

WEBVTT

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00:00:00.000 --> 00:00:06.030

Or 2, again, I want to thank you all for attending.

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00:00:06.030 --> 00:00:16.859

And get the end, as Ken had mentioned in the beginning, we're going to have when you close a close out, it'll have a survey question that comes up and it will ask.

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00:00:16.859 --> 00:00:31.050

What would you like to see for next year? So please take time and let us know that we would love to take that information and do a better job. We want to do a better job for you every year and give you the give you give you meet your needs and give you what, what helps.

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00:00:31.050 --> 00:00:35.399

So, um, so let's see, here.

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00:00:35.399 --> 00:00:43.979

Okay, the 1st subject that we're going to talk about this afternoon is something that many of us have had to deal with or I've had some involvement to with.

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00:00:43.979 --> 00:00:49.859

Whether it be hands on or possibly by phone if someone was calling for advice on what to do.

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00:00:49.859 --> 00:01:02.039

Many of our coworkers have dealt with this. The information that I'm going to share has to do with emergency response, such as calling 911 and or staff recognizing the need for further medical follow up.

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00:01:02.575 --> 00:01:12.474

These are ideas that you can think about and take back to your agencies to see if it can help with this stress inducing type of event. It is very stressful. And there are Caesars.

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00:01:12.474 --> 00:01:17.754

There is some information I want to share with you that will hopefully help it be less stressful.

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00:01:18.120 --> 00:01:31.409

I'm going to share my screen and I titled this emergency response.

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00:01:31.409 --> 00:01:38.790

Because, you know, that that is what it is, when you recognize an emergency, and, you know, what's what's the response to it?

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00:01:38.790 --> 00:01:41.879

I'm going to switch.

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00:01:43.650 --> 00:01:49.349

At least some other way.

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00:01:59.579 --> 00:02:03.180

Okay, good deal my slides word advancing.

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00:02:03.180 --> 00:02:13.050

All right, mortality data, you're in Missouri when an individual receiving residential services passes away, we are required to complete a mortality review related to their death.

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00:02:13.050 --> 00:02:21.270

The purpose of the review is to determine if there was anything that could have been done differently in order to have prevented the visual death.

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00:02:21.270 --> 00:02:27.810

Or, if there is something that we can learn from it to prevent or identify earlier, any adverse outcomes.

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00:02:27.810 --> 00:02:35.099

1 thing that we do look at is whether or not emergency response was implemented, or whether there was a delay in calling 9 1 1.

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00:02:35.099 --> 00:02:44.129

Another thing that we look at medical emergency consumer in the event reports that's something that can be indicated on the event reports.

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00:02:44.129 --> 00:02:50.909

The events are reviewed at varying levels and 1 thing that we look at is what is needed to assist with all of.

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00:02:50.909 --> 00:02:54.360

To assist you all with supporting the individuals out there.

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00:02:54.360 --> 00:02:58.405

A common theme that we do see is a delaying calling 911 when an emergency is occurring.

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00:02:58.405 --> 00:03:13.074

So, what we feel like, that's our queue to help you all prepare people or get information out there in order for them to just do the best they can, and get that emergency help as soon as they can and recognize when they need to.

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00:03:14.129 --> 00:03:18.599

So, I'm hoping that what we talk about right now, we'll give you guys ideas and help.

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00:03:19.979 --> 00:03:25.110

We do have an aging population with.

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00:03:25.110 --> 00:03:36.150

We need to be prepared for additional situations where an emergency responses necessary, because people are living longer, which is wonderful. We're keeping them healthier.

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00:03:36.594 --> 00:03:51.294

Risk mitigation, part of the services we provide are to minimize risks for the people we serve and provide a culture of safety staff or to be trained in CPR and 1st date. And it is difficult for them to determine whether a situation warrants calling 911. sometimes.

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00:03:51.294 --> 00:04:02.485

Oftentimes a person might panic and maybe call a supervisor for store. The agency oversight are in, because it's just, you don't deal with it every day. So it's hard.

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00:04:03.360 --> 00:04:06.509

It's really hard to know how to act.

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00:04:08.699 --> 00:04:13.409

And here is a whole question that I'm just throwing out there kind of curious as to how this.

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00:04:13.409 --> 00:04:17.699

You know what all you've encountered, but have you ever been called.

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00:04:17.699 --> 00:04:22.649

In an emergency situation, when 911 should have been called 1st.

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00:04:22.649 --> 00:04:29.759

And you can answer yes. Or no. And of course, we'll look at the results as a group after they or tallied.

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00:04:32.908 --> 00:04:35.939

So, please just don't hesitate to answer.

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00:05:06.624 --> 00:05:10.043

Never been called an emergency situation with 9 1 1.

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00:05:10.379 --> 00:05:15.178

Should have been called 1st, and it looks like times almost, uh.

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00:05:18.209 --> 00:05:26.459

Okay, awaiting the results.

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00:05:38.009 --> 00:05:43.348

Okay about about equal? Yes. Equal. No. Okay. All right.

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00:05:44.999 --> 00:05:50.338

Interesting just, it just varies.

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00:05:50.338 --> 00:05:59.278

Okay, how to be prepared.

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00:05:59.278 --> 00:06:04.798

How do you prepare for an emergency when you don't you know, you just don't know when an emergency might strike.

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00:06:04.798 --> 00:06:11.639

Well, agency should have a policy related to staff's expectations in an emergency.

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00:06:12.959 --> 00:06:17.069

Agency oversight are enroll in emergency response.

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00:06:17.069 --> 00:06:29.038

Or your agencies policy for what is expected when an emergency situation occurs, sometimes agency staff, as we said, have a difficult time, ascertain that an emergency is occurring.

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00:06:29.038 --> 00:06:37.139

On the division of Web site, you can find to help guide that staff can read and review as a reminder on how to determine an emergency.

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00:06:37.139 --> 00:06:41.908

It is called just not right? And I'm going to put the link in the chat.

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00:06:41.908 --> 00:06:49.829

It just give me a 2nd to do that.

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00:06:54.329 --> 00:07:00.329

Okay.

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00:07:03.928 --> 00:07:08.699

Okay, I'll post in the chat when I'm done. I'm not too many screens open everything.

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00:07:08.699 --> 00:07:13.858

But I will definitely share that because it's a pretty good tool to kind of help.

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00:07:13.858 --> 00:07:17.098

You know, get your mind wrapped around.

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00:07:17.098 --> 00:07:20.908

And identifying with someone's just not action, right? And if they need.

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00:07:20.908 --> 00:07:24.988

911 attention, or or what the next steps can be.

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00:07:24.988 --> 00:07:28.949

Experiential practice testing.

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00:07:28.949 --> 00:07:35.129

Um, which is just practicing, it has been proven to be effective.

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00:07:35.129 --> 00:07:49.408

As related in science, so indexing may doesn't 9, which refers to a Johns Hopkins children's center study. There is a significant improvement in emergency response with nurses and staging cardiopulmonary arrests with LifeSize Dummies.

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00:07:49.408 --> 00:07:54.658

And then I have the study link right here that I can post.

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00:07:54.658 --> 00:07:58.199

Um, it has just proven that with practice or even.

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00:07:58.199 --> 00:08:01.858

Um, if you if the staff were to review in their mind.

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00:08:01.858 --> 00:08:14.069

Okay here I am in the home. Okay. What I do if something happened and it's okay. Nurses and and directors and whomever to, to, to ask you pose that to your staff, what would you do? If something happened.

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00:08:14.069 --> 00:08:25.348

Then they can kind of get their mind wrapped around it and kind of talk themselves through the steps of, you know, what I call 911 stay on the phone just how how they would respond.

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00:08:30.899 --> 00:08:34.019

Because really, that's that's just that's 1 thing that can help.

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00:08:34.019 --> 00:08:41.068

I keep a person from becoming just, you know, kind of paralyze with fear and just what's my next step and Colin.

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00:08:41.068 --> 00:08:45.058

Supervisor before calling 9 1 1. okay.

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00:08:45.504 --> 00:08:58.764

So tips for staff, according to 911 dot Gov, many 911 call centers, follow protocols that guide callers through a sequence of questions to quickly obtain information necessary for dispatching the right responders to the right location.

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00:09:00.509 --> 00:09:05.308

Call takers may also provide instructions about what to do until help arise.

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00:09:05.308 --> 00:09:17.969

Even that protocols are designed to help call takers, reassure client, reassure the callers and take charge of the situation. The experience can be stressful for a 911 caller who is not accustomed to dealing with emergencies.

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00:09:17.969 --> 00:09:27.658

When you call 911 be prepared to answer the call takers questions, which may include the location of the emergency, including the street address.

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00:09:27.658 --> 00:09:42.058

So, there, if you commonly working at home or your staff, you know, they work in the same home or or even perhaps not have that address somewhere posted somewhere. So that if they did need to call 911, they could tell the operator exactly where they are.

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00:09:42.058 --> 00:09:46.979

91 dot Gov. Also recommends that if you're in a large building.

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00:09:46.979 --> 00:09:51.479

Be explicit as to what where you're located in that building.

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00:09:51.479 --> 00:09:55.739

They often ask what phone number you are calling from.

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00:09:55.739 --> 00:10:03.989

So, I have the home has its has its own landline or personal phone, you know, have that posted, make sure that they can.

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00:10:03.989 --> 00:10:11.249

So that they can identify that if asked details about the emergencies, such as a description of injuries or symptoms.

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00:10:11.249 --> 00:10:19.918

Being experienced by a person having a medical emergency, if they're able to tell them what kind of give just tell them what's going on when they're called.

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00:10:19.918 --> 00:10:24.178

Accurately relay situation, just the facts.

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00:10:24.178 --> 00:10:27.269

Do not give diagnosis do not diagnose.

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00:10:27.269 --> 00:10:30.658

Um, can the person give the facts of what is happening and pertinent.

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00:10:30.658 --> 00:10:34.769

Background medical information, so it.

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00:10:34.769 --> 00:10:38.068

Sometimes people will have a little medical sheets that has.

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00:10:38.068 --> 00:10:49.918

Just some health history, or what having a medications that can be available. So that way, whenever emergency response arrives, they can see what all what the person with their health.

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00:10:49.918 --> 00:10:53.489

Concerns have been and help determine how to help that person.

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00:10:54.568 --> 00:11:00.208

See, does the employee know how the person has been acting lately? Whether vomiting running at temperature.

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00:11:00.208 --> 00:11:05.999

Um, just the employee know if a person has a, do not resuscitate order that's important as well.

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00:11:05.999 --> 00:11:09.808

So that's all things that you all can help to clarify.

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00:11:09.808 --> 00:11:15.208

To make situations, maybe have an optimal outcome.

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00:11:15.208 --> 00:11:24.208

Although you can do everything, right? And a person still may not be able to be recessive, but this will help to ensure that you're doing what you can.

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00:11:24.208 --> 00:11:28.438

Now, remember the call takers questions are important to get the right kind of help.

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00:11:28.438 --> 00:11:33.599

To you as quickly as possible, be prepared to follow any instructions that call taker gives you.

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00:11:33.599 --> 00:11:43.379

Uh, many of them on 1 centers can tell you exactly what to do until help arrive, such as providing step by step instructions to aid someone who is choking or needs 1st, aid CPR.

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00:11:43.379 --> 00:11:46.438

Do not and they advice to not hang up.

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00:11:46.438 --> 00:11:49.769

Until the call taker instructs you to do so.

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00:11:49.769 --> 00:11:53.009

So those are just some tips for staff.

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00:11:53.009 --> 00:12:03.389

Agency culture, and when I speak of agency culture, I'm referring to just not being scared to call 911. if they believe the person isn't in an emergency situation.

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00:12:03.389 --> 00:12:09.058

Stack and Phil supported to call 911 and you as an oversight nurse.

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00:12:09.058 --> 00:12:20.818

If they call you, and it sounds like, you know, you better call 911 security, you got that in your mind, and you need to be able to feel support to be able to guide them to do that.

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00:12:22.644 --> 00:12:37.283

The most important thing with this type of that culture of you're not going to get in trouble. It's okay if you feel like it's a life threatening situation or emergency so just make sure they feel empowered to call 911. and if they feel like it's an emergency.

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00:12:38.813 --> 00:12:50.573

Also part of the culture could be to review what they would do in an emergency as we talked about earlier and what you as the oversight are in also review what your expectations are when there is an emergency.

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00:12:50.693 --> 00:13:00.114

So, if you have that prep ahead of time, you're least likely to blank out and just not know where to act next.

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00:13:00.359 --> 00:13:09.509

And it doesn't necessarily have to be, like, throw on the, and when we used to call them and needles with the CPR dummy on the ground and in practice in that way.

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00:13:09.509 --> 00:13:19.889

Um, just simply just kind of running the scenario, even with your coworkers talking about what would we do? What's our, what's our plan or even just thinking about it yourself and what I do.

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00:13:19.889 --> 00:13:24.178

What would I do in a situation like that? That will that will help.

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00:13:24.178 --> 00:13:31.379

Let's see and again, I want to reiterate be sure I know your agencies policy.

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00:13:31.379 --> 00:13:34.589

I can't stress enough that preparation is the key.

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00:13:34.589 --> 00:13:43.259

And also staff having the needed items, if they have to do CPR such as a mouth barrier available on the home, and, or a car.

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00:13:43.259 --> 00:13:50.639

Or any 1st, 8 materials that, that they may need that are they're in the home and well stocked.

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00:13:50.639 --> 00:13:54.058

Also emergencies a curse, so rarely.

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00:13:56.754 --> 00:14:10.254

So, it's hard to know how to act unless there's been review of the policy and CPR and 1st day training. So you can even review things right? Just regularly although they're not mandatory except for certain times.

109

00:14:10.499 --> 00:14:16.619

Like, annually, you're my air every other year, but you can still refresh yourselves.

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00:14:20.303 --> 00:14:31.344

Oh, another point I want to bring out is that when a person has individualized signals that they're having an emergency, then that should be something that staff is aware of who are taking care of that person.

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00:14:31.614 --> 00:14:38.634

For example, the individual and this, just I thought of this the other day, and I worked with this gentleman before that you may.

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00:14:39.448 --> 00:14:43.558

So, you may be serving this individual, and he has a seizure disorder.

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00:14:43.558 --> 00:14:53.339

Well, the individual maybe does not have seizures very often, but when he does, they are very hard and he often ASPR rates during his seizures and has trouble breathing.

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00:14:53.339 --> 00:15:07.139

It ends up meeting, need to go to hospital so information like that is very helpful for staff to know. So they can make sure to get him medical help and you can't call 911 right away. If he experience experience is 1 of those hard seizures.

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00:15:07.139 --> 00:15:12.208

That's just an example there, you know sure. You guys can all think of a bunch.

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00:15:12.208 --> 00:15:16.619

Bunch of different things so what to look for with the care.

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00:15:16.619 --> 00:15:22.499

Of knowledge, do you, and the staff know what to do for the individual, experiencing a medical emergency.

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00:15:22.499 --> 00:15:31.469

Needed materials in place if present are an Adi, which that's not usually in the homes, but depending on where you are.

