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Providers Warm Up For The Magic Of Music

As Grandparent's Day approaches this Sept. 7, assisted living communities across the country prepare for the annual celebration that is National Assisted Living Week® (NALW). Bringing together caregivers, residents, family members, and members of community, each year's NALW offers the opportunity to honor both the individuals residing in assisted living and those who provide life-improving care to these individuals each and every day. This year's NALW theme is "the Magic of Music," showcasing the integral role that music plays in assisted living. Studies show that music has the power—especially for individuals living with some form of dementia, including Alzheimer's disease—to spark compelling outcomes. With almost 40 percent of assisted living residents living with dementia, integrating music can change residents' lives and enhance person-centered care.

According to the Alzheimer's Foundation of America, "When used appropriately, music can shift mood, manage stress-induced agitation, stimulate positive interactions, facilitate cognitive function, and co-

ordinate motor movements." That's because, "Musical aptitude and music appreciation are two of the last remaining abilities in patients with Alzheimer's disease," writes Linda

Maguire, author of a recent study on the effects of singing to patients with dementia.

New programs have been created related to the issue, such as the Music & Memory program (as featured in a new documentary "Alive

Inside") created by Dan Cohen. The Music & Memory program brings personalized music into the lives of the elderly through digital music technology (traditionally iPods).

"Music imprints itself on the brain deeper than any other human experience," says renowned neurologist Oliver Sacks. He argues that music taps into the brain's emotion centers, and emotion can evoke memories, something the documentary showcases through a number of elderly individuals who can recall certain aspects of their lives after listening to their favorite piece of music.

Some assisted living providers are using the teachings of the Music & Memory program in their communities and seeing tremendous

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4 Rockin' Ideas For NALW

1. The Memories of Music

For those living with some form of dementia, music can open doors into a life long forgotten. Talk to your residents about joyous times in their lives, and find out what kind of music made them happiest. Cater to their personal music taste by creating an online radio station, playlist, or CD.

2. Sweat'n to the Oldies

Get your residents movin' and groovin' to their favorite tunes! Listening to music while exercising has been shown to result in more of an effort by the participant and will certainly make the event more fun and upbeat!

3. One Night Only

Invite a local Elvis, Rat Packer, or Ella Fitzgerald impersonator to come to your community for an all-out concert. Create tickets, programs, a concert hall, maybe even t-shirts, and invite families and volunteers to this "One Night Only" event.

4. A Chorus of Voices

Embrace your local community by partnering with schools and civic groups to bring music from the area into your assisted living community. From an elementary school chorus, to a high school jazz band, the benefits of bringing visitors in are plentiful.

Find more activity ideas in the NALW Planning Guide: www.nalw.org.

Share your ideas on Facebook: www.facebook.com/NationalAssistedLivingWeek.

Maximize Your Membership: 15 Ways To Use NCAL's Consumer Fact Sheet On Antipsychotics

Last year, AHCA/NCAL released a consumer fact sheet on the use of antipsychotic medications for residents living with dementia in skilled nursing centers and assisted living communities. The fact sheet supports the efforts of the AHCA/NCAL Quality Initiative in which assisted living providers have a goal to safely reduce the off-label use of these medications by 15 percent by March 2015. The resource, the first to be offered in both English and Spanish, was created to help providers effectively communicate and engage family members on the issue.

"Sometimes, the most difficult thing is convincing a family member that their loved one no longer needs this medication," said David Gifford, MD, AHCA/NCAL senior vice president of quality and regulatory affairs and a geriatrician, when the fact sheet was released. "With a better understanding of the disease process and personal knowledge of their loved one, consumers will help us provide person-centered care without turning to antipsychotic medications."

The fact sheet provides family members and others involved in a resident's care background on the off-label use of antipsychotics. It also



includes frequently asked questions regarding individuals living with dementia. Family members are offered suggestions on how they can partner with providers to get the best possible care for their loved one.

