

Office of the State
Long-Term Care
Ombudsman
Annual Report
FFY 2014

Beverley L. Laubert
State Long-Term Care Ombudsman

Message from Beverley Laubert, State Long-Term Care Ombudsman



2014 was a great year to be an ombudsman! I don't have to look far to find highlights because I keep them close. The calendar year began with a tumultuous termination of a nursing facility's certification and my challenge to expect excellence of ombudsmen, providers, the system and for consumers. Shoes became the metaphor for the experience because of residents living in an Ohio nursing home without shoes or whose only wish was to have their own shoes. I recently talked with an ombudsman about his day and he said, "It's those shoes..." It was renewing to everyone involved – ombudsmen have a vital purpose!

Ohio is the top-performing state in the Advancing Excellence in America's Nursing Homes Campaign. That doesn't mean we have the most excellent nursing homes. It means that we have the highest number of nursing homes "participating" and we know that sustained participation leads to quality improvement. It is my honor to serve as the National Chair of the Advancing Excellence in Long-Term Care Collaborative.

Some ombudsmen actively assisted consumers through the MyCare Ohio Demonstration. In FFY 2014 more than 175 cases were opened, most of which were for home care consumers.

"Ombudsman" was heard and seen in radio and television throughout the state for six summer weeks. Our message inspired others to "Step Up" for elder rights.

- 10,125 complaints were closed, totaling 54,530 hours.
- 8,196 complaints were resolved or partially resolved.
- 339 complaints were received about home and community-based services – a 39% increase over 2013.
- 10,671 advocacy visits were made to long-term care facilities, totaling 16,562 hours. 5,288 of those visits were made by volunteers.
- 101 residents moved to the community with the help of an ombudsman transition coordinator.

We gained both federal and state approval to use funding to bring Music & Memory to Ohio nursing homes.

We advocated for standards for court-appointed guardians and improved regulations are expected very soon.

Finally, I'll end as I began. We received the following note from a guardian as an update on a resident that relocated when their nursing home closed:

"Transfer/move-in went smoothly. C is already calling it his home. On C's behalf, I would like to thank everyone who made it possible. Please think of C whenever you get discouraged/frustrated and know that what you do changes lives and is not just a job! If not for you, he would still be residing in substandard conditions. God bless each and every one of you!"

With appreciation for all that contributed to 365 days of making a difference....

RECOMMENDATIONS

Intermediate Remedies

Remedies are needed for licensed residential care facilities to encourage sustained compliance.

Current Ohio law allows for license revocation for residential care facilities that violate rules. A system of civil money penalties and suspension of admissions would provide intermediate tools to encourage homes to correct problems without more complex legal actions.

Standardized Regulatory Reports

Reports from inspections of adult care facilities should be standardized and produced in electronic formats for display on the Long-Term Care Consumer Guide.

Data files transmitted to the Department of Aging from the Ohio Department of Health allow for timely display on the web site for consumers to review. Similar processes for homes serving 3-16 residents would enhance opportunities for consumer choice.

Partnership to Improve Dementia Care

Ohio needs to achieve established goals for reduction of antipsychotics in nursing homes.

The Ohio Steering Committee is hoping that new initiatives being implemented in 2015 will demonstrate Ohio's commitment to achieving goals to reduce the use of antipsychotics in nursing homes.

In-Depth Review of the Office of the State Long-Term Care Ombudsman

The State Ombudsman will compile an advisory group to review all aspects of the Office in order to ensure the most efficient and effective structure and services statewide.

