establishing committees with regular meetings also ensures continuity, Oliver says. Another way to incorporate employees is to establish a method where employees can nomi-

*Employee, continued on page 6*



## Congress Delays Effective Date Of New Tamper-Proof Medicaid Prescription Rule

Last-minute action by Congress has given assisted living providers and others six additional months to adjust to a new requirement that Medicaid prescriptions be written on tamper-proof pads.

The latest development means the new Medicaid rule is effective April 1, 2008, instead of Oct. 1, 2007.

The new requirement was included in the U.S. Troop Readiness, Veterans' Care, Katrina Recovery, and Iraq Accountability Appropriations Act of 2007.

The Centers for Medicare & Medicaid Services (CMS) issued a State Medicaid Director Letter in mid-August offering state Medicaid directors guidance on the use of tamper-resistant prescription pads.

NCAL and AHCA asked CMS to provide additional clarification.

In response, CMS posted several answers to Frequently Asked Questions (FAQs) designed to assist states in implementing the requirement.

In a section of the FAQs, CMS confirmed that nursing facilities will not be affected by the requirement because of an "institutional exemption."

CMS concluded that a written order prepared in an institutional setting where a doctor or medical assistant writes the order into the medical record and then gives the order directly to the pharmacy is considered "tamper-resistant" so long as the patient never has the opportunity to handle the order.

While the institutional exemption to the new tamper-proof rule does not

apply to assisted living facilities, CMS FAQs reaffirms that nonwritten prescriptions—e-prescriptions, prescriptions transmitted to a pharmacy by fax, and prescriptions communicated by telephone—are not subject to the requirement.

CMS's FAQs also addresses concerns about whether the prescribing physician had to personally fax the prescription in order for the exemption to hold.

With regard to these nonwritten prescriptions, CMS clarifies "a nurse or administrative staff person who is authorized to act on the prescriber's behalf may phone the pharmacy the order, send the order by facsimile, or electronically transmit the order to the pharmacy."

The NCAL Board of Directors thanks the following sponsors for their support of the 2007 NCAL Day.





*Guidelines, from page 1*

homes and assisted living residences can incorporate them into the daily care routines of their residents,” said Jane Tilly, Ph.D., and the Alzheimer’s Association’s director of quality care advocacy.

NCAL’s Quality Committee Chair Pat Giorgio, owner and administrator of Evergreen Estates in Cedar Rapids, Iowa, said the committee members operating in numerous states contributed their hands-on experience to these guidelines.

“We appreciate and thank the Alzheimer’s Association for allowing us to participate in the guidelines’ development, because it allows us to carry out our commitment to delivering quality care,” said Giorgio. “Quality care is never static, and our input will ensure that assisted living providers no matter where they operate will be able to adopt these guidelines.”

NCAL has sent a copy of the guidelines to each of its member facilities. “NCAL promotes the delivery of high-quality care to its membership,” said Shelley Sabo, NCAL’s director of Quality Improvement programs. “As providers, we’re continually looking for quality improvements, and these guidelines promote cutting-edge care for residents with dementia during a difficult end-of-life period. By providing input, and then distributing these new care guidelines, we’re helping each resident, their families and their friends carry out their wishes.”

NCAL also worked with the Alzheimer’s Association on its two previous sets of care practice guidelines.

NCAL has also obtained a discount for its members interested in the Alzheimer’s Association online training for staff on the Phase Three guidelines.

## Report’s Key Aspects

■ The need for advanced planning for end of life as soon as possible after diagnosis of dementia. This includes documenting the person’s wishes regarding medical treatment in advanced stages of dementia and designation of a proxy decision maker.

■ Caregiver’s provision of person-centered palliative care to people with advanced dementia. Care should follow the resident’s wishes regarding end of life as closely as possible.

■ The importance of dementia-specific training for residential care workers on end-of-life issues, such as signs of dying, pain management, and communicating with families.

To obtain the guidelines or to learn more about staff training, contact Shelley Sabo at [ssabo@ncal.org](mailto:ssabo@ncal.org).

*Source: Alzheimer’s Association, Phase Three End-of-Life Care.*

## Seniors Are At Highest Risk For Suicide, CDC Says

The Centers for Disease Control and Prevention (CDC) recently revealed that seniors are at the highest risk for suicide.

The overall suicide rate is 11 per 100,000 people in the United States. For people who are 65 years or older the rate is 14 per 100,000, according to CDC’s 2005 data, the most recent data available.

“Suicide among older adults is a serious, but preventable, public health problem,” said Jerry Reed, executive director of the Suicide Prevention Action Network USA (SPAN USA), an advocacy group based in Washington, D.C.

