IHCA Member Renewals – Time is Running Out – Update Your Member Info Today!

Facility Members – Second Notices Due Monday! The second round of renewal notices was sent out nearly two weeks ago. These forms are due back to Ashley Caldwell no later than Monday, November 21, 2016. The information on these renewal forms will be used to update our member files, and to ensure that the most up-to-date information will be published in our Annual Membership Directory & Buyers’ Guide. If you have not already returned your renewal form, please do so as soon as possible. You may mail them, scan and email them (acaldwell@ihca.com) or return via fax at 217-528-0452. If we do not receive your renewal form(s), the information currently on file will be published in the 2017 Membership Directory & Buyers’ Guide, which goes out to all members and to discharge planners around the state.

Associate & Individual Members: You should have received an email listing what we currently have listed in the IHCA database for you/your company. You may reply to that email with any changes for the database, or any information specifics for the directory. Please be sure to note if the change should be made in the database, directory listing or both. If you did not receive an email with your information, please contact Ashley Caldwell. Again, the deadline to send in changes is Monday, November 21, 2016.

Please note: Some member information can be updated directly through the member portal. You will find a link to a new Fact Sheet on the portal included in your renewal materials. See below for more information on the portal. If you have any questions, let Ashley know.

Want to Serve on an IHCA Standing Committee in 2017!? Sign Up Today!

IHCA Committees have the responsibility for the policy review of all Association functions. As you may know, each year the IHCA Standing Committee and Task Force participation process takes place. Starting November 1 and ending November 30 you have the opportunity to nominate yourself or another member of the association to serve on (or continue serving on) one or more of the following 2017 IHCA Standing Committees and Task Force Groups: Administration/Finance & Operations; Awards Task Force; Education, Convention & Trade Show Committee; IHCA PAC; Legal Committee and Public Policy Committee.

All IHCA members are highly encouraged to participate in this process. In an effort to create diverse and widespread representation, appointments to specific committees may be limited to one participant per company. To assist in the process, individuals should be nominated for up to three committees.
and rank their selections in order of preference. To submit your nominations, please click here to fill out the online form or click here to download the printable form. If you wish to serve on more than one committee, please fill out a separate form for each committee, listing it as the first choice. Otherwise, the selections will be considered in order of your choices listed. If you are currently serving on an IHCA Standing Committee, please submit a form (one for each committee) to renew your commitment to serve.

**Several Deaths Linked to Drug-Resistant, Health Care-Acquired Fungus**

According to a press release sent out earlier this month by the CDC, more than a dozen cases of *Candida Auris* (*C.Auris*) have been identified in the U.S. This fungal infection is often resistant to antifungal medications and has a tendency to occur in hospitalized patients. Though seven of these cases occurred between May 2013 and August 2016 and were described in the CDC’s *Morbidity and Mortality Weekly Report (MMWR)* on November 4, there are still six cases that are under investigation.

In June, the CDC issued a clinical alert describing how this infection was emerging globally, and requesting that labs report *C. auris* cases and send patient samples to state and local heal departmats, as well as the CDC. The cases reported on by the CDC have occurred in Illinois, Maryland, New Jersey and New York. McKnight’s explained in an article posted last week that the patients infected all had underlying medical conditions, and had been in the hospital for an average of 18 days when the fungus was identified. Of those infected, four patients died, but it is unclear if it was the *C. auris* or their other conditions that caused their deaths.

“We need to act now to better understand, contain and stop the spread of this drug-resistant fungus,” said CDC Director Tom Frieden, M.D., M.P.H. in the release. “This is an emerging threat, and we need to protect vulnerable patients and others.”

The CDC noted that the majority of the *C. auris* strains from patients in the U.S. showed some drug resistance, which will only make the treatment more difficult. They believe the fungus entered the U.S. in the past few years and are working to understand how it works and how it spreads so they can offer better infection control recommendations. For now, The CDC recommends health care professionals implement strict precautions to limit the spread of the fungus.

Click here to find out more from McKnight’s.

**New Test Could Diagnose Arthritis Before Joint Pain Begins**

A new study by researchers at the University of Warwick Medical School in the UK, published in *Arthritis Research and Therapy*, has led the development of a test that can provide an early diagnosis of osteoarthritis (OA). The test can also distinguish OA from early-stage rheumatoid arthritis (RA) and other self-resolving inflammatory joint diseases. According to the research team, the test identifies the chemical signatures found in the plasma of blood joint proteins damaged by oxidation, nitration and glycation, and could diagnose arthritis several years before the onset of physical (and irreversible) symptoms.

