Final Report

June 2013
The National LTC Ombudsman Resource Center, funded by the Administration for Community Living/Administration on Aging, is a project of

1001 Connecticut Avenue, NW, Suite 425  
Washington, DC 20036  
Tel: (202) 332-2275  
E-mail: ombudcenter@theconsumervoice.org  
Website: www.ltcombudsman.org
Project Overview

A report by the Office of Inspector General entitled *Gaps Continue to Exist in Nursing Home Emergency Preparedness and Response During Disasters: 2007-2010*, released April, 2010, indicated that more can be done to assure that Ombudsman programs recognize their role before, during, and after emergency situations. In addition, the Administration for Community Living/Administration on Aging (ACL/AoA) recognizes that Ombudsmen need support in carrying out their role in emergency planning and response through development of appropriate policies and procedures, as well as training for preparedness, coordination, and implementation.

The ACL/AoA provided a supplemental grant to the National LTC Ombudsman Resource Center (NORC) to (1) research and analysis of effective practices by state and local LTCOPs for emergency planning and response on behalf of LTC residents; (2) development of model practices for Ombudsman programs on responding to the needs of residents before, during and after an emergency; (3) development of pertinent materials including best practices and resources information; and (4) training for state and local Ombudsmen.

Project Methodology and Findings

The NORC conducted a literature and file review of available resources related to LTCOP involvement with emergency preparedness and based on our review it was determined that surveying and interviewing state ombudsman programs would result in the most useful information about the needs and practices of LTCOP’s and emergency response. An electronic questionnaire was sent to all State and Local LTC Ombudsman programs on November 14, 2012, asking about training and activities around emergency preparedness and response, policies and procedures, collaborations with other agencies, and guidance provided to ombudsmen and volunteers at the state and local levels. Thirty-seven (37) State LTC Ombudsman programs and one hundred thirty-two (132) Local LTC Ombudsman programs responded to the questionnaire. Select state and local ombudsman programs were contacted for follow-up in-depth telephone interviews after the questionnaire results were collected and analyzed.

A high level summary of the questionnaire responses include the following conditions: (1) lack of LTCOP involvement in Emergency Management Authority planning and activities
at the state, regional, or local levels; (2) minimal communication between LTC Ombudsmen and LTC facilities about emergency planning; (3) inconsistent *Clearinghouse of Information* processes for keeping track of residents during and after emergencies; (4) annual training of Ombudsmen regarding emergency planning and response is not provided by most State LTCOPs; and (5) few written policies and effective practices regarding emergency preparedness.

Respondents identified best practice models and practices. Written responses provided were invaluable and enabled us to identify both State and Local LTCOPs to contact for phone interviews.

Phone interviews were arranged with State and/or Local Ombudsmen in the following states: Alabama (2), Arkansas, California, Florida (2), Maryland (2), Missouri, New Jersey, New York, North Carolina (2), Ohio, Oklahoma, Pennsylvania, South Carolina, Texas, and Wisconsin. Individualized interviews with state representatives were based on written comments obtained from the questionnaire.

**Resource Needs Identified and Developed**

During phone interviews with representatives from fifteen states, respondents frequently mentioned that Ombudsmen need to be better prepared to handle emergencies so that they in turn can assist LTC residents more effectively. In addition to individual preparedness, it became apparent that Ombudsmen, their employers, and first responders are not always clear about what the Ombudsman’s job is during and after emergencies impacting LTC residents. Many ombudsmen are given roles and/or direction by the agency in which the LTCOP is housed, whether or not those roles are ombudsman related or directly impact residents.

Despite our best efforts, NORC staff was unable to locate any SLTCOP policies and/or guidance regarding emergency planning and response. It seems that LTCOPs follow any requirements or guidance related to emergency planning and response as required by their host agency.

Based on the questionnaire responses and the results of the literature review, NORC staff determined that there was a need for information, such as Tip Sheets and Best Practice
Models. The following Ombudsman tip sheets were developed and are included in the Appendix:

- **Being Prepared! Things Ombudsmen Should Do Before, During, and After an Emergency**
- **Smart Phone Apps for Ombudsmen** (both iPhone and Droid phone users)
- **Emergency Management Dictionary and Translations**

The LTCo Tip Sheet, *Being Prepared! Things Ombudsmen Should Do Before, During, and After an Emergency*, addresses: individual and family preparedness; role of the Ombudsman as “second responders” after the emergency; reinforcement that the LTCo is always the residents’ advocate especially after emergencies; and examples of creative solutions and advocacy work.

The LTCo tip sheet, *Smart Phone Apps for Ombudsmen* (both iPhone and Droid phone users), was developed to educate smartphone users about free or low cost apps that are available to assist in receiving timely weather related alerts, emergency notifications, rescue location features, language translation, and FEMA resources.

Ombudsmen generally are not familiar with the language and acronyms used by emergency management officials. The tip sheet *Emergency Management Dictionary and Translations* was created to give Ombudsman a brief overview of the most common emergency management terms. This particular tip sheet was reviewed and approved by the Emergency Management Magazine and Alerts & Warnings Blog editors.

