



Meeting Minutes

Home Health, Home Services and Home Nursing Advisory Committee Meeting

July 13, 2022 - 10:30 a.m. – 12:30 p.m.

WebEx Meeting Access Information:

<https://illinois.webex.com/illinois/j.php?MTID=m5106724be4693675074f6dcfd0a34212>

Meeting number (access code): 2457 746 0539

Meeting password: HHA071322

Join from Mobile Device or Phone

Mobile Device: 24577460539@illinois.webex.com

You can also dial 173.243.2.68 and enter your meeting number

Call to Order

Members Present: Aishling T. Dalton Kelly, Jack Kreger, Tina Moore, Rowena Oliva, Patricia Pierro, and Jeffrey Workman

Members Absent: Sharon Bargmann, Shawna O’Dell, Yaquta Patni, Linnea Windel

Department Staff: Karen Senger, Sean Daily, Sara Wilcockson, Brian Mathis, Seulgi Han, IDPH Attorney, Jackie Richmond, Stephanie Glenn, Rani Harms

Guests: Liz Vogt

Introduction of Committee Members and Guests

Karen Senger, Division Chief of Division of Health Care Facilities & Programs called the meeting to order at (10:40 a.m.) announcing this is the Home Health, Home Services and Home Nursing Advisory Committee Meeting with today’s date being July 13, 2022.

Karen Senger reminded Members and Department Staff that this meeting is being conducted via WebEx 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 join this 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 guests 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 April 13, 2022, Open and Closed Meeting Session (VOTE) {Exhibit 1}

The draft minutes of the April 13, 2022, meeting minutes were reviewed and discussed by the Board. A motion was made by member Jeffrey Workman, to approve the minutes, 2nd motion made by member, Rowena Oliva and was unanimously approved by all board members, as presented.

OLD BUSINESS

Discussion on Public Act 100-0513 Nurse Practice Act Adm Code 1300.20 {Exhibit 2}

Educational Tools/checklist for compliance Adm Code 955
Healthcare Worker Background Check and common survey deficiencies {Exhibit 2}
[Guidance for Common Deficiency Findings \(illinois.gov\)](#)
[New-Hire-Checklist-HCWBC.pdf \(illinois.gov\)](#)

At the last meeting, we developed a checklist that agencies can utilize to conduct their initial and annual health care worker background check process for Home Health, home Nursing and Home Services and it could be used for volunteers that require a healthcare worker background. The checklist has been finalized. IDPH is in the process of sending these out to all the agencies via e-mail, along with several other documents. It is on our website under the home services, home nursing and home health sections under resources. This document is available for staff use. It is not mandatory for agencies to utilize; just a valuable tool available to guide them through the required elements. Hopefully this will make an improvement with the agencies, especially for new agencies to ensure compliance. Next is the Guidance for Common Deficiency Findings, which is also related to home services and home nursing. This shows the common areas that we consistently see violations from surveys. It is another educational tool helping facilities with requirements. Also, there is education about the 6 Internet searches required for health care worker background on the IDPH Web portal website with instructions. These are not under references subheading, but under guidance on the website. We really hope this will help the industry.

Discussion on how to manage client funds (update current 245.40 c) 5) C)) {Exhibit 3}

At the last meeting, we discussed various ways that your facilities ensure the client funds are managed. Client funds are mentioned briefly in our rules, under staffing and staff responsibilities for a home service worker. We were wondering if certain areas should be elaborated or updated or if what we have is sufficient. We do state that agencies should have a policy in place, which we check on during surveys, to make sure they have a system to manage client funds. Tina Moore asked if common deficiencies should be included in this section. Karen said that we could add a link in this section but that the common deficiencies are on the website in other areas and that we would take this idea under consideration. Rowena Oliva states that she considers this sufficient. Karen also states that we can add further language at another date if we decide to amend this. Jack Kreger asked if this is a common deficiency. Karen said that the deficiencies vary, but we are keeping an eye out for this deficiency to make sure that if it becomes more of a problem, we can make changes.

