CHAPTER 13  FACILITY COVERAGE

I. Introduction

The federal Older Americans Act requires that Long-Term Care (LTC) facility residents have “regular and timely access” to representatives of the LTC Ombudsman Program. Through frequent, routine visits to LTC facilities, ombudsman representatives are able to identify concerns of residents, develop relationships, explain the Ombudsman Program to residents and facility staff, and proactively address residents’ issues.

The presence of ombudsman representatives in LTC facilities is essential to the success of the program. In 2000, the California Ombudsman Strategic Action Task Force picked “ensuring a regular presence in LTC facilities” as one of the LTC Ombudsman Program’s Core Elements. Core Element #2, “Ensure a Regular Presence in Long-Term Care Facilities,” establishes standards for the development and use of facility coverage plans. Minimum facility coverage standards help to provide consistent statewide coverage of LTC facilities by the Ombudsman Program.

II. Legal Authority

FEDERAL  Title 42 United States Code section 3058g(a)(3)(A)-(D)

STATE   Welfare and Institutions Code section 9722(a)

III. Local Ombudsman Program Responsibility

Local LTC Ombudsman Programs should annually assess the number of certified ombudsman representatives in their Planning and Service Area (PSA) to assure there are enough staff and volunteers to provide adequate facility coverage. Each local Ombudsman Program Coordinator must establish priorities for facility coverage and complaint handling based on several factors, such as the number of complaints received by the Ombudsman Program, citations and deficiencies received by a facility, changes in the administration of a facility, resources available to the local Program, as well as the needs of the residents. No specific format is required for the facility coverage plan. Ombudsman Program Coordinators may use the sample included in Exhibit 13-A as a guide.

Ombudsman Program Coordinators should develop a facility coverage plan to meet the following minimum facility coverage standards (as defined in the instructions for completing the State Long-Term Care Ombudsman Program Reporting Form for the National Ombudsman Reporting System):
• Documented quarterly visits to each Skilled Nursing Facility (SNF), Intermediate Care Facility (ICF), and Residential Care Facility for the Elderly (RCFE) in the PSA that are not in response to a complaint, dependent upon resources currently available to the program.

• Programs should maintain enough resources to be available to respond to reports of abuse and neglect and other complaints in a timely manner.

IV. Levels of Coverage

Listed below are considerations the Ombudsman Program Coordinator should use to prioritize facilities and/or determine the appropriate level of facility coverage:

• Observations made during facility visits

• Number of citations and deficiencies

• Number and type of complaints made by, or on behalf of, residents

• Number and type of referrals made to other agencies (e.g., Department of Public Health Licensing & Certification; Department of Social Services Community Care Licensing; Department of Justice Bureau of Medi-Cal Fraud and Elder Abuse, etc.)

• Existing National Ombudsman Reporting System (NORS) data that indicates a systemic problem

• Current resources available to the program

Facilities with continued patterns of non-responsiveness to complaints or non-compliance with citations or deficiencies require a more frequent Ombudsman presence. Specific knowledge of each LTC facility will allow the local Coordinator to determine where residents’ needs are greatest, and guide the specifics of the facility coverage plan.

V. Documentation of Facility Visits

Comprehensive facility visits will help the local Ombudsman Program to determine which facilities need more frequent visits. The local Ombudsman Program should maintain a file on each facility that reflects visit(s) and ombudsman actions and findings. Documentation of visits should include the following ombudsman activities at least once a year:

• Review of posted licensing surveys, deficiencies, and citations
• Notation that the ombudsman poster is properly displayed and contains the local Ombudsman Program name, address and telephone number

• Meetings with staff and residents to ensure access to ombudsman services

• Identification of communication barriers that exist between staff and residents (e.g., different languages spoken, etc.)

• Identification of any special services available and any unusual characteristics

• General observations including number of beds, atmosphere, activities, etc.

The ultimate goal of every local LTC Ombudsman Program is to provide a regular presence in LTC facilities, thereby increasing the availability of ombudsman services to residents. Local Ombudsman Programs make this possible through good planning and the availability of trained, certified ombudsman volunteers and staff to cover every facility.

Because ombudsman presence is established on a relatively long-term basis (months or years), frequent visits to LTC facilities can provide proactive intervention to improve residents’ quality of life and prevent crises from developing.