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Florida Association Directors of Nursing Administration/LTC

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

2018 Nurse Administrator of the Year Honored



FADONA's 2018 Nurse Administrator of the Year: Dan Davis, Consulate Health Care; FADONA President Susie Jensvold; Andi Clark, Chief Nursing Officer, Consulate Health Care; 2018 Nurse Administrator of the Year Diane Mitchell, RN, DON, Heron Pointe in Brooksville, FL; Reginald Eldridge, NHA, Executive Director, Heron Pointe; Charlene Peters, VP Clinical Care, Florida Division, Consulate Health Care; Betty Barron, 1st Vice President, FADONA; and Brian Kidd, MSN, GNP-BC, Director of Clinical Operations, OPTUMCare (award sponsor).

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Visit pages 6-8 to learn more about the 2018 Carrying the Torch of Leadership Convention!

We salute our sponsors for their generous support!

FADONA's 2018 Annual Convention: Sponsorships and Grants



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Consulate Health Care – Welcome Reception



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RB Health Partners – LPN & CNA Awards of Excellence

Bankers Life – Coffee Break

OPTUMCare – Nurse Administrator of the Year Award

Guardian Pharmacy – Hotel Key Cards

GOJO Industries – Tote Bags

Consulate Health Care – Name Badge Holders

Polaris Pharmacy Services – Board Dinner

FADONA's Platinum Partners – Casino Fun Night



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Message from the President



ADONA's theme at its conference was Nurse Leaders Are Survivors!

We are in a time of change in our centers. If you don't like it, change it. If you can't change it, change the way you think about it!

To survive, we need to support our fellow nurse leaders in the PA/LTC world.

FADONA is where the support can be found. Our focus is to recruit and increase our membership throughout the state.

Please email me or one of the board members with any thoughts and ideas you may have that will aid us in our efforts.

Betty Barron, 1st Vice President and Convention Planning Committee Chair, is in charge of orchestrating FADONA's 32nd Annual Conference — which is being held at the DoubleTree by Hilton Orlando at Sea World, March 11-14, 2019!

Carrying the Torch of Leadership 2019 will have the most innovative and timely lineup of clinical, administrative, and motivational offerings, not to mention that it remains the best LTC educational value in Florida.

Please be sure to mark the conference dates on your calendar, and plan to attend. In order to survive in this profession, we all need to rely on each other for support when navigating the PA/LTC world.

It is my pleasure to introduce to you our new Region III Vice President, Marilyn Nalley, RN, as well as our new Membership Committee Co-Chair, Kimberly Joynes, DON. We are confident that both will serve the best interests of our members only and promote FADONA's mission and vision.

We are also pleased to announce that we are hosting two, six-hour CE/CEU Regional Symposiums in October. Both will feature Pamela Scarborough, PT, DPT, MS, CDE, CWS, director of public relations and education for American Medical Technologies as the lead speaker.

Besides being a wound care expert and an amazing speaker, Dr. Scarborough is a physical therapist with more than 35 years' experience as a clinician, team leader,



Susie Jensvold

professional educator, and mentor. In addition to holding a license to practice physical therapy in the state of Texas, she is board certified as both a diabetes educator (CDE) and wound specialist (CWS).

The Region II Symposium will be in Ocala on Wednesday, Oct. 24.

The Region I Symposium is on Thursday, Oct. 25, and will

be hosted by Azalia Trace, 10100 Hillview Dr., Pensacola, FL 32514. Dr. Scarborough will speak from 9 a.m. to 12 p.m. and then from 1-2 p.m. She will be followed from 2-3 p.m., by Kristi Conoly, RN, Registered Nursing Consultant Supervisor, Agency for Health Care Administration, HQA Area 2.

As you know, health care is ever changing, and we must stay current with the new regulations, standards of practice, and techniques in order to keep our nursing staff up to date to provide our residents with the best quality of care.

FADONA/LTC is the only dedicated organization for directors of nursing and nurse administrators in the state of Florida. We are here to support our members and love to hear from you during the year with recommendations and suggestions. Be on the lookout for information and for a meeting near you. These meetings are always very informative and great places to network.

Members Unite

The leadership is passionate about FADONA's place in the continuum and its role in providing members with the necessary tools to allow them to succeed and excel as professionals and as nurse administrators. We continue to have a positive impact on care and increase our membership and influence. You can assist by inviting your colleagues to be members if they are not. You may contact your FADONA board members or staff as a resource at any time.

Please check out our website at www.fadona.org for additional news and updates.

Respectfully submitted,

Susie Jensvold

**Susie Jensvold, BSN, MHSA, RN
President**

Regional Reports



Sharyn Figgins

REGION I

Region I — Northwest

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

It's been such a busy year. As nurse managers we are always juggling our multiple roles and responsibilities toward our residents, associates, families, employers, and governing agencies.