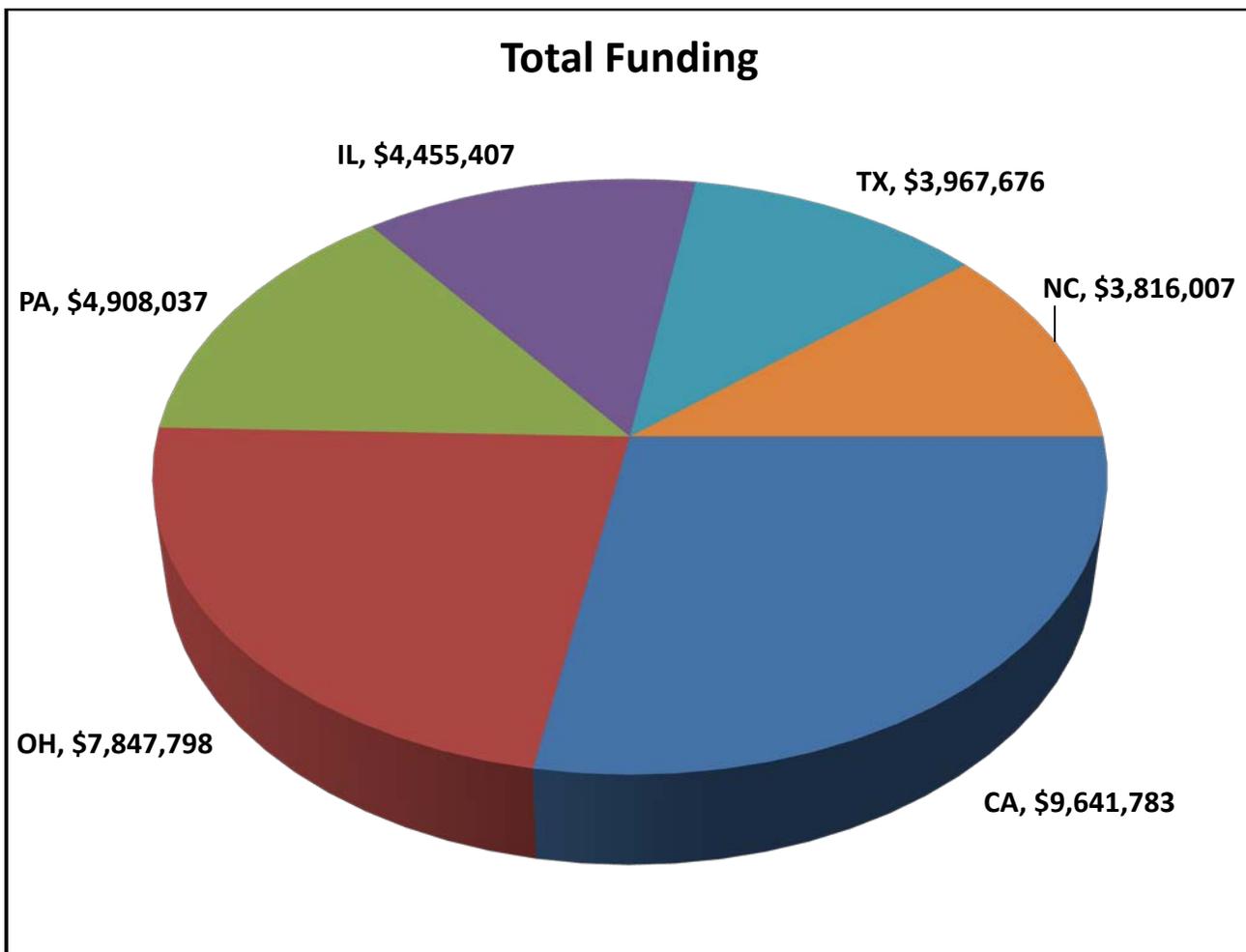
Recommendations for systems advocacy are limited and while the State Ombudsman will continue to set the systems advocacy agenda for the Office, the primary focus in the upcoming year will be leading a focused and comprehensive review of the Office.

MISSION & STRUCTURE

As mandated by the Older Americans Act and Ohio law, the mission of the Long-Term Care Ombudsman Program is to seek resolution of problems and advocate for the rights of home care consumers and residents of long-term care facilities with the goal of enhancing the quality of life and care of consumers.

The State Ombudsman designates **12 regional programs** and certifies about **270 volunteers** and **80 paid staff** statewide as representatives of the Office.

Each regional program is required to maintain a staffing ratio of one paid, full-time-equivalent ombudsman to every two thousand long-term care facility beds. This is a minimal standard that does not take into consideration significant variances in resources or the provision of ombudsman services related to home and community-based services. However, Ohio ranks second in the nation in total funding.



This table includes revenue generated from optional approved services (HOME Choice) but without the inclusion of HOME Choice funding, Ohio would still rank second in the nation.

PROGRAM ADMINISTRATION

OMBUDSMAN PERFORMANCE INCENTIVES

The State Ombudsmen invited five regional program directors of varying levels of experience to work with two State Office staff to explore ombudsmen performance measures. The group will submit recommendations to the State Ombudsmen in early 2015.

