



Partnership News & Best Practice

Partnership News

May 2018

Welcome Back!

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Welcome back to the latest edition of the *Partnership News and Best Practices*. This newsletter is designed to share information and to ensure open communication.

Through this newsletter, we hope we can answer your questions and to provide

useful information . Please feel free to send us your suggestions for articles to include in this newsletter.

Our office has the distinct honor of working with such great providers. I want to thank you again for your continued willingness to collaborate and partner with

our office to ensure the best possible care to our residents and patients.

As always, I welcome calls or emails from Administrators with comments and suggestions.

My phone is (605)773-3356 and email address is chris.qualm@state.sd.us.

The 2018-2019 Annual Medical Facility License Renewal

The annual medical facility license renewal is here!

Emails were sent out to all licensed providers during the first week of May. The email includes the website link along with instructions on how to complete the renewal for each facility type. If you did not receive an email by May 11, 2018, or are unable to access your

renewal, please contact our office at 605.773.3356. Your online renewal form needs to be completed and electronically submitted to the Department of Health (DOH) **on or before June 1, 2018.**

Once your renewal has been submitted, please be patient. Several DOH staff will review the renewals to ensure the information they require is

included on the application.

We license approximately 400 medical facilities and the time it takes to make all necessary approvals can be lengthy.

DOH staff are looking forward to working with you. Please don't hesitate to contact us at 605.773.3356 or via email at DOHOLCLicensing@state.sd.us with any questions you may have.



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Delegating the Task of Writing Dietary Orders

In the final rule for Reform of Requirements for Long-Term Care Facilities, F715 Physician Delegation to Dietitian/Therapist states: “F715 (Rev. 173, Issued: 11-22-17, Effective: 11-28-17, Implementation: 11-28-17) §483.30(e)(2) A resident’s attending physician may delegate the task of writing dietary orders, consistent with §483.60, to a qualified dietitian or other clinically qualified nutrition professional who—

- (i) Is acting within the scope of practice as defined by State law; and
- (ii) Is under the supervision of the physician.”

The South Dakota Board of Medical and Osteopathic Examiners (Board) as the licensing agency for dietitians/ licensed nutritionist was asked to review:

1. Whether an attending physician for a resident of a long-term care facility may delegate the task of writing dietary orders to a qualified dietitian or other clinically qualified nutrition professional; and
2. Is this delegation allowed within the scope of practice of nutrition or dietetics as defined by state law?

On March 8, 2018, the Board issued a declaratory ruling which in part states:

- Pursuant to 42 CFR § 483.60 (e), therapeutic diets must be prescribed by the attending physician, who may in turn delegate to a dietitian the task of prescribing a resident’s diet to the extent allowed by state law.

- Considering the scope of practice of dietitians, physicians may use protocols to delegate to a dietitian or other qualified and licensed nutrition professional the task of prescribing a therapeutic diet for patients in long-term care facilities.”

The entire ruling can be found at <http://www.sdbmoe.gov/sites/default/files/Declaratory%20Ruling%20LN.pdf>.

WHAT DOES THIS MEAN FOR SURVEYS?

The individual facility protocol or policy should address the delegation process by the physician to the dietitian. Surveyors may request to review the individualized facility protocol or policy.

Why You Should Develop a Life Safety Code Plan

We are often asked, “How do I know which doors in my building are fire rated doors?” The simple answer is they are doors which are located in fire rated walls.

But when you’re walking through a building, how can you tell which walls are fire rated? They look the same as all the other walls. It is almost impossible to visually distinguish a fire rated wall from another. To distinguish fire rated walls from other walls, one of the best tools you can have is a Life

Safety Code plan.

A Life Safety Code plan is a convenient graphical tool used to quickly reference where fire rated walls are located based on the floor plan of your building. In the drawing of the plan, fire rated walls are often indicated with color coding, thick dashed lines or some way to differentiate from other walls.

Why is it important to have a Life Safety Code plan? It is a time saver for your maintenance personnel. It is a useful tool in communicating to others not

familiar with your building (code officials, construction contractors and architects) where fire rated walls and doors are located. A Life Safety Code plan stands the test of time and can be used by generations of maintenance personnel, saving time and effort for employees and improving the overall safety of the building.

If you have any questions, feel free to contact Todd McCaskell at Todd.McCaskell@state.sd.us.

Did You Know?

The White House recently launched two educational websites as part of its efforts to confront the opioid crisis in the United States.

[*Opioids.gov*](#) educates the public about opioid addiction and overdose. This website also highlights the Trump Administration's plan to help prevent addiction through encouraging safe prescribing and by reducing the illicit drug supply, including stepping up efforts to seize illicit opioids coming through ports, shipments and border crossings.

[*CrisisNextDoor.gov*](#) shares a range of stories about the opioid epidemic and allows consumers to upload their own videos about overcoming addiction, volunteering at a recovery center or helping a loved one get on the path to recovery. In a video on this website, US Surgeon General Jerome Adams talks about how opioid addiction affected his family.

