Restorative Nursing Programs: Now More Than Ever

August 23, 2016

OHCA Office
Lewis Center, Ohio
Restorative Nursing Programs: Now More Than Ever

Date & Location:
August 23, 2016

OHCA office
55 Green Meadows Drive, South
Lewis Center, Ohio 43035  614-436-4154

Restorative nursing programs affect quality of life, survey, reimbursement, and resident/family choice. These programs are vital to your facility’s success, your residents’ ability to thrive and a facility staff’s job satisfaction. Quality of life is a natural outcome of restorative care.

Resident centered, whole person restorative nursing care is more important now than it has ever been. OBRA 1987 required skilled nursing facilities to identify and act on risk factors to prevent functional decline in residents. It included a mandate for facilities to allow only medically unavoidable declines, and facilities are expected to plan care that will delay any decline in resident function. Functional decline can lead to depression, withdrawal, social isolation, and complications of immobility such as incontinence and pressure ulcers. Many of the changes that occurred with the MDS 3.0 directly or indirectly relate to restorative nursing.

When the Resource Utilization Groups (RUG’s) were initiated, restorative nursing programs became part of Medicare reimbursement. In many states they are also a part of Medicaid reimbursement.

In March of 2011, the National Quality Forum released 21 measures for public reporting and quality improvement that will be used at the Nursing Home Compare website. Both long and short stay residents are included in this data.

Several measures will affect restorative nursing programs. These measures include:
- Percentage of residents who need increased help with ADL’s
- Physical therapy or restorative nursing for long stay residents with a new balance problem
- Percentage of long term residents experiencing one or more falls with major injury
- Percentage of low risk residents who lose control of their bowels or bladder
- Percentage of long term residents who have a catheter inserted and left in the bladder

For restorative nursing programs to be effective and profitable, attention to – and support for – restorative nursing must come from the top. The administrator, director of nurses, and therapy director must be on board. A facility-wide culture of restorative nursing must be present.

Act now and get everyone on board with this comprehensive educational program, restorative nursing must be present.

For more detailed information see www.efohca.org or for nurses and nursing home administrators.

This program has been approved for six (6.0) hours of continuing education credit for nurses and nursing home administrators.

Schedule:

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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</thead>
<tbody>
<tr>
<td>8:30 a.m.</td>
<td>Check in &amp; Coffee</td>
</tr>
<tr>
<td>9:00 a.m.</td>
<td>Program begins</td>
</tr>
<tr>
<td>12:00 noon</td>
<td></td>
</tr>
<tr>
<td></td>
<td>lunch (included)</td>
</tr>
<tr>
<td>4:00 p.m.</td>
<td>Program adjourns</td>
</tr>
</tbody>
</table>

Speaker:

Linda Bach, RN, CRNAC is the Director of Clinical Services for Wern and Associates, Inc. With over forty years of hands-on experience in the healthcare field, Linda is a nationally recognized expert in nursing documentation systems with an emphasis on care plan development, as well as nursing rehabilitation and restorative program development and implementation. Once a Master Instructor for the NASPAC MDS Certification Program, Linda has also distinguished herself as an expert in MDS analysis and training. Linda’s expertise extends to Medicare Skilled Services and Prospective Payment System education and Medicaid Case Management. Linda is a member of several professional associations including the Ohio Health Care Association’s Council of Nurses.

Registration

www.efohca.org

Name: ____________________________________________________
Title: ____________________________________________________
Email Address (required): __________________________________

Company Information:

Facility: __________________________________________________
Address: __________________________________________________
City: __________________________________ State: __________ Zip: __________
Phone: (__________) ______________________

Credit Card: MC ___ VISA ___ AMEX ___ Discover ___
Card Number: ____________________________________________ Expiration Date: ______ / ______
Card Holder: ____________________________________________ Signature: ___________________________

Payment must be included to be processed.
Send this completed form and payment to:
EFOHCA, 55 Green Meadows Drive South, Lewis Center, Ohio 43035  •  Fax: 614/436-0939
Checks accepted with mail-in registrations. Credit cards accepted with online registrations.

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Registration Fees:

<table>
<thead>
<tr>
<th>Category</th>
<th>Member Fee</th>
<th>Non-Member Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members:</td>
<td>$ 125</td>
<td>$ 155</td>
</tr>
<tr>
<td>(before 8/09)</td>
<td>$ 155</td>
<td>$ 305</td>
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<tr>
<td>Non-Members:</td>
<td>$ 245</td>
<td>$ 305</td>
</tr>
<tr>
<td>(before 8/09)</td>
<td>$ 305</td>
<td>(8/09 and after)</td>
</tr>
</tbody>
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For more detailed information see www.efohca.org.

Or Contact the Association at 614.436.4154.