Letter from the Chair

I am very excited about the progress of the Board over the past several months. The Board is extremely appreciative of the support and leadership of Mayor Adrian Fenty, Councilmember David Catania, [HRLA Senior Deputy Director] Dr. Feseha Woldu and staff.

We are slowly seeing the fruits of legislation past come to fruition, and look forward to moving some upcoming important legislation to help protect the citizens of the District of Columbia.

For example, we have been able to successfully license extremely qualified individuals that have practiced in other states and who met the District’s endorsement or reciprocity requirements. These individuals have been able to help serve in facilities that need new leadership and direction.

The Board also had a very lively Preceptors Training program, in which we can safely say that the majority of the administrators that serve the District have been successfully trained and are prepared to take under their wing Administrators-in-Training (AIT).

This will allow the District to have new leadership mentored to take on the important task of caring for the elderly in the future.

The Board has also been able to see the new Administrator-in-Training (AIT) guidelines in motion, which has an increase in reporting to the Board, so that we can monitor the training process closely. We are starting to see some of the individuals that have gone through this process begin to take on leadership roles in facilities in the District.

The Board is also continuing to forge relationships with organizations such as the District of Columbia Health Care Association (DCHCA), so that we can have their positive input regarding regulations and legislative changes.

Lastly, we look forward to the task of applying the District of Columbia Assisting Living regulations, current standards of the profession and recommendations of the Long-term Care Task Force to put into regulations acceptable standards for the future Assisted Living Administrator. It is an exciting and challenging time for the Board, we look forward to doing positive things for the citizens of the District we are tasked to protect and serve.

Steven A. Nash, NHA
Chairperson
Board of Nursing Home Administration
Upcoming Board Meetings

The DC Board of Nursing Home Administration

MEETS MONTHLY ON THE “2ND THURSDAY”
1:30 PM – 3:30 PM
at 717 14th St., NW
10th Floor
Washington, DC 20005

Time is allocated at each Board Meeting to allow the public an opportunity to speak to the Board.

Please notify us in advance if you plan to attend a meeting by sending an email to hpla@dc.gov.

COURSES APPROVED FOR CEU CREDIT BY THE DC BOARD OF NURSING HOME ADMINISTRATION

Courses approved for Continuing Education Units (CEUs) in 2008; approved for one (1) year:

1. “Delmarva Leadership Quality Institute for Long Term”; a total of sixteen (16) continuing education credits were awarded on February 14, 2008.

2. “Day with Diana: Focusing on the Resident as a Person”; a total of six (6) continuing education credits were awarded on February 14, 2008.

3. “Understanding Immediate Jeopardy”; a total of one (1) continuing education unit was awarded on February 14, 2008.

4. “The Key to Building Skills in Leadership and Quality”; a total of sixteen (16) continuing education credits were awarded on April 10, 2008.

5. “Wound Care,” DC Board of Nursing; a total of six (6) continuing education units were awarded on April 10, 2008.

6. “Interdisciplinary Approach to Dementia Care”; a total of two (2) continuing education credits were awarded on August 7, 2008.

7. “What Every Employer and Supervisor Needs to know about Employment Law”; a total of two (2) continuing education credits were awarded on August 7, 2008.

8. “Caring for Someone with Dementia: How You Help Make a Difference”; a total of four (4) continuing education credits were awarded on October 9, 2008.

9. “Medical Records Law”; a total of six (6) continuing education credits were awarded on October 9, 2008.

10. “What Do the New CMS and OIG Initiatives Mean for Your Nursing Facility in 2009?”; a total of two (2) continuing education credits were awarded on November 26, 2008.

Course approved for CEUs in 2009; approved for one (1) year:

11. “The Employee Free Choice Act: Potential Implications For Long Term Care”; a total of two (2) continuing education credits were awarded on February 18, 2009.

