Time and Leadership: Keys to Building Synergy Between State Ombudsmen and State Aging Directors

Discussion Highlights

On May 24, 2006, the National Association of State Units on Aging (NASUA), as part of its work in support of the National Ombudsman Resource Center, convened a teleconference for state ombudsmen and state aging directors to discuss the relationship between the state ombudsman and state agency on aging director. The discussion was lead by two dynamic speakers - Georgia’s State Aging Director, Maria Greene, and Georgia State Ombudsman, Becky Kurtz - who offered their perspectives on building a successful working relationship and the key leadership issues involved in managing an effective statewide advocacy system on behalf of older consumers. A question and answer session and open discussion amongst participants followed. The edited transcript of the presentations and discussion is attached.

State ombudsmen and state aging directors will want to read the transcript and take time to talk about how the issues raised during the discussion apply to their own situations. The discussion leads you through a thoughtful exchange of ideas about the key components that contribute to building a positive working relationship and ultimately an effective advocacy service for older long-term care consumers.

Georgia State Long-Term Care Ombudsman, Becky Kurtz, and Georgia State Aging Director, Maria Green, emphasize regular and open communication as the key element to creating synergy between the state aging director and state ombudsman and fostering a relationship built on trust. Individual monthly meetings with program management staff at the SUA provides the state ombudsman an opportunity to raise important program issues, make the SUA director aware of the program’s legislative advocacy efforts and media contacts, and to request support as needed from the state aging director.

Building synergy takes time. In Georgia, the state aging director and state ombudsman described relationship building as an evolutionary process. The ombudsman program has unique characteristics that make it different from other aging services and there is an ongoing learning process for both state ombudsmen and state aging directors to understand the ombudsman program in relation to other programs in the aging network. From the ombudsman program’s perspective, relationship building with other programs in the SUA and state government is important as it impacts information sharing and coordination of complaint investigations.

The ombudsman program can be misunderstood by other state agencies. Due to turnover in commissioners, agency heads and legislators, Maria Greene views educating her peers in other agencies about the ombudsman program and its unique consumer advocacy role under the Older Americans Act as an important part of her job as state agency director. Ms. Greene pointed out that the state ombudsman is conscientious about
informing her of potentially controversial situations and contacts. This is especially important when the ombudsman program’s recommendations conflict with the positions of other agencies, such as Health and Medicaid. The “heads up” gives Ms. Greene time to make her boss aware of the situation and to prepare a response to questions other state agencies or the media may have about the ombudsman program’s recommendations or activities.

**Systems advocacy** is one of the most challenging issues for both state ombudsmen and state aging directors. In Georgia, the state aging director and state ombudsman often work together to craft strategies for effective legislative advocacy on many of the issues supported by the ombudsman program. The state ombudsman is highly respected by members of the General Assembly, who often seek her opinion on the impact of proposed legislation on long-term care consumers. At the suggestion of the state aging director, the state ombudsman program has created an advisory council to help support the program’s legislative advocacy efforts.

Finally, Ms. Greene strongly encouraged state ombudsmen and state aging directors to make time for strategic planning and discussion regarding a vision for the growth of the ombudsman program and a plan for achieving it. She recommended that state ombudsmen present several options for **program improvement** to the state aging director as one approach for getting buy-in and support. Based on their experience, Becky Kurtz and Maria Greene believe that the leadership and support of the state agency on aging director can have a positive impact on the quality and effectiveness of ombudsman services.

**Teleconference Transcript and Attachments**

Appendix A: Teleconference Participants
Appendix B: Georgia Division on Aging Services Organizational Chart
Appendix C: Baldrige Management Material

**Presenters**

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Introduction (Mark Miller)

To set the stage for this discussion, I think it is important to recognize that each state has a unique set of characteristics. The state units on aging are charged with ensuring that there’s a statewide ombudsman program that meets all of the requirements spelled out in the Older Americans Act. However, each state certainly has flexibility to decide how it’s going to fulfill the functions of the program in a manner that best serves its older citizens. So, ultimately each state must decide for itself - where the program is going to be located, how it’s going to operate and so forth. Clearly, not a one size fits all. And, as Roland Hornbostel (former state ombudsman in Ohio) first said: “if you’ve seen one ombudsman program, you’ve seen one ombudsman program.” So that’s comment one.

Comment two is, I think, really the crux of today’s discussion, and that is, communication is important. The synergy that’s established and developed between state ombudsmen and state aging directors is critical to the development of an effectively functioning advocacy service that promotes and protects the health, safety, welfare and rights of long term care consumers. Cleary, I think Georgia exemplifies this type of synergy. However, I think, state directors and state ombudsman that take the time…that make the time to discuss and address all of the various questions and issues involved in the operation of the program…are much more likely to create an effective program that serves our most vulnerable citizens.

Those are the two comments I wanted to make to set this up. At this point, I want to turn it over to Becky Kurtz, the State Ombudsman in Georgia and Maria Greene, the Georgia State Aging Director. They will provide their perspectives on the key leadership issues involved in managing the ombudsman program.
and how they've managed to work together through many of these questions and issues involved in development of the program. So Becky and Maria, I will turn it over to you.

**Building Synergy in Georgia** (Becky Kurtz)

Hello, everyone. I'm going to talk for the first 10 or 15 minutes and then turn it over to Maria for her to share her perspective. And then we'll open it up for questions after that. We thought it might be better to go through our thoughts first, because we may touch on your questions in our initial comments. So I hope that's OK with everybody. We're looking forward to the dialogue after we give some introductory remarks.

I thought I might start with the first question that everybody asks, which is – “how are you all organized in your state?” - since every state is a little bit different in the way that they are organized. (See Appendix B, Georgia Division of Aging organizational chart.) Our Division of Aging Services (our state unit on aging) is a division within an umbrella organization called the Department of Human Resources. The Division of Aging Services has a number of different sections within it; among those sections is a “quasi independent” office called the Office of the State Long-Term Care Ombudsman, of which I’m the State Ombudsman. And so I thought it might be helpful to talk a little bit about what makes us “quasi” and what makes us “independent” and to help clarify a little bit about how we operate.

**The Georgia 'Model':** First of all, I wanted to say that I think one of the things that makes our model work is the relationship - and we sometimes call it a “dotted line kind of relationship” - between our office and the Division (or the state unit on aging) director (Maria). Part of the reason why we are able to use this model quite comfortably, I think, is because it's a model that is in other entities within the large Department of Human Resources as well. We weren't carved out as a special example that had never existed before. For example, there's a Georgia Council on Aging that's within the Department of Human Resources and is attached to the Division of Aging Services. This is an independent body that does advocacy work on aging, created by the Georgia Legislature. There’s also a Developmental Disabilities
Council that does advocacy work. So it wasn't like we were the only “quasi independent” agency or office within DHR.

