even gone so far as to eliminate Volunteer volunteers has also made an impact on the many areas of the state. The decrease in the volunteer program has diminished improper discharges:

- fines when facilities do not follow the proper discharge process. Current fines are not an effective deterrent.

Administrator Law Judges (ALJs) do not have the authority to order a facility to take the resident back or to allow the resident stay in the facility if a resident wins the administrative hearing.

- Ombudsmen cannot request a hearing or represent a resident in a hearing if the resident lacks decision making capacity and has no legal representative, and

- there are not substantial consequences for non-compliance.

Volunteerism:

Due to the lack of paid volunteer coordinators, the volunteer program has diminished in many areas of the state. The decrease in volunteers has also made an impact on the number of regular presence visits made by the program. Most of the Regional Ombudsmen have had to fill the role of the volunteer coordinator. Some programs have even gone so far as to eliminate Volunteer Ombudsmen completely from their programs because they don’t have the time to manage, recruit, and train volunteers.

Recommendations:

The recommendation from the Office of the State Long-Term Care Ombudsman is to amend the Illinois Nursing Home Care Act to require the Department of Public Health (DPH) to report any facility that does not allow for the proper discharge process. Current fines are not an effective deterrent.

In addition, the Illinois Long-Term Care Ombudsman Program must be granted the authority to order the facility to take the resident back when the final decision in an appeal hearing is in the resident’s favor. Finally, new legislation must give a voice to our most vulnerable population by allowing Ombudsmen the authority to represent residents in an administrative hearing when the resident lacks capacity and who either has no representative or was not a representative not fulfilling his or her fiduciary duty.
The Ombudsman Program continued to work with various legislators and advocacy groups to prepare a bill for introduction in the 2017 session.

Statewide Plan
The Ombudsman Program’s statewide plan focused on promotion of long-term care rebalancing and reform.

Complaints and Consultations
The Ombudsman Program handled 7,828 complaints during FY2016, of which 4,670 were made at 1,570 nursing facility complaints. 5,063 complaints were verified. There were 1,216 Assisted Living and Shared Housing Establishments, Supportive Living, and Small Group Home complaints for FY16 and 850 complaints were verified. Out of 42 cases in the “other settings” category, 35 were verified. Of all complaints, 5,078 were resolved or partially resolved to the satisfaction of the resident or complainant.

There are 133 possible codes used for documenting complaints into the National Ombudsman Resource System. By far, the largest single complaint investigated by the Illinois Ombudsman Program was related to improper involuntary discharges. The Program investigated:

- 911 Complaints of Improper Discharges
- 434 Complaints of Exercise of Preference/Choice and/or Civil/Religious Rights
- 402 Complaints of Financial Exploitation or Neglect from Individuals Outside of the Facility
- 398 Complaints Relating to Information Regarding Rights, Benefits, Services and the Resident’s Right to Complain

Twenty percent of Ombudsman complaints were made against someone other than the facility. The majority of those included complaints of financial exploitation.

There were 22,959 consultations handled by the Ombudsman Program. The three most common were money follows the person, the Ombudsman Program, and the Ombudsman Program's statewide plan.

Fiscal Year 2016 Annual Report

Funding
Long-Term Care Ombudsman Program
In FY2016, the budget for the Ombudsman Program totaled $4,306,135. The largest portion of funds supporting the program came from federal funding totaling $2,669,516. The Program received $1,188,838 in state funds while local funding for the program totaled $447,781. However, the program did not receive funding from the Long-Term Care Provider Fund as it has in years past.

Home Care Ombudsman Program
Beginning in FY2014 and continuing into FY2016, the Long-Term Care Ombudsman Program expanded its services to include advocacy for seniors and persons with disabilities who live in the community and receive managed care services through the Medicare-Medicaid Alignment Initiative (MMAI) or who live in the community and receive Medicaid waiver services. Funding for this expansion came from three main sources: a federal grant through the Duals Demonstration Program, state funds, as well as Balancing Incentive Program (BIP) funds. The total expansion funding for FY2016 was $1,867,242.

Legislative Advocacy
The nursing home industry introduced HB 5601 that would no longer allow anonymous callers to file a complaint with the Illinois Department of Public Health against a long-term care facility. The State Ombudsman worked with various legislators and advocacy groups as well as the Illinois Department on Aging to prevent this legislation from passing. The State Ombudsman testified against the bill in front of the House of Representatives, and was interviewed and quoted in various news articles, including U.S. News and World Report. The bill did not pass.

Another legislative issue the Ombudsman began to work on in FY16 was improper discharge reform. The Office identified significant concerns with improper evictions from long-term care facilities and worked closely with the Alzheimer’s Association and other advocacy groups to prepare a bill for introduction in the 2017 session.

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