



# EDUCATION PROGRAM

## AGENDA

Education sessions have been identified by learning level to help you choose the sessions that best meet your needs. Unless otherwise indicated, sessions are considered appropriate for the general audience-providing review and updates as well as emerging knowledge pertinent to the various settings in long term care. The following icons indicate the learning levels and topics of special interest.



### INTRODUCTORY

An overview that covers basic concepts and information.



### ADVANCED

Cutting-edge and/or higher level information on clinical care and management.



### INTERDISCIPLINARY TEAM (IDT)

Designated for those interested in building on the collaborative aspect of long term care.



### BACK BY POPULAR DEMAND



### CMD CREDIT HOURS

Indicates approval by the AMDCP for CMD management education toward certification/recertification as an AMDA CMD. **Sessions without the CMD icon are considered clinical hours.**

### ADDITIONAL DESIGNATIONS INCLUDE:

- CLINICAL MEDICINE
- MEDICAL DIRECTION *(All sessions listed under Medical Direction are approved for management hours toward CMD certification/recertification.)*
- MODELS OF CARE
- RESEARCH

*Please note that the education program is subject to change. For the most up-to-date information on program sessions and speakers, please visit our Web site at [www.LTCmedicine.com](http://www.LTCmedicine.com).*

# THURSDAY MARCH 11, 2010

7:00 AM - 8:30 AM

Welcome Coffee and Breakfast

7:30 AM - 5:00 PM

Foundation Futures Program

8:00 AM - 5:00 PM

## A30 Implementing the Diabetes Clinical Practice Guidelines "Train the Trainer" Workshop

CLINICAL MEDICINE

This workshop provides an overview of the geriatric care process and its impact on care options. Discussion will include documentation of the care process and its role in risk management. Participants will be guided through practical exercises, and be given take home information on facility preparation for implementation by key IDT members including: establishment of policies and procedures; principles of adult learning; creation of a CPG task force; identification of areas for care improvement; matching existing CPGs to problem areas; evaluation of facility readiness and staff skills required for implementation; barriers to implementation; techniques to overcome identified barriers; and how to set up training programs for implementation. Participants will use the diabetes CPG and walk through the process of implementing that guideline.

*Nancy Robinson, MS, BSN; Barbara Resnick, PhD, CRNP; Naushira Pandya, MD, CMD*

**\*This is a full-day session limited to 100 participants. Pre-registration is required.**

**Note: Thursday Intensive Sessions require a 4-day registration.**

## 8:00AM - 11:30AM INTENSIVE SESSIONS

### A31 Controversies of Patient Management in Assisted Living MODELS OF CARE

Assisted living continues to be the most rapidly growing sector of long term care. This session will review issues and controversies in the management of patients in the assisted living setting. Included will be the role of the attending physician, notification policies, the potential role of a medical director, communicating with other members of the IDT, billing and codes, and issues in infection control.

*Speakers to be announced*

### A32 Everything You Wanted to Know About Billing and Coding in Long Term Care

MEDICAL DIRECTION  

This session provides a review of the most recent payment policy, including CPT changes relevant to nursing home services, and discusses lessons learned in their use. Procedural codes, codes with modifiers, coding for care by nurse practitioners, and day-of-death codes are discussed in-depth. Instruction includes case-studies and vignettes as examples and participants are led through a process of determining codes based on modifiers and procedures.

*Alva S. Baker, MD, CMD; Leonard Gelman, MD, CMD*

### A33 Preserving Bone Health: Recognition and Early Treatment

CLINICAL MEDICINE

This session will review the spectrum of bone disorders in the elderly with an emphasis on their impact on function and morbidity. The AMDA CPG on Osteoporosis and its approach to care will be highlighted in the discussion. A case-based approach will be utilized to facilitate clinical recognition, laboratory evaluation, and management.

*Naushira Pandya, MD, CMD; Thiruvinvamalai S. Dharmarajan, MD, FACP; Meenakshi Patel, MD, CMD*

### A34 Management of Depression, Bipolar Disorders, Obsessive-Compulsive Disorder, Chronic Schizophrenia and other Psychiatric Diagnoses in the Non-Demented Residents of Long Term Care

CLINICAL MEDICINE

This session will discuss managing psychiatric illnesses other than dementia in long term care settings. Attendees will learn to recognize and treat depression, bipolar disorder, obsessive-compulsive disorder, and chronic schizophrenia, as well as becoming comfortable with both non-pharmacologic management strategies as well as drug therapies for these conditions. Tips for improving documentation will help with common survey related issues related to psychiatric illnesses.

*Jay S. Luxenberg, MD; Michael Geiser, MD*

### A35 Palliative Care Part I

MEDICAL DIRECTION   

This session combines didactic instruction with interactive educational methods to present an overview of practical approaches to communication, advance care planning, and assessment and control of pain and other distressing symptoms experienced by patients in long term care.

*William D. Smucker, MD, CMD; Peter Winn, MD, CMD; Jennifer Heffernan, MD, CMD*

### A36 Starting and Growing A Long Term Care Ethics Committee

MEDICAL DIRECTION 

AMDA has endorsed the creation of institutional ethics committees in long term care settings, but many medical directors and members of the IDT are challenged by how to begin. Many committees are formed, then struggle to survive. Special ethical issues recur in long term care which differ from the better known hospital models. Different facilities require different models. AMDA's Ethics Committee will co-present models and facilitate actual case discussions to prepare participants to return to their facilities with new skills and experience.

*Jeffrey Nichols, MD and Panel*

## 10:00 AM - 10:30 AM

**Refreshment Break**



# EDUCATION PROGRAM

**11:30 AM - 1:00 PM**

**House of Delegates Business Meeting**

**11:30 AM - 1:00 PM**

**Exhibit Hall Grand Opening**

**1:30PM - 5:00PM INTENSIVE SESSIONS**

### **A37 Transitions of Care: Effective Implementation of Clinical Practice Guidelines**

MEDICAL DIRECTION

In this session, AMDA's long awaited public access electronic version Transitions of Care in the Long Term Care Continuum CPG will be displayed and faculty will demonstrate its use. The accomplishments of AMDA members in transitions of care in their local settings will be highlighted. The panel will discuss the nuts and bolts of the victories and how the overarching principles of the CPGs applied. Panel members will also demonstrate successful projects on improving care transitions.