APPLY TO HOST A CONTINUING EDUCATION PROGRAM

The DC Board of Nursing Home Administration may, at its discretion, approve Continuing Education programs and activities that contribute to the growth of an applicant in professional competence in the practice of Nursing Home Administration and which meet the other requirements of §6207. All course approvals by the Board are valid for one (1) year from the date of approval.

FOR COPIES OF THE APPLICATION FORM: Please visit our website at www.hpla.doh.dc.gov. Click on: Professional Licensing Boards/Registrations; then Nursing Home Administration; and then Request Forms for CEU Approval. For each proposed course, sponsors must submit four (4) copies each of the Organizational Information Form, the Application for Continuing Education Course Approval and all attachments.

ALL MATERIALS MUST BE SUBMITTED TO THE BOARD FOR REVIEW AND APPROVAL NO LESS THAN THIRTY (30) DAYS PRIOR TO THE DATE OF PRESENTATION.

For additional information, please read the DC Municipal Regulations for Nursing Home Administration.
MEET BOARD OF NURSING HOME ADMINISTRATION MEMBER
KAREN BLACKSTONE, MD

“The Board is moving toward expansion of its role in regulating not only nursing home administration but also assisted living administration. We are all challenged to continue to promise and promote the highest quality of care for our most vulnerable citizens, often elderly and chronically ill, throughout the continuum of care...”

Why and how did you first get involved with the Board? What sparked your interest in serving as a Board member?

I was appointed as a board member in 2002. After medical subspecialty training in Geriatrics at Harvard University, I moved to the District of Columbia where I began work as a geriatrician in the Department of Veterans Affairs Medical Center’s Nursing Home Care Unit. I was recruited to join the NHA Board through my professional contacts in geriatrics in DC to fill an absent physician member position, and it has been my great privilege to be part of the Board ever since.

Is there any aspect of your service as a Board member thus far that has surprised you (or has the experience been what you expected it to be)?

In my first year on the board we began work to re-write the laws that regulate nursing home administrator licensing. I have learned a great deal about the legislative process and writing from my colleagues on the board and our legal consultants.

What challenges lay ahead for the Board?

The Board is moving toward expansion of its role in regulating not only nursing home administration but also assisted living administration. We are all challenged to continue to promise and promote the highest quality of care for our most vulnerable citizens, often elderly and chronically ill, throughout the continuum of care (including assisted living and nursing homes).

Based on your familiarity with the Board, what do you feel is the greatest recent accomplishment of the Board?

The Board is committed to promoting excellence in all aspects of nursing home administration. Recent accomplishments include updating the DC licensure examination, developing a web-based application system, numerous continuing education unit (CEU) accreditations, review of many licensee applications, and development of a tremendously successful AIT Preceptors Training Program. A highlight of the Board’s efforts in the past years has been the revision of the regulations for licensure and permission granted to accept Nursing Home Administrators for licensure through endorsement and reciprocity. Through time consuming writing, the Board has worked to promote licensure of qualified individuals in a timely manner and promote a healthy and satisfying NHA work environment.

What unique perspective do you bring to the board (if any)?

I hope that I bring the perspective of a caring physician with more than 10 years of experience in long term care, palliative care, community-based and hospital-based care of chronically and seriously ill elderly to the Board. It is my pleasure as a geriatrician to always be part of an interdisciplinary team of colleagues, working together with a variety of skills, toward a common cause to promote health and well-being throughout the District of Columbia.

What challenges lay ahead for the Board?

The Board is moving toward expansion of its role in regulating not only nursing home administration but also assisted living administration. We are all challenged to continue to promise and promote the highest quality of care for our most vulnerable citizens, often elderly and chronically ill, throughout the continuum of care...

What would you tell someone who is thinking about applying to serve on your Board?

The NHA Board includes the most dedicated professionals that I have ever had the privilege to work with. I find the Board and its supporting staff to include reliable professionals who are respectful of others, excellent communicators, and above all they uphold the highest quality standards when it comes to caring for our city’s frail elderly residents.

Any message you would like to convey to NHA licensees?

