

A PUBLICATION FOR FLORIDA'S LONG TERM CARE COMMUNITY



FHCA members honored for demonstrating excellence in long term care

Centers recognized for earning Quality Awards, Governor's Gold Seal status

During its Annual Conference Opening Ceremony, FHCA recognized members for their extraordinary commitment to delivering quality care to Florida's frail elders. American Health Care Association/National Center for Assisted Living (AHCA/NCAL) President and CEO Mark Parkinson was on hand to assist Emmett Reed, FHCA Executive Director, and Michael Ferguson of PruittHealth, Opening Ceremony sponsor, as

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Robin Bleier takes home 2016 Walter M. Johnson, Jr. Circle of Excellence Award



During FHCA's 2016 Annual Conference in Orlando, Robin Bleier (center), President of RB Health Partners Inc., was presented with the 2016 Walter M. Johnson, Jr. Circle of Excellence Award, FHCA's highest honor. "While disaster, risk management, clinical guidance and MDS may be how we have come to know Robin, it is her most recent passion for the FHC PAC that has FHCA's membership in awe of the tireless energy she exudes," said Emmett Reed, FHCA Executive Director.

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PRESIDENT'S MESSAGE

The Administrators' President

Well, it is finally here. My first "President's Message" for the *Pulse* newsletter. For the last five years, I have read these articles and wondered what I would write about when my time as President arrived. That time is now, and I trust you will find mine as informative and helpful as those who came before me in this office.

As I tried to convey during my Annual Conference installation remarks, I'd like to be known as the "Administrators' President." Over the years, I set my career sights in the facility versus the corporate office so I could focus on the day-to-day actions of being a Nursing Home Administrator. In particular, I wanted to maintain the hands-on interaction that comes with providing high-quality care to Our Treasured Elders (to borrow a term familiar to us who have been around for some time). The patients and residents in our centers are the reason we get up in the morning and do what we do, day in and day out.

First, let me say that I truly appreciate the role of every member of the team — from the CNAs and plant operations staff to the human resource directors and the Presidents/CEOs. Each of us contributes to the exceptional care and services we're committed to delivering every day. My understanding and appreciation of the Nursing Home Administrator goes much deeper, being an NHA myself. Ours is not an easy job, but one I can relate to more than you know. So from the bottom of my heart, thank you for what you do.

I also want to help all of us to find ways to do our jobs better and with a greater level of satisfaction at the end of each day. To that end, I am asking you to communicate with me on what you think will help us improve and better enjoy what we do. As I stated during Conference, during my presidency I plan to meet with legislators, owners, the Agency for Health Care Administration (AHCA) and others who can help us accomplish a measure of improvement in job satisfaction and improvement in the quality of care we provide.

The spotlight is on us for quality improvement, and I intend to work hard on that issue. While I'm at it, I also hope to enhance our personal level of satisfaction at the same time. Several of you shared your thoughts and ideas with me during Conference, but it's important that I hear from the membership on a regular basis. We've always been a member-driven organization, and providing me with your input is how we can continue on that same path. In the coming months, I plan to work with FHCA staff and members and meet with those stakeholders I mentioned above. In fact, I'm pulling together a Task Force of members who will meet with AHCA to discuss survey and regulatory matters on a continual basis. Your ideas will ensure those meetings are productive and meaningful and represent the issues that matter to you most.

Please call me at (904) 249-7421 or e-mail me at *jsimmons@avantecenters.com* if you'd like to be part of this Task Force or to share your ideas for topics of discussion. Please get involved, and together let us move the ball forward.◆

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By John Simmons FHCA President

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The mission of FHCA is to advance the quality of services, image, professional development and financial stability of its members.

PULSE August/September 2016

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by J. Emmett Reed, CAE
FHCA/Our Florida Promise
Executive Director

LUNAOT ATIMUT

"If you are lucky enough to be admitted here, you are in for a wonderful experience. The nursing staff is compassionate, the therapists motivate, and the food and atmosphere surpass that of a fine hotel."

—Linda L. to Vern Zeger, administrator, and the team at Hawthorne Village of Brandon.

The power of words

Some kids know exactly what they want to be when they grow up. From the age of 4, they demonstrate an incredible aptitude for advanced mechanics. In college, they major in Mechanical Engineering, and at the age of 22, they settle into a high-paying career at NASA where they will spend their days building spaceships.

I was definitely NOT that kind of kid.

Growing up, I had a new career choice every ten minutes. I wanted to be a professional athlete, slugging it out in the NFL. I wanted to be an actor, dazzling audiences with my riveting, yet emotionally sensitive performances. I wanted to be a marine biologist like Jacque Cousteau, exploring the depths of the sea and discovering new species of octopus. I wanted to have my own fishing show and be a younger, more dashing version of Babe Winkelman. I was all over the place.

As I muddled through middle school and high school, my lack of focus became even more pronounced. Instead of focusing on and getting good at a few, select things, I became mediocre at many things. Sure, there were some areas where I was naturally gifted, but I never pursued those areas. I put flesh and bones on the phrase, "Jack of all trades, master of none."

I took my astonishing lack of focus into college, stumbling and bumbling my way through classes, always just an overslept test away from academic probation. It wasn't that I was lazy. I had developed a great work ethic working on my dad's citrus farm. But I also wasn't giving myself fully to anything. My energies were scattered between a thousand different people and projects, with everything getting a bit of me but nothing getting enough of me.

And then I had a revelation.

It wasn't a spiritual, voice in the sky, burning bush kind of revelation. No, this revelation came while on a salmon fishing trip.

It was the summer before my junior year of college, and I was fishing with my dad and his best friend, Larry, who also happened to be the CEO of Aussie Hair Products (you know, the shampoo bottles with the kangaroos decorating it). My dad had always spoken highly of Larry, praising him for his brilliant business acumen and incredible career accomplishments. As Larry and I were walking together, he asked me what I was going to major in at college. I casually informed him that I hadn't decided. He stopped dead in his tracks, a look of disbelief spreading across his face. He was stunned that I hadn't decided on a major yet. "You need to decide," he said firmly.

Those simple words, combined with the horrified look on his face, were a wakeup call to me. I needed to get serious about college and life.

I spent the rest of my summer deciding on a major, and I finally managed to narrow it down to either Communications or Business. On the advice of my dad, I decided to pursue a Business degree. For my final two years of college, as I fully gave myself to my studies; my transcripts were complete reversal from my first two years.

This was a first step in growing up and actually deciding what I wanted to do with my life. My passions, which had been scattered so broadly, were finally being gathered and focused.

Do you have someone important in your life, maybe a relative or a young, talented team member who needs a "wake-up call" moment?

Don't ever underestimate the power that you might have with words. You can be kind and considerate, yet at the same time concerned about the person's future.

It may not work every time, but if you have gained the respect of those you lead, chances are your words will mean more than you know.◆

Update on social media

CMS guidance on inappropriate use of photographs and video recording in long term care

By Karen Goldsmith

In the July *Pulse*, I reported on the increasingly difficult issue of using social media in long term care centers. Since that article was written, the Centers for Medicare and Medicaid Services (CMS) has issued guidance to surveyors on the misuse of photographs and video recordings. This guidance is set out in CMS S&C letter 16-33-NH (available in the Survey Readiness section of FHCA's website). While it pertains to nursing centers, the principles apply to assisted living facilities as well. When we use the term "photographs" in this article, we include video recordings as well.

