COMMONWEALTH OF MASSACHUSETTS

BOARD OF REGISTRATION OF NURSING HOME ADMINISTRATORS

THIS AGENDA CONSTITUTES NOTICE OF THE REGULARLY SCHEDULED MEETING OF THE BOARD OF REGISTRATION OF NURSING HOME ADMINISTRATORS IN COMPLIANCE WITH THE OPEN MEETING LAW, M.G.L. c. 30A, § 20

Friday, February 17, 2017 10:00 a.m. to 2:00 p.m.

239 Causeway Street ~ 4th Floor ~ Room 417A Boston, Massachusetts 02114

Agenda

Time Item #	Item	Exhibits	Staff Contac
10:00 I a.m.	Call to Order Determination of Quorum Notice of electronic recording		Board Chair
II	Approval of Agenda	Draft Agenda	Board
III	Conflict of Interest		Board Chair
IV	Approval of Minutes of Regularly Scheduled Meeting A. January 20, 2016 Board Meeting	Draft Minutes	Board
V	 Deemed Status Transition NAB Standards for Approved CEU Recommendation for Adoption 		
VI	A. Request for Administrator in Training Approval None B. Request for Administrator in Training Credit 1. Rajat Sheth Facility: Brush Hill Care Center Employer: Milton HC Operating LLC Preceptor: Brian Freedman (COI-Former Board Member) 2. Robert Fonoi Facility: River Terrace Rehabilitation & Health Care Center Employer: Marquis Health Services, LLC Preceptor: Michael Bell, NH5086 3. Gina Elia Facility: St. Mary's Healthcare Center Employer: Covenant Health	Applications and related documents	Board Members

	Administrator in Training		
	C. Request for Administrator in Training Change of		
	Preceptor		
	1. Eliezer Kahn		
	Facility: Briarwood Rehabilitation & Healthcare		
	Center Center		
	Employer: Marquis Health Services LLC		
	Preceptor: Janet Rodriques, NH5250		
	2. Kathleen Stewart		
	Facility: Poet's Seat Health Care Center		
	Employer: Somerset Health Care Management		
VII	Group		Board
VII	Preceptor: Michele Carney, NH2463	A1: 4: 1	Member
	3. <u>Miciyiaah Renrick</u>	Applications and related documents	
	Facility: Wingate at Chestnut Hill	related documents	
	Employer: Wingate Healthcare		
	<u>Preceptor:</u> Rodney Gonsalves, NH3408		
	D. Administrator in Training Mid-Point Review		
	1. Augustine Aiguosatile		
	Facility: Williamansett Center East		
	Employer: Northeast Health Group, Inc.		
	Preceptor: Mary Uschmann, NH933		
	E. Administrator in Training Completion Review		
	None None		
	Review of Applications for Licensure by Reciprocity		
VIII	1. <u>Beth J. Barends</u> (NY)	Applications and	Board
	2. <u>Katherine E. Hawley</u> (CT)	related documents	Member
	CEU Request		
IX	None		
	Open Investigations		
	Triage(s)		
	None		
X	Staff Assignment(s)		
1	1. Tara Verge (SA-INV-7508)		
	Facility: Brentwood Rehabilitation and		
	Healthcare Center		
	Employer: Marquis Health Services		
	2. Brett Stewart (SA-INV-9102)		
	Facility: West Side House LTC		
	Employer: Essex Group Management Corp.		
	Complaint(s)		
	None		
	Flex Session		
XI	A. Announcements		Board
	B. Topics for the next Agenda		

	XII	 Executive Session (Roll call vote) The Board will meet in Executive Session as authorized pursuant to M.G.L. c.30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual. 1. Specifically, the Board will discuss and evaluate the Good Moral Character provision of a pending application. 2. In addition, the Board will discuss and evaluate the reputation, character, physical condition or mental health, rather than professional competence, of licensees relevant to their petitions for license status change. The Board will not reconvene in open session subsequent to the executive session. 	Closed Session	Board Chair
2:00 p.m.	XIII	Adjournment-next Board meeting scheduled for March 17, 2017		Board