Licensees are welcome to contact the board with any suggestions for improvement in Board functions. We are a very approachable board and we are always looking for ways to improve efficiency and quality. I truly appreciate the privilege of serving the Nursing Home Administrators of the District of Columbia and thank NHA licensees for their dedication to a most challenging but very rewarding profession.
On November 13, 2008, the DC Board of Nursing Home Administration hosted its second Preceptors Training Course. The three-hour learning session aimed to review topics determined by the Board to be most crucial to a successful AIT experience. Following opening comments and welcome by Feseha Woldu, Senior Deputy Director and Steven Nash, Board Chairperson, invited experts and topics discussed included:

Fatima Abby, Health Licensing Specialist
  • “NHA Application Package”

Tonia Bair, Assistant Attorney General
  • “Nursing Home Administration Regulations”
  • “Civil Infractions Regulations, Fees and Fines”

Theodore Fykes, Sanitarian
  • “Guidelines for Life Safety Codes Surveys”

Mark Donatelli, Investigator
  • “Criminal Background Check”

Steven Nash (Chairperson), Elizabeth Nolte (Board Member) and Karen Blackstone (Board Member) reviewed “District Exam Study Guide Material,” “DC Law 6-108: Transfer of Residents,” “NAB Administrative Scope of Practice,” and “AIT Guidelines.”

All attendees completed written evaluations following the course. All rated the content, usefulness, speakers, audiovisual, handouts, organization and convenience as good to excellent. All stated that the course met their learning expectations and that they would recommend this course to a colleague.

All attendees received certificates for 3 Contact Hours (3.0 CEUs) for their participation in the Preceptors Training Course.

For more information about the Preceptors Training Course or AIT requirements please contact:

Ms. Fatima Abby  
DC Board of Nursing Home Administration  
Department of Health  
717 14th Street, NW  
Suite 600  
Washington, DC 20005  
Phone (202) 724-8826  
Email fatima.abby@dc.gov  
Fax (202) 727-8471

PAID INACTIVE STATUS: If you intend to retire your license, or if you would like to place your license on Inactive Status, you must explicitly inform the Board of your intention before the renewal date expires. If you fail to pay renewal fees on time, your license is not inactive; it is delinquent (expired). It is unlawful to practice as a Nursing Home Administrator while your license is delinquent/expired. Please contact HPLA Customer Service at 1 (877) 672-2174, or Ms. Fatima Abby at: (202) 724-8826 for further information.

THE DC BOARD OF NURSING HOME ADMINISTRATION CONGRATULATES ALL CERTIFIED NURSING HOME ADMINISTRATOR PRECEPTORS:

ALBERTA BRASFIELD  
(Certified 2008)

WILLISTINE D. PAGE  
(Certified 2008)

BARBARA W. D’AGOSTINO  
(Certified 2008)

ROBERT L. SLOAN  
(Certified 2008)

BRYANT HALL, JR.  
(Certified 2008)

LEONARD W. SMITH, JR.  
(Certified 2008)

ROBERT SPENCER  
(Certified 2008)

DC BOARD OF NURSING HOME ADMINISTRATION PRECEPTORS CERTIFIED SINCE 2005

Sandra L. Douglass
Gail Linberg Jernigan
Eileen Ellen Mulaney
Steven A. Nash
Louis Ward Orem
Annette C. Price
Joseph A. Umoren
Solanges Vivens
Nora J. Wellington
Rosalind L. Wright

PRECEPTORS TRAINING ATTENDEES (November 13, 2008)

1. ALBERTA BRASFIELD  
6. WILLISTINE D. PAGE
2. BARBARA W. D’AGOSTINO  
7. ROBERT L. SLOAN
3. SIKIRAT I. DISU  
8. LEONARD W. SMITH, JR.
4. BRYANT HALL, JR.  
9. ROBERT T. SPENCER
5. HOA THI NGHIEM  
10. NORA J. WELLINGTON
11. DONNA V. ALLEN WILLIAMSON
Home Administration Preceptors Training

In order to promote a consistent high quality learning experience for all Nursing Home Administrators-in-Training (AIT) in the District of Columbia, the DC Board of Nursing Home Administration has developed an innovative and informative Preceptors Training Course. Each DC Nursing Home Administrator wishing to serve as an AIT supervisor is required by the Board to complete the Preceptors Training Course.

