



2019 Spring Conference & Solution Expo
The Meadows Conference Center
Altoona, IA
May 1-2, 2019

The 2019 LeadingAge Iowa Spring Conference, **What IF**, features more than 40 educational sessions designed to reach all types of long term supports and services professionals. It's the only Iowa conference focused on CCRCs and the aging services continuum of care and offers unparalleled networking opportunities to build camaraderie with long-time friends and new acquaintances. This conference continues our unparalleled commitment to high quality education that serves the interests and needs of all aging service providers – long term care, assisted living, independent living, and home and community-based service programs. Topics for this year's conference include the new Patient-Driven Payment Model (PDPM), Phase III of the Requirements of Participation, dementia care, strategy, finance, compliance, marketing and fundraising. Updates from the State Fire Marshal's Office, OSHA, and DIA for both long term care and assisted living are sessions that are always popular.

What if? Why not? We are lucky. As aging services providers, it's easy for us to see the value of our work. The lives we touch and the families and caregivers we support all have an impact well beyond the walls of our organizations. **What if** we became fully involved in living? **What if** we embraced the adventure of living well at every age? Our field is no longer about bricks and mortar or programs and services. It's about considering the possibilities with older adults when asking...

What if we were more passionate?

What if we embraced new ideas without any reservations?

What if we freely considered different perspectives?

What if we empowered our teams to take more strategic risks?

What if we could achieve more with new partners?

What if we had confidence to step outside the box, out of our lane and beyond our comfort zone?

What if we dreamed without limits?

What if we focused on our missions instead of our tasks?

What if we helped people find passion and purpose?

What if we made life better for older adults, or staff, our communities, and our STATE?

What if? Why Not?

It's going to be a great conference filled with fantastic speakers and celebrations, interactive and informative sessions and more meaningful connections than you can imagine.

101

Not Documented, Not Done...What Does the CDM Need to Cover in the Clinical Record

Knowing what is required and necessary as the nutrition and foodservice director regarding the interdisciplinary team and clinical recordkeeping is paramount to providing optimal nutritional care to your residents. A strong partnership with your registered dietitian, facility medical director and nursing staff is essential to meet the goals and needs of those in your care.

- Develop a partnership with the IDT to meet the dietary needs of residents.
- Establish recordkeeping practices that optimize the nutritional care of residents.

Barbara Thomsen, CDM/CFPP RAC, MDS/Nutrition Education/Regulatory Consultant, BT Healthcare Consulting, Norwalk

102

OSHA for Long Term Care and Assisted Living

Knowledge is power. Nowhere is that more evident than with workplace safety and health compliance. OSHA enforcement inspections can result in citations that are time consuming and expensive. How can your organization avoid violations? During this session, we will discuss frequent citations in the industry. The focus will be on what OSHA cites and how to prevent citations. Appropriate for skilled nursing and assisted living communities.

- Identify frequent citations in skilled nursing and assisted living communities.
- Describe how your organization can prevent OSHA citations.

Russell Perry, Safety and Health Consultant/OSHA, Iowa Division of Labor, Des Moines

103

Transitions in Care - BE Successful!

It is common for residents in the long-term care continuum to be transferred from one care setting, level of care, or caregiver team to another. It is also all too common for adverse events and avoidable complications to occur as a result of poor communication and coordination among caregivers, health care professionals, and the resident during such transitions. Poorly executed care transitions increase hospital readmissions, duplication of services, and waste of resources. Poor transitions are the leading cause of medication errors, which frequently result from lack of coordination between prescribers across settings. It is often unclear which practitioner is responsible for the resident in the interval between discharge from one setting and admission to another. Some older adults are at particular risk for transition problems following a hospitalization. When we ensure continuity of care for older residents during care transitions, we can improve outcomes, and the rate of avoidable rehospitalization can be reduced. Come and learn the barriers we face in those transitions, and discover successful strategies for more effective practice, resulting in positive outcomes.

- Define the risks associated with transitions in care.
- Identify the barriers that exist in the health care continuum and can contribute to poor transitions of care.
- Discuss successful strategies for care transitions to boost positive outcomes and reduce hospital readmissions and potential medication errors.

