

Spring/Summer 2016

LTC today

A publication of the Illinois Health Care Association

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the Long Term Care
Leaders of Tomorrow**

Inside:

**Busy Boxes at Hawthorne
Inn of Danville**

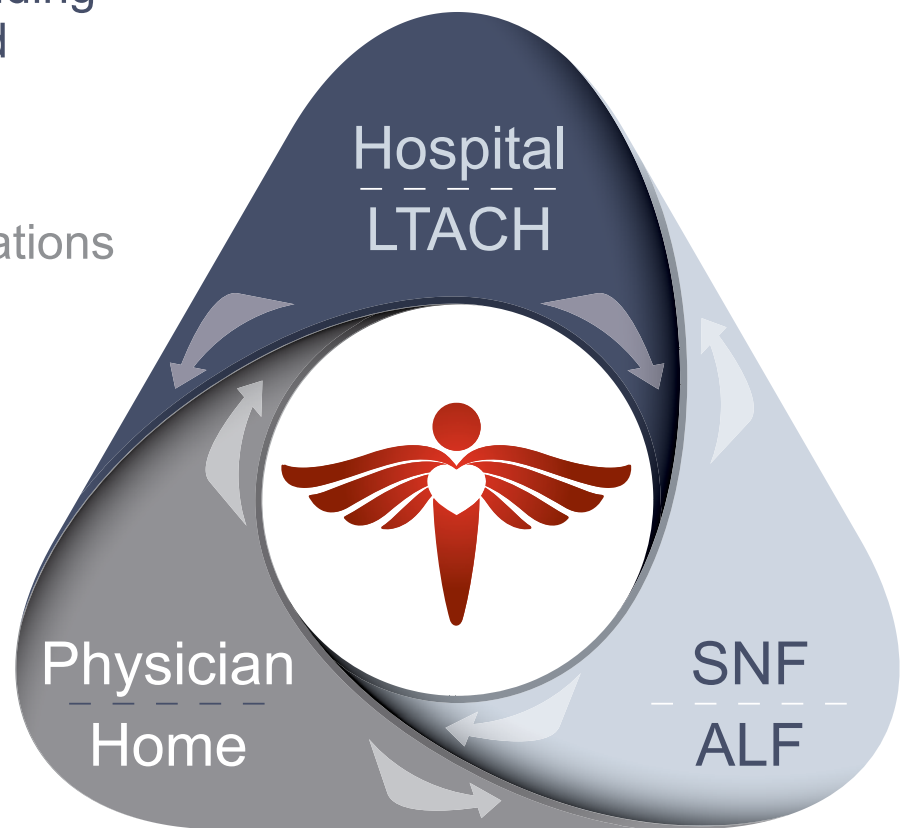
Payroll Based Journal Reporting

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Members of LTCNA are able to collaborate and network with other nurses in their profession through educational seminars, as well as committee meetings and other events.

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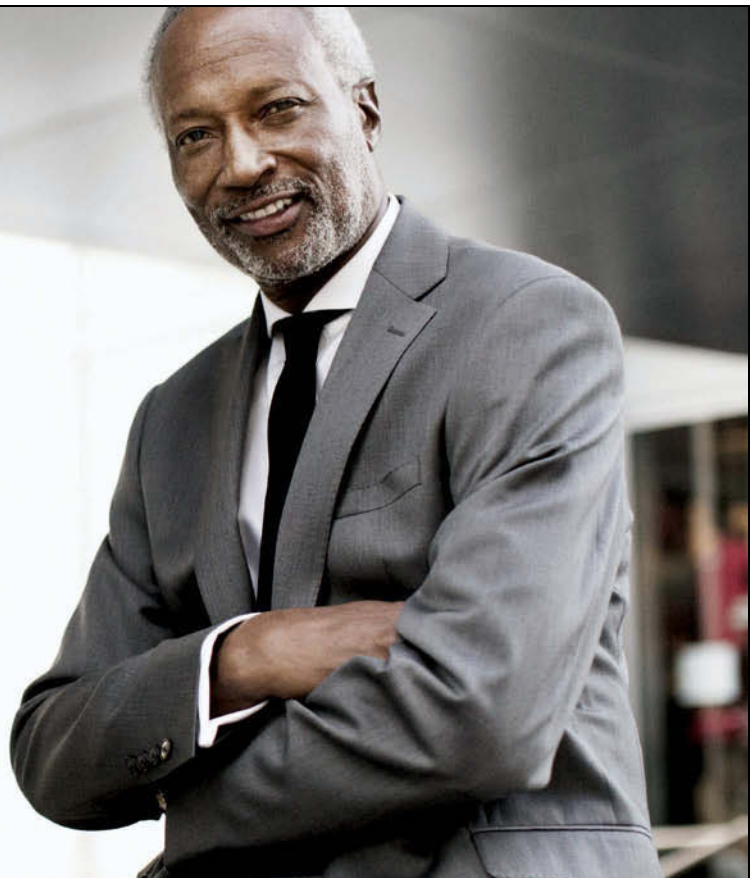
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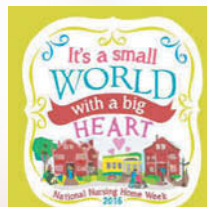
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PUBLISHED APRIL 2016