OMBUDSMAN DATA DASHBOARD

The State Office sought to develop a data display that would share the ombudsman mission and work with the aging network, policy-makers, funders, and the public. The data dashboard will be launched in early 2015 with a long-term goal to automate.

OMBUDSMAN DESIGNATION & SERVICE REVIEW

The State Office, with the help of Lean Ohio and some regional ombudsmen staff and program directors, embarked on a process improvement journey to improve the efficiency and effectiveness of our monitoring process. The new Lean process will be implemented for the 2015 designation cycle.

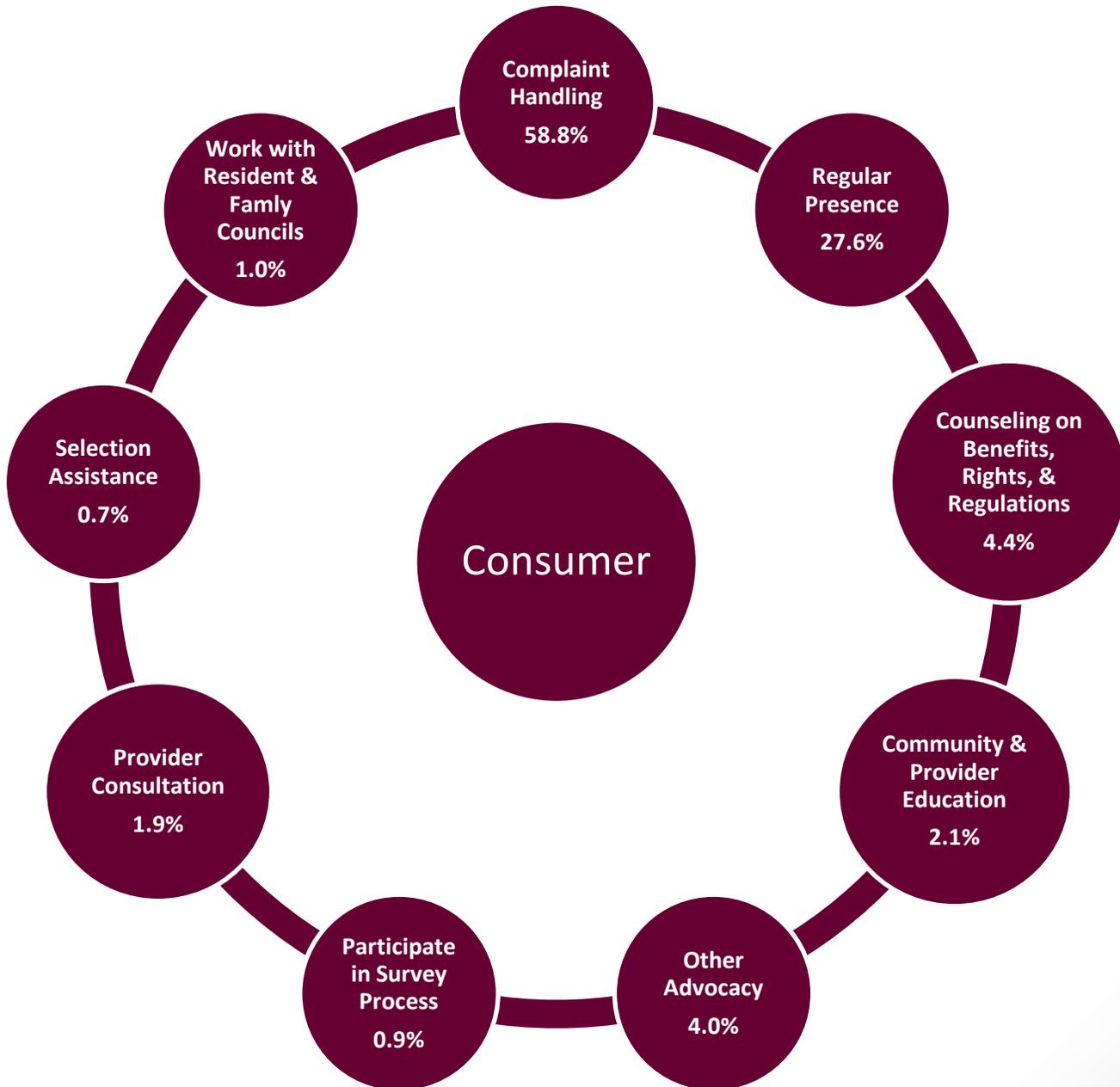


Beverley Laubert, National Chair of the Advancing Excellence in Long-Term Care Collaborative, and Dr. Bill Thomas, innovative founder of the Eden Alternative & creator of the Green House Project, share a moment talking about the future of aging at a co-sponsored seminar on infections.

