

Department of Health and Human Services
Division of Public Health
Licensure Unit
301 Centennial Mall So, P O Box 94986
Lincoln, NE 68509-4986

2/10/16 dy

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC HEALTH CERTIFIES THAT	
Good Shepherd Lutheran Home MEETS STATUTORY REQUIREMENTS AS SNF/NF DUAL CERT Lic # 794002	
Services PHYSICAL THERAPY OCCUPATIONAL THERAPY SPEECH THERAPY ALZHEIMER UNIT	
EXPIRES 03/31/2017	 

Cut on heavy line and place on license.

FACILITY NAME: Good Shepherd Lutheran Home
ADDRESS: 2242 WRIGHT STREET, BLAIR, NE 68008

This is to verify that your SNF/NF DUAL CERT is licensed through the date indicated on the above renewal card. Place the renewal card in the lower left hand corner of your original license.

Please notify this office at the address listed above of any change in name, address, or ownership.

4/20/15



NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
Licensure Unit

Table with 1 column: Make Payment to DHHS LU. Rows: Renewal Fees: 1 - 50 beds: \$1550, 51 - 100 beds: \$1750, 101 or more: \$1950

Expiration Date
03/31/2016

Nursing Home Licensure Renewal Application

Nursing Home Type: Please Check
[checked] Skilled Nursing Facility
[] Nursing Facility
[] Intermediate Care Facility

IDENTIFYING INFORMATION

1. NAME AND ADDRESS OF FACILITY:

Good Shepherd Lutheran Home
2242 WRIGHT STREET
BLAIR, NE 68008

2. PREFERRED MAILING ADDRESS (IF DIFFERENT FROM FACILITY ADDRESS) FOR THE RECEIPT OF OFFICIAL LICENSURE UNIT NOTICES FROM THE DEPARTMENT:

LICENSURE UNIT

FEB 01 2016

RECEIVED

LICENSE NO: 794002
TELEPHONE NUMBER: (402) 426-4663
FAX NUMBER: (402) 426-1988
ADMINISTRATOR: AMIE CLAUSEN
DIRECTOR OF NURSING: NANCY PEDERSEN, R.N.
E-Mail Address, if available: Admin@goodshepherdblair.org

3. FEDERAL EMPLOYER IDENTIFICATION NUMBER OF THE FACILITY:

4. NUMBER OF BEDS TO BE RELICENSED: 84

5. ACCREDITATION/CERTIFICATION: [] JCAHO [checked] Medicare [checked] Medicaid [] Other
Are you requesting deemed status? [] yes [] no

6. SPECIAL CARE AND TREATMENT SPECIFICALLY FOR THE FOLLOWING GROUPS: If different from Current Services listed, please check changes.

[checked] Physical Therapy [checked] Alzheimers/Special Care Unit [checked] Speech Therapy
[] Pediatric [] Respiratory [checked] Occupational Therapy
[] Behavioral Needs

Current Services

PHYSICAL THERAPY
OCCUPATIONAL THERAPY
SPEECH THERAPY
ALZHEIMER UNIT

REC'D DHHS LICENSING
2016 FEB - 3 4 11: 19

OWNERSHIP INFORMATION

7. OWNERSHIP OF FACILITY: GOOD SHEPHERD LUTHERAN COMMUNITY
(Legal Name of individual or business organization)

MAILING ADDRESS: 2242 WRIGHT STREET
BLAIR, NE 68008

8. BUSINESS ORGANIZATION: (Check one):

- [] Sole Proprietorship
[] Partnership
[] Limited Partnership
[checked] Corporation
[] Limited Liability Company
[] Governmental ([] State, [] District, [] County, [] City or Municipal)
[] Other (Please Specify)

(check one)
[] Profit [checked] Non Profit

CERTIFICATION

I/we have read the Rules and Regulations issued by the Nebraska Department of Health and Human Services and will comply with them should a license be issued. I/we certify that to the best of my/our knowledge, all information and statements on the application are true and correct and I/we hereby apply for a renewal license.