Catherine R. "Cat" Selman, BS, President and Co-owner, The Healthcare Communicators, Vonore, TN

104

PDPM: What You Need to Know

Effective October 1, 2019, the Centers for Medicare and Medicaid Services (CMS) will replace the Resource Utilization Groups (RUGs) payment system with a new model called Patient-Driven Payment Model (PDPM) for Medicare Part A payment for skilled nursing facility (SNF) care. This new payment model will create significant new opportunities and challenges for SNF providers, including: the opportunity to treat more medically complex patients, increased emphasis on accurate coding, and imperatives to carefully manage lengths of stay and evaluate provision of therapy. In some markets and for many providers, the changes will be significant and require an assessment of facility operating systems and culture. Understanding the new system will be critical to future success.

- Identify the changes from CMS in the Medicare payment methodology effective October 1, 2019.
- Evaluate how these changes will affect SNF revenue streams and opportunities to treat more medically complex patients.
- Understand how to fully manage lengths of stay with increased expectations for accurate coding.
- Implement take-home strategies to retool SNF operations to gain market share and optimize reimbursement in PDPM.

Darrin Hull, NHA, EVP, Consulting, Health Dimensions Group, Minneapolis, MN

Erin Shvetzoff Hennessey, MA, NHA, CPG, Chief Executive Officer, Health Dimensions Group, Minneapolis, MN

105

Behavior and Psychological Symptoms of Dementia - Detection and Management

Behavioral and psychological symptoms of dementia (BPSD) are very common and frequently misunderstood. BPSD represents a group of symptoms and behaviors occurring in patients with dementia and constitute a major component of the dementia syndrome irrespective of its subtype. They are as clinically relevant as cognitive symptoms as they strongly correlate with the degree of functional and cognitive impairment. BPSD includes agitation, aberrant motor behavior, anxiety, elation, irritability, depression, apathy, disinhibition, delusions, hallucinations, and sleep or appetite changes. BPSD affect up to an estimated 90 percent of all dementia subjects over the course of their illness and are independently associated with poor outcomes, including distress among patients and caregivers, long-term hospitalization, misuse of medication, and increased health care costs. Dr. Shah will help attendees understand how to prevent behavior problems and manage BPSD with and without medications.

- Identify different types of behavior changes due to dementia.
- Outline ways to prevent behavior problems.
- Manage BPSD with and without medications.

Yogesh Shah, MD, MPH, FAAFM, Geriatrician, Director of Palliative Care, Broadlawns Medical Center, Des Moines

106

CRM: Understanding the 'Why' Behind the Effort, Picking the Right Software and Best Practices

If your sales and marketing teams are not fully utilizing a customer relationship management (CRM) technology, know that your competitors are, and they hope you don't catch on. This session will go in-depth as to the "why" behind investing resources, time and energy into implementing a successful CRM—all from the perspective of someone not selling a CRM system. We'll also go through things you should consider when looking at the plethora of software options. In addition, real life examples and best practices will be shared to ensure tangible takeaways on how to utilize CRM are gained by attending this session.

- Understand how to select and implement CRM software.
- Discuss best practices and outline why CRM is essential for marketing in today's environment.
- Identify how CRM can positively impact census, revenue and marketing spend - all from the perspective of someone not selling a CRM system.

Ward Phillips, Corporate Director of Sales, WesleyLife, Johnston

201

QAPI in the Kitchen: How to Create Your Measurable Goals!

What is the CMS QAPI process and how should you as the dietary leader include your staff and systems into a solid written plan that meets your facility's QAPI committee goals?

- Create written plans to meet the needs of residents.
- Collaborate with the QAPI committee to meet the goals of resident centered care.

Barbara Thomsen, CDM/CFPP RAC, MDS/Nutrition Education/Regulatory Consultant, BT Healthcare Consulting, Norwalk

202

Assisted Living Fire Safety/Fire Code Updates

This session will focus on the fire safety regulations for assisted living programs. Frequently cited deficiencies will be reviewed as well as plans of correction. We will review the reports that are required that the fire marshal wants to see and discuss expectations for plans of corrections.

- Identify the top cited deficiencies in assisted living programs.
- Develop satisfactory plans of correction.

