

Working Group A Quality of Care and Protective Services Recommendation List

Changes made during meetings are noted in purple

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

1. 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.**
- A2 The State of Kansas shall increase funding for Community Mental Health Centers (CMHCs):
- a. To have an adequate number of reimbursed community mental health workers and therapists skilled in senior behavioral health care to offer case management **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. To integrate with Long-term care (LTC) partners to increase access to services in smaller communities.
 - c. To establish a **senior care navigator position** who will assist **or refer** with navigating mental health services for family and caregivers.
 - d. To provide consultation services.
- A3 Improve upon existing standard training and education **by requiring continuing education requirements for surveyors, direct care workers, providers, prescribers,** and family members on the interaction of prescribed psychotropic medications to treat dementia, depression management, geriatric behavioral health—including violence de-escalation, and appropriate/inappropriate use and non-pharmacological approaches.
- a. Facilities that implement training will be referred to dementia certificate programs and resources for long-term care providers and prescribers.
- A4 Provide an updated list of Kansas physicians, mental health professionals, and telehealth providers **into an informational packet to be distributed across the state,** with additional instruction for accessing services for care homes and residents. (Send to WGB?)

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

- E1 Enhance safeguards and oversight of guardians, conservators, and paid family caregivers by **establishing a Navigator/Coordinator position or database to access** between DCF, KDADS, KBI that the facilities can contact or the family when questions about appropriate hire may be in question.
- E9. Integrate direct care worker registries **to create a clearinghouse of data** for the consumers and courts, increase accessibility, and review and provide avenues for information sharing with the public.
- 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, board, etc.)** for employers in a timely manner, while prohibiting direct resident care until background check results are available. In addition, provide funding for background checks.
- E3 **Explore** and implement **Medicare/Medicaid** billing codes for in-home case-management for seniors.
- E11. 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

NEW TRAINING RECs (E4 – E5a)

Consider: *The State of Kansas will develop training for person-centered practices by...*

- E4. 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.
 - E5. Look at options to support **provider** training and framework for person-centered planning, especially for those with dementia, where an individuals' own wishes, strengths, relationships, are respected, then technology, and community support we can all access are considered before we apply paid eligibility-based services. (TF)
 - a. Communicate the dementia certificate programs and resources to long-term care providers and prescribers.
- E6 Pass 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)
- E7 Pass HB 2122, enacting the supported decision-making agreements act to provide a statutory framework for adults who want decision-making assistance. (TF)
- E8 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.
- E9 Initiate a 60+ targeted prevention campaign about financial crime that includes Power of Attorneys (POA), Durable Power of Attorneys (DPOA), and other relevant stakeholders in the financial sector.
- E10 **Require facilities to administer [X hours] of continuing education on ANE for nursing facility staff regardless of what's currently required.** (send to WGB?)

S. Adult Care Home Surveys and Fines

- S1 Utilize the alert system at KDADS for when infractions occur during survey to conduct follow-up on cases from the KDADS Legal Division.
- S2 Designate a percentage of Civil Monetary Penalties (CMPs) to be used for approved facility improvement to enhance and improve the quality of life among residents.
- S3 KDADS use directed plan of correction and education as remedy for infractions to allow systems level implementation that is meaningful and sustainable.
- S4 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 mandated reporting training component to CNA courses. (also suggested all facility staff)
- S6 Fund and enhance pay and benefits for a multidisciplinary team of surveyors,
- S7 Create and fund 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. (Previously A2).
- S8 Update adult care home surveys within the past 18 months, and make survey results easier to access for consumers, families, and caregivers and provide a consumer information on the state website with information on survey frequency, levels of harm, role of staffing and staff competence, quality measures, and MCO health plans accepted at federally licensed facilities.
- S10 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 publish publication recognizing high-performing facilities. KDADS shall also include poor performing homes and financial hardship on the Exemplary Care Program site.
 - S11 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.

Senior Care Task Force, Working Group A Recommendation Characterization Rubric

Recommendation:	
<p>Consider:</p> <p><input type="checkbox"/> Change, (Easiest)</p> <p><input type="checkbox"/> Pilot,</p> <p><input type="checkbox"/> Overhaul,</p> <p><input checked="" type="checkbox"/> New, (Most difficult)</p> <p>Will cost be a barrier to implementation? could be; consider in person/virtual options</p> <p>Does the recommendation include strategies for continuity? <i>(How does it consider sustainability?)</i> annually</p> <p>Which of the following mechanisms may affect the achievability of the recommendation?</p> <p><input type="checkbox"/> Legislative session</p> <p><input type="checkbox"/> Federal approval process</p> <p><input type="checkbox"/> Regulatory process</p> <p><input type="checkbox"/> Contracts</p> <p><input type="checkbox"/> Agency budget development</p> <p><input type="checkbox"/> Grant cycles</p> <p><input type="checkbox"/> Systems (e.g., IT)</p> <p><input type="checkbox"/> Technology/Infrastructure</p>	<p>Consider:</p> <p>Will it benefit seniors living in Kansas?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will it significantly impact subpopulations?</p> <p><input type="checkbox"/> Individuals with Alzheimer's</p> <p><input type="checkbox"/> Geography (urban, rural, frontier)</p> <p><input type="checkbox"/> Low-income individuals</p> <p><input type="checkbox"/> Uninsured or Underinsured individuals</p> <p><input type="checkbox"/> Individuals with [Acute] Behavioral Healthcare Needs</p> <p><input type="checkbox"/> Individuals with I/DD or PD</p> <p><input type="checkbox"/> Limited English Proficient (LEP) persons</p> <p><input type="checkbox"/> Others? <i>(List here)</i></p> <p>Does it serve those who have been disproportionately impacted by the issue? <i>(Does it address inequities?)</i></p> <p>Could the recommendation produce savings in other areas?</p>
Action Lead:	Key Collaborators: <i>[Who should be included as decisions are made about how to implement this recommendation?]</i>
Key Performance Indicators: <i>[How can the state assess progress when this recommendation is implemented?]</i>	