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The Georgia Association of Homes and Services for the Aging is the statewide association of over 150 key not-for-profit and other mission-focused organizations dedicated to providing quality housing, health care, community based and other related services for older Georgians. GAHSA's mission is to represent and promote the common interests of its members through leadership, advocacy, education and other services in order to enhance each member's ability to serve older Georgians.

Inside gahsa



May is Older American's Month

Working Together for Strong, Healthy and Supportive Communities

GAHSA members throughout the state celebrate Older American's month with residents & clients. gahsa salutes our members for their commitment to focus on quality and their leadership in setting the standards and developing innovative practices.

There are many events planned for GAHSA members in May – please take a minute to review the information below – more information and registration available at www.georgiainstituteonaging.org as well as through www.gahsa.org

GAHSA Conference HUGE Success

Georgia Institute on Aging programming at the annual conference proved to be a huge success. Fran Battisti spent a day and one-half with gahsa members not only sharing information but helping to set the stage for implementing new ideas and changes to meet the needs of older Georgians in the future through strength-based leadership. Significant time was spent discussing workforce issues and how to lead and develop organizations in the most effective ways. Each evening gahsa members gathered informally together and kicked off the celebration of the 35th anniversary of gahsa. A slide show is available on the web site

The following awards were presented at the Awards Dinner at the Conference. Congratulations to all the 2008 award winners

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Georgia Institute
on Aging

Partners



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Ziegler Capital
Markets Group



Occupied Renovations
(formerly CSS)



Davidson Retirement
Properties



Moore Stephens Lovelace,
P.A.

Supporters

GAHSA Volunteer of the Year Awards

Phillip Shapiro, The Cohen Home, Alpharetta
Ruth Jones, Magnolia Manor Retirement Communities, Americus
The Wheeler Family, Wesley Woods Towers, Atlanta

GAHSA Trustee of the Year Award

Barry Spurlock, Lutheran Towers, Atlanta

GAHSA Distinguished Service Award

Andrea Price, Canterbury Court, Atlanta

GAHSA Award of Honor

Tom Rockenbach, Presbyterian Homes of Georgia, Quitman

A special thanks to our exhibitors and sponsors for helping making this year's conference a success.

This Year's Exhibitors

Age and Disability Resource
ARJO, Inc.
BB&T Capital Markets
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Center for Positive Aging
D.K. Lippy Construction Co.
Digital Eyez Surveillance Solutions
Evercare
EZ Way, Inc
Fitness Equipment
Gayco Healthcare
Genesis Rehabilitation Services
Georgia Mechanical, Inc.
Georgia Pharmacy Company
GlynnDevins
Healthsense, Inc.
Hill-Rom
Home Free, Inc.,
International Bus Group, Inc.
Kwalu
LW Consulting
Mauldin & Jenkins LLC
MC Healthcare Products, Inc.
MDI Achieve
MobilexUSA
Moore Stephens Lovelace
Morrison Senior Dining
Occupied Renovations
Perkins & Will, Inc.
Rees Associates, Inc.
Residex
Risk Management Continuum
Select Medical Rehabilitation
Services
Senior TV
Shaw Industries
Sikes Paper Company
Sodexho Senior Services
Status Solutions

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Mauldin & Jenkins, CPA, LLC*
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Presbyterian Homes of Georgia
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Right at Home
Seth Strongin
Sodexho Senior Services
Ziegler Capital Markets Group**

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***2008 Institute Supporters**



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LLC

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Visiting Nurse Health System
| Hospice Atlanta
W.P. Hickman
XLHealth Corporation
zumBrunnen, Inc.



LW Consulting, Inc.

GAHSA Launches the Culture Change Network of Georgia

GAHSA launched the Culture Change Network of Georgia at the annual conference. Kim McRae, our Culture Change Consultant, was introduced and presented an informative workshop with standing room only!

Friends

The Law Offices of
Williams &
Edelstein

Spearheaded by the Georgia Association of Homes & Services for the Aging (GAHSA) and the Georgia Institute on Aging, The Culture Change Network of Georgia is a group of dedicated supporters and stakeholders working as partners to promote and foster culture change and improve the quality of life for older Georgians *in all settings* where aging services are delivered. Please visit www.culturechangegea.org for lots of great information.

Dixon Hughes

Transformations, the first culture change newsletter will be out later this month.

Mauldin & Jenkins

Presbyterian Homes
of Georgia

SAVE September 4, 2008 for the First Annual Culture Change Symposium and the Loudermilk Center.

Pfizer

1st Annual AAHSA Homecoming Week

[AAHSA Homecoming Week Toolkit Now Available Online](#)

Contributors

HVAC Services

From May 26-30, we are asking members to host some type of event to shine a spotlight on their community's treasures—the people they serve. Start planning your Homecoming Week event today with the help of our [Homecoming Week toolkit](#) featuring event ideas, planning tips and strategies to get media attention for your organization's celebration of the "community treasures" you serve.

Kings Bridge
Retirement Center

gahsa ListSers Update

Lutheran Towers

For a short period of time, the GAHSA ListSers will be off line. We are in the process of redesigning the ListSers and will provide you updated information soon. GAHSA ListSers have been a valuable resource for connecting members throughout the state.