Kyle Gorsh, Fire Prevention Bureau Chief, Fire Marshal's Division, Iowa Department of Public Safety, Des Moines

203

The Art of Critical Thinking: Enhancing Resident Safety (Part 1 of 2)

The source of resident injury can often be traced to a lack of critical thinking skill use. When cases are examined, one of the top contributing factors in malpractice claims in senior living and skilled nursing settings are errors in clinical judgment. Critical thinking and clinical reasoning are the components of clinical judgment. Critical thinking aids care team members in interpreting clinical situations accurately and timely. Critical thinking is also the corner stone of organizational Quality Assurance and Performance Improvement (QAPI) programs. Organizational leaders can foster, encourage and develop critical thinking skills among the health care team members which will enhance performance improvement processes, data analysis, and training programs. Part 1 of this session will examine the basics of critical thinking and essentials of QAPI. Part 2 will focus on the application of critical thinking skills to go beyond simply meeting the QAPI regulatory requirements to implementing an effective QAPI program that reduces the risk of injury to residents. [Continues in session 303.]

- Apply critical thinking skills and tools to an effective organizational QAPI program implementing the twelve steps and beyond.
- Identify steps to develop a culture of critical thinking in your organization beginning at recruitment and continuing through retention and re-recruitment.
- Develop techniques to enhance and reinforce the use of critical thinking skills by the care teams.
- Employ scenario-based learning using case examples and root cause analysis learnings to teach and develop critical thinking skills.

Dr. D. Michelle Kinneer, PhD, JD, MSN, RN, CPHRM, CHPC, CHC, Senior Risk and Patient Safety Consultant, MMIC, Minneapolis, MN

204

Iowa Medicaid Nursing Facility Update

There are several changes related to nursing facilities and the Iowa Medicaid program anticipated this summer and over the next couple of years. This session will address the planned changes for the Quality Assurance Assessment Fee (QAAF) program effective July 1, 2019 and provide some helpful reminders about the new Medicaid cost report changes that became effective for cost reports with fiscal year end in 2019. The session will also review why Iowa Medicaid payments for nursing facilities will need to change as a result of Medicare's transition to the Patient-Driven Payment Model (PDPM) and the state's timeline and plan for addressing those issues.

- Identify the changes to the Quality Assurance Assessment Fee for Iowa nursing facilities effective July 1, 2019.
- Discuss how Medicare's transition to the PDPM in October 2019 will impact Iowa Medicaid payments for nursing facilities and the state's plan and timeline to adapt to those changes.
- Gain insight into key areas of change in the new Medicaid cost report for nursing facilities.

Andrew Johnson, CPA, Senior Manager, Myers and Stauffer, LC & Fiscal Consultant for Audit and Rate Setting, Iowa Department of Human Services, Des Moines

205

What Do I Say? The Commonsense Approach to End-of-Life Care

At the beginning of the 20th century, most people died in their own homes. It is estimated that by 2020 nearly one in two persons will die in a nursing facility. Our society and culture are in denial of death. When the subject of death is discussed, euphemisms such as "passed away," "expired," or "left this world" are used. Few people actually use the word "died" or "dead." If you are the dying person, knowing that society feels this way, how do you cope with your feelings and the dying process? How does your family deal with the process? This session will teach your staff skills and techniques, empowering them to provide the needed services that can positively impact an elder's end of life - learning how to enrich and improve the quality of life remaining.

- Summarize skills and techniques to communicate with families and residents about the dying process and help them cope.
- Implement strategies to enrich and improve the quality of life for a dying person in your community.

Catherine R. "Cat" Selman, BS, President and Co-owner, The Healthcare Communicators, Vonore, TN

206

Turbocharge Your Website and Digital Marketing: The Complete Strategy for Content and Conversions (Part 1 of 2)

Success! You're producing content and traffic is up. But the visitors are not converting into leads. In this session, you'll learn to take your website and marketing to the next level. You'll learn what content inspires action and how to maximize demand from every page. [Continues in session 306.]

- Recall why most websites fail according to 12 years of research.
- Discuss how to find and answer key questions for your visitors.
- Find the hidden connections between sales and marketing.
- Identify how to leverage evidence to make your content more compelling.
- Discover the one aspect of a call-to-action that makes the biggest difference.

Andy Crestodina, Co-founder and Chief Marketing Officer, Orbit Media, Chicago, IL

301

New Survey Process for Nutrition Services

This session will take an in-depth look at the similarities and differences of the kitchen and dining observation tasks and staffing and competency requirements for nutrition services under the recently implemented Long Term Care Survey Process (LTCSP). In addition, DIA will provide tips and best practices to achieve overall compliance with your nutrition services program; all while moving towards or strengthening your person centered care delivery models.