Based on the questionnaire summaries and resulting interviews with Ombudsmen across the country, the following Best Practice Models were written and are in the Appendix:

- **Emergency Preparedness Training**
- **Emergency Preparedness Ideas and Advocacy**
- **Clearinghouse of Information**
- **Improved Communications for Emergency Preparedness**

**Emergency Preparedness Training**

There are many opportunities for State Ombudsmen and Local Ombudsman Directors to educate staff and volunteer Ombudsmen about emergency preparedness as well as work in cooperation with emergency management officials, public health staff, and law enforcement to educate and train long term care facilities’ staff and residents about
emergency preparedness, planning and response. The states of North Carolina and Oklahoma provide excellent examples of working in cooperation with other entities to help all involved plan and prepare for possible emergencies impacting the lives of LTC residents.

**Emergency Preparedness Ideas and Advocacy**

Many local LTC Ombudsmen shared creative ideas that either they or the LTC facility staff had implemented to ensure the participation and safety of residents during and after emergencies. Examples of ideas were provided by Ombudsmen from California, Maryland, New Jersey, North Carolina, Ohio, Oklahoma, and Pennsylvania. In addition to individual advocacy on behalf of residents after an emergency, several Ombudsmen provided examples of systemic advocacy for LTC residents. These examples include working with the FEMA/State disaster recovery center and LTC residents to apply for their FEMA disaster benefits; advocating for restoration of power to LTC facilities during prolonged outages; advocating for clearing of roadways to LTC facilities after weather related events; being the voice of LTC residents at Emergency Management meetings; and educating legislators and policy leaders about the need for adequate generators in LTC facilities.

**Clearinghouse of Information**

The *Clearinghouse of Information* is a title used by Health & Human Services (HHS) Center for Medicare & Medicaid Services (CMS) to describe a process required of States to track nursing home residents who have been evacuated due to an incident that makes the LTC facility uninhabitable. Ombudsmen face several challenges regarding the *Clearinghouse of Information (CHI)*. State and local Ombudsmen do not always have access to the CHI. Ombudsmen may provide resident information to the entity managing the CHI but may or may not have access to the database. There are reports from State Ombudsmen that the CHI process changes frequently and seems to be an ad hoc process developed during the emergency. From our limited study, it appears that the CHI is most often managed by the licensing and certification agency, emergency management agency, or LTC provider association.

**Improved Communications for Emergency preparedness**
There are many free or low cost solutions to improving communications during and after emergency situations. This best practice model from California explains options for priority phone services on landlines and cell phones, satellite phones, and ham radio services. In addition, this CA local LTCOP in conjunction with the public health agency and county authorities created a system for developing identification tags for “second responders” easily recognized by first responders.

**Training of LTC Ombudsmen**

During the April, 2013, NORC sponsored State LTC Ombudsman training and conference in Burlington, Vermont, an overview of the LTCO and Emergency Preparedness study and questionnaire results and training on emergency preparedness planning and response by LTC Ombudsmen was presented by NORC consultant, Maria Greene. State LTC Ombudsmen and state staff representing 41 states attended. Excellent discussion on their observations and feedback regarding the study and resulting resource sheets and best practice models were provided and incorporated into this final report. Local Vermont Ombudsmen reviewed the Ombudsman Tip Sheets and provided thoughtful feedback from their recent (2012) flooding experiences in Vermont.

NORC consultant, Maria Greene and regional Ombudsmen directors, Karen Jones (CA) and John Saulitis (OH) presented a national webinar for all Ombudsmen on Emergency Planning and Response on May 29, 2013. The webinar used 150 phone lines, many of which had multiple listeners. At least one local ombudsman indicated that they had several volunteer ombudsmen listening in the room with them, and following the webinar, engaged in discussion with their volunteer and staff ombudsmen about their roles in emergency situations. A copy of the PowerPoint presentation with notes is in the Appendix. The PowerPoint presentation and recording from the webinar is posted on the NORC website. An issue page on emergency preparedness has also been updated with additional resources, best practices, trainings, checklists, and the newly developed Tip Sheets and Best Practice Models.

Maria Greene represented NORC at the Long-Term and Residential Care Disaster Preparedness training convened by the University of Nebraska Medical Center, Center for Preparedness Education (www.preped.org). Attendees represented the long-term care industry, licensing and certification agencies, emergency management entities, and public health officials. Presenters discussed real experiences of disasters in facilities and lessons
learned. A few of the outstanding speakers included Jocelyn Montgomery, CA Association of Health Facilities; Lauris Kaldjian, M.D., Ph.D., Department of Internal Medicine, Director of Bioethics and Humanities with the University of Iowa Carver College of Medicine; Matt Shaw, Director, Public Safety, Methodist Health System, Nebraska; and Donald Rush, Deputy Fire Chief, Robbins Fire Department, Illinois. The mantra during the conference was to “Plan, Train, and Exercise.” A few examples provided were that most LTC facilities do not practice evacuating individuals who are confined to their bed. The number one killer of residents is excessive heat. And it is more common now for break-ins to occur at facilities by people searching for drugs. In addition to the excellent resources provided by the University of Nebraska Medical Center, Center for Preparedness Education, resources were offered through the AHCA website, (www.ahcanacal.org) In particular AHCA provides a “red envelope” system developed for smoother evacuations and relocations of LTC residents. The Center for Disease Control (CDC), emergency.cdc.gov, will be releasing soon an emergency preparedness guide for LTC facilities. According to the Nebraska Center for Preparedness Education, this conference was the first convened for long-term care facilities. Next year’s training is scheduled for April 15-16, 2014, and would be a worthwhile event for LTC Ombudsmen to attend.

