

# ICP Consultant Connection

ICP, Inc. • Tiffin, Ohio • Mason, Ohio • Sharpsville, Pennsylvania

## What is Eczema

Irene Sours, RN, WCC, Nurse Consultant

Eczema is a nonspecific term for many types of skin inflammation (dermatitis). There are different categories of eczema, which include allergic, contact, irritant, and nummular eczema, which can be difficult to distinguish from atopic dermatitis (AD). Atopy is a medical syndrome that includes three associated conditions that tend to occur in the same individual: atopic dermatitis, inhalant allergies and asthma. All three components need not to present in the same individual simultaneously.

Atopic dermatitis is a disease that causes itchy, inflamed skin that is not contagious. Appropriately 31.6 million people in United States have symptoms of eczema or eczematous conditions, and 17.8 million for atopic dermatitis, considered a more form of eczema.

Atopic dermatitis almost always begins in childhood, usually during infancy and fades during childhood though people with AD may have lifelong tendency for “flare-ups.”

Treatment goal is to relieve discomfort by controlling the signs and symptoms of dryness and itching.

### Treatment options:

- Emollient moisturizer-free of additives, fragrances, perfumes; lotions have higher water content and tend to evaporate quickly.
- Emollients should be used at least twice a day all over the skin. They are best applied within three minutes after a shower or bath to maximize their moisture retaining effect.
- Corticosteroid creams-tend to rapidly and effectively reduce inflammation, which relieves itching.
- Non-soap cleansers, such as Cetaphil, or moisturizing soaps such as Dove, are recommended.
- Researchers have found that using both a topical corticosteroid and moisturizer decreases this signs and symptoms of AD better than use of topical corticosteroid alone. Studies also have found that proper use of a moisturizer along with a topical corticosteroid can reduce the amount of corticosteroid needed. This suggests that using an appropriate moisturizer may reduce the need for long-term corticosteroids.

For more information contact your nurse consultant.

<https://nationaleczema.org/eczema/types-of-eczema/atopic-dermatitis-2/>  
<http://www.skinsight.com/adult/atopicDermatitisEczema.htm>

## ICP Of Tiffin And Mason Awarded Accreditation From The Joint Commission

ICP of Tiffin and Mason, Ohio, announced that it has earned The Joint Commission’s Gold Seal of Approval® for Home Care Accreditation by demonstrating continuous compliance with its performance standards. The Gold Seal of Approval® is a symbol of quality that reflects an organization’s commitment to providing safe and effective care.

ICP underwent rigorous on-site surveys in July 2015. During the surveys, compliance with standards reflecting key organization areas was evaluated, including the provision of care, treatment and services, emergency management, human resources, individual rights and responsibilities, and leadership. The accreditation process also provided ICP with education and guidance to help staff continue to improve its program’s performance.

Established in 1988, The Joint Commission’s Home Care Accreditation program supports the efforts of its accredited organizations to help deliver safe, high quality care and services, including services provided in the long term care setting.

“When individuals engage a home care provider they want to be sure that provider is capable of providing safe, quality care,” said Margherita Labson, RN, M.S., executive director, Home Care Accreditation program, The Joint Commission. “As the home care setting becomes increasingly popular, it is important that home care providers are able to demonstrate that they are capable of providing safe, high quality care. Accreditation by The Joint Commission and the gold seal serve as an indication that the organization has demonstrated compliance to these recognized standards of safe and quality care.”

“Our Tiffin and Mason offices are pleased to receive accreditation from The Joint Commission, the premier health care quality improvement and accrediting body in the nation,” added Martha Somers, Performance Improvement Coordinator. “Accreditation by The Joint Commission serves as an indication that we have demonstrated compliance to these recognized standards of safe and quality care. Our staff continues to work together to strengthen the continuum of care and deliver optimal services to our customers.”

## Contents

CDC announces \$20 million to fight prescription drug abuse .....	2
Flu Season Is Off To A Slow Start: CDC .....	2
The Power of Language .....	3
Jody Bouillon of ICP, Inc. Awarded CEAL Certification.....	4

## CDC announces \$20 million to fight prescription drug abuse

The Centers for Disease Control and Prevention recently announced a new program, “Prescription Drug Overdose: Prevention for States,” which aims to invest in 16 states, including Ohio, currently battling an epidemic of prescription drug overdoses. The program will commit \$20 million in FY2015 and is part of the U.S. Dept. of Health and Human Services’ Opioid initiative.

