

Risk

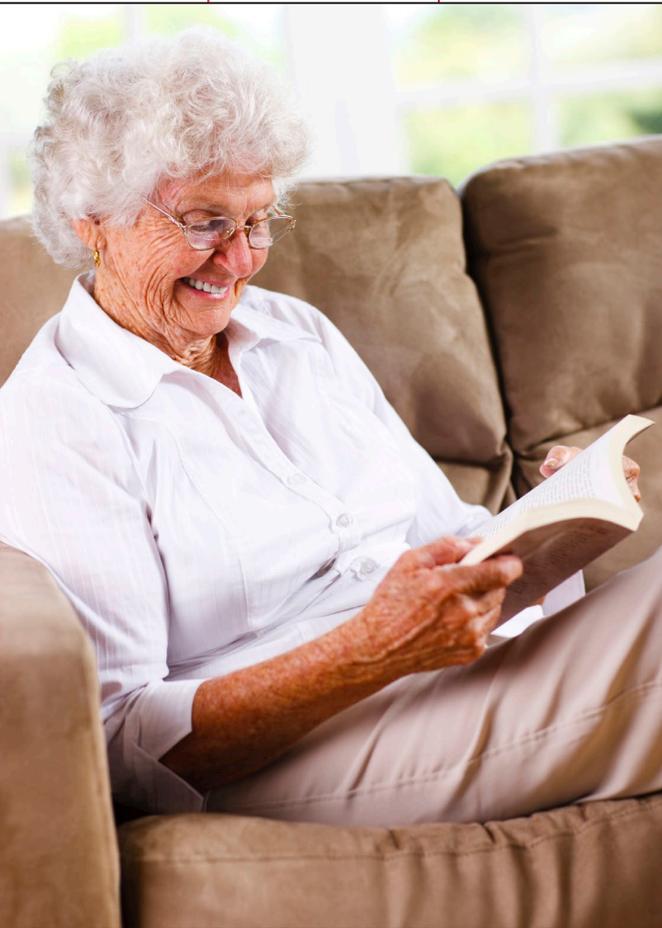
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Ongoing room inspections vital to resident safety

When it comes to resident rooms, it can be challenging to strike the right balance between resident independence and safety. We live in a culture that strongly believes “our home is our castle” but is also increasingly litigious. The balance is further complicated by the varying levels of physical and mental acuity among assisted living residents and the fact that regulations vary from state to state. Regular room inspections can help you provide a safe space for residents while still respecting their right to privacy.

Occupancy agreements

According to the National Center for Assisted Living, this agreement should clearly specify “. . . what services can and will be provided, the facility’s rates for all services and payment structure and the facility’s occupancy and relocation criteria.” Work with legal counsel to develop your occupancy agreement and ensure that you meet all applicable regulations.

In the area of occupancy criteria, agreements tend to be quite broad. “Ours speaks to the fact that residents agree not to do anything that infringes on others’ quiet enjoyment of the facility or poses a health or safety risk to themselves or others,” said Michaun Shetler, RN, manager, senior living, for the Good Samaritan Society, which is headquartered in Sioux Falls, S.D., and operates 141 senior living facilities in 24 states.

This agreement is different from your facility handbook, which provides detailed information about what the resident is agreeing to by choosing to live in your facility. Again, it’s important to see legal counsel to ensure that your agreement and handbook meet all regulations.

Although most states don’t require the occupancy agreement to include all the details of your facility’s resident handbook, the agreement should reference the handbook. “By signing an agreement that includes this language, the resident and/or their family is saying that the elements of the operating agreement and handbook govern,” Shetler said. “We provide the agreement to the resident before move-in, so they can review it thoroughly and take it to an attorney if they like.”

The facility handbook is where you should include information about room inspections, such as frequency, under what conditions they’ll occur, advance notice provided before entering a resident’s room and similar details.

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(Room inspections)

Education is critical

"Help residents and their families understand that your policies all come down to the safety and best interests of the residents," said Linda Mather, RN, CALN, corporate director of resident care for Integral Senior Living, headquartered in Carlsbad, Calif., with 52 senior living facilities in 10 states. "You are the experts, and it's up to you to keep their loved ones safe."

Before move-in, share lists of the items that are recommended and the items that are prohibited in your facility. Policies in this area are typically a mix of state and local regulations, industry best practices and knowledge that your staff has gleaned from personal experience. Although some things might seem like common sense — such as not having throw rugs, arranging furniture in a way that provides safe room access, no candles and not overloading outlets — it's critical to have these requirements in writing.

