The Role of Long-Term Care Ombudsman in Preventing, Reporting and Investigating Abuse
LLTCO NORC Questionnaire, March 2011

OVERVIEW
The role of Long-Term Care Ombudsmen in preventing, reporting and investigating abuse in long-term care facilities varies widely across the country. The purpose of this brief is to summarize the responses received in the March 2011 questionnaire from Local Long-Term Care Ombudsmen regarding their program's role. Additionally, this brief highlights barriers to Ombudsmen addressing abuse, promotes successful practices, and identifies potential topics for future training opportunities and further discussion.

KEY POINTS
- 56 Local Long-Term Care Ombudsmen and responded to the March 2011 survey representing local programs in the following states: AZ, CA, CO, GA, IN, KY, MD, MN, MT, NC, NY, OH, PA, TX, VA, WA and WI.
- 29 respondents (57%) said there is an active multidisciplinary group that meets on a regular basis to discuss elder abuse, neglect and exploitation and 27 of those with regional multidisciplinary groups participate in or lead the meetings.
- The majority of respondents (31) said they provide in-services to long-term care facility staff regarding abuse and the second most common activity was providing information about elder abuse to the community through presentations, health fairs or other community events (12 respondents).
- Similar to the response received from State Long-Term Care Ombudsman, the most common barrier mentioned in preventing, detecting and reporting abuse was the federal mandate to maintain confidentiality, even in cases of abuse. 11 respondents expressed concern over underreporting due to the complainant’s fear of retaliation or their unwillingness to report abuse.

SUMMARY OF SURVEY RESULTS
Note: The percentages included below reflect the percentage of respondents that answered that specific question, not the overall response rate as some respondents did not answer all questions.

COORDINATION WITH OTHER AGENCIES
- 31 respondents (66%) said their program communicates with local law enforcement regarding abuse in long-term care. Most of the communication with local law enforcement involves specific cases and referrals; however, a few respondents said they provide training to law enforcement regarding abuse, neglect and exploitation (6), several respondents said representatives of law enforcement participate in multidisciplinary groups to address abuse (8).
- 77% of respondents (36) said their programs do not refer cases of alleged abuse to local law enforcement, but slightly more than half of the respondents (25) refer cases directly to their state’s Medicaid Fraud Control Unit (MFCU).
- 18% of respondents (8) said their local program communicates regularly with their state’s MFCU.
- 35 respondents (73%) said they are not notified by their state regulatory agency when facilities submit incident reports of possible abuse, neglect or exploitation. Of the 13 respondents (27%) that do receive notification of these reports 4 respondents said their program visits the resident
involved in the incident to inform them of Ombudsman services and/or speak with the facility regarding their corrective action.

- 64% of respondents (29) said their program has regular communication with their local District Attorney's office regarding abuse in long-term care, several of the respondents said a representative from the District Attorney’s office participates in a multidisciplinary group regarding abuse in long-term care and a few respondents spoke with the District Attorney’s office regarding specific cases.

**ACTIVITIES AND SUCCESSFUL PRACTICES**

- 5 respondents said they have provided training regarding abuse in long-term care to members of law enforcement and other elder abuse prevention activities include: participating in elder abuse multidisciplinary teams (27), training first responders (1), partnering with other agencies to provide training (1) and posting information regarding elder abuse on their agency website.

- **California:** One respondent participates in a First Responders group with members of the District Attorney’s Office, law enforcement, fire department, LTCOP and APS. The group created a First Responders Protocol that describes how each agency responds to a report of elder or dependent adult abuse.

- Several respondents said they participate in coalitions with other professionals in order to increase public awareness of elder abuse, identify systemic issues, coordinate services and plan events. Examples of these coalitions include:
  
  - **Colorado:** Colorado Coalition for Elder Rights and Adult Protection (CCERAP) and the coalition’s goal is to promote awareness of elder abuse across the state and provides free quarterly elder abuse training on their website, [www.ccerap.org](http://www.ccerap.org).
  
  - **Kentucky:** The Barren River Elder Abuse Prevention Coalition. The Coalition works to raise awareness among judges and the judicial system regarding the low rate of elder abuse prosecutions. The Coalition promotes Elder Abuse Awareness and Prevention Week and Silver Ribbon Restaurant Day. For additional information, visit the website: [www.preventelderabusebg.com](http://www.preventelderabusebg.com).
  
  - **Maryland:** The Baltimore County-Restoring Elder Safety Today (BC-REST) coalition: [www.bcpl.info/stopelderabuse](http://www.bcpl.info/stopelderabuse).

- **FAST Meetings:** Three respondents representing Arizona, California and Texas participate in regional FAST meetings. FAST (Financial Abuse Specialist Team) is a group of professionals that meet to address financial exploitation. These teams often staff cases, provide community education regarding financial exploitation and address systemic issues.

- **North Carolina:** Two respondents said they provide 3-hour training for facility staff, professionals and the community titled, “No Excuse for Elder Abuse.”

**DISCUSSION AND FUTURE TRAINING**

- The second most common barrier mentioned in preventing, detecting and reporting abuse mentioned by the respondents was the need for more funding to support additional staff and volunteers in order to increase the frequency of visits with residents.

- Also similar to the response given by State Long-Term Care Ombudsmen, the third most common barrier mentioned in preventing, detecting and reporting abuse was the lack of response by APS, specifically related to financial exploitation or “screening out” cases since the resident lives in a facility.

- One respondent stressed that the definition of abuse as with “willful intent” is often a barrier since some neglectful or abusive behavior may not be considered abuse unless it was deemed a “willful” act.

- The most requested training topic was for train-the-trainer elder abuse prevention and detection training and prepared in-services for providers, volunteers, professionals and the community. One respondent requested online training videos to use for volunteer and staff training.
- Several respondents requested best practice examples of LTCOP coordination with other agencies such as law enforcement, the District Attorney’s office and APS and suggestions on how to engage these agencies in elder abuse cases.
- In order to encourage more elder abuse prosecutions, two respondents wanted to receive training regarding what “proof” is required to prosecute and more information about criminal elder abuse proceedings.