



Developmental Disabilities Nurses of New Hampshire

www.dhhs.nh.gov/dcbcx/bds/nurses

DDNNH@dhhs.state.nh.us

MINUTES

19 January 2021

- 1) Meeting was called to order with **41** individuals in attendance.
- 2) Reviewed and approval of **December 2020** minutes as written with modifications discussed and accepted.
- 3) Treasurer's Report –
 - a) Reviewed and approved there is a balance of \$5249.02 between checking and savings.
 - b) There are currently 30 paid members.
- 4) Tiffany Crowell Reports
 - a) Covid19
Currently 129 positive cases with 72 recovered; 51 active and 6 deaths and 2 cases reported for the second time.
Covid19 vaccine arrived in NH 12/14/20 and vaccinations are beginning.
Periodic updates regarding the vaccinations will be sent out by Tiffany Crowell.
 - b) Explanation and conversation of meaning of "Calendar month" (He-M 1207.09(b)(1) Tiffany to send an email in regard to this.
 - c) Appendix K extended by through 90 days beyond the State of Emergency
 - d) Tiffany will send email in regard to recently updated guidance.
 - e) Medically Fragile definition is not moving forward at this time.
- 5) Questions/Discussions
 - a) Question- 30 grace period for QA's- Only if documented due to Covid 19.
 - b) Discussion on QA's and how they can be done in these times – ideas – Via Zoom, A "Mock" D/T no clients being available who need medications administered at this time, Do traditionally whenever possible. Further discussion to be had with Peter and Med committee. (Authorization Reg: 1201.06(b)(4) following direct observation by a nurse trainer, has been found competent, pursuant to NUR 404, to be authorized to administer medications)
 - c) Discussion had around defined "settings" with current changes due to Covid.
 - d) With changes to the current day program Tiffany advised to "know your setting, know what you are authorizing" always use the family to administer medications when it is applicable.
 - e) Discussion around state visit form for appointments
 - f) Question and discussion about how to document persons leaving services who self-medicate. (recommendation was to use QA form for final documentation)
 - g) No change/update on Definition of Frail
 - h) Discussion around CVS and other Pharmacies setting up Vaccine clinics and doing home visits or mobile units to vaccinate. Suggested to call 211 for latest information.
 - i) Discussion around paperwork needed. Suggestion- Phone PCP first because guardian must have PCP approval to be able to give consent. Register after these are completed. (<http://www.vaccines.nh.gov/>) (<https://www.nh.gov/Covid19/resources-guidance/vaccination-planning.htm>)
 - j) Question and discussion around whether other agencies are having Nurse Trainers track vaccines for staff members. Generally the response was it was the role of the Human Resource Department.
 - k) Discussion around Possible liability of Nurse Trainers giving vaccines
 - l) Website given to assist with resources for communicating about the vaccine (<https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc>)

- m) Films for new curriculum are to happen in February
- n) Test is being reviewed, all are asked to send the recommendation to cheryl.bergeron@unh.edu and/or megan.niemaszyk@unh.edu
- o) No Nurse Trainer class scheduled at this time but if you are in need of the training please send the name of the individual along to Tiffany.
- p) Discussion around referral needed for client with Prader Willi Syndrome in New Hampshire.

6) Next Months Agenda

- a) Policy and Procedure for Medical Marijuana
- b) Electronic Records and triple checks
- c) Medically Frail Definition to be discussed
- d) FAQ – update/revision/rewrite if needed
- e) Covid19 update

Meeting adjourned

“Stay Positive – Test Negative”

Next Meeting will be February 16, 2021.

Submitted by: Barbara A. Ribeiro, RN, BSN, CRRN, Nurse Trainer Easterseals NH

Secretary, DDNNH



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MINUTES

2/16/21

- 1) Meeting was called to order with **47** members in attendance
- 2) Review and approval of **January 2021** minutes as written with modifications discussed.
- 3) Officers Reports:
 - a) Treasurer's Report – Accepted as written. There are currently **33** paid members.
- 4) Business Discussion
 - a) Discussion about IM injections, many said they are willing to give IM injections and feel that as an RN this should be allowed. Tiffany spoke with representative from BON and determined that if we are working up to and including our scope of practice then we are allowed to do injections. As long as you're comfortable doing the task, you have the supplies and the skill set- we are NOT restricted
 - b) Scholarships- will give the same amount of money to the same person as last year. Brief discussion about raising the amount to \$350-\$500.
 - c) New curriculum- Cheryl says she did not get much feedback from any of us- subcommittee is formed to review curriculum and test questions- discussion about a central data bank to keep track of medication training class- who attended/ scores of tests. Logistics seem difficult
- 5) Tiffany let us know:
 - a) BDS has been in discussion with MCOs regarding annual physicals. Some individuals have had physicals via telehealth/virtual which has no hands on, since it is being billed as PE now they are not able to get in person PE and have insurance pay for it.
 - b) She had a discussion with Peter about the orders expiring within a year- he will give grace period through June 2021 for orders to be renewed- you will not be cited in this period. Question if after this period will it be med occurrences for each dose given after the order expiration date? If we document that renewal is being worked on will it still be cited. Pharmacy rules have cracked down on renewals/refills and the frequency these can be done.
 - c) Covid vaccines- she is working with the public health liaison to ensure those that need training and supplies get what they need. Please let her know if there are any difficulties. If you give vaccines from public health the doctor's order comes from the state doctor, Dr Chan. With these orders it is for deltoid site only. Emergency kits should come from them. Some agencies and vendors have their medical directors sign off.
- 6) Citation issues:
 - a) Controlled medication needs to be on a log by itself. Have been told it is a change in the regs. Regulation says: "Documentation of administration of controlled medication shall be in a log separate from the medication log for all other medications". If you do not have a separate log it could be cited.
 - b) Delays in Q/As, medication needs assessments, etc are being cited even though we were told that we had a 30 day grace period if we noted that the delay was d/t covid. We were advised to be "creative" with our Q/As so as not to be late.
 - c) Question arose if it has been more than a year since self- med assessment will that be cited? Client has not been in program D/T covid.

- d) Please send any citation issues/ questions for Peter/ Lisa to Janet Harmon prior to April meeting.
- 6) Question about drug diversion issues with our staff- if you have concerns contact Tiffany
- 7) Agitation vs Anxiety use of chemical restraints vs pre-med for an appointment, Tiffany will talk about this next month. This is a CMS issue that is coming up so clarifications will be needed as they are looking for compliance.
- 8) How do we reach the nurses who do not attend DDNNH meetings? How to get information to them so that our practices conform to regulation and information is disseminated?

Next Meeting will be 3/16/21

**Submitted by:
Jill Satterfield RN
Secretary, DDNNH**



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MINUTES March 16, 2021

- 1) Meeting was called to order with **42** individuals in attendance.
- 2) Review and approval of **February 16, 2021** minutes as written with modifications discussed and accepted.
 - a) 42 individuals attended
 - b) Spread sheet of information on all members will be sent out for additions and corrections.
- 3) Treasurer's Report
Cash on hand: \$30.00
Checking Account balance: \$280.84
Savings Account balance : \$5148.28
Total: \$5459.12

There are currently 33 paid members.
- 4) Tiffany Crowell Report for BEAS
 - a) Peter Bacon is currently out of the office and will not be with us today.
 - b) HRS has changed their name to **IntellectAbility** Continues to do business at replacingrisk.com
HRST name remains unchanged.
 - c) IntellectAbility will be offering a three-day training May 11-13 on zoom.
 - d) Guidance coming on clarification of anxiety vs agitation. Behavior might begin as anxiety but turn to agitation.
 - e) CMS wants to focus on data collection on all types of restraints (chemical, Seclusion, physical, authorized and unauthorized). Evidently Area Agencies are not tracking consistently.
More Info and Guidance to come....
 - f) Joyce Butterworth is updating the curriculum used to educate new nurse trainers
- 5) Questions emailed to Peter Bacon: (copied from email sent to Janet Harmon from Peter Bacon)
 - 1) If Day program is closed how do we re med-certify day program staff? What is the expectation on re-med certifying day program staff if the program is temporarily closed? **I think that we would look at these situations on a case by case basis. If the program was closed due to COVID and the staff person was not administering medications due to this, then we would certainly want to give the nurse trainers leeway regarding how they handle each specific situation. For example, there may be situations where the staff person has a long, positive track record in regard to med administration and the nurse may choose to do something simple to get them back online, while there may be other situations where the staff person has struggled in the past and the nurse may want to have the person take an actual class before doing an onsite. Lisa may be able to provide us with other examples of how this could be handled.**
 - 2) He-M 1201.04 (h) Medication orders and protocols shall be valid for no more than a year unless otherwise specified by the prescribing practitioner

Please verify that this will not be cited as a deficiency until the end of June (so will be in effect as of July 1, 2021) and that a 30-day grace period will be allowed going forward.