What has always helped me through this workload and stressors is my support group of peers — other DONs and managers navigating the same issues and experiences. FADONA provides this network of support, education, and resources.

Our local chapters provide an excellent opportunity to share and learn through meetings, phone calls, and emails. How are other DONs managing the changing environment? What survey issues do we have in our region? Who has been through the same experiences?

We are very excited to announce that a six-hour **Region I Symposium** will be held on Thursday, Oct. 25, at Azalea Trace, 10100 Hillview Dr., Pensacola, FL 32514.

Registration will be from 8:30-9 a.m.

9 a.m.-12 p.m.: *Wound Care Update with Pamela Scarborough, PT, DPT, MS, CWS*

12-1 p.m.: *Lunch is provided*

2-4 p.m.: *Regulatory Update with Kristi Conoly, RN, Registered Nursing Consultant Supervisor, Agency for Health Care Administration Tallahassee, HQA Area 2*

Please contact me with any questions or if you would like to help with the Regional Symposium or assist in organizing our local chapter meetings. My phone is (850)

313-6325 and email sfiggins@aol.com.

Sharyn Figgins, RN, MSN
Region I Vice President



Jacqueline Hinerman

REGION II

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

Our industry is changing rapidly in terms of human resources, regulatory, and standards of care. FADONA meetings are a wonderful way to network with others to stay up to date with the changes.

We are pleased to share that we are hosting a six-hour CE/CEU **Region II Symposium** on Wednesday, Oct. 24, in Ocala, featuring lead speaker Pamela Scarborough, PT, DPT, MS, CDE, CWS; director of public relations and education for American Medical Technologies.

Our district meets the last Thursday of the month at noon, at Carrabbas, 2370 SW College Road, Ocala. The meeting is designed for networking and speaking with others in the same industry. Please join us. You'll be happy you did!

If you are interested in hosting a meeting, or would like to be on our email list, please send me a message.

Jacqueline Hinerman, phone, (352) 362-0076; email, jacqueline.hinerman@northporthealth.com.

Jacqueline Hinerman, RN
Region II Vice President



Marilyn M. Nalley

REGION III

Region III — Centraleast

3A—Lake, Osceola, Orange, Seminole
3B—Volusia

Hello, my name is Marilyn Nalley and I'm excited to be the new Region III Vice President. We are planning local and regional meetings and need your help! Please contact me at (772) 284-0484 or marilyn.m.nalley@consulatehc.com.

Marilyn M. Nalley, RN
Region III Vice President

Region IV — Centralwest

4A—Hillsborough, Pinellas, Highlands, Polk
4B—Hardee, Hernando, Sumter, Citrus, Pasco

We are looking for ways to regenerate and come together for support and networking opportunities.

If you are interested in getting involved, this is a great way and FADONA is here to assist. Getting together gives area DONs and nurse leaders an opportunity to see what's new in the industry and also leave plenty of time to network with colleagues.

Here are the leadership contacts for the Pinellas County chapter:

Shalika Vitta, Vice President
svitta80@gmail.com (727) 216-5126

Tory Flood, Secretary
tory.flood@ahss.org (727) 858-1268

Rhonda Blum, Treasurer
rblum@geiger.com (727) 232-6250

We invite you to get involved in the events and meetings occurring within the counties under Region IV. For information, contact **Ian Cordes** at the FADONA Business Office at (561) 689-6321.

**Regional
REPORTS**



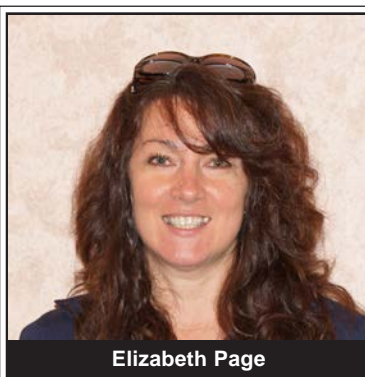
Elizabeth Borer

REGION V

Region V — Southwest
5A—Manatee, Charlotte, Collier
5B—Desoto, Lee, Sarasota

I am currently reaching out to all DONs in the Region V area, which encompasses 71 facilities. I look forward to speaking with each of you to discuss ways to solidify a consistent quarterly meeting. FADONA is committed to collaborating with aspiring nurse leaders in our quest to deliver the best care for our residents and patients in the post-acute care continuum. Please reach out to me if you are interested in being a part of our vision and mission. Please call me on my cell: (941) 400-7369, or email elizabeth.borer@aol.com.

Elizabeth Borer, RN
Region V Vice President



Elizabeth Page

REGION VI

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

If you would like information on future meetings and events for the Palm Beach County chapter, please call **Andrew**

Rosebrough, PBCDONA community liaison, at (561) 723-7888 or email andrew@pmdxu.com.

For questions about Palm Beach County chapter, please call **Debbie Grotke**, chapter president, at (561) 683-1400; email grotke@anho.edu.