Seth Strongin

We are currently piloting a new idea with one of our ListServ groups during this month.



AAHSA

GAHSA Hosts First Pilot Workshop

gahsa is hosting the AAHSA/University of North Texas Collaborative Event August 21st, "Strategically Positioning Your Organization for the Future", facilitated by CASP (formerly RHP) graduates.

[Click here](#) for a letter inviting RHP/CASP graduates to participate in

www.aahsa.org

presenting this program.

Keep up with the
Quality First Program

New Members

Providers:

Fellowship Assisted Living

Associates:

Atlanta Home Care Partners

Events at a Glance

Notice that each of the events has a link to the registration brochure which contains a form you can fax in. You also have the option of registering on-line.

Thursday, May 8

[Spring Luncheon](#)

St. George Village, Roswell

Generations at Work

Join us for an exciting two-part program. **Nancy Grunnet** will be speaking on *Generations in the Workplace...and Why they Collide* (followed by a networking luncheon) and reconvening with **Alan McTier** for a brief demonstration of the gahsa Online University concept (followed by a tour of St. George Village).

Friday, May 9

Alzheimer's: Creating our own Future
For Professional and Family Caregivers

Featured Speaker

Joanne Rader, RN, MN

Research Update by

Angela Ashley, M.D., Emory Healthcare

Workshops

Panel Discussions

Resource Expo

Vineville UMC

Macon, GA

Joanne Rader, RN, MN, is an independent consultant and Associate Professor of Gerontological and Mental Health Nursing at Oregon Health Sciences University School of Nursing. She is a founding member and Board member of the national Pioneer Network, a movement to change the culture of aging in America. She is the author of *Individualized Dementia Care: Creative, Compassionate Approaches*, and *Bathing Without a Battle*. Joanne brings her nursing expertise to the challenging and rewarding work of creating this new culture and to developing ways to enhance quality of care, particularly for persons with dementia.

Alzheimer's Association
277 MLK Jr. Blvd, Suite 201
Macon, Georgia 31201
478-746-7050

Tuesday, May 13

[Assisted Living Best Practices/GA-ORS](#)

The Brickyard, Macon

9 am - 2 pm

The purpose of the Assisted Living Best Practices Symposium is to recognize best practices in our field that can be replicated. During the symposium we will award those communities that have demonstrated innovations and superior standards of quality among the Assisted Living communities of Georgia. This is a collaborative effort between gahsa, ORS, ALAG, and GA-ALFA.

Join us as our colleagues share their stories and road map to success.

Wednesday, May 14[OSHA 10-hour General Standards Certification Training](#)

gahsa Offices

Come prepared to receive extensive training on OSHA General Standards of Safety and receive the prestige of posting these credentials and having this specialized training under your belt! Typically this level of training is offered for \$500-\$700. However, the Georgia Institute on Aging has been able to partner with the McCart group to bring you this training at cost for \$100 per person.

Thursday, May 15[Fiscal Governance Best Practices -- Is Compliance Enough?](#)

William Breman Jewish Home, Atlanta

10 am - 3 pm

Submitted by: Jeff Fucito, Mauldin & Jenkins, LLC

This presentation features professionals with significant experience in advising nonprofit clients on the impact of fiscal governance. Many of the presenters have a focus in the healthcare industry. The overriding theme of the session is to communicate practical advice that can strengthen your organizations governance structure.

This will include information about emerging best practices, benchmarking, a discussion about history and trends in the nonprofit industry, and a review of Board governance as it relates to the new Form 990.

We will also have a practical discussion about the new risk assessment audit standards and how they impact nonprofit reporting. The session will conclude with a panel discussion

Thursday, May 22**Forums Day**

HUD Administrator's

Marketing Professionals & Admissions/Occupancy Specialists

Service Coordinators

Cascade United Methodist Church

Adult Day Care

Senior Citizens Services

HUD Administrator's Forum

Sue Barron, HUD, will meet with HUD Administrators to provide any updates and answer questions from the group. The group will share information and discuss current issues

organizations are addressing.

GAHSA Marketing and Admissions Forum

Presentation Topic:

- * Values of Print & Online Advertising
- * Finding help building web site for your community/agency
- * Website Checklist
- * Search Engines - what are they and how to use them
- * Types of Advertising Online

Stacey Howse has eleven years of experience in print and online marketing, operations, and sales, specifically focused on the senior industry for New LifeStyles, *The Source for Seniors*.

Service Coordinator Forum

Session Speakers: Eve Byrd & Nancie Vito

Session Topic: GAHSA/Fuqua Mental Health Project Evaluation Results

The GAHSA/Fuqua Mental Health Project is coming to an end. We are grateful for the rich experience and commitment of both the Fuqua staff (Eve Byrd, Nancie Vito, and Carol Baylor) and the Service Coordinators of GAHSA member facilities. The May 22nd Service Coordinators' Forum will allow us to explore future needs in this area, as well as, evaluate the case conference experience and other aspects of the project to include:

Evaluation results of employees' knowledge and attitudes about depression and suicide following involvement in project

Evaluation results on the effectiveness of the interventions and protocols established by participating organizations following their involvement in the project.