*James E. Lett, MD, CMD; Jonathan Musher, MD, CMD; Cornelius J. Foley, MD; Joseph Ouslander, MD; Jo Ann Fisher, MSN, FNP-C; Alice Bonner PhD, RN; John H. Potomski, DO, CMD*

### **A38 Effective Interdisciplinary Management of Challenging Behavioral Symptoms in Person with Dementia**

MODELS OF CARE

Effective non-pharmaceutical management of behavioral symptoms require the participation of all members of the IDT. This session presents the process by which challenging behavioral symptoms in persons with dementia are effectively managed by the medical director, attending physician, nursing staff, activities staff, dining staff, social worker, chaplain, consultant pharmacist, rehabilitative services personnel and administration. The session will feature interactive didactic presentations with case studies and a videoconference featuring members of the IDT.

*Stephen M. Vozzella, Alva S. Baker, MD, CMD*

### **A39 Latest Approaches to Difficult Medical Issues in Long Term Care**

CLINICAL MEDICINE

This session presents the latest and sometimes controversial approaches to medical conditions commonly found in frail elders in the continuum of care, particularly in the

nursing home. Topics addressed at this session include hyperlipidemia, heart failure, sleep disorders, behavioral disturbances in dementia, falls, osteoporosis, asymptomatic bacteruria, and swallowing disorders.

*Barbara J. Messinger-Rapport, MD, PhD, CMD; Julie Gammack, MD, CMD; John Morley, MB, BCh; David R. Thomas, MD, CMD*

### **A40 Palliative Care Part II**

MEDICAL DIRECTION

This program provides an overview of practical approaches to ethical decision-making, evaluating benefits and burdens of artificial nutrition and hydration, encouraging spiritual and emotional considerations in end-of-life care, collaboration between nursing homes and hospice, and organizational changes to improve end-of-life care.

*William D. Smucker, MD, CMD; Deborah Way, MD, CMD; Lory Bright-Long, MD, CMD; Anthony Lechich, MD*

### **A41 Managing Your Long Term Care Private Practice**

MEDICAL DIRECTION

The majority of AMDA members report practicing long term care medicine as part of an ambulatory care or academic practice. However, a growing number of members are specializing in long term care. This type of practice presents new opportunities and challenges which include: clinical advantages of a focused practice; opportunity for enhanced productivity; greater likelihood of obtaining medical directorships and potential to justify a higher medical director stipend due to single focus. A medical practice, just like a patient, is a complex assembly of systems and subsystems. For both, the best outcomes are usually obtained through intention, not happenstance. This session will offer 'best practices', models, and resources for primary care physicians who are interested in building a focused long term care medicine practice. Presenters are active AMDA members from the following settings: rural long term care solo practitioner; physician leader of full spectrum geriatric practice; physician leader of long term care multi-specialty practice; and senior management partners from a geriatric practice management company.

*Scott Kuhlman, MBA; Rod Baird, MS; Michael Wasserman, MD; Gregory Zydiak, MD, CMD; Kenneth Kubitschek, MD*

**3:00PM**

**Poster Session Opens**

The scientific posters will be located in Hall A and may be viewed from 3:00pm Thursday, March 11 through 5:00pm Friday, March 12. Poster presenters will be on hand to answer questions Thursday evening from 5:00pm-7:00pm. Attendees who view the posters may claim up to 1 AMA PRA Category 1 Credit™.

**3:00 PM - 3:30 PM**

**Refreshment Break**

**5:00 PM - 6:00 PM**

**C.A.S.T. Welcome Reception**

**5:00 PM - 7:00 PM**

**Welcome Reception in the Exhibit Hall**

**6:00 PM - 7:00 PM**

**New Member Meet and Greet**

**FRIDAY MARCH 12, 2010**

**7:00 AM - 8:00 AM**

**Continental Breakfast in the Exhibit Hall**

**8:00AM - 10:30AM**

**B30 General Session I **

**Opening of Long Term Care Medicine - 2010**

*Matthew S. Wayne, MD, CMD, Program Committee Chair;*  
*David A. Brechtelsbauer, MD, CMD, President*

**AWARDS PRESENTATIONS**

**Medical Director of the Year Award**  
**AMDA Advocate Awards**

**AMDA Foundation Update and QI Award Presentation**

*Daniel L. Swagerty Jr, MD, MPH, CMD*  
*AMDA Foundation Chair*

**KEYNOTE ADDRESS**

**Blue Zones: Secrets of a Long Life**

*Dan Buettner*

New York Times best selling author, world renowned explorer and National Geographic writer, Dan Buettner, has traveled across the globe to discover Blue Zones — hotspots of human health and vitality.

Along the way he has met people teeming with vigor at age 100 and beyond. He and his team identified five small populations with the world's highest life expectancy. Then, he isolated the common denominators that explain extraordinary longevity.

His presentation incorporates National Geographic images that will take you into the world's five Blue Zones, tell stories and instruct how to get more from your life. The presentation debunks the most common myths and offers a science-backed blue print for the average American to live another 12 quality years.

**10:00 AM - 11:00 AM**

**Refreshment Break in Exhibit Hall**

**10:00 AM - 1:30 PM**

**Job Fair in Exhibit Hall**

**11:00 AM - 12:30 PM**

**Workshop 1-Effective Approaches to Common Medical Problems in the Long Term Care Setting**

This workshop will feature a series of cases discussions and allow attendees the opportunity to interact through a team-based approach to discuss the case and treatment modalities. A panel of experts will provide further detail and guidance. Space is limited to 120 participants and Pre-Registration is required. See the registration form on page 38.





# EDUCATION PROGRAM

11:00AM - 12:00PM

## B31 What the Long Term Care Experience Can Teach Us about Implementing the Principles of the Patient-Centered Medical Home

MODELS OF CARE

This presentation will focus on the initiation, development, advancement, potential successes and problems associated with the seven principles of the patient-centered medical home in the long term care continuum. Analysis of the current status of these principles in the continuum provides insight about the potential to imbed these principles in these institutions and care delivery models.