- Discuss the differences between the kitchen and dining observation survey tasks.
- Recognize the requirements and expectations of the staffing and competency requirements for nursing services personnel.
- Identify best practices to achieve compliance with your nutrition services program.

- Discuss the State and Federal staffing and competency requirements for nutrition services.

Patrice Fagan, RN, BSN, Assistant Division Administrator & Bureau Chief, Health Facilities Division, Iowa Department of Inspections and Appeals, Des Moines

Sandra Frahm, RD, LD, Health Facilities Surveyor, Iowa Department of Inspections and Appeals, Des Moines

302

Long Term Care Life Safety Code/Emergency Preparedness

This session will focus on the fire and life safety regulations for nursing homes and the new emergency preparedness regulations. It will cover an overview of the Life Safety Code (LSC) including the top 10 LSC violations and trends related to citations for emergency preparedness. We will review the submittal of plans of correction. There will be time to ask questions during this session. This session will focus on nursing homes.

- Identify the top 10 life safety code violations and trends for emergency preparedness citations.
- Develop satisfactory plans of correction.

Kyle Gorsh, Fire Prevention Bureau Chief, Fire Marshal's Division, Iowa Department of Public Safety, Des Moines

303

The Art of Critical Thinking: Enhancing Resident Safety (Part 2 of 2)

This is a continuation of session 203. See session 203 for description and objectives.

Dr. D. Michelle Kinneer, PhD, JD, MSN, RN, CPHRM, CHPC, CHC, Senior Risk and Patient Safety Consultant, MMIC, Minneapolis, MN

304

PDPM: Operational Implication and Imperatives

The transition to the Patient-Driven Payment Model (PDPM) will, in many cases, require providers to retool and pivot their operations to capitalize on new opportunities in their markets. During this session, HDG thought leaders will discuss a wide range of considerations that all providers must keep in mind as they prepare for implementation: assessing markets for new or untapped opportunities; analyzing diversification of service lines to match market demand; exploring clinical reimbursement considerations to optimize revenue, including coding the MDS; and analyzing ancillary service delivery and other cost considerations.

- Discuss the importance of accurately assessing an individual's needs upon admission based on patient characteristics instead of potential service utilization as a determinant of payment.
- Identify the areas that need extra vigilance and training to capture appropriate reimbursement by reviewing the October 2018 changes to MDS coding.
- Evaluate the provision of therapy and move from a focus on therapy minutes to a focus on functional outcomes, including what that means for the type of partnership between therapy and nursing.

- Recognize the challenges and opportunities for SNFs by enhancing clinical capabilities to be able to take on a more clinically complex caseload.

Erin Shvetzoff Hennessey, MA, NHA, CPG, Chief Executive Officer, Health Dimensions Group, Minneapolis, MN

305

Responding to Challenging Behaviors

In many cases, facility staff have not been properly trained to deal with challenging behavior. As a result, staff continue to simply *react* to behavior, as opposed to *preventing* or *minimizing* the behavior. Effective support and treatment of residents or clients who exhibit challenging behavior depends on being able to understand both the "function" that the behavior serves for the individual and the causal factors. Often, behavior that might be seen as maladaptive, crisis-causing, or catastrophic makes sense within the context of a particular person's life (i.e., gets them what they want and away from what they don't want). This session will teach assessment techniques that identify variables that predict and maintain problem behavior and improve the effectiveness and efficiency of behavioral support plans. Common sense, "down-to-earth" techniques for dealing with specific behavioral issues will be addressed in depth. Both federal and state surveys are now taking a closer look at behavior management programs in facilities. Will your programs and interventions stand up to that scrutiny?

- Identify assessment techniques for identifying variables that predict and maintain problem behavior.
- Implement effective and appropriate techniques to deal with specific behavioral issues.

Catherine R. "Cat" Selman, BS, President and Co-owner, The Healthcare Communicators, Vonore, TN

306

Turbocharge Your Website and Digital Marketing: The Complete Strategy for Content and Conversions (Part 2 of 2)

This is a continuation of session 206. See session 206 for description.