Yes, we will not looking at this information in any detail until 7/1/2021, and at that point we would handle the dates in the same manner we do with annual physical exams. For example, if the current medication order for a specific medication expires on 9/30/2021, we would be looking for a renewal order on or before 10/30/2021.

3) Please verify if the 30-day grace period for QAs is still in effect. **I believe that this has been discussed at various times over the past year and, to the best of my knowledge, there was never a 30-day grace period in place regarding conducting QA reviews. I think that the reason for this is that most nurses figured out quickly that there were various ways to complete their QA without actually going into the setting.**

4) Is Appendix K still in effect? Last time we met in Sept it was in effect until the end of February 2021. **My last understanding from Sandy Hunt was that an application was being submitted to extend the information in Appendix K, but I have not received an update regarding the current status of this document. Tiffany may have additional information regarding current status.**

6) Next Month's Agenda

- a) Peter Bacon will be joining our meeting.
- b) Review and vote on the By-Laws
- c) Elections
 - i President: Janet Harmon will be stepping up.
 - ii Vice President: Jill Satterfield has expressed interest
 - iii Secretary: Sandy Weber has expressed interest
 - iv Treasurer: Kelly Main will remain in the position
 - v Liaison: Lisa Clark, Barbara Ribeiro and Jennifer Boisvert have expressed interest
 - vi Tech Support: Leslie Evans has expressed interest in the new position
- d) Sub Committees:
 - i FAQ update with approval from BEAS
 - ii Medically Frail information
 - iii Training Event update
 - iv Medication training Update

Meeting adjourned

Next Meeting will be April 20, 2021

Peg Cross RN MS Easterseals NH

Secretary, DDNNH

Additional info: Appendix K and guidance documents

<https://www.dhhs.nh.gov/ombp/medicaid/documents/medicaid-covid-appendix-K.pdf>

<https://www.ddhs.nh.gov/ombp/medicaid/covid19.htm>

<https://www.dhhs.nh.gov/dcbcs/covidguidance.htm>



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MINUTES April 20, 2021

- 1) Meeting was called to order with **40** individuals in attendance.
- 2) Review and approval of **March 16, 2021** minutes as written with modifications discussed and accepted.
- 3) Treasurer's Report: Please refer to email
- 4) There are currently 40 paid members as of 5/17/21
- 5) State Surveyors: Discussion
 - a) Discussion on 5-day transition when a person changes region- If there is no location change there is no paperwork needed.
 - b) Appendix K deadline- BDS extended and Peter will look into for how long.
 - c) Trends in Reviews- No Nursing concerns at this time except:
 - i) The HRST monthly data trackers not being accurate and need to be, they will be written as a concern if found to be incorrect.
 - ii) A new supply of controlled medication needs to be added the day they are brought into the home and not waiting until the count is 0.
 - iii) Need to make sure the Physicals/Annual Screening Recommendations are happening- Need documentation for a reason to excuse a late or no Physical.
 - d) Discussion on grace period extension for QA for Covid reasons.
 - e) (1201 04H) Review of all PRN Protocol is appropriate, do not need to rewrite if there is no change annually. Need to document that the review has been done. Do not forget the interval between dosing.
 - f) New scripts are needed annually: We have 13 months to renew scripts, not 1 year. Some Pharmacies are not giving signed scripts to our individuals.
 - g) Controlled order discussion around renewing orders: they only need to be done annually even though the Doctor has to write one every month.
 - h) Do we need to do a QA for PRN Medications for Day Program: Peter and Lisa agreed that there is no need to QA if no medications were given that month.
- 6) Questions/Discussions
 - a) Voting and meeting will be impacted due to the DDNA conference.
 - i) Discussion about using Survey Monkey was discouraged due to it is anonymous. Jessica Kennedy will take care of the votes for this election, (she has the member list) all emails to be received by May 20, 2021 to count.
 - ii) Change date of meeting to May 25, 2021
 - iii) Email sent to all members about voting
 - iv) Spread sheet was sent to all Nurse Trainers to update contact information
 - b) Webinar trainings being looked at for future meetings, possible outdoor luncheon to be planned
 - c) Bylaws-Need to add info on Electronic voting, and adding a "Tech" position to help run meeting, no other changes recommended.

- i) Tech position person will send out zoom, watch chat room during meeting, and any other technical concerns that arise for us.
 - d) Online med class is still available to use; contact Service coordinator for access.
 - e) The movies are complete for the new curriculum, Cheryl was contacted to have a viewing at June meeting.
 - f) Can voting be done via the polling feature in zoom, we will consider using this for voting during meetings.
 - g) Need to complete FAQs and review during July meeting
 - h) New spreadsheet for Nurse Trainers
 - i) Discussion around a DSP who no longer has a med certificate; should she still continue to bring individuals to Doctor appointments: HCC is delegated and individuals need to be trustworthy.
 - j) Discussion around Form sharing during a meeting
 - k) We will be meeting year-round now via Zoom.
 - l) Frail definition will be reviewed during July meeting
- 7) Next Month Agenda
- a) Voting results
 - b) HRST discussion with David

Meeting adjourned

Next Meeting will be May 25, 2021

Barbara A. Ribeiro, RN, BSN, CRRN Easterseals NH

Secretary, DDNNH



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MINUTES

5/25/2021

- 1) Meeting was called to order with 41 members in attendance.
- 2) Review and approval of **April 2021** minutes as written with modifications discussed.
- 3) Officers Reports:
 - a) Treasurer's Report – Accepted as written. There are currently **40** paid members.
- 4) Business Discussion
 - a) Luanne – last meeting as President until Janet takes over
 - b) Welcome New Nurses – Christine (Farmsteads) and Judy (Northern Human Services)
 - c) New DDNNH Liaison – Jennifer Boisvert
- 5) Guest Speaker – David Toback from Intellect Ability regarding the HRST
 - a) Tiffany gave background – David & Tiffany work closely on Intellect Ability, doing a lot of reporting, looking at areas that need a better understanding of barriers, recently had 6-month training, looked at attendance and feedback, looked at numbers for how many nurses signed up, Tiffany asked David to come to this meeting
 - b) Feedback from Service Coordinator Meeting – “Wow I didn’t realize this is what the tool is doing.” –
 - c) David shared statewide data and their new org chart – if you want to see your AA data, email David@replacingrisk.com
 - d) Training videos on webpage – log in and click on Grad Hat Icon in upper right corner, access anytime
 - e) Reviewed HRST Tracker and new Expanded Scoring Descriptors (Rating Tips are a good resource within the descriptors)
 - f) Free Coaching Sessions available
 - g) David happy to speak at meetings
- 6) Continued Business Discussion
 - a) New Officers
 - i) Janet Harmon – President
 - ii) Jill Satterfield – Vice President
 - iii) Kelly Main – Treasurer
 - iv) Sandy Webber – Secretary
 - v) Jennifer Boisvert – Liaison
 - vi) Leslie Evans - Technical Advisor