*Kenneth K. Steinweg, MD, CMD*

## B32 Managing Addictive Behavior in Long Term Care

CLINICAL MEDICINE

This session presents an overview of the growing problem of addictive behavior in long term care as the patient population in our facility changes to reflect a different demographic. As attitudes toward drug/alcohol use liberalize, we are faced with individuals who have incorporated drugs and/or alcohol into their lifestyle, and who often attempt to continue use, and even addictive use in long term care as a “right.” We will examine various types of addiction, treatment options, the impact of cognitive impairment/brain injury, and ways we have managed addictive behavior in the long term care setting. Among these are drug testing, prescribing practices, environmental interventions, and educational/therapeutic interventions. A sample contract used for patients on chronic opioid therapy and methods to monitor and approach addictive behavior in relation to pain prescribing will be shared.

*Robert M. Gibson, PhD, JD; Rebecca Ferrini, MD, MPH, CMD*

## B33 Electronic Medical Records: A Model to Save Primary Care in Ambulatory and Long Term Care Settings

MODELS OF CARE

If primary care is a financial struggle and you’re considering an electronic medical record (EMR), this session will offer a unique paradigm for adoption and revenue generation from EMR with practical advice on implementation across various settings.

*F. Michael Gloth, III, MD, CMD*

## B34 The CMS 5-Star Rating System is a Bumpy Road: How to Understand, Improve and Defend Your Quality Measure Score

MEDICAL DIRECTION

The CMS Quality Measures (QM) are part of a complex measurement system used to gauge the quality of care provided by nursing homes, but their use doesn’t stop there. The QMs directly affect survey results, reimbursement levels and the cost of liability insurance. A subset of QMs are used to generate a CMS 5-star Quality Rating that is publicly reported to help consumers select a nursing home. A key question is whether the QMs are up to the challenge of fairly ranking nursing homes? This session will help medical director’s understand how the QMs factor into the Overall 5-Star Ratings and will help to explain facility 5-Star Quality Rating to staff, residents, families, boards and the public in the context of resident populations. The speaker was selected by CMS to participate in a small stakeholder group to review and make recommendations to improve the accuracy of the Five Star Quality Rating system and will report on the progress of the dialogue and status of proposed improvements to the rating system.

*Christie L. Teigland, PhD, MA*

## B35 A Day in the Life of the IDT

MEDICAL DIRECTION

Using vignettes related to patient care, risk management, and quality improvement activities, this interactive session will simulate an IDT meeting that demonstrates how all members of the IDT can communicate and work together to achieve positive patient/resident-focused care and improved clinical and financial outcomes.

*Presented by AMDA’s IDT Advisory Panel.*

## B36 Enhancing the Competencies of RNs Practicing in Nursing Homes

MODELS OF CARE

In 2007, the John A Hartford Centers of Geriatric Nursing Excellence (HCGNEs) began a collaboration to develop methods to strengthen the professional practice of nursing in nursing homes and to improve the quality of care and life for people in these facilities. In 2008, The Institute of Medicine’s “Retooling for an Aging America” recommended that all professionals who provide care to older adults need additional geriatric competencies. This session will provide the audience with an overview of the products and

services being developed by the HCGNEs with a specific focus on two products: Gerontological Nursing Knowledge Assessment Tool and Clinical Resources and Tools: Pain Management.

*Cornelia Beck, PhD; Irene Fleshner, RN*

### **B37 Innovations in End-Of-Life Care Across the Long Term Care Spectrum**

MEDICAL DIRECTION **CMD** 

This session presents three innovative programs from three different settings, all targeted at providing dignified, spiritually sensitive, and maximally comfortable end-of-life experience irrespective of the setting the individual chooses for their final care. The panel will then discuss pearls related to end-of-life care across the long term care spectrum.

*Jay Luxenberg, MD; Elizabeth Eckstrom, MD, MPH; Lydia Lundberg, AS; Lynn Flint, MD*

### **B38 Less is More: An IDT Approach to Appropriate Use of Antipsychotic Medications in Institutionalized Patients with Psychosis Secondary to Dementia**

CLINICAL MEDICINE **CMD** 

This session will highlight an IDT methodology for appropriate indications, monitoring, tapering and discontinuation of atypical and typical antipsychotic in nursing homes. The methodology will show how to substitute antipsychotic medications with IDT approach to manage adverse behaviors. In essence, this approach will substitute inappropriate and unnecessary use of antipsychotic medications with non-pharmacologic alternatives.

*Louis Mudannayake, MD*

### **B39 Treatment of Bacteriuria without Urinary Signs, Symptoms, or a Systemic Infectious Illness [mnemonic-S/S/S]**

CLINICAL MEDICINE

The most contentious reason antibiotics are prescribed for BTU is “Geriatric Manifestations” (confusion, falls) in the absence of urinary signs/symptoms or a systemic infectious illness. This session presents information regarding the futility and dangers of this practice as well as an alternative approach.

*Paul Drinka, MD, CMD*

**12:00 PM - 1:30 PM**

**Cash Lunch in Exhibit Hall**

**1:30PM - 3:00PM**

### **Workshop 2-Effective Approaches to Wound Care in the Long Term Care Setting**

This workshop will feature a series of cases discussions and allow attendees the opportunity to interact through a team-based approach to discuss the case and treatment modalities. A panel of experts will provide further detail and guidance. Space is limited to 120 participants and Pre-Registration is required. See the registration form on page 38.

### **B40 Palliative Care and Hospice in Long Term Care: Options, Opportunities and Pitfalls**

CLINICAL MEDICINE **CMD** 

This session will feature a panel consisting of facility medical directors of hospice with a variety of perspectives on ways to enhance care and outcomes for long term care patients by integrating palliative care and hospice services into the care plan. Panelists will discuss their unique experiences and suggest best practices that may be applied in other facilities.