IHC-B0116 • 2332

Welcome to the Spring/Summer 2016 issue of *LTC Today*! Spring has sprung and the bright blue skies and sweltering temperatures of another Midwest summer will be here before we know it. It's easy to get caught up in the hectic hustle and bustle of life in long term care. Our world never stops going, never stops changing. There is always something to be done – new regulations to learn, new practices and systems to put into place. As we head into the next season (and, fingers crossed, we finally see a budget here in Illinois), we hope you will take the time to pause and reflect on our profession – why we do what we do, how we can do it better, what's coming up next.

May 8–14, 2016, is National Nursing Home Week (NNHW). This year's theme is *It's a Small World with a Big Heart*. This theme pays homage to the way each of our centers acts as a vibrant little world where the pursuit of health and happiness occurs each day, while giving a playful nod to the community nature of a local fair. AHCA offers plenty of fair-themed activity ideas on the NNHW website, www.nnhw.org, so be sure to check it out. And, feel free to share with IHCA how you are celebrating NNHW at your center. You may just find yourself featured in a future publication!



Later this summer, the Payroll Based Journal Reporting (PBJ) rule is finally kicking into gear; the policy officially goes into effect July 1, 2016. You've been seeing updates from us on this for a while, and now is the time to start getting prepared. Is your center ready to go? Do you need additional resources? Are you looking for guidance on how to get PBJ set up? Take a look at the article on page 12, prepared by Andrew Cutler of FGМК, LLC, for some really great info.

Also in this issue you'll find an overview about the IHCA Illinois Leaders program, new for 2016. This special program was launched in an effort to help long term care providers gain valuable knowledge and become stronger leaders within their organization and IHCA, as well as our profession. Turn to page 6 to find out more and meet our inaugural class of Illinois Leaders.

You won't want to miss the feature on page 10 about the Busy Box program at Hawthorne Inn of Danville – a fantastic idea for residents with Alzheimer's disease and dementia. Busy Boxes allow residents to reminisce about their families, jobs, hobbies, vacations and more, and have proven to be a wonderful influence on residents in Hawthorne Inn's Garden Court neighborhood.

And, last but certainly not least, find out more about the Long Term Care Nurses Association (LTCNA) on page 17. This organization, under the IHCA umbrella, has been supporting long term care nurses for years. LTCNA gives nurses in our profession an opportunity to learn and share ideas with their peers, and to grow both personally and professionally.

We hope you'll enjoy this issue of *LTC Today* and, as always, if you have any questions, please don't hesitate to contact us.

Sincerely,



John Vrba
IHCA President



Dave Voepel
IHCA Executive Director

Illinois Health Care Association Launches Illinois Leaders Program

Helping to shape the long term care leaders of tomorrow.

BY ASHLEY CALDWELL, MA

In November 2015, the Illinois Health Care Association (IHCA) announced the launch of a new program to be offered by the association – the IHCA Illinois Leaders program. Modeled after the AHCA/NCAL Future Leaders program, the Illinois Leaders program was created as a way to develop leaders not only within IHCA, but within the long term care profession as well. Like its predecessor, the IHCA program focuses on preparing participating members to take on vital roles by helping them hone their leadership skills and professional knowledge. Fine tuning these skills will guide them forward in their careers and aide them in their mission to provide the best possible care for the residents they serve.

The AHCA/NCAL Future Leaders program has been helping to mold leaders in long term care for more than a decade. When IHCA rejoined AHCA/NCAL at the end of 2013, it reopened the door to the national program for IHCA members and brought the idea of an Illinois program back to the table. As key members of the association took part in the Future Leaders program, the interest grew. Using the AHCA program and other state programs as a guide, IHCA was able to design a program they felt would be greatly beneficial

to the up-and-coming long term care professionals within the organization.

“It is important for IHCA to have a program to develop leaders among the profession,” stated Tom Annarella, administrator of Valley Hi Nursing and Rehab and chairman of the Illinois Leaders program. “For too long it has been the same group of people doing the advocacy for the profession. By cultivating new leaders we strengthen our voice and thus long term care. Having better leaders in the facilities only benefits those we serve, and having those same leaders join the

advocacy fight and become more invested in IHCA benefits everyone in the state.”

Annarella, along with his fellow Future Leaders alums IHCA President John Vrba and IHCA Vice President Rhonda Luther, recognized the importance of a program that helps long term care professionals grow and become leaders in their field, and were eager to offer such a program here in Illinois.

“One of the great things in life is that we never stop learning,” stated Vrba. “The IHCA Illinois Leaders

The inaugural class of the IHCA Illinois Leaders Program.