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00:15:31.469 --> 00:15:38.668

That may be if may be available, but masks or any needed. 1st, aid supplies, present and readily available.

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00:15:38.668 --> 00:15:45.629

To the staff responding, another thing that you could think about too is what would they do if anything was missing.

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00:15:45.629 --> 00:15:56.813

Or what if they had to use something, and then just having that in place to where the product like that the mass, or what have you is replaced just having a process for that.

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00:15:56.813 --> 00:16:05.033

So, that way, if they have to use it that way, it's replaced. And so if something happens again, God forbid it'll be there for them.

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00:16:05.369 --> 00:16:14.399

So, after or you were the staff able to give information such as medication, being taken medical issues.

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00:16:14.399 --> 00:16:18.389

Medical history, any recent changes or patterns noted.

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00:16:18.389 --> 00:16:26.158

So, having having that in the chart, Andy, or even, just, as I said, happened that, well, we have.

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00:16:26.158 --> 00:16:33.688

But we can utilize our health passports and that kind of has a blurb of medications and diagnoses and health concerns on it.

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00:16:33.688 --> 00:16:42.778

What with the individual, and I think you can even personalize it and have a picture on it, but those are kind of handy. So that that way, whenever you do have to call emergency group.

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00:16:42.778 --> 00:16:49.948

Your then you can give that to them, so they can have an idea of okay, what's going on with this person's health.

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00:16:49.948 --> 00:16:56.308

You know, what could be going on with them because sometimes it is just a mystery. Whenever someone starts having them is an emergency.

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00:16:57.989 --> 00:17:08.159

So, afterward, okay, debriefing is a is a thing that we like to promote department mental health, mental health is very important.

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00:17:08.159 --> 00:17:13.078

Does your agency have a way to debrief on? There has been a medical emergency.

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00:17:13.078 --> 00:17:16.949

When I'm done speaking, I'm going to drop in the chat.

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00:17:16.949 --> 00:17:23.098

This is a link to our disaster services. They have so many different.

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00:17:23.098 --> 00:17:27.239

Things that you can look at that help with different kinds of traumatic events.

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00:17:27.239 --> 00:17:32.548

Um, managing stress, which is very important, and especially during a pandemic.

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00:17:32.548 --> 00:17:37.618

It has really added to all of our stressors as, you know.

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00:17:37.618 --> 00:17:47.788

So, I will drink, I will drop these resources in the chat here in just a minute. I'm not able to copy and paste from that, but I do have them on a different paper.

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00:17:49.858 --> 00:18:01.769

So, yes, on the disaster services section, you can find resources under there several tabs, but there's an adult's tab in it. It has information for dealing with stressful inter, dramatic situations.

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00:18:01.769 --> 00:18:13.439

And, I mean, I consider calling 911 or having to do CPR in someone that can be very traumatic for someone or even losing a loved 1, say they, they tried to get him help and then the person passes away.

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00:18:13.439 --> 00:18:19.439

But that can be very traumatic, or even just regular grieving for someone that they have lost.

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00:18:19.439 --> 00:18:23.459

Because, you know, that, you know, you get attached to people, you take care of.

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00:18:23.459 --> 00:18:28.318
So, topics on the damage website, um.

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00:18:28.318 --> 00:18:31.798
For coping facts for adults, coping facts for grief and loss.

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00:18:31.798 --> 00:18:34.798
Coping with disasters and traumatic events.

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00:18:34.798 --> 00:18:41.729
Coping with traumatic event anniversaries, because that can be very difficult to the anniversary of something. Just very traumatic.

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00:18:41.729 --> 00:18:46.558
I'm emotional 1st, date for adults and then the road to resilience.

147
00:18:46.558 --> 00:18:51.989
So those are some things and I will drop that in the chat documentation.

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00:18:51.989 --> 00:18:57.838
Don't forget the documentation is needed for any involvement in medical emergencies.

149
00:19:00.538 --> 00:19:03.898
Quality assurance.

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00:19:03.898 --> 00:19:11.038
Um, with the documentation, whomever, maybe you, as the oversight or in, we'll review some documentation.

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00:19:11.038 --> 00:19:19.618
Um, I get everybody's agency or facilities different at the regional office. Aaron will usually have a piece that they do related to quality assurance.

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00:19:19.618 --> 00:19:30.239
Whereas they evaluate the event, and just kind of see how things go, they may reach out to you for, with, you know, maybe they have a question or just a check and see if, you know.

153
00:19:30.239 --> 00:19:33.388
If any resources or supports needed.

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00:19:33.388 --> 00:19:37.919

And, uh, they, they also look at that to determine if there's any need for follow up.

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00:19:37.919 --> 00:19:49.348

Because we have a, where we were outside looking in, so we can kind of evaluate what we see in a situation from what's documented and say, oh, they could this could help.

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00:19:49.348 --> 00:19:55.469

Or things of that nature so resources.

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00:19:55.469 --> 00:19:59.278

Um, that just not right help sheet. Our website can assist staff.

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00:19:59.278 --> 00:20:05.398

Caring for individuals and help identify 1 to see medical help or call 911.

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00:20:05.398 --> 00:20:12.838

And, yes, these links, they I think I saw something pop up and chat. The links won't go away. These are all.

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00:20:12.838 --> 00:20:17.669

Active links, and many of them are on are from our website.

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00:20:18.719 --> 00:20:26.999

Regional office as a resource, a consultation with the regional office. Iran is always available for those receiving services.

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00:20:26.999 --> 00:20:37.588

Physicians ahead of time talking to the person's physician that way you should be able to give directions on specific individualized questions.

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00:20:37.588 --> 00:20:42.959

Uh, regarding what is an emergency for situation for this individual, like.

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00:20:42.959 --> 00:20:49.469

When should we seek further help when this individual displays, what such and such signs and symptoms.

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00:20:49.469 --> 00:20:54.808

And then, of course, the American Heart Association in American Red Cross.

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00:20:54.808 --> 00:21:00.479

Or, if your agencies is some other approved and accredited CPR, certified organization.

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00:21:00.479 --> 00:21:04.409

Um, that's always a good resource for reviewing steps.

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00:21:04.409 --> 00:21:13.199

With identifying an emergency and calling 911. so I'm going to stop sharing my screen.

169

00:21:14.848 --> 00:21:18.118

And put those links in the.

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00:21:18.118 --> 00:21:27.778

Share and I don't know, does anybody.

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00:21:27.778 --> 00:21:35.159

Do we have any questions, Tricia? Are you able to read or check and see if there's any questions while I do that?

172

00:21:35.159 --> 00:21:45.479

Yeah, 1 question we have here is, does mortality review apply to clients you have expired when admitted to the hospital or just at the home.

173

00:21:47.159 --> 00:21:51.628

So, the answer is, if they're receiving.

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00:21:51.628 --> 00:21:56.278

Wavered services yes. Mortality review does apply to them.

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00:21:56.278 --> 00:21:59.308

Even if they were admitted to the hospital.

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00:22:02.489 --> 00:22:07.288

Thank you for answering that.

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00:22:07.288 --> 00:22:11.249

Here's 1 link for managing stress.

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00:22:11.249 --> 00:22:18.148

And then here is the office of disaster services website that has a lot of.

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00:22:18.148 --> 00:22:21.778

Oh, my gosh. It just, it's a lot it's good resources, you know.

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00:22:23.398 --> 00:22:29.909

They really take, they take it seriously and they're really trying to help with people's mental health and recognize that.

181

00:22:31.469 --> 00:22:36.719

And this is going to be just not right.

182

00:22:38.068 --> 00:22:48.419

You're only federal, hopefully that document you can, you can share that document. Hopefully that will be of assistance so that staff can feel.

183

00:22:48.419 --> 00:23:00.894

You know, more confident in what they're, you know, what they're experiencing cause that is scary. You know, you may go your whole life and not take care of someone not have 1 emergency or things maybe go on a status quo.

184

00:23:00.894 --> 00:23:05.153

And then suddenly someone loses consciousness. And you're just like, yeah, I mean.

185

00:23:05.459 --> 00:23:11.429

It's just not something everybody's prepared for and and people staff working on the home. They are not necessarily.

186

00:23:11.429 --> 00:23:18.749

Have a lot of experience in that from past jobs or anything, or any know you get 1 training every, every couple of years. So.

187

00:23:18.749 --> 00:23:22.769

Hopefully, that will help. Were there any other questions in the chat?

188

00:23:27.568 --> 00:23:33.509

Let's see anything seen any Leslie. Okay. All right. Well, thank you.
Tricia.

189

00:23:33.509 --> 00:23:37.378

And let's see.

190

00:23:38.638 --> 00:23:43.979

All right, well, Tricia may I introduce you for your part here?

191

00:23:43.979 --> 00:23:50.009

I turn the certainly I'm going to give you the folder, so you can present.

192

00:23:50.009 --> 00:23:55.439

Oh, right now, I would like to tell you a little bit about my colleague.

193

00:23:56.608 --> 00:24:08.009

List over here before I turn it over to her Tricia Parker has been an ID nurse for over 10 years cheered her bachelor of science degree, and register nursing from the University of central Missouri.

194

00:24:08.009 --> 00:24:13.739

She served as a regional office quality enhancement our end for the central Missouri, regional office.

195

00:24:13.739 --> 00:24:19.409

Prior to coming into the position she's in now to serve as the community health and wellness coordinator.

196

00:24:19.409 --> 00:24:28.949

Um, for community operations, Patricia is going to review station, empty service with you and show you resources for cobit 19th are available out there.

197

00:24:28.949 --> 00:24:33.929

That we have on our own Web site, so I am now pleased to turn it over to Tricia.

198

00:24:35.578 --> 00:24:43.348

Thanks, Leslie for that. Great introduction. I appreciate it. So I'm going to share my screen.

199

00:24:43.348 --> 00:24:47.489

Here and, um.

200

00:24:49.798 --> 00:24:54.358

You should be seeing it. Okay so.

201

00:24:54.358 --> 00:24:59.308

I'm just briefly going to go over station at Mt what it is.

202

00:24:59.308 --> 00:25:06.838

The division partnered with a telehealth service called station Mt back when.

203

00:25:06.838 --> 00:25:17.729

Last year the 1st, wave of coded, and it was just to make sure that the doctors offices and stuff weren't seeing people frequently.

204

00:25:17.729 --> 00:25:21.598

I'm due to coded, so we partnered with station Mt.

205

00:25:21.598 --> 00:25:24.659

Um, they are qualified.

206

00:25:24.864 --> 00:25:38.124

And serve individuals with ID they are a 24 hour, 7 day, a week service, and they act as a resource for individuals, families and staff to call anybody who is receiving wavered.

207

00:25:39.719 --> 00:25:49.229

Services can utilize station empty. There's yeah. Staff can download an app to their phones.

208

00:25:49.229 --> 00:25:53.219

I'm also going to take you to our damage website here in a 2nd.

209

00:25:53.219 --> 00:25:57.598

And show you where it is on our website.

210

00:25:57.598 --> 00:26:06.838

And anybody who's receiving again, any Medicaid waver recipients are eligible.

211

00:26:06.838 --> 00:26:12.628

Immediately to utilize station empty for any medical concerns.

212

00:26:12.628 --> 00:26:21.269

And then we'll talk a little bit about monoclonal antibodies and their efforts with that here in just a few seconds.

213

00:26:21.269 --> 00:26:25.378

But what I want to do is take you to.

214

00:26:25.378 --> 00:26:29.669

Where it's at on our Web site, and hopefully this will work.

215

00:26:32.489 --> 00:26:37.439

Okay.

216

00:26:37.439 --> 00:26:40.949

Maybe, let me.

217

00:26:42.479 --> 00:26:46.858

Well, 2nd step this way.

218

00:26:46.858 --> 00:26:50.308

I didn't know if that was going to work or not.

219

00:26:50.308 --> 00:26:56.699

That's okay. You've got it. Got that. Yeah. Sorry about that guys. You're fine.

220

00:26:56.699 --> 00:27:05.398

See, this our department of mental health Web page.

221

00:27:05.398 --> 00:27:12.179

You'll need to click on developmental disabilities. This is our code 19 banner.

222

00:27:12.179 --> 00:27:21.538

Um, we'll discuss that here in a minute, but over here you see this little blue button here for station empty when you click on that.

223

00:27:21.538 --> 00:27:25.078

It gives you the description of.

224

00:27:25.078 --> 00:27:30.929

Station empty and their services and then underneath, you have.

225

00:27:30.929 --> 00:27:39.239

Other information, there's just so much information directions for downloading and using the app. The app.

226

00:27:39.239 --> 00:27:51.419

Frequently asked questions, and as you can see covered 19 vaccine town hall webinar series. If you click on that, they have some series that you can watch.

227

00:27:51.419 --> 00:27:54.719

And some other live recorded events.

228

00:27:54.719 --> 00:28:00.328

And then it also has, um, if you're having.

229

00:28:00.328 --> 00:28:06.898

Guardians or family members, wanting more information about.

230

00:28:06.898 --> 00:28:12.479

Station M. D. there's an individual and family package packet.

231

00:28:12.479 --> 00:28:17.009

Um, and there's letters, I'll just click on this 1.

232

00:28:18.449 --> 00:28:27.594

See, if it comes up and this just kind of explains it again.

233

00:28:28.673 --> 00:28:33.953

So it's to make doctors available for our population who's at risk.

234

00:28:35.848 --> 00:28:40.048

Go back 1. oops.

235

00:28:41.999 --> 00:28:50.818

And then also here is information for your residential provider and agency guidance.

236

00:28:52.019 --> 00:28:56.578

And it, it has a history form that you can fill out.

237

00:28:56.578 --> 00:29:00.989

We also talked about Leslie had mentioned the, how passport?

238

00:29:00.989 --> 00:29:06.479

And again, it has the individual and family packet.

239

00:29:06.479 --> 00:29:09.538

Here so there's several ways you can get.

240

00:29:09.538 --> 00:29:14.519

The same information, but always, when you go to the website.

241

00:29:14.519 --> 00:29:20.098

And you see these little carrots here, click on those, and you'll find a wealth of information.

242

00:29:21.449 --> 00:29:24.659

And so I'm going to stop sharing that.

243

00:29:24.659 --> 00:29:31.469

At screen, we'll see if we can pull up my PowerPoint again.

244

00:29:34.769 --> 00:29:37.979

So, I'm just gonna kind of bounce around and I apologize.

245

00:29:39.719 --> 00:29:46.348

Okay.

246

00:29:52.979 --> 00:29:56.308

That might work better if I just do it that way.

247

00:29:56.308 --> 00:30:00.929

Okay, so, um.

248

00:30:00.929 --> 00:30:12.028

Okay, so now we're going to do a poll question and the full question number 7 is, have you ever utilized station empty for an individual receiving Medicaid waiver services.

249

00:30:16.888 --> 00:30:25.739

And we'll have a minute to answer this and then, like, before with the other pull questions, it will tally it.

250

00:30:25.739 --> 00:30:30.449

In a minute, it seems like a long time when you're just watching the clock tick. Bye.