Top of page: NHA Board members greet participants in the Preceptors Training session. At right: Participants Robert Sloan (left) and Bryant Hall, Jr. (right).
Senior Deputy Director of the HRLA, Dr. Feseha Woldu emphasized the importance of adverse events reporting:

Complaints, incident reports, and adverse events reports allow DOH to identify trends in Long Term Care in the District.

“We must collectively work to have the best health care facilities in the country,” he said. “We need to identify the issues and identify the root cause of these adverse events.” In looking at the adverse events data [reports of incidents that have led to death or unanticipated injury]: “We are looking at trends—falls; missed medication and medication errors; abuse and neglect; nutritional issues and dehydration.”

“One nursing home or hospital can destroy the reputation and credibility of all of us,” he said. “This is not somebody else’s problem, this is our problem—a collective problem which will require a collective solution.”

Please access our website!

Adverse Event forms: www.hpla.doh.dc.gov

HRLA (licensing of health care facilities): www.hrla.doh.dc.gov

HPLA (licensing of health care professionals): www.hpla.doh.dc.gov

DC Government website: www.dc.gov
THE DC BOARD OF NURSING’S KAREN SCIPIO-SKINNER TOLD ATTENDEES:

“If you fire a nurse due to substandard nursing skills, the Board of Nursing needs to know, or that nurse will just go from facility to facility, with the possible result being injury or death to a patient.” [DC Official Code §44-508 requires health care facilities to report.] If you know something is wrong—but you cannot pinpoint the problem, or if you suspect substance abuse or mental health issues, call the Committee on Impaired Nursing (COIN) program. There may be a mental health issue that has gone undiagnosed. The COIN Program offers treatment and monitoring, and requires a participating nurse to sign a contract outlining conditions to be met to assure that the nurse’s practice is within the acceptable standards of care.

CONTACT THE BOARD OF NURSING OR THE COIN PROGRAM AT (202) 724-8846 OR SEND AN EMAIL TO CONCHEETA.WRIGHT@DC.GOV.

Also: The Board of Nursing is developing an orientation program for new LPNs and RNs which facilities may use. The Board of Nursing will soon regulate Certified Nursing Assistants and other assistive personnel. The Board of Nursing regulates Nurse Staffing Agencies (NSA). The District's Practical Nursing programs are in need of clinical sites for their students.
HRLA/HCFD SUPERVISORY NURSE CONSULTANT SHARON MILLS SPOKE ABOUT LICENSURE AND
You may contact Ms. Mills at (202) 727-3023 or sharon.mills@dc.gov (below are highlights from her presentation)

Title 22 DCMR Chapter 31 - 3102.4
A facility shall submit an application for license renewal to the director no later than ninety (90) days before the expiration date of the current license. The facility shall submit the licensure fee with the application.

Title 22 DCMR Chapter 31 - 3102.7
The license of a health care facility shall inform the Director of any change in the operation, program, or services of a facility of a degree or character which may affect its licensure within five days of the change. The licensee shall promptly notify the Director of any change in the administrator of the facility.

HRLA/HCFD PROGRAM MANAGER SHARON LEWIS TOLD PARTICIPANTS:
“YOU MUST BE THE CHANGE YOU WISH TO SEE IN YOUR FACILITY”
(below are highlights from her presentation)

ADMINISTRATORS:
• Develop high quality standard of culture
• Get it right the first time
• Improve operational efficiency and quality of care
• Customer Service
• There is evidence of association between high number of deficiencies and low to minimum staffing
• PLEASE REVIEW YOUR REGULATIONS, including those concerning Housekeeping and Maintenance (F253); Comprehensive Care Plans (F279); Facility Drugs & Biological (F425); Storing/preparing/distributing Food under Sanitary Conditions (F371); Proper Labeling of Drugs and Biologicals (F431); Provide Necessary Care to attain highest practicable... physical, mental and psychosocial well being (F309).