COMMONWEALTH OF MASSACHUSETTS

BOARD OF REGISTRATION OF NURSING HOME ADMINISTRATORS

BOARD MEETING

Friday, February 17, 2017 239 Causeway Street - 4th floor, Room 417A/B Boston, MA 02114

MINUTES

<u>Board Members</u> Nancy Lordan, Nursing Home Administrator 3, Chair

<u>Present:</u> Roxanne Webster, Registered Nurse, Secretary

Sherman Lohnes, Department of Public Health James Divver, Nursing Home Administrator 4

Michael Baldassarre, Nursing Home Administrator 2

Patrick J Stapleton, Nursing Home Administrator 5 (Non-Proprietary

Nursing Home)

MaryEllen Coyne, Office of Long Term Services and Supports at

MassHealth

Jeannette Sheehan, Public Member 1 Daniel Gebremedhin, Physician

Board Members Mary McKenna, Executive Office of Elder Affairs

not Present: William Graves, Nursing Home Administrator 1, Vice-Chair

Aaron Tobey, Public Member 2

Mary K. Moscato, Hospital Administrator

Staff Present: Roberlyne Cherfils, Executive Director, Multi-Boards, BHPL

Philip Beattie, Deputy Executive Director, Multi-Boards, BHPL Mary Strachan, Board Counsel, Office of the General Counsel, DPH

Anson Chu, Office Support Specialist, Multi-Boards, BHPL Clifford V. Pascarella II, JD, Board Investigator, BHPL

Guests: Student from Northeastern University

I. Call to Order - Determination of Quorum

A quorum of the Board was present. Ms. Lordan, Board Chair, called the meeting to order at 10:05 a.m.

II. Approval of Agenda

Board members reviewed the meeting Agenda.

<u>DISCUSSION:</u> Ms. Cherfils informed the Board that the one item in the Executive Session will be deferred until the next scheduled Board meeting.

<u>ACTION:</u> Mr. Divver made a motion to approve the agenda as amended; Ms. Webster seconded the motion; Motion passed with Board members present and voting in favor unanimously

Document: February 17, 2017 Regularly Scheduled Board Meeting Agenda.

III. Conflict of Interest

<u>DISCUSSION:</u> Ms. Cherfils asked the Board members to review the agenda and disclose if there is any conflict of interest regarding any items on the agenda.

Mr. Lohnes informed the Board that there's an appearance of a conflict of interest on Item VI, B1, Rajat Sheth. Ms. Strachan informed the Board that she has not received the appearance of conflict forms from each Board member, therefore, the forms have not yet been sent to the Governor's Office for review; consequently, the item mist be deferred.

Item VI, B1, Rajat Sheth will be deferred for the next scheduled Board meeting.

IV. Approval of Minutes

A. Minutes of the Regularly Scheduled Board Meeting: January 20, 2017

The Board reviewed the January 20, 2017 Regularly Scheduled Board Meeting Minutes.

<u>ACTION</u>: Mr. Divver made a motion to approve the minutes as presented; Ms. Sheehan seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: January 20, 2017 Regularly Scheduled Board Meeting Minutes