*Let me tell you a few things about how we are part of and a team player with the state unit on aging.*

**Supervision** I am directly supervised by the state unit on aging director. As state ombudsman, I participate in our Leadership Team in the state unit on aging. And data about our program services and the outcomes of our services are included in the publications, and are on the website, of the state unit on aging. We develop outcome measures just like all of the other programs do. We participate in strategic planning. I mean we’re very much a part of how the Division does its work and shows what it does for the public.

**Local program structure** We also contract for our local programs through the master contract that the Division has with area agencies on aging. Now in our state, there are two of our 13 programs that are housed in AAAs and the rest are subcontracted through the AAAs with nonprofit organizations. Our plan development both at the state level and at the local level is done in conjunction with the state unit on aging. And at the local level, it’s submitted as part of the AAA’s area plan. Every year we have a plan development process for the local programs.

**AAA partnership** We work very closely in partnership with the AAAs. And I’m really proud of our AAAs in Georgia. I think that they are very strong supporters of our program. And that has not come about without some history and without some difficulties we’ve had to work through over the years. We really rely on the AAAs to monitor our local programs. They also participate when our state office staff come out to do site visits to local ombudsman programs - we always invite the AAAs’ participation. Some of them support our local programs financially beyond what we require them to do. Some AAAs also participate in ombudsman training conferences.
Relationships within the SUA. We also have really strong team work with other state unit on aging staff. For example, some of our ombudsman staff serve on the IT team, designing the IT system for the Division. We are always pulling in fiscal staff, AAA liaison staff when they’re needed, those kinds of things. And we especially have very strong links with the other elder rights programs, not only related to the specific resident complaint referrals, but we do lots of joint presentations. Several of the folks in elder rights are working together with me on developing a public guardianship program. That’s very much a joint kind of process that we’re working on at the state office level. And our SHIP program has done a lot of training of long term care providers, jointly with the ombudsmen. So, lots of examples of linkages between us and the other staff in the state unit on aging. We really value that team work. And we need the resources of the rest of the folks in the Division. So those relationships are critical. That’s the “quasi” part of the quasi independent.

Independence. Let me talk a little bit about the “independence” of the ombudsman program and how we function within the division, but also as a separate piece. We have our own advisory council. It’s made up primarily of advocates and consumers, but it also includes people who are more formally connected with the aging network; for instance, we always have an elder rights representative on it. We also include AAA representation on it. We in the ombudsman program have separate letterhead. We found that it’s important to assure that ombudsman positions are never interpreted as the Division’s position or as the Department’s position. We want to make sure that it’s clear that we’re only speaking on behalf of the ombudsman program when we have something on our letterhead, so there’s no confusion about whose position it is or who actually is making the communication.

We, of course, have ombudsman client specific records and information and those are reviewed by no one outside of the ombudsman program unless, of course, we have the resident’s permission. We have a separate ombudsman website, and part of the reason why we did that, even though we’re mentioned on the Division website, is we felt like the website was an important place for us to include policy recommendations and advocacy news, and things that were focused on long term care residents, that may or may not reflect the position of the Department.
We have a **statewide toll-free number** for the ombudsman program because we want to provide easy access to residents and to the general public. And that number is posted by law in all long-term care facilities. We have a separate **annual report**. Again, we want to be able to include recommendations on improving the long term care system and resident issues, so the annual report is an important way to communicate those issues.

**We manage our budgets separately.** We have designated funding. We also have designated state funding for legal representation of local ombudsman.

And our Office **designates individual ombudsman** staff and volunteers and we **designate the local programs**. So, we’ve had to figure out how to communicate with the AAAs - when they’re going through their RFP process, when they’re going through their selection process - we need to work very closely with them so that there aren’t any surprises. Who they choose in their area is also who we choose. And we’ve found out that that has not been a problem for us as long as the communication is going well throughout the whole time.

We’ve actually had three different situations since I’ve been here, and I should have said at the outset, I’ve been the state ombudsman here for 12 years now. And in those 12 years, we’ve had three different situations where we’ve needed to change a local program agency. Two of them were for fiscal and management issues. We didn’t feel like we were getting the quality services we needed. And in both of those situations, actually, the AAA brought their concerns to us – they told us that when they were doing their monitoring, they didn’t feel like they were getting the quality they needed. And we had lots of dialogue about how we were going to go through this process. The AAA issued a RFP and we ended up with new contractors.

In one area, we had a provider agency that had a direct conflict of interest, because they had part ownership of a personal care home, and in that situation the state unit on aging director (this was before
Maria’s time) immediately said that’s a violation of the contract, got on the phone with the AAA and said we had to find a new contractor. The AAA just cancelled the contract immediately.

So I haven’t actually had to do an on-my-own designation with it being any kind of dispute. We’ve had authority in our policies that the bottom line is that the state ombudsman has to make the designation, but in practice, it’s been a cooperative effort - trying to figure out the very best provider of services in the area. So again, I feel really fortunate that our AAAs have been very much on board on those situations.

We’ve only had one situation where I’ve had to take action to de-designate a certified staff ombudsman. And in that situation, the provider agency saw the same problems I was seeing and fired the person before we had to go through the whole de-designation process.

**Systems advocacy.** The one thing that is often a sticking point is the systems advocacy work that state ombudsmen do. And I know that’s a challenge, to be a state government employee and do advocacy work. In particular, legislative advocacy work is an odd fit. In Georgia, our law requires that anyone who communicates with legislators about a position on legislation in the person’s professional capacity has to be a registered lobbyist, so I’ve been a registered lobbyist since I took this job because I do take positions related to residents of long term care, as the Older Americans Act requires me to do. I’m involved in proposing legislative issues to fellow advocates. And I shouldn’t say just I…I’m saying it because I’m talking, but actually other ombudsmen are also involved in this as well - at the local level and some of my staff - to propose legislative issues to fellow advocates, to work on helping draft legislation and to actually do testimony and work at the capitol [state legislature]. We do that joint advocacy work though, very much. I think, this is just the Georgia approach to advocacy - we do it very much in a partnership with other advocates. It’s pretty rare for the ombudsman program to be out there on an issue on their own without doing it in conjunction with other advocates who also agree: “Hey, here’s an issue we all need to be working on!” But I think the thing the ombudsman brings is the knowledge of and the focus on what’s going on with residents in long term care.
Obviously, I don’t need to tell this crowd why that’s important in terms of fulfilling our Older Americans Act requirements related to representing the interests of residents before government agencies and commenting on and analyzing legislation. But we feel like it’s a really important piece of what we do. It’s critical to our mandate. And so we have to figure out a way to make it fit in state government.

I think that in Georgia, we’ve been very fortunate, not only because of the personal relationship that Maria and I have. I mean I think we are incredibly lucky to have Maria for a lot of reasons, one of which is because she used to be in the ombudsman program. So she really understands what the ombudsman program is about and has that experience. But even outside the ombudsman program, she’s got a commitment to advocacy that she’s had for a long time and exceptional leadership skills. But I’d also like to say that before Maria took this job, we also had a tradition in Georgia of understanding and supporting the ombudsman program. Maria is the third state unit on aging director that I’ve served with. And she’s certainly not the only person who has made the program a lot stronger. It’s been a historic …

(Maria Greene) Evolution.