NEED HELP?
HRLA PROVIDES TECHNICAL ASSISTANCE

• FACE TO FACE MEETINGS WITH THE NURSING HOME MANAGEMENT TEAM
• GUIDANCE RELATIVE TO LOCAL AND FEDERAL REGULATIONS
• MONITORING VISITS

You may contact Ms. Lewis at (202) 442-4737 or send an email to sharon.lewis@dc.gov

Office location:
Sharon Williams Lewis
Program Manager
Health Regulation and Licensing Administration
Health Care Facilities Division
717 14th Street, NW, Suite 750 (Mail to: 6th Floor)
Washington, DC 20005
PLANS OF CORRECTION.

Plan of Correction (PoC)

Facilities having deficiencies (other than those at scope and severity level A) must submit an acceptable plan of correction before substantial compliance can be determined.

The District of Columbia Department of Health licenses and certifies health care facilities for compliance with state and federal health and safety standards. Facilities include nursing homes, hospitals, home health agencies, dialysis centers, and intermediate care facilities for the mentally retarded.

The HEALTH CARE FACILITIES DIVISION (HCRD) conducts regular on-site surveys to ensure health, safety, sanitation, fire, and quality of care requirements. HCFD identifies deficiencies that may affect state licensure or eligibility for federal reimbursements under the Medicare and Medicaid programs.

ATTENTION NURSING HOME ADMINISTRATORS

Let the Board of Nursing Home Administration know when you are honored or given an award, and we will offer you “kudos” in a future NHA newsletter!

Send your email to:
fatima.abby@dc.gov
BOARD-RELATED TERMS THAT LICENSEES SHOULD KNOW

CONSENT ORDER: A voluntary agreement entered into by a board and a respondent (person disciplined) in lieu of hearing for violation of the HORA. A Consent Order may or may not be reportable to the National Practitioner Data Bank.

NOTICE OF INTENT TO DISCIPLINE (OR DENY): A document requested by a board and prepared by the Office of the Attorney General which places a licensee on notice that he or she is being charged with violating one or more of the health profession laws as outlined in Title 3 Chapter 12 of the D.C. Code. It may also indicate violation of District regulations as found in Title 17 of the District Register, and/or federal law. It will give a summary of the facts which serve as the basis for the violations. The document also contains information about how to request a hearing. The disciplinary action (if any) from a “Notice” is reportable to the National Practitioner Data Bank.

SUMMARY SUSPENSION: A document requested by the Administrator of the Health Regulations Licensing Administration (not a Board) that is prepared by the Office of the Attorney General. The purpose of the document is to immediately terminate the right of a person to practice a health profession because the Administrator believes that the person poses an imminent danger, because of his or her misconduct, to the health and safety of the residents of the District of Columbia or its visitors and guests. The “Suspension” informs the person that he or she must request a hearing within 72 hours and is entitled to a hearing within 72 hours – provided that the beginning and ending period for the 72 hours does not fall on a weekend or holiday in which case it is carried over to the next business day. Failure to request a hearing within the 72 hours results in the suspension remaining in place until it is lifted by the board having jurisdiction over the licensee. A Summary Suspension is reportable to the National Practitioner Data Bank.

CEASE AND DESIST ORDER: A Cease and Desist order is a document requested by the Administrator and prepared by the Office of the Attorney General. It is served on a person whom the Administrator believes may cause immediate and irreparable harm. Unlike a Summary Suspension, it is usually served on persons who are engaging in a health profession while not being licensed, registered, or certified. The person receiving the Cease and Desist must request a hearing within 10 days and is entitled to a hearing within 10 days. If the hearing isn’t requested, the Cease and Desist remains in effect. If the person continues to be engaged in the activity after being served a Cease and Desist, the Administrator may ask the Office of the Attorney General to seek a criminal prosecution to enjoin the activity.