Andy Crestodina, Co-founder and Chief Marketing Officer, Orbit Media, Chicago, IL

401

Ethical Decisions to Honor Residents' Person-Centered Diet Choices While Managing the Risk

Resident advocacy has taken a giant step forward with the newest regulations for long term care facilities which require the residents' choice. This ethical scenario becomes more complicated when a resident has cognitive deficits or when they do not agree to the recommended diet. This course will address the legal requirements within the perspective of person centered care, to include care planning and informed consent, risks, case studies and waivers vs documentation.

- Cite the CMS regulations which reference the resident rights regarding their choices and decisions affecting their care.
- List the disadvantages of diet waivers and advantages of recommended interdisciplinary documentation of the residents' choice.

- Identify the steps of care planning and informed consent regarding a resident's choice of dietary plan.

Lisa Milliken, MA, CCC-SLP, FNAP, Education Specialist, Select Rehabilitation, Atascocita, TX

402

Emergency Preparedness Planning - Surviving the Unthinkable

When a disaster strikes will your facility be prepared? During times of emergencies, whether natural disaster or a human made event, it is critical that you be ready with a plan that works! This session will focus on the needs of an Emergency Action Plan, what to include and how to successfully test your plan. We will touch on past events with both positive and negative outcomes and lessons learned.

- Discuss the importance of having an effective Emergency Plan.
- Dissect the Emergency Action Plan and create a plan to fit the specific needs of your workplace.
- Implement a successful training program for your Emergency Action Plan.

Mark Abernathy, Director of Safety & Transportation, Western Home Communities, Cedar Falls

403

Medication Regimen Review and Antipsychotic Medications

The "Mega-Rule" - requirements that are so massive, they are being phased in over 3-4 years for long-term care providers. There are 696 pages of surveyor guidance! The new requirements contain guidance on monthly reviews, collaboration with other interdisciplinary team (IDT) members; unnecessary drugs and psychotropic drugs; antibiotic stewardship; gradual dose reductions; and medications being used as restraints. Surveyors have been given examples of deficient facility practice in this area, as well as examples of noncompliance. Cat will be covering the items that surveyors have been instructed to focus on during surveys and providing suggestions in regard to facility practice and process.

- Recall the surveyor focus areas for medication management and antipsychotic medications.
- Identify the necessary strategies and practices to maintain compliance with the requirements of participation related to medication regimen review and antipsychotic medications.

Catherine R. "Cat" Selman, BS, President and Co-owner, The Healthcare Communicators, Vonore, TN

404

Avoiding Everyday Fines and Headlines - Lessons from Department of Appeals Board Opinions and Court Cases

Eleanor Roosevelt said "Learn from the mistakes of others. You can't live long enough to make them all yourself." This session will review recent Departmental Appeal Board cases for survey and certification and recent case law relating to long-term care facilities for lessons-learned. Recent cases have included Section 1557 compliance violations; failure to supervise office

manager's handling of resident funds; failure to monitor water temperatures; failure to have business associate agreements; and inadequately addressing sexual interactions between cognitively impaired residents.

- Identify everyday legal and compliance issues that providers need to know may cause fines and penalties.
- Review lurking weaknesses in everyday practices that could create liability issues.
- Discuss how F-Tags may be stacked when issues arise.

Sean Fahey, Attorney, Hall Render Killian Heath & Lyman, Indianapolis, IN

405

Building a Culture of Purpose

This session is a conversation and exercise in discovering the power of leadership as culture creation. Culture creators communicate clearly and consistently about the three key building blocks for successful, long-term, adaptive organizations: core values, mission and vision. Implementing these building blocks requires intentional processes of enrollment and alignment throughout the organization. Discovering and sharing language and strategies will build a culture on purpose.

- Recall the three primary building blocks for effective culture making.
- Discover the power of identifying core values, clear mission and vision, and how to forge a culture of purpose with these as tools.
- Reflect on their personal values as well as those of the institution they serve - whether identified or not.
- Identify the place dignity has in preserving health and wellness.

Michael Foss, Reverend Doctor, Ahnemann Associates, Norwalk

406

Marketing Spend: Getting the Best Bang for Your Buck

In this session you will be engaged and inspired to think about your own sales process and opportunities for improvement. We will discuss the marketing/advertising budget expectations and how to tailor that to your organization, along with determining the ROI for expenditures so that spending is properly allocated. We will share common pitfalls in the sales process and considerations for developing census.