An overview of lessons learned and next steps

Fuqua will provide protocols to identify and develop geriatric psychiatry referral sources for depression screening and documentation of depression.

Adult Day Services Forum (GADCA)

Beth Arnold, the Chair of the Board of NADSA and the Director of Adult Day Services for Luther Manor in Wauwatosa, Wisconsin, will present Elements of Success: Adult Day Services Industry Leaders Work on a Blueprint for Transformation.

This interactive workshop will explore person centered care from the perspective of personhood. Join us as we ask ourselves why we should transform our delivery of care in adult day services, to a person centered system, uncover the skills needed to make the changes, describe and anticipate adult day services' role as leaders for this change

in the long term care system and draw our blueprint.

Participants in the workshop will receive practical tips and tools for sharing with staff, as well as a vision for "first steps".

9:30 am – 2pm at Senior Citizens Services in Atlanta.

SPACE is LIMITED. You MUST REGISTER TO ATTEND.

Monday, June 9

[Basic Tax Credit \(LIHTC\) Training](#)

SAHMA Offices, Atlanta

This is basic training for anyone who manages a property that is exclusively 100% Tax Credit or has a combination of housing programs and/or financing. This comprehensive day will cover not only an introduction and history of the LIHTC program, but also eligibility, verification, income/asset calculation, recertification, and resident file maintenance with accuracy.

Tuesday, June 10

[Intermediate Income Housing Tax Credit \(LIHTC\) Training](#)

Who Are the Players and How They Connect

SAHMA Offices, Atlanta

After a quick refresher about the LIHTC program this course will continue on with explanation of the role of IRS, State Agencies, Owners, Syndicators, and Management.

[Click Here](#) for a complete list of upcoming 2008 GIA events.

General Notes of Interest

Boomers to Flood Medical Care System Report says U.S. faces 'Impending Crisis' in Health Care for Seniors

Associated Press, April. 14, 2008

WASHINGTON - Millions of baby boomers are about to enter a health care system for seniors that not only isn't ready for them, but may even discourage them from getting quality care.

"We face an impending crisis as the growing number of older patients, who are living longer with more complex health needs, increasingly outpaces the number of health care providers with the knowledge and skills to care for them capably," said John W. Rowe, professor of health policy and management at Columbia University.

To continue reading, <http://www.msnbc.msn.com/id/24107916/from/ET/>

DisabilityInfo.gov Launched

An online connection to the Federal government's disability-related information and resources has been created at www.DisabilityInfo.gov. The site is the federal government's one-stop shop for people with disabilities, their families, employers, veterans and service members, workforce professionals and many others. It includes housing, employer, transportation, voting and other laws related to disabilities. Additionally, DisabilityInfo.gov provides links to a state and local resources map to locate programs and information in your state. The website is a collaborative effort among including HUD, HHS, Transportation and the VA. (AAHSA)
Identifying Mild Cognitive Impairment in Older Adults

Mild Cognitive Impairment (MCI)

Mild cognitive impairment (MCI), a relatively new descriptive category, is believed to represent a stage between normal aging and early dementia. Identifying MCI has not been an easy task because there has been little agreement in the literature on definitions, classification, and measurement tools to identify persons in this state. Nurses are in a key position to detect early cognitive changes in elderly across the continuum of senior living and long term care settings.

The following criteria have been used to identify persons with MCI:

- Cognitive complaints reported by the patient or their family
- Patient or informant report of a decline in cognition and/or functional performances compared with previous abilities
- Cognitive disorder evidenced by clinical evaluation (impairment in memory or other cognitive domain)
- Absence of major repercussions on daily life (although may have difficulties with complex day-to-day activities)
- No evidence of dementia

The purpose of this study was to describe an approach to identifying MCI using a variety of measures and a consensus conference with neuropsychologists. The study was conducted in a sample of 130 elderly participants (aged 82.5 years; 81% female) residing in nursing homes, assisted living facilities, and senior housing. A team of clinicians (neuropsychologists and nurses) reviewed cognitive, mental health, and demographic data in consensus conference and classified study participants into 1 of 3 groups: cognitively intact (50.8%), amnesic MCI (19.2%), or probable dementia (30%).

The researchers classified individuals into cognitive status groups based on test scores alone and compared quantitatively determined groups with consensus conference evaluations. The results indicate that 95% of the participants were correctly classified. Further, results revealed a pattern in which persons with amnesic MCI have subtle memory impairments (similar to persons with dementia) but that more general cognitive functioning remains high (similar to intact persons). The high rate of amnesic MCI found in this sample is important to consider clinically because health care providers may encounter increasing numbers of persons with MCI and should thus be equipped with the tools to gather more information regarding the cognitive status of their clients. It is important for health care professionals to become

part of the team in identifying MCI as they hold specific knowledge of their clients' cognitive abilities through interacting with and educating them. Nurses' heightened awareness of subtle distinctions in the dimensions of cognitive status associated with MCI can enhance their practice and assist them in making more informed referrals for dementia evaluations. (*Geriatric Nursing, Jan-Feb, 2008*)

Federal Government Taskforce on the Aging American Workforce Report

Taskforce on the Aging American Workforce (February 2008)

The Taskforce on the Aging American Workforce recently released their advisory report that addresses topics such as: the job market for older workers, their range of work skills, barriers to employment, legal and regulatory issues, assisting older workers in the workplace, retirement and financial literacy education, and outreach efforts. For specific information, see: <http://www.doleta.gov>.