PLEASE NOTE: Neb.Rev.Stat. Section 71-433 requires: Applications shall be signed by

- (1) the owner, if the applicant is an individual or partnership,
(2) two of its members, if the applicant is a limited liability company,
(3) two of its officers, if the applicant is a corporation, or
(4) the head of the governmental unit having jurisdiction over the facility to be licensed, if the applicant is a governmental unit.

Jane K. Heinrich
AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

Rodney L. Hansen
AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

[Redacted Signature]

SIGNATURE

1-21-16
DATE

1-21-2016
DATE

2015-2016 Board of Directors

Good Shepherd Lutheran Community

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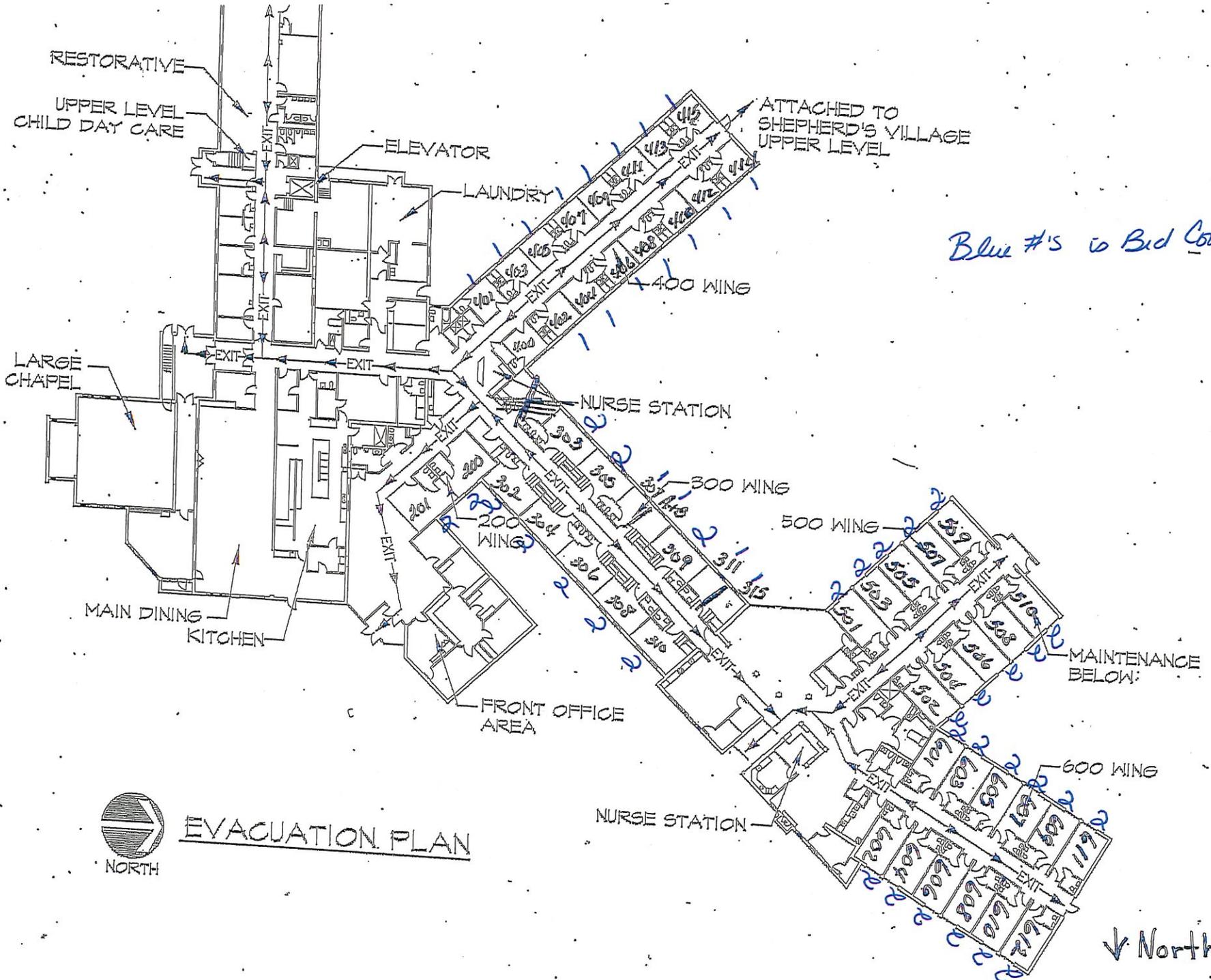
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Executive Committee