(Becky Kurtz) Evolution, that’s a very good word. Yes, Maria said the word evolution. I’ve already mentioned that the state unit provides tremendous financial, fiscal, administrative, programmatic and technology support to us. So we really depend on the state unit for an awful lot of support. But there are some unique things that we need in our program that are a little different than some other [aging] programs. We need the understanding and the appreciation of our focus on residents in our advocacy role, even when we take a position that’s different from our sister state agency, like the Medicaid agency. Or even when we’re quoted in the media. Some of that education of why we’re doing our comments to the media, or why we’re taking positions that are different than the Medicaid agency, that kind of thing has been a constant evolution and a constant learning process both by myself as state ombudsman, and by the state unit on aging director. And I’d tell you our whole aging network actually has grown in its understanding of the importance of that, and it’s a constant thing. Every time there’s a new commissioner, every time the department has a new lobbyist or a new communications officer, new legal
counsel, or even the governor’s office, the new Office of Planning and Budget person - Maria always sets up meetings with these folks and says, “now I want you to understand all of the different services we provide, including the ombudsman program and yes, they’re a little unusual.” So state ombudsmen and state unit directors need to talk about why ombudsmen are unusual and help lay the foundation before people are surprised at what we ombudsmen do, to help them understand why the Older Americans Act requires what it does in the ombudsman’s advocacy role.

I guess to close my comments before I turn it over to Maria, I just wanted to say that Maria and I have been very fortunate to have an opportunity to work together, or at least I feel very fortunate. I’ll let her speak for herself, but I feel very fortunate too because in Georgia, over the years, our aging network and the aging advocates that support that network, really do believe in the mission of the ombudsman program. They rely on us to have expertise about long term care issues. And they want us to be very involved in advocacy work. They’ve come to expect that of us at the systems level. They expect us to be outspoken on what’s going on with Medicaid and estate recovery or what's going on with the Katrina evacuees who came to Georgia and are living in nursing homes. *I think there’s this expectation that the ombudsman program is going to be out there, responsive on the systems level as well as on the individual level.* And I think that that expectation has really helped us be able to fulfill the mandates that we have under the Older Americans Act and most importantly to be able to serve residents effectively.

**Building Synergy in Georgia** (Maria Greene)

Hi, this is Maria. And I’m going to respond, in part, to some of the things that Becky has shared with you, and then offer some pieces of advice that may help. Because one thing I was thinking about was - if I was listening on the phone and wanted to either create something similar to Georgia’s model or have improvement in the state unit on aging and the ombudsman relationship in the state - I think one of the key words that we talked about was the evolution of the program. Because, this did not happen in one month or one year, but over several years along the evolutionary process.
Communication  I would strongly encourage the state unit on aging director and the state ombudsman to give a lot of time and thought and consideration, and strategically plan where you want the growth of the office of the state ombudsman program to go.  *What are your plans for it?* And then what other things can you accomplish reasonably in one year, two years, three years?  That way it feels like it’s a manageable task.  If you feel that you want to do some things, that definitely would be an improvement for the program.  *We’re always focusing on continuous quality improvement,* regardless of what program it is.  I’m always with Becky and the other people that are my section leaders, always asking the questions, “What can we do to improve? What can we do to do better? And where have we thought beyond one year, two year, three year plans?”  That way it feels manageable.

I would say to the state ombudsmen, if you want to initiate this conversation with your state director, you should have a lot of different things that you’d like to have considered and offer a lot of different options.  That way, the director, hopefully, can at least agree with you on *one or two things that you all can work on* in the next year that would be a part of the improvement for the ombudsman program.  And it would give that state director some buy-in also.

The Office of the State Ombudsman  When we talk about relationships…Becky did not always have a separate independent office.  I’ve been the director for six years, and for many of those years, the ombudsman program was a part of the elder rights and advocacy section and Becky was not an equal peer with the other section leaders across all the aging programs.  And so, when we made a separate Office of State Ombudsman, that made her a peer to folks that she had not previously been peers with.  She didn’t have a lot to overcome with that, because Becky works really hard at inclusion and at teamwork.  But what I have had crop up occasionally in the Division of Aging Services, is that there are other programs that would like to have the distinction of being an office or whatever - I won’t get into naming specifics - I’ve had some programs that would like to have similar model to what Becky has.  And so far, I haven’t gone there.  One reason is that I haven't really been presented with a plan that would show that it would be beneficial to the aging network for that to happen.  In addition, there is federal legislation that gives some very distinct reasons why a state ombudsman program should have access,
for instance, to advocacy, to the legislators, et cetera. So, I have had that kind of internal competition come up occasionally.

**Relationships with other programs** We also work really hard between all of the various programs within the Division to have memorandums of agreement or understanding. Two years ago, we transferred the adult protective services program to the state unit on aging from Family and Children’s Services, and that was a huge challenge for us and one of the many things that we’ve had to figure out was a memorandum of agreement between the work of the ombudsman and the work of our Medicaid waiver community care services program (we had already done that), as well as with adult protective services, the elderly legal assistance program, et cetera. So it’s very important for each program with these responsibilities - especially for some of the citizens being served by the programs - to have clear plans for how we’re going to work together. The ombudsman program, you know, would not necessarily always share a complaint that a resident makes with other entities, because of confidentiality and also because the resident may not have given permission for the ombudsman to share. That can cause some consternation amongst your other programs that want to know “why can’t they give me the information?” They work right here with us in the same building. So these are some of the things you have to think ahead about and work through.

**Education about the ombudsman program** Becky was so right when she mentioned how much time I spend educating others about the uniqueness of the ombudsman program. And we have so much turnover, as many of you may in your states, between commissioners and deputy commissioners and press secretaries and legislators. And so I just assume that it’s part of my responsibility to do education about the ombudsman program and the other programs [under the Division’s jurisdiction] so that people have the best understanding of what they do. Becky is very good about letting me know ahead of time when she has talked to the media, because if she’s talking to them about something controversial and she’s taking a different position from the Office of Regulatory Services or from Medicaid, I need to know. I always let my boss know there’s been a communication but the level of detail I provide about that communication depends on the situation. We haven’t had too many concerns around media. I give
Becky kudos for helping us give a heads up about that. And she’s really clear with the journalists about what quotes are going to end up in the paper.…

(Becky Kurtz) Tries to be.

(Maria Greene) Tries to be. You had one about the nursing home industry. What did you say?

(Becky Kurtz) They quoted me as saying they’re ‘the pits.’

(Maria Greene) ‘The pits.’ When I got a call, I said that’s not words that Becky uses. So that happens occasionally.