251

00:30:30.449 --> 00:30:39.989

So, again, while we're answering those questions, it is a 24 hour day, 7 day, week service.

252

00:30:39.989 --> 00:30:46.108

Um, it doesn't necessarily take a place of the primary care physician.

253

00:30:46.108 --> 00:30:53.189

But, you know, in an instance where, you know, your staff or it's after hours.

254

00:30:53.189 --> 00:31:05.423

They can't get an individualized to see the physician. They're kind of concerned about something as long as it's not a medical emergency. Those are things they should be reacting on and encouraged to react on. Immediately.

255

00:31:06.324 --> 00:31:12.864

They can consult station empty station. Empty can listen to heart tones. And.

256

00:31:13.409 --> 00:31:16.709

Yields through their virtual service.

257

00:31:16.709 --> 00:31:22.138

So that's kind of cool. And it looks like we ran out of time.

258

00:31:22.138 --> 00:31:26.969

So, okay, so, um.

259

00:31:26.969 --> 00:31:31.558

We're about even there on. Yes and no answers.

260

00:31:32.638 --> 00:31:40.318

Whether, or not anybodies use station empty. So we had 45 say that they've utilized it in 52.

261

00:31:40.318 --> 00:31:44.519

That have not utilized it. Okay.

262

00:31:44.519 --> 00:31:47.788

And then I think we'll do another question.

263

00:31:47.788 --> 00:31:58.739

For those that have utilized station empty, how would you rate your experience with station empty on a scale of 0 to 10 with 10 being the best possible experience?

264

00:31:58.739 --> 00:32:11.788

And we change the answers to that just a little bit to satisfy. Oh, okay. That's fine. You're fine. Satisfied neutral not satisfied or never accessed. Yeah.

265

00:32:11.788 --> 00:32:16.108

Good yeah, and again, you have a minute to.

266

00:32:16.108 --> 00:32:19.318

To answer those, and then will tally those.

267

00:32:19.318 --> 00:32:23.189

And share that with you.

268

00:32:24.659 --> 00:32:31.888

And I like telemedicine services. I've used telemedicine myself.

269

00:32:31.888 --> 00:32:41.189

For simple things. Well, I had a 2 fake 1 time. I used not station empty, but my Teladoc service and.

270

00:32:41.189 --> 00:32:48.148

Is able to get antibiotics right away. It wasn't it was actually less costly.

271

00:32:48.148 --> 00:32:53.818

Then going to my doctor or waiting to get into the dentist.

272

00:32:55.469 --> 00:32:59.249
We got a few more seconds here left.

273
00:33:03.028 --> 00:33:08.848
All right, so the pole is closed and wait for those tally results.

274
00:33:08.848 --> 00:33:22.019
Okay, so we've got 43 that we're satisfied. We got a couple that were neutral and then we have 40 that never accessed. Okay, well, thank you guys for taking the time to answer those full questions.

275
00:33:22.019 --> 00:33:25.858
And that's my next slide.

276
00:33:25.858 --> 00:33:31.409
So we talk about Toby 19. um.

277
00:33:31.409 --> 00:33:35.909
We're and we'll talk more about code and 19 and resources.

278
00:33:35.909 --> 00:33:44.999
On the next few slides after we get done talking about station MVP, but 1 of the things that station empty can be utilized is.

279
00:33:44.999 --> 00:33:58.888
For console regarding code, 19, and specifically monoclonal antibody infusions station empty can assess the individual for readiness for monoclonal anybody infusion treatment.

280
00:33:58.888 --> 00:34:05.219
And make appropriate referrals. I do want to make a note here that station empty.

281
00:34:05.219 --> 00:34:12.059
Does not have infusion sites, but what they do is, they, they're.

282
00:34:12.059 --> 00:34:15.748
Working around Missouri.

283
00:34:15.748 --> 00:34:20.728
To access those sites, make those appropriate referrals.

284

00:34:20.728 --> 00:34:30.898

Um, and and they will also work with the individual's primary care provider to assure continuity of care and treatment options.

285

00:34:30.898 --> 00:34:39.329

So, on the monoclonal antibody infusions and station emptied, we have provided the regional with.

286

00:34:39.329 --> 00:34:50.938

A flyer for station to empty and so if you have questions about station empty and the monoclonal antibody infusions, particularly please reach out to 1 of your ends.

287

00:34:50.938 --> 00:34:55.438

And they'll help you with that and.

288

00:34:55.438 --> 00:35:01.018

Uh, help you with the information and so.

289

00:35:01.018 --> 00:35:04.259

Uh, I can't see that chat Leslie.

290

00:35:04.259 --> 00:35:08.489

Is there any questions so far about station? Md.

291

00:35:09.599 --> 00:35:19.378

And their service, I am not seeing any questions and I do see, 1 person did say they are a huge fan of station empty.

292

00:35:19.378 --> 00:35:30.748

That's good. That's good. It's a good service for individuals and particularly with the coven19, they're particularly at risk.

293

00:35:30.748 --> 00:35:36.659

You know, if we're trying to keep them home and keep them out of the doctor's offices and out of the hospitals.

294

00:35:36.659 --> 00:35:44.068

You know, steak, AMP D is a great resource there. You know, we can use them. Hey.

295

00:35:44.068 --> 00:35:47.398

You know, we're not sure what we're seeing, but can we.

296

00:35:47.398 --> 00:35:52.978

You know, they're complaining of pain, you know, give them a call a different.

297

00:35:52.978 --> 00:35:59.309

You know, just don't utilize them for emergency services. That's not what they're prepared for. I just want to.

298

00:35:59.309 --> 00:36:08.159

To put that out there when our staff, our staff should be empowered to call 911 when they think somebody is.

299

00:36:08.159 --> 00:36:12.958

Needing emergency medical treatment, and Leslie had mentioned that just.

300

00:36:12.958 --> 00:36:22.409

Right document here a little bit. I'm going to take you to that when we talk about the observed decide and act resources out on our website.

301

00:36:22.409 --> 00:36:26.039

Someone had posted and oh, I'm sorry.

302

00:36:26.039 --> 00:36:32.938

No, go ahead. Someone posted that. They feel like that if station would be.

303

00:36:32.938 --> 00:36:38.369

If it would be utilized more if our facilities or homes had like, a magnet.

304

00:36:38.369 --> 00:36:44.608

Uh, with info on it, so it sounds sounds like they just would like, something more handy right there in the house.

305

00:36:44.608 --> 00:36:47.668

To have for their staff.

306

00:36:47.668 --> 00:36:52.349

Like, a magnet on the refrigerator for calling.

307

00:36:52.349 --> 00:36:56.818

Yeah, so I'm assuming that that's what they meant. Okay.

308

00:36:56.818 --> 00:37:01.469

I'm not sure that that's available.

309

00:37:01.469 --> 00:37:07.619

Um, we can definitely circle back with station and and see if we can't get something like that out.

310

00:37:07.619 --> 00:37:13.798

I'm not sure that they have anything like that. There is a downloadable app.

311

00:37:13.798 --> 00:37:16.949

That they can utilize.

312

00:37:16.949 --> 00:37:21.239

And I believe there is a.

313

00:37:21.239 --> 00:37:28.708

Is there, there's a phone number, but they'll have to have the app too for them to be able to do the.

314

00:37:28.708 --> 00:37:34.199

Telehealth service, so downloading the apps probably the best.

315

00:37:34.199 --> 00:37:37.409

But we can, we can talk to them about.

316

00:37:37.409 --> 00:37:41.728

You know, magnets and things.

317

00:37:41.728 --> 00:37:44.818

More resources like that.

318

00:37:48.509 --> 00:37:56.309

Any more questions oh, I just seem 1 pop up that. I didn't get to read it all.

319

00:38:02.909 --> 00:38:12.780

It says I downloaded the information page with the link to the app, an info on how to access and laminated it for each of the cells that I cover.

320

00:38:12.780 --> 00:38:26.880

Oh, great. Another is how long will service how long will services continue to be available?

321

00:38:26.880 --> 00:38:36.239

As far as I know there are partners so I don't know that there's an end date for that.

322

00:38:36.239 --> 00:38:39.719

Are there currently.

323

00:38:39.719 --> 00:38:46.170

Okay, are all home are all homes to have the ability to video conference.

324

00:38:47.849 --> 00:38:51.840

That's something that you would probably have to work out with your agency.

325

00:38:54.570 --> 00:39:01.289

I'm not sure how all the homes are set up, but they're typically utilized through.

326

00:39:01.289 --> 00:39:08.039

You know, the, the downloadable app through your computer, or your cell phone.

327

00:39:08.039 --> 00:39:13.260

So that might be something that you discuss with the agency on on how to make.

328

00:39:13.260 --> 00:39:16.920

That service readily available in the homes.

329

00:39:16.920 --> 00:39:21.119

If staff don't want to use their cell phone to whatever.

330

00:39:36.750 --> 00:39:44.579

Another question is has anyone is, I guess, I mean, is anyone having an issue with medication prescriptions being covered?

331

00:39:48.690 --> 00:39:52.769

That I don't have that information, and I can speak to that.

332

00:39:54.210 --> 00:40:00.869

Is the monoclonal antibody therapy an overnight stay in the hospital.

333

00:40:03.539 --> 00:40:14.099

Typically, it's not I think that's about it for now. As far as.

334

00:40:18.119 --> 00:40:31.795

Yeah, and just to touch upon the Monica sorry to interrupt to touch upon your monoclonal antibodies. How that would look as the person is about is perhaps evaluated by station MD physician.

335

00:40:31.824 --> 00:40:41.005

Perhaps their own personal physician, they have to meet certain requirements, certain criteria, health criteria in order to have it.

336

00:40:41.275 --> 00:40:49.644

And I, namely, it has to be within a certain timeframe from when they test positive or start showing symptoms that has to be within a shorter timeframe.

337

00:40:50.005 --> 00:41:04.525

They are then referred to an infusion clinic nearby and appointment is may they go in and they have the IV infusion? I believe they're monitored for possibly an hour afterward. I don't remember the exact time, but it's not very long.

338

00:41:04.855 --> 00:41:08.965

And then as far as I know, they're able to go home after that.

339

00:41:09.269 --> 00:41:15.210

So, that's kind of a brief rundown of I just wanted to throw that out there and.

340

00:41:15.210 --> 00:41:23.639

I'll be quiet. Yeah, no, that's fine. And here in a minute, I will show you a link that.

341

00:41:23.639 --> 00:41:28.619

The DHS link for the monoclonal, Anna, anybody infusion sites.

342

00:41:28.619 --> 00:41:36.630

When we talk more about there are some things in the chat that I'll read out.

343

00:41:36.630 --> 00:41:40.349

Um, besides that, has anyone had any issues with medication?

344

00:41:40.349 --> 00:41:53.844

Prescriptions being covered and other person said we have not had any issues with medications being covered. We have had to let our pharmacy know that the prescription would be coming from an out of state doctor for them to fill it.

345

00:41:55.315 --> 00:41:58.824

Somebody said just multi vitamins, fish, oil, vitamin D, et cetera.

346

00:41:59.460 --> 00:42:05.969

And someone said, yes, sometimes I do have trouble getting medications covered by the insurance.

347

00:42:05.969 --> 00:42:16.349

I've had Walgreens say Mo, Medicaid, say they won't cover meds because the prescriber isn't in Missouri when using web Monday.

348

00:42:16.349 --> 00:42:27.090

Another person said we have experienced an outpatient release on antibody I. V. therapy just to confirm that it is an, all patient that's just someone referring to that.

349

00:42:27.090 --> 00:42:39.960

Someone said they even used when 1 of our consumers primary care physician passed away while waiting for a new primary care physician appointment.

350

00:42:39.960 --> 00:42:50.369

That's good to know. I had 1 of my individuals early in the coveted venture that received the monoclonal therapy, and she did come home.

351

00:42:50.369 --> 00:43:02.639

Uh, same day and another, last 1 is I called a few infusion clinics in Colombia. They did not have it available yet.

352

00:43:05.400 --> 00:43:10.440
I'm sorry last for Monday. Okay.

353

00:43:10.440 --> 00:43:19.860
I have had the station MD, not be able to write a medication because it was considered a controlled medication in the state where the physician was licensed.

354

00:43:22.019 --> 00:43:26.429
Well, these are very interesting things to bring up. I really appreciate it.

355

00:43:26.429 --> 00:43:40.050
This is so need to note because, well, for what my understanding was station empty physicians are all licensed in Missouri. So I'm going to take take the comments just back to the table and just say.

356

00:43:40.050 --> 00:43:53.755
Um, is this something that needs attention just just to kind of make sure everything's going kosher but from what I heard for through the I always the chief medical I don't know if you call him advisor, the chief medical person Dr.

357

00:43:54.235 --> 00:44:06.594
from a station empty. I had asked him that because I wondered how is this going to work with referrals to get it monoclonal antibody infusions? And he said that there are supposed to be Missouri license. So.

358

00:44:06.929 --> 00:44:14.309
I will check and see about that controlled substance issue. Maybe there's something that needs to be ironed out with that.

359

00:44:14.309 --> 00:44:23.099
Yeah, and next guys for making us aware of some of the issues that you're for having, because we can definitely go back and have those conversations.

360

00:44:23.099 --> 00:44:27.480
With station Mt and see if we can't puzzle those.

361

00:44:31.559 --> 00:44:43.014
Okay, so looks like some are having issues with the controlled substances and then there was 1. that's not.

362

00:44:43.074 --> 00:44:49.585

So we'll definitely go back and have these conversations with station empty.

363

00:44:49.889 --> 00:44:54.389

Okay, so I'm going to move on to cover 19 updates.

364

00:44:54.389 --> 00:45:09.360

A lot of what I'm going to do guys on these next couple of slides is just take you to some of our resources. We all know that there has been an uptick in numbers. Missouri has been on the national news.

365

00:45:09.360 --> 00:45:12.869

For our.

366

00:45:12.869 --> 00:45:22.530

Positivity numbers a lot of those numbers that you're seeing is due to the delta variant across Missouri. It's in the sewer shed.

367

00:45:22.530 --> 00:45:36.329

Um, the Department of health and senior services website for Missouri and hotspot advisory, I'm going to take you to those. And this is where we get the information. Um.

368

00:45:36.329 --> 00:45:40.500

If it'll let me get on here, let's see.

369

00:45:40.500 --> 00:45:43.829

Oh, I might be able to open it from here at this time.

370

00:45:43.829 --> 00:45:49.019

Let's see if that comes up. Nope.

371

00:45:51.510 --> 00:45:57.900

Might take a minute. All right.

372

00:45:57.900 --> 00:46:02.429

So this is the public health data from DHS.

373

00:46:05.880 --> 00:46:11.099

And it comes out my Internet must be a little slower.

374

00:46:11.099 --> 00:46:17.760

And so this is Missouri at a glance, I'm not going to read all of this information.

375

00:46:17.760 --> 00:46:26.099

The link is on the slide if you're curious and want to go out there and see where we're at, in Missouri, this web page.

376

00:46:26.099 --> 00:46:33.929

Well, also you can look at by county, so you can enter your county.