- b) Review of April Minutes
 - i) Kelly – #3 Treasurers Report – required quarterly, attach report
 - ii) Kelly – 33 members needs to be edited
 - iii) Janet – letter d) conclusion of discussion regarding Covid? – no grace period since September 2020, if extenuating circumstances, Peter and Lisa encourage you to reach out. Need more clarification
 - iv) Janet – 5F – New Scripts needed annually with a 30-day grace period
 - v) Leslie - Controlled med discussion – scripts expire in 6-month vs 1 year? – it is not a 1201 regulation for 6 months script renewal – reg review and med committee follow up
 - vi) DDNH Contact Info Spreadsheet needs to maintained and shared by the DDNH Secretary in collaboration with Tiffany Crowell
- c) Tiffany Updates
 - i) Jessica Kennedy leaving position at BDS
 - ii) Reach out to Tiffany for new Nurse Trainer Orientation
 - iii) Reminder – July 1st deadline for compliance – Script 1 year Expiration
 - iv) Online Med Training Class
 - (1) July 31st = Deadline for full 8-hour class for all temporary Med Certs
 - (2) Network with other Nurse Trainers for help with Med Classes – let’s look at creative way to help each other
 - (3) Online Class is still open – can still sign people up but they will need to go through the 8-hour class – great tool for intro/foundation to traditional med class and refreshers – continue to send requests to Tiffany
 - v) Med Certificate Recertification
 - (1) Pandemic Year Scenario’s – No One Size Fits All
 - (a) Day Programs that have been closed with med authorized providers with no opportunity to pass meds; or
 - (b) Individuals out of work for extended period of time, date came and went with no med obs; looking at how to reauthorize them with skill levels and competency
 - (c) Tiffany brought to med committee, email suggestions to Tiffany for med committee – Final word coming out Friday
 - (i) Consider:
 - 1. If the nurse feels comfortable (always up to nurse discretion), if too much time has gone by and under your delegation, you want that provider to go back through full class, that is nurse decision;
 - 2. If the nurse feels like, based on your experience with that individual, you can get them up and going again with an observation, Tiffany recommends:
 - a. Individual takes written test to ensure they still have the knowledge and ensures documentation that they have the knowledge;
 - b. After they pass with score of 80% or better and you do a med Observation, then their med certificate is reinstate;
 - c. Medical leaves because employee not able or programs opening/closing where things were out of their control due to Covid:
 - i. Not because of schedules or employment status;
 - ii. Vacation – defer to Nurse Trainer – if planned vacation, do beforehand, if emergency leave out of county, we will work them and the Nurse Trainer;
 - iii. Not a blanket statement – Nurse Comfort, Nurse Discretion, Nurse Delegation

- iv. We are not trying to create barriers
 - v. Timeframe for exception to rule = CMS Appendix K, “blanket” extra 30 days grace period – we are still under the time frame of Appendix K;
 - vi. After appendix K, there is no extension.
 - vii. New Nurse Trainer – if med class is needed to feel comfortable, please do it.
- vi) THANK YOU, LUANNE for your service and leadership as President and all the time and effort!

7) Thank You Card for Jessica Kennedy before she leaves for handling the election

8) Voting Coordination – Future project

Next Meeting will be Tuesday 6/15/21

Submitted by:

Sandy Webber, RN

Secretary, DDNNH



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MINUTES

6/15/2021

- 1) Meeting was called to order with **41** members in attendance.
- 2) Officers Meeting was held on 6/11 to clarify roles, goals and focus for the upcoming year:
 - a) Roles:
 - i) President – Janet will run meetings, be resource for nursing questions working with Tiffany from BDS.
 - ii) VP – Jill will remind people of the rules (mute cell phones), will call on raised hands, watch the chat for questions/comments, and keep time for limits on discussions
 - iii) Tech Position – Leslie will admit people to the meeting via zoom, make sure meetings are recorded, monitor mute, send out monthly zoom invite
 - iv) Treasurer-Kelly will send out monthly treasurer report, manage membership payments, give access to quarterly bank statements if requested
 - v) Secretary- Sandy will do minutes, agenda, and maintain email list; all three will be emailed to DDNNH group monthly. Please be sure to send new email, changed positions, and new members contact information to Sandy. Minutes will be complete by the end of the month.
 - vi) Liaison- Jennifer Boisvert will provide quarterly updates from DDNA, will attend annual conference (next May) and report on conference to group
 - b) Goals:
 - i) Increase participation during meeting of all attendees, increase paid membership, increase the number of Nurse Trainers who attend DDNNH meetings. The goal is to show that the monthly meetings have value and are a forum for problem solving, helpful feedback and answers to NT practice questions.
 - c) Focus for upcoming year:
 - (1) Professional Development through guest speakers, hosting our own conference, mentoring new Nurse Trainers, case study reviews
- 3) Review and approval of **May 2021** minutes, pending group approval at next meeting.
- 4) Officers Reports:
 - a) Treasurer's Report – Accepted as written. There are currently **41** paid members.
 - b) BDS Update – Tiffany updates – Tiffany not available at this time
 - c) Conference ideas: Sandy discussed conference ideas, if held this September there will not be enough time to offer CEUs.
- 5) a) New PowerPoint for the He-M 1201 Medication Administration

- i) Cheryl Bergeron, RN and Megan Niemaszyk have created a new PowerPoint for the He-M 1201 Medication Administration class through a collaboration with UNH and NH Institute of Disability (IOD) Living Well Grant. They demonstrated the new PowerPoint and accompanying videos. While making the PowerPoint they reviewed the old curriculum and incorporated rule changes. A subcommittee of DDNNH reviewed the proposed test questions and answers and resubmitted back to Cheryl and Megan. There are now 4 different versions, 50 questions each, each question is 2 points. PowerPoint Handout/Slides are translated into Nepalese and Spanish as a supplement to the training. The test will be in English only. Cheryl and Megan are asking for suggestions to help NTs run the presentation such as a cheat sheet for how to run the videos that are imbedded in the PowerPoint.
 - ii) Implementation – they are working with Tiffany to develop process, roll out date to be determined
 - iii) Megan requests you please complete Survey Monkey <https://www.surveymonkey.com/r/RXYHCCL>
 - b) Next IOD/UNH project will be a training for DSPs and HCP on the HRST Monthly Data Tracker
- 6) Practice Questions
- i) Does a licensed nurse need to take the He-M 1201 Med Class? Ellen M reports a possible deficiency or concern for licensed nurses working as Home Care Provider who have not taken the med class. Ellen has not received the Statement of Finding and is not certain which regulation is tied to this issue. Tiffany's response – although the nurse knows how to administer medications there is also a need to understanding the HCP role, including reporting to their Nurse Trainer. The nurse is job in this case is as a HCP ad therefore must complete the all the training for that particular job. The supervising Nurse Trainer may also want to do a competency or test for nurse hired as a HCP to demonstrate that they still have strong skills. Certified homes follow 1001, which do require the He-M 1201 Med class. Resolution: to be continued once the corresponding regulation has been identified.
 - ii) Appendix K has not expired, it is a federal rule and not tied to State of NH state of emergency guidelines.
- 7) Summer Picnic or Outing
- i) Janet proposed an outdoor gathering for either the July or August meeting at Memorial Field – Pembroke. Janet will send survey to DDNNH group to determine date.

Next Meeting will be Tuesday 7/20/21 – place to be determined – Zoom or in Person

Submitted by:
Sandy Webber, RN
Secretary, DDNNH



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MINUTES

July 20, 2021

- 1) Meeting was called to order with 36 members in attendance.
- 2) Review and approval of minutes as written with modifications discussed.
 - June minutes - motion to accept minutes as amended made by Jill, Pam Taber-McCarthy seconded. Motion passes. (Change all DDNH to DDNNH, remove highlights, 2.ii “keep time for limits on discussions” and have an option to wrap up or continue.
 - May minutes –
 1. 41 members in attendance
 2. Change DDNH to DDNNH
 3. Motion by Leslie to accept minutes as amended, seconded by Pam Taber-McCarthy, motion passes
- 3) Officers Reports:
 - a) Treasurer’s Report – Accepted as written. There are currently 40 paid members. Total balance \$5729.34
 - Liaison Report – DDNA 2021 Conference update – (Info from Jennifer Boisvert)
 - DDNA’s 30th annual education conference planned in person – May 20 – 23, 2022 at Grand Hyatt Hotel on the Riverwalk, San Antonio, TX
 - DDNA has three established Nursing Councils – 2 are open to all DDNA members, the third is open to DDNA members who hold CDDN or DDC certification.