*William D. Smucker, MD, CMD; Peter DeGolia, MD, CMD; James A. Avery, MD, CMD; Scott Bolhack, MD, MBA, CMD*





# EDUCATION PROGRAM

## **B41 A Systematic Approach to Reducing Inappropriate Polypharmacy**

CLINICAL MEDICINE **CMD** 

This session presents a systematic approach to medication evaluation, with attention to reducing adverse polypharmacy while retaining medications known or having potential to improve outcomes. Educational strategies will include a didactic presentation to set context and provide baseline information. The presentation will highlight regulatory statutes, the risks of polypharmacy, medications associated with withdrawal and other adverse reactions, and published criteria, such as STOPP and ACOVE-3, that physicians can use as guides to identifying inappropriate drug use. Cases will then be presented to illustrate each step in the polypharmacy reduction process, highlighting critical but common examples of inappropriate drug use. The format will allow attendees to learn discontinuation strategies as illustrated by cases. The session concludes with opportunity for questions, answers and shared insights.

*Thomas Lynch, PharmD; Daniel A. Bluestein, MD, MS, CMD; William N. Hovland, MD, CMD*

## **B42 Now What?: Attending Physicians on Trial**

MEDICAL DIRECTION **CMD**

This session presents a lively mock trial of a hypothetical case in which an attending physician was sued for his or her role in the care of a nursing-home patient. The mock trial will include opening statements outlining the case and theories of liability, a sample direct and cross examination of the treating physician, a closing statement, and deliberations by the jury regarding the negligence and liability of the physician.

*Matthew Corso, JD*

## **B43 This Year in Review for Long Term Care**

CLINICAL MEDICINE 

This session presents 12-15 articles published in the past year which have the potential to impact the practice of medicine and the processes of care for frail elders in the continuum of care. All articles are chosen and critically appraised by experienced, multidisciplinary practitioners and educators. This presentation has been well received each year and is often the site of spirited discussion.

*Barbara J. Messinger-Rapport, MD, PhD, CMD; John Morley, MB, BCh; Julie Gammack, MD, C MD; Mary Pat Rapp, PhD, RN*

## **B44 AMDA Foundation: Quality Improvement Awards**

RESEARCH **CMD**

This session will be anchored by an experienced researcher from the AMDA Foundation Scientific Council who will present remarks on the relationship of individual QI initiatives in long term care to larger research projects that strengthen work across the field. Presentations will be followed by the 2009 AMDA Foundation/Pfizer Quality Improvement Award winners who received grants to implement QI project proposals and the 2010 AMDA Foundation/Evercare® Award winners who received awards for projects that had been internally generated and funded by their nursing facilities. All award winning projects were judged to be feasible on a relatively small budget, provide measurable outcomes and objectives, and be easily replicated at other long term care facilities and organizations to promote best practices.

*2009 AMDA Foundation/Pfizer Quality Improvement Awards winners Madelyn Iris, PhD; Joseph Ouslander MD; Kalpana P. Padala MD, MS; Lené Levy-Storms, PhD, MPH; and winners of the 2010 AMDA Foundation/Evercare® Awards for "Improving the Quality of Life for Persons Living in Nursing Homes" who will be announced in January 2010.*

## **B45 AMDA/AGS Joint Session**

CLINICAL MEDICINE 

This session is a collaborative presentation from the leaders of AMDA and AGS. The topic will be determined based on the educational need that reflects the mission of the two organizations. Details of the session will be available via the meeting web site, [www.LTCmedicine.com](http://www.LTCmedicine.com).

**B46 Alternative Integrative Approaches to Managing Pain in End-of-Life**CLINICAL MEDICINE 

This session will stress the importance of consideration of alternative and spiritual approach in end-of-life care. Simple meditations will be demonstrated. The focus will be on the concepts that are common to integrative techniques. A focus on patient centered human and spiritual connection in end-of-life care will be discussed. Attendees will review evidence based approaches supporting non pharmacologic approaches to pain management, including Reiki, Aroma therapy, Massage, Acupuncture, Reflexology and other lineages.

*Harold Bob, MD, CMD; Charles A. Crecelius, MD, PhD, CMD; Niroshi S. Rajapakse, MD, CMD*

**B47 Implementing the AMDA Diabetes Toolkit and CPG and Assimilating New Information into Current Management**CLINICAL MEDICINE  

This session discusses practical ways to transition diabetes care from the acute care setting to the long term care setting using the principles described in the AMDA CPG, while understanding the new studies and how they change treatment strategies.

*Meenakshi Patel, MD, CMD; Naushira Pandya, MD, CMD*


**B48 Culture Change: What is it and What is the Medical Directors Role in Implementation and Evaluation of its Effectiveness**MODELS OF CARE  

This session presents a view of the culture change movement, defining what it is and a variety of ways to implement it in both skilled nursing facilities and assisted living communities. The role of medical director in all aspects of initiating and evaluating culture changing initiatives will be explained. Care studies will be presented as well as tools for evaluating the effectiveness of culture changing initiatives.

*Joyce Simard, MSW; William Keane, MS, MBA, LNHA*

**3:00 PM - 3:30 PM****Refreshment Break****3:30PM - 5:00PM****Workshop 3-Effective Approaches to Infection Control and Treatment of Common Infections in the Long Term Care Setting**

This workshop will feature a series of cases discussions and allow attendees the opportunity to interact through a team-based approach to discuss the case and treatment modalities. A panel of experts will provide further detail and guidance. Space is limited to 120 participants and Pre-Registration is required. See the registration form on page 38.

**B49 Medical Director of the Year Panel Discussion: Stories and Strategies of Medical Directors Who Make an Impact in Their Facilities**MEDICAL DIRECTION  

This panel of 2009 finalists for the Medical Director of the Year award will discuss the different ways that they have found success within their own facilities to help bring about positive results. Panelists will call on their own experiences in helping to improve patient care, impacting quality indicator profiles, educating facility staff, educating attending physicians, assisting in the survey process. The panel will offer a candid discussion of what works and what doesn't. Overcoming common obstacles that get in the way of successful medical direction will be addressed.

