

**ASSISTED LIVING ADVISORY COUNCIL MEETING  
MINUTES**

**Date: October 21, 2014**

**Time: 10 AM**

Meeting locations

Videoconference to:

Division of Public and Behavioral Health  
Bureau of Health Care Quality &  
Compliance  
727 Fairview Drive, Suite E Carson City,  
Nevada 89701

Division of Public and Behavioral Health  
Bureau of Health Care Quality & Compliance  
4220 South Maryland Parkway, Building D, Suite  
810  
Las Vegas, Nevada 89119

**Las Vegas ALAC Members:**

Linn Thome, Merrill Gardens  
Lynn Homnick, Oak Hill Senior Living  
Heather Lankford, Willow Creek Memory Care  
Patricia Townsend  
Desiree Ducharme, Clark County Public Guardian Office  
Don Sampson, HCQC

**Carson City ALAC Members:**

Dan Allmett, Mason Valley Residence  
Mary Ellen Padgett, Riverview Manor  
Diana Roberts  
Darryl Fisher, Mission Senior Living  
Gina Stutchman, Arbors Memory Care  
Claudette Springmeyer, Douglas County Public Guardian  
Donna Kathy, Desert Springs

**Teleconference**

Shawn McGivney, Tender Loving Care Senior Residence  
Heather Korbolic, Long Term Care Ombudsman  
Cindy Ortiz Gustafson, Nevada Veterans Association  
Judy Bishop Parise, Park Place

Linn Thome announced there was a quorum present for today's meeting. She noted she resigned as co-chair at the previous meeting.

**Approval of minutes for the meeting of April 15, 2014.**

**THERE WAS A MOTION AND A SECOND TO THE MOTION TO APPROVE  
THE MEETING MINUTES. MOTION PASSED UNANIMOUSLY.**

## **Overview of the Clark County Public Guardian's Office and short question and answer regarding guardianship(s).**

Desiree Ducharme, Supervisor, gave an overview of her office. The Public Guardian's Office has the duty of caring for individuals who are legally determined to be incapable of taking care of themselves when:

There is no family.

Family members are ill, elderly or other circumstances prevent their effective performance as a guardian

Friends of family have exploited or neglected the person and would not be suitable to serve.

Family members live in other states and cannot meet the statutory requirements.

### **Guardian Referrals**

Referrals to the office are required and evaluated for appropriateness prior to acceptance into the programs. Referrals generally are received from such sources in the community as family members or neighbors, self-referrals, hospitals, banks, and local law enforcement or senior service agencies. The office receives hundreds of [referrals](#) each year. Their office has three in-take case officers. Every referral is reviewed and assessed. Basic cases such as a person who is in a nursing home, there is seven days to respond to the party. For those that are at risk, they will go investigate more quickly. The majority of Public Guardian wards have no financial resources other than Medicaid and County assistance. About 25 percent of the guardianship cases the office receives involve wards who come to the attention of authorities because of financial exploitation and/or physical abuse.

### **Caseload**

The Public Guardian Office's caseload fluctuates and has increased steadily with the area's population growth. Staff oversee the affairs of more than 500 guardianship wards and has more than a hundred clients enrolled in its voluntary 60 + Representative Payeeship Program. The office's services may include annual financial and medical status reports to the court, money management, personal services management and 24-hour emergency response services.

There are four types of cases:

Person

Person and Estate

Estate only

Guardianship of a person

Ms. Ducharme explained that they do not take over a person. In order to take care of an individual, they also need an estate. There must be a payment source in place as her office has no funding for to take care of a person. Whether the funding source is Medicaid or county, her office needs a pay source in place.

Shawn McGivney asked what are the most difficult case(s) to place. Ms. Ducharme responded that it just depends on the level of care a person needs. She explained that they work with family when appropriate but the most difficult cases are those where the individual is exploited. There are many times they do not find everything or the money is gone and then they do not have the resources to place the person.

Mary Ellen Padgett asked how does transferring a case from South to North work. Ms. Ducharme said that her caseworker would work with the case worker in the North. Court permission must be obtained to move someone out of the jurisdiction.

Gina Stutchman commented there is 60 to 80 percent cases that are sent out of state that are not seniors. She commented that there is no facility that is willing to take care of this particular type of population for \$1000 a month.

**Extension of terms for Assisted Living Advisory Council membership.** *Julie D. Bell, HCQC*

Julie D. Bell explained that there are three members whose terms have expired and this will be brought up as an action item at the next meeting to extend their terms.

**Overview of the Douglas Public Guardian's Office and short question and answer regarding guardianship(s).**

Claudette Springmeyer said her office is similar to the Clark County Public Guardian Office. She said that they conduct background check, criminal and financial checks, affidavit of experience, written test, based on all standards of national guardianship association. Have meetings every other month with the national guardianship association.