V. Deemed Status Transition

- NAB Standards for Approved CEU
- Recommendation for Adoption

DISCUSSION: Ms. Cherfils distributed some hand-outs to the Board for their review. She explained the history behind the Deemed Status organizations. Ms. Cherfils continued to explain the Deemed Status in the current regulations and how the terminology is now changed to "Approved Status". There are currently 11 organizations that have applied for Approved Status. Ms. Cherfils pointed out that all approved organizations will expire in 2020. Ms. Cherfils wants to know if the Board wants to continue with the approval/review of Approved Status organizations or refer them to the National Association of Long Term Care Administrator Boards ("NAB") and adopt NAB's national standards. Ms. Cherfils listed a few pros and cons for this transition if adopted by the Board. Mr. Divver wants to know how much the fee is for the organizations if they are referred to NAB. Ms. Cherfils informed the Board that it varies depending on the organization and many other factors. Ms. Strachan also chimed in and said she can draft a policy to reflect the regulations if the Board decide to defer to NAB's guidance. Ms. Webster noted that NAB does "approved status" for organizations and asked if

the process would change for individual licensees. Ms. Cherfils explained that individuals seeking approval for a course would still come before the Board.

<u>ACTION:</u> Mr. Divver made a motion to defer action on this matter until a policy is drafted and when Ms. Mary McKenna is present at the meeting, given her expertise as she is the designated Board member who reviews CEU related inquiries; Mr. Lohnes seconded the motion; Motion passed with Board members present and voting in favor unanimously.

VI. Administrator in Training

F. Request for Administrator in Training Approval None

G. Request for Administrator in Training Credit

Ms. Webster made the following recommendations:

1. Rajat Sheth

<u>Facility</u>: Brush Hill Health Care Center Employer: Milton HC Operating LLC

Preceptor: Brian Freedman, NH2864 (Former Board Member)

RECOMMENDATION: Deferred

ACTION: None

Documents: AIT Application and related documents.

2. Robert Fonoi

Facility: River Terrace Rehabilitation & Health Care Center

Employer: Marquis Health Services, LLC

Preceptor: Michael Bell, NH5086

<u>RECOMMENDATION</u>: Approve – 2 weeks credits

<u>ACTION</u>: Mr. Divver made a motion to accept the recommendation; Mr. Lohnes seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: AIT Application and related documents.

3. Gina Elia

Facility: St. Mary's Healthcare Center

<u>Employer:</u> Covenant Health <u>Preceptor</u>: Michael Isabella

RECOMMENDATION: Approve – 2 weeks credits

ACTION: Mr. Divver made a motion to accept the recommendation; Mr. Lohnes

seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: AIT Application and related documents.

VII. Administrator in Training

H. Request for Administrator in Training Change of Preceptor

1. Eliezer Kahn

Facility: Briarwood Rehabilitation & Healthcare Center

Employer: Marquis Health Services LLC Preceptor: Janet Rodrigues, NH5250

RECOMMENDATION: Approve

<u>ACTION</u>: Mr. Divver made a motion to accept the recommendation; Mr. Lohnes seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: AIT Application and related documents.

2. Kathleen Stewart

Facility: Poet's Seat Health Care Center

Employer: Somerset Health Care Management Group

Preceptor: Michele Carney, NH2463

RECOMMENDATION: Approve

<u>ACTION</u>: Mr. Divver made a motion to accept the recommendation; Mr. Lohnes seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: AIT Application and related documents.

3. Miciyiaah Renrick

<u>Facility:</u> Wingate at Chestnut Hill <u>Employer:</u> Wingate Healthcare

Preceptor: Rodney Gonsalves, NH3408

RECOMMENDATION: Approve

<u>ACTION</u>: Mr. Divver made a motion to accept the recommendation; Mr. Lohnes seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: AIT Application and related documents.

I. Administrator in Training Mid-Point Review

Ms. Webster made the following recommendations:

1. Augustine Aiguosatile

<u>Facility:</u> Williamansett Center East <u>Employer:</u> Northeast Health Group, Inc. Preceptor: Mary Uschmann, NH933

RECOMMENDATION: Approve

<u>ACTION</u>: Mr. Divver made a motion to accept the recommendation; Mr. Lohnes seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: AIT Application and related documents.