Program develops bench strength for the years ahead. It is our duty and responsibility as leaders in health care to pass our knowledge and work ethic on to others who will can carry the torch of *quality* and *compassionate* care in the years ahead and who will stand up and fight for what is right for those we serve and those we employ.”

The year-long program will cover the latest theories and practical applications in quality management, grassroots advocacy and navigating the legislative arena and, of course, leadership. Throughout the year, the leaders will take part in several training sessions and other discussions led by experienced and knowledgeable speakers.

In addition to the educational component of the IHCA Illinois Leaders program, participants are also given special opportunities to network with their peers, as well as members of the IHCA board and staff. Participants have the chance to learn from one another and from those who have been where they are, to openly discuss key issues and brainstorm possible solutions as a group and to take that information back to their own facilities and put it to good use.

“I enjoyed being in a room with like-minded individuals from all over the United States,” said Luther about her time in the AHCA/NCAL Future Leaders program, “...like minded in that they loved the profession of caring for seniors, and also being able to share our problems and/or solutions. We all have goals; we all want to learn more and get better at what we do. This program helps. This program will allow participants to see the potential in themselves as well as society, and to become true leaders in our profession.”

Each year a new class of participants will be chosen based on their demonstrated professional and leadership skills, an interest in improving those skills and a desire to learn. Ideal candidates for the program are dedicated long term care professionals who are driven not only to succeed in their career, but to help

others succeed as well. They should also be willing to become an active member of IHCA, their organization and their community at large.

“A potential candidate needs to have the qualities of a leader,” explained Annarella. “They need to be open to new concepts and higher levels of thinking. A candidate needs to not only talk the talk, but walk the walk. We hope to offer participants the chance to expand themselves beyond their organizations and to develop themselves both professionally and personally so that they can make a difference not only in their own organizations, but in long term care overall.”

The inaugural class of the IHCA Illinois Leaders program began their journey in December 2015 with a two-day kickoff event held in Springfield. Sessions included Personal and Professional Leadership Techniques, Media and Communications Training, Government Relations/Grassroots Advocacy Briefing, Volunteer Engagement, as well as a special networking reception where they were able to mingle with each other, session speakers and members of the IHCA staff and board.

The inaugural class will meet several more times throughout the year, either in person or via conference call, to discuss the course materials as well as any other pertinent topics that may arise. They will work together to sharpen their professional tools and to become strong, knowledgeable, well-rounded leaders who can speak out on behalf of long term care.

As the program continues in the years to come, those involved are hopeful that it will grow and evolve as long term care grows and evolves each day. “Too often we have people sitting on the sidelines who, if put in the game, could make a significant impact on the long term/post-acute care delivery system,” stated Vrba. “This Illinois Leaders program will accomplish that...we are putting people in the game – and not just people, but very intelligent and driven

people. That’s success! There is no doubt in my mind that these Illinois Leaders will achieve great things.”

Meet the Class of 2016

Molly Carpenter | Administrator | Imboden Creek Living Center, Decatur, IL

Molly Carpenter joined the long term care

profession more than 20 years ago when she strolled into Imboden Creek Living Center looking for a job. Working in the facility, she quickly discovered a true passion for caring for the elderly. In the years since, she has held several positions, including CNA, social services, director of Imboden Creek Gardens and her current role as the administrator at Imboden Creek Living Center.

Throughout her career, Carpenter has met every challenge she has encountered head on. She continuously looks for opportunities to grow as a professional, to become better at her job and to offer her residents the best possible care. She believes in the importance of cultivating relationships with facility residents, family members, staff and other members of the local community and is thankful for the opportunity to do so each day.

As long term care has changed throughout the years, Carpenter has remained steadfast in her dedication to her work, her residents, her staff, her facility and the long term care profession as a whole. She realizes that it is a profession that is not for the faint of heart; it can be grueling, but also very gratifying.

“Leadership is not a rote activity, it is about behavior or a way of thinking that varies from day to day,” stated Carpenter. “If completing this program allows me to make a difference in the life of one person, then to me it is worth it.”



**Laura Collins | Nutritional Services
Director | Maple Lawn Health Center,
Eureka, IL**



As a 12-year veteran of long term care, Laura Collins understands what it takes to provide quality care. She began her career as a registered dietician at Maple Lawn Health Center, where she discovered her true calling and where she has remained employed for more than a decade. “The more I learn about the field, the more passionate I become,” said Collins. “I envisioned myself being a registered dietician throughout my career, but I have found that my true passion comes not from food and nutrition services, but from serving the elderly.”

Collins consistently looks for ways to become more experienced and knowledgeable in long term care. She handles her duties with compassion and enthusiasm, and tries to be an active member of the Maple Lawn team. In addition to her dietary duties, she also serves as the facility privacy officer for protected health information, heads both the QAPI and Safety Committees, is active in the Illinois QIO and just last year became a licensed nursing home administrator. Collins believes that the Illinois Leaders Program will be an excellent opportunity to continue to grow as a long term care professional, and will give her new knowledge that she will be able to take back to her facility and put to good use.