If you have any questions for or about Region VI, please call me at (305) 790-2689 or email epage@polarisrx.com.

Elizabeth Page, RN
Region VI Vice President



Amina Dubuisson

REGION VII

Region VII — Southeast
Miami-Dade, Monroe, and Broward Counties
This region runs from Deerfield Beach all the way south to Key West.

Broward County Chapter: Call or text **Heather Grasso**, secretary, Broward FADONA, at (561) 275-9273 or email fadonabroward@gmail.com.

Miami Chapter: The Miami Chapter welcomes a new Executive Board. They are:

President **Claudia Innocent**, (954) 647-5098; 1st Vice President **Anne Museau**, (305) 962-9537; 2nd Vice President **Charviette Paramore**, (786) 660-0170; Treasurer **Idel Benjamin**, (954) 243-6668; and Secretary **Bobbette Sangrado**, (917) 705-8104.

If you would like to help us develop and enhance our region, contact the chapters directly, or **Amina Dubuisson** at (954) 790-5171, or adubuisson@greystonehealth.com.

Amina Dubuisson
Region VII Vice President

What would you do if you discovered the Golden Egg?

Visit the **CareerCenters** at www.fadona.org and www.fmda.org.

These are the official online **CareerCenters** of the Florida Association Directors of Nursing Administration and FMDA – The Florida Society for Post-Acute and Long-Term Care Medicine.

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

Job Seekers may post their résumé (**it's FREE**) — confidentially, if preferred — so employers can actively search for you. **Let these CareerCenters help you make your next employment connection!**

FADONA's 31st Annual Convention Passed the Torch of Leadership with Enthusiasm

Convention Corner by Betty Barron, MSN, RN; 1st Vice President, and Chair, Convention Planning Committee, FADONA

Carrying the Torch of Leadership 2018 combined exceptional educational programming, great networking opportunities, timely advocacy, and leadership training for nurse administrators practicing in the skilled nursing and post-acute care setting.



Betty Barron

intestinal motility disorders, leadership health, major depressive disorder, medical marijuana, medication-related changes, pressure ulcer/injury prevention and care, recognizing impairment in the workplace, depression and delirium, telehealth, wound assessments, and measurement techniques.

This year, FADONA's Leadership Academy featured an amazing daylong high-energy, motivational, leadership training workshop titled Ignite the Power of Your Leadership. It was led by nationally recognized motivational and leadership training expert Dr. Earl Suttle, CEO and Founder, Leadership Success International.

Other convention topics included active shooter preparedness, CMS Mega Rule, infection prevention and control, gastro-

FADONA President Susie Jensvold is very enthusiastic about the success of the 31st Annual Convention. "FADONA's annual program is based upon the Principles of Excellence for Nurse Administrators in Long-Term Care as well as the identified educational needs from last year's needs assessment," Jensvold said. "Providing quality, compassionate care to our residents has always been the focal point of FADONA's annual convention and this year



Kimberly Biegasiewicz with Leadership guru and speaker Dr. Earl Suttle

was no different. FADONA continues to be a leader for nurse administrator continuing education and advocacy throughout the state of Florida."

Continued on page 8

I fill a unique role with my NADONA/LTC membership.

Isn't it time you belonged?

The daily life of a long-term care nurse leader is filled with obstacles and never-ending challenges. The position requires graceful strength, even in the hardest moments. **At NADONA/LTC, we understand, because we've walked in your shoes.**

NADONA/LTC is the largest educational organization dedicated exclusively to nursing and administration professionals in long-term care and assisted living.

Member benefits include:

- Professional Nursing Certification Exams
- NADONA National Conference Incentives
- State Chapter Membership
- Mentorship Programs
- Scholarships and Annual Awards
- Career Resources
- Industry-Leading Publications
- Corporate Partner Discounts

We continue to build the NADONA/LTC professional network—one step at a time.

Join at nadona.org today!



Long-term care is rapidly changing. New regulations and guidelines are being implemented in facilities across the country and within specific states such as antipsychotic reduction guidelines and antibiotic stewardship initiatives. How care is and will be delivered is changing with new state and federal legislative initiatives. How residents and families are obtaining information has evolved significantly with the increased use of the Internet and other social media. The National Conference will provide you with updates on these and other important trends that are or will be affecting you, your facilities, and your residents.