- Develop renewed ideas and inspiration for approaching their sales position.
- Utilize cutting edge tactics for improving census/census development and customer response.
- Avoid common pitfalls for tours and phone presence.
- Evaluate the successfulness of your marketing budget and advertising costs (Key measurement considerations).

Mary Nell Zellner, MBA, Owner, Consultant, Zellner Senior Health Consulting, LLC, St. Paul, MN
Hallie Salmen, CPA, CEO, Sunrise Retirement Community, Sioux City

501

2019 Legal Updates That Impact Your Organization

Back by popular demand. This session will explore updates in federal and state laws as well as recent cases and enforcement activities that impact long term services and support services (LTSS) and their operations.

- Discuss recent changes to select state and federal laws impacting long term care providers.
- Describe recent cases and enforcement initiatives of state and federal authorities that impact long term care.
- Analyze how new laws, cases and enforcement initiatives impact operations and strategic compliance activities.

Ed McIntosh, Attorney, Partner, Dorsey & Whitney, Des Moines

Alissa Smith, Attorney, Partner, Dorsey & Whitney, Des Moines

Ben Fee, Attorney, Partner, Dorsey & Whitney, Des Moines

502

One World: The Art of Collaboration and Never Saying No

This session will explore what is possible when people come together to learn from each other. There will be specific examples to highlight what could happen if we utilized each other's expertise to improve the quality of care and quality of life for the people we all serve. What collaborations are possible when we think outside the box and work collectively to solve problems? The audience will engage to ask questions and generate new ideas.

- Discuss the value of collaboration among all types of businesses, including; other LeadingAge members, hospitals, summer camps, day cares, schools, hospice, MD offices, Labs, therapy companies, animal rescue groups, pharmacies, universities, etc..
- Explore thinking outside of the "regulation" box and never saying no to an idea, but rather how can we do it?
- Create strategies to engage other business partners in creative partnerships and utilization of resources.

Kim Bergen-Jackson, RN, BSN, PhD, Administrator, Oaknoll, Iowa City

Andrew Maas, RN, BSN, LNHA, Administrator, Briarwood Healthcare Center, Iowa City

503

Competency-Based Staffing – A Systems Approach

This session will review the expectations of competency-based-staffing in phases 2 and 3 of the new requirements of participation (RoPs). In addition, the presenter will offer recommendations for the types of competencies providers should include in their comprehensive competency set as directed by the facility assessment, which includes specific data on the resident population including acuity, diagnoses, ethnic and cultural considerations. Corresponding F-tags and potential deficiencies will also be discussed.

- Describe the regulatory expectations for competency assessment.
- Discuss the relationship between regulations and standards, policy and procedure, scopes of practice, standards of care, professional accountability and system processes for resident safety and wellbeing.

- Outline the next steps in the process of a facility profile

Dawn Carter, RN Consultant, LeadingAgeNY, Latham, NY

504

Finance Function Dysfunction? Assessing/Improving Your Financial Operations

Financial operations are a key component of any organization. This session will help organizations identify the symptoms that may indicate more serious challenges within your organization's finance functions. To help prevent and repair disfunction within financial operations, attendees will learn how to holistically evaluate the structure, processes and systems within their finance and accounting department and to create a roadmap to identify current gaps where improvement is needed and implement a systems approach to the necessary changes.

- Identify symptoms that may indicate more serious challenges within your organization's finance functions.
- Develop an approach to holistically evaluate the structure, processes and systems within your finance and accounting department.
- Create a roadmap to identify current gaps where improvement is needed and implement a systems approach to the necessary changes.

Deb Freeland, Principal, CliftonLarsonAllen, West Des Moines

505

Ageism: Understanding its Effect on Health Care

Ageism or age discrimination significantly affects the mindset of our society. Unfortunately, this includes the unfair premises of many healthcare practitioners. According to a study published in the Journal of General Internal Medicine, one out of five older adults experiences ageism in health care settings and those who frequently experience it have a higher risk of developing a new disability or worsening existing ones. This course will highlight the effects of ageism in health care and challenge us all to be the catalyst to initiate a positive change, which includes our concepts, terminology and prevention of negative stereotypes.

- Define ageism.
- Describe potential risks of ageism in older people.
- List the cited misperceptions of primary care clinicians regarding aging in the domains of physical health, mental health, and cognitive function.
- Provide examples of the impact of the healthcare provider's language choices to an older person's life.
- Identify phrases to change or incorporate into your vocabulary, based on examples from this session.

