

Community Living Center (CLC)





CLC

• ??? Community living center

Community Living Center Mission Statement

The Mission of the VA GLA Long-Term Care Service is to improve Veterans' health and quality of life, while providing comfort and dignity in a home-like environment through excellence in clinical care, education, and research.

CLC Services Provided

- Skilled Nursing Service
- Rehabilitation Services
- Complex medical services
 - IV therapy, diabetic management, PICC lines, tracheotomy care, enteral tube feedings, wound care, XRT/chemotherapy and palliative care
- Restorative Nursing program
- Respite Care Services

Patient Demographics

- Gender
 - -Male: 147
 - Female: 2

Age Range:

-Average age: 74

-45-64: 31

-65-84: 72

-85+: 35

CLC

- 2 Locations
 - North Hills (Sepulveda CLC)
 - G-35 CLC
 - G-63 CLC
 - G-35H (Hospice) (Geriatric fellows are not on call for G-35 Hospice)
 - 14 beds for hospice care
 - West Los Angeles (WLA CLC)
 - 213-2, 215-2, 215-3 West wing
 - Covid Recovery Unit (CRU) 215-3 East wing
 - Note fellows do NOT take call for the CRU

WLA CLC

- Three units in two buildings
 - Building 213: ward 213-2
 - Building 215: ward, 215-2 and 215-3
- Each unit is staffed for about 51 residents.
- 213-2 is wander guard unit
 - An alarm system that alerts the nursing station that a resident is near a CLC exit
- Contact # for the WLA CLCs
 - -310-478-3711
 - Extension starting w/either 4XXXXor 8XXXX or 5XXXX

Sepulveda CLC

- One unit in Building 99 (G-35 and G-63)
 - About 20 miles (405N) from WLA VA campus
 - About 50 patients
- Contact # for Sepulveda CLC
 - **-** 818-891-7711
 - Extension starting with 3XXXX

Treatments in the CLC

Treatment	WLA	Sepulveda
IV fluids ≤100cc/hr	+	+
IV antibiotics (2 max)	+	+
IM/SC Medications	+	+
Nebulizers	+	+
Suction ≥ Q4hs	+	+
Tracheostomy Care	+	
Post Dialysis Care	+	

Operations

- No ACLS in the CLCs
- No crash carts
 - Emergency carts
 - Suction
 - AED
- Labs can be ordered for the AM (to be drawn M-F AM)
 - Weekend draws
 - Sepulveda CLC (Monday/Thursdays)
- No IV push medications
- No physical restraints/sitters

CLC Longitudinal Rotation

- Follow 2-3 CLC residents for the year
 - Comprehensive monthly medical assessments
 - Please follow up on tests/labs that you order
 - Huddle with CLC Attending monthly
 - Discuss medical issues, plan of care and topics related to nursing home care
 - Please alert CLC attending when you are on vacation
 - CLC Attending to complete the monthly assessments

CLC Call

- On average one-two weekends/ month
 - (3 to 6 months)
- On average 2-3 Weekday calls (4:30pm-8am)
 depending on rotation schedule
- Telephone call
 - Please ensure that you will be in pager range (50 miles)
 - If not please switch call or give a # you can be reached
 - Please give back up # (cell phone)
- Citrix access is highly recommended

VA High Reliability Organization (HRO) Principles

Characteristics of high reliability organizations (HROs)

- preoccupation with failure
- commitment to resilience
- sensitivity to operations
- a culture of safety

Life-Sustaining Treatment Decisions Initiative (LSTDI)

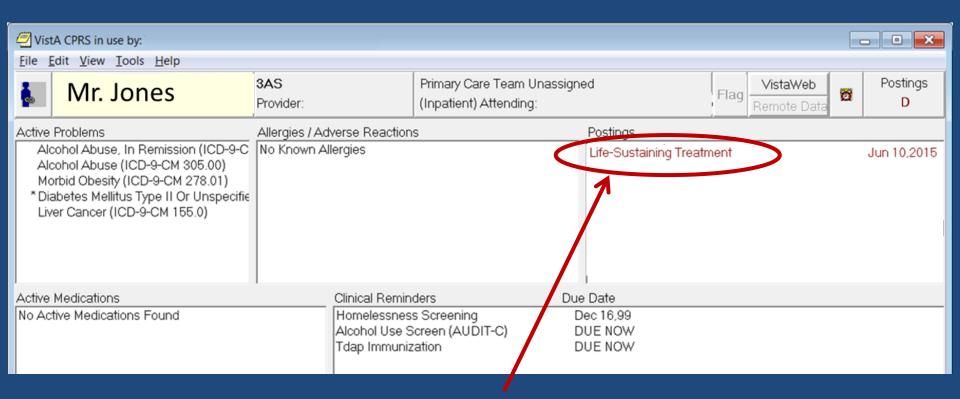
National quality improvement initiative to promote personalized, proactive, patient-driven care for Veterans with serious illness