“I love and respect the residents in our facility,” she said, “and fully understand that it is because of them that I have meaning and purpose in my professional life.”

**Love Dave | Administrator | Elmhurst
Extended Care Center, Elmhurst, IL**



Fresh from the University of Illinois at Chicago, and having just completed an internship at Elmhurst Extended Care Center (EECC), Love Dave

knew he wanted to work in long term care. While looking for a position he continued to volunteer his time at EECC. He found that he was really enjoying learning the day-to-day operation of the facility and spending time with the residents. “Seeing the residents’ appreciation for the care they received was really inspiring,” said Dave. “Helping those who can’t help themselves is really important to me.”

After several months, Dave’s persistence paid off – he was given a position at the facility. In the six years that followed he learned as much as he could about being a long term care provider. When the opportunity to take over Elmhurst Extended Care Center came up in 2013, Dave jumped at the chance. He has been acting owner and operator of the facility since January 2014 and is always on the lookout for opportunities to learn more about the profession. “I look forward to learning more about how to provide great care to my residents, to be a resource to my employees and to provide services to the community,” said Dave.

“The IHCA Illinois Leaders program appealed to me because it will help me to continue to grow and bring important skills back to my community,” he added. “I didn’t just choose long term care as a career. I’ve chosen to make it my life because of what it allows me to give back to those around me.”

**Josh Mathis | Assistant Administrator |
Evergreen Nursing & Rehabilitation
Center, Effingham, IL**

Before Josh Mathis chose long term care as a career, he already had experience with the profession. Both his mother and father worked in long term care, and because of their example he found himself drawn to it as well. Now, nearly 20 years after taking his first job in a facility, he still loves what he does and is always looking for new ways to expand upon this experience and learn new things.

“I enjoy coming to work every day and seeing our residents and watching them thrive. The amount of knowledge



you can gain from our residents is endless. There is not a day that I don’t look forward to coming into the facility,” said Mathis.

For the past 15 years, Mathis has been employed at Evergreen Nursing & Rehabilitation Center. Over the years, he has been involved in nearly every aspect of the facility, including maintenance, housekeeping, human resources and administration. As assistant administrator he has been given the opportunity to spread his wings and be more active in the daily operations. The Illinois Leaders program will give him an opportunity to continue to grow as a long term care professional; to become a stronger leader; to think outside the box; and to pass on what he learns to future generations. “We are a team,” said Mathis, “and it takes all of us to reach our goals and meet the needs of our residents.”

**Pamela Markle | CEO & Administrator |
Children’s Habilitation Center, Harvey, IL**

In 2007 Pamela Markle was considering a career change and thinking about making the leap into health care. When her father, cofounder of Children’s Habilitation Center, passed away later that year, she was appointed as CEO of the facility and the rest, as they say, is history.

Children’s Habilitation Center is a medically complex for the developmentally disabled (MC/DD) facility that was opened in 1972. Markle has been running the facility for the past eight years, learning by trial and error and working to compile as much knowledge and experience in long term care as possible, especially in the developmental disabilities arena. Three years ago, she took another major professional step forward by earning her nursing home administrator’s license.

“I know that I can always learn and do better,” said Markle. “I wanted to see changes put in place the way I envisioned them and to be more hands on with the staff. Earning my administrator’s license has enabled me to do that.”



Moving forward, Markle is hoping to pass along her knowledge and experience to another long term care professional who shares her vision for her facility so that she is able to focus on bigger picture issues, both statewide and nationally.

"I am always striving to improve my skills," said Markle, "but to be able to learn from experienced professionals who have had success, to have the support and the resources I need helps me become a better leader. Being involved in this type of program is exactly what I need."

Kristin Thrun | Administrator | Burgess Square Health Care & Rehabilitation Centre, Westmont, IL



Long term care has been a bit of a legacy in Kristin Thrun's life. As the daughter of a nurse who worked in long term care, the importance of the profession was instilled in her at a young age. By volunteering and spending time with her mother's residents, Thrun developed a passion of her own for long term care. For nearly 20 years now, she has been a member of the profession herself, working each day to learn, to grow, to provide quality care and to make a difference in the lives of those in her care.

Throughout her career, Thrun has been driven to learn the inner workings of a long term care facility and, along with that, how to provide the best care possible for the individuals who reside there. From admissions to QAPI, HIPAA compliance to clinical issues, offering uplifting words to a resident or giving them the compassion and care they need, she strives to do it all.

"One of the things that has always drawn me to long term care is that in our profession, we are forced to do a lot with very little. This challenge is a driver that encourages long term care professionals to be creative, resourceful and efficient," said Thrun. "The Illinois Leaders program is a great opportunity to be able to learn from and network with some of the best providers in the state."