Assisted living providers can use the fact sheet in more ways than one. The NCAL Customer Relations Committee has generated a list of ideas for providers to maximize the opportunities to share the information with a larger audience. ♦

15 Ways to Use the Antipsychotic Consumer Fact Sheet

1. Hold a one-on-one with affected residents and families.
2. Share it at your resident council meeting as an education tool.
3. Make it an issue for family night education.
4. Share it with your health care partners who may influence your residents' usage: discharge planners, social workers, case managers, physicians, physician assistants, nurse practitioners, pharmacists, home care agencies, and hospice agencies.
5. Use it at a staff training or in-service; especially share with medication passers or on a case-by-case basis for staff who care for residents using these medications.
6. Include it in the new employee orientation package.
7. Include it in your community newsletter.
8. Use it to write a letter to the editor to your local newspaper about the issue and highlight your community's efforts to address the issue.
9. Include a link to it on your community's website.
10. Insert it into your community's marketing packet.
11. Place it in your community's rack card holders with other resources.
12. Have it available when you go to marketing fairs.
13. Present it to other dementia groups or associations at appropriate settings: memory support groups, senior centers, senior fairs, or other community events.
14. Share it with your local Area Agency on Aging/senior referral organization.
15. Offer it to your community's religious centers for their senior groups.

To download the fact sheet, please visit the antipsychotics webpage on the NCAL Quality Initiative website: <http://qualityinitiative.ncal.org>. Share how your community has used the fact sheet by emailing qualityinitiative@ncal.org.

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www.AHCAconvention.org or www.NCALconvention.org

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Female Employees Rate Workplace Safety Slightly Lower Than Male Employees

Employees are the heartbeat of any organization. Research shows that assisted living communities that have higher levels of employee satisfaction also have higher levels of resident and family satisfaction.

But how can the profession improve employee satisfaction? One way may be to dig into the data to understand what truly drives it. For example, the National Research Corp. found that female employees make up 84 percent of the assisted living community workforce, but provide a slightly lower positive response on how they would recommend their community as a place to work—75 percent of women said “excellent” or

“good,” compared with 78 percent of men.

Yet, a slightly higher rate of female employees (92 percent versus 90 percent of males) report positive feelings of accomplishment about their work, and male and female employees respond almost identically (90 percent versus 89 percent, respectively) about how they are respected by staff.

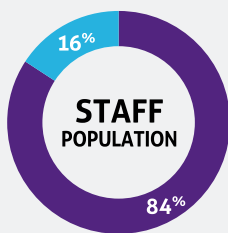
Conversely, the feedback reported by female assisted living employees regarding safety of workplace, assistance with stress, and appreciation of supervisor is considerably lower (by 5 to 7 percent) than the feedback reported by male employees. Focusing on these areas where the perceived experience is much lower may have

a notable impact on a community’s overall workforce satisfaction.

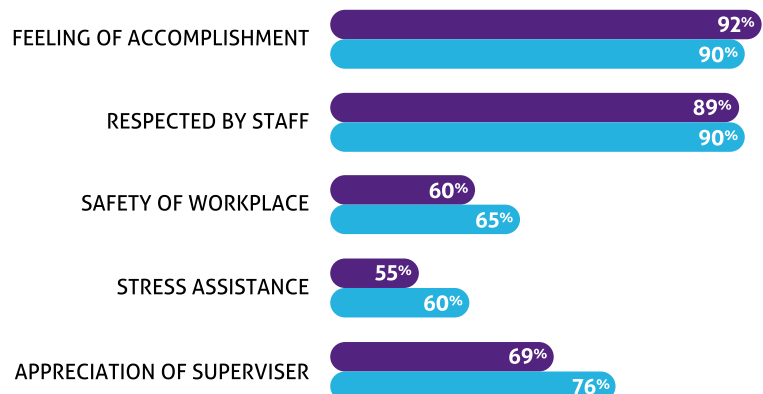
What is driving the differences? Is it about the jobs that are more likely filled by women, or is it that the organization is less successful at meeting the needs of its female employees? The answers will influence the steps taken to improve staff stability, which will trickle down to resident experiences, and ultimately, a community or company’s overall business.

