

Four Part Series: From Institutional to Individualized Care
Part One: Integrating Individualized Care and Quality Improvement
Centers for Medicare and Medicaid Services (CMS)
Satellite Broadcast and Webcast

Friday, November 3, 2006

1:00-3:30 PM EST

PLEASE ADJUST TIMES FOR YOUR TIMEZONE

On November 3, 2006 1:00-3:30 p.m. EST, the Centers for Medicare & Medicaid Services will broadcast a two and a half hour presentation via satellite and Internet on the topic of Integrating Individualized Care and Quality Improvement. This is Part One of a four part series: From Institutional to Individualized Care.

Goals

The goal of this broadcast is to provide a framework and practical examples to help LTC surveyors, providers, and consumers understand and support individualized care.

Objectives

After viewing this program, participants will be able to:

- Identify the roots and key features of individualized care;
- Describe how individualized care is integrated into overall facility operations;
- Describe the continuum of homelessness to home as a roadmap to individualized care;
- Identify various adaptations in care practices where quality of care plus quality of life leads to better clinical outcomes; and
- Describe quality improvement principles and practices that support a holistic approach to transformational change.

Target Audience

This program is targeted to Regional Office and State Survey agency LTC Surveyors, LTC providers, QIOs and Consumers.

Faculty

Cathie Brady, Co-founder, B&F Consulting, Canterbury, CT

Brenda Davison, Director of Nursing, Jewish Rehabilitation Center of the North Shore, Swampscott, MA.

Barbara Frank, Co-founder, B&F Consulting, Warren, RI

Sandy Godfrey, Director of Nursing, St. Camillus Health Center, Whitinsville, MA

Marguerite McLaughlin, Manager of Educational Development, Quality Partners of Rhode Island, Providence, RI

Registration and Viewing Instructions

For individual and site registration and viewing instructions go to: <http://cms.internetstreaming.com>. To obtain CEUs for viewing the training program you must go to the above CMS website.

Webcast Information

This program will be available for viewing up to one year following November 3, 2006 at <http://cms.internetstreaming.com>

Continuing Education Units (CEUs)

The Centers for Medicare & Medicaid Services has been reviewed and approved as an Authorized Provider by the International Association for Continuing Education and Training (IACET). To obtain CEUs for viewing the training program you must go to the CMS website <http://cms.internetstreaming.com>.

Satellite Technical Specifications

This broadcast will be available on C and Ku Digicipher bands. Specific satellite technical specifications will be available at <http://cms.internetstreaming.com> or can be obtained by calling 1-800-401-9387.

Handouts

A train-the-trainer manual will accompany this broadcast. The manual with relevant handouts will be available after October 23, 2006 at <http://cms.internetstreaming.com>

Copies:

Copies of this program, and the accompanying train-the-trainer manual and handouts, can be obtained from the National Technical Information Services at 5285 Port Royal Road, Rm. 1008, Sills Bldg. Springfield VA 22161. The phone number is (703) 605-6186.

Copies of featured segments used in this broadcast from Culture Change in Long – Term Care: A Case Study created by the American Health Quality Foundation can be purchased in its entirety by calling Imageworks at telephone number: 619-239-6161

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Presenters and Topics

Time	Topic	Presenter
1:00-1:10	Introduction to Show, Participants, and Goals	Marguerite McLaughlin Manager of Educational Development, Quality Partners of Rhode Island,
1:10- 1:15	Welcome	Thomas Hamilton Director of the Survey and Certification Group in the Center for Medicaid and State Operations, Centers for Medicare and Medicaid Services
1:15-1:25	Historical Perspective on Individualized Care's Roots in OBRA '87 and the recent work of the QIOs to advance it.	Barbara Frank Co-founder, B&F Consulting Cathie Brady Co-founder, B&F Consulting Marguerite McLaughlin, BS, MA
1:25-1:50	Introduction to the Holistic Approach to Transformational Change <ul style="list-style-type: none"> ○ Workplace and Care Practices <ul style="list-style-type: none"> ○ Transforming Bathing ○ Environment ○ Leadership ○ Family, Community, and Government 	Marguerite McLaughlin, BS, MA Cathie Brady, MS Barbara Frank, MPA
1:50-2:10	The Importance of Home <ul style="list-style-type: none"> ○ Home vs. Homelessness 	Cathie Brady, MS

