Happy Near Year!

A new year is upon us! Out with the old and in with the new. This is a great time to reflect on years past and make new goals for 2016. Whether you have health goals, work goals or personal goals to achieve this year, this is your chance for a fresh start! As long term care professionals, we know that change is inevitable. Who can really know what this year will bring, but we wish you the best of luck, we are thankful for your membership and support of the association, and, as always, we are available to assist you in any way we can! Happy New Year!

Sudden Cardiac Arrest May Not Be as Sudden as Previously Thought

According to new researcher, approximately half of cardiac arrest patients experience warning signs that their heart is in danger of stopping in the weeks leading up to a heart attack. Symptoms include any combination of chest pain and pressure, shortness of breath, heart palpitations and flu-like sensations (nausea, back pain and/or abdominal pain, for example).

Unfortunately, according to researchers, less than one in five individuals who experience any of these symptoms seek medical assistance. For those that don’t seek assistance and suffer a sudden cardiac arrest, the majority of them (upwards of 90 percent) won’t survive.

"For years we have thought that this is a very sudden process," stated Dr. Sumeet Chugh, study co-author and associate director of the Heart Institute/director of the Heart Rhythm Center at Cedars-Sinai Medical Center in Los Angeles. "But with this study we unexpectedly found that at least half of the patients had at least some warning signs in the weeks before. And this is important, because those who react by calling their loved ones or calling 911 have a five-fold higher chance of living. So, this may open up a whole new paradigm as to how we may be able to nip this problem in the bud before a cardiac arrest even happens."

This study (including nearly 900 patients, ages 35 to 65) focused on cardiac arrest, which occurs when the heart’s electrical activity is interrupted and the heart stops working, rather than heart attacks. A heart attack results from arterial blockage that cuts off blood flow to the heart. Cardiac arrest accounts for nearly 350,000 deaths each year. This was researchers’ first endeavor regarding symptom identification for cardiac arrest so they are still working on what this will mean for patients and medical professionals.

However, Dr. John Jay, president of the Heart Rhythm Society and director of Heart Rhythm Services at Intermountain Medical Center Heart Institute in Murray, Utah noted that these findings should act as a “wake-up call for patients and doctors” and that the signs should not be ignored. It’s important for individuals to be cognizant of their health, and to be on
the lookout for symptoms of possible heart problems, particularly if they have a history of heart problems, high blood pressure, high cholesterol or diabetes.

Click here to read the full article from HealthDay for more information.

Genes in Older Individuals Shown to Hit Reset on Internal Body Clock

A person’s body clock, otherwise known as their circadian rhythm, controls nearly all brain and body processes—such as sleep cycle, metabolism, alertness and cognition. All of these daily activity patterns are regulated by genes found in most cells, but these cells have rarely been studied in the human brain. Researchers from the University of Pittsburgh recently did a study of these cells in samples from nearly 150 human brains and their findings indicate that as a person ages their circadian clock begins to slow down and a new biological clock kicks in.

“Studies have reported that older adults tend to perform complex cognitive tasks better in the morning and get worse through the day,” explained Colleen McClung, associate professor of psychiatry at the University of Pittsburgh School of Medicine. “We know also that the circadian rhythm changes with aging, leading to awakening earlier in the morning, fewer hours of sleep, and less robust body temperature rhythms.”

For this study, researchers analyzed tissue samples from the prefrontal cortex for rhythmic activity of thousands of genes. Through this they identified 235 core genes that make up the molecular clock in that area of the brain. Though they found (and had expected to find) that younger individuals had the daily rhythm in what they referred to as the “classic ‘clock’ genes,” the results also showed a loss of rhythm in many of these genes in older individuals. They believe this could account for changes in sleep, cognition and mood as we age. The group also discovered, surprisingly, a set of genes that gained rhythmicity in older people—genes that essentially hit the reset button on seniors’ body clocks.

This new discovery could lead to the development of treatments for cognitive and sleep problems for older individuals, as well as “sundowning” and depression.

For more on this study, click here.

New Nasal Spray Could Provide Faster Treatment for Low Blood Sugar

A recently developed nasal spray may help diabetics when dealing with severe low blood sugar, which can them diabetic to become light headed or even lose consciousness. The side effects of hypoglycemia can make it difficult to administer the treatment necessary to help level out the blood sugar. This new development could be a huge step in making treatment easier for diabetics who deal with this problem.

Diabetes can vary in severity and it can be difficult to monitor and balance blood sugar consistently. In less severe cases, many diabetics can correct their sugar levels by drinking juice or sucking on hard candy. However, more severe cases may need to be treated using glucagon. Currently, the only FDA-approved glucagon that is available is not shelf stable, so it has to be sold in powder form and mixed with water prior to use.