CMS focused on several issues in the memorandum. Centers are supposed to be as home-like as possible, which includes a measure of respect and dignity. Treating a resident otherwise may be considered adult abuse.

It is clear that taking photos of residents in a situation that degrades, humiliates or embarrasses them is a violation of their right to privacy, confidentiality and dignity. The letter clearly states that, not only is the residents entitled to privacy relating to his/her body, but to his/her personal space as well.

What does this mean?

It significantly limits the picture taking which can occur in a long term setting.

First, no photographs should ever be taken of a resident without his/her permission or the permission of the legal representative. Staff should not be taking any pictures without knowledge of management and verification of management that the resident has clearly given consent. Even with consent, photos should never be taken that would embarrass or degrade a resident.

Many facilities take pictures upon admission to identify residents for a number of clinical purposes. These pictures are typically kept in the resident's medical file which is a confidential document. CMS was not addressing this use of photographs in the memorandum.

The concern is with those pictures which are taken and shown to others, usually through social media. As I discussed in my earlier article, there are many cases where facilities have been cited or sued, and individuals have been fined or prosecuted for misuse of resident photographs. One example in that article was the CNA who took a picture of her hand in the hand of an elderly resident and stated this was how she helped the resident get to sleep. Another person saw the picture and mentioned the resident's name on social media; thus, the resident's confidentiality was violated. The act can be innocent, not malicious, but the result is the same.

A good approach is to preclude staff from taking any pictures of residents, their rooms and common areas. And most certainly no pictures within the center on social media.

CMS focused on the fact that nursing center residents have "varying degrees" of problems and needs. Some have dementia and other illnesses which result in actions or appearances that a reasonable person would not want others to see. One cannot presume that just because a person has dementia their rights are irrelevant. After all, some may think, "What will they know? They will never see the picture." On the contrary, caregivers have an added responsibility to protect those individuals who cannot protect themselves.

F164, cited by CMS as a potential deficiency, reiterates that the resident has the right to privacy and confidentiality, including in accommodations, treatment, personal care and visits or meetings with family, friends and "resident groups." This covers the gamut of resident activities.

A facility may also be cited under F223 and F226 for inappropriate use of photographs and video recordings. F223 affords the resident the right to be free from, among others, mental and physical abuse. A person can suffer mental abuse, even though they are unable to comprehend the nature of the actions. The key is would they be embarrassed or humiliated by the photo if they were fully able to comprehend that it had been taken and disseminated.

In extreme cases, even sexual or physical abuse may occur.

F226 relates to the requirement for a facility to have and implement policies and procedures to prevent abuse. In its letter, CMS requires that facilities develop policies and procedures that relate directly to the use of photos, videos and social media.

Secondly, the letter requires the facility to provide in-service training to all relevant staff and ensure the training has taken hold.

Finally and most importantly, CMS requires that these policies and procedures be implemented; training is not enough.

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Florida ARNPs make legislative history

By Carol Berkowitz

During the 2016 legislative session, HB 1241 by Rene Plascensi (R-49) and Sen. Denise Grimsley (R-21), was adopted, authorizing the ARNP or PA, working within supervisory physician protocol, to order medication for administration to patients in hospital, surgical centers or nursing centers.

Although this has been allowed for a few years in Florida, some heath care facilities did not permit it because of liability or other policies. This new measure will reinforce ordering prescriptions by an ARNP and PA is permitted.

There is a distinction between an order and a prescription. The order is an instruction written in the medical record in a hospital, surgical center or nursing center that will be administered while the patient is in the facility under the direct care of health care professionals. The prescription is a written instruction for a patient to take to a pharmacy for a medication to be dispensed that they will self-administer when they are not in a hospital or nursing center and are not under the direct care if a health care professional.

By January 2017, Florida Advanced Registered Nurse Practitioners (ARNPs) and Physician Assistants (PAs) will expand their scope of practice further by being able to prescribe controlled substances within the framework of a supervisory protocol of a Florida licensed physician.

This landmark legislation has been an FHCA priority because it will allow Florida ARNP and PA professionals to practice to the full extent of their education, training and certification.

Also passing during the 2016 session, HB 423 by Rep. (Dr.) Cary Pigman (R-55) and Sen. Denise Grimsley (R-21) passed and was signed into law. The specific limitations listed in the legislation will include limiting the prescribing of schedule II drugs to a seven-day supply; prohibiting the prescribing of psychiatric/mental health controlled substances to children under the age of 18 (except for ARNPs who are certified in psychiatry as defined in statute); prohibiting prescribing in a pain clinic (except for physicians); and requiring a formulary of controlled substances that may be prescribed by ARNPs and PAs.

The bill also includes a provision naming the section of the revised statute pertaining to ARNP practice as the "Barbara Lumpkin Prescribing Act" to honor Ms. Lumpkin's effort. Ms. Lumpkin has been an advocate for the nursing profession for more than 40 years, and she has worked on this legislation for more than a decade.

Ms. Lumpkin told FHCA staff she is "thrilled that residents of nursing homes and assisted living facilities will now have access to medications to relieve their pain and treatments for other conditions where a controlled substance is the most effective therapy." She also stated that she "knows many ARNPs and PAs who look forward to exercising their authority to provide their patients with the most appropriate therapies more efficiently."

Until the measure was adopted, Florida was the last state to allow ARNPs to prescribe controlled substances. Twenty-one states and the District of Columbia allow an ARNP to practice independently, including evaluating, diagnosing, ordering, and interpreting diagnostic tests and managing treatment. Twenty-two states specifically prohibit certified registered nurse anesthetists from prescribing controlled substances.

Some states have specific limitations regarding ARNPs prescribing authority for Schedule II controlled substances. For example, seven states authorize ARNPs to prescribe all levels of scheduled drugs, except for Schedule II. Some states have specific education requirements for those ARNPs who wish to prescribe Schedule II substances or require additional registration for ARNPs to be authorized to prescribe.

As required by the new law, the Florida Board of Nursing Formulary Committee met to review restrictions for a formulary, if any were necessary for ARNP prescribing in Florida. The committee voted unanimously to make no further recommendations other than that currently in law to restrict the prescribing of controlled substances by Florida Nurse Practitioners. The Formulary Committee's deliberations were concluded after meeting twice, and the recommendations will now go before the full Board of Nursing. Once approved, the law will become effective in January.

Also, the new law provides that on or after January 1, 2017, health insurers or pharmacy benefits managers to use a standardized prior authorization form adopted in rule by the Financial Services Commission, if an electronic prior authorization form is not used. An electronic prior authorization approval does not preclude an insurer from performing a benefit verification or medical review.

The new law will also require ARNPs and prescribing PAs to complete three hours of continuing education on the safe and effective prescribing of controlled medications each biennial licensure renewal.◆



Carol Berkowitz is FHCA's Senior Director of Quality Affairs. She can be reached at cberkowitz@fhca.org.

