

Together, we can have a positive impact on Long-Term Care!

What Being a DON Means to Me

By Sharyn Figgins, RN, MSN; Region I Vice President



daughters, nineand seven-yearsold, came to work with me. We had been to a church garage sale the previous day and they had bought books and a nice soft doll to give to the residents.

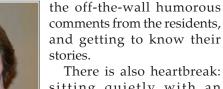
It was great to see the

ast summer my

two grand-

smiles, squeals, and hand clapping when they gave the doll to our relatively young, mentally challenged resident. She hugged them and the doll and carried it everywhere. The girls went around by themselves drawing pictures for the residents and staff while I worked.

That evening, they participated in our annual employee banquet: helping set tables, serve drinks, and dance at the end of the evening. The next day, we were having a western-themed party for the residents. Their take on the day, "You have the MOST fun job, Grandma. Can we come back tomorrow?" And there is a lot of fun and joy in the job: the hugs and kisses,



sitting quietly with an agitated, very cognitively impaired resident who slowly calms down, looks at me, and says, "I'm Professor Irene, I have Alzheimer's," then is

lost again; saying goodbye to a resident who has lived with us for years; helping a family make difficult end-oflife decisions.

To me, being a DON encompasses using my whole self to make a difference in the lives of those (residents, families, and staff) entrusted to my care. It includes helping families feel comfortable when they leave, knowing we will care for their loved one to the best of our ability.

I have been a nurse for quite a while (no, I'm not saying how long) with the first three-quarters of my career in acute care, including being a director of nursing services in a hospital.

Being a DON in long-term care has

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Sharyn Figgins

"You have the MOST fun job, Grandma. Can we come back tomorrow?"

been more difficult and more rewarding than anything I have done. I think because it involves using all my nursing skills and knowledge: clinical, psychiatric, emotional, social, management, financial, and regulatory. It is being forever a student and an educator in an ever-changing environment. It is so different than I thought it would be when I was a hospital nurse; thinking long-term care was slow-paced and dealt mainly with the elderly. It is being a part of a team, all working for the same goal.

The most difficult part of LTC for me is the regulatory piece. The stress of preparing and waiting week after week for annual survey even though you know you and your staff have worked hard all year. Then, though you know

Continued on page 9



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FADONA is a state chapter of NADONA, (800) 222-0539.

Message from the President

s we gear up for this year's annual convention, I'm e v e n m o r e excited for what 2014 holds for us. This year's 27th Annual Convention & Trade Show promises to be fantastic. Upcoming elections for the board will bring new faces and fresh ideas to the table. With your input



Jean Nelson

and support I know it will be an outstanding year.

We are working diligently on the education program for our 2014 convention. I'm excited to share with you a preview of some of our ideas. During the pre-convention date of Monday, April 28, we will offer the three mandatory licensure renewal courses: HIV Update, Domestic Abuse, and Preventing Medical Errors.

We are delighted to announce that, for the first time ever, we are offering the new, approved, two-hour, required course for Florida licensed nurses, titled, Laws and Rules that Govern the Practice of Nursing in Florida. This course is now required for licensed practical nurses, registered nurses, clinical nurse specialists, and advanced registered nurse practitioners, and will be offered on the pre-convention date.

We are also very enthusiastic about the multitude of courses being offered during the convention. Some of the timely topics will include a legal presentation that deals with nursing home complaint surveys and lawsuits, wound care, prognostication as it relates to hospice and palliative care, risk management in LTC, a regulatory workshop presented by Polly Weaver with the Agency for Health Care Administration, a presentation by AC Burke with the Florida Department of Health on stopping the spread of Carbapenem-Resistant Enterobacteriaceae Klebsiella (CRE), a daylong advanced QAPI training course with our friend Cindy Mason with Providigm, as well as other exceptional

Orlando. As you may know, elections were held this year for the following positions: 2nd vice president; secretary; and regional vice presidents

educational offerings. I look

forward to seeing all of you

from April 28-May 1 at the

Rosen Centre Hotel in

for regions II, IV, and VI.

A D O N A / L T C

The official ballot was mailed out to all our members at the end of January. The official election results will be announced during the convention and new officers sworn in

during the Annual Awards Luncheon. FADONA is extremely proud to be the largest chapter of our national organization, NADONA. I consider our nearly 400 members to be a great resource for the organization and a driving force for LTC in Florida. As such, I know we all have something to learn from each other and encourage you to participate in every event locally, regionally, and statewide. If you've never attended one of our inspiring conventions, please join us this year at the Rosen Centre in Orlando for the best FADONA convention yet! You're in for a real treat.

Respectfully submitted,





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Regional Reports



Region I-Northwest

1A—Bay, Escambia, Holmes, Okaloosa, Santa Rosa, Walton, Washington; 1B—Jefferson, Madison, Calhoun, Leon, Taylor, Franklin, Gadsden, Gulf, Jackson, Liberty, Wakulla

• Ur chapter at Fort Walton Beach (FWB) typically meets the third Friday of every month for a breakfast meeting at 8 a.m. The sites rotate and are held at different facilities each month. Discussion is on pertinent issues of interest to DONs.

The Fort Walton Beach chapter is currently looking for a chapter president. For future meeting information, email **sfiggins@gchc.com**.

The Pensacola Chapter continues active networking via email, sharing concerns and highlights, asking each other questions, and supporting each other.

We would love for any DON, ADON, or nurse manager to join our meetings or get on our contact list.

Contact me at Rosewood Manor by

SCHOLARSHIPS AVAILABLE

FADONA is currently accepting scholarship applications
— including the Imogene Ward
Nursing Scholarship Award — from eligible applicants.

If interested, please go to www.fadona.org, or call the business office at (561) 689-0037. phone at **(850) 619-2622** or email **sfiggins@gchc.com** for any questions (or directions to meetings).

Sharyn Figgins, RN, MSN Region I Vice President



Region II—Northeast 2A—Hamilton, Lafayette, Alachua, Marion, Clay, Nassau, Suwannee; 2B—Dixie, Union, Putnam, Baker, St. Johns, Columbia, Gilchrist; 2C—Levy, Bradford, Duval, Flagler

am very excited to be involved with the finest nurse leaders of Florida. FADONA provides a foundation for nurses to network and learn from each other.

Region II is presently hosting meetings in the Ocala and Jacksonville areas. Our next meeting will be April 10, 2014, at Carrabba's Italian Grill on Highway 200 in Ocala at noon. We will have lunch and have an educational topic on diabetes management.