"This intranasal spray is a big deal," said Dr. George Grunberger, a clinical professor at Wayne State University School of Medicine in Detroit (not involved directly in the study). "This is something which people have been crying for, for years. It was only a matter of time before something more practical came onto the market."

To test the spray, researchers enlisted 75 adults with type 1 diabetes. The subjects underwent induced hypoglycemia twice, and were treated once with the injection and once with the nasal spray. The trial results showed that the spray is nearly as effective as the injection, but that it does take a little longer to take effect. It was also noted that the average age of the trial participants was 33 years old, which is significantly younger than those who are at the greatest risk for hypoglycemia complications. Earlier studies have shown that individuals ages 80 and older are twice as likely to end up in the emergency room because of insulin-induced hypoglycemia, and that they are nearly five times as likely to require hospitalization. Some experts are interested to see how the study would have looked if it had included some members of the elderly population, who have the most to gain from this type of product as it would make it easier to treat them.

For more information, click here to view the full article from HealthDay.
More than Half of U.S. States Are Not Well Prepared to Handle Disease Outbreaks

A report released last month by the Trust for America’s Health (TFAH) and the Robert Wood Johnson Foundation stated that 28 states, as well as Washington, D.C., are poorly prepared to handle infectious disease outbreaks. Researchers looked at 10 indicators of preparedness, including categories such as health care-associated infections, childhood vaccinations, flu vaccinations, antibiotic-resistant superbugs and the ability to deal with emerging infections disease threats.

States were given a score out of ten, with high scores going to Delaware, Kentucky, Maine, New York and Virginia, who each received 8 out of 10. On the other end of the spectrum, Idaho, Kansas, Michigan, Ohio, Oregon and Utah scored only 3 out of 10, and Oklahoma came in dead last with a dismal score of 2 out of 10. Illinois fared fairly well with a score of six out of 10, but there is always room for improvement.

"We cannot afford to continue to be complacent," stated Jeffry Levi, executive director of TFAH, in a news release from the two groups. "Infectious diseases – which are largely preventable – disrupt the lives of millions of Americans and contribute to billions of dollars in unnecessary health care costs each year."

Levi points to the overuse of antibiotics and the underuse of vaccinations, as well as lack of funding, as some of the key reasons many states are ill prepared. Paul Kuehnert, a director of the Robert Wood Johnson Foundation, also pointed to funding issues when examining possible causes.

"America's investments in infectious disease prevention ebb and flow, leaving our nation challenged to sufficiently address persistent problems," he said. "We need to reboot our approach so we support the health of every community by being ready when new infectious threats emerge."

January 2016 Observances

January 17 – 23 is National Activities Professionals Week: Organized by the National Association of Activity Professionals, this week-long observance is an excellent opportunity to focus on your outstanding activity staff. This is the time to recognize all of the hard work they do and how their dedication contributes to the well-being of long term care residents each day.

This month is National Glaucoma Awareness Month: More than three million people in the U.S. have glaucoma and according to the National Eye Institute this number will reach 4.2 million by 2030. Glaucoma is often called "the sneak thief of sight" as there are no noticeable symptoms (40 percent of vision can be lost without a person noticing) and once sight is lost it cannot be returned. This national observance was created to raise awareness of glaucoma symptoms, treatment and prevention. Visit www.glaucoma.org for more information.

AHCA/NCAL Information

Just a Few Weeks Left to Apply for a National Quality Award!

The Intent to Apply Deadline has passed, but you can still apply for a Quality Award. The Quality Award website has a number of resources designed to help facilities with the application process. Whether you are writing a Bronze, Silver or Gold application this year; there is something for you! All applications must be submitted by January 28, 2016 to be considered.

Time is Running Out to Register for the Inaugural AHCA/NCAL Quality Summit

The AHCA Quality Symposium and the NCAL Spring Conference have joined forces to become one mighty summit—The AHCA/NCAL Inaugural Quality Summit: Where Excellence Has No Limits! With three keynote speakers, three days to network with like-minded long term care professionals and three days of targeted education for SNF and AL providers on quality improvement, performance excellence, and much more, this is sure to be a can't miss event!! This event is scheduled for February 9-11, 2016 in San Antonio, Texas and registration is now open! Click here for more. Registration deadline is January 12, 2016!
Registration Is Open for the 2016 AHCA/NCAL Independent Owner (IO) Leadership Conference

The AHCA/NCAL IO Leadership Conference—March 16-18, 2016—promises to be better than ever with all the networking opportunities you love and educational sessions you need in an energizing and engaging atmosphere you can’t get anywhere else. The town hall format allows you to discuss all the important issues with your peers as well as a slew of top-notch speakers. Earn up to 11.5 CEUs and enjoy the beauty of sunny San Diego at the stunning Manchester Grand Hyatt. Click here to learn more, see the complete agenda, and register today! Deadline to Register is February 17, 2016.