Domestic Migration: Who's Moving In and Where are They Coming From?

April 2008 (Source: Atlanta Regional Commission newsletter@atlantaregional.com)

This month's Regional Snapshot examines domestic migration data from the IRS and finds that - just as we all suspected - we attract a lot of migrants from the northeast. In fact, between 2000 and 2005, the 20-county Atlanta region attracted some 38,000 net new residents from New York, which was the most popular origin state.

The snapshot also looks at how our residents move within the 20-county area as well as the incomes of those moving in, moving out and staying put.

[Read this month's Regional Snapshot.](#)

Public Policy Update

From Tom Bauer, GAHSA Legislative Counsel

Success on CCRS-CON Issues in the 2008 General Assembly

At the time of the April Coffey Break the legislature had not quite completed its deliberations. The 2008 General Assembly adjourned "sine die" on April 4, the culmination of a session generally acknowledged to be more acrimonious and less productive than usual. The session was dominated by consideration of various proposals to bring tax relief, including those of the Speaker. The final House proposal was to replace local school property taxes with a 4% sales tax on most, but not medical, services. The new tax proposal was controversial and ultimately the measure did not pass; however, rival tax relief provisions between the House and Senate led to a stalemate on many other issues, including the creation of a permanent revenue source to fund Georgia's

trauma network.

Continuing Care Retirement Communities (CCRC)

One issue that did come to fruition was the overhaul of the state's certificate of need (CON) process. A part of SB 433 (the bill which ultimately passed -and has been signed by Governor Perdue- to provide comprehensive CON reform) addressed GAHSA's top priority of the legislative session. GAHSA had promoted its own bill (SB 539) by Senator Don Thomas) to allow some degree of "direct admission" to skilled nursing facilities in continuing care retirement communities (CCRC). Ultimately the language of SB 539 passed as a part of the "big" CON bill, SB 433.

SB 433 will allow a CCRC in its first year to utilize up to 50% of its skilled nursing beds for persons admitted from outside the CCRC. This percentage would then decline by 10% per year over the next four years. This language was negotiated with the Georgia Health Care Association. The bill becomes effective on July 1, 2008, and the Department of Community Health (DCH) has invited questions from the public on the new CON process. The GAHSA CCRC Task Force is currently refining questions to send to DCH concerning CCRCs.

Special thanks go to Rep. Sharon Cooper, chair of the House Special Committee on Certificate of Need who called a special meeting to highlight and champion SB 539, GAHSA's CCRC-CON bill. CCRCs will now be able to have phased-in direct admissions without the need to obtain a certificate of need and nursing homes will likewise be able to move within the same county and/or to subdivide (but not add) beds without applying for CON.

The passage of SB 433 will also free CCRCs from other obstacles in the CON process such as having to begin construction within 12 months of obtaining a CON or dealing with rigid requirements on the ratio of independent living beds to skilled nursing beds and implementation of an indigent care requirement which made little sense in the CCRC setting.

One other part of SB 433 is of note. Beginning July 1, 2009, the Office of Regulatory Services, the government agency that licenses, monitors and inspects health facilities- including nursing and personal care homes- will move from the Department of Human Resources to the Department of Community Health (the agency which administers the CON process).

Adult Day Center Regulation

Along with GAHSA's success with respect to CCRC issues, there was a disappointment with regard to regulation of adult day centers. The General Assembly rejected the DHR proposal to implement a "regulation light" approach for certain adult day programs, intending to result in more flexibility for smaller programs- including congregational respite programs. As reported last month, the Department of Human Resources Board proposed rules on "regulation light" to accommodate congregational respite centers (known as "limited service programs") with regard to licensure of adult day centers. The definition of such centers is:

"an adult day center that is operated by a non-profit corporation for no more than 25 hours per week and staffed primarily by volunteers to provide basic social and recreational activities to aging adults who can feed and toilet themselves and participate in group activities safely." Unfortunately, despite the best efforts by GAHSA and the Alzheimer's

Association, HB 1044 was introduced and ultimately passed. It exempts uses the definition above and exempts all "respite care services programs" from licensure regulation. GAHSA and other advocates will need to will continue to find ways to ensure the basic safety of seniors in all adult day programs. In fact, GAHSA is currently suggesting changes to the proposed rules on licensing of adult day programs to ensure that the Department of Human Resources is able to identify those programs holding themselves out to be respite care services programs

Budget Issues

As noted last month, there was little enhancement of seniors programs such as Community Care Services Program or the non-Medicaid Home and Community-Based Services program. Nor were there new funds for the human services transportation program for seniors and persons with disabilities.

Annual Meeting

GAHSA members followed "GAHSA Day at the Capitol" on February 27 with a lively discussion of public policy issues at April's Annual Conference. AAHSA Regional VP Melissa Sharp joined GAHSA legislative counsel Tom Bauer for a lively panel discussion. Tom recapped the General Assembly, and Melissa brought participants up to date on federal issues, including AAHSA's proposal (which would require legislation) to create a federal payroll (withholding) tax to fund long term care.