J. <u>Administrator in Training-Final Completion Review</u>
None

VIII. Review of Applications for Licensure by Reciprocity

Ms. Webster made the following recommendations:

1. <u>Beth J. Barends</u> (Licensed in: NY)

RECOMMENDATION: Approve

<u>ACTION</u>: Mr. Divver made a motion to accept the recommendation; Mr. Lohnes seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: Applications and related documents

2. Katherine E. Hawley (Licensed in: CT)

RECOMMENDATION: Approve

<u>ACTION</u>: Mr. Divver made a motion to accept the recommendation; Mr. Lohnes seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: Applications and related documents

IX. CEU Request

None

X. Open Investigations

Triage(s)

None

Staff Assignment(s)

3. Tara Verge (SA-INV-7508)

Facility: Brentwood Rehabilitation and Healthcare Center

Employer: Marquis Health Services

Mr. Pascarella presented this matter to the Board. Mr. Pascarella informed the Board that there were 15 deficiencies found on the initial survey. The deficiencies are listed on the Investigation Report that is distributed to the Board

On April 7, 2015 the Division of Health Care Facility Licensure and Certification ("DHCFLC") completed a recertification survey at the Brentwood Rehabilitation and Healthcare Center (the "Facility"). The survey found deficiencies in the Facility which required significant corrections, and such deficiencies constituted substandard quality of care. On April 17, 2015, the Board opened an investigation and requested that the NHA submit plan of correction. On August 7, 2015, the Board requested the licensee, as administrator of the Facility to submit a detailed response to the deficiencies found during the survey.

The April 7, 2015 survey found fifteen (15) deficiencies (**Attachment 1**):

- Develop/Implement Abuse/Neglect, etc. Policies, F 226 (page 1)
- Housekeeping & Maintenance Services, F 253 (page 2)
- Assessment Accuracy/Coordination/Certified, F 278 (page 5)
- Develop Comprehensive Care Plans, F 279 (page 7)
- Services Provided Meet Professional Standards, F 281 (page 8)
- Services by Qualified Persons/Per Care Plan, F 282 (page 10)
- Provide Care/Services for highest Well Being, F 309 (page 13)
- Treatment/SVCS to Prevent/Heal Pressure Sores, F 314 (page 14)
- Free of Accident Hazards/Supervision/Devices, F 323 (page 17)
- Drug Records, Label/Sore Drugs & Biologicals, F 431 (page 26)
- Infection Control, Prevent Spread, Linens, F 441 (page 27)
- Essential Equipment, Safe Operating Condition, F 456 (page 30)
- Lab SVCS Only When Ordered By Physician, F 504 (page 34)
- Res Records-Complete/Accurate/Accessible, F 514 (page 35)
- QAA Committee-Members/Meet Quarterly/Plans, F 520 (page 40)

DHCFLC sent a letter dated June 26, 2015, indicating that the first follow-up survey on June 16, 2015, determined that the Facility had corrected all the deficiencies associated with the April 7, 2015 initial survey (**Attachment 2**). The Board is reviewing this matter, because the survey finding of "substandard quality of care" is outside the scope of the delegated authority in Staff Action on Nursing Home Survey Reports adopted by the Board on October 21, 2016.

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<u>DISCUSSION</u>: Mr. Lohnes inquired whether Ms. Verge has had other substandard quality of care complaint in the past before and Ms. Webster wants to know if she is still employed

by the facility. Mr. Pascarella informed that Board that the Licensee does not have any other past substandard quality of care and is currently not working at the facility. Ms. Lordan noted that the facility had a lot of turnover (four Administrators and five Directors of Nursing) in a short period of time. Ms. Sheehan expressed her concerns about the nurses that were involved and wondered if an investigation will be initiated against those nurses. Ms. Strachan explained to Ms. Sheehan the process of the intake of a complaint process for the nurses. The MA Board of Nursing will have jurisdiction over the nurses and they will look at the practice of the RN and the DON.