Link Adopted regulations published in Sec State, dated 6/17/22 effective 5/31/22, starts page 10410 2022 Illinois Register Issue 25 (ilsos.gov)

These amendments have been sent out to the facilities and have also been changed on our website. The biggest changes relate to the increase in educational training for home services and what home service workers can and cannot do. We've expanded, per the Board's request, to increase the training from 4 to 5, with a total of 10 hours. We've been working with our staff on the changes and getting the paperwork in place. We will not be citing this deficiency until at least August 1, 2022. This will be for new hires that don't meet the 5 hours initially and 10 hours of annual training.

Jack Kreger asks about bathing and why it has no annual requirement. He asks what makes bathing different. Karen says that with the homecare Association, they were looking at the variety of ways for bathing, especially for someone such as an Alzheimer's patient. Looking at safety measures and supervision on situations like that. Jack questions the wording of "minimum 2 years' experience working in" a facility-based health care setting and if that is a requirement for the trainer in that situation. Where do they get the qualifications? Karen states that it specifies that they "performed" those duties before they can train someone else. She clarifies that we don't want someone to train people how to do the job if they don't have the training. Jack asks if a new CNA would be in good standing – would they be ok to train? Aishling agrees that yes, they should be ok because once they come out of clinicals, they will have 40 hours of onsite experience and bathing is a huge portion of that. They would certainly be proficient in their skills, at least enough to teach others. Jack says that he would like some clarification added and suggests that it reflect a CNA in good standing practicing in a home environment could qualify. He thinks that there does not need to be clarification in the community home health or the facility-based healthcare but only home services. Rowena Oliva is agreeable to that. Karen will investigate making those amendments. We will need to be able to identify how the person meets the set qualifications.

Jack questioned if it is easy for a surveyor to ascertain who is qualified. Karen stated, the agency would need to provide a CV or past work history/experience in the employee personnel file.

Liz Vogt asks if the agency supervisor and the trainer can be the same person. Karen answers that yes, they can be the same. Next, she asks if there was a typo – something about the definitions in 245.70 and podiatrist being accidentally stricken as being able to order - non-statutory or statutory?

Karen says she will double check the definition.

NEW BUSINESS

ANT findings power point {Exhibit 4}

245.25

Substantial Abuse Neglect is currently under review by the ANT Committee Comes through the Nursing Home Care Act.

The board would like to address the issue of findings in relationship to the Administrative Code, to get some ideas on abuse and neglect and what an agency must report. A PowerPoint presentation was provided by our special investigations division along with members from healthcare worker background. They were not able to be here so Karen will go through the presentation and hopefully be able to answer questions that anyone might have. Basically, to substantiate abuse, neglect or misappropriation of property perpetrated by CNA, Home Health aide, home service worker, the agency must provide a report of the incident to the Department, who will gather more data and refer to the ANT Committee. This could be a home service worker or anyone that is providing direct care that is not a licensed profession. The ANT Committee will be able to determine if someone has been accused and confirmed that abuse/neglect/misappropriation occurred. These accusations will come through by an incident report from the facility. Also, they can be identified by complaint or surveys. The agencies must investigate the

allegation and report it to the Department within 14 days of the event. The report of the event must be sent within 24 hours of the completion of the investigation. This report must be maintained for 12 months following the event. Once received, the Department will likely reach out to the agency for more detailed information. We will then refer the information on to the ANT Committee for final review and determination.

The report should contain name, social security number, date of hire, position title, any disciplinary action taken or suspension, detailed account of the event, date and time, a copy of the police report, any interviews done, and copies of the care plans.

The Committee is made up of members of the special investigations division, representatives of healthcare worker background and attorneys. They vote to determine the results. There must be a majority vote. They may request additional information or evidence.

If they determine that the allegations are substantiated, the aide will be notified via certified mail of the findings and their ineligibility to work in a direct care position in healthcare. This will be reflected in the Web Portal on the aide's registry profile. The aide will have 30 days to request a hearing to contest the findings.

