

ProCARE NEWS

ProCare Therapy Services Newsletter 3rd quarter

2016

FALL is Here!

Fall and football weather are finally here! Enjoy the fall color, and also remember that fall is the beginning of cold and flu season. Be careful, get your flu shot, and look out for one another! Also, check in at ProCare Therapy Services, LLC on Facebook and our website at www.procaretherapy.net !



WELCOME!

ProCARE welcomes new members of the PCT family: Martin Broyles, PT, Ash Flat; Stephanie Fletcher, PTA, RD, Southern Hills Greenhouses; Ashley Thornton, PTA, Wentworth Greenhouses; Robin Snider, SLP, Walnut Ridge; Andrea Welch, COTA, BelleView. Extend a friendly fall welcome to our new therapists!

Governor's Quality Award Banquet:

Brian Brady, John Montgomery, Donna Joyce, CeCe Todd, Brandon Boswell, Billy Holmes represent ProCare Therapy Services,

Believe in yourself!

Have faith in your abilities! Without a humble but reasonable confidence in your own powers you cannot be successful or happy.

- Norman Vincent Peale



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- Welcome new ProCare Therapists!
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Clinical Corner: Balance The list of sub-topics related to Falls in Skilled Nursing Facilities is exhaustive... Fall Investigations, Falls & Medications, Fall Prevention, Fall Intervention, Fall Strategies, Fall Assessments, Fall & Quality Star Ratings, and Fall Screening are just the tip of the iceberg.... And we haven't even left the starting block to address treatment.

This clinical corner tackles a key treatment subtopic related to falls: Balance Systems.



Remember, no matter the amount of patient strength that is recovered or pain reduced, he or she will still fall if balance deficits are not addressed: Be conscious of which balance systems you incorporate into your treatment, and design purposeful interventions to achieve the maximum response from those primary balance systems.

Balance system simplification: We achieve our balance by 3 primary systems, the Vestibular, the Visual and the Somatosensory. All three systems are used in maintaining and regaining bal-

ance, however different systems are primary at different stages of life.

The vestibular system is the first of the 3 primary systems used in balance, most sensitive in children, and responsible for their delight in merry-go-rounds and swings. It is the complex sensory and neurological system that coordinates movement and balance, translating signals from the inner ear, to neural pathways in the brain and structures in the eye. When we are children, we rely most heavily on the vestibular system.

As adults, we shift much of our balance bias to the Visual system, as our vestibular system becomes less sensitive. This is literally supported by our vision and scanning the environment. Low light and darkness is thus more likely to result in loss of balance in an adult, than in a child. Finally, in as we age and move into geriatrics, the Somatosensory system becomes primary.

The Somatosensory support for balance comes via stimulus to our joints, muscles, and body through vibration, weight bearing, movement, position and external sensory input. The soma-

tosensory system that is related to balance is reinforced by proprioceptors.

Geri-chairs, wheelchairs, anything that inhibits or limits movement and stimulus, including inaction, will impact this system negatively. Think use it or lose it. The somatosensory system is the last and best system in the body's fight for balance.

When therapists keep the basics in mind, we can design and build global interventions, provide more complete recommendations to staff, and most importantly avoid cookie-cutter treatment. We know that adequate trunk strength and postural mechanisms are required to support normal movement of the lower and upper body. We accept that baseline strength, endurance and coordination are requisite. We must also remember a patient can achieve all of the above, but without balance intervention and improvement, falls will still occur, and mobility will be limited.

As therapists, we should stimulate all systems, but the somatosensory system is our primary battle.

ProCARE Therapy Services, LLC Receives Governor's Quality Award, Commitment Level

Twenty-seven organizations from throughout the state were presented Arkansas Governor's Quality Awards by Governor Asa Hutchinson during the 22nd Annual Award's Celebration for the Governor's Quality Award Program on Tuesday evening, September 20th at the Marriott Hotel in downtown Little Rock. More than 300 business and civic leaders from throughout Arkansas attended the celebration.

ProCare Therapy Services, LLC was one of six organizations presented with the Commitment Level Award. **Professional Nursing Solutions, LLC**, a partner in care in many client facilities also achieved the Governor's Commitment Level Award.

The awards ceremony includes four award levels of Performance Excellence (in descending order of qualifications): the Governor's Award (1), the Achievement Award (1), the Commitment Award (6) and the Challenge Award (19). The number of awards presented at each level is indicated by parentheses. As well as the recognition, recipients receive an in-depth evaluation of their management systems and a written feedback report citing strengths and areas for improvement.

DD&F Consulting Group of Little Rock took top honors in receiving the Governor's Award for Performance Excellence. The Achievement Level Award was presented to North Arkansas Regional Medical Center of Harrison.

Several ProCare client facilities received Challenge Level Awards. They include:

Belle View Estates Rehabilitation and Care Center, Monticello; Brookridge Cove Rehabilitation & Care Center, Morrilton; Courtyard Gardens Health and Rehabilitation Center, Arkadelphia; Courtyard Rehabilitation and Health Center, El Dorado; Garland Nursing & Rehab Center, Hot Springs; The Green House Cottages at Wentworth Place, Magnolia; Harrison Rehabilitation and Health Center, Harrison; Pocahontas Healthcare and Rehabilitation Center, Pocahontas; River Chase Rehabilitation and Care Center, Morrilton; River Ridge Rehabilitation and Care Center, Wynne; Rogers Health and Rehabilitation Center, Rogers; Sheridan Healthcare and Rehabilitation Center, Sheridan, and The Woods of Monticello, Monticello.