DDNA Nursing Education Council is chaired by Sarah Ailey, PhD, RN, CDDN, Professor, College of Nursing, Rush University, Chicago, IL. Established Jan 2020, meets virtually 4th Tuesday of each month (6 – 7pm EDT). Contact the chair directly through Sarah_H_Ailey@rush.edu or through Education@ddna.org

DDNA Nursing Research Council is chaired by Melissa Desroches, PhD, RN, Assistant Professor of Nursing, College of Nursing and Health Sciences, University of Massachusetts, Dartmouth, MA. Established October 2019, meets virtually 3rd Thursdays from 7 – 8pm EDT. Contact the chair directly through mdesroches@umassd.edu or through research@ddna.org
 - If you are CDDN/DDC certified and interested in the third council – DDNA Nursing Practice Council – chaired by Judith Stych – reach out to practice@ddna.org for more info.
 - A recent publication from this council is: <https://ddna.org/education/practice-standards/> 3rd edition – active DDNA member pricing 19.95 – need code, otherwise 39.95
- 4) Business Discussion:

Old:

 - No target date yet for rollout of curriculum. Janet to reach out to Tiffany
 - FAQ’s – committee – Have not been updated since August 2019. Ellen McPhetres to set up meeting (Kenda, Jennifer, Eileen, Luanne, and others were on previous committee, may keep the same people). Ellen to reach out to Tiffany also. Update on progress will be given at next meeting. Once FAQs are updated, how do we keep them updated going forward?
 - Covid questions – none at this time
 - Subcommittees –
 - Frail Health has not met yet
 - Scholarship – need update from Debbie Ellis-Nailor and a few members to be on committee

- Annual Meeting – can be discussed at future meetings

New:

- Research Study – Carol Adams
 - National study on sexual violence in our population, email sent to group
- Voting Coordination – only paid members are eligible to vote. Hopefully we will be back to meeting in person by the next time we need to vote, May 2022. Also need a provision for mail-in voting, possibly Survey Monkey.
- Mortality Reports & Non-Med trained staff giving meds
 - Questions came after R6 meeting recently. Not all errors are reportable, those would just get listed under “other concerns”. Medication Occurrence Reports should still be completed, but not necessarily get counted in statistical error rate.
 - Mortality reports – med committee would like every death reported, not only med related issues. This should be on the A form, and transfers over to the B form, and C form. Also, good to list any major health issues.
 - Put topic on Agenda monthly for med committee questions
- Meds in Day Program – do we need to have ALL PRNs in day program? It can be written into the ISA, stating the individual can go home for PRN needs, otherwise it could end up with a client’s rights issue. Rescue PRNs should always be immediately available whenever individual is out during residential or day program.
- Nursing Assessment Form – does anyone have a brief nursing assessment that they’ve used? Please send to Eileen
- Next meeting August 17th, outdoor get together at Memorial Field in Pembroke (Janet still needs to confirm use of pavilion)
 - Food will be provided
 - Need to send out RSVP so we know how many will attend

Other Business -

- Janet would like to start an advocacy group – possibly Psychiatric services advocacy group.

Meeting ended at 11:46am

Next Meeting will be August 17, 2021.

Respectfully Submitted

Sandy Webber, RN

DDNNH Secretary



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MINUTES

8/17/21

- 1) Meeting was called to order with **40** participants in attendance
- 2) Review and approval of **July 2021** minutes as written with modifications discussed.

3) Officers Reports:

Treasurer's Report –. checking \$300.88 savings \$5398.46 Total: \$5744.39 \$30 cash on hand. \$14.99 paid for Zoom, there are 40 paid members

Old Business:

Curriculum updates from Cheryl and Megan- Tiffany is working on how it will be rolled out; what form it will be dispersed in i.e., flash drives; and the logistics of getting started with new program

BDS news:

- 1] Secretary Jessica is gone but good news Maureen is back! Historically she was willing to do things to help our group out like posting our minutes to the DDNNH website and she may possibly know where the FAQ book disappeared to. This was a very valuable book with years of work done on the FAQs
- 2] Covid updates- most everyone is back to masking up. Discussed Booster shots- who will get them, how will it be determined, as of now these questions have not been answered. CDC guidelines are out now on how to manage exposures to vaccinated people.

Is NH DPH still having meetings every 1st/3rd Wednesdays at 11:45am? From DPHS website: Weekly Webinars for Long Term Care Facilities (LTCF) and Assisted Living Facilities (ALF) Weekly calls are currently on hold. Watch for information from the New Hampshire Health Care Association (NHHCA) regarding future calls. For past recordings/slides, visit the NHHCA website. For past webinar recordings/slides, visit the NHHCA website

The Thursday DPHS partner calls focusing on science have been weekly for months - this Thursday will be the last scheduled one for the Thursday DPHS partner calls - these used to be weekly, then went on hiatus, then ad hoc, now back to 2nd and 4th Tuesday...find the link to the meeting here:

<https://www.covid19.nh.gov/resources/general-provider-covid-19-resources-and-information>

Here is the link to the latest DHHS HEALTH ALERT on the Health Alert Network (HAN) regarding mRNA COVID-19 Vaccine 3rd Dose Recommendations: <https://www.dhhs.nh.gov/dphs/cdcs/alerts/documents/covid-19-update44.pdf>

- 3] Welcome to 3 new nurse trainers- discussion about new nurse trainers and any openings throughout the state

Committees:

- 4] FAQ committee- discussion about the book, all the years of work that went into it and no one knows what happened to it. Looking for people to join this committee

- 5] Scholarship committee- unsure what the status of this committee is- need volunteers, we need to decide who will be awarded the money, how to promote our field, do we need to award every year if we don't receive candidates. If no one wants to join should officers make the decision? Received a nice card from last year's awardee

6] Frail Health committee- has not really taken off, Tiffany was supposed to get that rolling, how to determine if frail, put on frail list and how to remove from frail list.

7] Amanda the new nurse at the START center gave us a little overview of what goes on there.

8] New business- none

9] Practice questions-

This is the answer from Jennifer about question of staff having 24 hours to sign off on a medication

“ what you are remembering - I think - is about an agreement that if the med log is not signed and discovered within 24 hours - the med occurrence (assuming the DSP says they did give it and it seems credible) would be documentation rather than omission”

10] Psych providers: long discussion about the issues with a] moving from one catchment area to another and trying to get services started b] long wait times, no out of state clients being seen, not accepting clients from certain AA. Eileen gave a case study. Ruth gave an update on the Moore Center's med clinic- 5-6 month waiting period, only seeing clients via Zoom however these actually take longer and are more difficult. Discussion held about a possible consortium in the next few months with psych, medical, dental providers, BDS [Sandy Hunt] and possibly managed care [talk about the issue of prior auths and difficulties seen with this] Janet is going to send out a survey re: waitlists who's available

11] Do we want to have a forms sharing time during meetings- Janet talked about a spreadsheet she uses to organize herself, what others use for forms/ documentation, would this be helpful to new Nurse Trainers? Info given about the uniformity of practice committee

12] Question raised about Appendix K- How to prove to surveyors issues were addressed and where to document this? Also, will we be able to access the online curriculum created last year since things are shutting down again?

Agenda for next month:

Peter will be coming to next meeting please send in questions ahead of time so he can review them

FAQ committee updates

Discuss with Tiffany if we can get a panel together for October meeting

Should recorded meetings be available for anyone to access?

Next Meeting will be 9/21/21

Submitted by:

Jill Satterfield RN

Vice President, DDNNH



Developmental Disabilities Nurses of New Hampshire

www.dhhs.nh.gov/dcbcx/bds/nurses

DDNNH@dhhs.state.nh.us

MINUTES

9/21/21

- 1) Meeting was called to order with **40** participants in attendance
- 2) Review of **July & August 2021** minutes as written with modifications discussed.
- 3) Meagan and Cheryl – Presentation on New 1201 Medication Administration & Healthcare Coordination Curriculum – Goal was to distribute by the end of September is on target
 - a) 1) Appendix, 2) Power Point Presentation, 3) Test & Answer Keys, 4) How to Implement – all are complete
 - b) 200 Thumb drives being distributed to Nurse Trainers – Tiffany coordinating
 - c) Megan shared and demonstrated what is in the thumb drive and how to access – very user friendly
 - i) PowerPoint Presentation is organized by Section
 - ii) Videos Links:
 - (1) Imbedded - You do not need internet to access videos – they are imbedded within the PowerPoint presentation (takes 20 minutes to load)
 - (a) Press Control and Click link to follow – it will automatically take you to YouTube and the video will start
 - AND
 - (2) All videos uploaded to a YouTube channel – only people who have access can utilize (they cannot be shared, or commented on)
 - iii) Translated PowerPoints
 - (1) Nepalese and Spanish
 - (a) Video Links imbedded not videos themselves (subtitles available in YouTube in Nepalese/Spanish)
 - (b) Printout is supplement to curriculum
 - (c) Exact same slides verbatim as in English version
 - iv) Appendix Documents organized by slide number – this is optional