Jack Kreger asked if the agency that employs the aide will also be notified of the determination. Karen replied that yes, the agency will be notified.

If a hearing is requested, there will be a hearing and the determination of that hearing will also be sent via certified mail. If the employee wants to make a statement, that can also be attached to their web portal profile page along with the final determination. The Department of Aging, DHS and Adult Protective Services Registry are also identified of the final determination.

An employee cannot work in any direct care position with an ANT finding. There is no waiver process, and the findings will remain on their profile indefinitely.

Findings of neglect can be removed after one year, but it is not an automatic process. The employee will have to petition to have the neglect finding removed.

We really want to ensure that we're reaching out to our agencies and encourage the facilities to follow through with the police report. They must take that action upon themselves. The Department does not notify the police.

Tina Moore questioned if the Adult Protective Services registry and the Web Portal will match. Karen affirmed that yes, they will always match.

Karen is going to check with Allen Griffey of Healthcare Worker Registry as to how frequently they make sure that there is nothing conflicting between the two registries.

Tina wants to know if agencies can get access to the APS and DOA registries.

Karen states that those are not public registries but that we can find out if that is a possibility.

Jack Kreger wonders if the person remains on the registry as "eligible" until the determination is made in the ANT investigation process. Karen replies that yes, until due process is complete, they remain as eligible.

Karen again states that we need to strongly encourage facilities to not just fire an employee that has an incident but get them through the whole ANT notification process so that, if it is truly needed, they can be removed from the system and marked as ineligible and then other facilities cannot hire them and they cannot continue to harm patients.

Aishling wants clarification on the ANT findings and whether the findings stay on their registry indefinitely or if they can be removed after a year.

Karen said yes remain indefinitely, except they can request a finding of neglect to be removed. The Committee reviews the request to remove.

Aishling asks where this rebuttal section is located on the registry. Karen responds that on the Web Portal, under the person's picture, there is a bubble that says the allegation and the next bubble is where the statement is located.

Jack Kreger asks how often this situation happens. Karen said that most of these are LTC and not HHA. We maybe have 10 a year but the process must be VERY complete. It is not taken lightly. This can take away a person's livelihood. We want the industry to take it very seriously.

Board Membership Updates

Karen thanked all the board members for their work and noted that there are still vacancies currently on the board. There are 6 nominees up for approval now. She stated the need for a general public consumer advocate, a general public/home service worker, a home services representative, a general public consumer family member of a home services industry and a representative for a private not-for-profit home health representative for a home health agency.

Rule making process {Exhibit 5}

One of the board members requested this information on the rulemaking process. When you start initiating a rulemaking process, it must be completed within a year, or you must start the whole process all over again. We start with a review and development of the rules, take them to legal for approval, take the governor's office and then to this board for approval and then to State Board of Health. Then the first public comment period, which allows 45 days. If there are comments that the Department needs to review and accept or not accept the recommendations. Then we need to submit them on for review again, along with another 45-day comment period to JCAR. It's a lengthy process but it needs to be so that it is thoroughly reviewed. Then ultimately, it would be adopted and located on the Secretary of State's website. The link [Illinois Register \(ilsos.gov\)](http://ilsos.gov) is a weekly publication which identify which rule are out there for notice of rulemaking. We would suggest that agencies bookmark the site so that they can regularly check which changes are being made. We will be e-mailing major changes to the facilities involved, but if it's a small change or minor grammatical issue, we won't be sending anything out.

Tina Moore wanted to verify the training hours that we discussed earlier. Karen verified that someone hired August 1 would be expected to start doing the 10 hours. Anyone hired before then would obviously, be given more time to get up to date with the additional time. We would like everyone to be compliant by 2023.

