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**Meeting Minutes** 

# Home Health, Home Services and Home Nursing Advisory Committee Meeting January 11, 2023 - 10:30 a.m. – 12:30 p.m.

WebEx Meeting Access Information:

https://illinois.webex.com/illinois/j.php?MTID=meb7c7cbc9e4e55e9d70f770f7e5ec76d

Meeting number (access code): 2468 035 5524 Meeting password: HHA011123 Join from Mobile Device or Phone Mobile Device: 24680355524@illinois.webex.com

<u>Call to Order</u> Members Present:	Aishling T. Dalton Kelly, Jack Kreger, Tina Moore, Patricia Pierro, Jeffrey Workman, Sharon Bargmann, Shawna O'Dell, Linnea Windell
	Jerney Workinan, Sharon Darginann, Shawna O Den, Ennea Winden
Members Absent:	Rowena Oliva
Department Staff:	Karen Senger, Brian Mathis, Jackie Richmond, Stephanie Glenn, Siji Varghese, Sara Ross
Guests:	Liz Vogt, IL Home Care, Sara Ratcliffe, IL Home Care, Jason Speaks, Leading Age IL, Tim Lindsey, Visiting Angels, Kris Snell, Clay County Health Dept.

# **Introduction of Committee Members and Guests**

Karen Senger, Division Chief of Division of Health Care Facilities & Programs called the meeting b order at (10:33 a.m.) announcing this is the Home Health, Home Services and Home Nursing Advisory Committee Meeting with today's date being January 11, 2023.

Karen Senger reminded Members and Department Staff that this meeting is being conducted viaWebEx and gave a brief explanation of the protocols for conducting this meeting. This is a public meeting, and it is subject to the Open Meetings Act (OMA) and a recording of this meeting is permitted. Today's meeting is being conducted via WebEx, which allows audio and other information said during the session to be recorded. By joining this session, you are automatically consenting to such recordings and if you do not consent to be recorded, then you should not joint session. This introduction statement is being read so everyone is aware that this meeting is being recorded.

Since we are conducting this meeting from our desks and computers via WebEx, you will need to please mute your phone or computer when you are not speaking so we do not get echo feedback from members and quests of the public that wish to speak. Members of the Public and other wishing to speak will be recognized by the chair during public comment period, which will open the floor at the end of the meeting for discussion/comments.

An introduction of Board members was conducted to establish a quorum. After roll call was conducted, a quorum was established at this time and the meeting was called to order.

# Approval of the Draft Minutes for the October 12, 2022, Open Meeting Session (VOTE} {Exhibit 1}

The draft minutes of the October 12, 2022, meeting minutes were reviewed and discussed by the Board. A motion of approval was made by member Jack Kreger, to approve the minutes, with a 2<sup>nd</sup> motion made by member, Aishling T. Dalton Kelly and was unanimously approved by all board members, as presented.

# **OLD BUSINESS**

#### Discuss regulatory issues: possible educational links on Website 245.30c)1) I) Staff Safety

At the last meeting, we discussed the requirement within the regulations regarding staff safety and education identifying potential dangers to the health and safety of the agency personnel. We came up with a resource document with some links and great references. It seemed that there was a lot of confusion as an industry, and we wanted to be able to provide some helpful tools and are considering putting this on the IDPH website. There were links to the 3 national organizations. There were a variety of topics such as patient violence, hostile animals, and dangerous travel conditions. This document is meant as guidance only. Most of the members were excited about this information and look forward to sharing with those working in the industry. Jack Kreger asked if facilities that proved to use this guidance would be looked upon favorably in their survey. Karen responded that this would be helpful and looked upon favorably, but the facility would have to pick and choose what was relevant to them. It is not mandated but encouraged. Karen is going to check with our legal department and come back at the next meeting if it would be possible to share the links on the IPDH website as educational information.

### **NEW BUSINESS**

#### Policies required of agency to prepare for initial license

After the last meeting, we wanted to talk about what is required for new agencies to prepare for initial licensure. We have a checklist that we give these agencies, to prepare them. The agencies will still need to read the rules and regulations, so this does not go into as much detail as the rules and regulations do. We want to be cognizant of not trying to micromanage these agencies. Karen asks for thoughts on this document. Aishling thinks this is a good "go-to" quick guide for new agencies and will be a big help. Jack agrees because the rules can be intimidating so this document helps as a reference back to the rules. Many other members agree, and Karen suggests that everyone share this information with new agencies.

#### **Board Membership Updates/reappointment**

We currently have 6 vacancies. We have not had any new appointments of late, although we know that the Director's office is working on a backlog of nominees. They are also working on re-appointments so if you have not heard anything, please know that it is being processed, we are still always looking for new members, so if you know anyone that might be interested, please contact Karen Senger or Jackie Richmond. Aishling asks what the terms are for appointments. Members can be on the board for 3 terms of 3 years each. If after that time, someone still wants to be on the board, they would have to take a year off, and then can reapply.

#### Evaluation of Educational materials- HCWBC, Training

Karen Senger notes that this was asked for at the last meeting. This is a quick review of educational materials sent out to all providers regarding common deficiencies. IDPH did a cursory review of surveys done in a two-month period to see what the most common deficiencies were. Website checks were decreasing, as were the annual healthcare worker registration for training, that is now 10 hours instead of 8. The one thing that has increased in that period is the Alzheimer's education. There was also a decrease with service plans, so hopefully the education is working. We will track this again for the next quarter and look more closely at the results before our next meeting. Hopefully we will continue to see a decrease. Jack asks to see numbers at the next meeting if possible. Karen agrees to that.