Question:

 - (1) Can we use our own med logs & PRN protocols? Thumb drive was designed so you could customize with your own forms; appendix of forms meant to be an example; thumb drive (flash drive) will not be locked so you can add your supplemental trainings or forms
 - v) Tests & Answer Keys
 - (1) 4 Different Test and 4 Different Corresponding Answer Keys
 - (2) 50 Questions – 2 points each
 - vi) How To Implementation Guide
 - (1) Walks you through all the thumb drive options
 - (2) Technological Tips & Trips included
 - a) How to add your own notes and talking points to the slides

b) How to Print – there are different options

vii) Questions:

- a. Are we still doing in person training? – This is your new toolbox for teaching your classes in person, old curriculum can be archived, content has not changed, this can also be presented over zoom
- b. Can the flash drive/thumb drive be uploaded to your computer? Yes

viii) Tiffany presented roll out process Implementation:

- a. Go live date = as soon as it is in your hands
- b. Flash Drives & Hard Copies to all Nurse Trainers
- c. Nurse Trainers need to sign they received the flash drive and printout of curriculum
- d. Protect Flash Drives as they are not easily replaceable
- e. Files can be emailed from Nurse Trainer to Nurse Trainer or from BDS
- f. Form will be used to update most current Nurse Trainer Info for Master List
- g. Tiffany will send out schedule of state sites for first week of October and will be available for a few hours in each area
- h. 25 copies Available on Friday (9/24) in Concord for those teaching soon
- i. The rest will be available next week or by Thursday Sep 30
- j. **Question** – Do we need a connection to put up on screen from computer? Yes
Question – what if company is so small there is no projection or access videos? Do they use their phones? What if there is no laptops for people? – 1) You can play the videos on your computer and share with a small group of students 2) options are many regarding buying a screen 3) they can use their phones 4) PowerPoint projector would be ideal 5) can also teach on zoom and print the curriculum 6) talk to your companies regarding equipment needed 7) you can plug in a screen to your laptop and show the PowerPoint and videos in a larger format 8) resources in Library's & church basements for meeting space and equipment – some have no charge before 5pm 9) you'll be able to customize talking point on each screen
Question – are we still handing out old 1201 Curriculum from 2011 – No, it doesn't match, old curriculum has been enhanced, old is still there but just represented in the new
Question – can we address the security of the test – lock them down tight, only accessed by Nurse Trainers and no one else, flash drive needs to be secure, no copies of test should be mailed or copies made by anyone other than Nurse Trainers – we need to keep it secure, you can use old tests for recertification now, Nurse's only keep possession of the tests, you can write your own note on the tests "Not For Public Distribution" – tests are in production, no more edits for master copies, needs to be reinforced by Joyce in the NT Orientation

4) Peter Bacon and Lisa Hoekstra from State of NH

- A. Cert Update - Digital Reviews started last Fall with on sites continues; if Covid worsens, things will be taken on a case by case basis. If any home is Covid positive, that home will be rescheduled. Currently looking at control count and logs, will look at med appointments and med logs closer in the future. Don't want to spend a lot of time in the houses right now. Things are going great and they will keep a close eye on Covid. State staff will be wearing masks in the homes but they are not mandating for household members.

- B. Appendix K – when expires? What does it cover? (Tiffany) – State of Emergency begins and ends by governor; Federal State of Emergency begins and ends by President of the US. NH State of Emergency has ended. Appendix K is federal stake and will be in effect until 6 months following the end of the State of Emergency by the President and we don't know when that will be. Plenty of time left working under Appendix K. And it only covers certain things. Tiffany recommends going back and looking at links, covers hiring exceptions (TB for example), reporting timelines extended. There is a lot under there. Face to Face visits. Telehealth. Some delays in med certs – 30-day extension to a med cert expiration date. No delays in QAs. Annual Physical requirement may be extended if participant is unable to safely make it to the appointment or the provider is unavailable. Most people seem to be back on schedule with physicals. Some doctors are doing telehealth.
- C. Pharmacy Packaged Meds – Peter seeing off and on; works fine for stable individuals where meds don't change or don't take a lot of meds; if there are a lot of meds in one packet like 9 meds, state staff have been able to verify those are the right meds according to the med log. In certain situations it works great; other situations it presents concern. On a case by case basis, it can work. Lisa agrees with Peter, if there are not a lot of meds changes, the person is stable, the HCP is well skilled and has good judgement, then pill packs are a great idea. Where there is a potential for error or not good things happening are when a lot of changes, taking a pill out of pack with dose changes or discontinuation of meds. There is an added step that needs to be included in training because they have to do their triple checks but just in a different way, depending on how they are packed. There needs to be extra training based on the type of packaging and how providers adequately and correctly do all the checks and ensure each pill is in the pack what it is supposed to be. It seems to be too easy to administer without doing checks. Triple checks regardless of how it's packaged. The triple checks cannot be compromised just because someone gets their meds packaged. Training needs to be in place.
- D. Annual Health Screening Recommendations – if someone did not have the physical for whatever reason, usually are done along with the physical, how do we get this done? Peter – if the physical got pushed up, the state is accepting "late" forms as long as they are getting done. As long as the document is available for the doctor to review. If there was a long gap from the previous physical, and no form was done it might get cited. If the physical was a 16month gap and you did the Annual Health Screening Form prior to the physical then you should be fine. The point is for it be current as long as it is done before the physical. Due to Covid, Peter is willing to look at things on a case by case basis as long as people are honoring the intent of the rule. Nurse Trainers can update the Annual Health Screening form at each QA with dates of dental visits, vaccines etc. The date on the form does not have to match the date of Annual Physical. Documentation of missed appointments should be done.
- E. Questions: 1) Trends in 1201s – Answer: Peter none; Lisa – hardly any, gap in first 30 day QA being cited; PRN Controls and Protocols are being looked at more carefully, especially Interval Between Doses, especially for Controlled PRNs 2) Self Admin – What if there is a controlled med in their pill pack? How does it get counted? Answer – as long as they self administer, there is nothing to do 3) Info on mandate requiring companies over 100pp and the vaccine? – Peter has heard nothing specific. A few vendors are mandating the vaccine or have a negative test 4) PRN meds & Protocols – what about ranges – "1-2 tabs every 4-6 hrs" – ask for a new order, write protocol to match order, be specific, may add "Call Nurse Trainer prior to administering"; Surveyors are going through med logs – a lot of HCPs are reporting this – Answer – State can look at current or archived med logs anytime they want, typically they will not be looking at the daily logs unless there is a reason. Service Coordinators can also look at logs anytime they want. State will look at all control med logs, PRN protocols and if there is an issue, they will look at other logs. 5) NT a few days late with QA due to family emergency, will this be a problem? – Answer: case by case basis, as long as it's documented, may be cited as concern.
- F. Next Meeting for State Surveyors to attend: March 2022

5) New Business

Question: Can the people that are not present see the recording of this meeting?

Poll sent out – 30 people answered poll – results:

13% (4) – Do not send video to non participants

42% (13) – Yes send video to non participants

45% (14) – Send only pertinent topics

Decision: 1) Pertinent topics (clips) of the meeting will be saved and shared as needed (trainings, presentations, other)

2) Minutes & chat will be shared with all (members and non members)

3) Nurse Trainers that are on the zoom meeting can save the chat

4) Janet and Leslie to work on “clips” of pertinent topics – should this be a secretary job since she/he is doing the minutes anyway?

