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Minnesota's Return to Community Initiative and MDS Section Q Working Together

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Today's Presentation

- Review MN Return to Community Initiative
- Understand how MN's initiative and MDS Section Q work together
- Discuss barriers faced since MDS 3.0 went live on October 1

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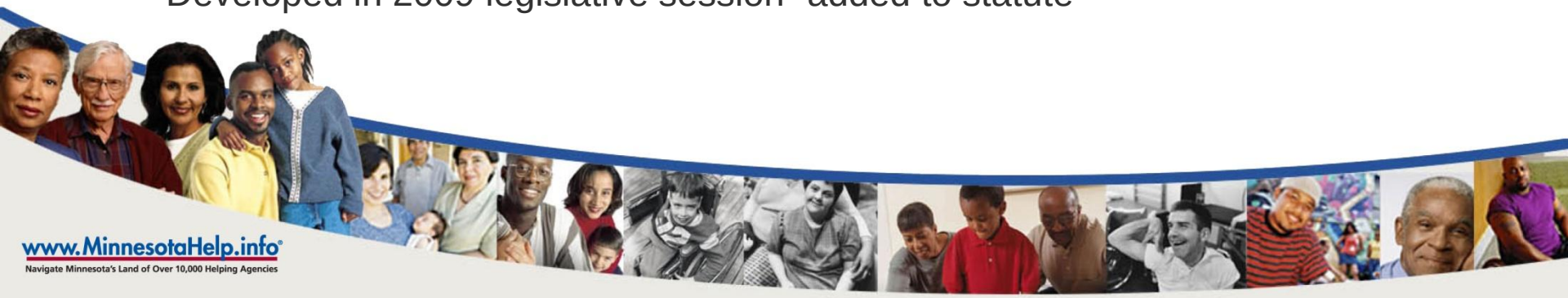
What is the Return to Community Initiative?

- Based on report issued to DHS by the U of MN School of Public Health & the Indiana University Center for Aging Research
  - http://www.dhs.state.mn.us/main/dhs16_148973
- Report analyzed data about nursing home admissions for period of 1 year (2005-2006)
  - Used MDS Data including Section Q
- Built upon the expectations passed in federal law in 2006 which established the Aging and Disability Resource Centers (ADRCs) in every state
- Developed in 2009 legislative session- added to statute



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Return to Community Goals

- Effort to change mindset that nursing homes are best long-term residence for people who have the potential to live successfully in the community
- Facilitate successful transitions from the nursing home to the community
- Respect people's preferences for living and caregiving arrangements
- Use public resources efficiently

Targeting Criteria Developed by Researchers

- Prefer to return to the community and/or have a support person for community care
- Residents early in nursing home stays and still have community ties
- Fit a community discharge profile -- health, functional, or personal characteristics indicating high probability of community discharge

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How does the MN Return to Community Initiative relate to MDS Section Q?

- Nurses and SWs already hired in Fall 2009
- Trained on working with nursing home residents
- Available to provide in-person assessments for appropriate referrals
- Able to build upon nursing home relationships that were being developed with existing initiative

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Benefits of One Toll Free Number

- Streamlined access for nursing homes, consumers and caregivers
- Easy to communicate 1 number across state
- 87 counties and 387 nursing homes
- Section Q calls are triaged to one contact center
- Routine calls are routed to local Area Agency on Aging based on area code