OMBUDSMAN CORE SERVICES

Supplementing individual advocacy, ombudsmen **strive for system change** such as **promotion of person-centered care** and adoption of public policy that would improve quality in all long-term settings, including home.

Ombudsman core services and the percentage of total time reported on each service in FFY 2014 are reflected in the following diagram.

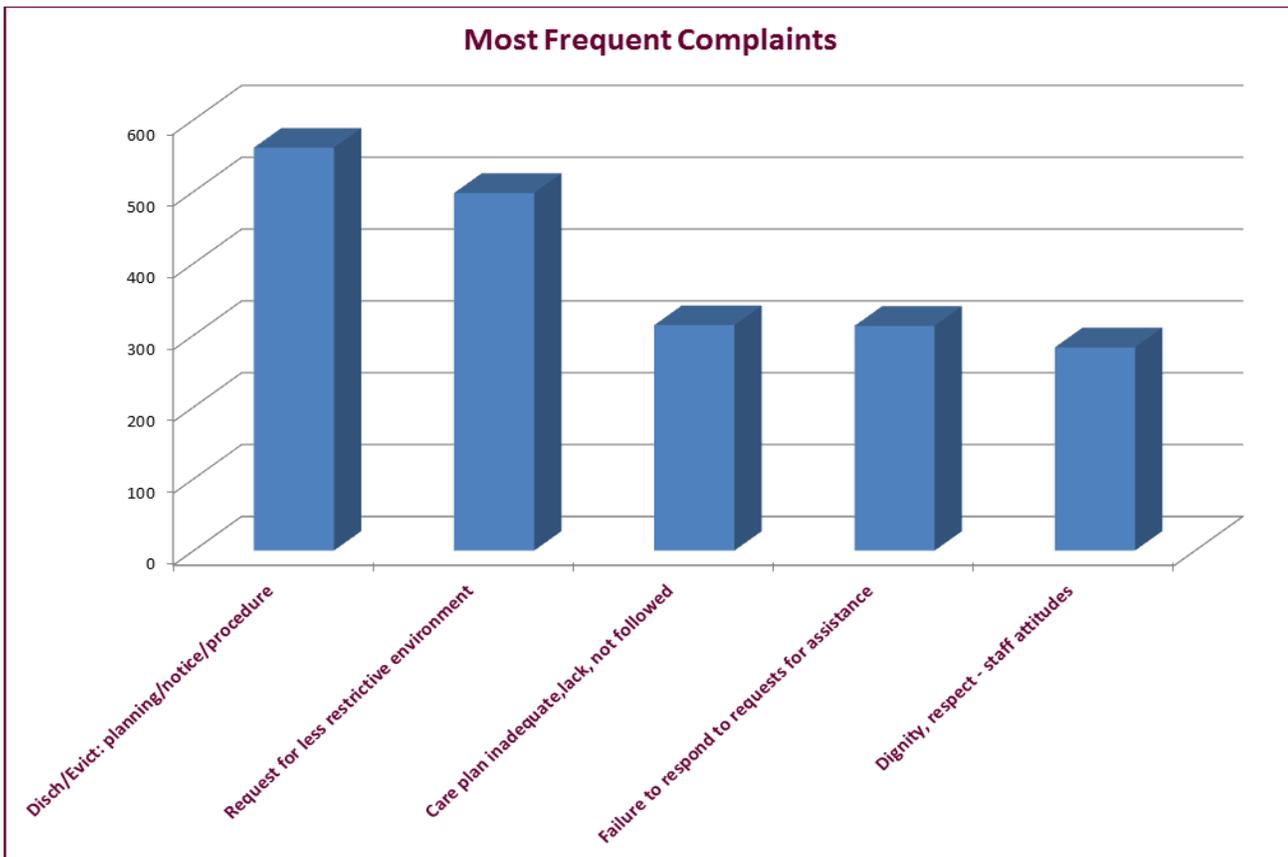


COMPLAINT RESOLUTION

10,556 complaints were received in FFY 2014, a 17% increase over the 8,992 complaints received the previous year. The ombudsman program works with consumers, providers, regulators, and others to resolve complaints about services. Empowerment of consumers is a priority; providing information and resources so a person is able to work through the system by himself or herself respects the self-determination of individual consumers.