Lance Tossell | Vice President of Business Development & Strategy | Petersen Health Care, Peoria, IL

Lance Tossell began his journey in long term care with an internship with Petersen Health Care at Royal Oaks Care Center in Kewanee, IL. Working at the facility opened his eyes to what the profession was all about, and made him realize that working with seniors was what he wanted to do in the long run.



Since completing his internship, Tossell has remained with Petersen Health Care, working his way up to his current position as vice president of business development and strategy. He is described as bright, dedicated, encouraging and loyal, and is a much-respected member of the Petersen Health Care team.

"Lance is that rare employee who is extremely self-motivated, independent and driven to accomplish goals, meeting any and all challenges and completing every duty, mission or task he is assigned," stated Greg Wilson, vice president of operations for Petersen Health Care.

As Tossell has moved forward in his career, he has remained focused on his goals, constantly seeking out new opportunities to grow as a long term care professional and as a leader within his company.

"One of my passions," he explained, "is to consistently pursue personal growth and development so that I can use my talents, strengths and skills for a greater good."

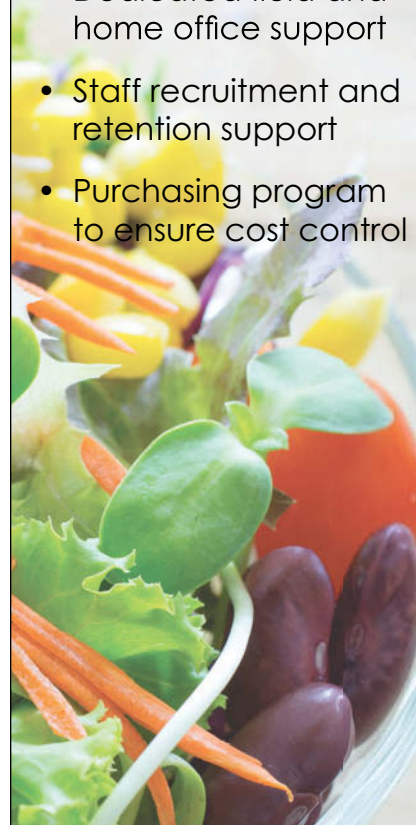
The Illinois Leaders program will give him the opportunity to learn more about long term care here in Illinois, how to advocate and fight for resident rights and quality care, how to become a stronger leader and how to effect change.

"It just seemed like a move I had to make," stated Tossell.

For more information on the IHCA Illinois Leaders program, visit www.ihca.com. ■

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Busy Boxes Give Alzheimer's and Dementia Residents Something to Smile About

BY ASHLEY CALDWELL, MA

Millions of people struggle with dementia each day. Symptoms can vary greatly from person to person, and can include impairments in memory, communication, ability to focus, reasoning and visual perception. Most types of dementia, like Alzheimer's disease – which accounts for 60 to 80 percent of dementia cases – are progressive. Changes in behavior are often seen in individuals with Alzheimer's or dementia. They can become restless, which leads to pacing or shredding paper or tissues; they can become anxious or agitated or irritable; they can become aggressive and have physical or verbal outbursts; or they may show signs of sadness or depression. These are only a few of the changes that can occur.

Though there is no cure for Alzheimer's or other types of dementia, there are various treatments and interventions that can be used to help when caring for an individual with dementia. Non-drug techniques for managing dementia include continual monitoring of resident comfort, redirecting attention when necessary, creating a calming environment, providing a security object and more.

Skilled nursing centers that offer secured Alzheimer's/dementia units, like the Garden Court Memory Care

Neighborhood at Hawthorne Inn of Danville, provide a safe, comfortable, stress-reducing environment for residents with memory care issues. The specially-trained staff members who work in these units are continuously on the lookout for activities and programs to keep residents healthy, happy and functioning at their optimum level. Kimberly Leloup, Garden Court coordinator at Hawthorne Inn of Danville, started a new program a few years ago that allows residents to reminisce about their lives and lends itself quite well to several behavior management techniques.

Busy Boxes are individualized boxes – one for each of the 26 Garden Court residents – that are personalized and filled with photos and other mementos from their lives. As dementia progresses, those afflicted with it may have a hard time retaining new information or may find themselves confused about where they are or what day it is. It was this behavior – residents being stuck in the past – that really inspired Leloup to come up with Busy Boxes.

“Alzheimer's residents frequently think back, looking for the past rather than where we are now,” she explained. “We developed the Busy Boxes to provide comfort and spark memories of the residents' past.”

Family members are encouraged to bring in items that were meaningful to their loved ones – photos, letters, souvenirs, things they collected, keepsakes from their career,



Garden Court residents Leslie Kuhn and Augusta Winters swap stories as they go through their boxes.