6) Officers Reports:

Secretary – Minutes – July & August corrections made and accepted & seconded;

Treasurer’s Report –. Not discussed this month

7) Agenda for next meeting: Status on subcommittees, Frail Health, FAQ, Panel for October Meeting, Psych Providers (email survey from Janet), consortium on MCOs and questions (ex: why prior auths being required on a Friday at 4pm), invite MCO rep to one of our meetings

8) Motion to adjourn meeting accepted and seconded

Next Meeting will be 10/19/21 9:30-11:30am

Submitted by:

Sandy Webber RN

Secretary DDNNH



Developmental Disabilities Nurses of New Hampshire

www.dhhs.nh.gov/dcbcx/bds/nurses
DDNNH@dhhs.state.nh.us

MINUTES

10/19/21

- 1) Meeting was called to order with **40** participants in attendance
- 2) Zoom Meeting Invites - Delete old recurring meeting invites, new invite will be sent each month. Everyone muted on entry. Following agenda as closely as possible with timelines, Jill as VP will remind us about the ground rules and be the time keeper. Can raise hand in chat under "Reactions". If you have to leave the meeting, put it in the chat.
- 3) Introduction of new Nurse Trainers – Welcome Shae Mahoney, Neurorestorative; Gina Nadeau, Nurse Trainer Assistant at Siddarth under Janet;
- 4) Treasurer's Report – Kelly Main

\$30 cash on hand; checking account balance; savings account balance; total = \$5864.50

41 paid members expire at the end of month

- 5) Review of **September 2021** minutes:
 - a) Motion to accept and seconded
- 6) Old Business
 - a) Tiffany Crowell, BDS – Updates
 - 1) Several Open Positions for Nurse Trainers throughout the State – if you are looking for more hours and a temporary position, please reach out to Tiffany
 - 2) Requests for Intellect Ability HRST Clinical Reviewer Training – notifications coming out for early December trainings; some changes are coming with in person trainings, available as needed in a recording; pros and cons discussed; at request will be able to do more specific trainings;
 - 3) If you unsubscribed to Intellect Ability HRST emails, you will not get the notifications for special trainings. If you are not receiving notifications and want information on trainings reach out to Tiffany;
 - 4) Next Project – FAQs, meeting to be scheduled
 - 5) Curriculum – thank you! Picks ups have gone very smoothly; collected 10 forms from Nurse Trainers that were not on our Master List; some email changes came through; reminder – last scheduled location for pick is Concord Main Building. If you were not able to pick up, contact Tiffany (at Concord location 3 days per week); feedback around YouTube videos not working – sent to Megan at IOD for trouble shooting; feedback is everything else is going smoothly.
Questions/Feedback: 1) are there more than one set of curriculum per agency – Yes, every nurse trainer gets a flash drive and spiral bound version, extra English version have been distributed, 2 per Nurse Trainer; 2) the imbedded links work – 3) Tests should not ever leaked – never hand out tests to anyone – 5 different version of the test; needs to stay secure! 4) question re people coming from other vendor agencies –

6) : I wonder if you could ask those that have done the new curriculum power point, how long it takes. I plan to start practicing this week but was curious about the time. Please ask only if convenient.

Much appreciated . Have a great meeting! 7) at the end of the curriculum, a refusal goes on med occurrence form – it goes on an IR;

- i) Frail Health committee – how to graduate them? Differing opinions with Nurse Trainers and Service Coordinators – 1st FAQ committee and then roll Frail Health
- ii) Scholarship Committee – Officers
- iii) Annual Meeting – new officers, elections, reviewing the By Law and are up to date

7) New Business

- 1) Assistance from State/Feedback – re trouble getting psych providers? – Janet did not receive much feedback; email Janet if you are interested in working on that – what would be the appropriate way to try to advocate for our folks to have psych prescribers – there's a lot of barriers
- 2) Barbara Ribeiro – Job Fair Committee idea – is there a need for committee for DDNNH to represent at Job Fairs all over the state? Not a huge a responsibility, maybe 1 per month; Barb is volunteering to let people know what a Nurse Trainer is, ideas on Booth, information, present at Job Fairs across the state annually to get our name out there; small budget; make a banner; committee? Email Barbara Ribeiro if you are interested in participating.
- 3) Test Security Concerns – Jill Satterfield, addressed under curriculum;
- 4) HR – needs copy of test - Test under lock and key – results only sent to Nurse Trainers; letter of Participation with date of test, date of class, grade and comments; Nurse Trainers signing that test is not to be released and information is protected. Send to Nurse Trainer only. Each HR sets their own policy.... perhaps reminding them that it is **not** appropriate for a test to be released with an employees record.
- 5) December Meetings – Holiday Party

8) MCO – Guest Speakers – 1) Amerihealth 2) Wellsense 3) NH Healthy Families

- a) What is an MCO? – Kathy Sloan
- b) When is it best to reach out to us? The earlier the better; no right or wrong way with care coordination, it's member/patient specific, how much they do or provide resources depending on needs, they may be heavily involved or provide resources;
- c) Case Managers & Nurse Trainer Communication -
- d) Specialized Positions – worked hard to stay connected to Area Agencies;
- e) Special Medical Services Nurses – works closely with pharmacy team; responds timely; meds all of sudden not being covered – changed PDL list every once in a while – works with doctor/pharm/member is there another med that will work instead? Workarounds for prior auths for meds and equipment; participate in large meetings with area agencies;
- f) PDL – Prescription Drug List – now managed by State who determines what med is on the list;
- g) All 3 MCO go by the same PDL – some difference with prior auths (time limited);
- h) Can identify barriers to care management (home care, equipment, pharmacy, etc) and help solve problems;
- i) MCO Role = if case manager does not know how to solve problem call MCO; can answer questions and identify barriers; “peeling the onion”;
- j) Nurse can reach out directly to the MCO –
- k) Dental Care Coverage – Amerihealth (the only one who covers dental) - Yes they cover dental, as of June 2 cleanings per year, multiple procedure codes for treatment services covered; network is being built and growing, provider network teams growing; targeting outreach to areas without services; list of providers being sent to Tiffany;

- l) Hospital Discharge Process –
- m) Transition of Care Team – Nurses reaching out re d/c from hospital; team is reaching out to coordinate care, follow ups, etc; if notified a member is in the hospital, there is a team available; contract requirement is Transition Care;
- n) NH Healthy Families – transition of care team, helpful to positions at plan, helpful for hospital staff as well; help with setting up DME, nursing care, social works, care managers at facilities, transition is smooth, care coordination;
- o) Which agency? – Members choose which MCO they want to participate in; they are insurance Case Managers.
- p) Care management – voluntary to engage in plan based on need; anyone can be connected but not everyone has a case manager; someone can be referred at any point in time; issues addressed timely;
- q) Med Reconciliation – full assessment including med rec is done at time of intake;
- r) Trainings have been done at Area Agencies with Service Coordinators about services provided with Care Coordination – housing supports, social supports, resources in their community; Direct Presentations available – want to enroll in Direct Care Management, support for coordination and access, follow up, will sit in on meetings as well, looking to get people connected to all the resources they need.
- s) Statewide Psych Situation – living in world where there are staffing issues everywhere, supplies are not getting to people due to back logs; everyone knows it's an issue – underfunded, work closely with folks in ED's to get them the care they need and build in community supports; barriers need to be broken down; Not a lot of psych units in state of NH with DD/ID willing to take them, don't want to mix them with acute psych inpatients; DD/ID considered chronic, not acute; conversations continue to happen and will continue so we can support folks with psych issues/crisis; Wellsense has Beacon Health – Behavioral Health Support with Case Managers, care management process to deal with issues; don't have a way to sway or force an inpatient stay;
- t) Question regarding 1) insurance – who will pay for what and secondary insurance? 2) Insurance wanted to reassess a permanent disability – Answer: eligibility determined by state not MCO, criteria needs to be reviewed; Medicaid does redetermination every year before Medicaid lapses, if you don't do everything, benefits could be lost, this is not at the MCO level; primary insurance first, then Medicare then Medicaid; cannot jump past primary insurance to get benefits through secondary insurance; it can be hard to find a provider that accepts all the insurance; MCO's can help with this process. Always good to know what insurances they have. Some people don't realize they have a primary insurance. It will get flagged at pharmacy and then denials will happen. People have primary, terminate primary, change to medicare, and don't notify the state – they need to notify the state that they changed insurances. When people move around or a guardianship change, need to notify the state so things don't get missed.
- u) Suggestion: Ask, do we have an MCO and the MCOs can ask who is the Nurse Trainer?
- v) Weekends? Everything happens Friday 4pm – they are there til 830-5pm Monday through Friday and after, not sat and sun; rotating hours, flexible, RN nurse line program 24/7, medication urgency requests or needs immediate attention; Home Care Providers can call directly; all MCOs have the 24/7 line. Call Customer Service numbers to reach Nurse line. Each MCO websites have all the information you need. They will send info to Tiffany for distribution.
- w) Patient Portal? – have direct email addresses for care management that gets monitored; have pt portal to register and look up info on insurance coverage. MCOs talk to Home Care Providers all the time, they can call directly. MCO have agreement with BDS to talk to anyone related to AA to support member and get written permission for care management, they get info from guardians as well. MCOs get direct calls from Home Care Providers.