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Progress on the PPS

AHCA-Navigant gathering stakeholder input, analyzing data

By Tom Parker

As reported in our 2016 Legislative Wrap Up, the fiscal year 2016-17 budget included funds for the Agency for Health Care Administration (AHCA) to contract with an independent consultant to develop a plan to transition nursing center rates from a cost-based methodology to a prospective payment system (PPS). The full report is due to the Governor, Senate President, and Speaker of the House of Representatives no later than January 1, 2017. During the 2016 session, FHCA worked with House and Senate budget staff to ensure this process was transparent and called for stakeholder input.

AHCA has selected Navigant, which worked with the agency on the hospital reimbursement system. Navigant is also known for its nursing center-related work in Washington, Alabama and Georgia. In June, Navigant began holding a series of public meetings to gather stakeholder input.

During the initial meeting, Navigant offered background on the project and presented their guiding principles and objectives. Those guiding principles - Quality, Access, Equity, Predictability and Simplicity — are the basis by which each PPS model will be evaluated. Navigant's objectives are to collaborate with all interested stakeholders; outline steps to implement a new payment method; develop a plan to convert from a cost-based reimbursement methodology to a new prospective payment system; and address the impact of a prospective payment system on nursing centers' and hospice providers' Medicaid rates. Navigant also shared feedback they received from the various stakeholder groups, which included issues surrounding quality incentives, access for hard-to-serve populations, and the need to avoid imposing additional data collection and tedious processes on providers.

During the August public meeting, Navigant shared data analyses performed on several cost categories, along with preliminary decisions that have been made. Navigant extracted several key cost drivers from cost reports and MDS data. For example, due to Florida's staffing standards, there is no correlation between measured acuity and costs per day. Centers in Florida's southern regions generally have higher direct and indirect care costs per day. Centers with higher occupancy rates have lower direct, indirect and operating costs per day. Those with more beds generally have lower costs per day; however, the cost differential is insignificant. Additionally, there is no cost differential between centers with lower CMS quality scores and those with higher quality scores.

This data has led Navigant to make some tentative decisions regarding the PPS. As of now, Navigant will not recommend a case-mix adjustment. Instead, they are considering an adjustment for specialized services, such as services for patients who require ventilators or individuals with dementia. No decisions have been made on adjusting rates for differences in quality; however, AHCA leadership has been very vocal in their opinion that high-quality providers will

be rewarded with higher payments under a PPS methodology. It has been determined that wage differentials will be paid for providers in AHCA Regions 10 and 11, while a rate adjustment will not be paid for various sizes of centers. Navigant continues to review data related to calculating a property reimbursement component and is assessing the most appropriate transition period to allow providers time to adjust to the new payment rates.

FHCA has been engaged with Navigant and AHCA every step of the way. The Association's PPS Task Force, chaired by Past President Deborah Franklin of Florida Living Options, is addressing the issues important to our members and identifying where broad consensus can be reached. As questions are posed and data requests are made by Navigant, the Task Force responds.

During the August meeting, Ms. Franklin shared FHCA's PPS Quality Incentive Proposal. Developed by the Task Force and approved by both the FHCA Board of Directors and members of Our Florida Promise, this proposal outlines four quality domains: Workforce, Outcomes, Quality Measures and Customer Satisfaction. Each domain contains multiple measures which providers must achieve to qualify for a quality incentive payment.

The next PPS public meeting is tentatively scheduled for September 22 in Tallahassee, and FHCA will provide details as they become available. More information about PPS, including the Quality Incentive Proposal, can be found in the Reimbursement section of FHCA's website (Facility Operations tab). Members with questions or an interest in providing comments can contact me at tparker@fhca.org. •



Tom Parker is FHCA's Director of Reimbursement. He can be reached at tparker@fhca.org.

LTC LEGAL ISSUES & TRENDS, cont. from page 5

Update on social media

Providers will need to be cognizant of how cameras, phones and other electronic devices are used in the facility. This is going to be a monumental task and one that will require constant vigilance. Discipline must be swift and consistent.

The guidance in the S&C letter is effective now. If you have not already taken the steps necessary to implement the guidance, do so immediately. The surveyors are now aware of the need to focus on this issue during the survey process, so expect they will be prepared to discern your compliance.

Achievements in Long Term Care

During FHCA's 2016 Annual Conference in Orlando, the Association recognized several individuals and organizations as part of the 2016 Long Term Care Achievement Awards. These recipients demonstrated leadership within the profession and a strong commitment to resident quality care and quality of life.



ARTHUR H. HARRIS GOVERNMENT SERVICES AWARD

Kathy Gallin, Signature HealthCARE

Kathy Gallin has been actively involved in health care for over 25 years. She is known for leading successful grassroots advocacy campaigns to help

legislators understand resident care needs, providers' commitment to quality initiatives, and the important connection between funding and quality. Gallin has been instrumental in facilitating legislative tours of long term care centers across the state and bringing frontline employees from skilled nursing centers across Florida to the state Capitol for FHCA's Lobby Wednesdays during the legislative session.

Gallin currently serves as the Multifacility Vice President on the FHCA Board of Directors. She is also Vice Chair of the FHCA Legislative Committee, as well as a member of the FHCA Public Relations Committee. Gallin also supports long term care advocacy efforts across the nation, serving on the Kentucky Chamber Health Policy Committee and both the Georgia Health Care Association's and the Health Facilities Association of Maryland's Legislative Committees.



NURSING HOME ADMINISTRATOR OF THE YEAR

Andrew McKillop, Okeechobee Health Care Facility

For the past 50 years, Andy McKillop (right) has demonstrated proven leadership and a commitment to performance and excellence as an administrator in the long term care profession. As

administrator of Okeechobee Health Care Facility for the last 30 years, McKillop has delivered exceptional outcomes for residents and staff. He has served as a preceptor, instructor, and adjunct professor for five health care administration programs at the masters and Ph.D. levels. He is known for his passion for all those he encounters, earning him numerous awards for high standards of resident care.

McKillop is also an impressive advocate for high quality care at

the local and statewide level. He has been an active participant of FHCA's Lobby Wednesdays since its inception; he is always willing to host lawmakers in his center and is a vocal member of FHCA's Legislative Committee as well as a past District XIII President. His knowledge and expertise go beyond Florida, having served at the President's appointment to the White House Conference on Aging and the President's Commission on Employment of the Handicapped.



ASSISTED LIVING FACILITY ADMINISTRATOR OF THE YEAR

Steven Rule, Park Summit of Coral Springs

Steven Rule (right) oversees the operations of Park Summit's 274 independent and assisted living residences. He is a strong leader with

a commitment to performance excellence that has resulted in exceptional outcomes for residents and staff. He is known for having an unwavering passion for the long term care profession and has earned a reputation as a caring administrator who is committed to the mission of enhancing the lives of seniors.

Linda Gilchrist, marketing and sales director at Park Summit, noted that Rule never fails to do everything in his power to ensure that the quality of life for each resident is maintained. "Steven goes above and beyond and sets gold standards for managers to follow," she said.



WILLIS J. GREGSON ASSOCIATE MEMBER OF THE YEAR

Bradlee Cox, McKesson Corporation

Bradlee Cox (center) has an unwavering enthusiasm for the Association and its programs. Cox first became engaged with FHCA's local districts but quickly

realized that his dedication and support would be greatly valued at the state level. He currently serves on FHCA's Board of Directors as the Associate Member Vice President and is an active participant on the Associate Member Support Committee, Annual Conference

Committee and Golf Tournament Committee. He is a graduate of FHCA's 2015 Florida Leaders program, which identifies members with demonstrated leadership potential and an interest in representing the interests of long term care providers at the state level. Cox is also involved in FHCA's grassroots initiatives and can often be seen standing side by side with caregivers to help advocate for important long term care issues.