Time	Topic	Presenter
2:10-2:40	Individualizing Care and Routines <ul style="list-style-type: none"> ○ From Institutional to Individual Care ○ Impact on residents ○ Impact on and perspective of staff ○ The “how” of change from a DoN 	Barbara Frank, MPA Sandy Godfrey Director of Nursing, St. Camillus Health Center
2:40-3:15	Integrating Individualized Care and Quality Improvement <ul style="list-style-type: none"> ○ Risk Prevention to Health Promotion ○ Harm caused by chair alarms – clip of family member who is retired DoN ○ Reducing falls by replacing alarms with individualized care, interview with DoN 	Barbara Frank, MPA Cathie Brady, MS Brenda Davison Director of Nursing, Jewish Rehabilitation Center of the North Shore
3:15-3:20	Quality Improvement Principles and Processes for Transformational change	Marguerite McLaughlin, BS, MA Cathie Brady, MS
3:20- 3:30	Your Systems Create Your Outcomes, Closing	Barbara Frank, MPA Marguerite McLaughlin, BS, MA

Faculty Biographical Information

Cathie Brady, MS, has over 25 years experience providing services and advocating for the elderly in a variety of settings. Her work has included organizational development, strategic management, adult education and training, and systems change work. Prior to co-founding B & F Consulting, she worked with the Paraprofessional Healthcare Institute; she held the position of Executive Director of the Department of Aging Services for the city of Bristol, CT; and before that she was, for ten years, the Regional Long-Term Care Ombudsman for Eastern Connecticut. As the Regional Ombudsman, she piloted a new approach to the Ombudsman program that helped the state support the implementation of OBRA '87 and she played a key leadership role in the work of Breaking the Bonds, a collaboration among providers, consumers, practitioners, regulators and state agencies to reduce restraint use and support individualized care practices. Cathie has a master's degree in Organizational Management from Eastern Connecticut State University. At B& F Consulting, she assists nursing homes interested in being better places to live and work. Her work integrates workforce retention, individualized care and quality improvement. She helps management, supervisors and staff build systems and skills to support ways of working better together. She works with intermediaries such as state workforce development organizations, QIOs, provider trade associations and practitioner organizations. She is currently working with Quality Partners of Rhode Island, the national support center for the nursing home work of Quality Improvement Organizations as they engage in a nationwide initiative to improve the nursing home care-giving and workplace culture. She also provides readiness training to regulators and advocates interested in supporting the transformation from institutional to individualized care.

Brenda Davison, RN is Director of Nursing at the Jewish Rehabilitation Center of the North Shore in Swampscott, MA. She has over twenty years of long term care experience. She has worked at various levels, including front line nurse and nursing team leader. As a Director of Nursing in another building, she brought the nursing home through the transition to OBRA compliance in 1990 – 1991. Brenda's background of working at various levels gives her insight into what her staff needs to be comfortable in taking on a challenge of being resident-centered and giving individualized care. She is able to operationalize changes effectively because she has the ability to understand both what residents need and her staff need. She works through the process of change in a way that focuses on staff understanding why they need to take on a change and how to take it on; and she takes it on by hearing from staff what they need, what their concerns and ideas are, and having that guide the process. In 2005, Brenda began to re-examine the usefulness of alarms in a long-term care setting and found that alarms in her building, instead of preventing falls, were actually contributing to an increase in falls. She began the process of alarm elimination. She did this in a systematic way that gave her staff, her residents, and family members the comfort level needed to challenge the long-held practice of using alarms as a falls prevention measure. To date, she has eliminated alarms in three out of four units and found significant reductions in falls as a result. In place of alarms, staff individualizes their care and attention to residents. Staff now realize that had been responding to alarms and not to residents and their needs. She is now speaking national and has been an instructor for the QIOs about her experience.