Continuing her presentation, Ms. Springmeyer said that referrals are received from everywhere. She said that the person has to be deemed incompetent. She said is appointed by the Douglas County Commissioners and she has a part time person that works in her office. She said she averages 35 clients that she is taking care of. She has clients in Carson City, Douglas, Reno, one in Idaho and Utah. Of those clients, she has two that are not senior citizens; one has a traumatic head injury. She has been told that there was no place in Nevada to take those on Medicaid with severe behavioral problems. She also serves as Douglas County administrator. Claudette Springmeyer said that she was in four different skilled nursing facilities before landed in Idaho. The demographics, most have dementia, Alzheimer's, and brain injuries.

Ms. Springmeyer said that they work with the SAFE Program – Special Advocates for the Elderly. She explained that Washoe County started it, John Giome started it in Douglas County. The Douglas county commissioners continued this program. SAFE meets a similar need but instead of children, these trained court-appointed volunteers serve the vulnerable elderly. They investigate the need for guardianship and then provide the important follow-up to check compliance once a guardianship has been established. The reports are sealed and they are volunteers because they report independently to the courts. In some cases, it is another person checking in on her clients. She noted that they do not always disagree but it is another set of eyes and ears for the clients. It is all about the volunteers and making sure their needs are being taken care of.

Dr. McGivney said that Ms. Springmeyer mentioned that her residents went to four different places before they ended up in Idaho. Dr. McGivney noted that none of the residents went to a residential care home with the State of Nevada Adult Mental Health (SNAMH) care as a choice before being shipped out of state. He was of the opinion that residential care home plus SNAMH was a cost effective choice that was

not considered before the move to out of state skilled nursing facility care. Claudette Springmeyer responded that it was one person that tried four different skilled nursing facilities.

Chuck Damon said that many times the facilities will reject the recipient, because the paramount issue is the safety of the other clients; also they are told no beds available because they are in a skilled facility level of care. Referrals have been made and rejected and when these people are attempted to be placed that have several different behaviors, the facility will reject. The paramount issue is the safety of the individual and others in the facility.

**Review of Draft Tuberculosis Form required for State of Nevada and Discussion of TB test for facilities, Diana Roberts and Dan Allmett - Hand out provided.**

The group reviewed the draft tuberculosis form that was developed and agreed to make a couple of adjustments which Diana Roberts said she would make.

**Nevada Health Care Association (NVHCA) national trends and data.**

Daniel Mathis provided two handouts.

1. The first handout gave an update regarding Wendy Simons leaving the Nevada Health Care Association to accept a new position for new Veterans Administration skilled nursing facility. The other is a list of 2015 board members for Nevada Assisted Living Centers which includes:
2. Current members: NVALC Board Members 2015 – 2016 every other month

Barbara Gottlieb – Chair  
Diane Stewart – Vice Chair  
Treasurer – Shawn McGivney  
Phillip Glessner – Secretary  
Thomas Fitzgerald – At Large  
June Kern – At Large  
Linda Thome – At Large  
Emily Sherwood – At Large  
Jeanne Bishop-Parise – Past Chair  
Darryl Fisher – Executive Committee

3. The Nevada Assisted Living Centers Logo – the membership has different members, interest from LPN, MDS education, meeting with PT and OT associations to join us in our annual conference and discuss the affordable care act and implementations.

**Assisted Living Industry updates which include current trends, census/occupancy mix, top three business issues and successes deserving recognition.**

Daniel Mathis said the Impact Act of 14 (H.R. 4994) takes into account patient assessment data for skilled nursing, acute care, independent rehab, and home health have assessments. The act is designed to consolidate those patient assessment data for quality, payment, and discharge planning and for other purposes so the patient can be placed to the appropriate level of care by the case managers. The state is applying for a SIM grant and intends to comply with the consolidation.

In response to Shawn McGivney who asked about the policy HCQC was working on with the State Fire Marshall, Julie Bell said that there will be a Technical Bulletin distributed soon. She stated that the State Fire Marshal was very supportive of the language change regarding category 1 and 2.

**Public Comment** (No action may be taken on a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action will be taken.)

Lynn Homnick said that she has been having some difficulties using the DPS background check site. After some members discussed the difficulties they were experiencing with the background check site, Julie Bell said that they would request Leticia Metherell to attend the next meeting to answer any questions they might have and let them know about training that is available.

A member noted that administrators now have to have background check for every facility that they are overseeing and asked when is the deadline to have that completed. Julie Bell said she would have to check the technical bulletin. She said that the attorney general said that because the background check for BELTCA is not the same, they also need to do a background check through HCQC.

Several members expressed difficulties signing up for the HCQC listserv, Nenita Wasserman will check that they are all signed up.

### **Adjournment.**

The meeting adjourned at approximately 11:45 a.m.

Respectfully submitted,

Nenita Wasserman

Approved by full advisory council at the January 20, 2015 meeting.