- x) MCOs have connected to SC supervisor and they bring them into meetings – topics, issues, not specific members in group setting, open to participate in meetings to answer questions and provide info.
 - y) Helpful for MCOs - Need to send a list of Nurse Trainers to MCOs;
- 9) Janet wants to end meetings on time so there was a suggestion to have a social or chat part of the meeting 15 minutes before and 15 minutes after the meeting.
- 10) December Holiday Party Meeting – thoughts? Party on Zoom?
- 11) Agenda for next meeting: Barb Ribeiro – Job Fair update 15 min;
- 12) Motion to adjourn meeting accepted and seconded

Next Meeting will be 11/16/21 9:30-11:30am

**Submitted by:
Sandy Webber RN
Secretary DDNNH**



Developmental Disabilities Nurses of New Hampshire

www.dhhs.nh.gov/dcbcx/bds/nurses

DDNNH@dhhs.state.nh.us

MINUTES

11/16/2021

- 1) Meeting was called to order with **38** participants in attendance
 - a) Meeting Notes:
 - i) Janet will cancel old reoccurring invite, please delete from your calendar
 - ii) Going forward new zoom meeting invite will be generated every time
 - iii) Meeting invites will go out in one email with the agenda, prior month accepted minutes, previous month draft minutes, master Nurse Trainer email list and Treasurer report
 - iv) Zoom link will also be on draft minutes and agenda – **Link will change every month**
 - b) Meeting Rules
 - v) Raise Hand – click on reactions to raise hand or put questions in Chat
 - vi) Keep self on mute unless speaking, when finished speaking mute yourself
 - vii) Vice President – Jill will keep time
 - viii) New Nurse Trainers or change of work/emails: send changes to Sandy Webber and put in chat
 - ix) Voting privileges for DDNNH members only
- 2) Introductions
 - a) New Nurse Trainer – Stephanie O’Hearn, ISN Manchester office
- 3) Treasurer’s Report as of 11/1/21– Kelly Main

Cash on Hand - \$30

Paid monthly zoom fee – \$14.99

Checking/Savings/Cash account balance total = \$5,879.55

Paid Members – 39
- 4) Review of Minutes from October 2021 Meeting
 - a) Approved and Seconded
- 5) Old Business
 - a) BDS Updates – Tiffany Crowell
 - i) MCO contact info – Tiffany will email to Nurse Trainers. MCO contact info could be added to field in HRST/ IntellectAbility. Tiffany will send instruction how to add.
 - ii) New Nurse Trainer Class – Saturday 11/20
 - iii) IntellectAbility – Virtual Trainings in Early December for Clinical Review – should see emails soon, contact Tiffany if you are not receiving emails
 - iv) Dr. McLaren –Tiffany will invite to speak for January meeting re: concerns, barriers and next steps in finding psych providers. Could she be a “bridge” for when there is no psych provider, prescriptions are running out and PCP unwilling to prescribe? Dr McLaren is networking with providers in NH. Could Dr. McLaren help provide us that bridge and voice of support?

v) BDS (DHHS) has completed the transformation of their website. In past no outside groups/partners could use state website, except DDNNH. Going forward:

- 1) DDNNH has to have separate dedicated website from BDS website
- 2) DDNNH would have full control over their own website (posting minutes, FAQs, links, tips, recruiting)
- 3) BDS is willing to provide a link to the new DDNNH web page
- 4) Officers need to discuss next steps and potential avenues
- 5) Logo Contest- new website is opportunity to create new logo. Officers will meet to discuss rules of contest.
- 6) Minutes will be accessible again

v) FAQ Committee – First meeting 11/24 11am, Current committee members: Janet, Luanne, Jen B, Tiffany. Open to others joining, requires time commitment to meet 2nd and 4th Wednesday 930-1030am starting in December, Tiffany will send an email invite. Tiffany has obtained a list of volunteers from the chat and she will email participants.

b) Med Committee Updates – Wayne King & Kenda Howell

- 1) Every 3-4 months –Med Committee will update DDNNH; add to agenda
- 2) Med Committee work funneled through Area Agencies. Different AAs handle things differently and med committee does not have a way change that;
- 3) Consistency – Area Agencies have different interpretation of the rules – Nurse Trainers have to follow AA guidelines;
- 4) Wording has changed on forms and does not follow instructions; although much of it is the same, new worded forms do not match the wording on the old instructions;
- 5) Wayne has done a 1 hour recorded Power Point training video presentation which covers issues that come up such as subtleties on how to fill out 1201 forms.
- 6) Med Committee does have a goal to standardize instructions and distribute;
- 7) February Meeting – Wayne can do a 45-minute training for DDNNH Nurse Trainers;
- 8) Luanne will send current recording and word document to Tiffany and Kenda. Tiffany can make available for new Nurse Trainers. Recording could be added to the new website.

c) Nurse Trainers – need Mentors and better Nurse Trainer training; Mentorship Program. In the past there was informal mentorship program with a list of NTs who volunteered to answer questions, be mentors. Discussion that this needs to be restarted. 3 NTs put name in chat to be added to the list.

d) DDNA Liaison Updates – Jen Boisvert

- 1) Previously DDNA consisted of official chapters and networks - now DDNA is an organization of independent affiliate members (each of us who are members)
- 2) DDNNH is organization in NH and we are associated with DDNA by specialty interest rather than by direct linkage (meaning there is no financial benefit to either DDNA nor DDNNH)
- 3) DDNA Membership cost is \$100/year. Benefits include educational opportunities and free CEUs

4) DDNA.org has Facebook page [\(11\) Developmental Disabilities Nurses Association | Facebook](#)

5) Access to Courses –DDNA will send emails once per month at least with new opportunities; for example, the Michigan Alzheimer’s Association Dementia & DD topics webinars – available to members only

6) Annual Conference – May 20-23, 2022 - San Antonio Texas (last year it was virtual) – decision pending on in person or virtual – recommendation to wait until last minute to purchase hotel/flight – early bird registration info pending;

7) Next update from Jen B will be in March

e) Status on Sub Committees

1) FAQ: see section 5) Old Business vi) FAQ Committee (above)

2) All other Sub Committees on hold until FAQ finished

6) New Business

a) New Nurse Trainer Mentorship Program: see 5) Old Business c) Nurse Trainers (above)

b) Committee to look into Job Fairs for NTs - Barb Ribeiro

(1) Committee discussed creating a banner and printed materials, would need money to produce, this would come from DDNNH funds not BDS. Barb will send an email in early December with different banner ideas. DDNNH members will vote on banner.

(2) Need budget proposal for Banner, Printed Materials

ii) Literature What is Nurse Trainer – Flyer (Sandy sent example)

iii) Job Fairs –Virtual vs in person? In person is getting cancelled again. Barb looking into how to participate in virtual job fairs.

iv) January – targeted start date

c) Marketing Plan – Sandy future meeting

d) National Seating and Mobility – 30 minutes future meeting

e) NT Practice Questions

1) Are any vendors are moving towards mandating the COVID-19 vaccine and if anyone already has, what the repercussions for staffing have been?

a. AA vs Vendor: are requirements different based on funding source and/or number of staff

b. Easter Seals – Mandating (medical or religious exemption with Jan 4 deadline) – repercussions pending

c. Residential Resources – no policy in New Hampshire

d. Life Connections – no policy

e. BDS – current understanding is that Federal mandate does not apply to home and community-based care services, it may apply to Nursing Homes. BDS waiting for more info; business with 100 or more employees is separate issue; NH has joined a few other states in a lawsuit against the mandate

2) * Question regarding Test – ADD TO FAQs –Can we give partial credit Yes NTs are giving partial credit. Nurse Trainer can use their own discretion when grading the test. Corrections can be teachable moments – can reinforce what they got right vs failing them. NT can rephrase the questions for the test taker.