MEDIA & COMMUNITY INVOLVEMENT AWARD Bayside Health and

Rehabilitation Center, Pensacola

Bayside Health and Rehabilitation Center was voted the "Best Place to Work" by the *Pensacola News Journal* and was featured several times in

local media throughout the year. The center is known for partnering with its local community organizations to enrich the lives of residents through special events and activities, including involvement with local children, community events, and cultural experiences. One such event, "Bark to Remember," is held each year by residents to raise money for the local Alzheimer's Association.

The center also hosts a number of intergenerational activities throughout the year, bringing in children from the local Childcare Network and giving Escambia County Bright Futures scholarship students the opportunity to volunteer at an Easter festival, Mardi Gras parade, and trick-or-treat festivities. Scholarship hopefuls even do one-on-one visits with each resident. Residents also participate in Pick a Bowl, a local food bank fundraiser, which enables residents to connect with the community and help underprivileged families in Escambia County.



RESIDENT OF THE YEAR Lucy Kennedy, Signature HealthCARE of North Florida

Lucy Kennedy, 73, has served as Resident Council President, volunteers at the center's country store, and is part of the Sunshine Club, Welcoming Committee and Planning Committee. Through her volunteer roles, she demonstrates a constant

desire to improve the center, taking time to listen and advocate on behalf of the needs of her fellow residents. Her positive attitude and kindness encourages residents to leave their rooms and become more involved in life at the home. Ms. Kennedy tells everyone who will listen how much she has gained by being a resident of Signature HealthCARE and how much her quality of life has improved there.

Ms. Kennedy also received a prestigious award from the Eden Alternative program for her role in getting a cost of living increase

approved for Florida nursing center residents. In 2014, she worked side by side with state Senator Don Gaetz to fight for the increased Medicaid allowance in the state budget — not because it benefited her, but because she felt it necessary to improve the quality of life for all senior citizens around her.



ADULT VOLUNTEER OF THE YEAR

Ms. Beverly Brunke, Palm Garden of Sun City Center

For the past four years, Beverly "Be.Be." Brunke has volunteered two days a week at Palm Garden of Sun City Center. She

conducts Bible study, sings and visits with residents, all to spread happiness and strength through song and scripture. She developed "Chat with Be.Be." and "Weekly Bible Study with Be.Be.," programs to engage residents in a fun and exciting way.

"Be.Be. helps our residents reach their greatest potential by challenging their minds," said Karen Birbeck, Life Enrichment Director of Palm Garden of Sun City. "She encourages our long term and short term residents through her kind words and spiritual insight. Be.Be. is truly a stellar volunteer."



GROUP VOLUNTEER OF THE YEAR

John & Cindy Godby - Canines for Christ, Hawthorne Village of Sarasota

John and Cindy Godby work with Canines for Christ to bring their two dogs, Goose and Gandy, to Hawthorne Village of Sarasota. They interact weekly with all the residents, going room to room to offer cuddles and prayers. As a team, the four Godbys — two human, two canine — bring happiness and light to the life of each resident, many of whom had pets at home and long for the kind of companionship Goose and Gandy bring each week.

"Both John and Cindy have devoted their lives to the service of others by bringing the joy only pet companionship can provide," said Ezekiel Thomas III, activities director of Hawthorne Village of Sarasota. "We are so grateful for the happiness they bring to our residents every week."◆

FHCACA Florida Leaders

By Suzanne Mission, ADC



In 2012, the Florida Health Care Activity Coordinators Association (FHCACA) started the Florida Leaders program, modeled after Florida Leaders

instituted by Florida Health Care Association (FHCA) in 2008. FHCA Florida Leaders 2009 graduate Mary Anne Favale took the vision and created the opportunity for activity professionals to stand up and be recognized in the important role they play every day. Each member commits to a full year in the program, reading, discussing, attending meetings, developing and sharing skills.

As a 2013 FHCACA Florida Leaders graduate, this program has helped me become more optimistic, more resilient, more accepting and more driven by purpose. For me, I wanted to be the "Driver of Positive Change," and I was honored when FHCACA asked me to lead the next generation of leaders.

Jennifer Hayter, CMT, ACC with Bayside Health and Rehab and 2016 FHCACA Florida Leaders graduate shared that reading the books reminded her that change is the only thing to count on. "We need each other and our varied strengths to survive. It is ok to get ideas from odd places and think outside the box, and it might be the key to our success," she said.

FHCACA's program graduates are charged with mentoring others to increase their involvement in the association and to encourage members to go to the next level. To learn more about the program, visit www.fhcaca.org.

Suzanne Mission is the Activity Coordinator with TimberRidge Rehab and Nursing and the FHCACA Florida Leadership Chair. She can be reached at suzannemission@trnrc.com.

In its ninth year, FHCA's Florida Leaders program is sponsored by Coastal Reconstruction Group. Selections will be made for 2017 Class members in September, with participants taking part in the Kickoff Training in October in Tallahassee. Look for more information in an upcoming issue of Pulse.



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CLINICAL CORNER

Improving the quality of care

Infection prevention and control update

By A.C. Burke, MA, CIC

In July of 2015, the Centers for Medicare and Medicaid Services (CMS) released proposed rule changes for nursing centers that included increased requirements for centers' infection prevention and control programs, F441, the number one cited F-tag in Florida and in the nation. For starters, CMS has added the word "prevention" to the title of the program, indicating a more comprehensive scope. Infection prevention and control is more than hand hygiene; it is about taking action to ensure the best quality care for your residents. An effective infection prevention and control program incorporates quality assurance and quality improvement principles and data-driven decision making in order to protect residents from risk of acquiring infections that often result in morbidity, return to hospital and/or mortality.

The proposed rules require nursing centers to have an "infection prevention and control officer" (IPCO) whose primary job responsibilities include the infection prevention and control program. The person who serves in this position is also required to have specialized training in infection prevention and control "beyond their initial professional degree." CMS proposed rules require that the IPCO be an active member of the quality assurance performance improvement (QAPI) committee, that the committee reviews surveillance data and process measure or practice audit data (i.e. compliance with hand hygiene, use of personal protective equipment, etc.), and that nursing centers use this data to address opportunities for improvement, as well as demonstrate success with compliance with best practices.

Examples of incorporating QAPI principles would include conducting root cause analysis for breaches in infection control practices or applying the plan-do-check-act cycle when implementing practices changes. CMS is also expecting nursing centers to conduct an annual infection prevention and control risk assessment and to use the results of this assessment to develop their surveillance plan and additional action plans to address opportunities for improvement.