For the study, synovial fluid and plasma samples were collected from patients with early stage and advanced OA, RA and other inflammatory joint disease, and also from a control group who had no skeletal health issues. Samples were compared and researchers found that in the samples from individuals with early and advanced OA and RA there were damaged proteins in characteristic patterns. This damage was seen in markedly lower levels in the samples taken from the control group.

These findings provided the necessary biomarkers for early detection and diagnosis and allowed for the development of the test, which should be available to patients in the next two years. Early diagnosis will allow patients to seek appropriate treatment that will provide the best chance for effective treatment and potential prevention.

“For the first time we measured small fragments from damaged proteins that leak from the joint into blood,” explained researcher Naila Rabbani. “The combination of changes in oxidized, nitrated, and sugar-modified amino acids in blood enabled early stage detection and classification of arthritis—osteoarthritis, rheumatoid arthritis, or other self-resolving
inflammatory joint disease. This is a big step forward for early-stage detection of arthritis that will help start treatment early and prevent painful and debilitating disease.”

To find out more, click here to view the full article from Futurity.org.

**New Research Identifies Predictors of Depression Among Women with Diabetes**

A study performed by NYU has shown that adults with diabetes are disproportionately prone to show signs of depression. Additionally, the research shows that the risk is significantly greater for women than men and establishes various predictors for depression among women of a diverse range of ages, races and ethnicities.

Dr. Shiela Strauss, associate professor of nursing in the New York University Rory Meyers College of Nursing (NYU Meyers) and the lead researcher for this study, noted that though there have been some studies in the past that have considered the predictors of depression in women with diabetes, these studies were limited in a number of key areas. For this new study, Strauss and other researchers on the project analyzed information from the National Health and Nutrition Examination Survey (NHANES) to assess the health and nutritional status of Americans across various age groups. They looked at data (collected from 2007 to 2012) regarding women ages 20 and older who were diagnosed with diabetes. The study sample included nearly 950 women and in this sample researchers found that 19 percent of the women was clinically depressed.

“Our study sample represented nearly nine million women aged twenty or over in the U.S. with diabetes from 2007-2012,” explained Dr. Strauss in a release from NYU. “Our findings indicate that nearly 1.7 million of these women also had depression comorbidity. This is truly a staggering number of individuals.”

According to Dr. Strauss, “the diabetes/depression comorbidity is associated with greater health care costs, poorer self-care, less medication compliance and dietary adherence, a greater diabetes symptom burden, poorer quality of life, and premature mortality.” The results of this study will allow medical professionals recognize that the combination of these female-specific characteristics are not the same as those identified in populations that include both men and women, and will enable them to target women who are especially vulnerable for screening and depression treatment.

For more on this, click here to read the full press release from NYU.

**Oxygen Doesn’t Benefit Everyone with COPD**

Futurity.org recently featured an article describing new research on chronic obstructive pulmonary disease (COPD). Approximately 15 million people in the U.S. have been diagnosed with COPD, and another 10 million may be undiagnosed and living with the disease. COPD is currently the third leading cause of death here in the U.S. The disease is a progressive lung disease that is largely caused by cigarette smoking, even though up to 20 percent of sufferers have never smoked. Symptoms of COPD include shortness of breath, chronic coughing and wheezing. It also causes low oxygen levels in the blood.

Generally, COPD patients receive portable oxygen therapy to help raise oxygen levels in the blood and help them breath easier. However, a new study led by Roger Yusen, an associate professor of medicine at the Washington University School of Medicine in St. Louis, MO, has shown that many COPD patients—individuals with moderately low levels of oxygen in the blood—do not benefit from supplemental oxygen.

More than 42 medical centers from around the country were involved in the study. Previous research has shown that long-term treatment with portable oxygen improves survival rates in COPD patients with severely low levels of blood oxygen, but the question has remained as to whether that was true of those with moderately low levels, which is why this study was set up to focus on patients with moderately low levels. Of the study’s participants, more than 730 patients had moderately low levels of oxygen in their blood at rest or during exercise.

Study participants were randomly assigned to either receive long term oxygen therapy or not. Results showed no significant differences between the two randomized groups in regard to how long patients survived and the length of time before initial hospitalization. Additionally, no differences were found in other important benchmarks—such as the rate at
which patients were hospitalized or the worsening of COPD symptoms. No significant differences were found in quality of life, levels of depression or anxiety, lung function or the ability to walk for short periods either.