DDNNH group may need to clarify how to score the test and add to either FAQs or create instructions that can be added to the new curriculum thumb drive

- 3) Resources for DME
 - a. Loaners Closet – Londonderry [The Loaner's Closet for Durable Medical Equipment in Londonderry NH. \(comcaregivers.org\)](http://TheLoaner'sClosetforDurableMedicalEquipmentinLondonderryNH.comcaregivers.org)
 - b. National Seating and Mobility – Michelle MacEachern 339.221.3739
 - c. A-Tech Concord 603-226-2900
 - d. REQ - [Wheelchairs, Scooters, Home Medical Equipment NH MA ME - REQ \(reqinc.com\)](http://Wheelchairs,Scooters,HomeMedicalEquipmentNHMAME-REQ.reqinc.com)
- 4) * Add to FAQs - List of Resources – Doctors, Dentists, Neuro, DME Equipment. There is an old list on the DDNNH website [Microsoft Word - medicalproviderresources.docx \(nh.gov\)](http://MicrosoftWord-medicalproviderresources.docx(nh.gov))
- 5) Cannabis – Questions can be directed to Peter Bacon or Nurse Trainers with experience: Sandy Webber, Kelly Main, Ellen McPhetres and Lisa Hodgen
 - a. Sandy treats like a Controlled Substance regardless if it's CBD or THC;
 - b. Vendors need to have policy in place, NTs and Vendors that have policies in place are requested to share. Sandy will send everyone an example.
 - c. Upcoming training from David (insert name here). Kelly Main will share training dates and contact information.
- 6) Med reconciliation upon discharge from hospital: if a med is stopped while inpatient and not re-ordered does it mean the med is discontinued? Sometimes follow up with PCP is days or weeks later. How can communication around discharges improve? Suggestions included: contact inpatient provider upon admission; set up discharge meeting with hospitalist, inpatient case manager, MCO care manager, Program Manager. Jill has a discharge tool she will share.
- 7) Reminder to talk about Annual Meeting, review of Bylaws in April
- 8) December Meeting Ideas
 - a) \$10/person to donate to charity – Jill will find an organization to donate to and organize donations
 - b) Send A Card - For those who want to participate – Send your address to Janet then she will pick names out of hat and send you the name/address of who you are sending a card to, which will be opened at the December Meeting. Card can include a kindness statement or positive saying.
- 9) Motion to adjourn meeting accepted and seconded

*Possible addition to FAQs

Next Meeting will be 12/21/21 9:30-11:30am <https://us02web.zoom.us/j/89550906651>

Submitted by:
Sandy Webber RN
Secretary DDNNH



Developmental Disabilities Nurses of New Hampshire

www.dhhs.nh.gov/dcbcx/bds/nurses

DDNNH@dhhs.state.nh.us

MINUTES

12/21/2021

- 1) Meeting was called to order with **37** participants in attendance
- 2) Introductions – no new participants
- 3) Treasurer's Report as of 12/1/21– Kelly Main
 - Cash on Hand - \$30
 - Paid monthly zoom fee – \$14.99/monthly
 - Checking/Savings/Cash account balance total = \$5698.63
 - Paid Members – 43
- 4) Review of Minutes from November 2021 Meeting
 - a) Approved and Seconded
- 5) Old Business
 - a) BDS Updates – Tiffany Crowell (not present)
 1. The next Nurse Trainer class is scheduled for **Saturday 1/15/2022 from 930a-330p** if anyone has new nurse trainers that need to get in. Please submit the letter of request, resume and nursing license to BDS. Email to Maureen at: Maureen.E.DiTomaso@dhhs.nh.gov
 2. Dr. Jen McLaren will be planning to attend our January meeting to discuss psychiatry providers/services/barriers etc.
 3. Tiffany had first meeting with Megan and Mary from the Institute on Disability regarding the development of a guide for the Intellect Ability/ HRS system that is specific to NH. Stay tuned for more updates next meeting on this.
 - f) Status on Sub Committees
 - 1) FAQ Committee – Met on Dec 8th – Meetings are 2nd & 4th Wed 9:30-10:30
 - a. Working through draft written by old committee – going through it sentence by sentence, what is relevant, editing in progress;
 - b. New FAQ – Patient w/congestion? – can they set up a Vicks vaporizer without an order? No, they need an order. Medicated vaporizer. Answer: anything that is medicated, ex Chapstick or cough drop, needs a doctor's order – need an order for medication used for a diagnosed condition or a known skin condition (whether or not it's diagnosed, preventative or treating).
 - c. New FAQ – family member wants to give client Airborne? Does this need an order? - Yes
 - 2) All other Sub Committees on hold until FAQ finished
- 6) New Business
 - a) Job Fair Committee (Barb Ribeiro) – sent email with individuals who wish to be a part of the committee, working on ideas for sayings on the banner, flyer/poster for DD Nurse (DDNNH membership \$30, What does a Nurse Trainer do?), January virtual job fairs (medically based, Capital &

Southern NH done by region), report next month, Shae willing to help create a digital poster that can be printed and has connections to graphic designers

i) Slogan Banner ideas – something catchy, to grab them and draw them to the table – January to pick one from 3 different ideas, waiting for logo to be finalized to go to print

(1) Work Life Balance is Possible as a Nurse or In Nursing

(2) IDD Nursing is a True Specialty

(3) Nurse Become Part of the Story

(4) Do you need to smile more? Try spending time with individuals with special needs!

(5) Are you an RN Looking For A Change?

ii) Logo

(1) Contest

(a) Open to anyone who want to create or design a logo

(b) Open for month

(c) Review logo ideas at January meeting and vote

(d) Send all logo ideas to Sandy by January 21, 2022 if possible

(e) Reviewed old logo, new logo idea from Sandy Webber and many ideas from Janet Harmon

(f) Non-serif font is easier to read for people with dyslexia – some fonts designed by people with dyslexia (can download online)

b) Practice Questions/Ideas

i) How handling newest covid issues?

ii) Debi Ellis-Naylor – great idea for people who may be hospitalized and non verbal - “All About Me” Manilla Folder – put everything in – hang over bulletin board in hospital room to introduce individuals to hospital staff, also send completed HRST (great way to show baseline, answers a lot of questions);

iii) HRST has Health Passport that can be completed that travels with the client to the hospital, Leslie Evans will send a copy of the passport that she has;

iv) Can nurse trainers train providers to do at home Covid testing? We teach BPs, heart rates, blood glucose. We can delegate almost anything that is within our scope of practice. All positive results are reported to the PCP office who reports to the state. Positive home tests are followed up with PCR.

7) National Seating and Mobility (NSM) Presentation @1030am – Presenters: Michelle McEachern & Ed Bonk

a) contact Janet Harmon to view the recording of this section of the meeting;

b) Topics include: Introduction to Complex Rehab Technology, Products, Home Access & Insurance;

c) NSM believe in serving the person, customizing plans for the people they serve and to try to make the process easier. They make house calls, they come to you. Also provide service repairs in the home. They bill insurance as well. Independent therapists available for evaluations. Repairs and modifications to older equipment can be done and they can assist with current equipment. Shower chair, bathroom equipment, access division stairlifts, overhead lifts, ramps, vertical platforms, standing frame. Adults and Pediatrics; branch office in Hudson, will meet where people are at (home or group home), will coordinate with current therapist if already working with one; can assist throughout the State of NH;

d) Email: Michelle.MacEachern@nsm-seating.com
Phone Office. 339.221.3739 fax. 603.371.2794
Address: 315 Derry Rd, Suite 4 Hudson, NH 03051
Website: www.nsm-seating.com

8) Idea for Donation for December Meeting from DDNNH – Jill Satterfield

- a) NHTI – Struggling Students Program – Fund to help Students with living expenses (gas, food, rent, childcare) – not for school expenses (books, tuition etc)
- b) Send a check or give money to Jill Satterfield
 - i) Venmo & PayPal or Send Check – Venmo to @jill-satterfield-3
 - ii) Specifically say this is from DDNNH and is for Nursing Students – can include whatever we want with it for marketing purposes

9) Motion to adjourn meeting accepted and seconded

10) Social Time

- a) Card Exchange & Sharing of Inspirational Messages was done by those who participated
- b) Janet Harmon coordinated card exchange via email

11) Reminder: Talk about Annual Meeting, review of Bylaws in April

12) Reminder: Recordings for DDNNH Meetings: Please send your requests to view meetings to:
janetharmon@siddharthservices.com.

*Possible addition to FAQs

Next Meeting will be 1/18/21 9:30-11:30am <https://us02web.zoom.us/j/81002881971>

Submitted by:

Sandy Webber RN

Secretary DDNNH