Business Connection -- Update from our Associate Members

From gmcf

GMCF, the Medicare Quality Improvement Organization for Georgia, needs YOU to tell your story! There have been many changes and initiatives that you have embraced that have made the lives of your residents and staff much more rewarding. From small changes such as sprucing up an employee lounge, to large system-wide changes that have improved pressure ulcer care, each change has benefited your nursing home. But just think about what your success can do when it's multiplied!

Other nursing homes around the country want to hear about your successes. They want to hear about the changes you've made – both small and large – so that they can learn from your success and implement similar changes. [Click here](#) to read a nursing home success story that has been promoted nationally on www.MedQIC.org ... then picture your story there! Send your stories via email, fax or phone to GMCF so we can get the word out to all. We will call you for the details to make a story of interest to all. Thanks for making this past 3 years of work memorable!

A list of nursing home success stories has been posted on MedQIC. The topics include Physical Restraints, Pressure Ulcers, Consistent Assignment/Staff Mentoring (supports retention/turnover) and Resident

Satisfaction. [Click here](#) to get this list.

Fax: 678-527-3030
Phone 678-527-3675 or
email to kluge@gmcf.org

From Glynn Devins

Tilling the Soil This Spring to Produce Sales Results

Seniors are savvy customers today. Many have preconceived ideas not just from their own experiences, but also about retirement living. Better educated, they utilize internet access to shop for options. However, full reasoning weighs in on this most important decision, even with the quick pace of today demanding automatic response. Start breaking through any of their notions by tilling beneath the surface to produce keener interest and open minds about community selection to make sales grow.

- Like we prepare the soil for planting, selling to new inquiries requires attention to preparation
- The most seasoned sales script can be lost if the prospect does not give it a fair hearing due to defined ideas
- New ideas are what we have to (plant) sell to replace their perception
- Creating fertile ground to present our ideas can be as simple as an introduction letter sent to prospects prior to visiting our community
- Try presenting your community to resolve that *special problem* so they want to come to you and say, "tell me more"
- Seeds to plant might include: moving to something better not just scaling down in size, compatible neighbors, convenience to simplify their lives, entertainment, amenities they look for to stay active

Tee Nearman
tnearman@glynndevins.com
Glynn Devins Advertising & Marketing

From LW CONSULTING, INC.

Seven Steps to Increased Leadership Skills

STEP I – Managing the Customer
STEP II – Managing Performance
STEP III – Managing Quality
STEP IV – Managing Individuals
STEP V – Managing the Team

STEP VI – Managing Change
STEP VII – 20 Tips for Success

STEP VII - 20 Tips for Success

We've discussed managing the customer, performance, quality, individuals, the team and change. Now here are 20 ideas for fine tuning your leadership skills!

1. Step back and look at the big picture – a 30,000 foot view gives an entirely different perspective to any situation
2. Break situations down into small pieces – attack one at a time
3. Create a culture of personal responsibility – accept no excuses, even when it is easier for you to accept them!
4. Make no excuses yourself – take the blame when you should, practice damage control and move on.
5. Tolerate no loose ends – when the heat is off and the crisis is over, it's easy to move on and forget to tie up the loose ends – avoid that temptation.
6. Invite and expect staff to bring a solution (or solutions) with every problem they present – that's the best way for them to learn problem-solving skills
7. Be out and about – you can't lead from behind a desk
8. "Somebody" is not always better than "nobody" – help people succeed somewhere else when they don't fit into your organization, and hire wisely.
9. Good outcomes are not achieved until the right person is in the right place for EVERY JOB!
10. Never, never pass the buck – it teaches others bad habits and doesn't solve problems
11. When investigating, cast a wide net – don't accept the first explanation because it's there.
12. To demand excellence, you must model excellence – every day, every hour, every situation
13. Choose good people, let them perform, find ways to monitor them that don't feel intrusive.
14. Above all, be fair, don't play favorites, it will always come back to haunt you.
15. Use your power wisely, don't bully, don't practice "rank has its privilege"
16. Be creative, take measured risks and encourage creativity

17. Pay relentless attention to detail, but get lost in them.
18. Be sure everyone knows the destination – so they don't go the wrong way.
19. Listen, listen, listen and LEARN!
20. Keep your sense of humor – it can see you through many a dark day.

Thanks for joining us on this journey to improved leadership skills.
Onward and upward!

LW Consulting
Sharon Allred
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770-454-6817

Georgia Institute on Aging

Information about Georgia Institute on Aging and upcoming events is now available directly at <http://www.georgiainstituteonaging.org> .

Last Month's Events in Review

gahsa Annual Conference and Trade Exposition

[Click here](#) for photos of conference events.

**PREPARE: Disaster and Emergency Preparedness
Train the Trainer
April 29 and 30**



GAHSA members spent 2 days working on comprehensive disaster preparation plans

This national project was part of a HERSA grant through Mather Lifeways. IFAS, the research arm of aahsa, is the evaluator for this grant project.