Another focus area for CMS is antibiotic stewardship. Though antibiotics have saved many lives, they can also have harmful side effects. According to the Centers for Disease Control and Prevention (CDC), studies have shown that approximately 70 percent of nursing center residents receive a course of antibiotics each year with 40-75 percent of antibiotics prescribed potentially being unnecessary or inappropriate. The CDC has developed a toolkit to assist nursing centers with implementing an antibiotic stewardship program, which can be found on their website at www.cdc.gov/longtermcare/prevention/antibiotic-stewardship.html. In addition, RB Health Partners, Inc. has developed a two-day intensive training and toolbox of resources to support nursing centers in meeting the proposed enhanced requirements for infection prevention and control. The training covers topics such as surveillance, how to conduct an infection control risk assessment, environmental cleaning and disinfection, and prevention

best practices for infections often found in nursing centers, such as C. difficile infection, urinary tract infection, respiratory infections, and skin infections.◆



A.C. Burke is Sr. Manager of Infection Prevention & Preparedness with RB Health Partners, Inc. which has a strategic alliance with Moore, Stephens Lovelace, PA. For more information about Infection Prevention and Control, contact A.C. Burke at ac@rbhealthpartners.com or Robin Bleier, President, at

robin@rbhealthpartners.com. Both can also be reached at (727) 786-3032.

COVER STORY, cont. from page 1

Robin Bleier takes home 2016 Walter M. Johnson, Jr. Circle of Excellence Award

Robin Bleier has been active in the long term care profession for over 30 years, displaying a great talent for every project she undertakes. From clinical risk and regulatory support to billing systems and compliance, Bleier's breadth of knowledge and enthusiasm is truly impressive.

When Florida was hardest hit by hurricanes in the early 2000s, Bleier was one of the first to volunteer to help members in their time of need. She not only rolled up her sleeves to offer on-the-ground assistance, she was also a key player at the statewide level, working with the state emergency operations center to build long term care into the partnership when it comes to response and recovery.

Today, Bleier serves as the FHCA Emergency Preparedness Council Chair and also heads the FHC PAC, the Association's political action committee which works to support FHCA by educating legislators and political candidates who promote the value and needs of the long term care community in Florida.

"Because of her work with legislators, regulators and FHCA's members, she shares some of the responsibility for Florida's improvement in quality over the past decade," said Nina Willingham, FHCA's 2015 Circle of Excellence Award recipient.

Florida Health Care Association's highest honor, the Walter M. Johnson, Jr. Circle of Excellence Award was initiated in 1972 and is given annually to a member of FHCA who has made significant contributions in the past year and has worked for the growth and development of the Association through the years.

HIGHLIGHTS FHCA 2016 Annual Conference & Trade Show

Go for Gold









































Julie Rupenski, MedBest Healthcare Recruiting Firm



It's no secret that Baby Boomers have begun retiring and their impact will be felt at record rates in the senior care industry over decades to come. According to a *U.S. News Report*, for the next 20 years, 10,000 people a day will reach age 65. History has shown this to be the typical retirement age. The senior care industry is expected to see tremendous growth to accommodate the

expected 89-million senior citizens by 2050. With new independent/ assisted living facilities and nursing centers popping up and homecare increasing, it's expected that an increase in staff and management will be required.

Having qualified people from the CEO to the CNA is crucial to the success and reputation of a company within the senior care industry. With that in mind, Julie Rupenski, president of MedBest Healthcare Recruiting Firm, discusses what she sees as a growing trend of increased competition for management positions in senior care.

You have been in the senior care industry for over 25 years and own a nationally recognized healthcare recruiting firm. With that experience, do you see any changes developing with job opportunities in senior care?

Julie Rupenski: Yes, I have already seen it happening. We are seeing an increase in demand for qualified candidates overall, and especially in Texas and large areas of growth.

As a premier senior health care recruiter, what is your opinion of the future of management throughout this industry?

Expect to see salaries increasing to keep up with the demand. There is a fantastic study recently published by Argentum that breaks down the statistics and the expected shortfall in management positions. It's already becoming a candidate driven market, and when you look at the numbers, it's proof that this trend should continue for years.

How would a projected shortfall in management positions affect senior care companies?

Quality candidates will be even more difficult to come by. There will be more positions available, and that means more candidates will have negotiating power. The competition will become fiercer between companies, and everyone will want to have the best executives running their facility. I also believe the search firm business will grow because of this.

Why is that?

Companies will find themselves dealing with more counter offers and a lack of quality candidates in their pool of talent. At the end of the day, reputable companies usually see they will save money and significant time and hassle by using a recruiter who knows their industry. Generally, a company will post an advertisement on a job

board and network amongst professionals. Networking is a good way to find talent; we certainly do it here at MedBest, but it will only take you so far. And we only find a small percentage of our candidates on a job board. Also the cost of hiring a bad executive, or maybe just one that doesn't match well with a company's culture, could end up costing a company hundreds of thousands to even millions of dollars. It can also ruin a company's reputation. I've sadly seen it happen.

Didn't MedBest recently bring Tom Parker to the Florida Health Care Association as the new Director of Reimbursement?

Yes we did. Tom is a great example of a perfect match. I worked closely with Emmett Reed, Executive Director of FHCA, on what he and the Board of Directors were looking for in a candidate. I knew there would be big shoes to fill with this position opening up. It was essential to find someone who fit well with the Association's culture. And with Florida being quite unique compared to other state associations, our 15 years of developed contacts led us to Tom, who we knew would be the ideal match.

When you talk about matching a potential employee with a company's culture, are you referring to incorporating personality assessments in your research?

Actually we do use personality matching, depending on the company's preference. However in Tom's case, the reason I knew I matched the right guy with the right company was because I had several discussions with Emmett. When you're a member of FHCA since 1987, it allows a strong history to develop. I have known every Director of Reimbursement with FHCA for the last 20 years, so I understand the position and what type of person is needed to execute it properly. I also think coming from the provider operations side of the senior care industry has really helped me with understanding what's needed in many of these executive level positions.

With that being said, personality assessments are crucial when you are dealing with management and a company's culture. Over 50 percent of the population are unhappy with their jobs. These personality assessments put the right person in the right job. You wouldn't want someone with a marketing type personality as your Chief Financial Officer, and vice versa. Also, the company's culture should be seriously considered. These personality assessments classify four behavior types which identify where and how the employee would fit in. There's also a section which lets you know what motivates the employee to perform at work and in life. These factors directly coincide with job abilities and happiness in the workplace.

Where do you see the senior care industry headed in the next 10 years?

Exploding growth in assisted living due to the population increase and the projected need to handle the retiring Baby Boomers. I also think there may be the possibility of overgrowth in the assisted living

continued on page 20

By Lorne Simmons

The future of Medicare reimbursement

If you were unable to attend the FHCA Conference last month, or if you were out on the links shooting "lawn pool," you missed out on a very important session presented by my MSL colleagues Jeff Goolsby and Scot Aurelius. As you all know, Medicare reimbursements are an important revenue source to maintain both margins and census. SNF value-based purchasing (VBP) programs will soon place portions of Medicare reimbursement at risk (e.g., the nursing center readmission penalty). But as a double-edged sword, new federal initiatives and policies for Medicare are driving a reduction in both referrals to nursing homes and the length of stay (LOS).

Value-based purchasing has impacted acute care providers for several years. When considering all sectors and initiatives, the Centers for Medicare and Medicaid Services (CMS) met its established goal for 2016, that 85% of all Medicare payments be in a VBP program and that 30% be in an "at risk" alternative payment model (such as an Accountable Care Organization). CMS has set a goal that by 2018, those numbers will exceed 90% and 50%, respectively.