As NCAL’s data partner, National Research Corporation supports the Quality Initiative through its My InnerView products. National Research understands the importance of measuring quality improvement and how to increase staff stability. ♦

Opportunities in Staff Experiences Among Men and Women



PERCENT EXCELLENT & GOOD RESPONSES



Based on an analysis of My InnerView assisted living employee satisfaction surveys collected in 2013 by National Research Corporation.



My InnerView by

NATIONAL RESEARCH Corporation

The Magic Of Music continued from page 1

benefits. After seeing “Alive Inside,” Laura Nolan, executive director of operations for Harmony Living Centers, brought the idea to Harmony of Stevens Point in Stevens Point, Wis.

Nolan says staff were initially reluctant to accept an idea as simple as tailored iPods for residents, but all that changed once staff saw the outcomes. “It was an immediate change. They started thinking about so-and-so, and saying ‘maybe we can use this on this resident.’”

Playing music for residents living with dementia helps Harmony of Stevens Point continue to care for them, Nolan points out. She reflects on those residents who were doing well with their activities of daily living, but acted in ways concerning to staff and other residents. “We thought, ‘If we can’t solve this, we’re going to have to discharge them.’ So by adding music, we’ve been able to keep some people in assisted living,” says Nolan.

Nolan adds that families have also been receptive to the program as a way to connect more with their loved ones.

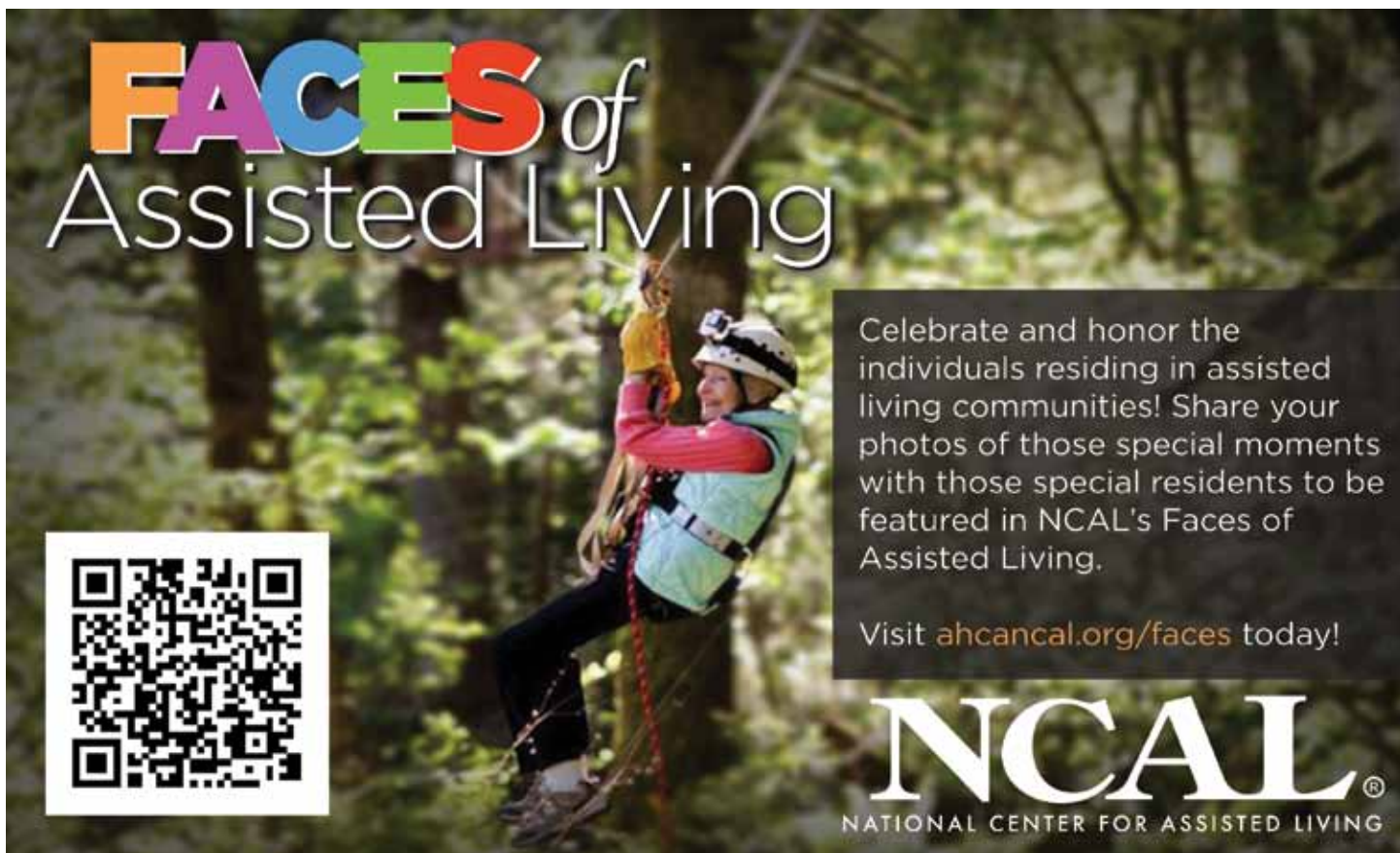
While music does not slow down or reverse the disease