Our meetings in Region II consist of an educational presentation, lunch, and time for networking. We are presently looking for a chapter president for the Jacksonville area. Anyone interested should contact me by email address.

Any nurse leaders in the Ocala and Jacksonville areas who would like to be included on our email and fax send outs, please email me at **jacqueline.hinerman@northport health.com**. I can also be reached at (352) 732-2449. I would love to meet you and introduce you to some of the best nurse leaders in your area. So please contact me, Jackie Hinerman, RN, DON, Ocala Health & Rehabilitation, 1201 SE 24th Road, Ocala, FL 34471; (352) 732-2449; Fax: (352) 690-6909.

DONA/LTC

Jacqueline Hinerman, RN Region II Vice President

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<u>Region III—Centraleast</u> 3A—Lake, Osceola, Orange, Seminole 3B—Volusia, Hardee

Region III nurses had the opportunity to meet and have dinner at Ming Court in Orlando recently. The guest speaker was Dr. Chris Chappel, who spoke on rehospitalization and the importance of communicating with other agencies. He was sponsored by Gentiva Home Care. Reuben Bowie also shared the Standards of NADONA with us. We would like to thank everyone for the great attendance.

Region III usually meets the second Thursday of every month. There will not be a meeting in April due to the annual convention — see you there. We look forward to seeing you in May.

For more information about GOFADONA, please contact **Reuben Bowie** at **407-296-1611**, or **reuben abbowie@gmail.com**; **Nelson Rios** at Conway Lakes, or **Marisol Arrindell** at The Parks.

For Region III questions, please reach me at **(407) 963-8400**, or my email address is **dcoy@good-sam.com**.

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Debbie Coy, RN Region III Vice President



Regional

Region IV—Centralwest 4A—Hillsborough, Pinellas, Highlands, Polk 4B—Hernando, Sumter, Citrus, Pasco

● ur new Hillsborough president, **Kimberly Bascue**, is looking forward to meeting everyone at our monthly meeting, which takes place on the 3rd Wednesday of the month and usually at the same location, Red Lobster on N. Dale Mabry. Each month we have a different company sponsor our lunch. This gives an opportunity to see what's new in the industry and also leaves plenty of time to network with fellow DONs.

Liz Raymond, the Pinellas president, currently has meetings every second Tuesday of the month at The Banquet Masters in Seminole. Each month a new stimulating topic is presented. Stop on in to see what exciting things are happening in Pinellas.

Our president for the Polk, Hardee, and Highlands area is **Patricia Knigge**. They are currently meeting quarterly in that area and have been successful in getting a sponsor for the meetings.

Please feel free to contact any of us for more information. We are here to help and love for you to get involved. For Hillsborough County you can call **Kimberly Bascue** at (443) 852-9782 **kimberlybascue@yahoo.com**. For Pinellas County contact **Liz Raymond** at **nurse_raymond@yahoo.com**. For Polk, Hardee, and Highlands, contact **Patricia Knigge** at (813) 751-5127.

I am also available to assist in any way and can be contacted at (727) 863-5488 or bettybcncdon@yahoo.com. I encourage you all to get involved. If I have learned one thing over the years of my involvement with FADONA it is that you're not alone. Reach out and someone will help.

Betty Barron Region IV Vice President



<u>Region V—Southwest</u> 5A—Manatee, Charlotte, Collier 5B—Desoto, Lee, Sarasota Region V is well established in the northern territory of our region as evidenced by the active Manatee/ Sarasota county chapter led by **Tracey Rickabaugh**. They continue to have regular meetings and are very busy recruiting new NADONA/FADONA members.

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The have elected officers and call themselves the "Manasota" chapter of FADONA! They are charging \$5 a meeting for members and \$10 a meeting for non-members.

The officers for Manasota are: President: **Tracey Rickabaugh** –

(941) 749-6611, (941) 730-3822 Vice President: Kathy Michalsen (941) 747-1881, (941) 929-5509

Secretary: Diane Nelson, (941) 747-8681; and Treasurer: Sarah Bolles, (941) 747-3706, (941) 448-3581

We are diligently seeking an active

Continued on page 6

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www.fadona.org, www.fmda.org, and www.fhcswa.net

These are the official online CareerCenters of the Florida Association Directors of Nursing Administration, Florida Medical Directors Association, and Florida Health Care Social Workers Association.

These **CareerCenters** are a *treasured* new online resource designed to connect long-term care industry employers with the largest, most-qualified audience of nurses, nurse administrators, directors of nursing, nurse practitioners, medical directors, physicians, physician assistants, social workers, social service designees, and directors of social services in Florida.

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Regional Reports *Continued from page 5*



chapter in Charlotte County to incorporate nurse leaders in North Port, Englewood, Port Charlotte, Punta Gorda, North Fort Myers, and Cape Coral who will be able to gain support, networking, and camaraderie. If you have an interest, don't hesitate to contact me.

As we work our way south, I anticipate getting something established in Lee/Collier counties and will be seeking assistance in the Fort Myers/ Naples area to find chapter leadership and establish an interest base. I know we have members down that way, so let me hear from you! We are always looking to pass the torch of leadership and carry it to our southern boundaries.

Gear up everyone, we have a great convention coming in April, and would love to see all of you there. Orlando, here we come! Bring your flip flops and sunglasses! Region V will make a big splash!

Please forward your questions to me at: **kjoynes@greystonehcm.com** or call **(813) 748-8999.** If you would like to host a chapter meeting, just let me know!

Kim Joynes Region V Vice President



<u>Region VI—Southeast</u> 6A—Palm Beach; 6B—Brevard, Indian River, St. Lucie, Martin, Okeechobee; 6C—Hendry, Glades

Every area of Region VI needs dynamic people to champion a group of DONs in their area. Though time, effort, and energy are involved, the results are support for all. Please consider coordinating a local group meeting. There are many resources available to sponsor the food, help with notifications, etc. Please call if support, help, questions, or information are needed to urge you toward this valiant goal.

Here are the local chapter contacts: 1. *Indian River County* — Attend our next meeting by calling **Nancy Hender son** for details. She is the local contact, and she can be reached at (772) 288-0060. 2. *Palm Beach County* — **Deborah Grotke** at (561) 588-4333. The Palm Beach County DON Assn. continues to meet monthly on the third Wednesday.