“The prescription drug overdose epidemic requires a multifaceted approach, and states are key partners in our efforts on the front lines to prevent overdose deaths,” said HHS secretary Sylvia M. Burwell said. “With this funding, states can improve their ability to track the problem, work with insurers to help providers make informed prescribing decisions, and take action to combat this epidemic.”

Under the program 16 states — Ariz., Calif., Ill., Ky., Neb., N.M., N.C., Ohio, Okla., Ore., Pa., R.I., Tenn., Utah, Vt. And Wis. — will receive between \$750,000 and \$1 million in funding each year for the next four years. The money will go to enhance prescription drug monitoring programs, implementing community-level prevention, responding to overdose issues, developing communications campaigns or surveillance systems and working with providers, health systems and insurers to discuss how to make informed prescribing decisions around pain medication. In the coming year’s budget from the President, there is a request from Burwell that will seek funding for a 50-state prevention and abuse surveillance program.

In addition to combatting prescription drug abuse, funding also will go toward understanding heroin overdoses and the connection between opioid abuse and heroin use. In 2013, prescription opioid overdoses killed 16,000 people, and the number of prescriptions has quadrupled since 1999 despite no shift in the amount of reported pain among U.S. patients, the CDC said.

“The prescription drug overdose epidemic is tragic and costly, but can be reversed,” CDC director Dr. Tom Frieden said. “Because we can protect people from becoming addicted to opioids, we must take fast action now, with real-time tracking programs, safer prescribing practices, and rapid response. Reversing this epidemic will require programs in all 50 states.”

## Flu Season Is Off To A Slow Start: CDC

<http://www.msn.com/en-us/health/medical/flu-season-is-off-to-a-slow-start-cdc/ar-BBmqSA5?li=AA51YJ>

The weather outside might be fearful, but the flu season is thankfully tame so far, according to the Centers for Disease Control and Prevention. Recently, via its weekly FluView report, the CDC announced that the “overall seasonal influenza activity is low across the United States.”

In the week of October 17, only 1.4 percent of outpatient visits observed through the CDC’s Influenza-like Illness Surveillance Network (ILI<sub>net</sub>) could be chalked up to influenza-like illness. While that’s a slight rise from the 1.2 percent seen the previous week, it’s still a far cry from the national baseline of 2.1 percent traditionally expected. Additionally, as of October 17, there have been no cases of pediatric deaths attributable to flu this season so far.

Ordinarily, flu season in the United States typically begins in October, peaks from December to February, and runs out of steam by May. As the CDC notes, though, that timing can vary dramatically from year to year, so even an early indication of calm may not predict its eventual toll on human health.

Flu is also still more than capable of taking lives in the lull of a flu season. During the week of October 11, 5.7% of all deaths reported through the 122 Cities Mortality Reporting System were directly linked to pneumonia and influenza, though that’s still below the epidemic threshold of 6 percent.

For these reasons, the CDC and other health organizations advise that anyone over the age of 6 months receive an annual flu shot as early as in the season as possible. Though they can’t offer complete protection from influenza, they’re still more than worth the trouble, especially for those with weaker immune systems such as the very young and the elderly.

While those populations have to worry the most about the deadlier effects of flu, flu is a burden that everyone takes on. A 2007 study in Vaccine found that annual flu outbreaks cost us more than \$10 billion in direct medical costs and close to \$90 billion when you also account for the loss of life and missed job earnings.

In other words, get your flu shot. You’ll be doing everyone, including yourself, a big favor.

# The Power of Language

submitted by: Lori Earnhart  
Director of Sales and Marketing, ICP, Inc.

Language plays a crucial role in shaping the culture of aging and aging services in our society. The words we use when talking to and about older persons denote how they are valued, what is expected of them, and where they stand with respect to the speaker. What a person is called creates expectations about their behavior and sets the limits on how much growth and individual identity is deemed possible by those who serve them. The impact of new language is seen as a way of interacting that goes deeper into the core of peoples' life experience.

The new language will have a positive effect on how elders feel about themselves, how they think, and how functionally able they can be in daily life. Words do indeed make worlds. Part of transforming long-term care practice is finding new words to describe staff, programs, and the industry itself. The language of long-term care belongs to all of us—not only the “us” who work in this field but, at least as importantly, the elders and others with disabilities who require our services, their families, and the public.