377

00:46:35.369 --> 00:46:44.010

Maybe, I'll quit clicking on stuff and it might talk about our vaccination rates inventory.

378

00:46:44.010 --> 00:46:51.510

The sewer shed map and testing.

379

00:46:51.510 --> 00:46:55.139

And so then you can select a jurisdiction.

380

00:46:55.139 --> 00:46:59.039

And I would love to do that, but it looks like it's going to take a while.

381

00:46:59.039 --> 00:47:09.090

But I am going to scroll down and you can see, we have a data chart here from April to August.

382

00:47:13.260 --> 00:47:27.355

They do have the hover option to let you hover over things. And then if you click on these jurisdictions or counties to this will bring up your information to have our option.

383

00:47:27.355 --> 00:47:30.894

Callaway county to date has had 6,396 cases per 100,000.

384

00:47:34.289 --> 00:47:40.530

And that's the metrics and then the antigen metrics. Oops, let me just go up here.

385

00:47:42.840 --> 00:47:46.650

Like I said, just, you know, pick your county.

386

00:47:46.650 --> 00:47:52.889

Antigen metrics for Carter county. 394 per 100,000.

387

00:47:56.369 --> 00:48:00.659

It also gives you a past 7 days.

388

00:48:02.489 --> 00:48:08.280

And it gives you will look at past 7 days, compared to the prior 7 days.

389

00:48:09.659 --> 00:48:14.760

So this is an interesting web site if you're curious of where you're at, in your county.

390

00:48:18.239 --> 00:48:22.110

And then I'm going to close out of that.

391

00:48:22.110 --> 00:48:30.179

And go back here, and then the other thing, the other link that I wanted to show, you was the hot spot advisory from DHS.

392

00:48:31.199 --> 00:48:35.010

See, but I'll let me open it from here. It looks like it will.

393

00:48:38.489 --> 00:48:41.820

And it looks like there was 1 issue today.

394

00:48:41.820 --> 00:48:45.420

And you can see, they started this back in July.

395

00:48:47.099 --> 00:48:56.969

And so when, and I'm just going to click on this 1 for September 15th for volunteer and Madison counties and surrounding areas.

396

00:48:56.969 --> 00:49:00.840

These are areas of concern that they're watching really closely.

397

00:49:02.130 --> 00:49:06.869

And it talks about, you know, it gives you the situational summary.

398

00:49:06.869 --> 00:49:12.510

It also talks about the hospitalizations and where we're at.

399

00:49:15.599 --> 00:49:18.929

Talks about the delta variant.

400

00:49:18.929 --> 00:49:22.469

Talks about vaccination rates.

401

00:49:22.469 --> 00:49:28.349

That 2006.4% and Madison is 2009.8%.

402

00:49:28.349 --> 00:49:33.780

Which is well below the national average and.

403

00:49:33.780 --> 00:49:40.050

And in Missouri, a lot of that can be due to population size, whether it's rural or urban.

404

00:49:40.050 --> 00:49:47.309

Things of that nature, but if you're interested in in the DHS, they're the ones tracking.

405

00:49:47.309 --> 00:49:51.719

The code stuff, the vaccination rates.

406

00:49:51.719 --> 00:49:57.840

You know, those are 2 great links. I use them almost daily.

407

00:49:57.840 --> 00:50:04.380

When I'm looking at things, so I'm going to close that out. Do we have any questions about those 2 links? So far?

408

00:50:08.639 --> 00:50:15.989

So, then I do want to take you to another link, which is the Missouri stronger together banner.

409

00:50:15.989 --> 00:50:22.199

Um, they do have a initiative out there.

410

00:50:22.199 --> 00:50:33.539

Where you can register to win if you're vaccinated, or individuals are eligible to register to win as well and here you can enter to win 10,000 dollars.

411
00:50:33.539 --> 00:50:38.730
And.

412
00:50:40.860 --> 00:50:46.469
Just some general information here about where you can get a vaccine.

413
00:50:46.469 --> 00:50:53.610
Cobi test recent news from and.

414
00:50:53.610 --> 00:50:59.429
Vaccination data supply data.

415
00:50:59.429 --> 00:51:04.769
And then if you go back up here, you can also click on these here. I.

416
00:51:04.769 --> 00:51:10.920
I'm going to try it and the, this is all from DHS as well.

417
00:51:10.920 --> 00:51:14.369
Then you can look at statewide and county.

418
00:51:14.369 --> 00:51:17.969
And you can see this looks very familiar.

419
00:51:19.409 --> 00:51:24.630
And Here's a graph graph a total doses administered over time.

420
00:51:27.000 --> 00:51:33.659
And that includes all of the, the Pfizer McDermott and the Johnson and Johnson.

421
00:51:33.659 --> 00:51:37.440
And then you can look at age group.

422
00:51:37.440 --> 00:51:43.889
You can see that our older individuals.

423

00:51:43.889 --> 00:51:49.260

Are up there on their members on, on vaccination the age group.

424

00:51:49.260 --> 00:51:53.639

Particularly of concern would be the 1217 and 18 to 24.

425

00:51:55.889 --> 00:52:03.570

Are still not quite there yet. Okay.

426

00:52:03.570 --> 00:52:06.929

So, there are some resources.

427

00:52:06.929 --> 00:52:15.239

We have some additional resources that you can share with your individuals and their family members regarding.

428

00:52:15.239 --> 00:52:19.019

Um, and.

429

00:52:19.019 --> 00:52:23.280

I like this 1 because it's Missouri plain language guide.

430

00:52:23.280 --> 00:52:27.000

And it was a partnership.

431

00:52:27.000 --> 00:52:34.050

Let me see if I can open the partnership and you'll see it here in a 2nd. I love this 1.

432

00:52:34.050 --> 00:52:41.039

With the Missouri developmental disabilities Council.

433

00:52:41.039 --> 00:52:46.380

And and then you scroll down here.

434

00:52:46.380 --> 00:52:49.710

To that.

435

00:52:52.380 --> 00:52:59.010

Oh, there you go. And I like this because it really.

436

00:52:59.010 --> 00:53:02.880
It just puts things in it.

437
00:53:02.880 --> 00:53:06.780
You know, just plain language like it says.

438
00:53:06.780 --> 00:53:14.369
So, it talks about how to find the vaccine. You can scroll through this talks about what cover 19 is.

439
00:53:17.760 --> 00:53:24.659
Um, you can see what you might experience October 19, your signs and symptoms.

440
00:53:24.659 --> 00:53:31.320
How do you stay healthy? Very direct to the point.

441
00:53:32.699 --> 00:53:41.219
Information, what do you do if you get sick call a doctor.

442
00:53:41.219 --> 00:53:45.059
Those things back to basics.

443
00:53:47.190 --> 00:53:51.420
Okay, and then it also has web sites that you can.

444
00:53:51.420 --> 00:53:55.079
Look at, and we did look at the most apps dot com.

445
00:53:55.079 --> 00:54:03.059
Banner that we had and that's a Missouri plain language guidance you can share with your individuals and their families.

446
00:54:03.059 --> 00:54:06.599
If they have questions about Kobe in the vaccines.

447
00:54:07.980 --> 00:54:12.840
Then this 1, and we got several CDC resources.

448
00:54:12.840 --> 00:54:17.880
This 1, I'm going to try to go to.

449

00:54:20.429 --> 00:54:24.150

See, if it open for me.

450

00:54:26.429 --> 00:54:31.530

This form we have this 1 you can print out in Spanish.

451

00:54:31.530 --> 00:54:37.230

And I like these because and we shared these with our service coordinators.

452

00:54:37.230 --> 00:54:42.869

We have posters the printable posters, um, social stories.

453

00:54:42.869 --> 00:54:46.199

Interactive social stories and videos, they kind of.

454

00:54:46.199 --> 00:54:52.559

Is geared towards the learner and it's geared towards individuals with ID.

455

00:54:53.820 --> 00:54:59.519

And so it talks about various subjects, you know, the vaccination of course.

456

00:54:59.519 --> 00:55:03.960

You know, hand hygiene testing.

457

00:55:03.960 --> 00:55:07.079

And, of course, all of the.

458

00:55:07.079 --> 00:55:11.280

We'll click on 1 of these.

459

00:55:11.280 --> 00:55:18.659

Talks about masks and I'm going to click on this just to show you what it looks like.

460

00:55:18.659 --> 00:55:22.559

And so this is a slide show.

461

00:55:22.559 --> 00:55:31.349

Some of them do have videos, but it's a great resource to share as well.

462

00:55:35.639 --> 00:55:41.969

Okay, and I seeing that. Oh, and, um.

463

00:55:41.969 --> 00:55:47.880

Monoclonal antibody stuff. Oh, here we go. I think I skipped a slide. I'm sorry.

464

00:55:47.880 --> 00:56:00.840

Because I was like, no, I know I need to talk more so testing resources. Let's go to that 1st, testing resources. We get a lot of questions about how do we access text testing and the next now.

465

00:56:00.840 --> 00:56:09.869

Um, and I'm going to see if this will let me go to this. I'm hoping it will. Yep, I think so. So, on our website.

466

00:56:12.719 --> 00:56:19.110

This is where you'll find that information, it's the current virus code 19 information.

467

00:56:19.110 --> 00:56:22.590

It has.

468

00:56:22.590 --> 00:56:26.909

Information this is the provider specific guidance.

469

00:56:26.909 --> 00:56:33.059

Vaccine information you click on any of these carrots talks about the vaccine lottery.

470

00:56:33.059 --> 00:56:37.469

Stuff he also talks about flu.

471

00:56:37.469 --> 00:56:42.809

And then testing information, we get a lot of questions about this.

472

00:56:42.809 --> 00:56:46.889

You know, where do we access the by next now?

473

00:56:46.889 --> 00:56:51.869

Testing for our agencies, and this is where you would go for that.

474

00:56:54.570 --> 00:56:58.920

And then if you have any questions, there is a residential provider testing mailbox.

475

00:56:58.920 --> 00:57:02.400

Um, that you can send those questions to.

476

00:57:02.400 --> 00:57:08.489

And then.

477

00:57:08.489 --> 00:57:15.059

Yeah, I think that's on this 1. are there any questions about the testing resources?

478

00:57:17.340 --> 00:57:26.039

Also, BI, weekly or division is has covered 19 update webinars.

479

00:57:26.039 --> 00:57:31.289

And they post those on this same current virus.

480

00:57:31.289 --> 00:57:35.940

Landing page and those are recorded.

481

00:57:35.940 --> 00:57:44.309

And so if you need to if you're interested in hearing what's being said all those recordings are posted here.

482

00:57:44.309 --> 00:57:47.340

You can see, there's quite a few of them.

483

00:57:47.340 --> 00:57:58.019

They also posed Q and AIDS, right?

484

00:57:59.670 --> 00:58:06.360

And I think, and then we'll talk about the monoclonal body infusion, resource and site locator.

485

00:58:12.420 --> 00:58:19.920

Open this hyperlink. Okay, so this is again.

486

00:58:19.920 --> 00:58:25.500

And this is their site locator page.

487

00:58:25.500 --> 00:58:29.550

So, if you're curious of where.

488

00:58:29.550 --> 00:58:33.030

Oh, it's going to take me outside so I'm going to go ahead and hit now.

489

00:58:33.030 --> 00:58:36.420

It also talks about eligibility.

490

00:58:38.130 --> 00:58:43.769

You can click on the map. Oh, I don't want to go outside of the web page.

491

00:58:43.769 --> 00:58:52.679

So, if you click on that, it'll take you there and then you can click on these little buttons here, push pins. I guess it's what you'd call them.

492

00:58:54.570 --> 00:59:02.579

And this is the most updated information that they have on those and body infusion sites.

493

00:59:06.690 --> 00:59:14.400

Any questions and we'll post the links.

494

00:59:14.400 --> 00:59:17.969

And this slide.

495

00:59:17.969 --> 00:59:22.889

Um, with the posting of the, um, Webex today.

496

00:59:34.920 --> 00:59:39.179

Okay, and if we don't have any questions, I'm going to turn it back over to Leslie.

497

00:59:39.179 --> 00:59:44.789

And I believe she is going to talk about.

498

00:59:44.789 --> 00:59:52.980

I'm sorry, variety of things trying to get back to my.

499

00:59:52.980 --> 01:00:04.199

Yeah, no sorry I, she's going to talk about talk a little bit about assistive technology and some other things, and we will also talk about full risk and prevention.

500

01:00:04.199 --> 01:00:12.353

So, and I did drop a couple of those links in that chat, but they will be available. We will make them available along with this, a recorded webinar.

501

01:00:12.655 --> 01:00:24.804

And if you go on our site, you will see all those resources, and you will be able to be taken over to the website to get more information and just real neat. Like, if someone needs.

502

01:00:25.110 --> 01:00:31.230

A lift to go get a vaccine and locate the vaccine through the, through the website and get it. Right it's.

503

01:00:31.230 --> 01:00:38.940

It could be very valuable resource to people and Trisha. I worked on getting information together so that we could share.

504

01:00:38.940 --> 01:00:42.925

Like, a tool kit with the service coordinators so that's been dispersed.

505

01:00:42.925 --> 01:00:57.835

So, when they go in the homes, and do their thing, or if they are going homes with their touching base, they can always, you know, hey, do you need any information about cobra 19 safety measures or vaccines, or what have you? So, anyway, thanks for all that good information. Tricia appreciate that.

506

01:01:01.289 --> 01:01:04.739

And I'm going to share my screen.

507

01:01:05.849 --> 01:01:09.929

Maybe.

508

01:01:14.880 --> 01:01:19.739

Okay, other important information I had a.

509

01:01:21.119 --> 01:01:25.530

Just sort of a hodgepodge of the different things I want to talk about as well as.

510

01:01:25.530 --> 01:01:35.130

Technology 1st, have you all ever heard of the technology 1st initiative and we will have a poll question for that?

511

01:01:37.800 --> 01:01:40.889

Empowering for assistive technology.

512

01:01:40.889 --> 01:01:53.034

The division of developmental disabilities is committed to supporting all individuals with the opportunity to increase their independence through the use of technology. Empowering individuals to use. Technology is important. For many reasons.

513

01:01:53.364 --> 01:01:56.275

Technology can improve quality of life.

514

01:01:56.579 --> 01:02:04.170

Increase independence and privacy provide tools that can oh, am I even sharing my screen? I don't think I am.

515

01:02:04.170 --> 01:02:10.920

We're not just a 2nd rats. I was on a roll there too.

516

01:02:10.920 --> 01:02:15.780

Okay, but you're all patient people and I appreciate it.

517

01:02:17.340 --> 01:02:21.449

Okay, I will pick up where I left up.

518

01:02:24.090 --> 01:02:32.909

Okay, so technology can improve quality of life, increase, independence and privacy provide tools that can increase safety and health.

519

01:02:32.909 --> 01:02:38.400

Reduce costs address the direct care staffing shortage, which we are all very aware of.

520

01:02:38.400 --> 01:02:41.489

A misery is the technology for state.

521

01:02:41.489 --> 01:02:50.130

And if you think someone you support can benefit from assist of technology, please visit our Web page, which I will post in the chat.