President	Jane Heinrich
Vice President	Rod Hansen
Treasurer	Sandy McMullen
Secretary	Carol Gregory

Terms consist of 3 years, each members can serve up to 3 terms (9 years) on the board.



EVACUATION PLAN

↓ North

NEBRASKA STATE FIRE MARSHAL

OCCUPANCY PERMIT

Certificate Number: 402975

Name of Facility: **Good Shepherd Lutheran Home**
Type of Facility: **Nursing Home**
Location: **2242 Wright St., Blair**
Maximum
Occupancy: **84 Beds**
Date Issued: **4/20/2015**

Approved By:

Inspected By: **8713 Alan Viox**
Deputy State Fire Marshal


State Fire Marshal



POST IN PROMINENT PLACE



Change in occupancy classification or failure to meet State Fire Marshal codes
shall invalidate this occupancy permit.

Good Shepherd Lutheran Community
Policy/Procedure: Shepherd's Care
Special Care Unit

A. **Philosophy and Mission:** Good Shepherd Lutheran Community believes in providing the highest quality of life possible for residents with dementia. Shepherd's Care will create a homelike, therapeutic, and individualized environment with consistent care. Ongoing educational programs for staff and families will be offered. This program will maintain dignity and enable a resident with dementia to maximize his or her remaining mental capabilities and spiritual being.

Shepherd's Care is based on the following five principles:

1. **Dignity is preserved.** The resident is protected from negative or embarrassing feedback or criticism and is treated as a full adult. This principle is manifested in many ways, from facility design to tone of voice used by staff to types of activity promoted.
2. **Individual resident preferences and customary routines are accommodated.** Residents are not pressed into a schedule or expected to perform in a certain manner in order to be accepted. Therapeutic approaches are individualized.
3. **Family members or significant others are involved** in planning and providing care to the extent they are comfortable. They receive support, information, and education by the staff. As a result, the families have realistic, informed expectations about the course of the dementia and care needs.
4. **Staff needs are recognized** through ongoing education, which empowers them to be the best caregivers. Trained staff will integrate the skills of all relevant disciplines. They are also flexible enough to take on nontraditional roles as needed.
5. **The environment is safe and secure,** allowing the resident protected physical freedom and a great sense of security. This homelike setting permits the person with dementia to experience positive emotions of pleasure, comfort, and belonging. This is important for one who appears to have lost most of the past.

B. **Criteria for Placement and Discharge:** Persons who will benefit from a decreased environment milieu with a more secure environment will be considered for placement in the Special Care Unit (SCU). In this environment the resident will be able to freely work with the strengths they possess with a progressive nonstructured program. Often, people who have dementia are said to have Alzheimer's disease, in many cases this may not be true. There are many other types of dementia. Dementia is a term used to describe a chronic cognitive disorder. Chronic means it is long-term, without cure, and will worsen until the person dies. Cognitive disorder means it impairs the areas of brain function involving memory, judgment, abstract thinking, language, the ability to care out tasks, and personality.

1. Those admitted to the Special Care Unit should be independently ambulatory, self-mobile with mechanical devices (such as walker, cane or wheelchair), or ambulatory with the assistance of one person.
2. Residents can be disoriented, unable to complete decision making processes, or have impaired communication skills.