We have an active, growing group of members and associate members. Meetings allow us to network and share valuable information with our fellow nursing administrators and associates. This in turn helps increase the quality of care that our facilities can provide to our residents and supports our efforts to be survey-ready.

We need your help to re-energize other areas of Region VI. If you are interested in helping out, or know someone you think would be a great asset, please contact me at (772) 335-8844.

Sheila Mangrum Region VI Vice President

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<u>Region VII—Southeast</u> Miami-Dade, Monroe, and Broward Counties

This region runs from Deerfield Beach all the way south to Key West.

The Broward County Chapter of FADONA has been very busy. Congratulations to Broward County Chapter President **Peggy Moses** and her dedicated chapter leaders who are forging forward.

The Miami Chapter president is **Delia Rubio**. They meet every third Wednesday of the month

A D O N A / L T C

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We need your help to develop this amazing region. If you are interested in helping, or know someone you think would be a great asset, please contact **Amina Dubuisson** at (954) 790-5171, or **adubuisson@greystonehcm.com**.

Amina Dubuisson Region VII Vice President

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Volunteers are the heart of FADONA. Our strength is a result of the time and effort provided by those who volunteer their time and knowledge to serve their colleagues and to further nurse administration in long-term care.

We invite each member to become more involved in the Florida Association Directors of Nursing Administration (FADONA). Numerous volunteer opportunities are available to serve for a year or two, a month, or even a day. You can help guide our association, advise the board of directors, coordinate or lead a program, or even start a new chapter or committee.

Participating as a volunteer provides a gateway to develop and hone leadership skills, increase professional contacts, and give back to the profession.

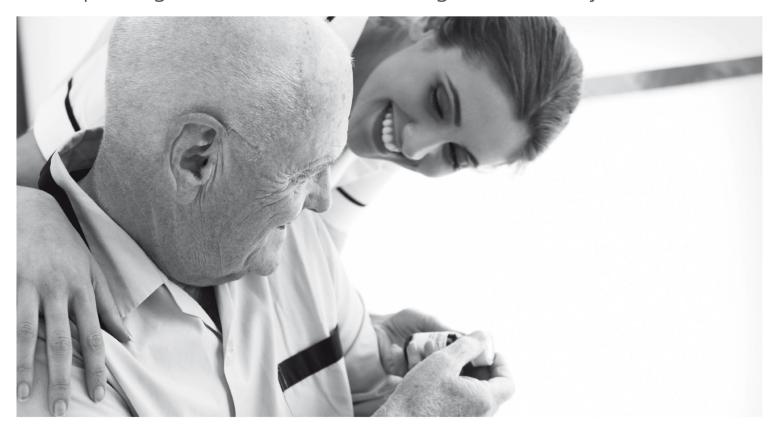
Let us know what types of volunteer opportunities interest you and whether you are interested in the local, regional, and/or statewide levels.

We look forward to your participation in FADONA. Should you have any questions, please contact **lan Cordes, director of operations**, at **(561) 683-0037**, or **icordes@bellsouth.net**.

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HIPAA – The 500 LB. Gorilla

By Karen Goldsmith, Esq.; Goldsmith & Grout, PA; HealthCareCaseLaw.com

ast year the impact of HIPAA on business associates became more meaningful. Business Associates (BA) must now sign agreements with health care providers that require the BA to develop policies and procedures to safeguard

protected health information ^{Karen} (PHI) and to ensure that the BA complies with the myriad requirements that protect PHI.

Of course, protecting information has always been a requirement of your BAs. If you supplied PHI to a BA then that BA had to protect it on your behalf. The big change is that under the old system if a BA disclosed PHI you could be charged and fined since that BA was, in essence, your agent vis a vis that health information. Your recourse against the BA would be a lawsuit to recover your monetary loss.

Under the new law, the BA may be sanctioned for disclosure of information directly. This is a strong incentive for the BA to implement safeguards through policies and procedures and police their staff.

New contracts with non-health care providers (health care providers are already charged with a duty to protect PHI) must contain the mandated provisions. Health care providers have one year to add the requirements to existing contracts. That year is about half over so time is of the essence.

There are many ways PHI can be inadvertently disclosed. Inadvertance is not a defense. You should review your own internal processes to ensure that information is not accidentally transmitted.

One such means for inadvertent transmission is the cellphone. Many people now scan documents and forward them through their cellphones. PHI is one of the things often transmitted in this manner. Is the information



protected from accidentally being sent to the wrong recipient? What if the person's cellphone is stolen or lost? Will that information be read by someone who is not authorized? While theft of your phone is a crime, this is no protection if PHI is disclosed. Many of us have heard of

Karen Goldsmith +bo

dsmith the case where a hospital donated their old computers, many of which housed PHI. The recipient, in setting the computer up for its use, found hundreds of patient records on the hard drives. The mere magnitude of the amount of information in those computers and the number of patients involved made national news and resulted in a hefty fine. But the information disclosed could not be "undisclosed" so the patients affected had sensitive information in the wrong hands for eternity.

What about the computers we have used and plan to discard? Information can remain on the hard drive forever. This generation is very savvy in retrieving information that has supposedly been deleted. Do something with your hard drive that will make it permanently inaccessible.

Theft of laptops and telephones from automobiles, on public transportation, and the like is epidemic. Are you sure that PHI is not on that piece of equipment that you leave in your car? Would you put resident information at risk if your car was vandalized and the laptop stolen?

The fines are tremendous and rise exponentially dependent on the magnitude of the HIPAA breach. A few minutes of carelessness can mean a long time of anguish for the individual involved as well as the company by which they are employed.

If you are the employer or supervisor, be sure that you have policies and procedures in place. Along with that should come sure and swift discipline if they are breached. There should be a system of retrieving company-related equipment used by your staff at the time it is replaced or the employee terminates. Rules should be very strict about what information an employee can put on their personal phones and computers.

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Whenever possible encrypt information. Or if you do not have the ability to encrypt, use plain old black ink and obliterate identifying information.

Always remember that it is not only the written PHI that is protected. Discussions of PHI should never occur in open areas such as a hallway or dining room. Cellphones are notorious for being breached. Most times an inadvertent listener hears what the parties are saying, but intentional "tapping" can also occur.

One of the problems we have encountered in dealing with the new provisions involves large national companies. Many of our clients contract with companies that have branches in many states and even countries. The issue becomes how large the circle of protection must be. While you may be contracting with a local company, they may have storage of data at a separate site. Ask the questions and be sure that you are complying with the requirements of the law.