Lisa Milliken, MA, CCC-SLP, FNAP, Education Specialist, Select Rehabilitation, Atascocita, TX

506

How to Ask for Anything Artfully and Get an Inspired "YES!"

What if you had a specific 3-sentence recipe to ask for anything? What EXACTLY do you say? Marcy's 3-sentence ask will give you a clear path. As she says, "A confused donor doesn't give

and a confused fundraiser doesn't ask." Get crystal CLEAR on exactly how to write and speak an ask. You'll also learn how to apply this ask formula not only to major gifts, but for event sponsors, operations, board service, endowment gifts and annual fund leadership gifts, ANYTHING! You may rock at creating a great relationship, but the gift comes from a clear ask confidently delivered. This session is back by popular request.

- Adopt a vocabulary that is authentic and respectful for all.
- Articulate the engagement needed BEFORE an ask
- WRITE an ask – for anything relevant to the participant.
- Speak the ask.

Marcy Heim, CFRE, PLCC, President and Founder, The Artful Asker, Madison, WI

601

DIA Updates for Assisted Living

This session will provide information on recent updates as well as commonly cited deficiencies for assisted living programs. Attendees will have the opportunity to ask questions during this session.

- Identify the most commonly cited deficiencies for assisted living programs.
- Discuss the trends that DIA is seeing in assisted living program inspections.

Linda Kellen, RN, MS, Bureau Chief, Adult Services/Special Services Bureaus, Department of Inspections and Appeals, Des Moines

602

Key Elements of Compliance Programs Under Phase III of the Post-Acute RoPs for November 2019

This session will provide attendees with an overview of the compliance responsibilities included in the Requirements of Participation (RoPs), and how an organization can build an effective compliance program. The session will outline how to begin building a compliance program by using the seven elements of an effective compliance program as program building blocks. The seven elements of an effective compliance program are 1- Standards of conduct/policies and procedures, 2- Compliance officer, compliance committee, and entity leadership responsibilities, 3- Education, 4- Monitoring and Auditing, 5- Reporting and Investigation, 6- Enforcement and Discipline, and 7- Response and Prevention. Finally, the session will discuss how the attendee can work to secure future compliance program success through ongoing risk and effectiveness assessment, engagement with organizational leaders, and interaction with front-line staff.

- Recall key elements of 42 CFR 483.85 and F895 to make sure your post-acute compliance program is in substantial compliance with the regulations before the November 2019 starting date for surveyors to issue deficiencies for ineffective programs.
- Explain how to revisit an existing post-acute compliance program to make sure it addresses regulations and quality of care issues.
- Identify key provisions likely to be effective to reduce the prospect of criminal, civil and administrative violations and promote quality of care.

Sean Fahey, Attorney, Hall Render Killian Heath & Lyman, Indianapolis, IN

603

QAPI and the Infection Preventionist

This session will cover a review of QAPI and how to incorporate the Phase III Requirements of Participation (ROPs) regarding infection prevention and control, the role of the infection preventionist, and developing an antibiotic stewardship program. The infection preventionist from Oaknoll will share her journey to becoming their specialist and how other communities can prepare for implementation of this requirement of Phase III by November this year. There will be ample time for questions and strategy development.

- Identify how QAPI intersects with infection prevention and antibiotic stewardship.
- Discuss the role of the infection preventionist or infection prevention and control officer.
- Utilize QAPI techniques for creating, modifying, and sustaining IP plans.
- Apply measures of process improvement in Healthcare Associated Infections (HAIs).

Dr. Kim Bergen-Jackson, RN, BSN, PhD, Administrator, Oaknoll, Iowa City

Karen Honson, RN-BC, IP, Infection Preventionist, Oaknoll, Iowa City

604

PDPM: Financial Implications and Modeling

This session will dive into the financial implications of the new Skilled Nursing Facility (SNF) Patient-Driven Payment Model (PDPM) for your organization which will be implemented on October 1, 2019. The session will discuss how PDPM differs from the current RUG system and the potential financial changes. The session will review the CLA PDPM financial model and help attendees understand how to utilize the model and the potential impact the change will have on their individual SNF.