#### Information on electronic visit verification (EVV) all Medicaid funded

This item is more informational, about the electronic visit verification that has been mandated. Those of you who deal with Medicaid for home health or home nursing are going to eventually must go through the electronic visit verification process. It was supposed to go into effect January 2023, but they have asked for an extension, so I believe it has not started yet.

### Home Health Agency Initial Applications Report

This is for 2022 and we've only had 27 initial applications for the year. The number has slowly increased since the Moratorium of 2013 is no longer in place. We currently have 593 licensed home health agencies. 540 of them are Medicare certified. We had 21 closures this past year. We are averaging about 20 changes of ownerships for the year.

#### Home Health Survey Statistics / survey findings

We have always been able to provide a summary of federal citations but, a few years ago the federal database switched from Aspen to iQIES, and they didn't initially have the ability to track those citations. We have been working with iQIES to get that report ability and that is just now coming to fruition. Also, some of the citation tag numbers have changed so we have a list of those differences. The common deficiencies seem to be under high coordination of care and acceptance. Plan of care has always been high, but those numbers seem to have gone down. There has been a decrease in all the common deficiencies. We will be able to bring a comparison to the next meeting. Many providers have made improvements, so we are hoping for this trend in the right direction.

#### Home Services, Home Nursing, Home Services Placement and Home Nursing Placement Applications/ survey

We have seen a decline in the number of applicants but not a dramatic decline. We have quite a few that are in the process of initial application that we are working on. We are still seeing the highest number of applicants in home services followed by home nursing. The placement agencies have really dwindled in the number of new providers. We've had 125 closures overall. Most of those are due to not meeting the requirements of having provided services in the first 2 years of being licensed. We will not review for another license in that case. If you've been operational for any 2-year period, we will close the agency. We also had a lot of initial applications that just didn't follow through or decided not to continue to apply for the license. So, it's a combination of those instances that led to the 125 that closed in 2022.

We had 1250 licensed providers for the year, home services being the highest number at 936. Home nursing is at 266, and home services placement at 42 and home nursing placement at 6. We had quite a few changes of ownership in that time, mainly home services. This list shows that there are many agencies who have not had any clients in their first renewal, from when they first got licensed and prior to their second renewal, so those are being monitored. They must have clients in the next year, or they will not be renewed.

There was a total of 503 surveys for 2022. 186 were for initials, 267 for renewals, 29 complaints and 15 unlicensed agencies. We had a lot of unlicensed complaints wherein we did an onsite visit. This means that we delivered a letter to the facility regarding the license and then interviewed them and required them to apply for licensure. We've seen an increase in this type of situation in the last 6 months.

Liz Vogt asked, regarding home services agencies, if there are any other checks on control of growth of agencies other than just having clients within the last 2 years. Has there been any analysis done on what an adequate number of home service agencies there are to meet the need of the client basis? She's concerned with the growing number of aging populations in Illinois and wonders what can be done. Karen said that most of the agencies blamed it on Covid and not wanting people in their home and asked if maybe that was something that the Association might want to investigate.

Jack asked for clarification on some beginning numbers for agencies licensed at the beginning of 2022. Karen will find out the information and bring back at the next meeting.

Karen presented the number and type of federal deficiencies cited for HHA from 2016-2023 and most frequent deficiencies cited in the past year.

#### Map location of HS/HN agencies in the State

This map shows how many agencies are in each county in Illinois. This is just what county their home base is in, not which counties they cover. We do not currently have a way to generate a report of that at this time. There are far fewer agencies in the southern part of the state compared to the Cook County area. Most of these agencies do cover approximately 5-6 surrounding counties, especially in the southern area. Sharon Bargmann notes that due to their lower number of employees, the county coverage for her agency has gone down quite a bit.

Karen notes that we can amend this map to add home health and do another map just for home health as well. Sharon notes that what she's hearing from area hospitals is that most of the agencies they try to refer to upon release, are just full and then the patients aren't getting that care on the back end of their visit that they need. Karen asks if that is largely due to staffing. Sharon confirms that is generally the reason and that she can't hire because the applicants that she is getting won't take the pay they can offer.

### **OASIS Training Updates**

Siji Varghese notes that there were two trainings this year. November was an overview and a case study training in December. That information is posted on our website. She is planning another training for the spring. That information will be posted on our IDPH calendar on our website and there will be an announcement via e-mail for people to sign up for.

### **Public comment**

Sharon Bargmann asked what everyone is doing about Covid testing of their staff that are not vaccinated. Kris Snell of Clay County Health Department said that their staff still test weekly.

# **Board membership training (Ethics, OMA, Harassment)**

Jackie Richmond said that most of the trainings are completed. The one person left knows the requirement but has been inundated with work. It is on her to-do list. Thank you to everyone that has completed their trainings.

Future meetings Next Meeting: April 12, 2023, • 10:30 am

Adjourn at 11:24 a.m. – motion made by Sharon Bargmann, seconded by Jeff Workman.