

## Working Group A Quality of Care and Protective Services Recommendation List

Working Group A - Quality of Care and Protective Services
A. Administration of Antipsychotics
E. Safeguards to Prevent from Abuse, Neglect, and Exploitation
S. Adult Care Home Surveys and Fines

### Cross-cutting Recommendation

- The State of Kansas will create a statewide conference or reinstate the Governor's Conference on Aging to create networking opportunities and foster relationships among professionals to create opportunities to share what's working, evidence-based practices, and national themes.

### A. Administration of Antipsychotics

- A1 Require geriatric psychiatric prescribers be reimbursed to complete medication checks, or provide consultation services, for seniors receiving home health services, and utilizing telemedicine when applicable and available.
- A2 Improve upon existing standard training and education by requiring continuing education for surveyors, direct care workers, providers, prescribers, long-term care providers and caregivers and family members on the risks, inappropriate and appropriate use of prescribed psychotropic medications for older adults with dementia or geriatric behavioral health conditions, as well as effective intervention and use of non-pharmacological approaches.
- a. Facilities that implement training will be referred to dementia certificate programs and resources for long-term care providers and prescribers.
  - b. Offer in home training to caregivers in dementia care.
  - c. Ensure effective education outreach services to Kansas veteran populations and their caregivers.
- A3 Provide a list of Kansas physicians, mental health professionals, and telehealth providers into an informational packet to be distributed across the state and online, with additional instruction for accessing services for care homes, caregivers and in home residents. List shall be updated every 2-3 years.

## **E. Safeguards to Prevent from Abuse, Neglect, and Exploitation**

- E1 Establish a clearinghouse, including direct care worker registries, and a Coordinator position between DCF, KDADS, KBI to increase accessibility and enhance safeguards and oversight of guardians, conservators, and caregivers that the facilities and individuals can refer to as a resource when questions about appropriate hire may be in question.
- S1** Utilize the alert system at KDADS for when infractions occur during survey to conduct follow-up on cases.
- E2 The State of Kansas shall increase funding to the Kansas Bureau of Investigation (KBI) to perform background checks that go beyond criminal convictions and adjudications (e.g., civil hearings, licensure board hearings ~~The Board of Nursing~~) for employers in a timely manner, while prohibiting direct resident care until background check results are available.
- E3 The State of Kansas will develop abuse, neglect, and exploitation (ANE) training for person-centered practices:
- a. Provide abuse, neglect, and exploitation (ANE) education for the public, law enforcement, and mandatory reporters. Education will also cover person-centered practices to prevent and identify abuse, neglect and exploitation and ensure human rights.
  - b. Support provider training and framework for person-centered planning, especially for those with dementia, in which an individual's own wishes, strengths and relationships are respected; technology; and community support we can all access are considered before we apply paid eligibility-based services.
  - c. Communicate the dementia certificate programs and resources to long-term care providers and prescribers.
- E4 Require facilities to administer [X hours] of continuing education on ANE for nursing facility staff. (send to WGB?)
- E5 Conduct a statewide needs assessment of older adults in the state of Kansas using data from multiple systems from Department for Children and Families (DCF), Kansas Department for Aging and Disabilities services (KDADS), Hospitals, and the Ombudsman's Office.
- E6 Initiate a 60+ targeted prevention campaign about financial crime.

## E. Safeguards to Prevent from Abuse, Neglect, and Exploitation (continued)

- E7 The Kansas Legislature, in collaboration with KDADS and DCF, shall increase funding for Community Mental Health Centers (CMHCs) for expansion across the state in urban, rural, and frontier areas for in home (non-facility) services.
- a. CMHCs shall ensure an adequate number of reimbursed community mental health workers and therapists skilled in senior behavioral health care are available to meet the needs of the population to offer community psychiatric supportive treatment; CPST and other wraparound services and assist with accessing community support services (CSS) in all settings, such as adult care homes and community settings.
  - b. CMHCs shall integrate with Long-term care (LTC) partners to increase access to services in urban, rural, and frontier areas.
  - c. CMHCs shall establish a senior care navigator position at each CMHC across the state who will assist or refer to mental health services, education and resources for family and caregivers to provide services, such as for veteran services.
  - d. CMHCs shall provide direct consultation services for Kansans aged 65 and older, using telemedicine when applicable and available.
- E8 Explore and implement Medicare/Medicaid billing codes for in-home case-management for seniors.
- E9 Create an after-care policy that allows seniors to remain in the same environment and bring services to them instead of moving from one facility or room to another
- E10 Pass legislation based on HB 2004, "Charlie's Bill," providing the right of residents and their representatives to appeal involuntary transfers and discharges or evictions from assisted living facilities. (TF)
- E11 Pass legislation based on HB 2122, enacting the supported decision-making agreements act to provide a statutory framework for adults who want decision-making assistance. (TF)