Check-in/check-out inspections

In most cases, the inspection will be of the room itself, though some states require that you check any electrical appliance that residents bring with them. "We go through the room with the resident and take pictures of any problems — for instance, a dent in the dishwasher or similar," Shetler said. "That eliminates any questions related to responsibility and repairs down the road."

Ongoing inspections

Have each room inspected at least annually by your staff and maintain a written record of the inspections. This documented inspection helps prove that you provided regular, ongoing maintenance and allows you to check that the residents aren't violating their occupancy agreement.

Use a checklist to ensure a thorough inspection. Some good items to include are:

- Electrical appliances — check for proper function and that cords are in good condition
- Signs of insect/rodent infestation
- Monitor for overloaded outlets, extension cords and adapters
- Personal electrical appliances
- Grab bars and fixtures
- Lighting
- Plumbing
- Flooring — make sure there are no issues with cracks, trip hazards or throw rugs

In addition to scheduled inspections, rely on your staff for day-to-day oversight. Housekeeping is your first line of defense for things like prohibited items or substances, hoarding issues, overflowing laundry, rotting food or blocked heaters.

"What's happening in a resident's room can be a clue to changing needs," Mather said. "Train your staff to be observant. If they see a safety issue or something doesn't feel right, they should report it to you, and you should go to the resident or their family to discuss it."

In many cases, the fix is something relatively minor, such as offering the resident additional services.

Service plans protect resident and facility

Many residents are understandably reluctant to give up their independence. A carefully written service plan can allow them some measure of autonomy while still protecting your facility.

Mather shared an example of a resident who wanted to use a bed that was hard to get into. "We reached an agreement that the resident would use a stool to get into the bed and use the call pendant to get help with the stool. This was put into the written service plan and signed by the resident and the family."

Respect the resident's privacy

If facility staff needs to enter a resident's room, provide advance notice whenever possible — except, of course, in the event of an emergency. Regulations might spell out how much notice is required. As a rule of thumb, don't enter the unit unless the resident is present or has given express permission for staff to be in the room without them.

Handbook changes

Whenever there's a change to the handbook, provide written documentation to current residents and have them acknowledge this change by obtaining a signature from them. "If you have a big change, it's best to have a resident meeting to review it and make sure residents understand," Shetler said. "We often involve the residents in the actual change process."

Take action when necessary

If a resident isn't in compliance with their occupancy agreement, it's critical to take steps to change that.

In most cases, the resident, or at least the family, has a vested interest in staying at your facility. Moving is disruptive, time-consuming and expensive — especially if it means going to a higher level of care. "There are many steps that you can take — involving the physician, working with physical therapy, talking to the family — to allow the resident to stay in your facility," Mather said. "But sometimes, it just doesn't work. Either there are reasons why your facility isn't a good fit anymore, or it's the resident's last bit of independence, and they just don't want to relinquish it."

If the resident simply refuses to comply with their occupancy agreement, give them a 30-day notice that they will need to vacate the unit.



Managing Your Risks

Inspect your parking lots and sidewalks

Springtime offers an excellent opportunity to conduct a visual inspection of areas around the outside of your facility to see how they endured the winter months.

Parking lots and sidewalks at senior living facilities are vulnerable to Mother Nature in several ways. For example, the integrity of the original, smooth surface of a parking lot or a sidewalk may have been susceptible to water infiltration and the expansion and contraction of surfaces and subsurfaces during freeze-thaw cycles. Also, growing roots from adjacent trees may have caused parking or walking surfaces to be forced out of place.

Potholes, broken sections of asphalt or concrete and heaved or shifted walking surfaces create potential slip-trip-fall hazards for employees, guests and residents. Church Mutual's claims records for senior living facilities indicate that almost 70 percent of injuries to guests or visitors occur from a slip or fall. This accident statistic points out the need to correct hazardous conditions as soon as they are identified. Doing so will go a long way in reducing the potential for slip-trip-fall-related injuries.

Checking for and eliminating slip-trip-fall hazards should be a component of your overall safety program. Set aside time at least once each month to conduct a thorough self-inspection of all interior and exterior areas, and then initiate corrective actions on substandard conditions you find.

To assist you with conducting inspections, Church Mutual offers the *Self-Inspection Safety Checklist for Senior Living Communities*. You can order, download or print a copy of the checklist at www.churchmutual.com by clicking "Safety Resources," then "Senior Living Communities."