Additional information about the Trump Administration's efforts to combat the opioid crisis can be found on the White House website: https://www.whitehouse.gov/opioids/?utm_source=internal&utm_medium=web&utm_campaign=opioidsgov

Similar to the stories on *The Crisis Next Door*, the National Association Board of Pharmacy (NABP) past president and former member of the Louisiana Board of Pharmacy, Joseph L. Adams, RPh, discusses opioid use disorder and losing a child to an opiate overdose in a video on NABP's [YouTube channel](#). The video, *A Parent's Perspective: Joe Adams*, was created by the North Carolina Board of Pharmacy as part of its campaign to combat the opioid crisis in the state. As a parent and a pharmacist, Mr. Adams offers his perspective on substance abuse, how it has affected him and his family and the important role of pharmacists. The video encourages dialogue among family members and a local pharmacist. For those who may be struggling with a substance use disorder or know someone who is, the NABP AWARD[®] Prescription Drug Safety [webpage](#) features resources on how to identify a substance use disorder and how to get help. Read more at <https://nabp.pharmacy/initiatives/awardx/> courtesy of the NABP.

Emergency Preparedness

Need help with planning? Need to know how to connect with a HealthCare Coalition in SD?

Go to <http://doh.sd.gov/providers/preparedness/hospital-preparedness/system/>

The **South Dakota Hospital Preparedness Program (HPP)** works with hospitals and other medical facilities to ensure that South Dakota's medical community is as prepared as we can be! For additional information about HPP, go to <http://doh.sd.gov/providers/Preparedness/Hospital-Preparedness/> or contact the HPP at 605-626-2227

Use this link to find your **local Emergency Manager**: <https://dps.sd.gov/emergency-services/emergency-management>

CMS Emergency Preparedness Site:

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/index.html>

The Assistant Secretary for Preparedness and Response (ASPR) **Technical Resources Assistance Center and Information Exchange (TRACIE)** is a resource for developing emergency plans and can be found at <https://www.asprtracie.hhs.gov>

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CNA Registry Status by Endorsement

We have all been affected with short staffing concerns throughout the state. Providers have shared the number of Certified Nursing Assistants (CNAs) is insufficient and have turned to staffing agencies as a solution to care for their residents. Many of these CNAs are coming from another state.

When a CNA who is registered in another state comes to South Dakota to work, they have the ability to apply for registry status by endorsement. To do so, the CNA must submit their endorsement application within 60 days of employment, and they can only work for a maximum of four months while they are seeking endorsement. The four-month timeframe is calculated based on the

initial date of employment. During this timeframe, it is imperative for the applicant CNA to ensure that all required information is provided to the Board of Nursing so that the application can be acted upon. In the event that any required information is not provided to the Board in a timely manner (i.e., within four months of employment), the application will be denied. If the facility continues to employ a nurse aide that has been denied endorsement, they could be cited by the South Dakota Department of Health.

The South Dakota Board of Nursing is working to add a pending status to the online verification system that will be coming soon. Please ensure you are checking the

South Dakota Board of Nursing website at <http://doh.sd.gov/boards/nursing/verificationlink.aspx> and/or calling Ashley Vis at 605.362.3525 to verify endorsement of the nurse aides you are employing.

Please refer to the following administrative rules of South Dakota:

- **44:74:02:02. Employment of qualified nurse aides required;**
- **44:74:02:03. Exception for employment of unqualified nurse aides;**
- **44:74:02:04. Multistate registry verification required;**
- **44:74:02:21. Operation of nurse aide registry; and**
- **44:74:02:23. Registry status by endorsement.**

Long Term Care Resources

Nursing home surveys are conducted in accordance with survey protocols and federal requirements to determine whether a citation of non-compliance appropriate.

The link below provide additional information about the background and overview of the final rule, frequently asked questions and other related resources.

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes.html>

Long Term Care Provider Training

The **provider training** on the new survey process has been released on the Surveyor Training Website.

The expected run time for this training is an hour.

To access: https://surveyortraining.cms.hhs.gov/pubs/ClassInformation.aspx?cid=0CMSLTCSurProc_LTCProviders

Ombudsman *By: Christina Ruml and Donna Fischer*

The term Ombudsman is a Swedish word meaning citizen's representative. The Long Term Care Ombudsman program (LTCOP) was created in 1972 as a demonstration project for services to nursing home residents. Congress required every state accepting Older American Act funds to operate a nursing home Ombudsman program in 1978. The definition was clarified in 2006 to include "any other adult care home." The populations served by the Ombudsman program include the following; nursing homes, assisted livings, board and care homes, and any other adult care facility. Ombudsman roles in assisted living and board and care home differ from state to state as do the responsibilities of the program.