It behooves you to review the new rules and regulations which are found at 42 CFR 160.103, et seq (as amended Jan. 25, 2013) and 45 CFR 164.410, et seq (as amended Jan. 25, 2013) and ensure that you are following it to the letter.

This column is written for general information only and should not be used as legal advice. For specific situations contact your facility attorney and follow his/her advice.

This column is a regular feature of *FADONA Focus*. If you want a subject discussed, please email Karen Goldsmith at <u>klgoldsmith@ggfllawfirm.com</u>.

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What Being a DON Means to Me Continued from page 1

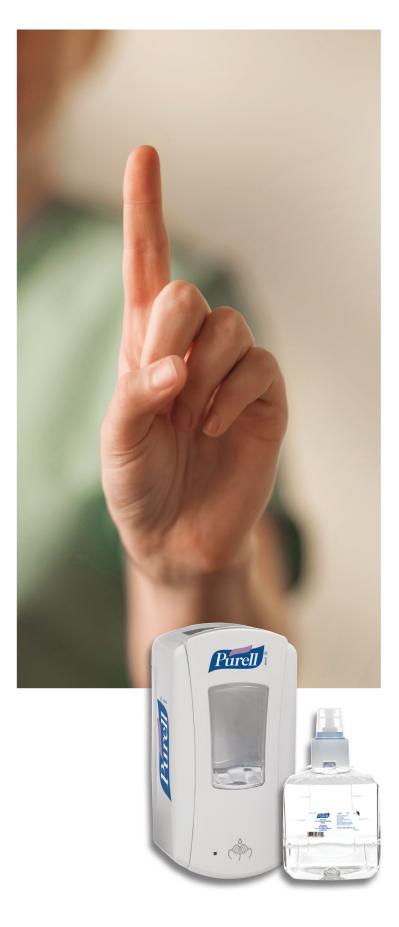
surveyors are coming, the physical panic attack as your stomach drops when you see the group walk in rolling their suitcases and you know your week of hell has started. And again, when your heart races as a surveyor comes to you and asks for a policy (oh no, they found something) and asks to come talk to the group. You go from "I think everything is going well" to "We're going to get a G or IJ." It is also a time when I am so proud of our staff and residents as they all pull together.

One day I question why anyone would do this job, and the next day I can't think of anything else I would want to do.

Once a resident came to me and said, "Don't worry, I only told them the good stuff." Another time, the Resident Council president called me on the phone after talking to a surveyor and said, "Don't blow it, I think we are doing well." And that year, we didn't blow it, we were zero deficiency! There was great joy and lots of happy hugs and tears that day.

Being a director of nursing means experiencing the whole emotional gamut of life. One day I question why anyone would do this job, and the next day I can't think of anything else I would want to do.

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Carrying the Torch of Leadership in Style

Convention Corner by Susie Jensvold, RN; 1st Vice President and Annual Convention Chair, FADONA



encourage you to attend our 27th Annual Convention at the Rosen Centre Hotel in Orlando. The networking and educational opportunities offered this year promise to

not only be a productive use



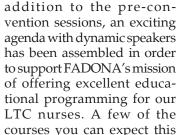
Susie Jensvold

of your time, but also entertaining and fun. Please mark your calendar for April 28-May 1 and be sure to join us this year.

s a nurse leader, I

On Monday, April 28, we will offer pre-convention programming including the three mandatory licensure renewal courses: Update on HIV/AIDS, Domestic Violence, and Preventing Medical Errors. We are also offering the newest two-hour required course for nurses: Laws and Rules Governing the Practice of Nursing in Florida. In





year are: infection prevention, regulatory changes, QAPI, risk management, relevant legal issues, etc.

Through a collaboration with statewide nurse executives and FADONA members working in LTC, the FADONA board of directors established "Principles of Excellence for Directors of Nursing in Long-Term Care" in 2009. The principles are divided into five domains: Mission & Vision, Culture of Quality, Resident Care & Quality-of-Life, Caregivers & Staff, and Finance. Our educational program is based on these principles, and they guide our planning process as we strive to acquire exceptional speakers and offer premier courses at every convention.

The five principles encourage nurse administrators to follow a reasonable course of action based on current knowledge, available resources, and the needs of the facility so that the most effective and safest care can be delivered to its patients/residents. They also call attention to areas of focus that nursing administrators are expected to be knowledgeable in and drive education and training. Therefore, as we continue to plan future educational programs, we intend to incorporate sessions that allow participants to work on those key areas.

I hope you'll find the selection of topics for this year's convention intriguing. FADONA continues to strive for excellence in providing quality education to our nurse leaders in long-term care. We will see you in Orlando!

Alliance Council Meets FADONA Board

- Group gathers at the Rosen Centre Hotel

FADONA Board (L-R) - Bonnie Cruz, Sharyn Figgins, Jacqueline Hinerman, Marge Shake, Betty Barron, Kim Joynes, Carla Russo, Jean Nelson, Susie Jensvold, Reuben Bowie, and Amina Dubuisson Missing: Norma Collins, Debbie Coy, and Sheila Mangrum





FADONA/LTC is here for you!

Carrying the Torch of Leadership 2014

Convention News

Continuing Education

This educational program has been approved for 24.5 maximum contact hours for Florida licensed nurses by FADONA, CE Provider #50-682. If you are a nursing home administrator (NHA), please be advised that the Florida Board of Nursing Home Administrators is currently reviewing our request for 2.0 CEUs for Preventing Medical Errors, one of the mandatory courses. All other courses have been approved through CE Broker for NHAs.

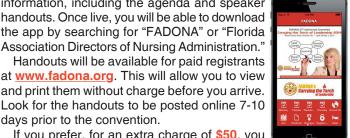
ANCC Accreditation: This continuing nursing education activity is being applied for through the Alabama State Nurses Association, an accredited approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

"Paperlite" Convention

In keeping with our organization-wide initiative, the convention will be paperlite - not paper free. This means that we will not be providing printed session handouts or CDs for convention attendees.

FADONA will be rolling out a brand new mobile app. The app will contain many exciting features and will be available in time for this year's annual convention and throughout the year. Soon you will be able to download it for free in iTunes and Android stores. The app will work on tablets and smart phones.