- Celebrate the achievements of NADONA and its' nurse leader membership
- Discover new knowledge and skills relevant to care for post-acute/long term care residents
- Recognize nursing education, practice, and research concepts that will support NADONA nurse leaders
- Enhance the personal and professional growth of NADONA nurse leaders
- Support the mission of NADONA and its members through networking and discussion of common professional and association concerns



Andi Clark, Chief Nursing Officer at Consulate Healthcare during the Consulate-sponsored Welcome Reception



Regional Roundtable Discussions leaders Jackie Hinnerman, Region II Vice President (left), with Sharyn Figgins, Region I Vice President



Classic Sponsor HUMANA with FADONA President Susie Jensvold



Classic Sponsor Ocean Spray with FADONA President Susie Jensvold



Bankers Life's Lisa Sliney with FADONA President Susie Jensvold



Mobilex USA's Robbie Williams (left) and Brinn Helton with FADONA's Amina Dubuisson and Susie Jensvold



Susie Jensvold, speaker Dr. Diane Sanders-Cepeda, Susan Sturges, Bobbi Jo Rivera, and FADONA President Susie Jensvold

Jensvold kicked off the Awards Ceremony by showing a special 8-minute video history in commemoration of FADONA's 31st Anniversary (available at: <https://youtu.be/OnhTeVf-vU8>).

Then, she proudly announced the establishment of the **Patches Bryan Scholarship**, named in honor of an incredible nurse leader who cherished knowledge, education, and advanced training. Patches was a founding member of FADONA and a former officer. For many years, she proudly served as the Chief Executive Clinical Officer of Greystone Health Network, where she instilled pride and passion in the practice of long-term care nursing. With generous financial support from Greystone, scholarships are now available. Patches lost a courageous battle with cancer just two weeks after she attended the 2017 convention — where she was honored for her contribution to FADONA and nursing excellence in LTC.

Susie thanked 1st Vice President and Convention Chair **Betty Barron** and her planning team: **Kimberly Biegasiewicz**,



Speaker Debra Hagerty, GNP; Associate Professor, Armstrong State University, Savannah, GA; President, GADONA

Amina Dubuisson, Jackie Hinerman, and Elizabeth Page, who worked tirelessly to develop the amazing agenda.

She also thanked Grand Sponsor **OPTUMCare**, as well as Classic Sponsors **Bankers Life, Humana, Ocean Spray, and VITAS Health Care**.

Next up, the CNA and LPN Awards of Excellence, which were sponsored by **RB Health Partners** for the eighth year in row. The winner of the 2018 CNA Award of Excellence was **Sadeta Kabilovic, CNA**, from Menorah Manor in St. Petersburg. The winner of the 2018 LPN Award of Excellence was **Kimberly Huff, LPN Unit Charge Nurse** at Lady Lake Specialty Care Center.

There were many inspiring candidates for the Nurse Administrator of the Year Award. The highest honors were presented to three of the most impressive nurse administrators, sponsored for the 15th consecutive year by **OPTUMCare**. There were two deserving winners of the 2018 Nurse Administrator Award of Excellence. The first award was presented to **Kim Adams, RN, DON**, The Chateau at Moorings Park in Naples. The second award-winner was **Tasha Coccagna, RN, DON**, Gardens Health & Rehab in Daytona Beach.

This year's top honor, the 2018 Nurse Administrator of the Year, was presented to **Diane Mitchell, RN, DON** at Heron Pointe in Brooksville.


Wrapping up the Awards Ceremony, Susie swore in recently elected FADONA



FADONA President Susie Jensvold (center) with Grand Sponsor OPTUMCare's Brian Kidd, MSN, GNP-BC; and Marva Edwards-Marshall, DNS

officers and directors including: 2nd Vice President **Norma Collins**, Secretary **Kimberly Biegasiewicz**, Region II Vice President **Jacqueline Hinerman**, Region IV Vice President **Bobbi Jo Rivera**, and Region VI Vice President **Elizabeth Page**.

Videos of the 2018 Presentation of Awards at the Hilton Daytona Beach Oceanfront Resort, including swearing in of newly elected officers and directors and other recognitions, may be viewed at <https://youtu.be/tDNGcimj8wQ> and <https://youtu.be/EBN-Ao9r4qk>.

FADONA's 32nd Annual Convention, Carrying the Torch of Leadership 2019, will be held from March 11 to 14, at the DoubleTree by Hilton at SeaWorld on International Drive in Orlando. For information visit www.fadona.org or contact **Ian Cordes**, FADONA's Director of Operations, at (561) 689-6321 or icordes@fadona.org. 



Long-time sponsors Guardian Pharmacy with Rob Taymans, Jill Daly, FADONA President Susie Jensvold, and Matt Depenbrock



Cathy Sallitto, Celinda Rushing, with FADONA President Susie Jensvold



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Latest on Transfer and Discharge

By Karen L. Goldsmith, Esq.; Goldsmith & Grout, PA

The current State Operations Manual (SOM) includes issues related to transfer and discharge that, while not necessarily new, have not arisen before. As a result, facilities are being cited for inappropriate transfer or discharge.

Transfer occurs when a resident expects to return to the original building. Discharge occurs when the resident is leaving the building for good.