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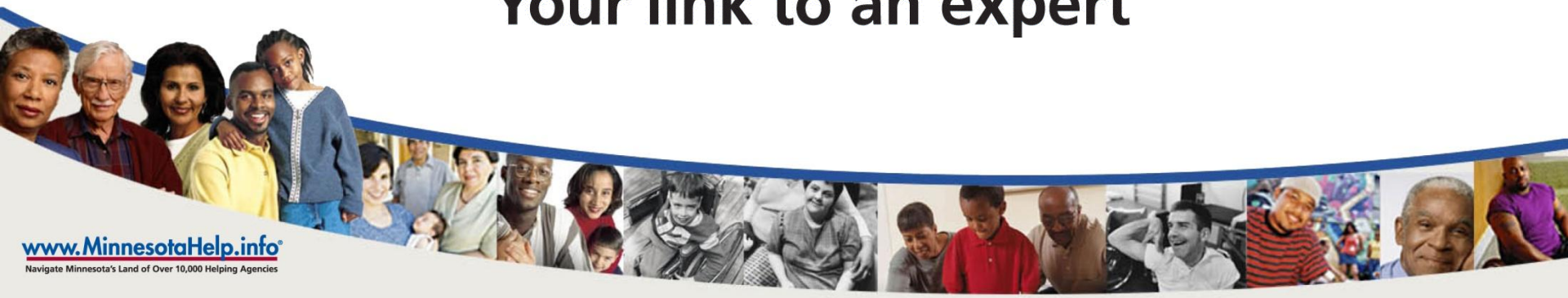
Who is the local contact agency in Minnesota?

Senior LinkAge Line®

1-800-333-2433

www.MinnesotaHelp.info®

Your link to an expert



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Area Agencies on Aging

- 6 Area Agencies on Aging in MN
- Nursing home makes referral to the Senior LinkAge Line® at 1-800-333-2433
- Phone calls from contact center in SW MN are triaged based on caller's need
- Designated staff at each Area Agency on Aging will assist nursing home and consumer
- Phone-based assistance will be provided unless face to face is requested or required
- Long-term care options counseling will be provided to consumers and families

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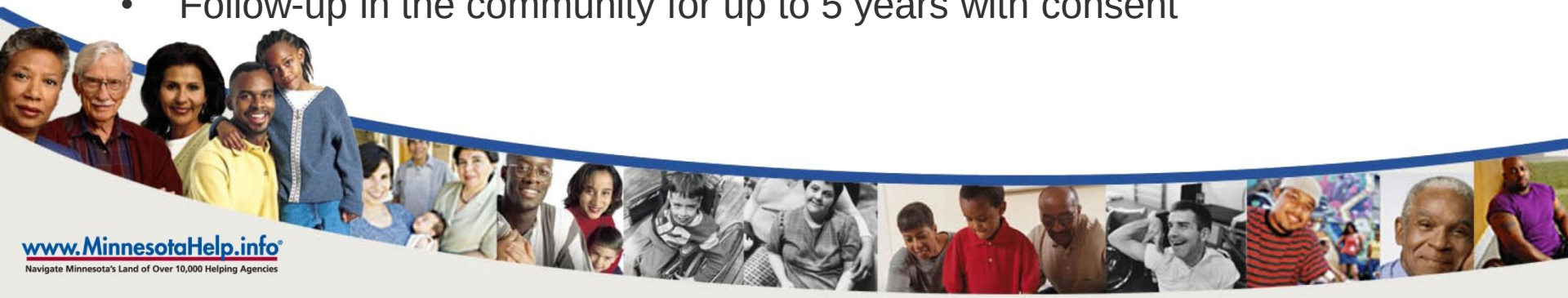
Protocol

- Senior LinkAge Line® staff contacts consumer or family member within 1 business day
- Reviews resources in the community (needs-based)
- Creates support plan through Long-term Care Choices Navigator
  - http://longtermcarechoices.minnesotahelp.info/
  - Mailed to consumer/caregiver and nursing home discharge planner
- Provides follow-up with nursing home to verify discharge status
- Follow-up in the community for up to 5 years with consent



Protocol Continued…

- If consumer is private pay and has been in the facility longer than 90 days, automatic referral to Community Living Specialist for in person visit
- If consumer is private pay and has been in the facility less than 90 days, phone based assistance will be provided
- If consumer is public pay or managed care and has been in the facility longer than 90 days, phone based assistance will be provided
- If consumer is public pay or managed care and has been in the facility less than 90 days, we will make referral to case manager/care coordinator to provide in person assistance