Have You Become a Part of the Conversation?

Care Conversations is an initiative led by AHCA’s Public Education and Communication Committee. It’s focus is on people working together toward a shared goal. Through information and guidance, Care Conversations helps people connect with loved ones, health care providers and industry professionals. Care Conversations provides insight into the care planning process and firsthand accounts of various care experiences.

Last year, they used this initiative to really hone in on key advocacy issues affecting the skilled nursing care profession. Topics included: The Five Star Rating System Infographic, designed to alleviate consumer confusion around the Five Star Rating System; An article explaining the differences between inpatient and observation status; 6 Steps to a Successful Hospital Transition, which gives families tools to help prevent hospital readmission; A resident and patient safety worksheet, designed for families considering skilled nursing care centers; and more! Check it out today!

IHCA Association Information

The Call for Presentations for the 66th Annual IHCA Convention & Expo is Now Open!!

Interested in being a session speaker at next year’s convention? The Call for Presentations is now open! Proposals must be submitted by February 1, 2016 to be considered. Click here to submit your proposal! Please visit the Speaker Information page for more information. If you have any questions, please feel free to contact Kelli Showalter or Debbie Jackson.

The Prospectus for the 66th Annual IHCA Expo is Now Online!

Want to be a part of one of the best attended long term care events in Illinois? IHCA’s 66th Annual Convention and Expo (September 12 – 15, 2016) will be here before you know it! The best locations go fast, so now is the time to reserve your booth space. Click here to view the prospectus. All space is reserved on a first come, first served basis. In order to ensure the best selection for your booth(s), please complete and return the application, Attention: Kelli Showalter, as soon as possible.

Please “Like” or “Follow” IHCA!

We are continuously trying to build our social media presence! Please “Like” us on Facebook and “Follow” us on Twitter and LinkedIn. We’ve been working on growing our social media following in the past few months and want to keep that momentum going! Check it out today!

IHCA’s New Development Director Wants to Meet You!!

Kristin DiCenso, IHCA’s new Development Director, is hitting the road to get to know our members! If you would like her to visit your facility, want to learn more about how to make the most of your membership or discover how to get more involved with IHCA, please email Kristin at kdicenso@ihca.com or call 217-527-3609.

Do You Have Any Photos You Would Like to Share?

IHCA is always looking for photos from our members to use in association publications (like the upcoming 2016 IHCA Membership Directory & Buyers’ Guide, the Annual Report and more!). Do you have any photos that depict life in your facility that you would like to share? If so, contact Ashley Caldwell. Each photo must be accompanied by a signed release form for any residents in the picture.

Coming Soon

The 2015 IHCA Annual Report (electronic version) will be available soon. Stay tuned to www.ihca.com or the Weekly News Brief for more information.

The 2016 IHCA Membership Directory & Buyers’ Guide is headed your way in just a few weeks, so keep an eye on your mailbox for this comprehensive member resource!
**IHCA Member Spotlight**

**IHCA Associate Member – Infinity Rehab**

**BUNDLED PAYMENT EXPERTS HERE**

Capitalize on tools, systems, and experience gained as a subsidiary of the nation’s largest SNF-based Bundled Payment Trial Convener.

Formed in 1999, Infinity Rehab is a leading provider of sub-acute rehab programs in 11 states and currently services over 225 post-acute rehab, nursing home, retirement communities and home health operations. Our evidence based, functional outcomes in physical therapy, occupational therapy and speech language pathology drive clinical quality and increase patient satisfaction scores. Infinity Rehab will share tools that will assist in migration from volume based to value based reimbursement, ensuring you are aligned strategically as provider panels narrow.

Looking for an accountable, transparent rehabilitation partner that will help move you into bundled payment landscape? Contact Susan Mayer, PT at 773-621-0627 or samayer@infinityrehab.com.

***Infinity Rehab is not affiliated with Infinity Healthcare Management***

**We Want to Hear from You!! Do You Want to See Your Company/Facility Featured Here?!**

IHCA is proud of our diverse membership and all of your successes and accomplishments. We are always looking for members to feature, either here or in our other publications (like LTC Today magazine!). 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? If you would like to see your company or facility recognized in Members Only--Associate Members, Facilities, Corporations alike--contact Ashley Caldwell.