<b>Actions</b>	
<b>Old Words</b>	<b>New Words</b>
Transport	Assist to . . . .
Admit/Place	Move in
Toileting	Using the bathroom
Baby-sit	Resident interaction
MIA, elopement	Taking a walk, left building
Allow	Help, facilitate, welcome
Discharge	Move out

<b>People</b>	
<b>Old Words</b>	<b>New Words</b>
The Elderly	Elders, older adults
Disabled	Person needing support
New Admit	Neighbor, offered a home here
Resident	My Friend
Bed (100 Bed Facility)	100 people live in this home
Wanderers	People who like to walk

<b>Things</b>	
<b>Old Words</b>	<b>New Words</b>
Activities	Meaningful things to do
Nourishment	Snack
Soft Food	Chopped Food
Bibs	Napkin, clothing protector
Diaper, Pull-ups	Briefs, panties, attends, pad
Hospital gown	Pajamas, nightgown

<b>Places</b>	
<b>Old Words</b>	<b>New Words</b>
Facility, Nursing Home	Care Community, Home
Nurses' Station	Work Area, Support Room
Storeroom	Pantry
Unit	Neighborhood
Ward, Wing	Village, street, household
Bath	Spa

<b>Attitudes</b>	
<b>Old Words</b>	<b>New Words</b>
Long-Term Care Industry	Long-Term Care Community, Profession
Care Plan Problem	Resident Strength
Problem	Challenge/opportunity
That's not my job	I'll take care of that
Sit down, you'll fall	Let's Walk



*The Advocate of Not-For-Profit  
Services For Older Ohioans*



Web: [www.icppharm.com](http://www.icppharm.com)  
email: [icp@icppharm.com](mailto:icp@icppharm.com)

**Tiffin Main Line: 800.228.8278**

**Tiffin Pharmacy: 877.447.5539**  
Fax: 800.325.9826

**Business Office: 800.252.1679**  
Fax: 800.338.8593

**Medical Supplies: 877.228.8278**  
Fax: 800.208.6809

**ICP Southern Region: 866.544.5433**  
Fax: 513.573.9628

**PA Pharmacy: 888.203.8965**  
Fax: 888.431.4924

**Pharmacy Services:**

*Subacute Care  
Long Term Care  
Assisted Living  
Alternative Living  
Correctional Facilities*

**Consulting Services:**

*Consultant Pharmacists  
Nurse Consultants  
Respiratory Therapists  
Medical Record Experts  
Reimbursement Authorities  
MDS Specialists  
Wound Care Certified Consultants*

**Additional Services:**

*Respiratory Equipment and  
Supplies  
Medicare Part B Billing  
Inventory Bar Coding Program  
Enteral / Nutritional Program  
Medical Supplies  
Incontinence Products  
Wound Care Products*

**Mission Statement:**

*ICP is committed to exceeding  
our customers' and employees'  
expectations through quality  
health-care service, continuous  
education, and effective  
communication.*

## **Jody Bouillon of ICP, Inc. Awarded CEAL Certification**

Jody Bouillon, Director of Medical Supplies at ICP, Inc. has successfully completed the Certified Executive for Assisted Living (CEAL) certification program offered through the Ohio Centers for Assisted Living (OCAL), and has passed the NAB (National Association of Long Term Care Administrator Boards) Residential Care/ Assisted Living Administrators Examination to earn the CEAL designation.

CEAL is a comprehensive certification program designed to elevate the skills and professionalism of assisted living administrators in Ohio by providing a national certification along with Ohio's most comprehensive state specific training.

The CEAL Training Course is a combination of interactive classroom training, guided self-study and hands-on clinical learning.

Following the 4-day CEAL Training Course, candidates must complete the NAB Examination to be awarded the CEAL designation. The Ohio CEAL is awarded to candidates based on 100% class participation including completion of in-class quizzes, testing, and successful passage of the NAB Examination.

Since 2013, OCAL has trained more than 100 students nationally who have earned their CEAL designation. The program is designed for experienced assisted living executives looking for a competitive edge in the marketplace, or those interested in obtaining the necessary skills to successfully lead an assisted living building in Ohio or nationwide.

Although Ohio does not currently require certification for assisted living administrators, CEAL has aligned its program curriculum with the NAB Residential Care / Assisted Living Administrators Licensing Examination so that credentialed assisted living executives in Ohio meet national competency standards and are well positioned for any future changes to Ohio's RCF administrator requirements. For more information about CEAL, please contact the OCAL at 614.436.4154.