Ombudsmen **closed 9,952 complaints** and **verified 72.9%**. Verified complaints are important information that ombudsmen provide to the public, particularly when helping people select quality long-term care services.

Ombudsmen **resolved 80.9% of complaints**. Resolution is based on consumer satisfaction with ombudsman services and is an essential measure of ombudsman performance.



COMPLAINT SOURCE

The percentage of **complaints received directly from consumers is at a five year high at 37.4%**. Regular presence, ombudsmen associates, and our re-focus on providing ombudsman services to recipients of home and community-based services all work to ensure that all consumers have access to their advocate.

HOME CHOICE TRANSITION COORDINATION SERVICES

Ombudsman HOME Choice transition coordination services (TCS) is an optional approved service currently provided in 10 of the 12 regional programs. HOME Choice is funded by The Money Follows the Person Rebalancing Demonstration, a Centers for Medicare and Medicaid Services (CMS) grant program designed to help states provide more long-term care in home-and community-based care settings and less long-term care in institutional settings.



Acting in the role of HOME Choice transition coordinator, the ombudsman helps the nursing home resident move back into a house or an apartment, providing assistance with areas such as locating housing, setting up a household and connecting the client with community services.

In FFY 2014, ombudsmen closed 373 HOME Choice cases and assisted consumers to **successfully transition back to the community in 61.1%** of those cases.



OMBUDSMAN ASSOCIATES

Certified Ombudsman Associates volunteer their time and are critical to the program. Associates are the core of our presence in long-term care facilities providing information and access to residents. During this year, the Office had fewer volunteers but higher participation than previous years.

- Associates completed **62.3% of all nursing home advocacy visits.**
- Associates completed **20% of all adult care facility visits.**
- Associates completed **35.7% of all residential care facility visits.**
- Associates were responsible for **66.7% of all work with resident councils.**
- Associates **completed intake on 8.2% of cases received.**

Have you ever wondered if our volunteers understand how important they are? I have many times. I have worried that they do not see the value that they add, or the security they give us. I believe we need to recognize their value and stand behind the effort they give. This is a story of one volunteer, Cynthia, and how she became a change agent.



During her visits to two facilities, Cynthia met two gentlemen that suffer from the same health struggles, ALS. One man does not have any family or support, while the other one does. One man feels alone, while the other feels lonely. Both men expressed a desire to know other individuals with the same concerns, and questions. Cynthia spoke with both men about the other. She asked if they would be interested in meeting and getting to know each other. They both agreed and Cynthia worked with the activity director from facility A to set up transportation for one of the consumers to visit the other. She met him there to help with introductions before giving them time to talk about their shared struggles. They are able to understand the other's needs, questions, and fears like no one else can.

There were several obstacles to work through to get this meeting to take place, but Cynthia worked through them, knowing the desire to be understood and to have a confidant was of utmost important to the two gentlemen. What does Cynthia say about the experience? Cynthia said she was just doing what she would want someone to do for her. Everyone needs a friend and needs to feel understood. She feels honored to assist and advocate for others.

Thankfully, we have associates in facilities on a regular basis that will advocate not only for the everyday physical care needs but will also find a way to ensure psychosocial needs are met as well. Thank you Cynthia for STEPPING UP for elder rights!

ADVOCACY & GENERAL INFORMATION

Ombudsmen are the voice of consumers on a variety of topics and activities. Representatives of the Office spent **34,526 hours providing advocacy services** in addition to complaint handling.

Advocacy takes many forms:

- Reviewing, analyzing, commenting on, and monitoring the enforcement of laws and regulations;
- Staying abreast of regulatory processes and sharing information gleaned from regular presence in long-term care facilities;
- Training staff and volunteers to be more effective advocates; and
- Recommending policy and advising the public, consumers, providers, and policy makers on long-term care issues.

MUSIC AND MEMORY

In FFY2014, the SLTCO laid the groundwork to bring Music & Memory, a creative approach to dementia care using personal music players and personalized playlists, to Ohio nursing homes. Building on the success of previous quality improvement projects funded by CMP money, the SLTCO sought and received approval from CMS to utilize CMP money to support Music & Memory project in Ohio. The funds will allow the Office to support nursing homes' certification as Music & Memory providers, develop the regional ombudsman program as Music & Memory partners and purchase equipment starter kits for residents.