The concepts behind each are virtually the same. You can discharge or transfer a resident when:

- It is necessary for the resident's welfare and you cannot meet their needs in the center;
- The resident's health has improved, and they no longer need your services;
- The safety of individuals is endangered due to the clinical or behavioral status of the resident;
- The health of individuals in the facility would be endangered if the resident remains;
- Non-payment;
- The facility ceases to operate.

Not all of these are problematic. We will focus on the ones that are.

Transfer to the hospital has been the basis of a number of deficiencies. It may be implied from the interpretive guidelines that the concern is that residents may be sent to the hospital as a means of "getting rid" of difficult residents. When a resident is sent to the hospital you must give them notice of transfer (or discharge). Most times, there is an expectation that the resident will return. If there is no such expectation, you need to be sure that you have documented in your records why you do not think the resident will come back. You must have one of the six reasons even if the transfer is to the hospital. Typically, that is the first one — that the resident needs more care than you can give in your center. Sometimes it is because of the dangerous behavior of the resident (Baker Act). The resident has a right to challenge the transfer even if it results from an emergent situation.

Timing of the notice is affected by the



Karen Goldsmith

resident's condition. Typically, the resident is entitled to 30-days notice. Of course, a resident being sent to the hospital likely cannot remain in your center for 30 days. So, the notice period is compressed to a reasonable period of time based on the circumstances.

If a resident challenges the transfer, you may not transfer that resident while the appeal is pending. So, you ask: Do I have to take a resident back who should be in the hospital? No, you do not. The operative word is *should*. The regulation states that you do not have to take the resident back if to do so would endanger their health or safety or that of others. The resident may remain in the hospital while the appeal runs its course or the need for hospitalization no longer exists.

That resident must receive notice and an opportunity to appeal the transfer when they go to the hospital.


If you decide that you cannot take that resident back, you must give a second discharge notice to that resident. Again, you must include one of the six reasons above as the basis for the discharge. If the resident appeals and it is not dangerous to their health or safety or that of others, you have to take them back, pending the outcome of the appeal. Typically, the reason is that the resident's needs cannot be met in your facility. Be cautious when applying this standard. The condition of the resident that you have to assess is that which exists at the time of potential return, not when transferred to the hospital. You must document "the specific services the receiving facility will provide to meet the needs of the resident which cannot be met at the current facility." Be extremely careful

when utilizing this test — surveyors will look carefully to see if it is truly accurate. If the resident needs a locked unit and you do not have one, that may be sufficient. If the resident needs a service that you CAN supply or that you are supplying to other residents, it may not. Careful scrutiny will be applied on all of the circumstances relating to this discharge.

Another issue prime for citation involves whether the discharge/transfer was facility or resident initiated. In the past, if the resident's doctor was the one initiating the transfer to the hospital, it could be treated as a resident-initiated transfer. Now this is a rarity. The interpretive guidelines state: "[r]esidents who are sent emergently to the hospital are considered facility-initiated transfer because the resident's return is generally expected." That resident must receive notice and an opportunity to appeal the transfer when they go to the hospital.

A resident-initiated discharge/transfer is one in which a resident has given verbal or written notice of the intent to leave the facility. The intent must be specific in nature, not general. For example, a resident who says from time to time that they want to go home has not expressed a specific intent to leave the facility. A competent resident who states that they are leaving and going home and who acts on that statement would be expressing the specific intent.

In conclusion, remember the difference between a resident-initiated transfer/discharge in which you do not have to give notice and a facility-initiated transfer/discharge. As well, that if you send someone to the hospital and it is not initiated by the resident, you must give notice of transfer. If you do not wish to take them back and can establish one of the six reasons, you must give a second notice of discharge. The only exception would be if the resident expressed the specific intent not to return to the center when they were sent to the hospital, in which case you would give a discharge notice when they left.

If you have any issues, please feel free to contact me at (407) 312-4938 or kgoldsmith@ggflawfirm.com. If I can help, I will be happy to do so. 

FADONA Honors Patches Bryan's Legacy

– The Patches Bryan Scholarship will assist nursing students and established nurse administrators alike to realize their dreams and enhance their skills and competencies.

The Patches Bryan Scholarship was named in honor of an incredible nurse leader who cherished knowledge, education, and advanced training. Patches was a founding member of FADONA and former officer. For many years, she proudly served as the Chief Executive Clinical Officer of Greystone Health Network, where she instilled pride and passion in the practice of long-term care nursing.

“These scholarship dollars will help foster a new generation of young nurses who will be instrumental in leading the charge of post-acute and long-term care. We are very excited for the future and we thank Greystone Health Network for its commitment and support in partnering with FADONA on this worthy cause.”

After a long and brave battle with cancer, Patches left this earth on March 31, 2017, leaving behind a lasting legacy.

With generous financial support from Greystone Health Network, scholarships are now being offered by FADONA in honor of Patches.