“This treatment trial—the largest study of supplemental oxygen therapy ever conducted—answers questions about expanding use of oxygen in patients with COPD and using it in patients who have moderately low oxygen levels at rest or during exercise,” explained Yusen. “The findings allow us to further individualize treatment plans for people who have COPD.”

To find out more about this study, [click here](#) to read the full article.

**CDC Study: Night Shift Workers at Highest Risk for Sleep Problems**

A unique study recently performed by the CDC found that employees who work night shifts have the highest risk of developing sleep-related problems. They used a nationally representative sample of more than 6,000 adult workers to assess how the hours that they worked affected their sleep.

As noted in the [McKnight’s article](#) written about the study, nearly 40 percent of the survey’s participants reported that they sleep less than the recommended seven to nine hours each night. When considering only the participants who worked a night shift, that number went up to nearly 62 percent. Additionally, a high number of those who worked a night shift also reported poor sleep quality, insomnia and impaired sleep-related activities of daily living than their counterparts who worked day shifts. The study also showed that women, along with current smokers and workers who are obese had a higher prevalence of poor sleep quality.

“Particularly in light of the likely continuing increase in nontraditional working schedules, work-based prevention strategies and policies should be adopted to improve the quantity and quality of sleep among workers,” said Geoffrey Calvert, MD, MPH, FACP, a team leader and senior medical epidemiology with the CDC's National Institute for Occupational Safety and Health. “Unfortunately, there is no single ideal strategy to successfully address the sleep risks of every demanding shift work situation.”

Calvert recommended that employers design shift schedules that include frequent breaks, avoid night shifts that exceed eight hours and encourage workers to take a nap before a night-shift begins.

[Click here](#) to read the full article from McKnight’s.

**November 2016 Observances**

*November is National Hospice and Palliative Care Month:* Considered the model for quality compassionate care for people facing a life-limiting illness, hospice provides expert medical care, pain management, and emotional and spiritual support expressly tailored to the patient's needs and wishes. This month, help raise awareness of hospice care's benefits, and honor hospice and palliative care workers. [Click here](#) for more.

*November is National Alzheimer’s Disease Awareness Month:* Alzheimer’s disease affects more than 15 million Americans every day—with more than 5 million Americans who suffer from the disease and millions more who care for their loved ones with Alzheimer’s or dementia. During National Alzheimer’s Disease Awareness Month, help spread awareness of Alzheimer’s disease and dementia, and be sure to say “thank you” to the special people, staff and family members alike, who care for individuals with Alzheimer’s disease. [Click here](#) for more information.

**AHCA/NCAL Information**

*Excellence Has No Limits – AHCA/NCAL is Now Accepting Poster Session Proposals for the 2017 Quality Summit* The 2017 Quality Summit is scheduled for March 6-10, 2017 in Orlando. Poster Sessions are excellent forums for communicating interventions, new models of service delivery and innovative research projects. They provide a fun, interactive learning experience. This will be your opportunity to shine and share all of the great things that you've done at your center. Let AHCA/NCAL know how you have employed a QAPI or Baldrige approach to accomplish facility, company or Quality Initiative goals. The Quality Summit also provides a wonderful networking opportunity for everyone. All poster
session participants will receive a certificate recognizing their participation and four will be chosen for a special moderated gallery walk.

The deadline to submit is November 22, 2016. Applicants will be notified on December 14, 2016. If you have any questions, contact Urvi Patel at upatel@ahca.org.

**The National Quality Award Program is recruiting for Examiners and individuals to join its Board of Overseers**

*National Quality Award Examiner*: Serving as an Examiner is an incredible opportunity for individuals interested in continuous quality improvement. Members who participate as Examiners have a much better grasp of the criteria and can use that knowledge to improve their organizations and/or submit a National Quality Award application. It's also an excellent networking opportunity; Examiners gain professional contacts throughout the country, and make life-long friendships through the program. For more information and to submit an application, please visit the 2017 National Quality Award Examiner website [here](#). The deadline to apply is December 2, 2016.

*National Quality Award Board of Overseers*: The National Quality Award Board of Overseers is also in the process of recruiting new members. Elected members will serve a 3-year term on the Board. The board is responsible for establishing award criteria, policies and procedures, evaluating all aspects of the program, developing yearly goals and more. The deadline to apply is November 11, 2016. For more information and to apply, please click [here](#).