In September 2014, the Office partnered with the ODA leadership to bring stakeholders, policy makers and consumers together to screen *Alive Inside*, the award-winning documentary film about to bring life and hope to nursing home residents with dementia. The unanimous endorsement of the various parties will be helpful going into CY2015 as the Office opens a Music & Memory NH Quality Improvement Project to all nursing homes. See: <http://aging.ohio.gov/services/music-memory/>.



Rex Sanders delivers Music & Memory equipment to Sunset Nursing Center in Coal Grove.



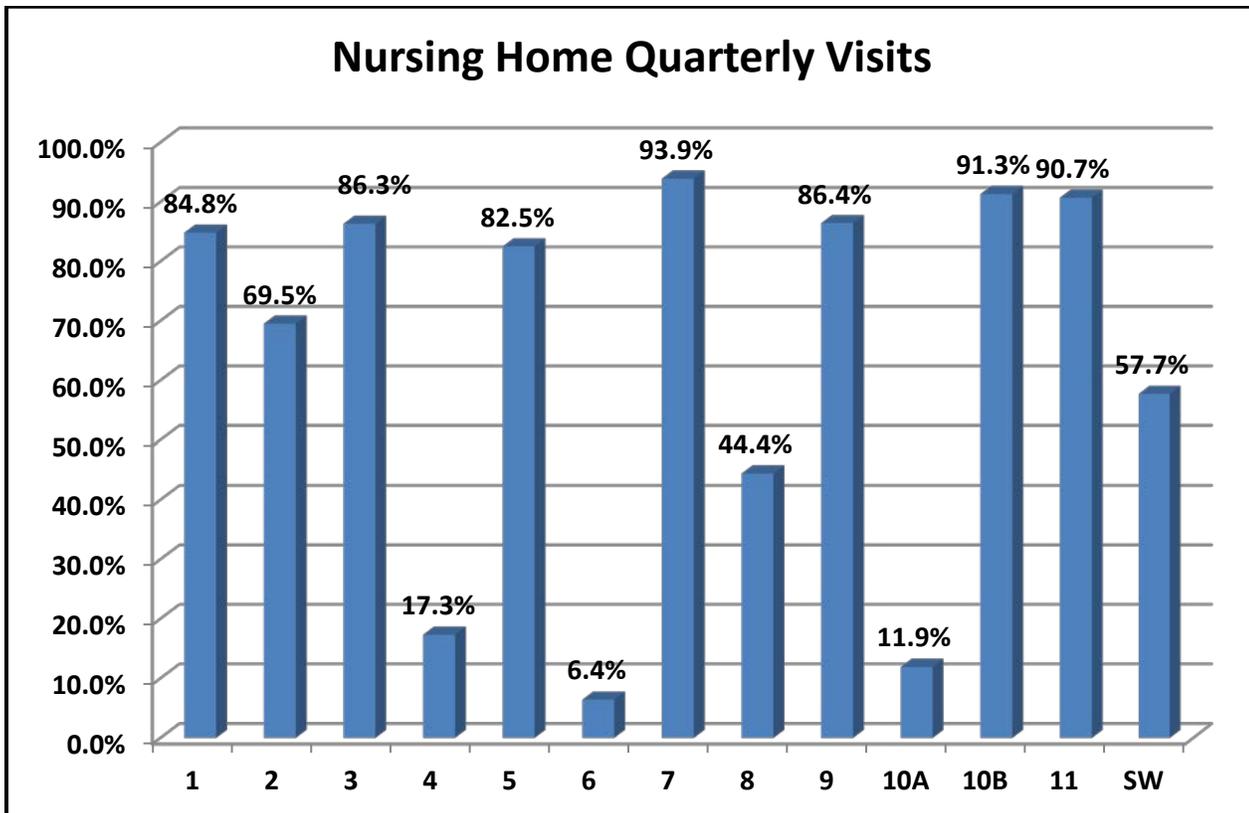
REGULAR PRESENCE

Ombudsmen provide valuable **consultation and prevention** when they have opportunities to communicate and collaborate with care providers and consumers. Ombudsman presence in facilities (i.e., nursing homes, adult care facilities, and residential care facilities) **provides consumers with essential access** to information and advocacy services and provides ombudsmen the opportunity to:

- Educate consumers and providers about person-centered care;
- Identify and work to resolve problems related to the quality of care;
- Inform consumers of their rights and help them to expect excellence; and
- Identify consumers who are ready to return to the community

Regular presence, like all core ombudsman services, is impacted by the wide range of financial and human resources in each program and regional decisions about how those resources are allocated. Other factors such as staff turnover, volunteer engagement, and local funding also impact the ability of regional programs to create a regular presence in all long-term care facilities.

