

MDS 3.0/SECTION Q IMPLEMENTATION SURVEY RESULTS

Common Themes addressed by SLTCO and LLTCO

Communication, Information and Referrals:

- 65% of the State Ombudsmen said most of the nursing facilities in their state are familiar with MDS 3.0 and 42% of Local Ombudsmen said all of the nursing facilities they visit are familiar with MDS 3.0.
- Most State (50%) and Local (39%) Ombudsmen did not know if nursing facilities considered the LCAs to be responsive to their referrals.
- Multiple State and Local Ombudsmen expressed concern about the availability of community resources to accommodate residents and the timeliness of the entire process from referral to transfer.
- Numerous State and Local Ombudsmen voiced concern about discussing community options with residents with dementia or diminished capacity and requested guidance for this discussion.
 - Specifically, multiple Ombudsmen asked if facility staff could choose not to discuss community options with a resident based on the resident's capacity. Also, based on the individual resident's needs and capacity, can a facility choose not to ask these questions each quarter? How much latitude does a facility have in determining which residents to refer to the LCA?
 - Similarly, a couple Local Ombudsmen said some facilities do not address community options with residents if they have guardian.
 - One Local Ombudsman said the local LCA does not send information regarding community options to the resident (even if the resident requested the information) if the resident's legal representative does not agree with the potential discharge.
 - One Local Ombudsman said some residents see responding to these questions as a burden, due to the quantity of the questions and the frequency and would rather not spend time discussing community options if they've already addressed Section Q.

Discussion and Training:

- State and Local Ombudsmen felt that nursing facilities need more training regarding speaking with residents and families about Section Q, the role of the Local Contact Agencies and making appropriate referrals.
 - One Local Ombudsman requested case study examples of successful transitions and the role of the Ombudsman.

- A Local Ombudsman from Maryland said her state program received training from the SLTCO in September 2010 and as a group they practiced interviewing each other as residents would be interviewed.
- Multiple State and Local Ombudsmen mentioned their concern for the emotional stress and anxiety residents may experience if they believe they can transfer to the community and they cannot or they have to respond to these questions each quarter despite the fact that they may not be able to take advantage of community options. Ombudsmen that mentioned this concern would like training in handling this sensitive situation.
- State and Local Ombudsmen would appreciate training reviewing the basics of the Section Q process, how facilities should address this section and determine residents for referral and clarify the role Ombudsmen have in this process.
- One State Ombudsman asked for best practices related to monitoring follow-up with residents that discharged into the community, especially in states with an Ombudsman Program that advocates for elders receiving home and community-based services.
- State Ombudsmen want information regarding securing additional funding for increased activity since the implementation of MDS 3.0/Section Q.
- A few State and Local Ombudsmen requested a brochure for residents regarding the Section Q process.
- One Local Ombudsman suggested revising the NORS codes to be more specific regarding complaints related to this process, i.e. a specific code for complaints related to the LCA.
- From the questionnaire comments, it appears that several states do not have a clearly defined referral process that identifies the roles of all agencies involved.

Complaints and Other Ombudsman Activities:

- In general, State and Local Ombudsmen said there has been a greater increase in consultations and other activities than complaints. In fact, in the second State Ombudsman survey all respondents said they have not experienced an increase in complaints.
 - The majority of the consultations are to facility staff regarding Section Q and the referral process and most of the other consultations are with residents and families.
 - In consultations with family members, multiple State and Local Ombudsmen said they often have to explain resident rights and the Section Q process to family members that do not support the resident's discharge from the nursing home.
- The Local Ombudsmen that said complaints have increased since the implementation of MDS 3.0/Section Q said the most common complaint received was F-42: Resident Care-Care plan/assessment and the second most common was P-120 System/Others- family conflict/interference.
 - A few Local Ombudsmen said the P-120 complaints often involved advocating for the resident right to transfer to a less restrictive

environment, as family members were upset and not supportive of the resident's discharge from the nursing home.

Successful Outcomes:

- Several Local Ombudsmen gave examples of successful resident transfers out of nursing homes and into a less restrictive environment.
- Some State and Local Ombudsmen said this process has improved collaboration and communication between their program and other agencies involved in the relocation process.
- A couple Local Ombudsmen said some facilities have improved their communication with residents during care plans and assessments as they thoroughly explain community options and develop appropriate discharge plans.
- Two Local Ombudsmen said residents have a better understanding of community options and their rights.