Good Shepherd Lutheran Community
Policy/Procedure: Shepherd's Care
Special Care Unit

3. Residents may be independent or need extensive assistance with ADL's such as grooming, bathing, dressing, and eating.
4. Residents will be considered for placement in the SCU if their behavior patterns include:
 - Wandering
 - Incontinence
 - Sleeplessness
 - Catastrophic Reactions
 - Depression
 - Irritability
 - Inability to start, organize, or follow through on an activity
 - Resistant Behaviors
5. Upon admission the resident or responsible party will be informed of admission and discharge policies related to the Special Care Unit, with the signatures of acknowledgement.
6. In the early stage of dementia, the challenge is to help residents and families adjust to the diagnosis. A comprehensive evaluation is important to obtain a clear picture of the type of dementia present.
7. The following are required for admission into the Special Care Unit upon the discretion of the attending physician. This includes but is not limited to: Dementia work-up (as noted above), preferable a CT/MRI Scan; Mini-Mental Status Exam and other neuropsychological testing; History and Physical; PPD; Discharge Summary, with a request for medical records that contain such information.
8. A hospital/home assessment may be conducted prior to admission for placement into the SCU. This assessment will be coordinated by the Social Services Director. The home assessment will include but not be limited to Social/Life history, Mini-Mental Exam, Functional Ability Questionnaire, review of present drug regimen and all diagnoses.

The above criteria have been written to help us make proper placement of all potential residents.

Discharge: Discharge from the Special Care Unit (SCU) will be initiated if one or more of the following conditions exist:

1. Residents who move into the later stages of dementia may be transferred to a more appropriate area.
2. Residents who are combative may be able to remain in the SCU. However, if combativeness endangers the resident, staff, or other resident, appropriate arrangements will be made for discharge and proper placement within the general population of the nursing home or with another, more suitable, facility.
3. At the first signs of combativeness, the resident's physician and family will be notified. The attending physician, the Director of Nursing and Social Services Director will reassess appropriateness of the SCU. If needed, appropriate

Good Shepherd Lutheran Community
Policy/Procedure: Shepherd's Care
Special Care Unit

arrangements will be made for a psychiatric consultation through the referral of the attending physician.

4. When the resident's physical needs outweigh his or her emotional needs, and would not benefit from the special programming designed for the SCU, arrangements will be made for discharge from the unit.

The above criteria has been established based on the concept that as the medical needs increase in the resident, the staff will need to spend more time meeting the resident's medical needs. Staff time spent on meeting the emotional and functional needs of the other residents is decreased, taking away from the goal of having the Special Care Unit.

- C. **Plan of Care:** A Comprehensive Care Plan will be prepared and frequently reviewed for the resident by an interdisciplinary team of professionals whose goal is to facilitate individualized care.

The interdisciplinary team members include: the attending physician, unit director, Nursing, Activities, Dietary, Social Services and other disciplines as appropriate. The resident, family, primary caregiver and/or resident representative are strongly encouraged to participate as an interdisciplinary team member.

The admission/annual history and physical will be completed by the attending physician.

A comprehensive psychosocial history of the resident and family is completed prior to admission by the Social Services director.

A Nursing history and assessment shall be initiated upon admission.

Within fourteen (14) days of admission a comprehensive assessment will be completed by the interdisciplinary team.

A comprehensive care plan will be developed within seven (7) days after the completion of the comprehensive assessment. This plan of care will be prepared and approved by all members of the interdisciplinary team.

The comprehensive assessment and care plan will be reviewed and revised by the interdisciplinary team no less than once every three (3) months. The comprehensive assessment and care plan will be done more often when the resident's condition changes.

- D. **Staff Training and Continuing Education:** Staff will participate in specialized educational programs focusing on dementia, care of the resident with dementia, interacting with families and problem behavior resolution.

All personnel hired for the unit will participate in special training as mentioned above.

All staff working in the special care area will receive ongoing education focusing on identified concerns and updates on care of individuals with dementia.