Systems advocacy I would think some people would have a problem (maybe some state directors would) with their ombudsman having generous access to legislators. The key to that, once again, is constant communication. You know, Becky alerts me to her position. Sometimes, we go so far as to even talk strategy about what might be more plausible or a better position, of how to say what she’s wanting to say.

Becky has great respect among the legislators. She’s called in advance to help them work out strategies with others around resolutions of possible legislation. Now sometimes their advocacy work…for instance, during this legislative session, the ombudsman program worked really hard in getting a personal needs increase allowance for nursing home residents and they were successful, which is really good. But the budget line item did not include administration dollars, to administer this additional personal needs allowance because it’s considered a state supplement. Well, I now have a dilemma if they’re trying to push that responsibility off on the state unit on aging and there’s no admin money to make that happen. And their response to me is “Well, your folks wanted it. Your advocates pushed for it.” So sometimes, you know, what you want you don’t always get it in the package. But it’s better for the residents to have gotten the increase and for us to figure out the rest later.

One of the reasons that I asked Becky - and she and I agreed this past year or two - to create a long term care advisory council was that I thought it would be beneficial. The more people you can help surround yourself with in any of your programs…but especially because of the uniqueness of the ombudsman
program, I think it’s good to have advisory council members, who can be supportive of the work, who can do the talking for you. Maybe she or I aren’t the best ones always to present an issue, but if we’ve got an older adult or a member of the advisory board that’s willing to speak on behalf of the ombudsman program, maybe it’s better for them to be the face on that issue, than it is for us. So I think there’s going to be some really good things resulting from that. The advisory council is about a year old now.

(Becky Kurtz) Two.

(Maria Greene) Two years old. And the growth and the support of it has just been wonderful to watch happen. And I think we’re going to have some really good additional folks to speak up on behalf of the ombudsman program and it won’t always be only the AAAs or Becky or I doing that.

The ombudsman program and the aging network I echo Becky’s comments about the relationships that we work on between the state unit on aging, the ombudsman, and the area agency on aging directors and the subcontractors. Initially, when we made the transition to the office of the state ombudsman a little bit more independent, we spent that up-front time talking with the AAA directors about what that might mean and what it might look like. I remember, we had a forum that lasted quite some time where they fired questions back and forth at Becky and me about what it would be like and we tried to answer their questions. It is important to have real clear lines of communication, you know, and decide who is going to give the response and how are you going to be in agreement on that; otherwise, there is the potential for having conflicting information out in the field that then makes your job more difficult.

Discussion

(This section includes questions and answers, as well as elaborations on a few key points by the speakers. Questions are in bold print.)

I’m curious about whether the ombudsman has ever taken a position at odds with the state unit on aging. (Dennis Streets, North Carolina Aging Director)
(Becky Kurtz) I'm trying to remember if there are any examples. I can't remember one where we took a position that was at odds with the state unit. We've definitely taken positions on things that the state unit doesn't have a position on. For example, we took a position on criminal neglect legislation and the Division didn't have a position on that.

(Maria Greene) Sometimes within our Department, I'm not successful in the Division of Aging getting to take a position. The only thing I can think of recently that was kind of uncomfortable was the state ombudsman had taken some positions that did not make the Office of Regulatory Services happy. And that agency director is my peer on our Department's leadership team. The commissioner called us in [the director of the Office of Regulatory Services and Maria] and asked us “What's this problem? Why isn't there resolution?” So, I've had some instances where I got called on the carpet with a peer of mine.

(Becky Kurtz) The Office of Regulatory Services licenses and regulates both nursing homes and personal care homes, which in our state also include assisted living. Our [the ombudsman program's] positions tend to be more critical of regulators or Medicaid policies, because those are the things that, you know, directly impact long term care residents. Whereas, most other services within the state unit on aging tend to be services to people in the community that are not our direct clients. There have been some situations where we've had some issues with our community care services program (CCSP), which is the Medicaid waiver program, administered by the state unit. But we've never had to take those to the legislature. It's been more a policy issue that we've dealt with internally, within the state unit. Typically, at the legislature our only position about CCSP is that they need more funding, and we support that and have been advocating for growth in community based services for a long time.

**How does your long-term care ombudsman advisory council relate to your other advocacy body?**

**You referenced the Georgia Council on Aging.** (Dennis Streets)

(Becky Kurtz) The long term care ombudsman advisory council focuses just on the ombudsman program and how it operates and how they can support our work and strengthen our work and advocate for residents. The Georgia Council on Aging has a much broader mandate to report to the state legislature.
about an array of issues, not just long-term care, certainly not just the ombudsman program, anything to do with aging. We relate very closely – in fact, we have a few LTCO advisory council members that are members of both. It just so happens that the chair of our ombudsman advisory council this year is also the legislative chair for the Georgia Council on Aging - a very pro-active older Georgian who’s involved in both - but that’s the exception. I mean most council members are not on both. But there is some overlap and Maria wants to add to that too.

I wonder whether the Georgia Council on Aging might have entertained any standing subcommittees or groups, whether that would have been an option? (Dennis Streets)

(Maria Greene) Dennis, you’re onto a good idea! And I know for the Council on Aging, that has been considered in the past, but it was not always the will of the majority of the council members to do that with subgroups or sub teams. The Council on Aging appointees are from the Governor, the Lt. Governor, the Speaker of the House, and the Commissioner of DHR. And I think the struggle was sharing these specially appointed positions with any type of sub teams that would be adjunct to the council, if I remember prior history when that came up before. The ombudsman advisory council - I had some input into who would come on.

(Becky Kurtz) You actually initially appointed all of them.

(Maria Greene) OK, I was trying to remember.

(Becky Kurtz) Yes, and now we’ve actually just had our first election cycle, we had two year terms. We’ve had our first elected council. So now the advisory council is selecting its own people for the future.

(Maria Greene) And it’s made up of some residents of facilities and family members. No providers.

(Becky Kurtz) No providers.

How many staff do you have in your state ombudsman office? (Irene Collins, Alabama Aging Director)
(Becky Kurtz) There are a total of five of us in the state office. In addition to the state ombudsman position, I have a person who’s in charge of training, a person in charge of our data system, and both of them and I provide lots of technical assistance to the local ombudsmen. Then I have a person in charge of outreach, maintaining our website, those kinds of things, and an administrative assistant.

Do you serve on any other boards or advisory groups within the state, aside from your ombudsman advisory council? (Irene Collins)

(Becky Kurtz) In terms of serving on other boards and councils, over the years I’ve served on things like the Board of the Georgia Gerontology Society, on Medicaid reform groups that, actually, Maria chaired on long term care Medicaid reform. I’ve served on a number of different boards or committees that are looking at issues that relate to the ombudsman program, but I’m pretty careful about only selecting those things that directly relate to my work with residents.