- Protecting Access to Medicare Act of 2014 (PAMA): This will introduce a direct readmission penalty for skilled nursing providers based on all cause; all condition assessment.
- Improving Medicare Post-Acute Transformation Act of 2014 (IMPACT): Requires defined post-acute providers to report required information on outcomes by October 2018 or have annual rate adjustments up to 2%.

The more imminent impact to SNFs are from policy initiatives centered on lowering the overall Medicare Spending per Beneficiary (MSPB). Post-acute providers as a whole account for approximately 40% of the total variation in MSPB. CMS' bundled care payment program initiatives (BP) was introduced as a risk based incentive program with a goal to drive down MSPB utilizing a lead provider to manage the patient to reduce the total MSPB for all cases in certain DRGs below the threshold established by CMS. The most prevalent BP model for long term care has been Model Three, in which the lead provider (generally a post-acute provider) is responsible for the MSPB after discharge from acute care through 30, 60 or 90 days post discharge.

CMS has already implemented mandatory BP for total hip and knee replacement as a demonstration project in 67 major markets around the country, making the hospital financially responsible for the total MSPB for three days prior to admission through 90 days post discharge. CMS recently opened for comment a proposed mandatory

bundled payment for heart attack, heart bypass and surgical hip/femur fracture treatment for a demonstration project in 98 major markets as soon as October 2017.

Now is the time to seriously consider the impact to your operations and financial bottom line that will result from these new regulations. Management must accept that the landscape has already changed and adopt strategies for success. Providers should perform an assessment of their facility to determine their current position in regard to reputation, census, referral relationships, and financial status. Compare actual results against quality ratings and develop a plan to feasibly meet the new Five Star Quality Measures, the Florida Gold Seal Award, and the AHCA National Quality Award Program.

We encourage providers to consider plans to address the risks of a reduction in the Medicare census in order to maintain a financially healthy census and mix. High quality centers and those that offer multiple levels of post-acute care will be in demand. Centers should be actively engaged to solidify referral relationships and to provide value to referral partners (e.g., shared data that makes it clear how your organization benefits the referral partner). Finally, centers need to monitor the costs of providing services to avoid accepting high risk referrals where reimbursement is inadequate to cover costs.





Lorne Simmons and Sandy Swindling are with Moore Stephens Lovelace, P.A., FHCA's CPA Consultant. Learn more about MSL at www.mslcpa.com.

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CHAMPIONS FOR THE ELDERLY



FHCA Immediate Past President Joe Mitchell (left) with Sen. Rene Garcia (R-38) and FHCA Treasurer Marco Carrasco (right).

During the FHCA 2016 Annual Conference in Orlando, the Association honored several of its 2016 Legislative Champion for the Elderly. These annual awards recognize those legislators who championed priorities for Florida's long term care providers, including issues related to Medicaid funding, Certificate of Need, the Governor's Gold Seal Award, transparency in health care, the Prescription Drug Monitoring Program and telehealth. Bills that expand the scope of practice for nurse practitioners/physician assistants, address Florida's nursing shortage and update fire safety standards for assisted living facilities were also a focus of importance to members during the 2016 legislative session.



Everton Spencer of Opis Highlands Lake Center with Sen. Kelli Stargel (R-15).

> FHC PAC Chair Robin Bleier with Rep. Chris Sprowls (R-65).



Andrew McKillop of Okeechobee Health Care Facility with Sen. Denise Grimsley (R-21).

> Elaine Boyer with Rep. Ray Pilon (R-72).





$\overline{\mathit{ALF}}$ forum

Assisted living attendees leaning into change

by Lee Ann Griffin

Assisted living community attendees of FHCA's Annual Conference & Trade Show had many opportunities to learn about emerging issues affecting senior care and services.

To prepare for changes in health care reform, assisted living owners and operators were advised to begin developing strategic frameworks to provide unique discharge options for post-acute care providers. As part of this dialogue, presenters representing Heritage Healthcare discussed quality care and outcomes measures that impact success, as well as ideas for identifying quality partners among care providers. Successful care transitions between hospitals, assisted living, home health and skilled nursing providers are central to CMS' Triple Aim agenda. Presenters shared ideas for specialized program implementations as a niche to differentiate communities, while meeting an unmet care need identified by referring hospital(s). We know that payers no longer exclude assisted living as an option, given that Affordable Care Organizations want the least expensive option with best clinical capabilities and outcomes. These external parties, however, usually do not initially understand Florida's regulatory limitations and associated risks for assisted living providers.

Managing persons with higher acuities in assisted living requires providers of senior care and services to evaluate their staff. Traditionally, assisted living communities have been primarily staffed with non-nursing staff. However, experts with Florida Living Options, Inc. advised audience members to assess whether their existing staff can appropriately anticipate and care for the needs of resident populations that have more complex medical challenges. The importance of communication and partnerships was echoed with an emphasis on educating families and residents on the chronic medical conditions that exist and how conditions progress. Presenters counselled that those assisted living communities with tiered levels of care may be better equipped to demonstrate to residents and families the various levels of care, and the progression or regression of the resident from one level of care to another. Resident care meetings can be utilized to educate family and resident, to set expectations and continuously develop dialogue with the resident and family.

The Agency for Health Care Administration's (Agency) ALF Enforcement Team Manager, Laura Manville, joined Conference participants and discussed how changes in the 2016 Top 10 survey deficiencies reflect Agency priority shifts; for example, between employee rosters in the Background Screening Clearinghouse (AZ814) and generic resident rights (A0030) citations. Participants were also updated on the status of two developing administrative rules being developed to implement aspects of HB 1001 (2015): Chapter 58A-5, FAC, related (primarily) to assistance with self-administration of medication and Chapter 59A-36, FAC, related to criteria for determining resident rights.

In *ALF Administrator 101*, participants from both skilled nursing and assisted living environments discussed the ALF administrators' personal practice responsibilities and then shifted gears to explore the operational regulatory framework in which ALF administrators must be the field experts. The audience contrasted personal compliance philosophies (passive vs. assertive) and reviewed a wide range of key areas, such as incident reporting, communicating with the Agency between surveys, third party service responsibilities, and sourcing the best information when its most needed.

This year's Annual Conference topics reflected the changing health care and services landscape and emphasized the tightrope Florida's assisted living communities continue to walk as they mark out their unique roles amid post-acute and long term care providers and partners. Florida's sophisticated senior care and services market will continue to seek direction and learn from one another as they balance a more lightly regulated home and community-based social model with the traditionally less flexible and more resource-intensive medical model. •



Lee Ann Griffin is FHCA's Director of Regulatory & Education Development. She can be reached at lgriffin@fhca.org.