Barbara Frank, MPA, has thirty years experience in national, state, and local long-term care and workforce development work. For 16 years she directed policy and program work for National Citizens' Coalition for Nursing Home Reform in Washington, DC. In that role, she helped support the development nationwide of the Long-Term Care Ombudsman Program. She directed a Robert Wood Funded Project, The Consumer Perspective on Quality Care: The Residents' Point of View which shared with the Institute of Medicine Committee valuable information about residents' experiences and perspectives as they developed the report used as the basis for OBRA '87. She facilitated the Campaign for Quality through which providers, consumers, practitioners, and regulators developed consensus on a platform to translate the Institute of Medicine report into national law. She was then NCCNHR's representative to the federal government stakeholder deliberations on the development of the regulations. Barbara was part of a team that designed and delivered training to surveyors on the implementation of OBRA'87 and she taught about OBRA'87 in training programs in dozens of states. She then served for 4 years as Connecticut's State Long Term Care Ombudsman from 1993 – 1997 and convened a collaborative process among providers, consumers, regulators, and practitioners to provide educational support to providers in reducing restraint use and implementing individualized care. From 1999-2004, she directed policy and program work in Massachusetts for Paraprofessional Healthcare Institute, where she developed and staffed the Direct Care Workers Initiative, a coalition of consumer, provider, and labor organizations working together to improve support for direct care workers. In 2004, she and Cathie Brady formed B&F Consulting, through which they have worked with Quality Partners of Rhode Island to support Quality Improvement Organizations in integrating individualized care, clinical quality improvement, and workforce retention. Barbara works directly with individual nursing homes supporting their change process. She uses this on-the-ground experience as a springboard for development of educational material for providers, surveyors, consumers, QIO staff, and other practitioners on how to improve their care outcomes by individualizing care to residents and support to staff. Barbara co-authored "Nursing Homes: Getting Good Care There" and "Health Care Workforce Issues in Massachusetts." She has an MPA from the Kennedy School of Government.

Sandy Godfrey, RN, is Director of Nursing at St. Camillus Health Center in Whitinsville, MA, where she has worked in various positions over for the last eighteen years, including seven years as Director of Nursing. She began her nursing career in 1967. She was a clinical instructor in nursing at St. Joseph's Hospital School of Nursing in Providence, RI and has worked in lots of different health care settings over the years, including both acute and long-term care. When the Roman Catholic Order of St. Camillus decided to close the facility, she and the administrator, Bill Graves, organized local community businessmen to share with them in a plan to keep St. Camillus open and operating as a non-profit organization. They both currently serve on the Board of Directors. In 2004, soon after the successful transition, Sandy and Bill decided to embark on changing the culture from institutional to individualized care. One of the first places they started was with the morning routine. To succeed in individualizing residents' mornings, they put in place, at the staff's request, consistent assignments so that staff would know residents well enough to follow the residents' natural rhythms. Sandy describes initial hesitations about making the change because their resident outcomes and survey results had always been good. She worried about weight loss and other care issues emerging if she shifted from the tried and true of what the staff were doing. Key to her success was an open leadership approach that allowed staff, residents and families to

identify any concerns and be a part of trying out solutions. Now residents awake of their own accord, eat breakfast according to their life-long patterns, and are much happier. She is a national speaker on her efforts and is forging forward with individualizing other aspects of care and life at St. Camillus.

Marguerite M. McLaughlin, MA is Manager of Educational Development at Quality Partners of Rhode Island. Ms. McLaughlin has 21 years of experience in long-term care specializing in individualized care/culture change, and dementia care. She is responsible for the oversight of the national Pilot Project “Improving Nursing Home Culture”, an initiative to bring Individualized Care to the nation’s nursing homes. As Lead Coordinator for that effort, she teaches and trains nationally and develops materials that integrate a holistic approach with clinical care. She earned a Masters degree in Holistic Counseling and applies this knowledge to individualized care and organizational culture.

In addition to her responsibilities at Quality Partners, Ms. McLaughlin serves as Instructor at the Community College of Rhode Island, in Warwick, Rhode Island, where she teaches aspiring health care professionals. While serving as Program Director for the Alzheimer’s Association, Rhode Island Chapter, Marguerite had the opportunity to train staff throughout the state, develop special care units using a person directed approach and counsel families through the hardship and difficulties experienced while caring for loved ones. She additionally worked with surveyors in developing an environmental assessment of special care units. She began her long-term care career as a Recreational Therapist at the Saint Elizabeth Home in Providence, Rhode Island, and served as Regional Director for the Village Retirement Community. She received her Bachelor’s of Science degree in Recreation from Springfield College, in Springfield, MA, and holds a Master of Arts degree in Holistic Counseling from Salve Regina University, in Newport, RI.

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TECHNICAL FACT SHEET

DATE: November 3, 2006

TEST TIME: 12:30 – 1:00 p.m. EST
11:30 – 12:00 p.m. CST
10:30 – 11:00 a.m. MST
9:30 – 10:00 a.m. PST

PROGRAM TIME: 1:00 – 3:30 p.m. EST
12:00 – 2:30 p.m. CST
11:00 – 1:30 p.m. MST
10:00 - 12:30 p.m. PST

WEBCAST

TROUBLESHOOTING 703-812-8816
NUMBER:

SATELLITE TROUBLE

NUMBER: 410-786-3618

CMS Digital Network: Channel 712

Individuals and Sites outside of the CMS satellite network who wish to set up a site for this program or view this broadcast via webcast should go to <http://cms.internetstreaming.com> to register. Handouts can also be found at that website.