Edward A. Steele
Risk Control Manager



Seasonal Spotlight

Check HVAC systems now to combat long, hot summer

According to the National Climate Data Center, the summer of 2012 was the third hottest on record. While there's no way to know if 2013 will be a repeat, your facility can't afford to take chances with its air conditioning and ventilation systems. Plan now to ensure that your systems are ready to handle the demands of a long, hot summer.

Find a good contractor. "You want a contractor who understands the nature of your business, communicates well and will be there when you have a problem," said Dave Kyle, general manager at Trademasters Service Corp. in Lorton, Va., and a member of the Air Conditioning Contractors of America (ACCA). "Cost is important, but it shouldn't be the top driver."

Kyle recommended looking for a contractor who's willing to train your staff. "The best contractors will treat you like a partner. They'll show you how to do the simple things — like change a fuse — and will help you find the line between when it makes sense to handle something in-house and when it's better to call an expert."

Accreditations to look for in your contractor are ACCA and NATE, the North American Technician Excellence certification.

Schedule maintenance outside peak months. This can potentially cut maintenance/repair costs — think supply and demand — and help ensure you're ready if summer arrives early. Kyle advised having systems checked roughly one month before your air conditioning turn-on date.

Follow your manufacturer's maintenance schedule. Given the huge range of equipment types and building demands, it's best to follow the manufacturer's recommendations.

Use filters that hit the right balance between air quality and energy efficiency. "High-quality air filters are critical given the potential vulnerability of your population, but don't compromise your system's performance," Kyle said. "Ask your contractor to recommend a filter that addresses both issues."

Check all HVAC-related appliances. Don't limit the inspection to the air conditioner. "Your contractor should make sure that all gas appliances — furnace and boilers — are running properly," Kyle said. "Carbon monoxide problems are more prevalent than most people think. And also ask them to check your water heater — even if it's electric, it's a good idea to check for temperature set points."

Ask for a guaranteed response agreement. These are typically used for facilities that provide service to hospitals and health care systems. Whether it's appropriate for your facility will depend on your population.

Q | A

A Perspective

In recent years, many assisted living facilities have turned to the universal worker model to address problems with high staff turnover. The general thinking: having employees cross-trained in a variety of areas will help address staffing challenges. Although this might sound logical in theory, practice doesn't always bear it out. Risk Reporter recently spoke with Jere Schroeder, assistant to the executive director at Heatherwood Assisted Living Apartments in Eau Claire, Wis., and Tom Eberlein, director — senior living distribution with Church Mutual, about this topic.



Risk Reporter: What have you found to be the biggest problems with universal workers?

Tom Eberlein: Higher workers' compensation claims. Familiarity and consistency are what most employees want in a job. If they like what they do and become proficient at it, you have happier, more experienced employees. This leads to lower job turnover and fewer on-the-job injuries and accidents.

Jere Schroeder: It's like the old adage — "jack of all trades, master of none." With universal workers, staff might be competent but not exceptional. You also have issues with thoroughness. When employees manage a variety of tasks, they might be interrupted midtask or never feel they have enough time to do a job well. This could lead to something relatively minor — for instance, the common areas don't get cleaned as well — or, in the worst case, to making mistakes and having accidents.

Risk Reporter: What other challenges do universal workers present?

Tom Eberlein: Staying up to date on state regulations can be trickier if staff require training in a variety of areas instead of one specialty.

Risk Reporter: Has Heatherwood ever used universal workers?

Jere Schroeder: We actually haven't. When we opened, the partners made a conscious decision to hire staff by task. Their experience in the industry led them to believe this would be a better choice for us, and it's worked very well.



Risk Reporter: Does this impact staff turnover?

Jere Schroeder: Definitely. Some of our employees have worked at other facilities with the universal worker model, and they've told us how much they prefer to have specific responsibilities. Their feedback is that it's less stressful and makes their job more enjoyable. We have a very low rate of turnover, and I believe this model contributes to that.

Risk Reporter: Have you had feedback from your residents or their families?

Jere Schroeder: The two most noticeable things from their perspective are facility cleanliness and food quality, and we get a lot of positive comments in these areas. Our staffing has become a point of differentiation. When prospects come in, I tell them that we hire specialists instead of generalists, and we feel this sets us apart in terms of the quality of care our facility provides.