I’m interested in a little more information about to what extent you have input into, or control over, the ombudsman program budget? And what the logistics of that look like? Also, the impact that you would see that having on the quality of the local programs? (Joani Latimer, Virginia State Ombudsman)

(Becky Kurtz) Well, there are a couple of different parts to the budget. There’s the part of the budget that I use to run the Office of State Ombudsman, and basically that’s a combination of some Title III funds and some Title VII funds. Basically, the state unit on aging gives me an allocation of all of the Title VII funds for the ombudsman program, plus a portion of Title IIIIB funds. And then, within that budget, I manage the state office expenses. Then, we also have allocations to the field from which the local programs operate. Those allocations are based on a formula – well two things: (1) the Title IIIIB part, of course, is based on maintenance of effort, and what the area agencies on aging have traditionally given, so we have a minimum with the Title IIIIB funds; (2) the other funds, which are either going to be Title VII or state funds, are going to be allocated based on a formula that we in the state office developed (actually, it was
developed before I came here). It’s a formula that looks at the number of long term care facilities, number of beds in facilities, and geographic square miles. So we use that allocation to determine funding for our local programs. The SUA fiscal staff actually do the technical assistance to run the spreadsheets, and get the allocations figured out. Then, the Division provides that, along with all of the other allocation statements, to the AAA. So it comes as a package, and it’s unique in that we’ve developed it based on the formula that’s for the ombudsman program for all funding, except for Title III.

**Do you have full discretion over the state office’s portion of the budget? How does that process work?** (Joani Latimer)

(Becky Kurtz) Yes…Maria is sitting here nodding. Yes, I do. I mean, I don’t get to say I’d like you to give me $200,000 more - I don’t usually get that. In fact, I’ve never gotten that! But I’ve gotten enough between the Title VII increases we’ve had over the last several years and the traditional Title III we’ve been given for our expenses, we have pretty stable funding at this level. But when there are Title VII increases that come down, you know, they’re never very big, but at least they’re going in the right direction. I have the ability to decide how much of that we’re going to use for a project at the state office versus how much goes out in the field, and I have tried to focus on getting as much of that out to local programs as possible.

(Maria Greene) One example of Becky truly managing her money is that oftentimes, you know, as it is in large departments, towards the last quarter of the fiscal year, I'll have to tell folks, we really can't travel. But it may be that Becky has managed her budget well, and she still has federal funds that she can use for travel, so I approve her travel and she'll get to travel. And maybe other staff aren't getting to travel because we don't have the federal funds to support it. At the moment, for example, we're restricted on state travel. So that's an example of where, even though I could say that nobody travels, I really don't think that's fair. I mean, I'd rather make the effort and explain to staff why Becky has federal funds and she can travel, versus others who may not have that luxury.
You stated that you have designated funding for ombudsman representation. Does this include the local ombudsmen as well as the state? (Virginia Bell, Alabama State Ombudsman)

(Becky Kurtz) Yes. Actually, our policy is that the Attorney General’s office would represent the state staff, as long as there’s not a conflict of interest. But for the local staff, we do have designated state funds to be used if a local ombudsman is faced with litigation. We’ve had that happen twice since I’ve been here where a local ombudsman has been sued, and we’ve had to get legal counsel for them.

If, as you project your resource needs for the coming year, and you’re going to be asking for additional dollars, how does that work? Does the state unit on aging or the state ombudsman approach the legislature? How do you coordinate that? (Mark Miller)

(Becky Kurtz) Well there have actually been a couple of different ways that that has happened. Most years, it [the budget] doesn’t get increased. But we’ve had a few years where we’ve had increases. One year, when we had an increase, the state unit on aging went to the larger Department for approval of the request. It’s the Department that then goes to the Governor for approval, so that’s the way the process works through the state unit on aging.

Gosh, it was probably about 10 years ago, when the state unit on aging asked the Department for additional state funds for home and community based services and the Governor’s office put that in the budget…and the legislature supported it. I think some of the advocates got some of the money increased, if I’m remembering correctly. But I know it happened as part of the regular process for getting funding requests in the governor’s budget. And then the state unit director at that time (which was before Maria’s time) said we want to carve out a piece of these state dollars for a variety of different services that we think need funding and the ombudsman program was among those. So we have had it carved out internally [within the SUA] from a bigger pot of state dollars.
Another way we have gotten funding for the program has been that we’ve presented a request to the Division and the Division has presented it to the Commissioner. My recollection is that so far, none of these requests has resulted in funding for the program. And so that has hit a dead end, although that is a process we keep hitting our head against the wall on. We keep trying!

Then the other process is that we have a very strong advocacy network in Georgia. The Georgia Council on Aging convenes an organization called COAGE, or the Coalition of Advocates for Georgia’s Elderly. And COAGE every year selects some budget priorities and anyone involved in aging can bring issues. Now the Division staff who are not allowed to do advocacy work at the capitol can’t bring issues, but there are plenty of other people who care about the different services. So about five years ago, some advocates brought to COAGE a request for the ombudsman program to have more staff, more funding. COAGE selected that as a priority and they took it to the capitol, without the state unit or the Department getting involved at all - I mean other than, of course, once it got to the legislature they were asked questions about the proposal, but they didn’t do any of the advocacy work. It was completely done by aging advocates outside of the Department. One year, we were successful in getting monies that way; other years, it’s been presented to COAGE and they have not selected [the request for ombudsman funding] as a priority.

(Maria Greene) But when we’ve had to take cuts, you know, across the board, such as if our Governor’s office mandates a 2% cut, the ombudsman program is an equal part of the cut.
(Becky Kurtz) Yes, we’ve had cuts three years in a row, we had cuts before last year. And then COAGE decided they didn’t like the fact that the legislature cut our money so they made it a priority the year before last, to get our funding restored at the legislature.
(Maria Greene) And they did.
(Becky Kurtz) And they did. They succeeded! So now we’re back where we were in FY ’03, which is better than a lot of folks.
What is your total budget for the ombudsman program? (Debbie Brantley, North Carolina SUA)

(Becky Kurtz) From all sources and including local match, it’s $2.8 million.

How much do you get in state funds? (Debbie Brantley)

(Becky Kurtz): State designated funds to the ombudsman are $820,000. And in addition, we would have the funds that came out of that pot of state home and community based services funding (remember I told you about that earlier - part of that was carved out to the ombudsman program) - that’s $244,000. So about $1 million from state funds.

Ombudsman Program Structure

(Maria Greene) One thing I don’t think we’ve shared is that two different times now, at least, in my six years as director, Becky has led the ombudsman program through a very thoughtful process about considering options for the structure of the ombudsman program, one of the options being to totally be away from state government. In other words, they would be totally outside of state government and not this dotted line or quasi independent entity they are now. And I think one of the challenges with that definitely is having enough budget to support living independently. That’s always been a part of one of the big discussions about having even more independence - not that we’re opposed to more independence - but their ability to survive outside of the support that we offer through the Division of Aging Services, that would be hard.