Statewide, ombudsmen visited **57.7% of nursing homes** quarterly, **25.5% of adult care facilities** quarterly (reflective of diminished outreach), and **50.9% of residential care facilities** quarterly. The following graph shows regional quarterly visitation in nursing homes. The following table reflects nursing home quarterly visits by region. Nursing homes also have the highest volunteer presence.



SELECTING LONG-TERM CARE SERVICES

Helping people select quality long-term care services is an essential element of our core services. Selection assistance goes beyond choosing a provider for services; best practices ensure that the consumer’s needs are met where they choose to live in a person-centered manner and that the consumer is educated to “expect excellence” wherever they receive care.

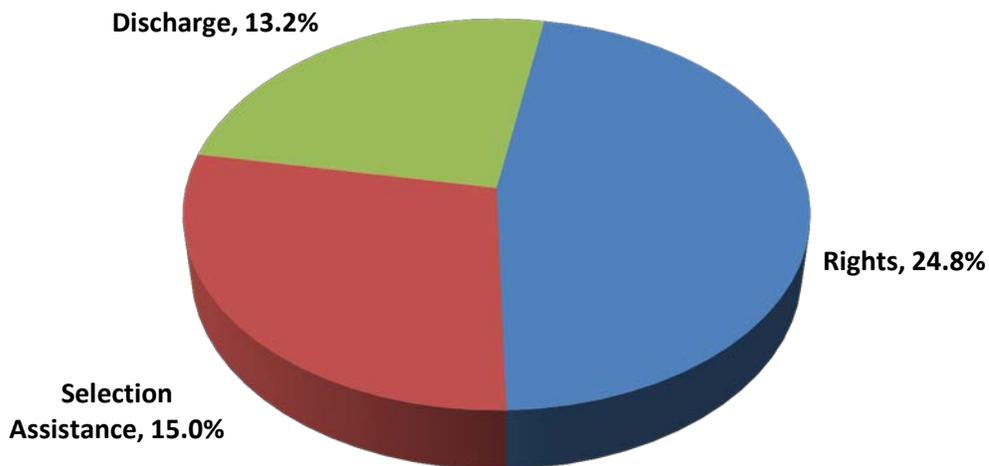
The Long-Term Care Consumer Guide, our web site at www.ltc.ohio.gov, provides comparative information, such as regulatory compliance, satisfaction survey results and facility services and policies, about nursing homes, residential care facilities. This year there were 180,000 visits to the site seeking information on quality long-term care services.



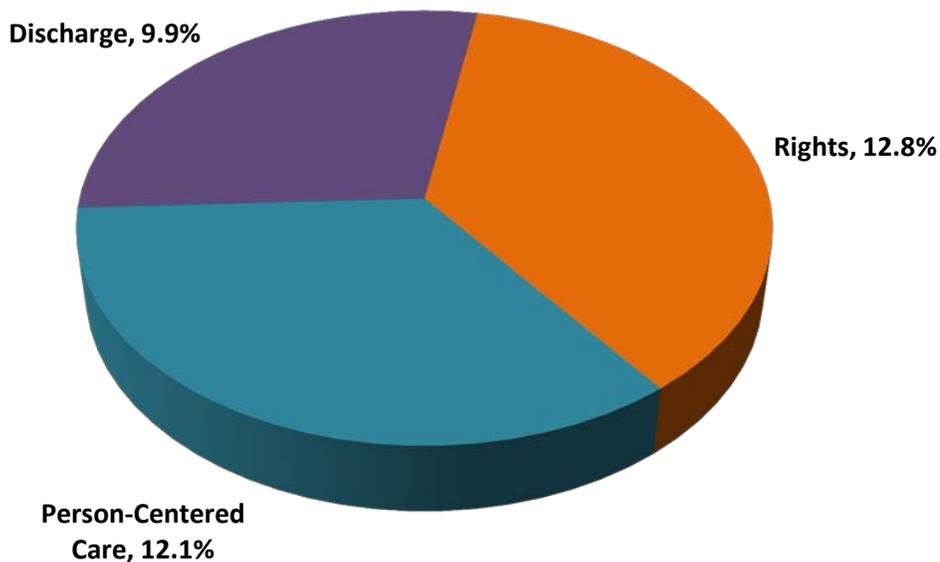
PROVIDING INFORMATION TO INDIVIDUALS AND PROVIDERS