THE NATIONAL PRACTITIONER DATA BANK: A database mandated by federal law and maintained by the U.S. Department of Health and Human Services for the purposes of warehousing disciplinary actions taken by states against health professionals. Each licensing board is required to report to the Data Bank each and every formal disciplinary action taken against a licensee, registrant, or holder of a certification.

IN MEMORY OF JOHN DARDEN


MR. DARDEN WAS A RESPECTED COLLEAGUE AND FRIEND WHO CONTRIBUTED GREATLY TO OUR COMMUNITY. HE WILL BE MISSED.
**FILING A COMPLAINT WITH THE BOARD**

To file a complaint against a licensed Nursing Home Administrator, simply write a letter that describes your complaint. The letter must be signed, and you should attach copies of any pertinent documents that you may have.

The letter must also include your address, so we may contact you as necessary and notify you of any findings.

You should mail the complaint to:

DC Board of Nursing Home Administration  
717 14th Street, NW  
Suite 600  
Washington, DC  20005  

You can also fax the complaint to the Board at (202) 727-8471.

If your complaint alleges unlicensed activity, you should address your complaint to:

Supervisory Investigator  
717 14th Street, NW  
Suite 1000  
Washington, DC  20005  

You can also fax your complaint about unlicensed activity to (202) 724-8677.

**PLEASE NOTE:** You can print a complaint form from our website at www.hpla.doh.dc.gov

Please be advised that the health professional licensing boards do not have jurisdiction over fee disputes, except for billing for services that were not provided. If you have a fee dispute with a health professional, you can seek redress through the civil courts.

---

**FREQUENTLY ASKED QUESTIONS**

**When do I renew my license?** Nursing Home Administration licenses are renewed every two (2) years, on June 30th of each even-numbered year.

**What are the Continuing Education (CE) requirements for the renewal cycle?** Licensees must have completed forty (40) hours of approved continuing education credits during the two (2) year period preceding the date the license expires.

You will have to attest that you have in fact fulfilled your CE requirement. Only licensees selected during random audit may be subject to verify their CE by submitting copies of their certificates of completion.

**Do I need to submit the forty (40) required CEUs if this is my first renewal?** No. If this is your first renewal, you do not have to submit CEUs.

**May I place my license on Paid Inactive if I allow my license to expire after June 30, 2010?** You may place your license on Paid Inactive during the sixty (60) day grace period with a payment of the $85.00 late fee, plus a Paid Inactive fee.

---

**NURSING HOME ADMINISTRATION EXAMINATION**

Per Title 17, District of Columbia Municipal Regulations, Chapter 62, § 6205, applicants submitting an application for the District of Columbia Nursing Home Administrator (NHA) license must take a District Examination. Prospective licensees shall also sit before the Board for an interview. The applicant is eligible for this process after he/she has fulfilled all other requirements for licensure. Once eligibility has been established, the Board will administer the examination and conduct the interview once every quarter. An applicant who fails the examination three (3) consecutive times shall not be permitted to retake the examination for six (6) months following the third failure.

If you wish to receive additional information on the NHA examination or interview process, contact Health Licensing Specialist Fatima Abby (see back page for contact info).

- The Law and Ethics Exam consists of 40 multiple choice questions.
- The applicant is allowed 2 hours to complete the test.
- This examination is a CLOSED BOOK test.
- The maximum total is 40 points, with the required passing score of 75% or 30 points.

---

**DC NURSING HOME ADMINISTRATION BOARD ORDERS**

There were no Board Actions against Nursing Home Administration licensees for the year of 2008.
Government of the District of Columbia
Adrian M. Fenty, Mayor

Health Professional Licensing Administration

Current Members of The District of Columbia Board of Nursing Home Administration

Steven A. Nash, NHA
Chairperson

Karen Blackstone, MD
Board Member

Elizabeth Nolte, MD
Board Member

For more information or to verify a license, go online at: www.hpla.doh.dc.gov