522

01:02:50.130 --> 01:02:58.860

There are video links and other information on that page so you can learn more about it that way real look, real user friendly and.

523

01:02:58.860 --> 01:03:07.139

If you don't like to read a lot, the videos are good. So, have you all ever heard of technology? 1st initiative?

524

01:03:15.150 --> 01:03:20.190

And this is just a way to get that information out there. There might be different things that you guys can utilize.

525

01:03:20.190 --> 01:03:24.960

I'm technology 1st or or that your individuals team.

526

01:03:24.960 --> 01:03:29.820

I'm thinking of something right now it could be as much as.

527

01:03:29.820 --> 01:03:34.980

Things that they can utilize to help them with remember to take their medications.

528

01:03:39.989 --> 01:03:45.210

Different things that for hearing impairment visual impairment.

529

01:03:48.960 --> 01:04:01.590

But it's a really good resource, just a few seconds left and we'll see what the results are.

530

01:04:06.329 --> 01:04:20.244

To me, picture things up here. Okay. So, 22 people have 65. no, and then 133 did not answer. Well, now you can say you've heard of it and please definitely explore that side.

531

01:04:20.364 --> 01:04:25.704

I'm going to put that in the chat. How can I sit here? Click over here.

532

01:04:27.929 --> 01:04:35.880

Put that in the chat, so if you want to go and just check it out, it could make someone's life easier.

533

01:04:35.880 --> 01:04:39.449

And maybe make a help a person be more independent.

534

01:04:41.159 --> 01:04:53.519

Okay, I'm going to go ahead and go on and talk about the reliance platform. This is something and Trisha was on a work group for this, but they were trying to find a way to help.

535

01:04:53.519 --> 01:04:59.909

The oversight, or is working for the agencies. Okay. How can we help them with training for with delegations?

536

01:04:59.909 --> 01:05:04.380

And we do have on the reliance platform, I'm going to change my slide.

537

01:05:08.039 --> 01:05:15.659

Okay, so I'm going to show you how this is just what it looks like whenever you actually get to the point, but I'm going to go ahead. I'm going to stop.

538

01:05:15.659 --> 01:05:22.590

Hang on just a 2nd, I'm going to show you how to get there actually. So you can actually look at it and see if that's something you would want to use for.

539

01:05:22.590 --> 01:05:26.909

On delegation, and I'm telling you, we would really appreciate.

540

01:05:26.909 --> 01:05:35.699

Your feedback, because if you guys like it, we'll get more we'll see if we can get more out there. That is an option.

541

01:05:35.699 --> 01:05:39.690

So, let me find my youngest from her.

542

01:05:41.460 --> 01:05:47.579

Okay, thanks for bearing with me.

543

01:05:49.469 --> 01:05:58.590

All right, so we want to go to the page I have that is 1 of my favorites, so I'm just going to click right there.

544

01:05:58.590 --> 01:06:03.989

That's my little Missouri map and then we want to go to the DD landing page.

545

01:06:05.579 --> 01:06:16.590

And go down, and I'll put a direct link in here, but this is just, I don't know, I'm just walking you through it. There's more than 1 way to get somewhere. I guess so now I'm going to go to community supports.

546

01:06:16.590 --> 01:06:24.900

And education and learning, and here we have reliance self registration portal. So I'm going to click on that.

547

01:06:24.900 --> 01:06:31.440

And you don't want to go to the employment support, you want to go down to the content self registration portal.

548

01:06:31.440 --> 01:06:34.710

And click on, go to directly to the portal.

549

01:06:34.710 --> 01:06:42.690

And that does take you away, but that's okay. So my user name.

550

01:06:42.690 --> 01:06:47.550

Don't tell anyone and see and password.

551

01:06:47.550 --> 01:06:58.079

Peak okay, so here's where it brings me to.

552

01:06:58.079 --> 01:07:09.150

And, um, what I'm gonna show you is it will experience scheduled downtime. Oh, that's timed. Okay. So, folks so we have this learning current training.

553

01:07:09.150 --> 01:07:14.610

See, we have them work, Missouri, practice settings, presentation, practiced act.

554

01:07:14.610 --> 01:07:22.860

Fact or fiction, which you guys have no good. You guys know about that or if we don't you shouldn't But anyway, I'm Pro on the go is what I want to show. Yeah.

555

01:07:22.860 --> 01:07:27.809

And see, it says Missouri division of developmental disabilities, custom library.

556

01:07:27.809 --> 01:07:33.150

So this is the start of our library. Okay and if you guys like it, we can expand upon it.

557

01:07:33.150 --> 01:07:43.079

But, um, uh, we have the, uh, Trisha work group decided that they really liked this collecting specimens your urine vs straight cath.

558

01:07:43.079 --> 01:07:48.090

It is an adjunct to like, it could be an adjunct to the training you do with staff.

559

01:07:48.090 --> 01:08:02.550

For delegating this task if you and it and it's up to you, if you want to delegate, you do not have to delegate any task but if it if you use your nursing delegation decision tree, and you find that this is something that you want to delegate.

560

01:08:02.550 --> 01:08:09.599

To, um, staff, then you can if you feel like this supports what you're wanting to instruct, you can use this.

561

01:08:09.599 --> 01:08:19.500

This right here to help, teach, teach about that, and then go through the rest of your delegation, making sure that they know how to complete it that they're.

562

01:08:20.454 --> 01:08:29.784

Well, the flip for it, then medication administration nebulizer. So there's something that can be used to teach someone how to use a nebulizer.

563

01:08:29.935 --> 01:08:44.845

I mean, it's not, they'll of course, it's not the only thing you do when you delegate to someone, you got to make sure that they're competent and then they can that they can perform the task after you instruct them. But

this is just something that if you guys wouldn't mind checking out seeing if you can use it.

564

01:08:45.210 --> 01:08:54.119

And please give us feedback. That would be wonderful. And I, you're probably asking well, how are we going to give you feedback on that? We have been talking about.

565

01:08:54.119 --> 01:09:04.409

We're gonna do the survey after this after today to see what you guys want to see in the future, but we'd also like to send out word in about 6 months.

566

01:09:04.409 --> 01:09:15.569

And just kind of see how you see if there's anything new that came up that you'd like to hear about next year. But also I would like to touch upon that as well and just see if anybody has been utilizing this.

567

01:09:15.569 --> 01:09:19.050

This is a resource and just see if you guys want.

568

01:09:19.050 --> 01:09:22.050

Want us to explore more options for things.

569

01:09:22.050 --> 01:09:27.750

To help with your delegations. So does anybody have any questions about that?

570

01:09:32.430 --> 01:09:37.590

I stopped sharing my screen for a 2nd, because it's distracting. I'm looking all over the place here.

571

01:09:37.590 --> 01:09:42.000

See, any questions there's 1.

572

01:09:42.000 --> 01:09:53.460

Okay, is there any way to merge user accounts on reliable if your agency created credentials for a user and the user also created their own accounts.

573

01:09:55.050 --> 01:09:58.289

Um, I think so, from my head now.

574

01:09:58.289 --> 01:10:05.939

May take your quote I don't know, but I will take your question and name.

575

01:10:05.939 --> 01:10:14.640

And try to figure that out Phil, where says not at this time. So I'm not sure who fill is.

576

01:10:14.640 --> 01:10:23.909

Oh, okay, well, thank you Phil. All right. I can know that. That is a question that's out there. She's my group for rely is.

577

01:10:23.909 --> 01:10:29.460

So, I will just put that I want to copy and paste it on a shown a word doc over here.

578

01:10:29.460 --> 01:10:35.189

So, that I can cause if you're I don't I don't know how that works. Honestly.

579

01:10:35.189 --> 01:10:38.250

Okay, you show them looks.

580

01:10:38.250 --> 01:10:42.659

How can you show us how 1 looks or works for rely? Is yeah.

581

01:10:42.659 --> 01:10:46.199

Okay.

582

01:10:46.199 --> 01:10:51.539

Let me share my screen again. I don't know let's see.

583

01:10:51.539 --> 01:10:55.710

That's great too. Okay. Can you guys.

584

01:10:55.710 --> 01:11:00.119

All right, you should be able to see my screen now. So I want to begin this 1.

585

01:11:03.989 --> 01:11:12.300

I always bypass the blocks if I can.

586

01:11:12.300 --> 01:11:20.369

I'm getting in trouble, so for electing specimens, urine, straight cap.

587

01:11:21.720 --> 01:11:28.260

Brain procedure before you start the procedure collecting a urine specimen via a straight cap.

588

01:11:28.260 --> 01:11:33.060

Your 1st need to ensure this task is within your scope of practice.

589

01:11:33.060 --> 01:11:39.479

Are you guys able to hear that at all? Yes.

590

01:11:39.479 --> 01:11:53.939

Okay, so we'll watch just a little bit of it. We, we don't necessarily have to watch the whole thing, but at least enough to get the gist of it, that was a good recommendation. So, you have the individuals checking your organizations policies and procedures and the physicians order.

591

01:11:55.229 --> 01:12:01.920

Check the person for a latex allergy use and the only text catheter and gloves. If needed.

592

01:12:01.920 --> 01:12:07.260

Gather your supplies, including specimen labels lab requisition.

593

01:12:07.260 --> 01:12:11.159

Plastic biohazard bag for this specimen gloves.

594

01:12:11.159 --> 01:12:14.189

Bath blanket specimen container.

595

01:12:14.189 --> 01:12:17.279

Straight catheter care and straight catheter.

596

01:12:19.020 --> 01:12:23.310

Verify the individual's identity using 2 identifiers.

597

01:12:23.310 --> 01:12:26.609

Explain the procedure and provide her privacy.

598

01:12:26.609 --> 01:12:29.729

Perform hand hygiene and apply gloves.

599

01:12:30.899 --> 01:12:35.130

Will you be performing this procedure on a female or male?

600

01:12:38.159 --> 01:12:41.220

I will say female.

601

01:12:42.390 --> 01:12:49.319

Place the individual in a supine position females should have their knees flexed would have rotated out.

602

01:12:49.319 --> 01:12:53.609

Or be in a sidebar position with the top influx.

603

01:12:53.609 --> 01:12:57.090

He was a bath blanket for privacy and dignity.

604

01:12:57.090 --> 01:13:02.010

Provide parenting care, remove gloves and perform hand hygiene.

605

01:13:03.180 --> 01:13:07.979

Okay, so that gives you a bit of a taste on what that looks like.

606

01:13:07.979 --> 01:13:11.189

As far as utilizing that to help train staff.

607

01:13:11.189 --> 01:13:16.529

Does anybody have any questions about that? I thought I saw something come up in each.

608

01:13:19.920 --> 01:13:24.149

Seamless stop sharing my screen for a 2nd, so I'm not making you all busy.

609

01:13:24.149 --> 01:13:32.460

Let's see as an agency nurse, do we need special admin permissions and our Elias to assign these trainings to staff?

610

01:13:33.750 --> 01:13:39.000

I cannot answer that. Does anybody else have any experience utilizing reliance?

611

01:13:39.000 --> 01:13:46.199

I have not used it from an agency standpoint. However, I can find that out.

612

01:13:50.640 --> 01:13:54.569

But I'm copying and pasting the question onto my word doc.

613

01:13:54.569 --> 01:13:59.250

Okay, let's see.

614

01:13:59.250 --> 01:14:06.449

Someone in the chat says some agencies have their own relies accounts. They cannot access this through their Elias. So they have to set up a new account.

615

01:14:06.449 --> 01:14:11.340

Okay, okay. All right. Thank you for that information. And I appreciate it.

616

01:14:11.340 --> 01:14:17.369

But, yeah, I'll get that. My mind wrapped around it too so that way I can.

617

01:14:17.369 --> 01:14:21.539

Make sure to have that answer because that, you know.

618

01:14:21.539 --> 01:14:29.010

It's available and we want you to be able to use it. See, will there be a type version to use as the delegation for the record?

619

01:14:29.010 --> 01:14:36.630

I don't believe so Tricia might be able to answer that better than myself but I believe.

620

01:14:36.630 --> 01:14:41.159

That you, you would need to create your own.

621

01:14:41.159 --> 01:14:48.270

Is that correct? Trisha? Yeah, the.

622

01:14:48.270 --> 01:14:51.270

The webinars or the, the, on the.

623

01:14:51.270 --> 01:14:54.359

Pro, the Pro long ago. Sorry?

624

01:14:54.359 --> 01:15:01.710

Um, are not really to take the place of the nurse doing the instruction.

625

01:15:01.710 --> 01:15:06.359

Um, so they you would still need to have that documentation.

626

01:15:06.359 --> 01:15:11.579

It's just that it's just a tool for the nurse to use.

627

01:15:12.930 --> 01:15:20.220

Another question is, do support staff need to print a reliable training certificate for the records at the.

628

01:15:26.010 --> 01:15:29.699

No, I think that would be a great. Oh, sorry go ahead with someone saying something.

629

01:15:32.579 --> 01:15:35.939

Okay, so again that would.

630

01:15:35.939 --> 01:15:38.970

It's just a tool that the nurse uses.

631

01:15:38.970 --> 01:15:47.250

So, she would still have to complete the training and the training log and the delegation sheet.

632

01:15:48.539 --> 01:15:53.010

Another is so on the reliable learning for the med classes.

633

01:15:53.010 --> 01:15:57.899

Is there not any training 1 there? I was under the impression there is.

634

01:15:58.795 --> 01:16:13.704

There is any then told now by oh, that is not a teaching slash training only testing. I see that there is teaching for other things. Since the covert spike. I feel like there needs to be a teaching on there.

635

01:16:15.750 --> 01:16:22.020

That's a very good question and a very good point. I will go to that.
Hang on just a 2nd.

636

01:16:22.020 --> 01:16:26.520

And I will share my screen in just a 2nd. Okay.

637

01:16:26.520 --> 01:16:36.385

My share, so the guidelines have not changed as far as the information
that was released, whenever, you know, for the pandemic.

638

01:16:36.385 --> 01:16:42.385

And since we're kind of, you know, we've been in a state of emergency and
such and it's not always safe to have everybody in a room.

639

01:16:42.720 --> 01:16:47.819

So, if you are needing to do, and I secured anything yet, hang on.

640

01:16:47.819 --> 01:16:55.529

So, if you're needing to do it updates for level 1, many hang on a 2nd,
her.

641

01:16:55.529 --> 01:17:05.069

We still have in reliance medication administration for unlicensed
paraprofessionals.

642

01:17:05.069 --> 01:17:09.420

They can take that further update if if if.

643

01:17:09.420 --> 01:17:18.029

Get abide by and make sure just mind your piece and cues and make sure
that you're utilizing it for due to.

644

01:17:18.029 --> 01:17:22.380

cobit, 19 and 1st safety measures.

645

01:17:22.380 --> 01:17:28.920

Not not just out of convenience cause there's just nothing like a
classroom honestly.

646

01:17:30.295 --> 01:17:43.944

At this time we are working on a new, we are working on a new medic curriculum, and the medi curriculum will be partly in her reliance. And then the hands on stuff will be with a certified instructor and it is going to be updated.