Florida Health Care Association Announces 2016-17 Officers

John Simmons of Avante at Jacksonville Beach tapped as president





Florida Health Care Association recently elected its 2016-17 officers during its Annual Conference Membership Meeting in August. John Simmons, Executive Director of Avante at Jacksonville Beach, was elected President of FHCA. After the installation conducted by FHCA Past President Bobby Rosenthal, Simmons vowed to continue FHCA's mission of advancing the quality of services, image, professional development and financial stability of its members. FHCA's 2016-17 officers include the following individuals:

- **President:** John Simmons, Executive Director of Avante at Jacksonville Beach
- Senior Vice President: Alex Terentev, Director of Operations with Gulf Coast Health Care out of Lake Mary
- **Secretary:** Anita Faulmann, Regional Vice President of Operations with Genesis Health Care out of Tierra Verde
- **Treasurer:** Marco Carrasco, Administrator of West Gables Health Care Center in Miami
- Independent Owner Vice President: Jeffrey Freimark, President & CEO of Miami Jewish Health Systems
- Not-for-Profit Vice President: Keith Myers, President of MorseLife Health System in West Palm Beach
- Multifacility Vice President: Kathy Gallin, Director of Legislative Affairs at Signature HealthCARE out of Lake City

- Assisted Living Facility Vice President: Steven Schrunk, Administrator of CountrySide Lakes in Port Orange
- Associate Member Vice President: Bradlee Cox, Account Manager with McKesson Medical-Surgical out of Clermont
- **Region I Vice President:** Gary Krulewitz, Executive Director of Renaissance Health and Rehabilitation in West Palm Beach
- Region II Vice President: Eric Mock, Administrator of Courtyards of Orlando Care Center
- Region III Vice President: Vernon Zeger, Executive Director of Hawthorne Health & Rehab of Brandon
- **Region IV Vice President:** Thomas McDaniel, Executive Director of Emerald Shores Health & Rehabilitation in Callaway

Along with the elected officers, FHCA's Board of Directors includes the Presidents of each of the Association's 16 districts.◆

FHCA 2016 Golf Tournament

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RB Health Partners, Inc.
The Whiting-Turner Contracting Company

Tri-County Golf Carts







Leave as a reasonable accommodation

By Mike Miller

Miller Tack & Madson, FHCA Labor Relations Consultant

The Equal Employment Opportunity Commission (EEOC) recently issued a new Resource Document (i.e., Employer-Provided Leave and the Americans with Disabilities Act), which addresses the rights of employees with disabilities to leave as a reasonable accommodation. As a reminder, the ADA requires that employers provide reasonable accommodations to employees (and applicants) with disabilities as may be needed to perform essential job functions. However, an employer does not have to provide an accommodation that would impose an undue hardship on its operations. Because the undue hardship standard presents a high bar, employers should consult experienced legal counsel to assist with this analysis.

According to the EEOC, disability charges reached a new high in FY 2015, increasing over six percent from FY 2014. "One troubling trend that the EEOC has identified in ADA charges is the prevalence of employer policies that deny or unlawfully restrict the use of leave as a reasonable accommodation." The EEOC's stated purpose in providing its new Resource Document is to help educate employers and employees about leave under the ADA "to prevent discriminatory denials of leave from occurring." The Resource Document explains, among other things, that absent undue hardship, employers must consider providing unpaid leave to an employee with a disability even if the employer does not offer leave as an employee benefit; the employee is not eligible for leave under the employer's policy; or the employee has exhausted the normal period of leave allowed by the employer (including any leave under the Family Medical Leave Act [FMLA] or a state's workers' compensation program). The EEOC's new Resource Document can be found at www.eeoc.gov/eeoc/ publications/ada-leave.cfm.

EEOC files suit in flu vaccine case

The EEOC recently filed suit against a North Carolina hospital alleging that it failed to accommodate employees' religious beliefs and fired the employees because of their religions in violation of Title VII of the Civil Rights Act. At issue is the hospital's requirement that its employees receive a flu vaccination annually by December. Any employee who requests an exemption based on religious beliefs is required to do so by September or the request is subject to denial by the hospital. In this case, the EEOC claims that various employees requested religious exemptions after the September deadline, which were denied, and the employees were subsequently fired. According to a regional attorney for the EEOC's Charlotte District Office, "[a]n arbitrary deadline does not protect an employer from its obligation to provide a religious accommodation. An employer must consider, at the time it receives a request for a religious accommodation, whether the request can be granted without undue burden." After attempting to resolve the matter pre-suit in conciliation, the EEOC filed suit against

the hospital. We will update you regarding important developments in this litigation.

OSHA penalties increase

Effective August 2, 2016, Occupational Safety and Health Administration (OSHA) penalties increased by 78%. Previously, the maximum penalty amount for a "Serious" or "Other than Serious" violation was \$7,000. That maximum is now \$12,471. As for a "Willful" and "Repeat" violation, the maximum penalty amount increased from \$70,000 to \$124,709. OSHA citations issued on or after August 2 will be subject to the new penalties for related violations occurring after November 2, 2015. Additionally, OSHA updated its Field Operations Manual (FOM) effective August 2, 2016, which is akin to a policy and procedures manual for OSHA Compliance Safety and Health Officers. There are significant changes to Chapter 6 of the FOM including the penalty adjustment factors, which are used to determine the amount of a penalty. Information regarding the increase in OSHA penalties and updated FOM can be found at www.osha.gov/penalties/.



Mike Miller is with Miller Tack & Madson, FHCA's Labor Relations Consultant. Learn more about MTM at www.peolawyers.net.

MEMBER SPOTLIGHT, continued from page 14

Julie Rupenski, MedBest Healthcare Recruiting Firm

facility (ALF) industry with new operators getting into the business. It could be similar situation with the housing market bubble. I believe ALFs will be everywhere. Nursing centers may be a safer route. I believe there will be a steady need for nursing centers, but we won't see it explode in the same capacity as ALFs. Simply because there is more government funding with nursing centers, we may see a bigger push toward assisted living communities. Of course, it all depends on political outcomes.

MedBest Healthcare Recruiting Firm specializes in senior care placement with a focus on matching the right people within the right positions, including all mid-level management and executives such as the CEO, C-Suite Director of Nursing and additional nurse leadership positions. MedBest is a FHCA Service Corp member and associate member of the Florida Health Care Association. Learn more about their services at www.medbest.com.

FHCA members honored for demonstrating excellence in long term care

they honored members for providing exceptional care and services to Florida's seniors and individuals with disabilities.

FHCA paid tribute to 26 member centers earning a 2016 AHCA/ NCAL Bronze National Quality Award and 11 centers achieving the Silver National Quality Award. Everton Spencer, administrator of Opis Highlands Lake Center, was also recognized for achieving a Gold National Quality Award in 2015. The Lakeland care center is only the second member in Florida to hold this top-level distinction in the national program conducted by AHCA/NCAL.

The AHCA/NCAL National Quality Award Program is centered on the core values and criteria of the Baldrige Performance Excellence Program. The program has three levels: Bronze, Silver and Gold. Centers begin the quality improvement process at the Bronze level, developing an organizational profile with fundamental performance elements such as vision and mission statements and an assessment of customers' expectations. At the Silver level, centers continue to learn and develop effective approaches that help improve performance and health care outcomes. The Gold level is the highest distinction, in which centers must show superior performance in areas of the criteria including leadership, strategic planning, and customer and staff satisfaction.

FHCA members earning the 2016 National Quality Award will be formally recognized at the AHCA/NCAL Annual Convention in Nashville, Tenn., in October.

Gold Seal Recognitions

Also honored during the Opening Ceremony were the 28 member centers which hold the Governor's Gold Seal Award for Excellence in Long Term Care. During the 2016 July cycle, the Agency for Health Care Administration (AHCA) recognized 11 Florida nursing centers with this status. Of those 11, five are newly-awarded.