*Rebecca Ferrini, MD, MPH, CMD and panel*

**B50 Challenges in Managing a Collaborative NP/MD Practice**MEDICAL DIRECTION 

Collaborative practice between physicians and advanced practice nurses is acknowledged as supportive of improved resident care, but how this best occurs in long term care is still debated. Confusion over the semantic versus the best practice based concepts of supervision and collaboration only exacerbate this situation. This session will present the concepts derived by AMDA's Workgroup (a collaborative of both physicians and advanced practice nurses) on the Role of the Attending Physician and Advanced Practice Nurse as they relate to best collaborative practices via didactic and case based scenarios.

*Charles Crecelius, MD, PhD, CMD; Debra Bakerjian, PhD, MSN, FNP*



# EDUCATION PROGRAM

## B51 Smoothing the Transition: Using the Care Delivery Process to Improve Patient Outcomes when Moving between Care Settings

MODELS OF CARE **CMD** 

This session will review the key elements of the care process required for a successful transition between care settings. Participants will engage in reviewing an actual case to determine where the transition process failed and what can be done to insure a more successful transition experience.

*Dana Saffel, PharmD; Steven Levenson, MD, CMD*

## B52 Regulatory Myths vs Clinical Realities: Deficiencies, Doctors, and Disagreements with Surveyors ....A Review of Physician and Medical Director Deficiencies

MEDICAL DIRECTION **CMD** 

Cases from actual surveys will be discussed. The issues will specifically involve possible deficiencies in either physician services or medical director oversight. Audience participation will be actively encouraged.

*Harold Bob, MD, CMD; Patricia Nay, MD, CMD; William Vaughan, RN*

## B53 AMDA Foundation: QI Research in Nursing Homes

RESEARCH **CMD**

This session will focus on dissemination and translational research issues relevant to the QI interests of AMDA members. Through presentations of projects ranging from interventions to reduce acute transfers to a study aimed at improving the accuracy and consistency of the nursing home survey process, accomplished researchers will describe effective strategies for implementing multi-facility quality improvement projects, identify the basic characteristics of an effective QI system, identify federal/state survey factors that limit or enhance QI efforts in the nursing home, and describe how nursing home internal QI and external survey efforts can be better coordinated.

*Daniel Swagerty, Jr., MD, MPH, CMD; Joseph Ouslander, MD; John F. Schnelle, PhD; and David Polakoff, MD, MSc, CMD*

## B54 Survival Skills for Self-Preservation: Strategies for Providers in Long Term Care

MODELS OF CARE **CMD**

This workshop focuses on 'survival skills,' strategic planning and self-care to facilitate physician well-being. It is designed as an interactive session with both didactic and group discussion activities. Learning strategies will commence with review of extant literature on barriers to physician well-being, and will be illustrated by specific case examples. Small group breakouts will be used to facilitate discussion and creative brainstorming, as well as proactive intervention and problem solving. Finally, audience members will be invited to collectively share their comments, questions and suggestions as components of a "Tool Kit" to facilitate ongoing job satisfaction, work empowerment, and personal resiliency.

*Patricia L. Bach, PsyD, RN; Daniel A. Bluestein, MD, MS, CMD; William G. Boger, MD*

*\*This session is limited to 65 participants. Pre-registration is required. See registration form page 38.*



DESTINATIONS MAGAZINE

## **B55 Wound Care: Basic Diagnosis and Treatment of Common Nursing Home Wounds**

CLINICAL MEDICINE 

This session presents the importance of basic wound care for pressure, venous, neuropathic and ischemic ulcers. The faculty will discuss the importance of appropriate diagnostic skills and tests to determine the type of ulcer. They will also outline the evidence behind the fundamental aspects of wound care for these four ulcer types. Lastly, the session will cover basic wound dressings for chronic ulcers.

*Paul Y. Takahashi, MD; Lester J. Kiemele, PA*

## **B56 Palliative Care Program in Long Term and Postacute Setting; Making the Case for Quality Improvement and Cost Reduction**

MEDICAL DIRECTION 

A palliative care consultant team is a powerful intervention tool in the long term care setting, that can improve the quality of care while also dramatically lowering re-hospitalization rates. This session presents a practical guide for the development of an IDT, building administrative support, and a description of the protocols, clinical interventions and outcomes in the long term care setting. The consultant team model improves patient and family satisfaction and decreases caregiver burden. Data will be shared that demonstrates a dramatic lowering of re-hospitalization rates, as well as a decrease in pharmacy and lab costs.

*Robert Schreiber, MD, CMD; David H. Tsai, MD, CMD; Jody L. Comart, PhD*

## **B57 Thoughtful Prescribing of Nutritional Supplements**

CLINICAL MEDICINE

This session presents an overview of the scientific evidence for the use of nutritional supplements in older adults for primary and secondary prevention of disease. Multivitamin/minerals, antioxidant nutrients, vitamin D/calcium, B vitamins, and omega-3 fatty acids will be discussed. The discussion will end with a case study and review of practical web-based resources to aid clinicians in answering the difficult questions often involved in considering nutritional supplements for patients.

*Gwendolen T. Buhr, MD, CMD; Connie W. Bales, PhD, RD*

**6:00 PM - 7:30 PM**

**State Chapter Business Meetings and Receptions**

# SATURDAY MARCH 13, 2010

**6:30 AM - 7:45 AM**

### **EXP 1 Meet the Expert**

Start your morning off with a dynamic presentation, from a known expert. Breakfast is provided while taking advantage of the opportunity to enhance your knowledge with up-to-date information in the diagnosis, treatment and management of cutting-edge clinical issues in long term care. Visit [www.LTCmedicine.com](http://www.LTCmedicine.com) for speaker and topic details. Advance registration and additional fee of \$25 required. See the registration form for details. Seating is limited so be sure to reserve your space now.

**6:30 AM - 8:00 AM**

### **State Presidents Council Breakfast**

**7:30 AM - 8:30 AM**

### **Coffee Service**

**8:00 AM - 10:30 AM**

### **C30 General Session II**

#### **Policy Matters**

#### **Opening Remarks**

*Paul Katz, MD, CMD, AMDA President-Elect*

#### **AWARD PRESENTATIONS**

**Howard Guterman Best Poster Award**

**James Pattee Excellence in Education Award**

**William Dodd Founder's Award**

#### **AMDA's Top Policy Issues 2010**

AMDA's Public Policy Chair will present the top AMDA policy issues including updates on legislative advocacy, Drug Enforcement Agency actions concerning narcotics, updates to the State Operations Manual, and AMDA's forthcoming paper on the roles of the attending physician and advance practice nurse.