...the boxes have proven to be a great help when it comes to managing certain behaviors that are a part of Alzheimer's and dementia.

anything that could trigger a memory for that individual. When the program first started, staff reached out to the individual families and advertised the program in the center's newsletter. Now, the Busy Boxes are discussed with loved ones during tours of the neighborhood as new residents are admitted. Staff members collect the items and put together the boxes, personalizing them for each individual. If a resident's box doesn't have much in it, or if their family members aren't around to supply items for the box, Garden Court staff will find items that they think will remind the resident of their past. The contents are as unique and varied as the personalities of the residents they belong to.

Unlike typical shadow boxes that hang on the wall next to a resident's door, or photos and albums that are often found inside a resident's room, Busy Boxes can hold an assortment of items that encompass various aspects of an individual's life. Leloup and her staff have seen everything from seashells and rocks, to photos and books, from toy trucks and stuffed animals to military memorabilia and pieces of electrical components go into the boxes.

"The boxes have a wide variety of things for each resident and represent what their past interests were," stated Lisa Miller, administrator at Hawthorne Inn of Danville. "And, it's tangible. They can touch it and I think that brings back even more memories for them."

The Busy Boxes are kept in the Garden Court living room so that they are easily accessible for residents and staff. Any time a resident would like to take a trip down memory lane and look through the items in their box, they are available. They can pull out those precious pieces of their lives that hold special memories for them, and not only find enjoyment for themselves, but they can share their memories with those around them. It gives them something to hold on to and to draw memories from.

"I think it's a really great program," said Leslie Boedickler, daughter of Hawthorne Inn resident Leslie Kuhn. "I went to visit him recently and he was carrying around objects from his box in his shirt pocket. It has definitely sparked some memories in him, especially in the early days of his illness."

The project has been a great success from the time it was introduced, according to Leloup. Not only do the residents, like Kuhn, enjoy looking through their Busy Boxes, but they take pride in sharing their memories with each other, their families and members of the staff. Spending time with the



Garden Court Coordinator Kim Leloup and resident Mary Wear look through the keepsakes in Mary's box.

residents and going through their boxes with them has also helped the staff get to know the residents better.

In addition, the boxes have proven to be a great help when it comes to managing certain behaviors that are a part of Alzheimer's and dementia. "If someone is really emotional that day or having some other kind of behavioral issue," explained Miller, "a lot of times you can go and get their Busy Box and use it to redirect them." In fact, according to Miller the Busy Boxes have even helped reduce the use of anti-psychotic medications by 4 percent among the residents of the Garden Court Neighborhood.

This seemingly simple idea – personalized memory boxes – has had a huge effect on the residents of Hawthorne Inn of Danville's Garden Court Neighborhood. Busy Boxes bring joy to the residents and their families, they help the staff get to know residents better and can have a calming effect when a resident gets agitated. They can hold a lifetime's worth of memories for individuals who so often feel their memories slipping away. They act as a reminder of a life well-lived.

"What I think makes Kim's Busy Boxes so innovative," added Miller, "is that they can include anything. They can include their career, their love life, their children, their grandchildren, activities, rock collecting, figurine collecting, whatever it was that they loved. And, I think you could look at any one of our residents when they open up their box and you would see the biggest smile on their face." ■

Payroll Based Journal Reporting

BY ANDREW B. CUTLER, MANAGING DIRECTOR, HEALTHCARE, FGMK, LLC

Welcome to spring and the last few months that your skilled nursing facility will have to prepare or refine reporting procedures for Payroll Based Journal Reporting (PBJ). I know, just what you were hoping to do with your time now that the weather is getting warmer – plan for PBJ. Whether your organization has done little to prepare or has participated in the pilot program, this information may be a welcome guide.

In accordance with the *Federal Register* dated August 4, 2015, the following amendments were published in volume 80 page 46477. Section 483.75 was amended to include the language regarding the mandatory submission of staffing information based on payroll data in a uniform format. The amendment provides some insight as to the definition of direct care staff, the submission requirements, how to distinguish between employee and agency or contract staffing, the data format and the submission schedule.

The following are key takeaways from the amended section 483.75 and the draft policy manual that is available at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Staffing-Data-Submission-PBJ.html>. Please refer to the .pdf file PBJ Policy Manual Draft (V1.1) 8-25-15[PDF]. This policy is effective as of July 1, 2016.

Methods of Submission

There are two primary methods of submission. The first is a manual submission through a direct data entry portal whereby an individual(s) will key in information about employees, hours worked and census information directly into the PBJ user interface. The second method will allow for an automated process whereby

information may be uploaded directly from a payroll or time and attendance system in a uniform (XML) format. The Centers for Medicare & Medicaid Services (CMS) expects that one or both methods may be utilized to complete the data submission. Many payroll companies are developing an XML platform for direct data upload. If your facility does not utilize a payroll company and processes payroll internally, the direct data entry component is available.