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Communication Strategies

- MN Return to Community initiative launched in April 2010
  - Presentations included info about MDS Section Q changes in October 2010

- Brochure developed for nursing homes about planning for a return home
  - Mailed in July 2010
  - Provided to every new admission

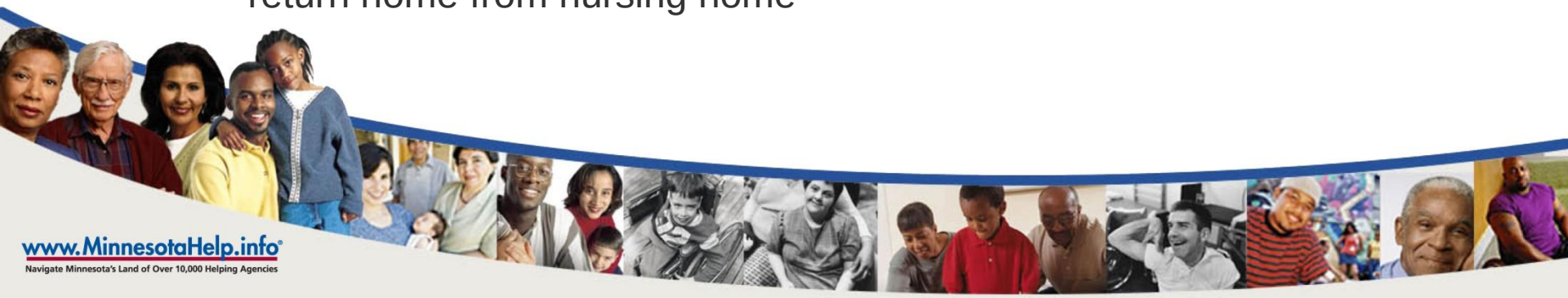
- Joint letter from MN Board on Aging and Dept. of Human Services regarding local contact agency for Section Q
  - Mailed September 2010 to each MN nursing home SW and MDS Coordinator

Lessons Learned from Section Q

- Nursing homes are fearful of survey process
  - Feel every single resident has to be referred to LCA
  - Fear the home will be tagged

- NHs want black and white guidance in RAI manual when resident has dementia or other mental disorder

- MN Return to Community initiative and staff in place- very beneficial
  - Assessment already developed
  - Staff trained to provide in person assistance for those who want to return home from nursing home