Desired outcomes:

The values, goals, and life-sustaining treatment decisions of Veterans with serious illness are proactively elicited, documented, and honored

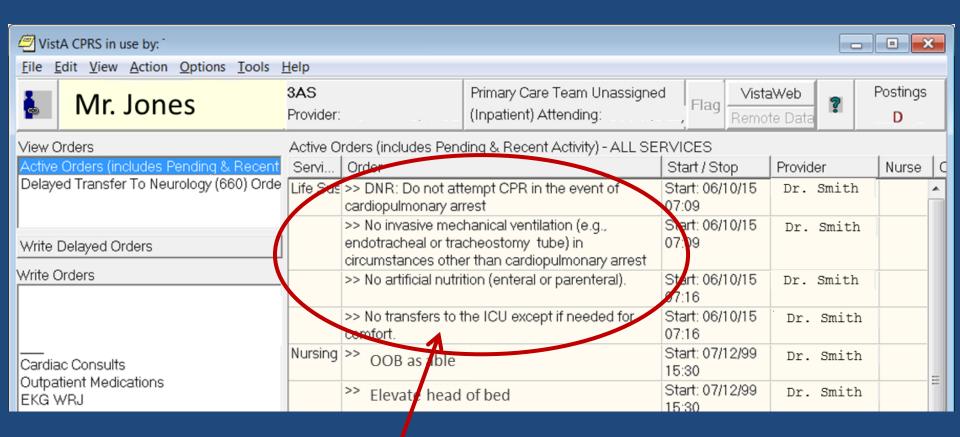
- LST Progress note
 - To document goals of care conversations
 - Accessible from CPRS Cover Sheet
 - Launches LST orders

LST Progress Note



- Accessible from the CPRS Cover Sheet
- Does not have to be re-written on each admission if there are no changes to patient's goals or preferences

LST Orders



- Default to the top of the CPRS Orders tab
- Durable do not auto-discontinue upon discharge or transfer

- Common clinical scenarios while on call
 - Fever, pain, falls, critical lab values, AMS
- Fellow should not be involved in screening or accepting prior or new CLC patients
 - If contacted on nights/weekend regarding the above, have them contact the CLC back up physician or Dr. Sohn

- Change in condition
 - IV fluids/IV antibiotics/breathing treatments can be initiated
 - If higher level of care is needed or patient is clinically unstable, transfer to ER
- Transfers to ER
 - If residents are clinically unstable have nurses call 911
 - CLC RN to give hands off/report to ER

- Refusal of Transfer to a Higher level of Care
 - CLC fellow on call to contact the CLC Back up attending or CLC Medical Director
 - Discussion and documentation of incident
 - Capacity for refusal
 - Goals of care/LST note
 - Involvement of mental health for capacity evaluation if necessary
 - Involvement of family/significant others if needed or appropriate

- Deaths
 - DNR residents
 - RN can pronounce patients
 - Full Code residents
 - Paramedics can pronounce residents
 - On call MD may be asked to inform NOK of death
 - For specifics have NOK call CLC to speak to charge nurse
 - May need to have families speak to primary providers in AM

- Telephone orders
 - For urgent/emergent situations where CPRS access if not immediately available
 - Initiating treatments, interventions, ordering mediations, tests, transfer orders to ER
 - If problems with nursing staff taking a telephone order for an urgent/emergent situation
 - Contact Dr. Linda Sohn
 - If it is not an urgent/emergent situation
 - The order can likely wait until the AM

Pass Orders

- Pass orders off-station (off VA grounds) passes (day and overnight) should be approved by the primary CLC medical providers during normal working hours to ensure proper evaluation:
 - Veteran's clinical stability including cognition
 - Veteran's readiness (Does the veteran have everything he/she needs to go out on pass?)
 - Family/friend/significant other/conservator's involvement and acceptance of responsibilities (contact phone number, transportation, timely return, emergency procedures)
- For exceptions where pass orders for weekends are needed contact back up CLC physician or Dr. Linda Sohn

Continuity after Weekend Call

 Communicate to the primary providers in the CLC regarding issues that came up during the weekend call

Back-up

- Dr. Linda Sohn
 - CLC Medical Director
 - **-** 310-903-9692
 - Do not text, leave a voice message!
 - Don't hesitate to call if you have any questions or concerns!
 - If she doesn't answer, leave a message
 - She will get back to you (She has a life[⊕])



The Wave