- Recognize how the current RUG payment system determines payment to SNFs, including the limitations of the system.
- Describe how the new PDPM payment system will calculate payment to SNFs.
- Describe the potential impact the payment methodology change will have on your individual organization.
- Utilize the PDPM financial model.

Deb Freeland, Principal, CliftonLarsonAllen, West Des Moines

605

If It's so Easy Why Isn't Everyone Doing It? Setting Individual Leadership Goals is Key to Any Organization's Success

This session will provide hands-on practical advice on how to develop leadership goals for your team. These goals aren't easy to measure, but the process of developing the goals is a big part of the journey. Straight talk and real-time examples will help guide you if you are struggling setting leadership development goals for your team.

- Summarize the importance of setting leadership development goals for their team members.

- Explore how to have difficult conversations related to pushing their team members into developing their own leadership goals.
- Discuss the importance of how individual's leadership potential can positively impact and organizations culture.

Julie Thorson, President/CEO, Friendship Haven, Fort Dodge

606

Be a Successful Development Ambassador! Engagement and Fundraising are TEAM SPORTS!

Everyone has a responsibility, opportunity and role in creating relationships that foster understanding and engagement in the success of their facility. Let's embrace how volunteers and staff can support giving with confidence and comfort! Engaging givers is fun and rewarding IF we are clear on what we need to do and how to do it. Professional speaker, author and development coach, Marcy Heim, will lead you on a fast-paced journey around her Artful Asker Cycle of Successful Relationships.™ Everyone will check off ways they can be comfortable helping NOW! The workshop is supported by Marcy's best-selling book, *Empowering Your Board to Serve as Effective Development*.

- Gain a deeper understanding of the fundraising process.
- Develop a greater awareness of ALL the components of the fundraising relationship – it's more than asking people for money.
- Review ways they can help build these relationships every day.
- Select and commit to taking new action to help moving forward.

Marcy Heim, CFRE, PLCC, President and Founder, The Artful Asker, Madison, WI

701

Change of Conditions in the Assisted Living World

This program will review regulatory requirements and expectations for completion of a Change of Condition. We will provide tools and resources to assist in the evaluation and service plan process. If you struggle to determine what warrants a change of condition, this course will be helpful to you.

- Participants will have a better understanding of what constitutes a Change of Condition based on DIA regulations.
- Participants will review potential trigger which would warrant a Change of Condition.
- Participants will be able to recognize the benefits of effectively completing a Change of Condition to remain in compliance with regulatory requirements.

Theresa Hogenson, BSW, Consultant, Assisted Living Partners, L.L.C.

Barb Schug, RN, BSN, RN Consultant, Assisted Living Partners, L.L.C.

702

Health Assessment: Measuring Holistic Health and Well-Being

How do we measure what we want to achieve? Learn how one organization is making data-driven decisions about programming, health and well-being, and how to better serve residents through a unique and holistic annual health assessment. From design to implementation and use of the results, WesleyLife will share its experience in measuring health and well-being.

- Identify why holistic well-being measurement is important.
- Describe how the survey was implemented across unique locations.
- Recall how results are used to design a better customer experience.

Shannon Draayer, Director of Health and Well-Being, WesleyLife, Johnston

703

DIA Updates for Long Term Care

DIA will share updates and regulatory trends for long term care providers including but not limited to, policy and legislative issues, CMP and enforcement, survey trends and implications of the new RoPs and DIA's plans to enforce them. In addition, latest updates regarding the new unified survey process that was implemented in 2017 will be discussed.

- Identify frequently cited deficiencies in long term care organizations.
- Discuss the new survey process and current trends in the survey process.

Kathy Kieler, RN, BHS, Bureau Chief, Department of Inspections and Appeals, Des Moines

Mindla White, RN, BSN, Bureau Chief, Department of Inspections and Appeals, Des Moines

704

Value-Based Contracting - Preparation and Negotiation

As value-based contracting continues to grow, providers will need to understand how to be prepared and negotiate value-based contracts. This session will review the financial and service delivery model changes that will be necessary to be successful in value-based contracting. We will also review the aspects of negotiating a value-based contract.

- Identify the financial benchmarks to be successful in a value-based contract.
- Evaluating their current service delivery model and implement changes to be successful in a value-based contract.
- Summarize the components of negotiating a value-based contract.

Steven Wermuth, MPA, Partner, Strategic Health Care, Columbus, OH