

Older Adult Services Advisory Committee Nursing Home Conversion Work Group

Date:June 6, 2005Attending:Pat Comstock, Matt Hartman, Margaret Hastings, Marsha Johnson, Myrtle Klauer, Sally
Petrone, Gail Poundstone, and Enrique Unanue

- I. Review of minutes from 4-18-2005 meeting
 - The group reviewed and agreed to the objectives that were listed as the results of the last subcommittee/task group meeting. The three main goals previously identified by the group were:
 - Working with DPH in identifying and amending barriers contained in present rule and writing new rules in regards to barriers for conversion.
 - Identify and apply for waivers to those barriers to conversion presented in federal guidelines.
 - Identify financial incentive to nursing home industry to take beds offline
- II. Group Discussion was again dominated by discussion of possibilities for conversion. A particular emphasis was placed on conversion to housing of MI patients, though this line of discussion was eventually viewed as one that could not be feasibly undertaken. Another deeply explored topic was that of CCU's and pass agents in regards to MI patients and primary diagnosis for physical events. (explained later in objectives) Other topics that were revisited follow:
 - Folding medical facilities into the NH setting. Including OB-GYN, Dialysis treatment centers, Dental facilities etc.
 - Senior Center within the facility.
 - Adult Day Care Services
- III. Additional objectives identified by group.
 - The FY06 budget swept/raided/borrowed funds that were going to be used towards the conversion project. The goal is how to retrieve/protect these funds.
 - Direct the Department on Aging to supply the group with information needed for conversion from the Comprehensive Services Inventory. Specific charges are as follows.
 - A list of those counties w/o Adult Day Services
 - Those areas that do have Adult Day

- Will the inventory include general medical care access and availability?
- Inclusion of transportation as part of the inventory.
 - Sub-charge I -- The issue of primary diagnosis as basis for admission into an LTC facility was widely discussed. E.g. when someone with schizophrenia is admitted into a facility for rehab for a broken hip, they are admitted as needing physical therapy and the prior MI diagnosis is not taken into consideration as part of their care plan. The group consensus was that there is a need for a standardized tool with full assessment to facilitate proper care/conditions for these residents. Group decision was that this was a topic for better consideration by the Point of Entry Subcommittee. Pat Comstock offered to make outreach to John Lavin in regards to this issue
 - Sub-charge II -- Due to the need to balance need for services against availability of services, much of the actual conversion is meshed with the results of the Inventory Survey. Group decision was that someone with planning knowledge should be on the subcommittee and conversion task group. Enrique Unanue offered to make outreach to members of the Illinois Health Facilities Planning Board to fulfill this need.
- IV. Items needing further consideration/work/carried over from previous meetings etc.
 - As provided in the Act a member of the Dept. of Public Aid must sit on the committee that produces the new rules for conversion. Terry Sullivan offered to make outreach to the Dept. to have someone appointed to meet this requirement. 4-18-2005
 - The possibility of expanding eligibility for conversion grants to those facilities that would become compliant through converting was posed. What is possibility? 4-18-2005