Facilities participating in this training were:

Big Bethel Village	Laurel's Edge/Barrington Square
Briarcliff Oaks	Lanier Village Estates
Canterbury Court	Presbyterian Village
Carlyle Place	St. George Village
Christian City	The Cohen Home
Clairmont Oaks	The Marshes of Skidaway Island
King's Bridge Retirement Center	Wesley Woods Towers

***LIFELines* email publication for GAHSA Nursing Home Members & Nursing Staff**

GAHSA healthcare/nursing home members will begin receiving a new publication called LIFELines. This publication is a partnership between GAHSA and our Illinois Association (Life Services Network). LIFELines provides timely information regarding state and federal issues such as survey preparedness, risk management, immediate jeopardy, clinical issues, abuse investigation, recruitment and retention and a host of other vital information for GAHSA nursing home members. All GAHSA nursing home members should now be automatically receiving LIFELines. Any other GAHSA member is welcomed to receive this publication – just contact swatkins@gahsa.org.

April topics were: April 30; Risk Management: Ensuring Staff Competence & When Surveyors Cite F314

You can also get the current issue as well as all previous issues by going

to www.gahsa.org, Members Only, Publications

News throughout the Continuum

Affordable Housing

After the Elderly Housing Symposium, Colleen Bloom sent gahsa information about the Alzheimer's Association Handbook – Serving the Memory Impaired Resident in Senior Housing, suggesting it as a resource for housing providers who have residents with cognitive impairment.

Here is a [link to the document](#). (Warning: this is a very large .pdf document which may take some time to download)

This document, along with other timely publications is posted for you at www.gahsa.org, **For Members** section, under **Publications**.

"Reasonable Modification" Guidance Released

The Department of Housing and Urban Development (HUD) and Department of Justice (DOJ) released new guidance on reasonable modifications to help housing providers better understand their obligations and to help persons with disabilities better understand their rights regarding the "reasonable modifications" provision of the federal Fair Housing Act (FHA). Both agencies share responsibility for enforcing the FHA, which prohibits discrimination in housing based on disability, race, color, religion, national origin, sex and familial status. HUD's office of Fair Housing and Equal Opportunity (FHEO) investigates individual complaints of discrimination in ANY housing situation.

The reasonable modification provision under FHA prohibits the refusal by housing providers or homeowner associations to permit a reasonable modification - i.e., a structural alteration - of existing premises, occupied or to be occupied by a person with a disability, when the modification may be necessary to afford the person full enjoyment of the premises. Since January 1, 2001, the Justice Department's Civil Rights Division has filed 244 cases to enforce the Fair Housing Act, 115 of which have alleged discrimination based on disability. The new guidelines are available [online](#). Contact Alayna Waldrum, awaldrum@aaahsa.org, AAHSA, for further information.

Nursing Care

CNA Empowerment: Effects on Job Performance and Work Attitudes

In this analysis, the effects of empowerment were examined among a sample of certified nursing assistants (CNAs) representing a wide range of empowerment levels. On the basis of survey responses from 298 CNAs and 136 nurses in five nursing homes where CNA-empowered work teams had been implemented and five nursing homes with more traditional management approaches, the results indicated that CNA empowerment had a variety of effects. CNAs with high empowerment and the nurses who worked with them tended to report better CNA

performance and work-related attitudes. Both were also less likely to be thinking about leaving their jobs. With the help of lessons learned from new culture change initiatives, and with commitment, effort, and attention, nursing homes and other health care providers can reap the benefits associated with employee empowerment strategies, such as CNA-empowered work teams. (*Journal of Gerontological Nursing* Vol. 34 No. 3 March 2008, by Cynthia M. Cready, PhD; Dale E. Yeatts, PhD; Melissa M. Gosdin, MA; Helen F. Potts, PhD)

CDC Works to Prevent Falls

About five percent of all people over age 65 had to see a health care provider or restrict their activity due to a fall during a three-month period, according to a study by the Centers for Disease Control and Prevention. An estimated 5.8 million adults over age 65 reported they fell at least once in the previous three months, and 1.8 million of them sought medical help or restricted their activity for at least a day, said the study in the CDC's *Morbidity and Mortality Weekly Report*. To estimate the frequency of a broad range of fall injuries, the researchers analyzed data from the CDC's 2006 Behavioral Risk Factor Surveillance System. In an effort to improve recall accuracy, elders were asked if they had fallen and been injured within the previous three months. Researchers caution that this is a snapshot and should not be used to estimate the number of annual falls.

Among other findings:

No difference existed in the percentage of men and women who reported falling in the previous three months, but about 36 percent of women reported injuries compared to about 25 percent of men. American Indian/Alaska Natives reported the highest percentage of falls (28 percent).

About 30 percent of people who fell reported sustaining an injury that led them to visit a health care provider or restrict their activity for at least a day. As the U.S. population ages, the problem of older adult falls is expected to increase.

"We want to help our elders and their children or caregivers to know that there are ways to ensure older adults can live better and longer," said Dr. Ileana Arias, director of CDC's National Center for Injury Prevention and Control. "It's important that people can live healthy and independent lives without fear of falling. To help, CDC has developed several new guides and resources that describe the best ways to reduce the risk of falls. We believe this will help older adults remain self-sufficient, longer." For communities, CDC has three resources that can help them develop effective fall prevention programs for seniors.