*Eric Tangalos, MD, CMD; Charles Crecelius, MD, PhD, CMD*

#### **Participating in the E-Prescribing Incentive Program**

The presenter will discuss the current requirements to successfully participate in the Centers for Medicare & Medicaid Services E-Prescribing Incentive Program.

*Rachelle Spiro, RPh*



INTRODUCTORY



ADVANCED



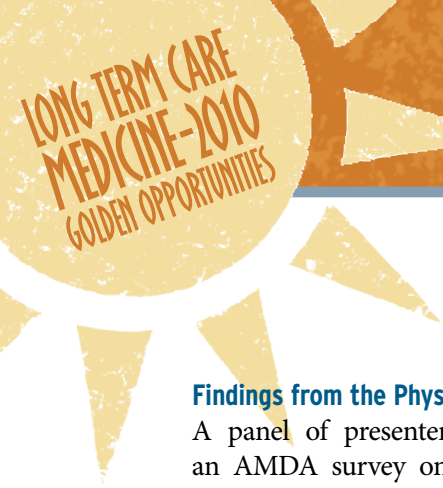
INTERDISCIPLINARY TEAM (IDT)



BACK BY POPULAR DEMAND



CMD CREDIT HOURS



# EDUCATION PROGRAM

## Findings from the Physician Practice Survey

A panel of presenters will present the findings from an AMDA survey on physician practice and its policy implications.

*Paul Katz, MD, CMD; Thomas Caprio, MD; Jurgis Karuza, PhD*

## Significant Changes to the Minimum Data Set

This presentation will highlight the significant clinical changes in the Minimum Data Set 3.0.

*Debra Saliba, MD, MPH*

**10:00AM - 11:00AM**

## Refreshment Break

**11:00AM - 12:30PM**

## C31 Update on the AMDA Clinical Practice Guideline for Dehydration in the Long Term Care Setting

CLINICAL MEDICINE **CMD** 

This session will highlight the important features and changes of the CPG for managing dehydration in the long term care setting. The session will include an introduction and epidemiology section, recognition and assessment section, and a management and summary section. Each section of the presentation will be evidenced-based as per the typical CPG format.

*Charles A. Cefalu, MD, MS; Jacqueline Vance, RNC, CDONA/LTC; Eric Tangalos, MD, CMD*

## C32 Decision-Making Capacity in Long Term Care: A Case-Based Approach

MEDICAL DIRECTION **CMD** 

Challenges among staff in understanding the role of a surrogate decision-maker, the difference between competence and capacity, the presumption of competence, and how to quickly assess capacity for a particular situation were identified. Difficulties arose in four situations: 1) determining “what to write on the face sheet” and how to keep this updated, 2) assessment of whether a cognitively impaired person could engage in an unsafe or “unwise” activity, 3) refusal of care, and 4) dealing with conflicts between the wishes of cognitively impaired patients and their family members. In this session presenters will discuss a framework to evaluate capacity and show its utility in review of four cases.

*Robert M. Gibson, PhD, JD; Rebecca Ferrini, MD, MPH, CMD, 2009 Medical Director of the Year*

## C33 Advanced Coding, Documentation and Reimbursement for the Long Term Care Physician: Non-Nursing Home Codes, Procedures and Statistics

MEDICAL DIRECTION **CMD**

Do you wonder if you’re correctly coding and documenting non-nursing home codes? Do you know what procedural codes are appropriate to use and how to bill and document for them in LTC? Do you feel comfortable in your distribution of codes compared to your peers? These and similar questions will be answered.

*Charles A. Crecelius, MD, PhD, CMD*

## C34 POLST Implementation in California: Lessons Learned

MODELS OF CARE **CMD**

Physician Orders for Life-Sustaining Treatment program (POLST) is a great advance for preparing frail patients for personalized advanced illness management. The California POLST became a standardized legally recognized tool 1/01/09. Come learn about this tool and how to implement it in your state and facility(s).

*Tim L. Gieseke, MD, CMD; Jim A. Mittelberger, MD, CMD; Karl Steinberg, MD, CMD; Judy Citko*



DESTINATIONS MAGAZINE

◀ **Queen Mary** Long Beach is the proud home of the Queen Mary, one of the world’s most luxurious ships to sail the Atlantic Ocean.

**C35 Reducing Potentially Avoidable Hospitalizations of Nursing Home Residents: The INTERACT II Project**MEDICAL DIRECTION **CMD**

This session presents the results of a tri-state collaborative to design and test a toolkit for nursing homes to reduce avoidable hospitalizations of residents. Improved communication strategies, as well as resources for improving advance care planning will be discussed. The role of the medical director in improving communication among nurses, CNAs, residents and families will be addressed.

*Alice Bonner, PhD, RN; Joseph Ouslander, MD*

**C36 Expanding the Expectations of the Medical Director's Role**MEDICAL DIRECTION **CMD** 

This interactive session targets medical directors who spend at least 20 hours or more each month working in at least one nursing facility. Topics will include sharing complex medical directing issues, expanding the role of the medical directors, initiating successful problem solving teams, and sharing numerous other interactive topics raised by the attendees.

*J. Kenneth Brubaker, MD, CMD*

**C37 Minimum Data Set (MDS) 3.0 for Nursing Home Medical Directors**MEDICAL DIRECTION **CMD**  

As a follow-up to the General Session MDS 3.0 presentation, this session provides a detailed overview of the Minimum Data Set system currently in place in nursing homes and the changes envisioned with the new version 3.0 to be rolled out in the fall of 2010 with public reporting in October 2011.