**IHCA Association Information**

*Convention CE Certificates – Changes Must be Submitted No Later Than End of Day Tomorrow!!*  
CE Certificates from last month’s 66th Annual Convention & Expo in Peoria were mailed out last week. They were sent to the participating facilities to the attention of the convention contact that was listed on the registration form. **If you have changes/corrections that need to be made to your certificate, please submit the request in writing to Kelli Showalter (email her at kshowalter@ihca.com) no later than November 18, 2016.**

*New Member Portal – Check it out!*  
Our new content management system and website offer members more control over their member information and will help IHCA staff as well! Through the Member Portal you can view/manage your member information, your communications preferences and more! **Starting in 2017 we will be using the communications preferences listed for each member contact to rebuild fresh, clean member email lists for our electronic publications.** It is important to get all of your staff members who want to receive our newsletters set up in the member portal! More information about this will be coming soon. If you have any questions, or need assistance using the new site, please contact Ashley Caldwell at the IHCA office (acaldwell@ihca.com | 217-528-6455). To view a fact sheet regarding the new portal, [click here](#).

**APPI Energy - The Proof is In the Electric Bill**

Earlier this year, IHCA partnered with APPI Energy to offer association members a chance to save on energy bills. APPI Energy identifies the wide range of energy supplier prices across the U.S., and the lowest prices available among many vetted, competing energy suppliers.

Here’s how the APPI program works. APPI provides recommendations to association members regarding when to buy energy, from which supplier, and which contract length is best. APPI’s recommendations are based on extensive data analytics and more than 20 years of transaction experience. This includes evaluation of current supply contracts, proprietary price analytics, energy tariff analysis, regulatory tracking, and complete customer service.

The APPI evaluation process is free and IHCA Members are not obligated to purchase anything by going through APPI’s evaluation process. APPI can save money on natural gas expenses too. To take advantage of this exclusive membership benefit program, contact Patty Martinez with APPI at 800-520-6685.

**LTCNA Holiday Luncheon and Annual Business Meeting**

This year’s LTCNA Holiday Luncheon and Annual Business Meeting will be held on Thursday, December 1, 2016, 11:30 a.m. to 2:00 p.m., at the Inn at 835 in Springfield. Karla Belzer, the Family Life Educator with the University of Illinois Extension that serves
Carroll, Lee and Whiteside Counties, will present *Being Mindful in a Busy World* after the business portion of the event has come to a close. Licensed Nursing Home Administrators and Licensed Nurses will earn one clock hour of continuing education for attending.

The LTCNA luncheon is open to anyone who supports nurses working in long term care. There is no charge for this event, but we ask that those planning to attend be sure to RSVP so that an adequate number of meals are available. Click here to view the invitation/RSVP form.

**LTCNA Now Offering Training With Simulation Mannequin**

The Long Term Care Nurses Association (LTCNA) has purchased a simulation mannequin, Geri Manikin, and is offering competency testing for nurses in your facility! For the first year, LTCNA will offer a limited number of facility Charter Memberships.

The fee for the membership is $2,000 and the facility will receive 24 hours (four 6-hour days) of simulation time over the course of the year. Click here to access an informational flyer that can be used to “encourage” your facility decision maker to take advantage of this offering. For more information, contact Debbie Jackson at djackson@ihca.com or 800-252-8988.

**LTCNA Scholarship Application Now Available!**

Each year, LTCNA sponsors a nurse scholarship program offering up to two $1,000 scholarships. The 2016/2017 Scholarship Application is now available. To qualify for the scholarship:

1) You must be employed as an RN, LPN or Nurse Aide in a long term care facility/program in Illinois. If employed part-time, you must work at least 15 hours per week.
2) You must have at least one year of experience as an RN, LPN or Nurse Aide in a long term care facility/program.
3) You must be accepted in the clinical portion (3rd year) of a 4 year RN program; or be enrolled in an accredited RN program; or be accepted to an accredited graduate nursing program to earn an advanced nursing degree related to long term care.
4) You must submit proof of enrollment in nursing school.
5) You must be willing to practice as an RN in a long term care facility/program

**Deadline for submission is December 30, 2016** and scholarships will be awarded in early 2017.

**IHCA Member Spotlight**

**Calling IHCA Members – We Want to Feature Your Company Here!!!**

Are you looking for a way to reach our members? Well, this is a great way to do just that! Our Member Spotlight gives our members a space to let us know what their company (or facility) is all about! (And to brag a little too if you want to!) Your Company Information could be seen here in an issue later this year!!

Has your company recently celebrated a milestone? Accomplished a goal? Undergone a major change? Do you have positive stories or news to share? Would you just like to get your name out there among your fellow IHCA members?

Ready to sign up for a member spotlight?! Contact Ashley Caldwell! Email acaldwell@ihca.com or give her a call today!