Home Health Agency Initial Applications Report {Exhibit 6}

We've had 13 new applications since January with four (4) of those files have been closed, four (4) agencies we are awaiting their letter of readiness for survey, four (4) are still in review and one (1) is awaiting survey. We've had seven (7) closures from January 1 to March 31, 2022. June's data isn't complete yet. Change of ownerships have dwindled, there have been 10 since January. Since the moratorium was lifted, things have not increased and HHA have stabilized in number of facilities.

Home Services, Home Nursing, Home Services Placement and Home Nursing Placement Applications {Exhibit 7}

There are 1,233 active licenses. 921 for home services and 266 are home nursing. There are 6 home nursing placement licenses. There are currently 40 applications in active review, 12 newly licensed and 7 were voluntarily withdrawn, 93 have received new licenses in the year 2022 to date. We have 13 that are at the point of requesting final documents to schedule for survey. 21 are actively scheduled for a survey in 2022. Of those remaining 2021 surveys, 26 of them are scheduled for survey. There's only 1 still awaiting final documents to schedule and 14 that are waiting to be scheduled. As far as initial licensing, home services had 68 thus far. 17 are home nursing, 6 are home service placement and only 2 are home nursing placement. So far, we've had 56 closures – 37 home services, 13 home nursing and 4 home service placement and 2 home nursing placement. As far as surveys are concerned, we're at 231 for the calendar year so far. 81 have been initial surveys, 130 have been annual surveys on-site, 15 have been complaint surveys on site for unlicensed agency surveys. We call those "drive-by's", if you've noticed that terminology. And there has been 1 follow up survey. Those follow up surveys are where we make sure the plan of correction put in place after a citation is being followed.

Tina Moore asks if initial survey licensing is still done in person. Rani replied that these surveys are still being done via WebEx. We've found it to be the most efficient and effective

Karen mentions that there is no data for findings and that they are usually done twice a year. We will bring that back again at the next meeting.

OASIS Training Updates

Siji Varghese was not available to give any training updates.

Karen did mention that the department is looking at our regulations in relationship to branch offices. Currently, the rules are vague regarding how the branch office is functioning independently of the parent office. If you have any concerns regarding this, or issues you want to address, please let me know.

Public Comment Period

Liz Vogt asks Karen to repeat what the upcoming rule making changes are. Karen repeated the above information regarding branch information changes. Karen asks if there are any concerns or topics needing discussion. Rowena Oliva asks for clarification of Supportive Living/Assisted living and what regulations guide their practice. Karen says that she can get those regulatory requirements and maybe have an employee who oversees those come and speak at the next meeting. Jack Kreger asks for a status report on rule changes. Karen questions if he means on surveys specifically. He responds that yes, he is wondering with the implement changes, can we get an update on survey finding related to the regulations. Karen will bring the requested information to the next meetings in October and January.

Meeting Schedule for 2022 and Tentative Meeting Schedule for 2023

Meeting Schedule for 2022

Karen Senger reviewed the meeting dates for 2022 with the Board for informational purposes. Committee members were reminded to mark their calendars accordingly and plan to attend.

Tentative Meeting Schedule for 2023

Members were given a copy of the tentative meeting schedule for 2023 for review and approval. The Department is currently working on scheduling these dates, times, and meeting locations for next year. Members were asked to mark their calendar accordingly and plan to attend.

Next Meeting:

The next Committee Meeting is scheduled for October 12, 2022. This meeting will tentatively be held via WebEx.

Committee Members were given a copy of the Committee Meeting Schedule for 2022 and 2023 and asked to mark their calendars accordingly and plan on attending.

Closing remarks

Chair asked Committee members if there were any other closing comments hearing none, wanted to thank everyone for joining the call and their input for discussion and the next meeting is scheduled for October 12, 2022, to convene at 10:30 a.m. and will be held via WebEx. Further meeting information will be sent out for this meeting.

If there was nothing else to address or comments would need a motion to adjourn the meeting. Committee Member, Rowena Oliva made a motion to adjourn, and 2nd by Committee Member, Aishling Dalton Kelly and all in favor the meeting was adjourned.

Meeting Adjourned at 11:51 am