process, assisted living providers are eager for such non-pharmacological approaches to enhance the lives of those living with dementia. NCAL’s Quality Initiative includes a three-year goal to reduce the off-label use of antipsychotic medications by 15 percent by March 2015.

“One of our residents was a sundowner and would become very anxious in the afternoon and into the evening. We had tried activity intervention, but her confusion was causing her to feel that she needed to solve why she was confused,” continues Nolan. “We talked to her family and found out what her favorite songs were.” Staff found that music made all the difference. “This resident used to receive anti-anxiety medication, and now she no longer needs them.”

Music also has the ability to bring people together—something assisted living communities will hope to accomplish during NALW. Communities may also recognize staff members who provide extraordinary care day in and day out as well as educate members of the community on assisted living services and benefits.

Visit www.nalw.org for more information. ♦




FACES of Assisted Living

Celebrate and honor the individuals residing in assisted living communities! Share your photos of those special moments with those special residents to be featured in NCAL's Faces of Assisted Living.

Visit ahcancal.org/faces today!

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INTERACT Releases Readmissions Tools Specifically For Assisted Living Providers

This August, Interventions to Reduce Acute Care Transfers (INTERACT) for Assisted Living, a quality improvement program designed to reduce hospital readmissions, was released. INTERACT was originally designed to improve the early identification, management, documentation, and communication about acute changes in the condition of residents at skilled nursing centers. The program has now expanded to include tools specifically for assisted living.

INTERACT began testing its tools in assisted living communities through the support of a Centers for Medicare & Medicaid Services Innovation Grant. For months, pilot communities—including NCAL members—assessed and provided feedback on the four categories of

INTERACT tools (quality improvement, communication, decision support, and advance care planning) to finalize the Assisted Living Version 1.0 tools that are now publicly available.

NCAL assisted in the announcement of the INTERACT tools for the profession, as it will aid in the association's Quality Initiative goal to safely reduce unnecessary hospital readmissions by 15 percent by March 2015.

Assisted living providers may access the Assisted Living Version 1.0 tools via the INTERACT website: <http://interact2.net>. NCAL members can also access the tools on the association's website: <http://qualityinitiative.ncal.org>.

Check future issues of *Focus* for more on INTERACT for Assisted Living. ♦



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2015 CALL FOR PRESENTATIONS

The American Health Care Association and National Center for Assisted Living are seeking presentations from professionals in long term and post-acute care. We are looking to showcase the best and the brightest minds in the long term and post-acute care profession. Submissions should be submitted electronically beginning Sept. 1, 2014 at www.AHCAconvention.org.

All submissions must be received by Nov. 30, 2014.