(Becky Kurtz) One of the things is – this is Becky adding to what Maria was saying - one of the things that’s been a real advantage of having the advisory council is that now we’ve got a group of people who understand us well enough to have these discussions in a longer term way and to think creatively about whether we’re in the best location that we can be to serve residents. And one of the things that’s been kind of interesting about the advisory council is that they’ve also taken on their role to advocate for our program in front of Maria too. The chair of the ombudsman advisory council recently met with Maria
regarding equity of pay among the local ombudsman. The council had a listening session with local
ombudsmen about what some of their concerns were and they felt like there was great inequity in pay
and benefits across the state. So the advisory council has taken it upon itself to meet with Maria and talk
about what can we do, what are possible solutions related to that. So it’s really nice, that I don’t have to
be in the position of fighting all of those battles, and then bringing all of those positions to Maria directly.
I’ve got some other folks now who are really interested in it [the ombudsman program] and setting some
priorities for what they think might be important to strengthen our program.

Does the data input person have any other jobs (other duties within the ombudsman program) in
addition to being the data systems person? (Marty Haase, New York State Ombudsman)

(Becky Kurtz) Yes, sure. I mean all of our staff do a lot of technical assistance with local programs, do
evaluations of local programs. This staff person designed our annual report. She doesn’t do data input
so much as she does design of the system and analysis of the data. And I’ll tell you, design of the system
- I mean obviously it takes more than one person to do that. She participates in a team of people from
the Division who are working on always improving the information technology system, including some
 techno logical folks who can do the technology part. But she’s basically our representative from the
 ombudsman program to make sure the system is functioning for us, running reports, analyzing those
 reports, and helping us get a handle on what our data is saying about the outcome of our services.

Of the five staff that are at the state level, they all help with technical assistance and program
evaluation? Do certain staff people have responsibility for specific programs? Or does it just
kind of happen as the questions arise? (Marty Haase)

(Becky Kurtz) In our state, we haven’t divided up technical assistance regionally, but I really depend on
the two individuals - the one who does training and the one who does our data system - as the primary
backups for me on technical assistance. But it depends on the question. So, for example, if someone is
asking about some ideas for good community education resources, then the person who does outreach
(Andrew) is as likely as any of us to have good resources. It kind of depends on the question. And it tends to be that if it’s a policy question or an advocacy question, I’ll end up getting it. And if it’s a training issue or a volunteer management issue, Jeni will get it. And if it is a data question, how do I report this, Andrea will get it. But we all sort of share that responsibility.

When there’s a new election and you’ve got a whole change over in administration with a whole new group of people coming on board, how do the state unit on aging director and the ombudsman program handle that? (Marty Haase)

(Becky Kurtz) It happens all of the time. And as Maria was saying, she spends a lot of her time educating those folks, not just about the ombudsman program; you know, we’re one piece of a big pie that she’s got to figure out how to manage. But helping all of those people understand our role and our responsibilities as well as all of the other services in aging is a huge responsibility that Maria takes on.

(Maria Greene) And one thing I found that was helpful is, making up some packets that explain the ombudsman program, because you know you’re going to have to go to these educational sessions. But I also want to point out that it’s very similar in other states. I make it so that they understand it’s [the ombudsman program] not just unique to Georgia and I explain in the context of the federal law, the Older Americans Act - and that helps them understand that, OK, nationally, this is the agenda for the ombudsman program. And I try really hard to give it in that context, how there are more similarities across the country then things that are not the same.

(Becky Kurtz) The other thing that sometimes Maria does - it depends on who the person is and what their responsibilities are….For example, the Governor’s Office of Planning and Budget had a new person come in, right before the legislative session. Well he needed to get up to speed really quickly on all of the aging services stuff, so she spent, I think, maybe a half day with him, and she just paraded us in. And basically, I had a half-hour to go in and do my spiel. Maria set it up and gave the introductions, but she didn’t spend half a day with him talking about everything, but we all came in for our own half-hour. I was
able to tell him myself about the ombudsman program and how we operate, to tell him everything I could that would help him understand us better. Maria did the same kind of thing when we had a new legal counsel for DHR. And so it gives me an opportunity to meet with them [new state officials] face-to-face, so they know who I am, I know who they are, we know how to contact each other…but also Maria doesn’t have to talk non-stop about what every single program does.

(Maria Greene) Sometimes we have to schedule follow-up meetings for the ombudsman program…that’s OK. It’s just that it’s important to be proactive. That’s the advice that I would give that you could take away today - be proactive with all of the new folks that you have coming in, especially those in change, in leadership positions. You never know which one of them is going to love the fact that an ombudsman five years ago helped them when their grandmother was in a facility, so they have a good vibe about the ombudsman program! You’re going to find those jewels out there, that you’re going to want to hang on to. And then you’re going to have the diamonds in the rough that you either have to pull along or convince that we’re OK.

Does your state unit on aging have contracted nursing homes? And if so, how do you work out any type of conflicts that may arise when you are actually advocating on behalf of residents?

(Jerry Kasunic, District of Columbia State Ombudsman)

(Becky Kurtz) There are no contracts in nursing homes.

Maria, could you talk a little bit about how much time, particularly for the benefit of some of the other state unit directors on the phone, how much time this all takes you? Because clearly, you’re doing a lot of work on behalf of the program. And as Becky mentioned, you’ve got a bigger pie out there. And so could you talk about the time commitment and how much information you look for from Becky and how much is enough and all of that?  (Mark Miller)
OK. We have regularly scheduled meetings once a month. And Becky and I choose to go to lunch at that time, and it works out well. But I have those monthly meetings with each person who is my section leader (and I have 11, by the way, so I have at least 11 monthly meetings set up with people, and those usually last for an hour). So Becky knows, for instance, that if it’s not an emergency or an immediate need that she has, she’ll save those issues until we have that monthly meeting. If it’s something urgent, she comes and finds me or works some time into my schedule to talk about it. We’ve worked together for so long, that we’re also pretty good at sending e-mails to each other that are fairly detailed about what the message is. We have Division leadership team meetings every other Tuesday [twice a month] and Becky comes and participates in those, so that’s another opportunity to know what each other is doing within the Division and for me to know if there’s an issue going on. And then, the education work comes in cycles. So it’s usually when there’s turnover in the commissioner’s office, like I talked about a while ago. We have elections this fall, so we’ll probably have a new crop of legislators, and we’ll spend some time in the fall and during the sessions doing some of the education then too. That’s always a continuous part of helping our policy makers and legislators understand all of the programs.

And Becky comes to the Division leadership team meetings? (Unidentified speaker)

(Maria Greene) Becky comes. And she’s an equal partner in the discussion. At first when she started coming, we left it optional and she was coming once a month instead of twice a month. And I’ll let her speak to that, but I think she figured out after a while that if she didn’t come one time, she missed something, then it was hard to get that “connectivity.” So she just started coming all of the time.