The app will allow you to view convention information, including the agenda and speaker handouts. Once live, you will be able to download the app by searching for "FADONA" or "Florida Association Directors of Nursing Administration." Handouts will be available for paid registrants



days prior to the convention. If you prefer, for an extra charge of \$50, you may order a printed set of handouts no later than

Look for the handouts to be posted online 7-10

April 18, and it will be ready for you at the registration counter when you arrive. However, please be aware that we cannot ensure the availability of every PowerPoint presentation or handout for every session.

Silent Auction

Last year, FADONA raised nearly \$2,000 for its scholarship fund from its second annual silent auction. We are inviting all our members, attendees, and exhibitors to donate auction items to raise money for FADONA's scholarship fund. Over the years, FADONA has provided tens of thousands of dollars in scholarships to its members and their staff and, with your support, we will be able to continue our tradition. For more information on how you can make a contribution, please call Matt Reese at the FADONA business office at (561) 683-0037.

Rosen Centre Hotel, Orlando, Fla.

Please note that FADONA is financially responsible for all hotel rooms reserved in its group block. Any unused rooms, not sold, are still billed to FADONA in the form of attrition. We ask for your support in booking only at the convention hotel to ensure we fill the room block and so that we can continue to offer discounts to our attendees. We ask that you reserve hotel rooms realistically and cancel any unneeded rooms with as much notice as possible. Thank you for your cooperation.

Signup for the Pre-Convention Mandatory Licensure Renewal Classes

On April 28, we will offer three licensure renewal courses: Update on HIV/AIDS, Domestic Violence, and Preventing Medical Errors.

For the first time, we are also proud to offer the newest 2-hour required course for nurses, Laws and Rules Governing the Practice of Nursing in Florida.

See the registration form on page 15, or register online at www.fadona.

Attendee Comments from FADONA's Carrying the Torch of Leadership 2013

Thank you for taking the time to plan this seminar for fellow leaders. This was a well planned convention. – B.S., Ft. Lauderdale, FL

This was a great conference. All the topics were very relevant & appropriate for the audience. I always enjoy the FADONA conference. Great job FADONA team! - A.D., Ft. Lauderdale, FL

This conference was timely and packed with valuable information which addressed my current concerns as a LTC leader. - P.H., Juno Beach, FL

Kudos! You did it again. We are all looking forward to next year to enhance our knowledge and experience more so we can take care of our beloved residents with dignity, respect and expertise. – L.R., Miami, FL

FADONA is doing a great job, continuing to provide the tools online and your availability to the members means a lot. - P.M., Lauderdale Lakes, FL

Another year of pertinent information. *My facilities staff anticipate me coming back to* share what I have learned. Continue this wonderful conference with great speakers and content. - C.P., North Bay Village, FL

This was my first convention. It won't be my last. Amazing, knowledgeable speakers who brought a wealth of pertinent information. - C.T.S., Lakeland, FL

Very good program. I wish all DONs would see the value of attending this annual convention. - D.G., West Palm Beach, FL

Excellent and informative!! FADONA is impressive. - D.H., Savannah, GA



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American tigalth Associates – Co-sponsor of Awards Luncheon Greystone tigaltheare Management – Co-sponsor of Awards Luncheon FADONA Region IV – Breakfast on Tuesday Mylan Specialty – Product Theater Lunch on Tuesday Medline – Unrestricted Educational Grant Guardian Pharmacy – thotel Key Cards — 7 Years in a Row RXPERTS – 2010-2014 Website Convention Photo Display Sponsor RB tigalth Partners – LPN & CNA Awards of Excellence — 4 Years in a Row Novaerus – Tote Bags Optum – Nurse Administrator of the Year Award — 11 Years in a Row Senior Dental Care – T-Shirts MobilexUSA & US Laboratories – Name Badge tiolders FADONA's Platinum Partners – Fun Night Sponsors — See page 19 Wings tigalth Care Solutions – Fun Night Decorations

Carrying the Torch of Leadership 2014 - Convention Agenda

MONDAY, APRIL 28

8 a.m.–5 p.m. Registration & Information

Optional Pre-Convention Sessions

Mandatory Licensure Renewal Courses

8:30-9:30 a.m. Update on HIV/AIDS (101) 1.0 hour ~ Cathy Robinson-Pickett, BS; HIV Educator and Advocate; Co-Founder, Friends-Together, Inc., Lakeland, FL; Certified Domestic Violence Trainer; Director/Adviser, Health Campus Coalition, Florida Southern College; Nova Southeastern Area Health Education Center Board Member

9:40-11:40 a.m. Preventing Medical Errors (102) 2.0 hours ~ Cathy Robinson-Pickett, BS

11:40 a.m.-12:45 p.m. Lunch on Your Own

12:45-2:45 p.m. Domestic Violence (103) 2.0 hours ~ Cathy Robinson-Pickett, BS

2:50-4:50 p.m. Laws & Rules Governing Florida Nursing (104) 2.0 hours ~ Barbara B. Phillips, DNS, CNS, GNP-BC; Nursing Instructor, Breckinridge School of Nursing and Health Sciences

MONDAY, APRIL 28

Regular Convention Sessions Start Here!

BREAKOUT SESSIONS A 5-6 p.m. 1. The Art and Science of Prognostication (105) 1.0 hour ~ Joelle Angsten, MD; EVP/Chief Medical Officer, Tidewell Hospice

5-6:30 p.m. 2. *Wound Care: Fact or Fiction* (106) 1.5 hours ~ Paige Mutual, RPT, CWS; VP of Clinical Operations, Clover Medical Solutions

TUESDAY, APRIL 29

7:30 a.m.-5 p.m. Registration & Information

 8-9:15 a.m. <u>Breakfast Program</u> (107) 1.0 hour <u>Ethical Dilemmas Roundtable</u>
 Robert G. Kaplan, MD, FACP, CMD; President, Florida Medical Directors Association; Associate Medical Director, Optum Florida

9:25-10:25 a.m. <u>BREAKOUT SESSIONS B</u> 1. Prevention Strategies for Carbapenem-Resistant Enterobacteriaceae (CRE) Klebsiella (108) 1.0 hour ~ Anne Carol "AC" Burke, MA; Healthcare-Associated Infection

Prevention Program Manager, Florida Department of Health

 Communication and Coaching: A Nurse's Guide to Creating a Harmonious Atmosphere (109) 1.0 hour
 Beckie Dow, RN, RAC-MT; Vice President of Field Operations, Harmony Healthcare International

10:30 a.m.-12 p.m. The Anatomy of the Nursing Home Complaint Survey & Lawsuit: How Front-Line Staff Help Meet Your Opponent's Burden of Proof (110) 1.5 hours ~ Rawsi Williams, RN, Esq.; Caduceus Gavel PLLC, Law Office

12-1:15 p.m. <u>Non-CE Product Theater Luncheon Program</u> *Optimizing the Management of COPD in LTC* (111) ~ <u>Manuel Suarez Barcelo, MD, CMD</u> ♦ This session is sponsored by Mylan Specialty LP.