“Patches was a true leader and mentor. She helped raise the bar throughout the

long-term care industry through her dedication to quality and clinical initiatives. She was highly supportive, always eager to lend a hand with a smile, and will forever be remembered for her sense of humor and love of the residents,” said Chris Masterson, Vice President, Risk Management & Compliance, Greystone Healthcare Management.

Greystone Health Network is excited to partner with FADONA and provide financial support to qualified candidates who share Patches Bryan's passion for learning, advancement, and excellence in post-acute and long-term care nursing.

FADONA is currently seeking qualified nominees who share Patches Bryan's nursing ideals — championing quality and clinical advancements — while raising the bar of nursing excellence and resident care in the LTC setting.

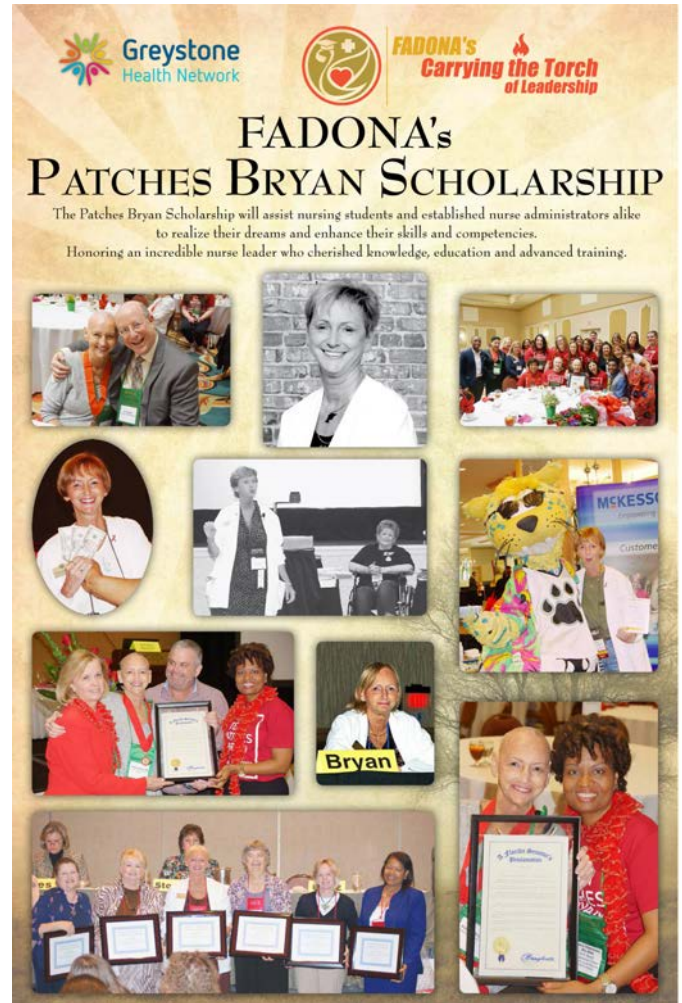
The Patches Bryan Scholarship is a way for FADONA and Greystone to honor Patches and to give back to the community of nurses who will be at the forefront of LTC care in the 21st century. Applicants may be currently licensed RNs, LPNs, or certified nursing assistants.

FADONA President Susie Jenvold is very proud that the association is offering these scholarship funds to help promote nursing education and training. “This scholarship program is vital to the success

of current and future nurse leaders seeking help in funding their educational pursuits,” Jenvold said.

“These scholarship dollars will help foster a new generation of young nurses who will be instrumental in leading the charge of post-acute and long-term care. We are very excited for the future and we thank Greystone Health Network for its commitment and support in partnering with FADONA on this worthy cause,” she added.

For more information, visit <http://fadona.org/scholarship.html> or call the business office at (561) 689-6321. ☒



Retention of New Nurses in South Florida Hospitals

By Jhoanna Madden, EdD, MBA

Retention of newly licensed registered nurses (NLRNs) is a growing concern among health systems in industrialized nations, including the United States. Because of the financial and nonfinancial consequences linked to RN turnover — including patient care — retention of registered nurses (RNs) and particularly NLRNs deserves the attention of the health care community, including hospital administrators and the organizations they lead, patients and their family members, nursing school programs and educators, and most importantly nursing students and the nursing profession overall.

My doctoral studies led me to a study designed to determine whether NLRNs' professional and organizational commitment is supported by the retention initiatives currently in place in South Florida hospitals. I surveyed nurse leaders from the major health systems in South Florida, and new nurse graduates — between six months and two years of post-licensure — who worked and resided in South Florida.

Some of the study findings are in agreement with the current literature, such as challenges NLRNs face, the role of clinical experiences, the significance of interdisciplinary relationships, and the influence of leaders.

Specific challenges reported by new nurses include: time pressures, increased paperwork, interdisciplinary complexities, patient loads, and poor staffing. Furthermore, NLRNs are already facing the implications of budget constraints, HCAHPS, and reimbursement, which are consequences of health care reform.