Assisted living providers can help prevent suicide by learning the warning signs or risk factors, says SPAN USA spokesman Brian Altman.

Risk factors among older adults include depression, prior suicide attempts, physical health problems, isolation, personal losses, and access to lethal means.

Listed below are several suggested strategies:

- Working closely with primary care doctors to treat depression;
- Restricting access to lethal means; and
- Improving screening among older adults.

To obtain a screening tool, assisted living providers can visit [www.mentalhealthscreening.org](http://www.mentalhealthscreening.org), a Web site hosted by Screening for Mental Health, a national group.

Providers can learn about attending or conducting a local mental health screening. The group also sells a bingo game that specifically screens for several mental health conditions in older adults.

Assisted living caregivers should seek help immediately by calling the hotline or a mental health professional, if a resident exhibits one of the following warning signs:

*Seniors, continued on page 7*

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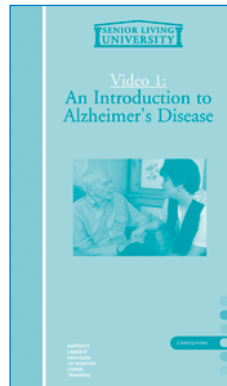
## INTRODUCTION TO ALZHEIMER'S DISEASE

A production that presents caregivers with non scripted, real-life interviews with assisted living residents and helps them learn about the stages of Alzheimer's disease and how to provide care with choice, independence, and dignity.

Senior Living University, 1997, VHS, 15:56 minutes

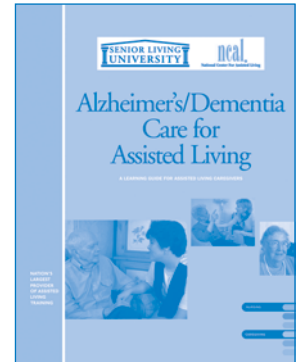
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- Communication Skills for Residents With Alzheimer's Disease
- Managing Challenging Behaviors
- Supporting Family Members
- Care for the Caregiver

(Includes: Instructor's Guide, Participant's Guide, and Exam)

Senior Living University, 2004, binder, 120 pages

**Product #6920**

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Additional Participant Guides (sold individually)

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*Employee, continued from page 2*

nate their co-workers for awards.

Oliver says every community has built-in employee recognition opportunities, such as an employee's anniversary date or length of service.

Employers can learn about professional association programs that offer recognition to staff members, such as the HCANJ Annual Awards and Scholarship Program, or NCAL's national awards program for Noble Caregiver of the Year or the Administrator of the Year award, she says.

Nevertheless, in order for the recognition to mean something, the reward must contain an element of immediacy. Employers must keep the winners' names a secret until the award is given.

This impromptu or on-the-spot aspect helps increase the hopes of all staff members, because everyone tries to anticipate who is going to win. The anticipation adds a special element that increases the award's meaning for the winning employee, Oliver says.

Then promote the employee's recognition by utilizing the media. Submit the recognition, a brief description of the award, and the employee's name and job title to the local newspaper or weekly free paper for publication. Or include the winner's name in the community newsletter.

By involving employees, supervisors establish a vital communication link with employees that pays off when it comes to selecting rewards. Successful employee-recognition programs include rewards that mean something to the recipient.

Rewards can be movie tickets, car washes, gift or recognition certificates, bus passes, a designated parking space,

a balloon or floral bouquet, or an extra break time. Other rewards can include opportunities to receive additional training or a letter of recognition sent to an employee's home.

Offer to run an errand for the employee, make a donation to their favorite charity in their name, or buy the employee breakfast or lunch.

Whatever reward is chosen for the employee, supervisors must make sure it meets the employee's need or desire for that reward.

"Giving an employee that drives a car to work a bus pass does not meet the employee's need," she says.

"But offering a designated parking spot to the employee with a car does meet a need and makes them feel special."

Including employees and rewards that make employees feel special are key elements to a successful program that ensures meeting employee needs on an ongoing basis.

In addition, it gives employees a sense of ownership in the program. Therefore, when communities give employees recognition, employees understand they are valued, they feel good about working in the community, they want to remain working in the community, and they want to help make the community better.

"Recognition says to the employee, 'You are special and have helped us exceed our customers' expectations,'" Oliver says, adding that it also conveys management's sentiment, "'Help us help other employees do the same as yourself.'"

### CDC Ready For 2007-2008 Influenza Season

Launching the 2007-2008 influenza prevention season, the Centers for Disease Control and Prevention (CDC) says its wants more people to be vaccinated and anticipates 132 million doses of influenza vaccine, 10 million more than last year, will be enough to inoculate the high-risk categories and anyone else who wants the flu shot.