1:15-3:15 p.m. Risk Management for the Administrative Nurse: "Where There's Smoak, There's Bleier!" (112) 2.0 hours ~ Kimberly R. Smoak, QMRP, MSH; Manager of the Survey & Certification Branch, Health Quality Assurance, Florida's AHCA; and ~ Robin A. Bleier, RN, HCRM, LNC; Principal, RB Health Partners 3:15-5:45 p.m. Annual Trade Show & Silent Auction Official Opening & Silent Auction in the Exhibit Hall to benefit FADONA's Scholarship Fund

6-7 p.m. Regional Roundtables: LTC Connections (113) 1.0 hour ~ Hosted by Region I, II, and V Vice Presidents: Sharyn Figgins, RN, MSN (I); Jacqueline Hinerman, RN (II); and Kim Joynes, RN, BSN (V)

WEDNESDAY, APRIL 30

7:30 a.m.-5 p.m. Registration & Information

Breakfast on Your Own

8-9:30 a.m. AHCA Regulatory Compliance Workshop (114) 1.5 hours ~ Polly Weaver, BS; Chief of Field Operations, Division of Health Quality Assurance, Agency for Health Care Administration

9:35-10:35 a.m. Reducing Antipsychotic Drug Utilization in SNFs

(115) 1.0 hour ~ Rick Foley, PharmD, CPh, CGP, FASCP, BCPP

Clinical Assistant Professor of Geriatrics, University of Florida College of Pharmacy; Consultant Pharmacist, Omnicare; Education Committee Chair, Florida Chapter-American Society of Consultant Pharmacists

10:45-11:45 a.m. BREAKOUT SESSIONS C 1. Best Practices for SNF Documentation (116) 1.0 hour

Patches Bryan, RN, LNHA; Chief Clinical Care Officer, Greystone HCM
 2. Arbitration Clauses in SNF Admissions Agreements

(117) 1.0 hour

Andrew R. McCumber, Esq.; Founding shareholder of McCumber, Daniels, Buntz, Hartig & Puig, P.A.

11:50 a.m.-2:05 p.m. <u>ANNUAL AWARDS LUNCHEON</u> Celebrating Excellence in Long-term Care Through Prevention of Incivility (118) 1.0 hour

~ Debra Hagerty, DNP, RN, NHA, CDP, CDONA, FACDONA; Assistant Professor, Armstrong Atlantic State University, Savannah, GA

Annual Awards Luncheon is co-sponsored by American Health Associates.

PRESENTATION OF AWARDS for 2014

Nurse Administrator of the Year Award is sponsored by Optum. LPN and CNA Awards of Excellence are sponsored by RB Health Partners.

2:15-5:15 p.m. Trade Show, Silent Auction, Door Prizes

7-10:30 p.m. — PLATINUM PARTNER'S FUN NIGHT Exceptional Food, Drinks & Entertainment ★ This annual event is planned and sponsored by the Alliance Council's Platinum Partners.



THURSDAY, MAY 1

7:30-8 a.m. Coffee and Light Breakfast

8-11 a.m. Advanced QAPI Workshop: Tools & Techniques (119-A) 3.0 hours ~ Cindy Mason, LCSW, NHA, LHRM; VP of Provider Services, Providigm

11 a.m.-12 p.m. Lunch on Your Own

12-2 p.m. Advanced QAPI Workshop: Tools & Techniques (119-B) 2.0 hours ~ Barbara L. Baylis, RN, MSN; Accreditation Program Director, Providigm

This session is supported by an educational grant from **Medline**.

2 p.m. DOOR PRIZES & END OF CONVENTION

Note: Sessions and speakers are subject to change.

Presented by the Florida Association Directors of Nursing Administration/LTC

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Not a member? Join no accompanying payment	v at <u>www.fadona.org</u> or call the business offic to FADONA). Registration forms without fees	ce for an application and mail it direct cannot be processed. Please use so	ctly to NADONA (attach and mail a co eparate registration form for each pers	py of the form and con.
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Medicare ADRs – Be Proactive, Be Prepared

By Robin A. Bleier, RN, HCRM; RB Health Partners, Inc.

What is an ADR?



n ADR is an Additional Development Request. This is the request used to obtain records for

additional documentation when the Medicare contractor cannot make a coding or coverage determination from

the data that has been submitted on a claim. In such cases, the ADR is to gather additional documentation from the provider.

The request is for records that are related to the claim being reviewed, and may collect additional documentation related to the patient's condition before and/or after a service in order to get a more complete picture of the patient's clinical condition.

Proactive Viewing

ADRs can be viewed through the Fiscal Intermediary Standard System (FISS) Direct Data Entry (DDE). It functions to allow providers to view ADRs online. This is important as your business office staff should regularly search for requests. Since facilities are set up to electronically submit claims, they should use the online system to track pending claims as well.

Responding to an ADR

It is important to prepare your ADR response carefully. There are 10 steps when responding to an ADR:

- 1. Read the ADR notice carefully.
- 2. Provide additional information if it will support payment of the claim.
- 3. Confirm to verify the address for return record.
- 4. Ensure facility documentation is as complete as possible.
- 5. Ensure facility submission should be in a timely manner as providers who do not submit timely have a higher denial rate and

this alone can result in increased or continued medical reviews.

- *6. Use the Local Coverage Determination/National **Coverage Determination** databases to affirm what documentation is necessary.
- 7. Set up a follow-up system and confirm information sent was received before the due date.
- 8. Arrange your submission with the most pertinent information highlighted.
- 9. Maintain a packet of information that was sent.
- 10. Engage a consultant for support.

*An important reminder: If no documentation is received within 45 days of the ADR date, then the system will automatically deny the claim.