CMS Definition of Direct Care

Forty different Job Title Codes have been established to identify the CMS defined job titles. These 40 codes are split into 15 Labor Category Codes, which CMS has defined. Facilities are required to report direct care staffing paid hours for each of the roles and individuals identified here on a daily basis for the quarter. If uploading data, the Job Title Code is the only code that is required to be identified. The chart breaks out the required codes which must be reported. Additionally, we have outlined the optional Labor Category Codes as well. Twelve of the 15 Labor Category Codes are required to be reported on. The associated categories consist of the following: Administration, Physician, Nursing, Pharmacy, Dietary, Therapeutic, Dental, Podiatry, Mental

Health, Vocational, Clinical Laboratory and Diagnostic X-ray Services. Section 483.75 (u) 1 defines “Direct Care Staff.” Direct Care Staff are those individuals who, through interpersonal contact with residents or resident care management, provide care and services to allow residents to attain or maintain the highest practicable physical, mental and psychosocial well-being. Direct care staff does not include individuals whose primary duty is maintaining the physical environment of the long term care facility (for example, housekeeping).”

For those 12 labor categories listed here, there are 37 different types of job descriptions on which CMS requires information. The information required includes the employee ID; the category of work for each direct care staff, including information related to the start date of employment and the termination date (if applicable) for each employee that the facility reports; the number of hours of direct care services paid; and whether or not the employee is exempt. Hours are to be reported on a daily basis for each employee during the reporting quarter. Further, facilities are required to report the same information for non-employee personnel who provide direct care services in their facility. This would include agency or contract employees who are not on payroll at the facility. Facilities will be required to set up a procedure to compile the necessary information required for reporting from the agency or third party contractor.

CMS further indicated that the procedure for determining termination dates on agency staff may be more difficult to obtain. Procedurally, it would be appropriate to report termination of any agency

CMS Labor and Job Codes/Descriptions

Source: CMS's PBJ Version 1.0 Policy Manual, August 2015

REQUIRED REPORTING			
Labor Category Code	Labor Category Description	Job Title Code	Job Description
1	Administration Services	1	Administrator
2	Physician Services/Nursing Services*	2	Medical Director
		3	Other Physician
		4	Physician Assistant
		13	Nurse Practitioner*
3	Nursing Services	5	RN - DON
		6	RN - W/Administrative Duties
		7	RN - Direct Care
		8	LPN/LVN - W/Administrative Duties
		9	LPN/LVN - Direct Care
		10	CNA
		11	Nurse Aide in Training
		12	Medication Aide/Technician
4	Pharmacy Services	14	Clinical Nurse Specialist
		15	Pharmacist/Pharmacy Consultant
5	Dietary Services	16	Dietitian
		17	Paid Feeding Assistant
6	Therapeutic Services	18	Occupational Therapist
		19	Occupational Therapy Assistant
		20	Occupational Therapy Aide
		21	Physical Therapist
		22	Physical Therapy Assistant
		23	Physical Therapy Aide
		24	Respiratory Therapist
		25	Respiratory Therapy Technician
		26	Speech/Language Pathologist
		27	Therapeutic Recreation Specialist
		28	Qualified Activities Professional
		29	Other Activities Staff
		30	Qualified Social Worker
		31	Other Social Worker
7	Dental Services	32	Dentist
8	Podiatry Services	33	Podiatrist
9	Mental Health Services	34	Mental Health Service Worker
10	Vocational Services	35	Vocational Service Worker
11	Clinical Laboratory Services	36	Clinical Laboratory Service Worker
12	Diagnostic X-Ray Services	37	Diagnostic X-Ray Service Worker

* Nurse Practitioner services are classified in the Physician Services category

or contract staff that you specifically request not work in your building after a specific date. If an agency or contract worker is transient, it is appropriate not to report a termination date if you believe there is a reasonable chance they may work in the building in the near-term. If, however, you receive notification of a termination, you would be required to report the date.

Resident Census Data/Staff Turnover

CMS will require the total census for the last day of each month in the

reporting quarter to be included in the data submission file or directly input into the PBJ system. Facilities are also responsible for reporting staff turnover. This is accomplished by including the following:

Employee Record

Employee ID - All staff, direct and contract employees must be entered into the system by assigning a unique identifier. This identifier must not contain any personally identifiable information. The unique identifier will remain with each employee



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throughout the remainder of their employment with your organization.

Hire Date - The first date a staff member is employed and paid for services delivered (Start Date of Employment).

Termination Date - The last date a staff member is employed and paid for services delivered (Termination Date). For contract staff, the termination date is the last date the facility or agency communicates that the contract individual will no longer be providing services at the facility. This can be voluntary or involuntary; if the facility is unsure, you are instructed not to fill in an end date.

Pay Type Code - Facilities are required to classify whether a staff member is a direct employee of the facility (exempt or non-exempt) or employed under contract paid by the facility. This may be agency or 1099 related services. When determining if an employee is exempt or not exempt, it is important to remember that non-exempt employees are entitled to overtime pay and exempt employees are not. Contract staff may include outside therapists, agency nursing, pharmacy consultants, etc.