Preventing Falls: What Works. A Compendium of Effective Community-based Interventions from Around the World contains 14 community-based actions or activities that have proven effective in reducing falls among older adults. This resource gives public health practitioners and community organizations descriptions and relevant details about these interventions. <http://www.cdc.gov/ncipc/preventingfalls>

Preventing Falls: How to Develop Community-based Fall Prevention Programs for Older Adults provides community-based organizations with a guide for developing fall prevention programs. This useful how-to describes the building blocks of effective fall prevention programs and gives examples, resources, and tips for creating, promoting, and

evaluating a fall prevention program.

<http://www.cdc.gov/ncipc/preventingfalls>

"Help Seniors Live Better, Longer: Prevent Brain Injury" is an initiative developed in collaboration with 26 organizations to help children of older adults and other caregivers prevent, recognize, and respond to fall-related traumatic brain injury (TBI) among older adults. This initiative features easy-to-use English- and Spanish-language materials for caregivers and older adults, as well as event and media guides for organizations and public health professionals.

<http://www.cdc.gov/BrainInjuryinSeniors>

CDC also has easy to read brochures in English, Spanish and Chinese to help seniors and their caregivers prevent falls. To learn more about CDC's work in preventing older adult falls, visit

<http://www.cdc.gov/injury> (*Centers for Disease Control and Prevention*)

Advancing Excellence Campaign Elects New Chair Reflects on Successes at 18-Month Mark

Mary Jane Koren, MD, MPH, assistant vice president at The Commonwealth Fund and leader of the Program on Quality of Care for Frail Elders, was elected chair of the Advancing Excellence in America's Nursing Homes campaign Steering Committee for 2008. Dr. Koren succeeds Larry Minnix, President and CEO of the American Association of Homes and Services for Aging.

The voluntary Advancing Excellence campaign continues to complement the work of existing quality initiatives, including QIO activities in the nursing home setting, Quality First, and the culture change movement. Currently more than 6,600 nursing homes are enrolled in the Advancing Excellence campaign, and early data indicate success in meeting the clinical goals of the campaign.

The campaign hosted a Webinar in January, offering technical assistance to nursing homes on pain reduction, which was attended by more than 3,000 participants. A February 21 Webinar, which focused on reducing pressure ulcers, attracted about 5,000 participants from over 1,800 facilities nationwide.

As the Advancing Excellence campaign celebrates its 18month anniversary, campaign leaders are reflecting on the many milestones it has achieved during its first 18 months, including:

- Creating an unprecedented broad-based coalition of 28 organizations representing nursing home providers, administrators, nurses, medical directors, and quality improvement experts; government agencies; foundations; and consumers. The coalition represents an effective public-private collaborative effort.
- Recruiting over 6,700 voluntary nursing home registrants (42% of all nursing homes in the U.S.).
- Attracting over 1,300 consumers to join the campaign.
- Establishing 50 Local Area Networks for Excellence (LANEs) that encompass hundreds of organizations and individuals working to make Advancing Excellence a success at the state and local levels.
- Achieving at least 60% or greater registration of nursing homes in 11 states, with one state reaching 100% participation.

- Demonstrating the commitment of participating nursing homes to the campaign, with homes on average committing to 3.7 goals (a minimum of 3 is required) and generally choosing goals in which they are most in need of improvement.
- Developing an informative Web site to foster, guide, and sustain continuous quality improvement programs at participating nursing homes and engage consumers and nursing home staff in the campaign.

More information about the Advancing Excellence in America's Nursing Homes campaign is available online at www.nhqualitycampaign.org

Assisted Living

GAHSA Provides Leadership in the development of Proposed Health and Safety Compliance Rating through ORS

Serving on the ORS Advisory Group along with other associations, gahsa provided leadership in the development of the new rating system. This has been a long process which started by convincing ORS to change the name from "Assisted Living Quality Rating" to "Health & Safety Compliance Rating". We appreciate the input and feedback from gahsa assisted living providers from all over the state. The scoring system has been reviewed and assessments were made regarding the options for segmenting the scores into tiers. We have presented the following information regarding the final stages of this process:

Trying to segment the score into ranges using graphics continues to create too many questions and does not clearly give consumers the tool to help make decisions. As gahsa members responded at the assisted living symposium in February, our position is to show a number only and not use icons. We are making this request for the following reasons:

- Communities with deficiency-free surveys are not easily identified unless more than three icons are used. If deficiency-free surveys are the highest icon, the other excellent providers who may have one minor deficiency will go to the second level, which is not fair to assisted living providers.
- With the scoring system that averages the last two annual surveys, the proposed ranges make it practically impossible to be at the top level because you must have a two-year average of deficiency-free annual surveys.
- With segmenting, the grouping is skewed to the higher end where numbers are a clearer differentiation.
- The definitions to explain the groupings are too complex for consumers to follow, so many will not make the extra effort to figure it out.