Being Proactive is Key

This means looking at your internal compliance program to evaluate how you inspect what you expect. Therefore, best practices usually include a farming approach (not waiting until the day or two prior to planned billing). This includes weekly pre-billing reviews (triple check), assuring missing or misplaced items are addressed, and complete end-of-the month pre-billing (often called quad check) reviews to ensure any misplaced items were addressed.

Being proactive takes knowledge, time, planning, and commitment, but it is critical. Administrators should remember it is their responsibility to ensure that the facility is compliant and, as noted, professionals can be referred to their licensing boards for discipline if it is out of compliance.

In Summary

While all audits have risks, providers can improve their chances of success by using a proactive approach, which includes inspecting what you expect and assuring that pre-billing programs

This means looking at your internal compliance program to evaluate how you inspect what you expect... **Being proactive** takes knowledge, time, planning, and commitment, but it is critical.

are in place and being performed as designed. In addition, it is recommended that as part of a facility's proactive plan they seek legal, accounting, as well as clinical risk management advice.

For questions please email RB Health Partners, Inc. via Robin Bleier at robin@rbhealthpartners.com or call (727) 786-3032.





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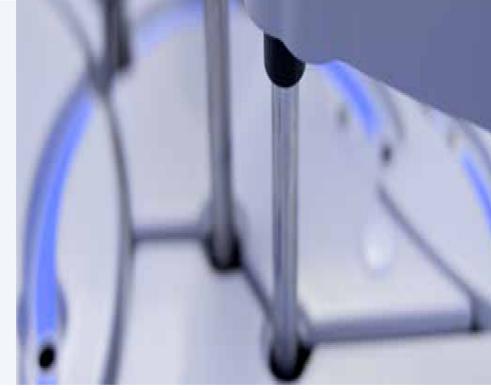
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MMA 101: A Crash Course in Florida's New Statewide Medicaid Managed Care Program

By Jamie R. Sowers, Outreach Coordinator, Florida Agency for Health Care Administration



he Agency for Health Care Administration (AHCA) spent the better part of 2013 rolling out the first segment

of Florida's Statewide Medicaid Managed Care (SMMC) Program. The Long-term Care (LTC) program, which was designed to serve medically fragile children and adults living in nursing homes, assisted living facilities, hospices, or receiving LTC services in a home-based setting, now covers approximately 90,000 recipients across the state. With the implementation of this subset of the SMMC program complete, the Agency is shifting its focus toward the second portion, referred to as the Managed Medical Assistance, or MMA, program. Most recipients enrolled in an LTC plan will be required to enroll in an MMA plan.

Managed Medical Assistance differs from LTC in that it provides coverage for services that are typically considered to be acute care. However, most recipients enrolled in an LTC plan will also be required to enroll in an MMA for their acute care services. Examples of these services include physician services, inpatient and outpatient hospital services, mental health services, and prescription drug coverage. Under the MMA program, the Agency will be transitioning from a traditional fee-for-service delivery system to one where managed care plans are contracted to provide services in one or more of the existing Medicaid regions around the state. Providers will then seek authorization for services and bill directly to the MMA managed care plan(s) that they choose to contract with for services rendered to covered recipients.

For individuals who are Medicare and Medicaid eligible, there is no change to the Medicare benefits with the implementation of MMA.

To ensure that providers are prepared for this transition, the Agency has created a central hub for information pertaining to the SMMC program. Providers who plan to participate in the MMA program should bookmark the following URL: http://ahca.myflorida.com/SMMC.

The SMMC homepage provides links to help providers to sign up for program alerts via email, submit comments and questions, and access Frequently Asked Questions documents created for each program. The "News and Events" tab houses a calendar of events and training, which outlines upcoming webinars that cover topics relevant to MMA providers. There is also a dedicated tab for the MMA program, which contains a rollout schedule, regional map, plan availability by region, and a list of representatives from each plan who can be contacted to discuss contracting With the implementation of this subset of the SMMC program complete, the Agency is shifting its focus toward the second portion, referred to as the Managed Medical Assistance, or MMA, program.

DONA/LTC

Α

MMA Implementation Schedule							
Regions	2, 3, 4	5, 6, 8	10, 11	1, 7, 9			
Go-Live Date	5/1/2014	6/1/2014	7/1/2014	8/1/2014			

FADONA/LTC is here for you!

options for providers.

The outreach efforts for the MMA program have already begun. The Agency, with the help of its choice counseling vendor, has sent informational packets to eligible recipients in much of the Panhandle and Southwest Florida. Providers who have not been contacted by a managed care plan to provide MMA services are encouraged to use the website referenced above to contact representatives from one or more plans in their region to discuss contracting options. The MMA program will go live starting with North Florida regions on May 1 and continuing rolling out around the state until the last regions go live on August 1, 2014. Upon completion, the MMA program will affect nearly 85 percent of Florida's 3.5 million Medicaid recipients.

The Agency has also instituted continuity of care provisions for providers and managed care plans. These requirements will supplement the website and outreach efforts in ensuring a seamless transition from the current delivery system to SMMC:

 <u>Health care providers should not</u> cancel appointments with current patients. Health plans must honor any ongoing treatment that was authorized prior to the recipient's enrollment into the plan for up to 60 days after MMA starts in each region.

• <u>Providers will be paid</u>. Providers should continue providing any services that were previously authorized, regardless of whether the provider is participating in the plan's network. Plans must pay for previously authorized services for up to 60 days after MMA starts in each region, and must pay providers at the rate previously received for up to 30 days.

• Prescriptions will be honored. Plans must allow recipients to continue receiving their prescriptions through their current provider for up to 60 days after MMA starts in their respective region, until their prescriptions can be transferred to a provider in the plan's network.

D O N A / L T C

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In summary, the Agency is making every effort to inform providers and recipients of the approaching changes to Florida's Medicaid program. We are offering multiple provider webinars, which can be found on the SMMC Calendar of Events or in a recorded format on the Agency's YouTube channel.

The slide decks from these presentations can be viewed, shared, or downloaded on the Agency's SlideShare profile. Any remaining questions should be addressed in the Frequently Asked Questions document available on the SMMC website, but providers may also submit questions directly to the Agency at **FLMedicaid** ManagedCare@ahca.myflorida.com.

