

Colorado Medical Directors Association Monthly Meeting
January 3rd, 2012

Location – CDPHE: First Floor: Sabin Room

Present: Lee Anneberg, Claire Baumgartner, Roger Bermingham, John Dunkle, Fred Feinsod, Greg Gahm, Jane Garramone, Sheldon Goldberg, John Hiner, Shelley Hitt, Chris Horton, Alexander Jacobs, Herbert Jacobs, Stanley Kerstein, David Koets, Cari Levy, Paula Mattison, Jennifer McCants, Nancy McDonald, Alan Miller, William Solomon, Mike Todd, Pam Tyrrell, Jodie Walker

Present by phone: Joe McGarry

12:00-12:10pm: **Updates and reminders**

1. LTC Advisory Meeting Schedule:

<http://www.cdphe.state.co.us/hf/LTCA/LTCAindex.html>.

There was a LTC Advisory meeting this morning. Meetings are held alternate months on first Tuesday at 8:00 a.m. Dr. Alex Jacobs shared the following information from the meeting. MDS information has been excluded until recently. There is an important meeting of the Colorado Culture Change Committee on January 27th. Shelley Hitt gave important information regarding bill on mandatory reporting on elder abuse. Information was also shared on Medicaid mental health patients. The Ombudsman's office will get information on the IBR process. Staff needs to know what the different types of abuse are. Education of staff is needed. Because there are sometimes language barriers, it is important for reinforcement to make sure types of abuse are clear. Suggestion was made to put a list on the back of the staff identity badge listing types of abuse. Some facilities will do some type of post test to show that the staff member actually learned from the training. New hires should be trained upon hiring. Medical Directors should ask questions ahead of surveyors.

Some facilities are running 14 to 15 months late in receiving surveys. Surveys are averaging about six days; average number of tags is 11. Arizona is behind in their complaint surveys. Arizona now has an option of handling surveys in normal surveyor fashion or be given a plan of investigation and data collection, and the facility will do its own; then a revisit by surveyor, give them the results. No one at the meeting thought it was a bad idea. Discussed outbreak of disease at facilities; how to handle them and muster help from the state. With gastro diseases, an average of 30% patients and 15% staff get the disease. Presently there are six outbreaks of neuro virus.

2. Our website is <http://cmda.us>: hosted by GoDaddy, with the help of our new webmaster Bobby Kennedy. You can reach him at Support@CMDA.US (but please let Dr. Anneberg know before you ask him to place something new on the website).

3. MOST Website: <http://www.coloradoadvancedirectives.com>

4. CFMC Hospital Safety website:
http://www.cfmcc.org/hospital/hospital_index.aspx
5. CFMC Nursing Home Quality Improvement website:
http://www.cfmcc.org/nh/nh_index.aspx
6. CFMC Care Transitions:
http://www.cfmcc.org/provider/provider_care-transitions.aspx

12:10-1:00pm **Presentations**

1. Health Facilities Updates. **Jennifer McCants**, Interim Deputy Director
Jennifer.McCants@state.co.us 303-692-2899.

Jo Tansey is now the LTC Complaints Supervisor.

They will go live with IBR process this month. The person in charge will be familiar with long term care but be independent from the organization; could be past employee.

2. Update on Influenza: **Dr. Greg Gahm**
Same three strains as last year are showing up. It has been a very mild season thus far.

3. AMDA Update: Discussion of Dr. Unrein's Resolution of Definition of a Physician

Dr. Chris Unrein presented a resolution to AMDA last year. At the last CMDA meeting, it was agreed that Dr. Unrein should present this resolution proposal to CMDA members to be discussed and submitted for approval before it be presented on Colorado's behalf to AMDA. Dr. Unrein sent an email to Dr. Anneberg saying that the state of Maryland is working on their version and are asking for his help. When Maryland comes up with something, he will pass it on to the Colorado delegation. This has to do with only medical doctors being allowed to use the title of Dr. in a facility. There are now doctors of nursing, dentistry, podiatry, physical therapy, etc. This is complicated as people from other parts of the world don't have same initials after their name.

4. Scientific Presentations:
 - a. *Calcium Supplements with or without vitamin D and Risk of Cardiovascular Events: Reanalysis of the Women's Health Initiative Limited Access Dataset and Meta-Analysis* BMJ 2011;342:d2040

Dr. Greg Gahm – BMJ article from 2011 looked at calcium and osteoporosis. 61,000 women were followed for up to 19 years. Conclusion was after first quintile there were good results, but after that, no significant improvement. Standards are very different in

different countries. Improvement is shown in bone density but not in fractures. Vitamin D may be the more important component. Phosphonates are over-given. Multi-vitamins are often shown to not be useful and can sometimes be harmful.

Dr. Bill Solomon — it looks like in third quintile, improvements from fractures was shown.

Mortality rate increased in women who are taking supplements and calcium.

Dr. Herb Jacobs – It depends on which medications the patients are on and which company supplements come from. There is large variability.

Dr. Lee Anneberg – Rates of lung cancer go up on smokers who take lots of vitamins.

Dr. Fred Feinsod – Women's Health Initiative was the biggest hold out. It did not take into account those who were taking calcium and Vitamin D prior to the study. It only studied those who were not. Table 2 shows the difference. Figure 2 meta-analyses. Placebo was effective against stroke.

The primary question is: should we be giving these pills to the elderly? Constipation comes with them. Diet should be the primary supplement. **Dr. John Hiner** said he thinks study is inconclusive; it doesn't give good enough reason not to give calcium. The worry is still there about osteoporosis and falling.

Dr. Bill Solomon questioned the validity of the study in making dosage policy. Ambulatory patients are more likely to make the difference.

- b. *Clinical Update on Nursing Home Medicine: 2011;12:615-626*
JAMDA Barbara Messinger-Rapport and John Morley editor of AMDA

Dr. Lee Anneberg: This update is from the AMDA website and was done by top notch people. The update comes out yearly. It gives excellent reviews. There is an excellent article on Pharmacological Osteoporosis Management. He recommends the website for excellent articles.

1:00 - 1:30pm **CMDA Meeting**

- **Plans for 2012: Update from Dr. Gahm**
Agenda is coming along well. Still have some presenter slots to be filled. We will offer CME Credits. Dr. Lee Anneberg and Sandi Jasper will work on the application process.

- **Planning for 2012: new President and new Treasurer**
We need someone to come forward to be the new CMDA President. Dr. Roger Bermingham is willing to stay on as Treasurer but cannot be at the annual meeting. Dr. Anneberg said he will try to get his signature on the account in order for there to be someone in the metro area authorized to sign checks.

Dr. John Hiner agreed to be a proposed delegate at the AMDA conference. Other proposed delegates are Dr. Lee Anneberg, Dr. Leslie Eber, Dr. Mike Todd, and Dr. Herbert Jacobs (pending AMDA membership).

Next Meeting: first Tuesday, at noon, February 7th, 2012