Good Shepherd Lutheran Community
Policy/Procedure: Shepherd's Care
Special Care Unit

E. **Physical Environment:** See attached.

F. **Resident Activities:** May include however not limited to the following:

- . Coffee Hour- twice daily
- . Exercise- daily
- . Crafts (Be Creative)- minimum three times a week
- . Movies- weekly
- . Newspaper/Magazine reading- daily
- . Church Worship Services- weekly
- . Communion- weekly
- . Bible Study- weekly
- . Mass/Rosary- weekly
- . Worship for the Cognitive Impaired- weekly
- . Devotions- daily
- . Memories/Reminiscing/Discussion Groups- weekly
- . Sing-A-Long/Organ and Piano Music- weekly
- . Outings- once/twice a month
- . Interactive Games- daily
- . Manicures- twice a month
- . Intergenerational Activates- daily
- . Family Events and Parties- monthly
- . Men's Club- monthly
- . Gardening- seasonal.

 **Good Shepherd Lutheran Community**
Policy and Procedure
Special Care Neighborhood

G. **Family Support Programs:** Families will be involved with quarterly care plan meetings, monitoring the physical and cognitive needs of the resident. Special family meetings will be called for issues that arise before scheduled quarterly meetings. A Caregiver's Support Group for families and caregivers meets monthly. As the unit evolves, plans are to have a Special Care Unit Support Meeting monthly. Individual family support meetings will be arranged if more appropriate to the concern.

We will also be calling on the resources of the Alzheimer's Association to give additional support to families as needed.

F. **Cost and fees:** The State of Nebraska requires a Minimum Data Sheet (MDS) to be used as a clinical assessment tool in all Nursing Home Resident Assessments. The assessment form takes into consideration all the care and needs of each individual resident. The MDS is done on admission, quarterly, annually, upon significant change. Good Shepherd Lutheran Community uses this same assessment tool (MDS) to correlate with our per diem rate levels.

 **Good Shepherd Lutheran Community**
Policy and Procedure
Special Care Neighborhood

Good Shepherd Lutheran Community has designated two wings (500 and 600) for individual Special Care Needs. The Special Care Neighborhood is not limited to individuals diagnosed with Alzheimer's disease. The criteria for placement in the Special Care Neighborhood are individuals who will benefit from a homelike setting with decreased environment milieu, secured, and share the surroundings with other individuals who may be also be disoriented, unable to complete decision making processes, or have of impaired communication skills. Individuals are allowed to wander independently and are able to walk freely in and out of their rooms.

Admission to the Special Care Neighborhood requires an annual history and physical completed by the attending physician. Within fourteen days of admission a comprehensive assessment will be completed by the Interdisciplinary team along with family members and or friends. A Care Plan will be developed within seven days; this will be prepared and approved by the Interdisciplinary team. This Plan of Care will be reviewed and revised to meet the individual's needs no less than once every three months or up a significant change in condition of the resident.

Upon admission the facilities consultant pharmacist will conduct a Medication Review. Very few drugs help for problem behaviors or psychosis in dementia. The over-all person-centered approach or Non-drug methods are preferred try to meet the individualized needs.

Good Shepherd provides enhanced staff training on dementia and the care of individuals with dementia. A key skill set for staff is the ability to distinguish behaviors indicating distress vs. behaviors triggered by medical or psychiatric conditions. Boredom, anxiety, environmental changes and changes in care routine can trigger distress behaviors.

Caregivers participate in specialized education programs focusing on dementia and caring for individuals with special needs. A variety of activities, pastoral, dietary and caregiver approaches are offered to meet the individualized choices. An example of reminiscence is a viable therapeutic approach that can be a vocal or silent recall of events in a person's life. Reminiscence is commonly used in group settings. Some of our Caregivers approaches include consistency of staffing, wearing of attire associated with the job, using traditional games, music, symbols, short visits, as well as non-verbal communication such as strolls and holding hands.

The State of Nebraska requires that all individuals residing in a licensed care facility receive a Minimum Data Set (MDS) clinical assessment. This assessment tool takes into consideration the care and needs (Activities of Daily Living (ADL's) of each individual. This tool is done on admission, quarterly, annually, upon significant change and determines the per diem rates.