Yet even with the improved supply, CDC is concerned that some health care workers, among other groups, are still not receiving vaccinations. Over the past 10 years, only about 40 percent of the nation's health care workers have received inoculations, says Julie Gerberding, MD, head of CDC. Two CDC advisory committees recommend that all health care workers receive annual influenza immunizations. A helpful tool kit relating to immunizing health care workers in long term care is available on AHCA's Web site at [www.ahca.org/flu/immunization\\_toolkit\\_041115.pdf](http://www.ahca.org/flu/immunization_toolkit_041115.pdf).

For up-to-date information on influenza immunization and the 2007-2008 influenza season, go to the National Influenza Vaccine Summit's Web site at [www.preventinfluenza.org](http://www.preventinfluenza.org).

Providers can track dosage availability by visiting the Summit's Influenza Vaccine Availability Tracking System (IVATS) Web site at [www.amaassn.org/ama/pub/category/16919.html](http://www.amaassn.org/ama/pub/category/16919.html).

CDC suggests starting inoculations as soon as vaccine becomes available and continuing through the end of February.



Seniors, continued from page 4

- Threatening or talking about wanting to hurt or kill oneself;
- Looking for ways to kill oneself by seeking access to firearms, pills, or other means;
- Talking or writing about death, dying, or suicide;
- Expressing hopelessness;
- Expressing rage or uncontrolled anger;
- Acting recklessly or engaging in risky activities, seemingly without thinking;
- Talking about feeling trapped—like there is no way out;
- Increasing alcohol or drug use;
- Withdrawing from friends and family;
- Acting anxious and/or agitated;

- Reporting disturbances in sleep patterns (such as unable to sleep or sleeping all the time);

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*National Suicide Prevention Lifeline*  
**1-800-273-TALK (8255)**

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- Displaying dramatic mood changes; or
  - Talking about having no reason for living or no sense of purpose in life.
- Caregivers can use the national toll-free number: 1 (800) 273-TALK (8255). The hotline is set up to automatically refer phone calls to a local crisis center.

SPAN USA has developed a card-sized list of the warning signs that care-

givers can carry in their pockets as an available reference. To obtain the list, call SPAN USA at (202) 449-3600.

Before any emergencies occur, Altman says that providers can find mental health resources in their community by visiting: [www.spanusa.org/states](http://www.spanusa.org/states). Click on the state map or on the name of the state listed below the map to find local resources.

For more information visit:

- Mental Health Screening: [www.mentalhealthscreening.org](http://www.mentalhealthscreening.org).
- National Institute for Mental Health on elderly suicide: [www.nimh.nih.gov/publicat/elderlydepsuicide](http://www.nimh.nih.gov/publicat/elderlydepsuicide).
- National Suicide Prevention Lifeline: [www.Nationalsuicidepreventionlifeline.org](http://www.Nationalsuicidepreventionlifeline.org).

## 2008 CALL FOR PRESENTATIONS

**Begins:** September 4, 2007 | **Ends:** November 24, 2007

The American Health Care Association and National Center for Assisted Living are seeking presentations from professionals in long term care. Presentations should focus on practical applications, insights, success stories, and inspiring ideas that you can share with your colleagues in the Professional Development Seminars at our 2008 convention to be held in Nashville, TN, October 5-8, 2008. We are looking to showcase the best and the brightest minds in the long term care profession.

You are invited to submit a seminar proposal for consideration. The focus for the AHCA/NCAL 2008 convention program will include content that supports the theme **The Harmony of Long Term Care: People, Partnership, and Passion**. Don't miss this opportunity to share your expertise with other professionals.

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All submissions must be  
received by November 24, 2007.

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## View NCAL's Veterans Affairs Aid And Attendance Webinar Online

NCAL held its first Webinar, titled "Veterans Affairs Aid and Attendance: A Provider's Perspective," on Sept. 11, 2007.

Almost 100 people registered and participated in the Webinar held during National Assisted Living Week. NCAL has posted the program on its "Members Only" Web page.

Georgiann Deist of Brandywine Senior Living explained how providers can set up a program that helps residents and their families apply for the benefit. The benefit program offers qualified individuals additional VA funds to help pay for

required assisted living services. At the end of the Webinar session, Deist was joined by Veterans Affairs Benefits and Compensation Analyst Wesley Worsham to answer participants' questions.

The program is about 70 minutes long. The presentation slides are available for downloading.

To view or listen to the presentation, visit [www.ncal.org](http://www.ncal.org), then click on "Members Only." Then click on "Archive of the NCAL Webinar Veterans Affairs Aid and Attendance: A Provider's Perspective."

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