647

01:17:43.944 --> 01:17:51.414

And hopefully it'll be out next year, but anyway, we'll keep you guys updated on the progress of that when we can but.

648

01:17:51.750 --> 01:18:04.494

I'm super excited. I've been getting to work on that project and it's gonna be really good. I've been a level 1, man, 80 instructor for a few years now, and they've even taught within the past few years. Even in a pinch.

649

01:18:04.494 --> 01:18:12.925

I taught during the pandemic when all the nurses, there was an outbreak at a facility and nurses were tied up, trying to do their thing. And so I.

650

01:18:13.350 --> 01:18:20.729

In a gigantic room wearing a mask with people spaced out, just like 4 students and.

651

01:18:20.729 --> 01:18:29.850

Yeah, it's a reminder that that level in midday curriculum does need updated, but we're, we're working on that and I'm seeing I've seen the light at the end of the tunnel.

652

01:18:29.850 --> 01:18:32.909

So, um, anyway, I digress.

653

01:18:33.444 --> 01:18:46.345

Let's see, here we have interim damage, medication, aid, certification, online exam, due to code 19 pandemic. So, yes, they can do a virtual class with a teacher instructing, like, just pretend like your all my students out there.

654

01:18:46.345 --> 01:18:54.175

I've taught this way to oil students out there and we can interact and go through the lessons. Well, instead of doing a paper test.

655

01:18:54.449 --> 01:18:59.909

You can do this online test right here and or the student. Excuse me.

656

01:18:59.909 --> 01:19:05.489

So that is an option. Definitely do you know, since it just.

657

01:19:05.489 --> 01:19:08.699

It's just hopefully 1 way to make things.

658

01:19:08.699 --> 01:19:14.670

Safer and and get the job done, at least because we don't want to sacrifice.

659

01:19:14.670 --> 01:19:18.720

Quality, but we want to make sure we can still do what we need to do. Right?

660

01:19:24.119 --> 01:19:38.100

This could be a great resource and delegations. Okay. I utilize it for mentor. Okay good. And I've used it too. I've done the paper, and I've done that 1 and.

661

01:19:38.100 --> 01:19:46.050

And, I mean, I think the test on there is fine for Elias 1, Medicaid. How do 1 complete.

662

01:19:48.390 --> 01:20:03.000

Oh, the update, uh, they, they do, they complete this, the mad administration for unlicensed care professionals further to your update and then if you're needing someone to watch them, do their hands on part, that can be a.

663

01:20:03.000 --> 01:20:06.300

A nurse that works for the agency.

664

01:20:06.300 --> 01:20:19.829

The new curriculum, we're still working out the details for that that's on down the road, but we're going to have people nurse instructors, take it force and then be able to do the hands on stuff.

665

01:20:19.829 --> 01:20:22.829

But, yeah, through the, um, covered.

666

01:20:22.829 --> 01:20:34.739

19, I'm not thinking of the right word, but kind of the exceptions, or whenever we're allowing the agency nurse can watch them perform their practical portion for med certification.

667

01:20:37.829 --> 01:20:43.319

Will it be on our lives only on damage or can it be set up on provider's reliance access?

668

01:20:43.319 --> 01:20:48.270

I don't know.

669

01:20:49.590 --> 01:20:57.630

I'm just not a very tacky person to know all that stuff, but I'll take your question. We'll have. We'll definitely have Q and a, this will be part of it.

670

01:20:57.630 --> 01:21:01.380

I just I apologize I'm just not very good at that.

671

01:21:01.380 --> 01:21:07.800

It was relays only and not paper test. Okay they can use either, either paper or.

672

01:21:09.180 --> 01:21:14.880

Reliable.

673

01:21:18.989 --> 01:21:24.960

See, with the level 1 many changes won't be able to be the instructor.

674

01:21:24.960 --> 01:21:31.739

That is something we'll consider we have there are there is a CSR that we need to look at and alter.

675

01:21:31.739 --> 01:21:39.810

There's something else that dictates and another spot about it being an RN.

676

01:21:39.810 --> 01:21:47.100

But we're going to work through that. I've got, I've gotta get I'm going to get different people to work on a work group on that so that we can get things.

677

01:21:47.100 --> 01:21:51.029

To make sense and how we want it and update things.

678

01:21:52.050 --> 01:22:03.960

Let's see. So, so on the practice on part of training, do we need to have a participant sign or virtual.

679

01:22:03.960 --> 01:22:11.850

Oh, that's all something that's covered in our on our website on the where Trisha showed you the covert 19.

680

01:22:11.850 --> 01:22:16.800

On page, it has a section for what to do with level. 1 made med aid.

681

01:22:16.800 --> 01:22:25.470

During the pandemic, and also and nothing Nothing's changed otherwise as far as getting people certified.

682

01:22:25.470 --> 01:22:32.970

With the level 1 met 8, we still utilize the DHS curriculum and follow their rules.

683

01:22:35.399 --> 01:22:42.869

See, we have 1 that says what the level 1 many changes will an lpn be able to be the instructor.

684

01:22:42.869 --> 01:22:48.539

Oh, that's where I was going with the CSR we're going to be working on that.

685

01:22:48.539 --> 01:22:54.270

That's all I can say for the future, we're going to have work groups and work on the CSRs because there's some language in there that says.

686

01:22:54.270 --> 01:22:58.319

For our end to for it to be an orient, however.

687

01:22:58.319 --> 01:23:03.210

Yeah, it really doesn't necessarily have to be.

688

01:23:03.210 --> 01:23:08.789

So, we're going to try to get all that updated because we want it modern and we want to up to date. We want it the best.

689

01:23:08.789 --> 01:23:18.420

Okay, and let's see, I'll just take a few more questions because we still have a little bit to go through. Let's see.

690

01:23:21.479 --> 01:23:30.720

Since testing oh, does testing online? Give the student an immediate certificate or is there a wait still a waiting period to receive proof of certificate?

691

01:23:30.720 --> 01:23:39.000

Um, I, I just don't I haven't used it for a while, so I'm not really sure. So if you use the reliable has anybody used the reliance.

692

01:23:39.000 --> 01:23:42.060

Um, platform recently for testing people.

693

01:23:42.060 --> 01:23:46.949

With the level 1 med aid and so the paper copy, have they done that recently?

694

01:23:50.010 --> 01:23:53.039

And I apologize, I just haven't, I haven't talked for a little bit.

695

01:23:53.039 --> 01:23:56.789

It was, it seems to be immediate.

696

01:23:56.789 --> 01:24:01.619

It's an immediate search a print. Oh, yay. Thank you. Thank you.

697

01:24:01.619 --> 01:24:08.369

Answering that. Okay Thank you. Appreciate it. Guys speaking up or chatting up.

698

01:24:08.369 --> 01:24:11.489

Okay.

699

01:24:13.800 --> 01:24:25.739

Okay, but we still have some points. I'll also, but we still have a process it at the regional office to get their level 1 med aid certificate and then don't forget the practical practical piece because they do need to be.

700

01:24:25.739 --> 01:24:29.670
Make sure they can do all the steps.

701
01:24:31.439 --> 01:24:36.569
Okay, all right more on that just kind of verifying what we said.

702
01:24:36.569 --> 01:24:41.069
Practically a stone person yes. True. Yes that's that's true.

703
01:24:42.840 --> 01:24:50.010
All right great questions and feedback. I love the interaction. Thank you guys.

704
01:24:50.010 --> 01:24:56.430
Now, let's see for full class of practice capacity, completed passing.

705
01:24:56.430 --> 01:25:05.729
Oh, yeah, definitely. Yeah. Yeah. There there's still the need for the practice them. Yes.

706
01:25:05.729 --> 01:25:12.479
And in person, I don't know how he would simulate that. That's something. I just don't know. There's just nothing like.

707
01:25:12.479 --> 01:25:19.649
You know, having someone there and just making sure you're doing a hands on stuff, right? It's just a very important task.

708
01:25:20.005 --> 01:25:30.475
Okay, so I'm going to go ahead and move on. And if you have other things, go ahead and drop it in the chat, as we said earlier, we're going to post the Q and a on the on the website along with our recording.

709
01:25:30.774 --> 01:25:43.914
And then if any of your colleagues or people you work with, haven't weren't able to catch any of this, hopefully you guys have found it useful and hopefully they'll be able to watch it and gain some kind of take away something at least that they've learned.

710
01:25:44.220 --> 01:25:52.350
You know, in order to help out, because, I mean, it's a big job. We take care of people's lives. So any, any help or.

711

01:25:52.350 --> 01:25:58.170

You know, feedback we want to make sure we can do the best we can and.

712

01:25:58.170 --> 01:26:02.159

So, I'm going to talk about.

713

01:26:02.159 --> 01:26:05.369

Hang on. Okay.

714

01:26:05.369 --> 01:26:09.899

Let me show my slides. Okay no, I'm not.

715

01:26:09.899 --> 01:26:17.189

Eva.

716

01:26:21.090 --> 01:26:33.600

All right false false can be a very serious thing. Have you ever phone line as an adult? I mean, as a kid yeah. Okay. But do you remember if you were sore or how you felt afterward?

717

01:26:33.600 --> 01:26:40.890

Anecdotally, I was jogging in my driveway. The gravel is loose. I turned and fell.

718

01:26:40.890 --> 01:26:44.789

Got right back up, but, you know, a day or 2 later, I couldn't get off the couch.

719

01:26:44.789 --> 01:26:48.449

And that was when I was about 10 years younger.

720

01:26:48.449 --> 01:26:53.279

So, you know, it's painful it can be damaging.

721

01:26:53.279 --> 01:27:01.079

It can be very painful, cause damage to a person that is not and it may not even be readily apparent. Like, it was fine right after. But it started hurting days later.

722

01:27:01.079 --> 01:27:14.489

And then we have people that we take care of, that could be the same thing. Maybe they can't even Express, like, utilize words to express how

they're feeling or what's going on. So, then that, you know, it's very puzzling sometimes to find out what's.

723

01:27:14.489 --> 01:27:22.225

What's happening many of the people we serve also may have osteoporosis which can lead to poor outcomes for those individuals.

724

01:27:22.494 --> 01:27:30.055

If we are not identifying risk for following or trying our best to decrease the occurrence like really what we really need to embrace.

725

01:27:30.300 --> 01:27:43.649

Any more is just prevention prevention before yes. Something happens before an accident happens before a disease process happens. Really preventions the best way. And I know it's not always possible, but.

726

01:27:43.649 --> 01:27:58.435

That is just something we need to keep in our minds and we are currently we, as in state Kelly, or clinical operations team are currently working on our fall tracking and follow up and measuring thresholds in order to prove our quality of services.

727

01:27:58.614 --> 01:28:00.805

And in order to better.

728

01:28:01.199 --> 01:28:06.720

See, what's going on to alert regional offices so they can alert you all.

729

01:28:06.720 --> 01:28:12.420

As to things that we're noticing, because it's when you have a different perspective, like statewide or.

730

01:28:12.420 --> 01:28:18.930

Or what have you, you get a different perspective, and you can cut and there's things we're here to help support you all.

731

01:28:18.930 --> 01:28:29.909

So, we're excited about working on that so your regional office may reach out to you if there are trends or increases noted, which they may already be doing that and that's that's okay.

732

01:28:31.529 --> 01:28:41.010

Okay, I don't know. Oh, good. It looks good on my big screen. This graphic I hope you can see it. Okay this data is collected through our event reporting process.

733

01:28:41.010 --> 01:28:49.920

And basically, it is showing the number of falls per quarter in orange and blue. It is the total number of different individuals who have fallen.

734

01:28:49.920 --> 01:28:57.390

So, there are over a 1000 people who fell from quarter to quarter. I mean, it hasn't changed a lot.

735

01:28:57.390 --> 01:29:01.350

Um.

736

01:29:01.885 --> 01:29:14.574

Many of the people as you can see the numbers between the orange and the blue. I mean, there's quite a bit. There's okay. Like this quarter here. 1152 people fell, but there were 1882 falls reported. So that means a lot of people felt more than once.

737

01:29:18.359 --> 01:29:28.979

And in some of the data we looked at, and there's a person that felt like 11 times in 1 quarter. That's that's a that's a lot there's something going on there that needs to be looked at.

738

01:29:28.979 --> 01:29:39.029

See, as you can see this last that last quarter, which is fiscal year 2021 is my little pointer.

739

01:29:39.029 --> 01:29:48.600

Clear Twitch and quarter 4 so there's that that's last quarter and that's April through July of this year and we oh, we had over 2000 falls.

740

01:29:48.600 --> 01:29:59.159

Whereas, see, it's been kind of 1800 that down a little bit there, but then okay. Over 2000 now and so think about it this way that's over 2000 times that a person.

741

01:29:59.159 --> 01:30:02.005

Uh, Phil, and may have a fall.

742

01:30:02.005 --> 01:30:05.005

That could have detrimental effects from it,

743

01:30:05.185 --> 01:30:05.364
like,

744

01:30:05.364 --> 01:30:06.385
hitting their head,

745

01:30:06.774 --> 01:30:09.564
which could lead to a brain bleed broken bones,

746

01:30:09.564 --> 01:30:12.024
which are sometimes difficult to heal,

747

01:30:12.444 --> 01:30:17.484
depending on the person's other medical diagnoses and then medications
can make an impact on healing.

748

01:30:17.694 --> 01:30:24.774
And then sometimes people are not a candidate for surgery so say they
fall in and break a hip. Maybe they're not a candidate for surgery.

749

01:30:25.199 --> 01:30:31.680
And then, what kind of outcomes do they have? I mean, they may die. They
may be just incredibly.

750

01:30:31.680 --> 01:30:38.550
Permanently disabled from that fall. Sometimes they suffer with
unmanageable pain as a result.

751

01:30:38.550 --> 01:30:44.939
Especially if they can not use words to communicate, and that's just
that's just really difficult. And whenever that happens.

752

01:30:44.939 --> 01:30:53.310
They're paying may be misinterpreted as an adverse behavior so they're
given psychiatric medications instead of getting to the root of the
problem.

753

01:30:53.310 --> 01:30:58.109
Sometimes false can be directly linked to the start of a chain of events
that leads to death.

754

01:30:58.109 --> 01:31:09.600

Unfortunately, so I want to bring this up also we're in fiscal year, 2022, quarter 1 we still have 1 and a half months to go and we are already.

755

01:31:09.600 --> 01:31:12.810

And 1552 fold.

756

01:31:12.810 --> 01:31:17.729

With over 900 people who were involved, so.

757

01:31:17.729 --> 01:31:30.569

Within a month and a half to go. So we'll see how that goes. I just it's kind of the trends increasing, so we'll, we're gonna we're going to work together, though right? We're gonna work together and and try to try to help try to help people.

758

01:31:30.569 --> 01:31:40.619

You know, decrease full risk. So why should we even focus on falls? Well, besides the obvious we care, we don't want these people to suffer needlessly. We don't.

759

01:31:40.619 --> 01:31:45.029

You know, we just don't want them to have all these problems. It's just, you know.