*Leonard Gelman, MD, CMD; Karyn Leible, MD, CMD*

**C38 Antithrombotic Therapy in Long Term Care: Getting Down to Cases**CLINICAL MEDICINE 

This presentation will combine didactic material with interactive, case based application of information, policies and procedures contained in the 2010 AMDA Antithrombotic Toolkit. The presentation will concentrate on risk assessment for thrombosis and for complications of antithrombotic therapy, tools for shared decision making about the use of warfarin and platelet active medications, and policies and procedures to optimize benefits while managing and reducing adverse effects of antithrombotic medications.

*William D. Smucker, MD, CMD*

**C39 Model Programs and Policies Swap Session**MEDICAL DIRECTION 

This first time offering will create a forum for IDTs to share their innovative programs and policies. Come hear how other teams have overcome barriers and challenges in their practice. Six programs will briefly present their best practices, and then offer expert advice to attendees and share the materials which have contributed to their program's successes in roundtable format. This session provides excellent opportunity to network with colleagues who have turned challenges into golden opportunities.

**12:30PM - 2:00PM****In-the-Trenches: Peer Group Roundtable Discussion** 

A variety of the hottest long term care topics will be selected for small group discussions and will be facilitated by symposium speakers. A complete list of topics will be provided online and onsite. There is no advance sign-up to participate in the Roundtable discussions. It's first come first serve!

*Note: This session will not offer CME.*

*Lunch Kiosks will be available for you to purchase lunch and snacks.*





# EDUCATION PROGRAM

12:30PM - 2:00PM

Lunch on Own

2:30PM - 3:30PM

## C40 Vitamin D New Insight New Recommendations

CLINICAL MEDICINE

Information on the role of Vitamin D has evolved far beyond benefit to bones. Vitamin D has an integral role in fall prevention, muscle strength, cellular differentiation, immune response, and affect among others. This presentation presents some of the data that have contributed to new recommendations of 4,000 I.U. of Vitamin D input per day, the rationale behind such recommendations in the nursing home setting and the potential impact. Additionally, there will be information presented on experience developing a practical model of Vitamin D3 supplementation in the nursing home environment.

*F. Michael Gloth, III, MD, CMD*

## C41 Abusive Behaviors and Violence in Nursing Homes

MODELS OF CARE **CMD**

This session will cover modifiable factors related to abusive behaviors in nursing home residents with dementia, and resident-to-resident violence. Study results indicate that abusive behaviors may develop from lack of understanding leading to resistiveness to care. Behavioral interventions and the treatment of depression can be expected to decrease or prevent abusive behavior of many nursing home residents with dementia. This session also presents a discussion of the public health significance and consequences of resident-to-resident violence and a review of the current literature. Recommendations for the study of resident-to-resident violence and its prediction, prevention and management are also presented.

*Ladislav Volicer, MD, PhD; Susan Sifford, PhD*

## C42 Corporate Responsibility: Officer's and Medical Director's Perspective on Recently Published OIG Supplemental Compliance Guidance for Nursing Homes

MEDICAL DIRECTION **CMD**

The Department of Health and Human Services OIG recently published Supplemental Guidance for nursing facilities. This session will identify significant fraud and abuse risk areas such as quality of care, submission of accurate claims, the Federal Anti-Kickback statute, and HIPAA rules to assist medical directors in evaluating their facilities' compliance programs.

*Ev Winiarska, RN, MPH; Joseph Scarpa, MD, CMD*

## C43 Negotiating Clinical Expectations: A Case-based Exercise

MODELS OF CARE **CMD**

Older patients and families demonstrate dramatic variation in desired level of involvement in care decisions, which is poorly predicted by providers. This presentation will use cases to illustrate the development of a clinical approach to care of complex cases that balances medical facts and patient/family values. The cases will offer real life examples of the day-to-day challenges of long term care, and the sophistication required of its providers.

*Bruce Robinson, MD, MPH, CMD*

## C44 Caring for Your Parents, Caring for Yourself in Long Term Care

CLINICAL MEDICINE

There is little in the literature that talks about when a physician is the physician in charge of a loved one in the long term care setting. Previous sessions have had speakers relate their experiences, but they haven't provided concrete tips or suggestions for when a relative has to be admitted to a nursing home or assisted living community. This presentation will use many humorous stories from the speakers' experience caring for his father (an internist himself) as he went from home alone to an assisted living community to a nursing home, unfortunately ending at his death at age 91 to help others face similar adventures.

*Daniel Haimowitz, MD, CMD*

**C45 An Interdisciplinary Approach to Exercise and Physical Activity in Long Term Care**MEDICAL DIRECTION  

In this session, the roles of the physician and physical therapist as leaders in exercise programming as well as roles of the long term care staff, resident, and family members in creating a culture of physical activity and exercise throughout the facility will be discussed. A brief review of the evidence supporting exercise and physical activity will provide the medical director with information to utilize when seeking acceptance of the new program from all members of the team. Specific examples of the medical director effectively utilizing the IDT and overseeing the planning process to ensure the success of the physical activity program will be given, with an emphasis on identifying barriers and brainstorming solutions with the IDT. Specific examples of the implementation of a facility-wide exercise and physical activity program as well as ongoing assessment of the program success, will also be discussed.

*Mimi Jacobs, PT, MPT, GCS, OCS; Tim Fox, PT, DPT, GCS*

**C46 Documentation Templates for Special Procedures and Clinical Reviews in the Long Term Care Setting**MEDICAL DIRECTION 

This program will discuss procedures that can be easily performed in long term care. It will also discuss the focused, and sometimes, extended reviews required by CMS (psychotropic drug reductions, fall assessments, pain management, weight loss, etc.). Documentation requirements will be discussed and templates to document work will be shown.

*Jeffery A. Kerr, DO, CMD*

**C47 Dementia Beyond Drugs: An Experiential Model for Care**CLINICAL MEDICINE  

This session presents a re-examination of the biomedical approach to dementia that has dominated our care for the last 50 years. Antipsychotic use in dementia is an increasingly common phenomenon, despite growing evidence that the risks are high and benefits low. In order to re-engage people with life and growth, a radically different approach is needed. As an international expert in culture change, Dr. Power will reveal the shortcomings of our current approach and explain why non-pharmacologic approaches to behavioral expressions often fail. He will then use the lessons of the culture change movement to promote a paradigm shift and will craft a new 'experiential' model that allows us to re-engage people with dementia through transformation of the care environment in all of its aspects.