In an effort to learn more about onboarding initiatives in South Florida from a new nurse perspective, I found that the most frequently answered response was no onboarding program. However, the majority of new nurses participated in an onboarding initiative, such as internships, residencies, and orientations. Versant and StaRN are two of the new nurse residency programs highlighted.




Jhoanna Madden

Although new nurses showed their commitment to employers and the nursing profession, their long-term employment merits attention because lack of indefinite organizational commitment was a predominant response. It is important to highlight that the role of employment contracts for NLRNs — a common practice when NLRNs participate in

transition initiatives, such as residences, internships, and new nurse programs — could have influenced retention data. After all, the length of such contracts often last up to two years.

High quality work environments are fundamental to providing quality of care and achieving job satisfaction.

In closing, new graduates value training opportunities, career paths, and realistic workloads. High-quality work environments are fundamental to providing quality of care and achieving job satisfaction. In the spirit of empowerment and transformation, nurse leaders can help new nurses transition and get acclimated to their new roles by providing a pathway that leads to embracing the changes and challenges of our health care system today. 

Dr. Jhoanna Madden earned her bachelor's degree in business from Florida International University and her master's of business administration from the University of Miami. She was awarded a doctor of education degree from Nova Southeastern University with a focus on organizational leadership and healthcare education.

She has 20 years' experience focused on market development capacities within Fortune 500 environments and higher learning institutions. Dr. Madden is currently employed at Chamberlain University.

Florida Nurse Supply Findings Published

The Florida Center for Nursing conducts an analysis of licensed practical nurses, registered nurses, and advanced registered nurse practitioners every two years to get a picture of Florida's nurse supply — including the number of nurses, demographics, education, employment status, and specialization.


The supply reports present summary findings from the most recent completed licensure renewal cycle (2016-2017):

- The supply of RNs grew about 7.4%, ARNPs grew by 22%, and the number of LPNs decreased by 1.9% since 2015.

- Overall, the nurse workforce lost about 1,300 nurses to retirement in 2016-2017. About 46% of renewing RNs, 44% of renewing LPNs, and 39% of renewing ARNPs were over the age of 50 in 2016-2017.

- For each group, racial and ethnic diversity was more common among younger incoming and renewing nurses. LPNs had the largest non-white proportions, and ARNPs had the smallest.

- Almost 44% of employed RN renewals had a bachelor's of science in nursing or higher degree. Education information was not available for newly licensed nurses.

The supply reports (<https://www.flcenterfornursing.org/StatedataFCNurseSupplyReports.aspx>), available in the Statedata tab located on the center's webpage, include detailed findings, comparisons over time and in relation to national data, and recommendations for nursing stakeholders. 

— Florida Center for Nursing is housed in the College of Health & Public Affairs at the University of Central Florida. <https://www.flcenterfornursing.org/Welcome.aspx>

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Surviving the New Survey: How to Prepare to Win

By Kimberly Biegasiewicz, RN; Regional Director of Clinical Services, Consulate Healthcare; Secretary, FADONA

As we know, the new ROPs have put a new level of stress on the facilities in terms of how to prepare for the new survey process and what to expect. As a Regional Director of Clinical Operations, I have had the privilege of participating in quite a number of annual surveys since the changes have been in place.

Preparedness truly sets the tone for the survey team. Being prepared with all required entrance materials on the Entrance Worksheet assists in the survey process moving along in the right direction. The surveyor team is required to work through certain pathways and steps and needs the documentation in order to keep the survey moving forward. It is often said, "Dress to impress" and that is exactly what you need to do. Be ready and impress them with the way in which you prepare for your survey each and every day. We know what information they will be requesting, therefore we are able to prepare for the big exam. Have your 672, 671, Resident Matrix, Alpha Census, Policies and Procedures ready and up to date. This makes the first day of survey that much easier if all you have to do is make a few minor changes from weekend activity, etc.

It is important to remember that resident interviews are key to your success. It is important for you as leaders to know who is in your building, any concerns they may have, and that you have been afforded the opportunity to address them. This should be instituted as a best practice — not only will this assist with your survey but will assist with your customer service as a whole as well. Ask your Resident Council if you can attend a meeting to keep abreast of areas



Kimberly Biegasiewicz

of concern and ensure appropriate follow through.

The days of sitting in the conference room working through a pathway are long gone and most of the survey is based on facility observations. It is important to ensure that our floor staff are survey ready each and every day. It is essential that they are practicing appropriate infection

control, medication storage, food preparation and storage, etc. Spend the time reviewing competencies and standards of care during your interaction with your floor staff. Refreshing on these important care standards ensures that you and your staff are survey ready every day.