Recommendations

NORC proposes the following recommendations to better equip LTC Ombudsman Programs about emergency preparedness and response.

1. The results of our research and training to Ombudsmen indicate that a **focus on coordination between the LTC Ombudsmen and partners in emergency planning and response should become a higher priority**. ACL/AoA should consider the possibilities of co-sponsoring educational efforts with other federal partners such as DHS Homeland Security and Emergency Management, DHS FEMA Office of Disability Integration Coordination (ODIC), HHS Office of Assistant Secretary for Preparedness and Response, HHS Administration for Children and Families (ACF) Office of Human Services Emergency Preparedness and Response, and HHS Centers for Disease Control (CDC). While all of these federal entities focus on emergency preparedness and response, the state, regional, and local partners are not always aware of each other and the respective roles of each in helping to protect citizens.
2. Joint education between LTC Ombudsmen and emergency preparedness and response partners should be held at the state and local levels about each other’s roles; sharing unique vocabulary for emergency preparedness and response; and setting clear expectations that LTC Ombudsmen should be included in emergency planning are all important factors in establishing effective practices.

3. Educating emergency management personnel at the state and local level about the role of LTC Ombudsmen; inclusion of LTC residents in emergency planning; unique vocabulary associated with long-term care; and LTC facility staff, residents, family members, and LTC Ombudsmen should be included as active participants in emergency planning and response.

4. ACL/AoA and CMS Survey and Certification should consider a joint campaign to educate, state survey and certification staff, State Unit on Aging staff, State and Local LTC Ombudsmen, LTC facility staff, and facility resident and family councils on emergency planning and response. The educational campaign should consider components such as clear expectations around a state’s Clearinghouse of Information; unambiguous protocols for communication with LTC facilities, residents, residents’ family members, and LTC Ombudsmen before, during and after emergencies; and sharing of best practices ideas for emergency planning and response.

4. The ACL/AOA Office of Long Term Care Ombudsman Programs should encourage initial training and annual training for LTC Ombudsmen on their role in emergency planning and response on behalf of LTC residents. To promote emergency planning and response, the ACL/AOA Office of LTCOP should consider developing and promoting an emergency planning and response training suite (suitable for in-person, webinar, and self taught modules trainings).

5. As evidenced by the LTCOP questionnaire on emergency planning and response and subsequent interviews with LTC Ombudsmen, there are no known LTC Ombudsman Program state policies and/or guidelines regarding emergency planning and response. At least two states, North Carolina and Oklahoma, had training practices that include cooperative training agreements with other partners and LTC facilities. These two training models did not include specific training on the role of LTC Ombudsmen before, during, and after emergencies. The NORC team were unable to identify any written policies and guidelines regarding the following: communications methods and protocols including the Clearing House of Information; role of LTC Ombudsmen as advocate before, during, and after emergencies; appropriate employer assignments for LTCO Ombudsmen.
in emergency planning and response; and assistance to nearby (in-state and out-of-state) LTCO programs after disasters. The following best practice models were developed by NORC: Emergency Preparedness Training, Emergency Preparedness Ideas and Advocacy, Clearinghouse of Information, and Improved Communications for Emergency Preparedness. It is recommended that work be continued on the development of LTCOP best practice models and templates for state policies and guidelines for emergency planning and response.

**Dissemination of Information**

The NORC has and will continue to share the emergency planning and response materials with state and local LTC Ombudsman programs via The Consumer Voice and NORC websites, email blast, the Gazette e-newsletter, NORC Volunteer Management Network e-newsletter, and the State Ombudsman conference (April, 2013) and national webinar (May, 2103). Materials developed are also shared with partners such as NASUAD and n4a.
Appendices

1. LTC Ombudsmen Tip Sheets –
   a. *Being Prepared! Things Ombudsmen Should Do Before, During, and After an Emergency*;
   b. *Smart Phone Apps; and*

2. LTC Ombudsmen Best Practice Models –
   a. *Emergency Preparedness Training,*
   b. *Emergency Preparedness Ideas and Advocacy,*
   c. *Clearinghouse of Information,* and
   d. *Improved Communications for Emergency Preparedness.*

3. LTC Ombudsmen PowerPoint Training on Ombudsmen and Emergency Response provided to State LTC Ombudsmen (April, 2013) and national webinar for LTC Ombudsman (May, 2013).