## **S. Adult Care Home Surveys and Fines**

- S2 Designate a percentage of Civil Monetary Penalties (CMPs) to be used for approved facility improvements.
- S3 Amend K.S.A. 39-1431 to add certified nurse aides (CNAs), certified medication aides (CMAs) and home health aides as mandated reporters and add a mandated reporting training component to CNA courses.
- S4 Fund and enhance pay and benefits for a multidisciplinary team of surveyors.
- S5 Create and fund a technical assistance department or technical assistance position that long term care facilities can access to help with regulatory compliance, developing quality improvement, implementing person-centered care practices, and writing sustainable plans of correction.
- S6 KDADS will use directed plans of correction and education as remedy for infractions to allow system level implementation that is meaningful and sustainable.
- S7 Develop a publicly accessible state website with adult care home survey results, providing information including, but not limited to survey frequency, levels of harm, role of staffing and staff competence, quality measures, and MCO health plans accepted at federally licensed facilities. The website shall be updated [frequency?].
  - a. KDADS shall re-implement the Exemplary Care Program to identify exemplary care systems in specific areas of quality of life and care and acknowledge excellence of facilities' care and management, develop incentives or recognition for well performing facilities, and issue a publication recognizing high-performing facilities.
  - b. KDADS will review nursing facility's financial health during survey by collecting an overview of cost reports that are reported to CMS as part of the survey process. KDADS shall also include poor performing homes and homes experiencing financial hardship on the state website.

## **Task Force Recommendations – Working Group A**

- T1 Creating a separate Senior Care Act-like program to provide services to persons with younger-onset Alzheimer's disease with its own funding allocation that would go solely to that population and consider the specialized services needed that would be different for this population.
- T2 Adding regulations for assisted living centers and appeals protections for residents for involuntary or improper discharges.
- T3 The Legislature pass HB 2004, providing the right of residents and their representatives to appeal involuntary transfers and discharges or evictions from assisted living facilities.
- T4 Pass HB 2004, "Charlie's Bill," creating the right to appeal an involuntary discharge or transfer from an adult residential care facility.
- T5 Pass HB 2122, enacting the supported decision-making agreements act to provide a statutory framework for adults who want decision-making assistance.
- T6 Legislation to provide at least rudimentary regulatory oversight of temporary staffing agencies to address poor quality and unreliability of services by these agencies, exorbitant fees for long-term care providers and the State. Potential legislation should include establishing a state registry, creating a basic regulatory framework, and setting upper payment limit parameters.
- T7 Temporary staffing agency - establish a registry, create basic regulatory framework, and set upper limits on charges.
- T8 Examine and modify HCBS/FE rate-setting methodology (to promote further rebalancing, fairly reimburse providers, and offer more choices to KanCare members).
- T9 The State should establish mechanisms to ensure that LTSS agencies and mental health authorities address the mental health needs of individuals receiving LTSS.
- T10 Provide dementia training - Four hours of dementia training annually for direct care workers (e.g., nurse aide, medication aide), two hours of training for new employees within 90 days of employment.
- T11 Seek funding and develop partnerships for the development and distribution of a new Kansas Elder Count book that provides the demographic and detailed data as the original Elder Count book. This information would provide detailed and robust data to help legislature and state staff plan for current and future needs of older Kansans.
- T12 Research state-licensed facilities providing HCBS care in 2018 vs 2021.
- T13 Study HCBS rate setting in state-licensed facilities - Current rate \$4.49 per 15 minutes of care

- T14 The State should establish mechanisms to ensure that LTSS agencies and mental health authorities address the mental health needs of individuals receiving LTSS.
- T15 Require CMHCs to provide mental and health and aging training for clinical staff who provide services to older adults.
- T16 Funding for aging specialist at CHMCs.
- T17 Provide access for residents with a level two (mental health needs) be provided in the nursing home by a CMHC.