Submission Timelines

Direct care staffing and census data will be collected quarterly. CMS expects the information to be submitted timely and accurately. The system will allow for multiple uploads

of data throughout the reporting period, however, the last accepted submission in advance of the reporting deadline will be considered the final submission.

Audits will be performed to ensure that the information uploaded is consistent with the source documentation. Facilities that are noncompliant may be subject to enforcement actions by CMS.

Report Quarters have been established based on the federal fiscal year. Data will be collected for each fiscal quarter. Staffing data will include the number of hours worked by each direct care staff member each day within a quarter. Census data will be collected as of the last day of each of the three months in a quarter. The fiscal quarters follow the federal fiscal year, as seen in the table below. ■

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REPORT QUARTER SCHEDULE

Fiscal Quarter	Date Range	Submission Deadline
1	October 1 - December 31	February 14 - 11:59 PM EST
2	January 1 - March 31	April 15 - 11:59 PM EST
3	April 1 - June 30	August 14 - 11:59 PM EST
4	July 1 - September 30	November 14 - 11:59 PM EST

Note: Although CMS will accept all payroll data from a facility, the following categories are not required to submit:

NOT REQUIRED OPTIONAL REPORTING

Labor Category Code	Labor Category Description	Job Title Code	Job Description
13	Administration & Storage of Blood Services	38	Blood Service Worker
14	Housekeeping Services	39	Housekeeping Service Worker
15	Other Service Worker	40	Other Service Worker

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The Long Term Care Nurses Association

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A good nursing staff is the backbone of any long term care center. From CNAs who assist residents with their activities of daily living, to registered nurses who handle medication and other clinical duties, to DONs who manage staffing and other important tasks, the nursing staff in a skilled nursing center provides a broad range of necessary health care services to their residents each day.



For more than 30 years, the Long Term Care Nurses Association (LTCNA) has been offering nurses in the long term care profession the opportunity to come together to learn, encourage each other and become better, stronger caregivers. LTCNA was created to bring attention to long term care nursing and to aide its members in their careers by providing educational services and facilitating the exchange of ideas among nurses in the profession. Throughout the lengthy history of the organization (formerly the IHCA DON Council and the Extended Care Nurses Association), the main mission has always remained the same – to provide support and services to nurses in long term care.

LTCNA is affiliated with the Illinois Health Care Association (IHCA) and is open to all licensed or student nurses interested in the practice of long term care nursing. The association is governed by the LTCNA Council, which is made up of the members of LTCNA and its officers. A member of the council serves as a representative on the IHCA Board of Directors, ensuring that nurses have a voice in IHCA activities. For many years, this special group of nursing professionals, along with other LTCNA members, has helped bring awareness to key issues in long term care nursing.

"I wanted to be involved as an advocate for long term care nursing," said Nancy Annegers, longtime

member and immediate past president of LTCNA. "All other branches of nursing were well-represented by various other trade groups and long term care wasn't. I felt like we needed a voice and I wanted to be a part of that."

Long term care centers are, for the most part, their own self-contained world. Long term care nurses go to work each day to care for the residents who make those centers their home. It can be difficult for nursing staff to get out and talk to other long term care professionals. Members of LTCNA are able to collaborate and network with other nurses in their profession through educational seminars, as well as committee meetings and other events.

"I know that for me personally," stated LTCNA President Becky Wallace, "the collaboration I am able to have with other long term care nurses that work for different companies, that have facilities in different regions, that are surveyed by different groups...the fact that we can put our heads together and talk about our work and draw off of everyone's different experiences is really valuable. It makes a difference."

"Being a part of the association is an opportunity for nurses to feel validated," added Annegers. "Long term care nursing is hard, but it's also very rewarding and our nurses deserve to be reminded of that and reminded of their value."

Providing educational services and sharing vital information has long been a key focus for LTCNA. As long term care and educational requirements for nursing staff have changed over the years, the educational services

offered by the association have changed as well. Currently, LTCNA works in collaboration with IHCA to provide educational sessions – both face-to-face seminars and web seminars – on topics that are pertinent to long term care nurses. In addition, each year LTCNA hosts *Resources for Success*, a two-day conference geared specifically toward long term care nurses. The event includes a variety of sessions, a small expo and a reception where hard-working long term care professionals can kick back, relax and enjoy themselves. LTCNA also hosts a website and distributes a monthly electronic newsletter that focuses on topics of interest to long term care nurses, ensuring that members have the most up-to-date information possible.

"The way we care for our patients and our residents now is going to dramatically change because of all of the shifts happening in health care," said Wallace. "One of the reasons why I am a member of LTCNA, and why I wanted to become president of the association, is that I wanted to be able to help put services in place for our members so that we can bring the education and the hands-on competency training to them. It's about making sure they have the skills to care for the higher acuity residents that are in our facilities now."

Moving forward, LTCNA will continue to seek out new ways to assist its members in providing the best possible care to the residents in their charge.

For more information, visit www.ltcna.org. ■

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