

173-14-01**Definitions.**

As used in this chapter:

(A) "Action plan" means a plan developed by an ombudsman in conjunction with the consumer as part of the complaint-handling process. The plan includes strategies and actions to be taken by the representative including target dates.

(B) "Advocacy" means planning, preparing, and conducting community education programs, training events, and legislative and other public relations contacts; influencing the formation, implementation, and outcome of public policy affecting consumers; representing consumers, both individually and collectively, to effect a positive change.

(C) "Affiliation" means being or having a parent, child, sibling, spouse, or household member who is a board member of, a consultant to, or has another relationship by which they may profit from a provider.

(D) "Area agency on aging" (AAA) means an entity ODA designates to be an AAA under rule 173-2-04 of the Administrative Code.

(E) "Client" means the consumer of long-term care services for whom an ombudsman representative has a case.

(F) "Clock hour" means a period of sixty minutes.

(G) "Complaint case records" means those confidential records kept by the office of the state long-term care ombudsman for complaints handled by the program.

(H) "Complaint handling" means all the processes used to handle a complaint, including intake, screening, opening a case, assigning, investigating, attempting resolution, referring, performing follow-up activities, closing a case, and documenting and record keeping.

(I) "Complex complaint" means a complaint involving a greater depth of investigation, including research and multiple contacts with provider staff or consumers, and which require the development of an action plan as a part of opening a case.

(J) "Community-based long-term care services" means health and social services provided to persons in their own homes or in community care settings, and includes any of the following:

(1) Case management.

(2) Home health care.

- (3) Homemaker services.
 - (4) Chore services.
 - (5) Respite care.
 - (6) Adult day care.
 - (7) Home-delivered meals.
 - (8) Personal care.
 - (9) Physical, occupational, and speech therapy.
 - (10) Transportation.
 - (11) Any other health and social services provided to persons that allow them to retain their independence in their own homes or in community care settings.
- (K) "Consumer" means a resident of a long-term care facility or the recipient of community-based long-term care services. Where appropriate, the term includes a prospective, previous, or deceased resident or recipient.
- (L) "Core ombudsman services" means complaint handling; providing general information; providing advocacy services; providing public or community education and information; monitoring the implementation of laws; providing professional development for representatives of the office; establishing a presence in long-term care facilities with consumers and with long-term care providers; managing volunteer resources; program supervision; and program administration.
- (M) "Designated entity" means a sponsoring agency designated to provide ombudsman services in a particular region of the state.
- (N) "Direct supervision" means in-person instruction and observation followed by discussion of a representative's activity within five business days after the activity was performed.
- (O) "Follow-up activities" means site visits, phone calls, letters, or interviews completed by an ombudsman after investigation and attempted resolution of a complaint.
- (P) "General information" means researching and providing information on matters such as entitlement and public benefits programs, access to long-term care services, providing information to prospective consumers on the selection of long-term care services

using verified and objective information, and referrals to other sources of assistance in those situations where a case is not being opened for complaint handling.

(O) "Immediate family member" means a member of the household or a relative with whom there is a close personal or significant financial relationship.

(R) "Legal representative" means a court-appointed guardian, conservator, attorney-in-fact, or executor or administrator of the estate of a deceased consumer who can give consent or authorization in the matter.

(S) "Long-term care facility":

(1) Except as otherwise provided in paragraph (S)(2) of this rule, "long-term care facility" includes any residential facility that provides personal care services for more than twenty-four hours for one or more unrelated adults, including all of the following:

(a) A "nursing home," "residential care facility," or "home for the aging" as those terms are defined in section 3721.01 of the Revised Code.

(b) A facility authorized to provide extended care services under Title XVIII of the "Social Security Act," 49 Stat. 620 (1935), 42 U.S.C. 301 including a long-term acute care hospital that provides medical and rehabilitative care to patients who require an average length of stay greater than twenty-five days and is classified by the centers for medicare and medicaid services as a long-term care hospital pursuant to 42 C.F.R. 412.23(e).