Satellite Coordinates

Analog C-Band: IA5 (Formerly Telstar 5: T5 or T1) 97° West				
Transponder	Polarization	Channel	Downlink Freq.	Audio
9	vertical	9	3880 Mhz MHz	6.2/6.8

Guidance for Locating Downlink Sites

In general, there are 2 major formats for satellite transmission - digital and analog. CMS uses both analog and digital formats, CMS's Digital network is a closed network which can only be viewed by its ten regional offices and several State survey agencies in regions VIII, IX, and X. The Digital format that CMS uses is called Digicipher. CMS is also capable of transmitting and receiving programs in KU-band and C-band analog. Ku-band and C-band have been in use for many years, can be received by thousands of 'steerable' analog dishes nationwide. C-band is the oldest transmission signal and the most widely used. NOTE: This is NOT 'video conferencing,' which is carried by telephone lines.

Locating an Analog Downlink Site

Potential Analog Downlink Sites: There are thousands of steerable analog downlink dishes nationwide at public schools, colleges, libraries, hotels, television stations, restaurants, private residences, etc. A few calls should locate one near you.

Here are some places to start calling:

- Your Local Cable and Satellite Television Provider: Contact your local cable/satellite television distributor, which is probably listed under "Television -- Cable & Satellite." Ask to speak with the programming staff and inquire about their willingness to simulcast the broadcast on your area's public access channel. Advise them that this broadcast is free of charge. Satellite television distributors may be able to provide you with a list of public institutions such as libraries, community centers, health care centers, and public schools that subscribe to their services. You may also wish to contact your local public TV station and ask that they download and air the program on their station.
- Public Libraries: Larger public libraries are a good place to check for satellite downlink facilities. Check library listings in the local government section of the blue pages of your local telephone directory.
- Educational Institutions: Universities, community colleges, and large public high schools often have satellite downlink capabilities.
- Hotels and Business Centers: Large hotels that frequently host conventions in business districts, may be able to receive satellite broadcasts. These hotels may charge a fee for viewing.
- Health Care Facilities: Many hospitals and health maintenance organization (HMO) offices have satellite reception capabilities.
- Copy Centers: Commercial office supply centers may also have satellite capabilities.

What Information Do I Need to Give the Site Contact Person?

When you contact an analog site, you will need to give the contact person the satellite coordinate information. The coordinates for the broadcast should be made available from the Central Office contact approximately 30 days prior to the broadcast.

Here is the information you will need to provide:

- Transmission Type:

- Satellite:
- Orbital Location:
- Transponder:
- Polarity:
- Downlink Frequency:
- Satellite Help Hotline:
- Broadcast Schedule:
- Test Signal:
- Broadcast Title:

Reserving a Downlink Site

You will need to know what to ask the person who answers the phone, who may or may not be the best person at that organization to help.

If the facility has an analog satellite:

You are interested in viewing a satellite C-band and/or KU band analog broadcast and you understand that this facility may have that capability. You should have the satellite coordinates for reference. Some satellite dishes can't be pointed to all satellites.

You should also ask:

- If the facility can receive the broadcast, is the viewing room open to the public and not reserved for another use at the time of the broadcast?
- If the viewing room is available, how many people will it hold, and is there any fee for its use?
- Will the facility let you phone or fax your questions in to a toll free number?
- You should point out that this broadcast is open to the public and employees of the hosting facility with an interest in the topic are welcome.
- As a courtesy, you should offer the hosting facility a list of the people who will attend.
- Are there any special arrangements necessary for entry to the site?
- It is your responsibility to arrange for sign language interpretation if you anticipate that individuals with hearing impairments will attend.

If you find a site, you should be prepared to perform as site coordinator.

Typically, site coordinators will:

- Locate a suitable location.
- Promote the event locally.
- Direct individuals to register if necessary
- Download material (e.g., sign-in sheet, evaluation, participant guide) if available
- Ensure that participants sign in on the day of the event.
- Distribute copies of the participant guide and handouts to participants the day of the broadcast.
- Assist participants with the use of the distance learning equipment.
- Receive instructions from the broadcast director regarding any activities they may be asked to facilitate.
- Encourage active participation in event activities.
- Record the broadcast for office use.
- Encourage participants to complete the evaluation form available at <http://cms.internetstreaming.com>