Finally, it is all in the way we manage our surveyors and survey. I would strongly recommend that the facility has managerial staff assigned to each wing/hallway in order to keep abreast of what is being observed. Communication is key and there is nothing wrong with a good old-fashioned group text message to ensure that we are providing the surveyors with everything they need in the time frame in which it is requested. Ensure that you are staying on top of the changing regulations and truly understand the interpretive guidelines.

Most importantly, network with fellow directors of nursing or regional support staff and have conversations on ways in which we can continue to implement best practices and improve on your outcomes. We all work in long-term care to provide exceptional care and services and can always benefit from the advice and mentoring of those in the field alongside us.

Best of luck this year! If you have any questions regarding the process, please don't hesitate to reach out to me.

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Improve Your Quality and Safety

By Staci Goldstein, MS, Quality Improvement Consultant, RB Health Partners, (727) 786-3032 or visit www.rbhealthpartners.com.

Improving your quality and safety is a number one priority of most providers I speak to. During such a conversation, nursing home administrators and directors of nursing often ask: "Why seek Joint Commission accreditation?"

While the new Florida Medicaid PPS program is one reason for seeking accreditation, the main reason is to enhance your quality and safety program. Most people remember their accreditation experiences from the hospital setting and attempt to bring these same lessons learned into the skilled nursing setting. They recall months of rewriting policies and procedures and feel that it will be an overwhelming task. This daunting task feels even more so for providers given staff turnover, state and federal guidelines, and the numerous other obligations that make staff fearful of taking on "one more thing."

The truth is that the experience of preparing for The Joint Commission (TJC) survey is not a separate task from your ongoing regulatory compliance activities. TJC is a blueprint template for enhancing your existing quality and safety efforts. TJC standards are guidelines that organizations can use to build excellence into their quality and safety programs as well as enhancing their commitment to excellence in their corporate culture.

The philosophy of the standards is that of a continuous improvement process that improves care and services for residents, staff, family, and visitors. One administrator expressed the benefit of the shared safety assessment tools used in preparing for survey, helping him identify life safety rounds that previously had significant gaps. Another client discovered that during data collection related to infection prevention, their organization had been collecting data in a manner that was incorrect and therefore showing their infection rate as higher than it truly was.

We have seen clients' outcome results show an improvement in their quality of care indicators for safety, infection rates, satisfaction rates, and marked efficiency and overall improvements recognized during their Joint Commission accreditation readiness efforts. The additional requirements of TJC standards builds on the existing infrastructure of the Federal Rules of Participation (RoP) and state requirements. This synergistic effect enhances the foundation of quality and safety at the organizational level.

Florida Association Directors of Nursing Administration/LTC

In the Trenches with You!

The daily life of a long-term care nurse leader is about managing the next crisis, being constantly aware of your surroundings, and staying up to date on industry changes. At FADONA/LTC, we understand, because we've walked in your shoes.

Some key points that have an impact with long-term care nurses around the state:

FADONA comprises one of the **LARGEST** and most active chapters **NADONA**, the National Association of Directors of Nursing Administration/LTC.

FADONA/NADONA/LTC is the largest educational organization dedicated exclusively to nursing and administration professionals in long-term care and assisted living.

NADONA's motto is Education, Communication, Service. Everything done by the organization incorporates these elements.

FADONA is the only professional organization exclusively for and by long-term care nurses in administration in Florida.

FADONA is a great value, affording membership nationally in NADONA, as well as in Florida with FADONA, for only \$125 annually or \$230 for two (2) years.

FADONA memberships offer access to our website; our award-winning newsletter, **FADONA Focus**; and discounted registration fees to local, state, and national educational opportunities.

FADONA enjoys and supports a cooperative relationship with other professional organizations, including Florida Center for Nursing, FNA, FONE, FLGNA, FHCA, FMDA, FLN, QUIN Council, LeadingAge Florida, FL-GAPNA, and many others.

FADONA members are highly flexible, highly trained, and very determined nurse leaders.

FADONA members are constantly putting out fires, with compassion and strength.

FADONA continues to build the professional network — one step at a time.

Professional Certification, CDONA/LTC, is offered through NADONA.

Professional Standards that LTC nurse administrators are held to are set by NADONA. These standards embody the same elements as our motto.

FADONA's Principles of Excellence

In 2009, "FADONA's Principles of Excellence for Florida Directors of Nursing & Nurse Administrators" was published to support the provision of long-term health care services that are desired, meaningful, successful, and efficient. They are intended to assist directors of nursing in achieving these objectives and to guide and inspire creative leadership in LTC.

The principles encourage the director of nursing to follow a reasonable course of action based on current knowledge, available resources, and the needs of the facility so that effective and safe care can be delivered. They are aspirational in nature and intended to foster self-appraisal and continuous performance improvement. The principles are neither inflexible rules nor requirements of practice.

These guiding principles feature FADONA's Mission & Vision, Culture of Quality, Resident Care & Quality-of-Life, Caregivers, and Staff Finance.

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