(c) A county home or district home operated pursuant to Chapter 5155. of the Revised Code.

(d) A residential facility licensed under section 5119.34 of the Revised Code that provides accommodations, supervision, and personal care services for three to sixteen unrelated adults or accommodations and personal care services for only one or two adults who are receiving payments under the residential state supplement program established under section 5119.41 of the Revised Code.

(e) A facility approved by the veterans administration under section 104(a) of the "Veterans Health Care Amendments of 1983," 97 Stat. 993, 38 U.S.C. 630 and used exclusively for the placement and care of veterans.

(2) "Long-term care facility" does not include a residential facility licensed under section 5123.19 of the Revised Code.

(T) "Long-term care services" means the services provided by long-term care facilities or provided by community-based long-term care providers.

(U) "ODA" means "the Ohio department of aging."

(V) "ODIS" means "ombudsman documentation and information system for Ohio."

(W) "Office" means the state long-term care ombudsman, the ombudsman's staff and volunteers, and the staff and volunteers of designated regional long-term care ombudsman programs.

(X) "Older Americans Act" means the "Older Americans Act of 1965," 79 Stat. 219, 42 U.S.C. 3001, as amended by the "Older Americans Act Reauthorization Act of 2016."

(Y) "Ombudsman services" means those core ombudsman services and optional ombudsman services provided by the office of the state long-term care ombudsman.

(Z) "Optional ombudsman services" means any service, other than a core service, approved by the state long-term care ombudsman.

(AA) "Personal care services":

(1) Except as otherwise provided in paragraph (AA)(2) of this rule, "personal care services" means services including, but not limited to, the following:

(a) Assisting consumers with activities of daily living.

(b) Assisting consumers with self-administration of medication, according to rules adopted under section 3721.04 of the Revised Code.

(c) Preparing special diets, other than therapeutic diets, for consumers pursuant to the instructions of a physician or a licensed dietitian, according to rules adopted under section 3721.04 of the Revised Code.

(2) "Personal care services" does not include "skilled nursing care" as defined in division (A)(4) of section 3721.01 of the Revised Code.

(3) A facility need not provide more than one of the services listed in paragraph (AA) (1) of this rule to be considered to be providing personal care services.

(BB) "Provider" means the facility or community-based entity providing long-term care services and any corporation, partnership, or person operating the facility or entity.

- (CC) "Provider orientation" means structured observation, including instruction in and observation of basic nursing care or personal care services and long-term care provider operations and procedures.
- (DD) "Resident" means a resident of a long-term care facility and, where appropriate, includes a prospective, previous, or deceased resident of a long-term care facility.
- (EE) "Recipient" means a recipient of community-based long-term care services, and where appropriate, includes a prospective, previous, or deceased recipient of community-based long-term care services.
- (FF) "Regional program," "regional long-term care ombudsman program," and "program" mean an entity, either public or private and nonprofit, designated as a regional long-term care ombudsman program by the state long-term care ombudsman.
- (GG) "Representative of the office of the state long-term care ombudsman," "representative of the office," and "representative," mean one of the categories of ombudsman whose duties are described in rule 173-14-03 of the Administrative Code.
- (HH) "Resolved" means a complaint was addressed to the satisfaction of the consumer or complainant.
- (II) "SLTCO" means the state long-term care ombudsman and may include state-office staff and volunteers to whom responsibilities are delegated.
- (JJ) "Sponsor" means an adult relative, friend, or guardian who has an interest in or responsibility for the welfare of the consumer, but is not a representative performing ombudsman services for the consumer. A sponsor is identified by a representative's reasonable effort to identify a sponsor chosen by the consumer.
- (KK) "Sponsoring agency" means the agency or organization that houses the state office or regional program.
- (LL) "State office" means the SLTCO and those staff members and volunteers of the SLTCO's office at the department of aging.
- (MM) "Verified" means it is determined after work (i.e., interviews, record review, observations, etc.), that the circumstances described in the complaint are generally accurate.

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