Ombudsmen are a resource to providers and consult with them on varied topics related to the services they provide. In FFY 2014, ombudsmen **consulted with providers 2,039 times** and **consulted with individuals 4,364 times**.

Consultation to Individuals



Consultation to Providers



OMBUDSMAN CODE OF ETHICS

The National Association of State Long-Term Care Ombudsman Programs

The ombudsman provides services with respect for human dignity and the individuality of the client, unrestricted by considerations of age, social or economic status, personal characteristics, or lifestyle choices.

The ombudsman respects and promotes the client's right to self-determination.

The ombudsman makes every reasonable effort to ascertain and act in accordance with the client's wishes.

The ombudsman acts to protect vulnerable individuals from abuse and neglect.

The ombudsman safeguards the client's right to privacy by protecting confidential information.

The ombudsman remains knowledgeable in areas relevant to the long-term care system, especially regulatory and legislative information, and long-term care service options.

The ombudsman acts in accordance with the standards and practices of the Long-Term Care Ombudsman Program, and with respect for the policies of the sponsoring organization.

The ombudsman will provide professional advocacy services unrestricted by his/her personal belief or opinion.

The ombudsman participates in efforts to promote a quality, long-term care system.

The ombudsman participates in efforts to maintain and promote the integrity of the Long-Term Care Ombudsman Program.

The ombudsman supports a strict conflict of interest standard that prohibits any financial interest in the delivery or provision of nursing home, board, and care services, or other long-term care services that are within their scope of involvement.

The ombudsman shall conduct himself/herself in a manner that will strengthen the statewide and national ombudsman network.

STATE OMBUDSMAN STAFF

Beverley L. Laubert
State Long-Term Care Ombudsman

Tessa Burton
Ombudsman Quality Liaison

Rebecca Cooper
Ombudsman Regional Support Coordinator

Erin J. Pettegrew
Ombudsman Projects Coordinator

Pati Presley
Ombudsman Information Specialist

LaTosha M. Slappy
Ombudsman Education Coordinator

Hilary A. Stai
Ombudsman Quality Improvement Coordinator

Karla Warren
Ombudsman System Liaison

REGIONAL OMBUDSMAN PROGRAMS

REGION	COUNTIES SERVED	TELEPHONE NUMBER
Cincinnati	Butler, Clermont, Clinton, Hamilton, Warren	800-488-6070
Dayton	Champaign, Clark, Darke, Greene, Logan, Miami, Montgomery, Preble, Shelby	800-395-8267
Lima	Allen, Auglaize, Hancock, Hardin, Mercer, Putnam, Van Wert	800-653-7778
Toledo	Defiance, Erie, Fulton, Henry, Lucas, Ottawa, Paulding, Sandusky, Williams, Wood	800-542-1874
Mansfield	Ashland, Crawford, Huron, Knox, Marion, Morrow, Richland, Seneca, Wyandot	800-860-5799
Columbus	Delaware, Fairfield, Franklin, Fayette, Licking, Madison, Pickaway, Union	800-536-5891
Portsmouth	Adams, Brown, Gallia, Highland, Jackson, Lawrence, Pike, Ross, Scioto, Vinton	800-582-7277
Marietta	Athens, Hocking, Meigs, Monroe, Morgan, Noble, Perry, Washington	800-331-2644
Dover	Belmont, Carroll, Coshocton, Guernsey, Harrison Holmes, Jefferson, Muskingum, Tuscarawas	800-967-0615
Cleveland	Cuyahoga, Geauga, Lake, Lorain, Medina	800-365-3112
Uniontown	Portage, Stark, Summit, Wayne	800-421-7277
Niles	Ashtabula, Trumbull, Columbiana, Mahoning	800-686-7367