760

01:31:45.029 --> 01:31:50.520

It's just little decrease their quality of life, but it is in the rule book.

761

01:31:50.520 --> 01:31:56.099

This is another thing it's in our rule book. So CMS, 19th and 15 C assurance.

762

01:31:56.099 --> 01:32:02.729

State demonstrates it is designed and implemented and effective system for assuring waiver, participant, health and welfare.

763

01:32:02.729 --> 01:32:16.194

And then we have some assurances that go with that the state demonstrates that an incident management system is in place that effectively resolves incidents improvements, further similar incidents to the extent possible. We do have our event reporting.

764

01:32:16.404 --> 01:32:23.963

And that's where we all come in where we effectively resolve incidents and prevent further similar incidents.

765

01:32:24.088 --> 01:32:30.719

As much as we can, we're not always going to be able to prevent stuff like this when we can't wrap people up and bubble wrap.

766

01:32:30.719 --> 01:32:40.198

Or, make him not, you can't sit, you can't move you can't go anywhere. I mean, we still have to everyone has to be able to live and and do things and have their dignity of risk. But.

767

01:32:40.198 --> 01:32:43.439

And we got to try as best we can.

768

01:32:43.439 --> 01:32:53.548

So another sub assurance, the state establishes overall health care standards and monitors those standards based on the responsibility of the service provider has stated in the approved waiver.

769

01:32:53.548 --> 01:32:59.668

So, yeah, there's a lot of lingo that talks about health and welfare of the individuals.

770

01:32:59.668 --> 01:33:03.479

In person centered planning process is very vital.

771

01:33:03.479 --> 01:33:18.234

To ensure that the provider here is 9 dash 5.206 the provider shall ensure that patterns and trends of reportable events specific to a consumer are included and addressed in

772

01:33:18.234 --> 01:33:22.373

the consumer's personal treatment plan upon approval by the planning team.

773

01:33:43.738 --> 01:33:47.038

To help, you know, to help prevent these falls.

774

01:33:47.038 --> 01:33:50.219

We're in it together guys, we are in it together.

775

01:33:53.279 --> 01:34:00.059

Okay, the solvent definition that this is what we utilize in order to determine what we report.

776

01:34:00.059 --> 01:34:06.118

Apparent, and this is so twisty saying I'm not mean it's twisted or whatever, but.

777

01:34:06.118 --> 01:34:06.779

Um,

778

01:34:07.404 --> 01:34:07.673

yeah,

779

01:34:07.944 --> 01:34:08.333

it just,

780

01:34:08.363 --> 01:34:09.264

it's just,

781

01:34:09.293 --> 01:34:19.944

it's fun to read the apparent witness not witnessed or reported unintentional sudden loss from a normative position for the engaged activity to the ground floor or object,

782

01:34:19.944 --> 01:34:22.764

which has not been forcibly instigated by another person.

783

01:34:23.099 --> 01:34:28.588

So, I'm walking along and I fall on my desk.

784

01:34:28.588 --> 01:34:36.658

If Joe pushes me, I fall, it's it's not really considered a fall. It can because there is something else, but I fall.

785

01:34:36.658 --> 01:34:40.529

So, we have a lot of those that happen witnessed, or I witnessed.

786

01:34:40.529 --> 01:34:47.219

The state QV team looks at false statewide as I said earlier, we look for trends and things that stand out related to falls.

787

01:34:47.219 --> 01:34:50.368

Maybe we see 1 region who has had an increase in falls.

788

01:34:50.368 --> 01:35:01.314

I mean, we're getting the ability to more easily drill down further to identify what individuals are having falls. And then we can work with our teams. We can work with regional office teams.

789

01:35:01.554 --> 01:35:06.113

You know, we can all work together to to help where that where the falls are identified.

790

01:35:08.219 --> 01:35:17.429

So that's just exciting. I love technology in that way that we're getting to, where we can get reports and drill down quicker to say, oh, they need our help.

791

01:35:17.429 --> 01:35:21.809

Cool. All right pull question number 10.

792

01:35:21.809 --> 01:35:25.378

Are you notified when someone has a fall or falls.

793

01:35:25.378 --> 01:35:30.208

And you guys don't hesitate to answer.

794

01:35:30.208 --> 01:35:39.359

It's okay, either way if you feel like you want to work on your processes based on on what you learned today or just in general.

795

01:35:39.359 --> 01:35:43.259

Definitely communicate them in your amongst your agency.

796

01:35:50.753 --> 01:36:00.594

What I also mentioned is important that, you know, your agencies policy in regard to fall prevention and then what kind of follow up they do when someone falls. That's a very important thing.

797

01:36:04.198 --> 01:36:09.719

I guess they could leave that up there since I'm sharing my screen got 39 seconds left.

798

01:36:24.569 --> 01:36:31.948

Eva, okay.

799

01:36:33.418 --> 01:36:45.958

See, what comes up? Oh, we have 79 that say, yes, they're notified 11. no and 122 don't answer and that's fine. All right. Thanks. That's kind of fun. Kind of. Interesting.

800

01:36:47.578 --> 01:36:53.668

All righty risk factors for falls. You probably.

801

01:36:53.668 --> 01:37:00.149

Home by heart as nurses, but I'll go review some, just to kind of refresh your brain on these things.

802

01:37:00.149 --> 01:37:10.738

And potential health factors relates to fall risks are seizures muscle. We is walking in balance problems. Orthostatic hypotension. That is a big 1 and sometimes we go and detected.

803

01:37:10.738 --> 01:37:18.298

Or vision, arthritis, stroke, incontinent diabetes, Parkinson's disease, or other neurological conditions.

804

01:37:18.298 --> 01:37:28.948

Dementia fear of falling certain medications, such as anti convulsions, antidepressants, anti psychotics.

805

01:37:28.948 --> 01:37:40.469

anticholinergics list goes on and on, you know, that can just and a lot of people are on several meds that interact with each other. So they're given more meds to cover up the side effects.

806

01:37:40.469 --> 01:37:44.158

Never ending cycle anyway, a lot of that can lead to falls as, you know.

807

01:37:44.158 --> 01:37:56.248

Let's see, maybe they'll start falling when they are coming down with something like an acute illness like that. We can weaker. Perhaps if they get a UTI or some kind of a lung infection, they start.

808

01:37:56.248 --> 01:37:59.519

We get, we can start from 1 or they get dizzy info.

809

01:37:59.519 --> 01:38:07.559

Environmental factors that would affect, or would that would be a risk for falls would be.

810

01:38:07.559 --> 01:38:12.569

D*** or lose or faulty or broken.

811

01:38:12.569 --> 01:38:16.259

Oh, shoot. I, for some of my screen 1.

812

01:38:16.259 --> 01:38:21.689

Okay, let's see, you lose wheelchair, brakes, better chairs.

813

01:38:21.689 --> 01:38:33.448

With the will Lena rolling chairs, or even office chairs beds that with wheels on them if they're not locked, they can be a fall hazard clutter on the floor as, you know, liquid stilled on the floor.

814

01:38:33.448 --> 01:38:37.529

Uh, even flooring furniture, too low, or too high from the floor.

815

01:38:37.529 --> 01:38:44.338

Oops, okay. So preventing falls utilize assistive technology.

816

01:38:44.338 --> 01:38:50.279

System technology, such as motion syncing lights options. There are options for insight and.

817

01:38:50.279 --> 01:38:53.368

Door motion sensing lights.

818

01:38:53.368 --> 01:38:57.658

Stairs like lighting kits.

819

01:38:57.658 --> 01:39:04.769

Personal emergency response systems that detect falls and alerts, caregivers or emergency response.

820

01:39:04.769 --> 01:39:10.198

Call centers are 911 that's available. That's got a monthly fee, but.

821

01:39:10.198 --> 01:39:17.219

That it could be something that would help, assess your environment for safety. And I have a link that I'm going to put in the chat.

822

01:39:17.219 --> 01:39:22.618

And it's just a generic checklist for environmental kind of checks.

823

01:39:22.618 --> 01:39:27.149

I was trained a long time ago as a nurse aide.

824

01:39:27.149 --> 01:39:37.859

Keep everything make sure the floor is clear, make sure you wipe up skills make sure this, that, in the other, too, just make sure the environment safe because, you know, when you're taking care of geriatric patients.

825

01:39:37.859 --> 01:39:49.583

Well, that's 1 thing. They teach you in the nursing home, and I'm just carry that with me. I've been fortunate that I've had that carry with me and, uh, so I feel like if we can ingrain that in people's minds to be pay attention to the environment.

826

01:39:49.854 --> 01:39:52.913

And gear them to say, look for fall hazards.

827

01:39:53.248 --> 01:39:57.658

I just think that would read just really great. Let's see. 1 thing.

828

01:39:57.658 --> 01:40:01.469

Okay, and I just said that okay for monitoring or.

829

01:40:01.469 --> 01:40:05.128

I think safe environment for for.

830

01:40:06.809 --> 01:40:14.939

I'm healthy individual to discuss with a primary care provider regarding any changes in their health and ability to emulate. So, if they're having issues.

831

01:40:14.939 --> 01:40:26.873

You know, don't hesitate to reach out to their healthcare provider because there may be some supports that they need. Maybe they do have a an acute illness or a short short term illness and chronic illness is exacerbated and they're weaker and falling.

832

01:40:26.873 --> 01:40:32.543

Now, maybe they won't need long term supports to help, keep them from falling, but maybe they just need some short term assistance.

833

01:40:32.543 --> 01:40:44.033

Some perhaps a wheelchair, even, I mean, it's just everybody's different, but it doesn't necessarily mean it has to be long term just until they can get their strength back end and be strong enough to be able to walk.

834

01:40:44.878 --> 01:40:49.319

You know, without having to worry about falling 1 thing.

835

01:40:49.319 --> 01:40:52.319

Hey.

836

01:40:52.319 --> 01:41:03.088

Help that person has their ambulatory, and they have seizure suddenly, and they will fall into a seizure and hit their head. Just that's.

837

01:41:03.088 --> 01:41:08.668

It's, it's, it's a tough situation, because you want to keep them safe, but you don't want to force anybody to have to sit down all the time.

838

01:41:08.668 --> 01:41:22.259

So, check with the primary care provider regarding the individual's recommended activity level, including exercises, some exercises may assist for strengthening muscles and improving balance, but check with the healthcare provider. Definitely.

839

01:41:22.259 --> 01:41:28.319

Another link I would like to put in the chat is evident evidence. Baseball prevention programs.

840

01:41:28.319 --> 01:41:39.958

Which it's a website, and it's got a list of them what I'm going to use the website list, but it's just got different things that you could possibly look into to see if that could help.

841

01:41:39.958 --> 01:41:43.019

A person maintain.

842

01:41:43.019 --> 01:41:47.548

Or even get stronger so that they have a decreased a risk for falls.

843

01:41:47.548 --> 01:41:54.899

Check with your primary care provider regarding possible, prescribe therapies or adaptive equipment that may assist.

844

01:41:54.899 --> 01:42:01.349

If a system with keeping a good eye health, support the individual to senior optometrist.

845

01:42:01.349 --> 01:42:06.868

Or a, and follow up on any change regarding their vision.

846

01:42:06.868 --> 01:42:14.219

Seems like, I knew of someone way back that started falling and that's what they figured out was going on. And I was so proud of them for figuring it out.

847

01:42:14.219 --> 01:42:19.408

So, cool, because, you know, then they didn't didn't slap on another man. You got the.

848

01:42:19.408 --> 01:42:31.769

You know, person taking care of got supports that they needed. Okay. Is this the individual to discuss with their primary care provider and pharmacist the prescribe medications and any potential adverse effects that could increase the risk of falls?

849

01:42:31.769 --> 01:42:44.158

Which is difficult, but hopefully, as time goes on, we'll help people feel more secure about being able to talk to their primary care provider about stuff about things in that nature.

850

01:42:44.158 --> 01:42:48.838

Sometimes it's difficult, but we're here to help support, you.

851

01:42:50.788 --> 01:42:56.908

So, repeated falls, um, that does occur if the person has had.

852

01:42:56.908 --> 01:43:04.469

Falls or even 1 fall with the potential for more as the person's team met to determine what strategies will prevent the falls.

853

01:43:04.469 --> 01:43:13.439

If they have met, then, have they implemented the strategies that they decided on, like, environmental checks or consult? For example like.

854

01:43:13.439 --> 01:43:25.583

This is just the scenario, but we have good intentions that our team meets or like, we're going to do this this and this is awesome and we're going to help this person and then whenever real go our separate ways, like, the implementation piece doesn't happen.

855

01:43:25.613 --> 01:43:34.583

Like, we anticipated it too, or something falls through the cracks. So that's 1 important thing. Make sure you're implementing. What all your awesome ideas to help this person.

856

01:43:34.948 --> 01:43:44.729

If if the person's in need of a console related to someone who keeps falling oh, if you already, if you want to talk to another, another nurse.

857

01:43:44.729 --> 01:43:54.323

I reach out to your regional office for a consultation to see if there's anything else maybe pick their brain pick other nurses brains. That's just a blessing.

858

01:43:54.323 --> 01:44:08.363

I have when I can work with other nurses and be able to bounce ideas off of them, because it's just it really helps because you can't none of us know everything and just by talking things through it really helps to be able to come up with solutions.

859

01:44:09.054 --> 01:44:16.613

Let's say, but most of all make sure that you have to make sure the strategies that you come with. Oh, you come up with the implement.

860

01:44:16.859 --> 01:44:29.394

Artifacting implemented and consistently making a goal for that person and the people supporting them to know about the risk for falls. So everybody hopefully, I know staff, turnovers, hard, but just try to. Hey, this person can fall.

861

01:44:30.113 --> 01:44:36.083

Whenever they're walking outside on unstated ground, make sure you're with them or you're watching her and helping them.

862

01:44:36.389 --> 01:44:44.519

So you make sure that your plans for implementation are okay with the individual, and that they are in agreement and willing to take the actions you set forth.

863

01:44:46.493 --> 01:44:58.493

I knew a guy who really could have benefited from a walker. He uses 1 now, but not for years he did not want to use it. He does finally now, but we had to think of all kinds of other ways to support them and help him.

864

01:44:59.453 --> 01:45:03.173

Keep him from falling and he was an active guy he walked around, but he.

865

01:45:03.953 --> 01:45:14.003

He had falls, I'm just going to kind of leave you with this here. If the person is still falling, go back to the drawing board, it's not done with just a team meeting.

866

01:45:14.003 --> 01:45:19.014

You got to really make sure that your plans are implemented that people are.

867

01:45:19.378 --> 01:45:24.569

Following through, and I know it's hard. I know it's tough out there, but.

868

01:45:24.569 --> 01:45:30.658

But those are just some things that you can think about and take back and see if that can help you.

869

01:45:30.658 --> 01:45:36.418

With your with your people oh and resources that I have, I will put.

870

01:45:36.418 --> 01:45:42.569

The chat incidence and prevention of falls. We have observed aside acts, which.

871

01:45:42.569 --> 01:45:56.248

I don't know, we're reviewing that still on our call and then, um, this is the evidence baseball prevention programs and the generic fall environmental risk assessment. I'm going to put all those in the chat for you.