Dementia

Dementia in itself is not a disease but loss of mental function in more than two areas. Dementia is loss of memory and other mental abilities that affect daily life. Dementia is a series of symptoms that accompany a disease. The dementia symptoms can include and affect:

- Language
- Judgment
- Memory
- Spatial abilities
- Visual Abilities

Dementia symptoms can be classified into two groups, reversible and irreversible:

Examples of Reversible Dementia:

- Brain Tumor
- Depression
- Dehydration
- Surgery
- Metabolic Disorders such as Thyroid, anemia
- Side effects of medications
- Infections
- Circulatory disorders
- Nutritional deficiencies
- Malnutrition
- Substance abuse
- Head trauma
- Toxic factors such as carbon monoxide
- And others

Diseases that cause irreversible Dementia symptoms:

- Alzheimer's disease
- Picks disease
- Lewy Body disease
- Vascular dementia
- Huntington disease
- Creutzfeldt-Jakob disease
- And others

Alzheimer's – Dementia Care: Simple tips

Caregivers, family members, and visitors must take patience and flexibility. To reduce frustration, consider these tips for daily tasks- from limiting choices and reducing distractions to creating a safe environment.

Reduce frustrations. A person who has Alzheimer's/Dementia may react with frustration, agitation and even aggression when once-automatic tasks become difficult or impossible.

Schedule wisely. Establish a routine to make each day more predictable and less confusing. Schedule the most difficult tasks, such as bathing or medical appointments, for the time of day when your resident tends to be the most calm and agreeable.

Take your time. Expect things to take longer than they used to. Schedule more time to complete even simple tasks so that you don't need to hurry the resident.

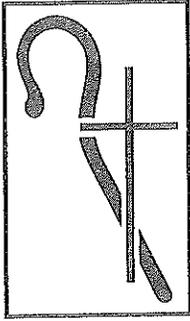
Involve the resident. Allow the resident to do as much as possible with the least amount of assistance. For example, perhaps the resident can dress alone if you lay out the clothes in the order they go on.

Limit Choices. The fewer the choices, the easier it is to decide. For example, provide two outfits to choose between, not a closets full of clothes.

Provide simple instructions. When you ask to do something do it one step at a time.

Reduce distractions. Turn off the TV and minimize other distractions at mealtime and during conversations so that the resident can better focus on the task at hand.

Be flexible. The ability to function and cope will steadily decline. It may even vary from day to day. Stay flexible and adapt your routine.



GOOD SHEPHERD LUTHERAN COMMUNITY

Daily Room Rates Effective July 1, 2015

The mission of Good Shepherd Lutheran Community is to serve the social, physical, and spiritual needs of God's people in a manner of love, dignity, and respect reflective of Jesus Christ, the Good Shepherd.

Description	Semi-Private	Private	MDS Levels
Level 1	190.00	200.00	101, 102, 103, 104, 105
Level 2	205.00	215.00	110, 111, 112, 113, 114, 115, 120, 121, 122, 123, 180
Level 3	231.00	241.00	130, 131, 132, 133, 140, 141, 142, 143, 144, 145
Level 4	262.00	272.00	150, 151, 152, 160, 161, 162, 163
			(Care Level 5) 170, 171, 172

An option is available to convert a semi-private room into a private room. The fee is an additional \$100 per day.

The State of Nebraska requires all residents to be assessed with a tool referred to as Minimum Data Sheet (MDS). This tool is used exclusively throughout the State of Nebraska and takes into consideration all the care and needs of each individual resident. The results of this specific tool determine the level and the corresponding daily rate to be charged. The MDS is done upon admission, quarterly, annually, upon a significant change, and for Medicaid or Medicare required assessments. Results of this assessment can change as care needs change, which cause the room rate to increase or decrease accordingly.

The rates listed above include room, board, required nursing care and routine services. Also included in the daily rates are cable television, bed alarms, sit/stand alarms, security alert, special mattress/pad, catheters, oxygen, medical supplies, transportation for medical reasons, wheelchair and walker usage, admission fee, and dietary supplements.

The previous rate increase was effective as of November 1, 2010.