*G. A. Power, MD*

**C48 Checking the Vitals of the IDT: An Innovative Use of an Old Tool**MODELS OF CARE  

This session presents the elements for successful IDT collaboration. A literature review identified 42 specific questions/behaviors to rate the level of IDT collaboration. During the presentation these elements will be dissected and strategies for implementing change will be introduced.

*Joshua J. Raymond, MD, MPH, CMD; William T. Swart, MD; Bennett S. Shenker, MD, MSPH*

**3:30PM - 4:00PM**

**Refreshment Break**

**4:00PM - 6:00PM**

**AMDA House of Delegates Meeting**



INTRODUCTORY



ADVANCED



INTERDISCIPLINARY TEAM (IDT)



BACK BY POPULAR DEMAND



CMD CREDIT HOURS



# EDUCATION PROGRAM

**4:00PM - 6:00PM**

**C49 Updates from Advancing Excellence in America's Nursing Homes: Leveraging Coalitions to Improve Quality in Nursing Homes**

MEDICAL DIRECTION **CMD** 

The Advancing Excellence in America's Nursing Home Campaign is in its third year and is launching a new set of campaign goals and a different methodology of measuring success. This session will recap the successes and challenges from the first phase (two years) of the campaign. The session will go on to describe the process of revising the eight original goals with an all volunteer steering committee representing 29 different national organizations. The second phase of the campaign will be discussed; description of the new campaign goals and the revised methodology for measuring both national and state goals. Specific states will be highlighted as exemplars of success and of challenges of the state local area networks of experts (LANEs). Lastly, three Commonwealth funded studies will be summarized to illustrate efforts to improve the success of the LANEs in supporting nursing homes to achieve excellence in eight specific goals.

*Debra Bakerjian, PhD, MSN, FNP; Stefan Gravenstein, MD, CMD; Carol Benner, MS; Mary Jane Koren, MD*

**C50 Parkinson's Disease: Improving Quality of Care in Long Term Setting**

CLINICAL MEDICINE

This session presents innovative techniques used in Parkinson Disease management. Several of the modules will also be presented as an example of training that can be performed in the nursing home with staff. Modules to be reviewed in this session include the following: medication management, therapies: PT/OT/ST, dementia training, and social services. Results of the evaluation to date will be presented.

*Herbert C. Sier, MD, CMD; Ron Benner, BSN, MBHA, RN, LNHA; Madelyn Iris, PhD*

**C51 Transitions of Care at the University of Michigan Health System**

MODELS OF CARE **CMD**

This session presents the transitional care initiatives at the University of Michigan Health System. The University of Michigan has created a subacute service program, a Transitional Care Clinic and an Inpatient Geriatric Consult

Service. This program admits and manages all University Hospital discharged patients who are admitted to four local skilled nursing facilities. The goal of this program is to facilitate safe transition of the frailest hospitalized patients from the hospital to subacute care and then to home. This program has within two years been successful in decreasing hospital length of stay for patients being discharged to skilled nursing facilities and decreased the rate of return to hospitals within 30 days of the patients discharged to skilled nursing facilities. The transitional care clinic is run by the faculty of the Turner Geriatric Clinic at the University of Michigan. The goal is to provide timely geriatric physician and social work evaluation of frail elderly who are discharged from the hospital and skilled nursing facilities. Many of these patients are transitioned over to their primary physicians after one or two transitional care clinic appointments. Finally, the Geriatric Inpatient Consult Service is managed by geriatric attendings and geriatric fellows. The goal is to identify appropriate discharge plans for the hospitalized frail elderly.

*Darius K. Joshi, MD, CMD; Caroline Blaum, MD*

**7:30PM - 10:00PM**

**AMDA President's Reception**



# SUNDAY MARCH 14, 2010

7:00AM - 8:30AM

## D30 Red Eye Rounds: Medical Direction Challenges **CMD**

This breakfast panel provides an opportunity for attendees to engage experts in medical direction in a dialogue on best practices. The focus of this panel is on the management aspect of medical direction.

## D31 Red Eye Rounds: Clinical Quandaries

This breakfast panel is an opportunity for attendees to engage experts in LTC Medicine in a dialogue on best practices. The focus of this panel is on geriatric clinical care and management from a clinical perspective.

8:00AM - 9:00AM

Coffee Service

8:30AM - 11:00AM

## D32 General Session III **CMD**

### Closing of the Long Term Care Medicine-2010

*Matthew Wayne, MD, CMD, Program Committee Chair*

### ANNE-MARIE FILKIN LECTURE Humanistic Medicine, Geriatrics, and Art

Jeffrey M. Levine, MD, CMD, has photographed elders in his medical practice as a nursing home medical director and throughout the United States for the past twenty-five years. His images have caught the attention of the caregiving community, as they touch the heart of anyone concerned about our aging patients and loved ones. His photographs have been published in textbooks and journals including many *JAMDA* covers, and in a traveling show entitled "Aging Through a Physician's Lens." This lecture weaves together themes of art and medicine, and his conclusion that geriatrics is the most humanistic of medical specialties. The talk raises questions about our system of medical education, training, and reimbursement which has led to the gap between needs of the growing elderly population and numbers of qualified caregivers.

*Jeffrey M. Levine, MD, CMD*

### CLOSING KEYNOTE

#### I Can Hear You Now: Practical Communication Strategies for Long Term Case Professionals

David Solie is a nationally recognized geriatric communication expert who offers proven, practical solutions for long term care professionals. His research, insights and stories offer clarity and compassion about the "final mission" of older adults, the unique psychological agenda of the last phase of life. It is an agenda all long term care professionals need to understand.

His presentation offers practical, easy to learn communication strategies that allow audiences to more effectively communicate to their long term care clients. These strategies help long term care professionals avoid "communication gridlock" that can ensnare their best intentions to do the right thing for their patients.

*David Solie, MS, PA*

◀ **Long Beach Convention Center** is located in the heart of downtown Long Beach.



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