(Becky Kurtz) Yes, back when the ombudsman program was part of the Elder Rights Section, the section manager was on the leadership team and that person was responsible to keep me informed of any personnel issues I needed to know about or budgetary deadlines or any of those things. Well, once we became a separate office and I no longer had a section manager to go to, it wasn’t really fair for me to ask Maria to repeat what happened in the leadership team meeting - or anybody else for that matter, to
ask them what happened. So I found that there were enough things going on that were Division-wide that impact the operation of our program, that it was important for me to be there.

**Continuous Quality Improvement**

(Maria Greene) We also do a lot of work around continuous quality improvement, and we use Baldrige as our practice model for that. And I kind of had to bring Becky kicking and screaming in on the Baldrige work.

(Becky Kurtz) It’s a huge amount of time.

(Maria Greene) It’s a lot of time. It focuses on leadership, human resources development. There are seven different categories within Baldrige - I could talk all day about it - but it’s our model for continuous quality improvement. So sometimes Becky or our ombudsman staff end up as part of a team (one of various teams) and they may not be one hundred percent excited about it because it doesn’t directly relate back to their work. But I think the value of them doing it is getting the buy in from their peers, that they too are just as invested in succeeding in having the best program we can have in Georgia for the aging network. But she wasn’t excited about it at first! And she may still only be just seventy-five percent there, but I have the expectation and she participates.

**Do any of the other states that are on the call have a similar structure to Georgia?** (Debbie Brantley)

(Bev Laubert, Ohio State Ombudsman) I wouldn’t say we have a similar structure, but I have a similar situation…I mean I don’t have any restraints, I guess. We have an understanding, I guess that’s what it is. We haven’t been connected - or disconnected - in the same way that Becky has. We’re giving some thought to that. But currently, I report to the Deputy Director on the table of organization (he used to be the state ombudsman, in fact, so that works out well). But I’m pretty much left alone and we communicate. You know, it’s just a matter of building relationships.
(Sally Petrone, Illinois State Ombudsman) The ombudsman program in Illinois has some similarity with Georgia, but I report directly to the state unit on aging director, and I’m pretty well left alone as well. One thing that I don’t have - the connectedness that Becky has in regard to the budget, and I’d like to get more involved in that.

As far as the structure of the program and how the money flows - if I’m correct, Becky, all of the federal and state money that is allocated to the program goes through the area agencies and down to provider agencies or through subcontractors (that structure is very similar in Illinois). Is that correct? (Sally Petrone)

(Becky Kurtz) That’s correct. We actually have in our policy manual, and historically we did have an exception, where we could contract directly with a non profit agency and not go through AAA. When I came to this job, I actually had one area that did not go through the AAA, but we actually found later that it is helpful to have AAA support, so now all of our contracts are with or through AAAs. You know, it’s funny because some AAA directors have asked me, “why are we even involved?” Because the state ombudsman staff are the ones that see the ombudsman records, not the AAA directors. And the state ombudsman staff are the ones who pay so much attention to what’s going on with the local programs. And it’s an interesting question, I mean it’s one that I’ve played around with, I see pros and cons. But I have to tell you that we’ve been incredibly fortunate that so many of our AAAs have gotten enthusiastically behind the ombudsman program and supported it. And I really feel like if we didn’t have that AAA support, we’d lose some resources - financial resources, as well as other kinds of resources. So I see that network as a really important support for the program. Now, I will say to you that I don’t think it’s always been seen that way. As we started off saying early on, it’s been an evolution.

I was interested in what Maria said about how the state unit on aging works with the quality issues. Could you send me something on how it is done? (Marty Haase)

Information about the Baldrige Model is attached in Appendix C.
Are there any other ombudsman programs in Georgia state government? And if so, has there been any pressure to look at integration of those functions? And what would be the difference, do you think, in your sort of arrangement versus some other? (Dennis Streets)

(Becky Kurtz): You know, it’s interesting…about five or six years ago, there was a law passed to create a mental health ombudsman program. That was actually modeled a lot after the long term care ombudsman program, but it’s never been funded, so it exists on paper, but not in reality. That’s the only other ombudsman program in the state. We do have an office of the child advocate, and they don’t do a traditional ombudsman model, but they do some things similarly, and actually I have met with them sometimes to talk about how we’re structured and how we operate and that kind of thing. But that would be the only other example I can think of that’s anywhere close.

(Mark Miller) Kentucky does something like that, where they have all of the various ombudsman and advocacy organizations that deal with different populations in one location in state government.

(Maria Greene) You might also want to think about New Jersey and New Hampshire, both of whom have had some experience with that, I think.

(Becky Kurtz): Yes. I know New Hampshire has. And it seems to me like there was some discussion going on in New Jersey recently.

(Mark Miller) And Minnesota.

Is the legal service developer employed at the state unit on aging? And does that person assist the ombudsman program in any way? (Sally Petrone)

(Becky Kurtz): Yes, the legal services developer, Natalie Thomas, is actually housed within the Elder Rights and Advocacy Section. And we do a lot of joint work together. We call it the ELAP program - the Elderly Legal Assistance Program - which is Title III funded throughout the state. We actually have quite a few cases that get referred. They handle our appeals when we’re dealing with resident discharges that
need appealing. And they handle lots of legal issues for residents. Natalie and I have worked very hard at trying to make those referrals between our local people and the local people in the legal services program to be really smooth by looking at how her standards and policies and my standards and policies work, and working on memorandums of understanding to make sure that there are processes in place. We’ve been very fortunate that the Elderly Legal Assistance Program in Georgia has been willing to take ombudsman referrals as a priority issue. And so that’s been generally good. Not always flawless. Sometimes Natalie and I have to have a pow-wow and figure out how to solve problems that the local programs are having with each other. And sometimes we’ve had to have meetings, get the AAA involved, and all of us have had to sit down and figure out if we could work this out.

So, you know, we’ve worked together on those local individual complaint referrals. Also, Natalie and I work quite a bit together at the state level, in terms of joint training opportunities. She’s coming to our ombudsman conference next month to talk about how an administrative hearing works and what ombudsmen can expect from legal services. And then I’m going to talk about the role of the ombudsman in the hearing and when is it appropriate, and when is it not appropriate? So we’re going to do a joint session on that. We’ve done training together quite a bit and I’m going to be speaking at her conference later this summer too, about some nursing home issues. And we’ve also done a lot of brainstorming on legislative issues. She’s excellent at providing community education resources. Every year, she does an update on Medicaid laws and rules for long term care that we use in the ombudsman program; we also spread it far and wide - share it with the public and clients - and we have it on our website. So we have a lot of interaction with our legal services developer. We’re probably closer - programmatically anyway – than with any other staff person in the state unit on aging.

(Maria Greene): I would add also that I see real good connectivity and working together between elderly legal assistance and the ombudsman program. We also have a senior legal hotline, housed here within the same building [as the SUA]. And we also have a lot of synergy with our SHIP (state health insurance program), which in Georgia is called Georgia Cares. It especially worked on helping beneficiaries understand their choices with Part D and Medicare modernization. So whether it’s driven by change in a
program, where we all need to work together and communicate, or whether it’s the staff deciding together that it would be good to have a joint conference, any of those things that we can help with, not only at the state level but at the local level as well, mirroring people working together, sharing resources and information, I’m all for it. I mean it’s just so win-win!