Emergency Preparedness Update: Progress Made But The Journey Continues

A 2007 issue of *Focus* featured a story about a Mississippi community being rebuilt after Hurricane Katrina. The article alluded to the many challenges providers faced during the disaster. Now, nearly 10 years after Katrina, many are asking: What has changed, and what have we learned?

According to Anna Fisher, PhD, director of education & quality at Nebraska-based Hillcrest Health Services, a lot. “We now have more procedures and protocols in place to be proactive in the event of an emergency.” She says, “Every disaster teaches us something. The more events that happen, the more we learn.”

One lesson involves the importance of making sure each and every player has the tools, information, and skills

necessary to handle a disaster. Gretchen Michael, public affairs director for the U.S. Office of the Assistant Secretary for Preparedness and Response (ASPR), also emphasizes the importance of collaboration.

“A facility’s or senior community’s level of preparedness and connectivity to local public health, emergency management, aging services agencies, local health coalitions, and other support organizations will predict how well the facility or community can support their residents in responding to and recovering from a disaster,” says Michael. Building such partnerships, she observes, enables facility leaders and staff to communicate, coordinate resources, and integrate into the overall community response.

To create these relationships, Michael encourages facilities and community partners to join health care coalitions supported through ASPR’s Hospital Preparedness Program. “These coalitions help ensure the provision of medical care when certain emergencies exceed the limits of a community’s medical capabilities,” she says.

Fisher agrees that emergency preparedness and response have to be seamless efforts, and practice makes perfect. She underscores the value of regular practice activities, including table-top exercises, drills, and

simulations. “We need to demonstrate our knowledge of emergency preparedness on a regular basis. We can’t do enough of those exercises,” she says.

As a result of Katrina, Hurricane Sandy, and many other natural disasters that have occurred in recent years, Michael says that more individuals, facilities, and communities are incorporating preparedness into their daily routines. However, she notes that there is more work to be done.



“After a disaster, we need to take stock, discuss what we learned, develop an action plan, and share this with others.”

**—Anna Fisher, PhD
Director of Education & Quality
Hillcrest Health Services**

“Preparedness begins at home, and many seniors and their caregivers have not taken the minimum preparedness steps of identifying an emergency plan and keeping on hand at least 72 hours of supplies,” she adds.

Michael stresses that adopting essential preparedness measures “makes good

business sense” for assisted living communities. “It means the facility is more likely to remain functioning or return to service faster. Facilities need to have an emergency plan that staff and residents have been trained and drilled on at least once a year,” she says. Michael also emphasizes the need to share this plan with others involved with the community.

“We’ve learned the importance of communicating our emergency plan to families,” concurs Fisher. “They need to know how we coordinate care during a disaster, and we need them to feel confident that we are doing everything we possibly can to keep their loved ones safe and comfortable.” She says this communication effort is for the families’ well-being as well as the residents. “We don’t want family members putting themselves in harm’s way during an emergency by coming to the disaster site.”

Moving forward, technology will make emergency preparedness, response, and communication easier. As Michael notes, many staff members, along with some seniors, have smart phones and are savvy about using social media and texting. “This ability to communicate quickly and relay important health information can be lifesaving during a disaster or evacuation. Social media

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Emergency Preparedness

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and the Web can be leveraged now to help residents and staff communicate with family members during a disaster, too, especially if the facility has to evacuate."

Elsewhere, electronic health records with a safe backup have proven their value in recent emergencies. Michael notes, "Facilities and health care providers with electronic health records systems could continue providing care even if residents or patients were transferred to temporary locations. The Health and Human Services Office of the National Coordinator for Health Information Technology has great resources available to help with the transition to electronic records."

While emergencies can be horrific and take a tremendous toll, Fisher stresses that they teach lessons that can lessen the negative impact of a future emergency.

"After a disaster, we need to take stock, discuss what we learned, develop an action plan, and share this with others," she says. "Disasters affect us all. When they happen, we are in it together and can help each other through it." ♦

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