The Advisory Group has been told several times that the use of icons has been the preferred standard for DHR, but it is not an effective decision tool. If DHR cannot honor our position or review it again at the end of a year, we propose the following:

3+ = 95 to 100

- 3 = 90 to 94
- 2 = 80 to 89
- 1 = 79 and below

These ratings give recognition to high performing communities, and show that communities with a 90 are good homes. Any community that falls below 80 needs significant changes or has had a serious event.

The web site is supposed to be available for providers to review the month of June and will be live the first of July. We will provide additional information as the final decisions are made.

GAHSA Members Begin Dialogue About the Medication Guidelines for Assisted Living in Georgia

As a first step, several gahsa members attended the Medication Guidelines training presented by ORS. Others are going to attend as the training comes to their part of the state. Next steps include a dialogue to discuss ways to clarify current guidelines and issues that need to be addressed.

DNR & Wrist Bands

Wrist bands must meet the following requirements (language from Georgia Code says it must be "legally sufficient"):

A person who is not a patient in a hospital, nursing home, or licensed hospice and who has an order not to resuscitate pursuant to this Code section shall wear an identifying **bracelet** on either the wrist or the ankle or an identifying necklace. The **bracelet** shall be substantially similar to identification **bracelets** worn in hospitals. The **bracelet** or necklace shall be on an **orange** background and shall provide the following information in boldface type:

"DO NOT RESUSCITATE ORDER

Patient's name:

Authorized person's name and telephone number, if applicable:

Patient's physician's printed name and telephone number:

Date of order not to resuscitate: "

Any physician, health care professional, or emergency medical technician shall be authorized to regard such a **bracelet** or necklace as a legally sufficient order not to resuscitate in the same manner as an order issued pursuant to this chapter unless such person has actual knowledge that such order has been canceled or consent thereto revoked as provided in this chapter

Just a reminder that these bands may be purchased through Briggs Corporation (800-247-2342).

GAHSA VACANCY REPORT

Please assist your colleagues by sharing this information when you receive calls from consumers you cannot serve.

Facility	Units	Cost	Type of Subsidy/Waiver
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Calvin Court Atlanta	20 – Efficiency 11– One Bedroom	\$516 \$681	
Campbell-Stone Apartments Atlanta	4 – Efficiency 7 – One Bedroom	\$650 \$800	Sec. 8 Sec. 8
Canterbury Court Atlanta	5 – Efficiency 4 – One Bedroom 4 – Two Bedroom		
Lutheran Towers Atlanta	6 – Efficiency 2 – One Bedroom		Sec. 8 Sec. 8
Springfield Gardens Warner Robbins	1 – One Bedroom	\$627	HUD PRAC
Wesley Woods Towers Atlanta	12- One Bedroom		HUD 236

CAREER OPPORTUNITITES (EEO)

Click the job title for a complete description.

Clairmont Oaks, Decatur

[Activities Director](#)

Visiting Nurse | Hospice Atlanta

[Director, Care Management Services](#)

Presbyterian Communities of South Carolina

[Administrator](#)

Rosecrest Rehabilitation and Healthcare Inman, SC

[Administrator](#)

AAHSA Information

News from AAHSA

Melissa Sharp, Vice President, Southeast Region, AAHSA

It was wonderful seeing so many of you last month at Brasstown Valley! Thank you for the feedback, fun and learning. Please feel free to contact me with your questions or concerns at (202) 508-9456 or by e-mail at msharp@aahsa.org.

Celebrate AAHSA Homecoming Week: Host an event in your community AAHSA's Homecoming Week is a time for members to invite their greater community to learn more about their work and the people they serve. From **May 26-30**, we are asking members to host some type of event to shine a spotlight on their community's treasures: the people they serve. Visit www.AAHSahomecoming.org to get program ideas and tell us what you're planning.

Do You Know an Emerging Leader in Aging Services?

Encourage him or her to [apply](#) for Leadership AAHSA. This year-long learning experience is designed to identify and support emerging leaders who will create the future of our field. Applications are due by May 15. Join your GAHSA colleagues who have already participated in this amazing program as AAHSA Fellows!

AAHSA MedAssets Group Purchasing Program

AAHSA recently partnered with MedAssets Supply Chain Systems to form one of the largest, fastest-growing GPOs in the field! We've created the largest buying pool of not-for-profit aging-services providers.

What does that mean for you?

- Access to more than 400 manufacturer and distributor contracts at discounted prices.
- Free AAHSA Member Benefit.
- "Best of breed" portfolio and pricing matrix.
- No obligation to purchase anything.
- AAHSA and your state association receive revenue on your purchase, which can contribute to lower annual dues.

[Enroll today!](#) [Learn more about the program!](#)

The Aging Consumer: A New Generation

This [research digest](#) from AAHSA features summaries of credible and informative research that can shed light on the issues older consumers will face in 2016 and beyond. Taken together, the resources paint a portrait of future long-term care consumers as individuals, recipients and purchasers of health care, members of families and communities and workers and retirees.

AAHSA Member Benefit Spotlight: *Quality First Providers' Checklist*

As I shared in my session at last month's GAHSA conference, the [Quality First Providers' Checklist](#) is a great tool to help you assess quality within your organization

This [recently updated version of the Checklist](#) includes several new characteristics of the ideal aging-services organization, building on the previous edition. Use it as a tool to help your organization identify areas of strength and for growth.