<u>ACTION</u>: Mr. Divver made a motion to close the Staff Assignment as it doesn't rise to the level of a discipline; Mr. Baldassarre seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: Investigation Reports

4. Brett Stewart (SA-INV-9102)

Facility: West Side House LTC

Employer: Essex Group Management Corp.

Mr. Pascarella presented this matter to the Board. Mr. Pascarella informed the Board that there were 18 deficiencies found on the initial survey. The deficiencies are listed on the Investigation Report that is distributed to the Board.

The Board received information from the Division of Health Care Facility Licensure and Certification ("DHCFLC") that a December 29, 2015 survey of West Side House LTC Facility (the "Facility") found deficiencies that caused the Facility to not be in substantial compliance with the Federal regulations applicable to long-term care facilities (**See Attachment 1**). The following deficiencies were cited during the survey:

- Right to Refuse; Formulate Advance Directives, F 155 (page 1)
- Notify of Changes (Injury/Decline/Room, Etc.), F 157 (page 3)
- Develop/Implement Abuse/Neglect, Etc. Policies, F 226 (page 56)
- Housekeeping & Maintenance Services, F 253 (page 10)
- Quarterly Assessment At Least Every 3 Months, F 276 (page 12)
- Assessment Accuracy/Coordination/Certified, F 278 (page 12)
- Services Provided Meet Professional Standards, F 281 (page 17)
- Services By Qualified Persons/Per Care Plan, F 282 (page 22)
- Provide Care/Services for Highest Well Being, F 309 (page 27)
- ADL Care Provided for Dependent Residents, F 312 (page 30)
- Treatment/Devices to Maintain Hearing/Vision, F 313 (page 32)
- Treatment/SVCS to Prevent/Heal Pressure Sores, F 314 (page 36)
- Resident Free of Significant Med Errors, F 333 (page 41)
- Influenza and Pneumococcal Immunizations, F 334 (page 43)
- Pharmaceutical SVC Accurate Procedures, RPH, F 425 (page 47)
- Drug Records, Label/Store Drugs & Biologicals, F 431 (page 48)
- Infection Control, Prevent Spread, Linens, F 441 (page 50)
- Res Records-Complete/Accurate/Accessible, F 514 (page 54)

On February 24, 2016, the first follow-up survey found all of the deficiencies were corrected except for (See Attachment 2):

- Right to Refuse; Formulate Advance Directives, F 155
- ADL Care Provided for Dependent Residents, F 312

On March 17, 2016, the second follow-up survey found that all deficiencies were corrected (see Attachment 3).

<u>DISCUSSION</u>: Mr. Pascarella informed the Board that after the initial survey, there were still 2 deficiencies that were not corrected. By the 2nd follow-up letter that all deficiencies were corrected. Mr. Pascarella also informed the Board that the Administrator's license is currently expired as of June 2016. Mr. Lohnes was concerned that on page 9 of the survey there was an allegation of patient abuse by a Certified Nursing Assistant but the Licensee never reported that to DPH. Mr. Divver also was concerned that the Director of Nurses and other nurses at the facility resigned almost at once raising a question of the licensee's interactions with his own staff.

<u>ACTION</u>: Mr. Divver made a motion to open a complaint against Mr. Stewart; Ms. Webster seconded the motion; Motion passed with Board members present and voting in favor unanimously.

Documents: Investigation Reports

Complaint(s)

None

XI. Flex Session

A. Announcements None

B. Topics for the next Agenda None

XII. Executive Session (Roll call vote)

Deferred

XIII. Adjourn

There being no other business before the Board, Mr. Divver made a motion to adjourn the Board meeting; Ms. Webster seconded the motion. Motion passed with Board members present and voting in favor unanimously. The meeting was adjourned at 10:47 a.m.

The next meeting of the Board of Registration of Nursing Home Administrators will be held on Friday, March 17, 2017. The Board meeting begins at 10:00 a.m.

Respectfully submitted:

Nancy Lordan, NHA	 Date	
Chair		