872

01:45:56.248 --> 01:46:06.748

I'm going to stop sharing the screen and I worked up a sweat there yakking at you. Does anybody have questions or.

873

01:46:06.748 --> 01:46:09.899

I can read some of them. Sure. Thanks.

874

01:46:09.899 --> 01:46:21.899

If you have someone with extensive fall behaviors, however, cannot get, or I'm sorry extensive fall history however, cannot get PT and or not a good candidate.

875

01:46:21.899 --> 01:46:30.088

Had Neuro work up however, not a good candidate for most testing specialists have been denied by insurance.

876

01:46:30.088 --> 01:46:33.748

Those tough cases.

877

01:46:33.748 --> 01:46:46.463

I'll just speak a little bit to it and then Trisha and then Michelle, if you're hey, you're still on our panel, if you guys have anything to add to that they do. I don't know. This is something I should probably put in the chat as well.

878

01:46:46.673 --> 01:46:54.024

But Missouri Echo, it's like an outreach and different people like all of us, anyone can join in you're all out.

879

01:46:54.293 --> 01:46:54.743

Well,

880

01:46:54.743 --> 01:47:02.844

I'm an audience to but they have a panel of people who are experts who have invested interest lots of knowledge,

881

01:47:02.904 --> 01:47:07.073

and you can post cases on there of people who you're just having a hard time,

882

01:47:07.253 --> 01:47:08.064

trying to figure out,

883

01:47:08.064 --> 01:47:09.054
maybe medications,

884
01:47:09.054 --> 01:47:12.953
trying to figure out their falls just different things of that nature,

885
01:47:13.974 --> 01:47:19.554
and it's got expert people that put their minds together and try to help help.

886
01:47:19.554 --> 01:47:30.654
You figure out a plan if he's exhausted other ideas. And that's 1 way that I've learned a lot from that. And they have a variety. They have.

887
01:47:30.958 --> 01:47:36.809
Autism intellectual development disabilities they even have a coated wine.

888
01:47:36.809 --> 01:47:41.189
That I'm going to find that website and put it in there. If you guys are interested in that.

889
01:47:41.189 --> 01:47:46.048
No, I don't know Tricia, if you have any thing to add to that.

890
01:47:46.048 --> 01:47:51.538
From your experience of the regional office.

891
01:47:52.918 --> 01:47:56.248
If you with the echo.

892
01:47:56.248 --> 01:48:03.238
No, if you have someone with extensive, full history, however, you cannot get P. T. and or not a good candidate.

893
01:48:03.238 --> 01:48:09.538
Had they had a Neuro workup? However, not a good candidate for most testing.

894
01:48:09.538 --> 01:48:15.298
Specialists have been denied by insurance I guess basically what they're asking is, what would you.

895

01:48:15.298 --> 01:48:26.128

Well, 1st off, I'm not at the insurance person, so I can't speak to the insurance piece of it.

896

01:48:26.128 --> 01:48:31.139

Testing 1, we always have to make sure we pull in.

897

01:48:31.139 --> 01:48:43.918

Um, the Guardian and, um, the primary care physician on that, because sometimes, you know, the, the risk of not worth the test, you know, you have to raise the risks and the benefits.

898

01:48:43.918 --> 01:48:49.948

And I think that's with, with most things with some of our individuals, you know.

899

01:48:49.948 --> 01:48:53.038

May require sedation for dental work or.

900

01:48:53.038 --> 01:48:58.259

Pap smear mammogram or something like that. So.

901

01:48:58.259 --> 01:49:02.368

I'm not sure I'm on the P. T. O. T. side.

902

01:49:02.368 --> 01:49:07.798

Um, what what would be denied.

903

01:49:07.798 --> 01:49:16.139

As far as insurance goes, I do know that, um, several individuals on my caseload have had, um, P. T. O. T.

904

01:49:16.139 --> 01:49:20.038

Or, at least a temporary.

905

01:49:20.038 --> 01:49:32.099

Time so I'm not sure about the insurance piece of that. Another question is, can station in the order of P. T. O. T. or speech therapy.

906

01:49:35.219 --> 01:49:38.338

That's a good question. They are there for consulting.

907

01:49:38.338 --> 01:49:44.009

I don't see why they couldn't, but I don't either. Yeah.

908

01:49:45.179 --> 01:49:48.809

Oh, my.

909

01:49:48.809 --> 01:49:53.189

I'm still listening to I'm putting my stuff in here another.

910

01:49:53.189 --> 01:49:58.109

Thing we have is we have to do empties on falls that are basically behavioral.

911

01:49:58.109 --> 01:50:10.253

I easing themselves from bad or chair to the floor than calling for how these are then included in the false statistics. We address them as behavioral, but they are included in the stats.

912

01:50:10.583 --> 01:50:17.573

We asked to have this included in the behavioral and not a fall, but it was denied.

913

01:50:29.908 --> 01:50:34.889

I apologize, but I was typing when you were reading that, can you repeat the last part of that? Please.

914

01:50:34.889 --> 01:50:40.168

It's basically someone that they serve.

915

01:50:40.168 --> 01:50:50.573

Quote, unquote falls, but they basically, it's it's a behavioral behavior and the ease themselves from the bed or a chair to the floor, then call for help and then it's included in their fault.

916

01:50:50.604 --> 01:51:00.323

In their false statistics, they try to adjust them as behavioral, but they are included in the stats and they asked if they could have.

917

01:51:00.599 --> 01:51:05.519

This included in the is behavioral and not a fall, but it was denied.

918

01:51:06.809 --> 01:51:10.109

Denied bye.

919

01:51:10.109 --> 01:51:18.269

That go, I can't I can't supersede anything that anybody's saying and there's not anything I'm going to say on here that I'm not going to contradict.

920

01:51:18.269 --> 01:51:23.908

What decision whoever made that decision if you're not witnessing the fall.

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01:51:23.908 --> 01:51:32.248

Who's to say what happened? And if you get behavioral services involved it with that try to figure out what's.

922

01:51:32.248 --> 01:51:39.628

What what is the purpose of the behavior and how to keep that person safe that way.

923

01:51:39.628 --> 01:51:47.368

Because, I mean, if we do see someone that has a lot of falls, and when we get to investigate and looking into it, usually That'll come to light.

924

01:51:47.368 --> 01:51:52.319

Major thing that we, you know.

925

01:51:52.319 --> 01:51:55.679

Really want to focus on as people keep people's.

926

01:51:55.679 --> 01:51:59.908

From becoming seriously injured and having to live with long term disability or pain.

927

01:51:59.908 --> 01:52:04.109

When it comes to balls and falling repeatedly.

928

01:52:04.109 --> 01:52:18.208

So, you'll have behavioral, I'll tell you when I started my career ID, I worked with a lot of people who had challenging behaviors and there were a lot of things that they did to hurt themselves or appear hurt.

929

01:52:18.208 --> 01:52:29.993

Um, you know, for, for whatever reason, and it was just, it was a real challenge, I think things are looking better though, as time progresses because we do have more more behavioral resources.

930

01:52:30.384 --> 01:52:37.253

And, uh, that's always something that you could look into for, for people who are challenging, challenging behaviors.

931

01:52:38.099 --> 01:52:41.609

Your regional offices are a resource to help you.

932

01:52:41.609 --> 01:52:45.479

Oh, service coordinator so I don't want to leave them out.

933

01:52:48.118 --> 01:52:57.838

See, I had an issue with an individual as well. We did add it to their is behavioral documented in notes, but not as it was noted in.

934

01:52:57.838 --> 01:53:01.649

It just depends on the person's situation and the team.

935

01:53:01.649 --> 01:53:11.488

How to handle that there's just not a blanket statement for everyone as you guys have figured out no black and white, because everybody's different and we can't.

936

01:53:11.488 --> 01:53:15.838

Treat everybody exactly the exact same things with everybody.

937

01:53:15.838 --> 01:53:26.128

So the process of getting home modifications and funded, then the equipment approved plays a huge role in the increase in falls. Wow.

938

01:53:27.448 --> 01:53:33.029

I can imagine just hearing from friends and different people about who have to deal with challenges of.

939

01:53:33.029 --> 01:53:38.698

Well, someone close to me dealing with Medicare and getting different things paid for, for the person's.

940

01:53:38.698 --> 01:53:42.599

Of support needs, and it does sound like it can be.

941

01:53:42.599 --> 01:53:49.469

A, very big challenge. It's a related question. I don't think that we answered it.

942

01:53:49.469 --> 01:53:52.828

We have someone that's asking.

943

01:53:52.828 --> 01:53:59.668

At what point do our ends do? Remote visits for their patients during these times.

944

01:54:00.929 --> 01:54:08.219

There is not any guidance put out there yet so it is up to the agency and their discretion.

945

01:54:08.219 --> 01:54:12.269

Of how they go forth with monitoring.

946

01:54:12.269 --> 01:54:15.359

with monitoring their people and checking in with them

947

01:54:16.828 --> 01:54:19.979

So the homes oh, sorry.

948

01:54:19.979 --> 01:54:29.279

For sure you didn't raise me. Yeah, I was just going to speak to that. So, the expectation is that we're doing those face to face visits.

949

01:54:29.279 --> 01:54:41.548

Um, what you have to look at is what is the situation you might have somebody in the home that's coded positive the individual might because it totally positive. Can we do this face to face visits?

950

01:54:41.548 --> 01:54:49.559

You know, outside, but if you're choosing not to do a face to face visit and you do it remotely.

951

01:54:49.559 --> 01:54:55.918

It needs to be documented and the reason why you chose to do that.

952

01:54:55.918 --> 01:54:59.338

Remotely versus face to face, needs to be documented.

953

01:55:02.788 --> 01:55:11.429

And I hope that helped oh, poodle. I put them as a retailer help network.
The Echo.

954

01:55:11.429 --> 01:55:14.759

Blank if you guys want to check it out and I put it in on a 2nd.

955

01:55:14.759 --> 01:55:20.099

I am jammed it up. Into the actual words, I didn't put a space so you can
just click on it.

956

01:55:20.099 --> 01:55:30.059

Or copy and paste it easily. There we go the all situation.

957

01:55:31.043 --> 01:55:31.583

Sure,

958

01:55:33.503 --> 01:55:34.283

I just want to say,

959

01:55:34.283 --> 01:55:41.304

I have a client who has that problem where it falls are just perpetual
issue and it is behavioral,

960

01:55:41.543 --> 01:55:48.173

putting it in the is very helpful that a way it helps staff coming in now
that this is this happens.

961

01:55:48.173 --> 01:55:49.913

This is a potential for problems.

962

01:55:51.118 --> 01:55:55.529

Maybe there is a way of addressing it in the that.

963

01:55:55.529 --> 01:56:03.838

That kind of helps them understand which 1 should be reported and which 1
shouldn't be and sometimes you exhaust all options. And there really is.

964

01:56:03.838 --> 01:56:12.389

No, other option, other than just being creative and making sure that you document as long as you have documented.

965

01:56:12.389 --> 01:56:17.604

Everything that could you possibly done you possibly could do everything that the staff has done,

966

01:56:17.963 --> 01:56:18.264

you know,

967

01:56:18.293 --> 01:56:22.253

make sure that all that documentation is there because you just,

968

01:56:22.253 --> 01:56:22.613

I mean,

969

01:56:22.644 --> 01:56:25.163

sometimes there's just nothing more you can do,

970

01:56:25.163 --> 01:56:26.213

unfortunately,

971

01:56:26.604 --> 01:56:28.104

you've exhausted all options.

972

01:56:28.104 --> 01:56:39.564

Insurances are very difficult to deal with Medicaid is a pain sometimes to deal with when it comes to these things. This particular client has done. P. T. O. T. several times.

973

01:56:39.779 --> 01:56:51.118

They, they do a really great job while they're working with them, but then insurance or medicate says we have to stop paying because you've met, however, many visits you're allowed. And so then.

974

01:56:51.118 --> 01:57:03.569

That stops and then the client starts to decline again so, you know, document document document there's, there's nothing more really to do get creative and shorter rapid in a bubble wrap.

975

01:57:04.373 --> 01:57:18.804

Just observe it and document, it's all you can really do. Unfortunately, I wish that there was a better way that we could say to the insurance

company come and stand and take care of this person and see what's going on. And they're just sometimes isn't that option available? So.

976

01:57:21.029 --> 01:57:24.328

Kudos to you for trying to come up with in many ways.

977

01:57:24.328 --> 01:57:27.328

And I hope that you can find some way, but.

978

01:57:27.328 --> 01:57:30.448

Just make sure your staff are document.

979

01:57:30.448 --> 01:57:34.529

And again, it's, you're having to leave it up to the documentation of staff.

980

01:57:34.529 --> 01:57:39.479

But that's where your assertiveness and your knowing your role in that reporting.

981

01:57:39.479 --> 01:57:47.158

Is a big deal, because that way, you know, who's having these recurring falls and maybe you can come up with something that somebody else hasn't thought up yet.

982

01:57:49.408 --> 01:57:57.149

Thank you you see something here earns don't follow the same policy as the se and nurses.

983

01:57:57.149 --> 01:58:00.569

As far as remote visits at this time, we had a question.

984

01:58:00.569 --> 01:58:05.429

And, um, now Trisha just outlined.

985

01:58:05.429 --> 01:58:09.359

How that process is supposed to take place.

986

01:58:09.359 --> 01:58:19.918

So, the other, they're still expected to go the homes, unless for other reasons, if their homes broke out with cobit or or what have you, whatever it's a way.

987

01:58:19.918 --> 01:58:25.498

You know, pros and cons, it's up to the agency and then you need to document.

988

01:58:25.498 --> 01:58:28.559

If you if the nurses is not going to the homes.

989

01:58:36.298 --> 01:58:41.788

Okay, pull something else up here.

990

01:58:43.798 --> 01:58:49.469

I believe we have covered everything we have needed to. Oh, my gosh. We have a minute to spare. That's awesome.

991

01:58:49.469 --> 01:58:57.958

I am so thankful for all of you all if all of you joining us today and I just really hope that you can take something away.

992

01:58:57.958 --> 01:59:03.538

And I hope something that we did today was useful for you and.

993

01:59:03.538 --> 01:59:11.429

Please don't hesitate to answer that survey question. What? I think I believe cat had explained that once you close out.

994

01:59:11.429 --> 01:59:19.649

Um, it'll the survey question, it'll pop up and it'll and it'll say, what can we do for you in the future, you know, for for next year's.

995

01:59:19.649 --> 01:59:23.399

So, let me look at my notes here and make sure I'm not.

996

01:59:23.399 --> 01:59:29.069

I'm missing any thing.

997

01:59:30.088 --> 01:59:44.488

No, that's just it, but thank you so much for joining and you just have an excellent rest of your day and keep fighting the good fight taking good care of those people, you know, we're all in it together. So, appreciate you guys and you all have a wonderful afternoon.

998

01:59:44.488 --> 01:59:50.207

I don't want to thank cat and Tricia and Michelle as well for, for being on the panel.