FHCA members earning this impressive designation for the first time included PruittHealth-Santa Rosa in Milton (pictured on the front cover); First Coast Health and Rehabilitation Center in Jacksonville; The Commons at Orlando Lutheran Towers in Orlando; Rehab & Healthcare Center of Cape Coral; and Ybor City Healthcare and Rehabilitation Center.

Clifford Chester Sims State Veterans' Nursing Home and Florida Presbyterian Homes, Inc. also had their Gold Seal status renewed this cycle.

Florida has a total of 36 Gold Seal Award nursing centers, with 28 of those centers being members of Florida Health Care Association.

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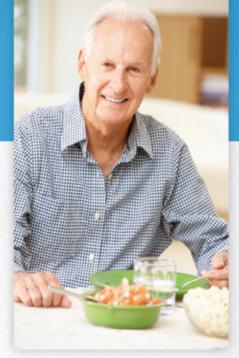
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goodnews



florida health care association around the state

Purple Power

Employees and residents of Florida Presbyterians Homes, Inc. wore purple as a collective show of support for World Elder Abuse Awareness Day.

CNAs: Champions for Person-Centered Care



Certified Nursing Assistants
ESSAY CONTEST





Honoring Heroes on the Frontline FHCA member centers recently honored their Certified Nursing Assistants who were recognized as winners of the Association's 2016 CNA Essay Contest.

Above, Grand Prize winner Gloria Williams honored by FHCA District I members in Miami , including FHCA Past President Bobby Rosenthal and District I President Isis Fernandez (right).

Daytona Beach Health and Rehabilitation Center honored its CNA, Flavio A. Uribe, Third Place winner.



FDVA Returns to FHCA

In August, Governor Scott and the Florida Cabinet recently appointed Lieutenant Colonel Glenn Sutphin as Executive Director of the Florida of Department of Veterans' Affairs (FDVA). FDVA, on behalf of the Governor and three-member Cabinet, is the premier point of entry for Florida's more than 1.5 million veterans to access earned services, benefits and support.

Colonel Sutphin served as Legislative Affairs Director and Chief of Staff for the Florida Department of Military Affairs (Florida National Guard) from March 1999 until his appointment as FDVA Interim Executive Director on April 26, 2016.

Additionally, FHCA is pleased to welcome the agency's six nursing centers and one assisted living facility back as members of the Association. FHCA looks forward to serving the FDVA and the teams from Alexander Nininger, Baldomero Lopez, Clifford Chester Sims, Clyde E. Lassen, Douglas T. Jacobson and Emory L. Bennett State Veterans' Nursing Homes, along with Robert H. Jenkins Veterans Domiciliary Home of Florida.

AUGUST/SEPTEMBER 2016



Some meetings noted herein may also carry CE credits. Additional information and registration can be found at www.fhca.org.

CONTINUING EDUCATION/TRAINING

SEPTEMBER

September 23, 2016

FHCA Webinar
Social Media & Health Care
Opportunities and Obstacles
11:00 a.m. EST

OCTOBER

October 19-21, 2016

RAI-MDS-PPS Bootcamp MorseLife Health System West Palm Beach, FL

DECEMBER

December 6 - 9, 2016

FHCA Regional Education Seminars
Locations TBD

2016 MEETINGS

OCTOBER

October 6-7

FHCA Florida Leaders 2017 Class Kickoff Training Tallahassee, FL

October 28, 2016

FHCA Board of Directors Meeting Amelia Island, FL

AMERICAN HEALTH CARE ASSOCIATION EVENTS

Visit www.ahcancal.org for details

October 16-19, 2016

AHCA/NCAL 67th Annual Convention & Expo Nashville, TN

WELCOME New Members

NURSING HOMES

Alexander Nininger State Veterans' Nursing Home, Pembroke Pines

Baldomero Lopez State Veterans Nursing Home, Land O'Lakes

Clifford Chester Sims State Veterans' Nursing Home, Springfield

Clyde E. Lassen State Veterans' Nursing Home, St. Augustine

Douglas T. Jacobson State Veterans' Nursing Home,
Port Charlotte

Eagle Lake Rehab and Care Center, St. Petersburg

Emory L. Bennett Veterans' Nursing Home, Daytona Beach

Skytop View Rehabilitation Center, Clermont

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Baldwin Krystyn Sherman Partners, Tampa

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Since becoming an approved service corporation company for FHCA in 1993, Edge has helped over 250 FHCA members meet their background screening requirements and kept them informed of pertinent legislative issues. Edge offers a variety of background checks including: drug screening, fingerprints, criminal, sexual offender, license verifications and references. Contact Nate Archibald at (321) 676-8822 or by email at natea@edgeinfomation.com, or visit www.edgeinformation.com for more information.



HPSI PURCHASING SERVICES

HPSI Purchasing Services, one of the nation's fastest growing Group Purchasing Organizations, is privately owned and has served the senior health care community for over 50 years. HSPI leverages the purchasing power of over 15,000 members to provide substantial savings and discounts on a wide range of products and services including: Dietary, Medical, Maintenance, Housekeeping, Linens, Capital Equipment, Technology, Administration, Pharmacy and more. What sets HPSI apart from its competition is the personal service provided by 40 Purchasing Consultants located nationwide. Call your Purchasing Consultant for a free cost analysis to get you started on your pathway to greater savings. East Florida: Mike Donohoo (407) 928-5870; West Florida: Russ Holmes (407) 719-0229; Panhandle: Bill Bayhi (985) 718-7830; Corporate and National Accounts: MaryClare Soliman (540) 589-2772; or visit www.hpsionline.com for more details.



MEDBEST RECRUITING

MedBest Recruiting is a nationally recognized healthcare recruiting firm that focuses exclusively in the senior care industry. MedBest began successfully matching senior to mid-level management with top long-term care companies in 2001. The MedBest recruiting team consists of former senior care executives and managers. This unique status created proprietary relationships and established MedBest as a recruiting firm that focuses on quality, not quantity. MedBest's services include permanent and interim placement for all executive positions including CEO, COO, CFO, DON, Nurse Management, and Sales and Marketing Directors. MedBest also offers post-employment support and the world-renowned DISC assessment option which gives employers insight into a candidate's personality and how they will fit the company's culture. To learn more about the MedBest process, call (727) 526-1294 or contact medbest.com.



OFFICE DEPOT

Office Depot offers Florida Health Care Association members extra discounts and services due to the cooperative purchasing power of FHCA. We offer a wide variety of benefits, including 50 items which have been reduced based on volume ordering up to 80 percent off the list prices (the "High Use Item List"); next-day delivery on everyday office products; an award-winning Web site which links you to your pricing and into the warehouse and keeps 12 months of tracking information at your fingertips. For more information or to set up an account contact Terry Bush at terry.bush@ officedepot.com or (850) 624-9979.



SENIOR CRIMESTOPPERS

The Senior Crimestoppers program is a proven, effective, proactive crime prevention system that combines proven components to help provide safe, crime-free facilities for residents, staff, visitors and vendors. Personal lock boxes for use by residents and/or family members, an around-the-clock, completely anonymous "tip line" call center, cash rewards of up to \$1,000 posted on any and all incidents that occur and educational materials for residents, families, management and staff members are a few of the components that make up the program. More details can be found at www.seniorcrimestoppers. org or contact Kay Joest at (800) 529-9096 for more details.