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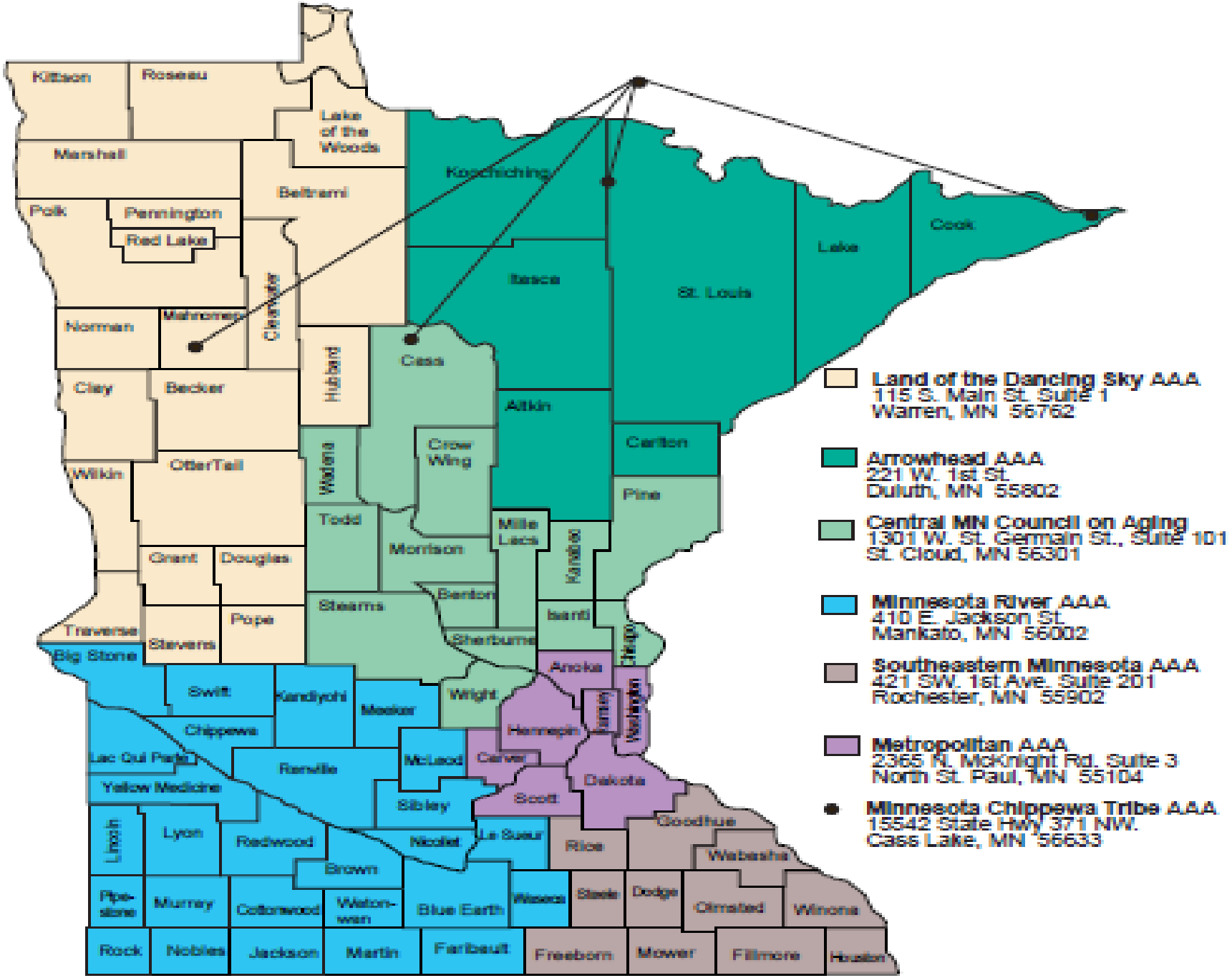
Barriers with MDS 3.0 Implementation

- Due to submission delays, our profile lists have been suspended since middle of October
- Nursing homes have confused the MN initiative with MDS Section Q-making referrals directly to Community Living Specialists
- Overwhelming referrals in October due to fear of non-compliance from their corporate supervisors
  - Have slowed as education is provided about appropriate referrals


Kittson
Roseau
Lake of the Woods
Marshall
Beltrami
Koochiching
Polk
Pennington
Red Lake
Cook
Lake
St. Louis
Itasca
Norman
Mahnomen
Clearwater
Cass
Hubbard
Clay
Becker
Aitkin
Carlton
Wilkin
Otter Tail
Wadena
Crow Wing
Pine
Todd
Mille Lacs
Kanabec
Morrison
Grant
Douglas
Benton
Stearns
Isanti
Traverse
Pope
Stevens
Sherburne
Big Stone
Anoka
Swift
Kandiyohi
Meeker
Wright
Chisago
Chippewa
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Land of the Dancing Sky AAA
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Arrowhead AAA
221 W. 1st St.
Duluth, MN 55802
Central MN Council on Aging
1301 W. St. Germain St., Suite 101
St. Cloud, MN 56301
Minnesota River AAA
410 E. Jackson St.
Mankato, MN 56002
Southeastern Minnesota AAA
421 SW. 1st Ave. Suite 201
Rochester, MN 55902
Metropolitan AAA
2365 N. McKnight Rd. Suite 3
North St. Paul, MN 55104
Minnesota Chippewa Tribe AAA
15542 State Hwy 371 NW.
Cass Lake, MN 56633

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Questions??

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