The South Dakota LTCOP fell under the responsibilities of Adult Services and Aging (ASA) specialists under Department of Social Services for many years. ASA specialists had many tasks to complete monthly; the LTCOP was a small portion of their duties. In July of 2015, the Ombudsman Final Rule was passed. The final rule prompted SD as well as many other states to review their Ombudsman programs. As a result; the SD Ombudsman program changed from having ASA specialist's complete LTCOP duties to currently having six assigned local long term care ombudsman (LLTCO). This change allowed the LLTCO to designate their full time and attention to duties of the LTCOP, such as routine visits to facilities on a regular basis, completing complaint visits, Department of Health surveys, resident council, in-services, and other facility visits as needed. The Long Term Care Ombudsman program is currently organizationally located within the Department of Human Services' Division of Long Term Services and Supports. The Ombudsman program is considered a health oversight agency and as such, representatives of the LTCOP shall have immediate access to residents, access to facilities at any time, and access to review medical, social and other records.

The purpose of the Long Term Care Ombudsman program is to protect and improve the quality of life for residents of long term care facilities through advocacy for, and on behalf of, residents. Ombudsmen receive, review, and work to resolve complaints made by or on behalf of residents in long term care facilities. Residents of long term care facilities have numerous rights under federal and state law; Ombudsmen work to educate residents and staff on rights as well as assure that rights are being upheld. The Ombudsman program is resident centered; regardless of the source of complaint received, the Long Term Care Ombudsman will personally discuss the complaint with the affected resident. Visiting with the resident helps determine the resident's perception of the complaint, determine the resident's wishes with respect to resolution of the complaint, as well as advise the resident of his or her rights. If at any point during the complaint process, the resident expresses that he or she does not want the Ombudsman to take further action on a complaint involving the resident, the Ombudsman is not able to proceed with advocacy. Ombudsmen are not able to talk to staff about resident concerns without the resident giving the Ombudsman verbal authorization to do so. When a resident is unable to advocate for him/herself due to inability to vocalize concerns, Ombudsman work with designated representatives for the resident to best resolve the situation.

Additional information on the LTCOP can be found by reading the Ombudsman Final Rule and the Older American's Act.

If you have any questions, feel free to contact Donna Fischer at Donna.Fischer@state.sd.us.

Pests

When it comes to pests, spring is one of the most active times of year. Most of the creatures that could harm you and cause damage to your possessions have been in hibernation for the duration of the winter, but they come out of dormancy as soon as it starts to get warmer. Here are some of the most common spring pests that can be found in the Midwest.

Cockroaches - These bugs you certainly know and most definitely do not love. Although they're not dangerous per se, they can be carriers of certain types of bacteria you really don't want spreading around your home.

Ants - Ants start resurfacing as soon as the weather gets more tolerable. Although they seem harmless, they've earned their place on the list of some of the most destructive spring pests. That's mostly because they live in colonies, so whenever you see a few of them, chances are there are thousands more lurking around the corner.

Boxelder Bugs - Many of you might not know these creatures. They like making their nests around trees and feeding on the bark. Unfortunately, this typically results in those same trees getting damaged.

Ticks - These tiny creatures are among the most known parasites. The threat they pose to humans isn't one that can be underestimated, since their bites can cause a number of serious health issues including Lyme disease.

Moths - Some species of moths are considered house pests, such as those that feed on natural fibers and tend to damage your clothes. They can cause significant damage, especially when they're not dealt with from the very beginning of the infestation.

Termites - These pests can be found on the ground, in wood or wood by-products such as paper. Since termites usually remain out of sight, they can pose a huge threat to your homes infrastructure.

Flies - These are the most common spring pest that can be quite bothersome. Flies are most active during the day and are naturally attracted to the carbon dioxide humans and animals expel.

Silverfish - They love to hang out in damp areas, and they're very fast—meaning, if you've seen one, there are probably more. Silverfish can damage things like wallpaper, books and clothing.

We recommend that you contact a professional exterminator to care for your pest control. Happy Spring!

New Medicare Card: Help Your Patients

The CMS is mailing new Medicare cards with new Medicare numbers to people newly enrolling in Medicare. People who already have Medicare coverage will receive their cards on a [flow basis](#).

We are conducting a major education campaign about the new card, and you can help:

- Your Medicare patients will not get new cards if their addresses are not correct. If the address you have on file is different than the Medicare address you get in electronic eligibility transaction responses, ask your patient to correct their address through [Social Security](#).

- Prepare to answer your patients' questions: Read the [Medicare.Gov](#) webpage and [messaging guidelines](#).
- Play the one minute [New Medicare Cards are coming!](#) video in your waiting room, so patients know when and how they will receive the new card (also available in [opened caption](#) and [1080p](#) formats).
- Display a [poster](#) in your office.
- Give your patients [tear-off sheets](#) or [flyers](#).

[Register and order](#) these free color products available in multiple

languages or print on 8.5"x11" paper:

- Poster: 11"x17" (Product #12009-P)
- Pad of 50 tear-off sheets: 4"x 5.25" (Product #12006)
- Flyer: 8.5"x11" (Product #12002)

Visit the [Provider](#) webpage for the latest information.



Event Reporting Link:

<http://doh.sd.gov/providers/licensure/complaints.aspx>

Reporting of injuries of unknown and reasonable suspicion of a crime algorithm is located at the following link:

<https://apps.sd.gov/PH91Hc0sr/Website/CompFormOnline.aspx>