The goal of the Governor's Quality Award Program is to encourage Arkansas organizations to engage in continuous quality improvement, which leads to performance excellence, and to provide significant recognition to those organizations. Created as a not-for-profit organization, the program is dedicated to assist in building a strong infrastructure for Arkansas business.

That dedication is reflected in the program's vision to be a catalyst for excellence in organizational performance. The Governor's Quality Award program partners with the Arkansas State Chamber of Commerce. The Governor's Quality Award Executive Director, Sue Weather with the Arkansas State Chamber of Commerce, works tirelessly each year coordinating the resources and personnel for a successful year.

BCPI; In Brief

BPCI stands for Bundled Payments for Care Improvement Initiative. There are currently 4 voluntary Bundled Payment models that have created alternative payment methodology based upon episode of care rather than payment for services.

The CJR (Comprehensive Joint Reform) is also a Bundled Payment model, but unlike the first 4 models, it is an example of an involuntary payment model. Another involuntary model, Cardiac, is scheduled for 2017.

Broadly speaking, CMS (The Centers of Medicare and Medicaid) have created these alternative models in order to base payment on episode and diagnoses, rather than on quantity of services.

A target dollar amount is assigned to a diagnoses group, and providers are expected to stay within that target amount, and to achieve minimum targeted outcomes, within the episode period.

The episode period has been defined as ninety days post hospitalization, and all services received during that period, with few exclusions, apply to that target amount.

THE ACT COALITION?

Has anyone ever heard of the ACT coalition? It's an important effort toward brainstorming improved patient care... and there is a coalition near you!

ACT stands for Arkansas Care Transitions, and it is part of a Quality Innovation Network sponsored by CMS. ACT encourages the healthcare providers to work together to reduce hospital readmissions and obstacles to recovery. Specifically, a key target of the coalition is to identify and address the underlying factors impacting problems with transitions of care that result in increased hospital readmissions during the first thirty days.

The ACT Coalition is a state-wide coalition comprised of smaller regional coalitions. The challenge is in tackling avoidable readmissions, increasing medication safety, improving patient satisfaction with discharge care and improving overall care coordination among health care providers. The goal is to reduce hospital readmissions in the Medicare program twenty percent by the year 2019.

The regional coalitions are focused on the actual processes of care along the entire

continuum, not just the hospital. Representatives within the coalition are diverse, and include dialysis facilities, home health agencies, skilled nursing facilities, pharmacies, families, payers, patients, Federally Qualified Healthcare Centers, physician offices and stakeholders. Uniquely, the members are not homogenous, but include direct care workers, case management, supervisory and executive staff, and community members. ProCare Therapy Services, LLC is one of many healthcare providers actively involved in this effort.

The objective of each of these community-based coalitions is to improve thirty-day readmission rates in those communities where sixty percent of Medicare Fee-for-Service beneficiaries live. The coalition will also target populations that are eligible for both Medicare and Medicaid, multiple chronic conditions, behavioral health issues, Alzheimer's, dementia and lower socioeconomic status deterrents including transportation or lack of food.

Why the ACT coalition? Because it allows many healthcare providers to come together to share ideas and experience to further benefit the patients they serve!

BELOW: Mount Vista Rehabilitation & Health, celebrate superpowers on Cartoon day! Superwoman, Christine Wilson, Administrator, along with a spirited nursing staff and ProCare's Pac-Man Therapists are all in! (ProCare PacMan/Women: Kassy Gattis, Caitlynn May, Dan McFerran and Elizabeth Gladden)



The MDS Minute: Section GG

October 1 is the yearly date for implementation of many Medicare and MDS changes related to the annual CMS Final Rule. The Impact Act of 2014 spurred many of the 2016 changes. Among these, Functional Status and Change in Cognition are critical areas of emphasis (MDS Sections C / Cognition, Section J/Falls, and Section GG /Mobility and Self-Care.) Section GG is the required admission and discharge assessment that is part of the Impact Act's emphasis on outcomes and using standardized assessment language.

Section GG differs from standard MDS assessments and assessment periods. The section GG assessment is completed only during the first 72 hours of admission and the last 72 hours prior to discharge. The functional areas covered in section GG include specific measures of eating, oral hygiene, toilet hygiene, sit to lying to sit, sit to stand, chair to bed to chair transfers, specific distances walked, distance walked with defined turns. Unlike other MDS assessment instructions, section GG asks what the patients "usual" performance looks like during key functional areas. Also, the section GG assessment period is a 3-day period rather than a 5-day period. Section GG is required for Medicare A patients as an outcome measurement across many providers, including Skilled Nursing Facilities, Home Health and Inpatient Rehab Facilities.



Contact Us

501-725-0379

Give us a call for more information about our services, more information about your facility... or more information about *you!*

ProCare Therapy Services,
LLC

procare@procaretherapy.net

www.procaretherapy.net

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ProCare Therapy Services, LLC
P.O. Box 23834
Little Rock, AR 72221

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