(Becky Kurtz): Typically our local ombudsmen don’t call the legal services developer directly, but will call their local program or they’ll call me for technical assistance and then I might contact Natalie if I need backup on something. But occasionally if the folks out in the field are really stumped on a legal issue and they can’t contact me for some reason or can’t get what they need locally, there have been a few situations where they’ve called Natalie directly. And Natalie’s made it very clear to them that as long as it’s about a resident issue, that their client is potentially her client, and she is very helpful. They all call her “Aunt Natalie” and she’s very helpful to them. But we try to be careful not to abuse her time and not have every ombudsman in the state calling Natalie, we try to filter that a bit.

(Maria Greene): She’s been your backup too, when we’ve had staff meetings.

(Becky Kurtz): That’s true. When a bunch of us are not available because of an intensive staff meeting or training, Natalie has been willing to serve as our “back up” - you know, making it clear that she’s not doing this as an ombudsman, but if she can help you think through a situation, she’ll be there, she’ll provide technical assistance to the ombudsman. And we’ll let them [local ombudsmen] know that she’s going to play that role until we’re available again.

You said that you received $244,000 in home and community based funds, is that right?
(Unidentified speaker)

(Becky Kurtz): Yes, that’s state funds.
In addition to the $820,000? (Unidentified speaker)

(Becky Kurtz): Yes, basically it’s just a matter of how the legislature appropriated it. One part of it was earmarked specifically for the ombudsman program, and the other part was a pot of money for aging services. And then the Division made some decisions about how to distribute it. So it’s mostly a matter of how the decision was made of how to distribute it. But the $820,000 - the legislature has specifically said this is for the ombudsman program.

The home and community based money, where does that come from? (Unidentified speaker)

(Maria Greene): It’s state funds. We typically segregate our state funds by Medicaid or non-Medicaid, it’s not too complicated – it’s either/or. And Medicaid state funds are matched with Medicaid federal dollars for our waiver program. So then our non-Medicaid home and community based services funding is just state dollars. So that pot of funding is not matchable with a federal dollar, although we require a local match from our contractors.

In terms of these state dollars that go to the ombudsman program, am I correct that the larger pot of money is designated for various aging services, some of which supports home and community based services and some part of which goes to the ombudsman program? (Virginia Dize, NASUA)

(Maria Greene): When we say non-Medicaid home and community based services, it includes access to any of our services such as meals on wheels, congregate care, respite care, homemaker, ombudsman, elderly legal assistance, SHIP, et cetera. So those dollars we share amongst the programs, some get more than others. You will see more state dollars, for instance in homemaker, home delivered meals, congregate meals that sort of thing. And one of the reasons we bundled our sub programs under a larger program, initially, was to try to protect the ones that we thought the General Assembly would be more apt to cut. And two of those in particular were ELAP (legal assistance) and the ombudsman program.
legislatures start wanting to cut these, they see them as less valuable because it’s not a meal. So we kind of lump them all together – our sub programs under a larger program.

(Becky Kurtz): On the other hand, though, the legislature has been willing to support us in a separate line item in the past. So it sort of cuts both ways. You just try to use your best strategy for whatever the politics are at the moment.

Closing comments
I wanted to first of all thank you for this. I think this has really been a very effective and beneficial thing. The actual dialogue between Maria and Becky is pretty powerful. I hope all of the ombudsmen and state unit directors can have a chance to review it. (John Willis, Texas State Ombudsman)

I just want to agree with John Willis. It’s been very, very informative and insightful to me. And I thank Becky and Maria and also you, Mark, for putting it together. (Marty Haase)

(Mark Miller) You’re more than welcome and I know we speak for everyone when we say we appreciate both Maria’s and Becky’s time in putting this together and helping lead the discussion this afternoon. So thank you all for joining us. Thank you Becky and Maria.
APPENDIX A

Teleconference Participants
Time and Leadership: Keys to Building Synergy Between State Ombudsmen and State Aging Directors

Teleconference Participants

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<td>Carol Sala</td>
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**Texas**

John Willis  
State Ombudsman

**Virginia**

Joani Latimer  
State Ombudsman

**Wisconsin**

Gail Schwersenska  
Deputy Director  
Bureau of Aging & LTC Resources

**Administration on Aging**

Sue Wheaton  
Ombudsman Program Specialist
APPENDIX C

Baldrige Management Material
Georgia Division of Aging Services
Creating A Culture of Performance Excellence

What is performance excellence?
Why should I care?
How does an organization go about achieving it?

But First… A Few Things to Ponder

1. What are your organization’s top 2-4 challenges?
2. What currently stands in the way of success for your organization?
3. Organizations that have lots of problems are:
   a. High performing organizations
   b. Low performing organizations
4. Would your coworkers agree with your list in questions 1 & 2 above?
5. Is your organization protected enough to ignore outside trends?

What Excellent Organizations Value

- Visionary Leadership
- Customer-Driven Excellence
- Organizational and Personal Learning
- Employees
- Agility
- Focus on Future
- Managing for Innovation
- Management by Fact
- Focus on Results & Creating Value
- Systems Perspective

Excellent Organizations Do These Things Well:

- Leadership
- Strategic Planning
- Customer & Market Focus
- Information & Analysis
- Employee Focus
- Process Management
- Results

Leadership Examples

- Leaders emphasize strong customer focus
- Leaders set & communicate clear direction throughout organization
- Leaders develop clear organizational values and lead by example
Strategic Planning Examples

- Customers, suppliers & employees have input into plans
- Plans communicated to all employees
- Performance against plan is reviewed on regular basis

Customer & Market Focus Examples

- Customers clearly identified & segmented
- Multiple methods used to determine customer requirements
- Measurable service standards defined
- All complaints tracked & resolved promptly

Information & Analysis Examples

- Collect only actionable or required data
- Decide who will have access
- Develop strong organizational analysis capabilities
- Have hardware & software systems that are current, reliable, and user-friendly

Employee Focus Examples

- Commitment to employee satisfaction
- Comprehensive training & education
- Recognition of “internal customers”
- Empowerment
- Focus on employee morale

Process Management Examples

- Key processes & process measures are defined on basis of customer requirements
- Variety of sources of information is used to look for process improvement opportunities
- Focus on cycle time

Results Examples

- Have well-balanced results “scorecard” to include performance & improvement in key areas: customer satisfaction, service performance, financial performance, employee results, and supplier results
- Results tied to strategy and action plans
- Results measures must be actionable
What is performance excellence?
Why should I care?
How does an organization go about achieving it?

What is this internationally recognized model for creating high performing organizations and how can I learn more?

1. The Baldrige National Quality Program
2. Go to their website: www.quality.nist.gov