Facebook: facebook.com/AHCAFlorida Twitter: twitter.com/AHCA_FL YouTube: youtube.com/AHCAFlorida SlideShare: slideshare.net/AHCAFlorida

Yo Ho! Pillage & Plunder with the Platinum Partners



This year's Fun Night will be held at the Rosen Center Hotel on Wednesday, April 30, from 7 to 10:30 p.m. Join us for fun games, a delicious buffet dinner, DJ, pirate costume contest, Chinese Auction, door prizes, and much more.

The event is brought to you by the following Alliance Council members — our esteemed Platinum Partners — who planned and sponsored this year's pirate-themed Fun Night:

★ Allied Mobile X-Ray ★ American Health Associates **★** American Medical Technologies **★** Airamid ★ EccoLab Group ★ GOJO ★ Hartmann ★ Healogics ★ Humana With C ★ McKesson ★ Medline ★ MobilexUSA ★ Novaerus ★ Optum PharmScript * RXPERTS * Wings Health Care Solutions PLATINUM

PARTNERS

FADONA Focus Wins APEX Award of Excellence!

By Matt Reese, BS, Education and Communications Manager

F

ADONA — the largest state chapter of NADONA has been awarded the APEX 2013 Award of

Excellence in the category of Newsletters – Electronic & Web for FADONA's statewide newsletter *FADONA Focus*.

APEX 2013 — the 25th Annual Awards for Publication Excellence recognized outstanding publications including not only newsletters and magazines, but also annual reports, brochures, websites, and social media.

According to the APEX 2013 judges, awards were based on excellence in graphic design, editorial content, and the ability to achieve overall communications excellence. Naturally, entries in design categories were judged solely on the basis of their graphic design, and writing entries were evaluated primarily on the basis of editorial quality.

FADONA President Jean Nelson, RN-BC, BSHCA, said, "It is very



lan Cordes, Director of Operations, with FADONA President Jean Nelson

rewarding to be recognized, but this is a team effort. The staff and board members work very hard to publish a newsletter that is both reader-friendly and full of information we hope our membership finds useful."

About the APEX Awards

The APEX Awards for Publication Excellence is an annual competition for

SILENT AUCTION

Last year, FADONA raised nearly \$1,000 for its scholarship fund from its second annual silent auction. We are inviting all our members, attendees, and exhibitors to donate auction items to raise money for FADONA's scholarship fund. Over the years, FADONA has provided tens of thousands of dollars in scholarships to its members and their staff and, with your support, we will be able to continue our tradition.

For more information on how you can make a contribution, please call **Matt Reese** at the FADONA business office at

(561) 683-0037.

"It is very rewarding to be recognized, but this is a team effort. The staff and board members work very hard to publish a newsletter that is both reader-friendly and full of information we hope our membership finds useful."

writers, editors, publication staffs, and business and nonprofit communicators. It is sponsored by Communications Concepts, Inc., publishers of business communication reports for professional communicators.

With more than 2,400 entries, competition was exceptionally intense. 100 Grand Awards were presented to honor outstanding work in 12 major categories, while 971 Awards of Excellence recognized exceptional entries in 138 subcategories.

FADONA's Alliance Council Members – Our Preferred Vendors

Guy Carpenter

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ADONA/LTC

Federal Commission on LTC Concludes Its Work

he federal Commission on Long-Term Care was created by the American Taxpayer Relief Act of 2012 (the "Fiscal Cliff" bill). The Commission comprised 15 appointees. The Commission was tasked with developing "a plan for the establishment, implementation, and financing of a comprehensive, coordinated, and high-quality system that ensures the availability of long-term services and supports for individuals in need of such services and supports..."

The Commission first met on June 27, 2013, and, following a deliberative but truncated process, held a statutorily required final vote regarding a package of recommendations on Sept. 12, 2013. The Commission voted 9-6 to put forward a report "as the broad agreement of the Commission." The Commission publicly released its full report on Sept. 18, 2013.

Five of the six commissioners who voted against the report issued alternate recommendations to address the challenges facing our country's long-term services and supports (LTSS) system.

While recognizing the effort of the entire Commission and its staff during an unusually compressed three-month timeframe, along with the broad range of views among the commissioners, these five commissioners concluded that the recommendations of the Commission in its final report do not fulfill its comprehensive charge.

Shortly after the final Commission vote, the five commissioners issued a statement "to express our shared vision of what is necessary to meet Congress's mandate to establish and finance a high-quality, comprehensive LTSS system for Americans who need such services. The five Commissioners vision is to create such an inclusive LTSS system for people of all ages — a system that will meet individuals' functional and cognitive support needs with quality care in the most integrated setting.

The alternate recommendations

offered by the five Commissioners are summarized below. A more detailed report addressing these recommendations was issued and made available on the Center's website.

Summary of Alternate Recommendations

1. To spread the risk for the costs of long-term services and supports as broadly as possible, provide benefits to people of all ages who need them, and allow individuals and families to meet their responsibilities, a public social insurance program that is easily understood and navigated must be established. That program could provide comprehensive benefits or a more limited package. But a social insurance program must be at the core of an effective LTSS financing system. A social insurance core would not eliminate the roles of private insurance or of family financing or caregiving. Rather it would make them more manageable.

2. To ensure high-quality services for individuals and their families in all care settings, the law must assure that direct-care workers are paid a living wage, are well trained, and have opportunities for career advancement.

3. To integrate family caregivers into a comprehensive LTSS system, public programs providing services to LTSS beneficiaries must appropriately engage family caregivers and address their needs.

While the nation moves to a comprehensive system for LTSS, and to supplement it as necessary, we recognize that improvements are needed in current programs. Among the improvements suggested by individual Commissioners are the following:

• To meet the needs of those who qualify for Medicare, the current Medicare program must be adapted to reduce counterproductive, outdated, and unreasonable barriers to outpatient therapies, home health, and skilled nursing facility care.

• To strengthen Medicaid, existing

financial incentives to states for quality home- and community-based services must be extended and streamlined to make it easier to rebalance Medicaid LTSS. In addition, Medicaid's benefits must be improved for people who rely on its services.

The key to the best outcome and providing the right service at the right time begins with assessment, followed by pyschosocial, mental, and physical clinical gap analysis, with ongoing evaluation.

• To provide new ways to access LTSS for persons with disabilities, taxpreferred savings accounts must be provided for people and their families who are not currently receiving LTSS through the Medicaid program, the Medicaid buy-in program for workers with modest earnings must be expanded, and a new program for workers with significant disabilities who have higher earnings must be piloted.

Let us know what you think by sending your comments to fadona@fadona.org.

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