

INTRODUCTION TO THE NATIONAL OMBUDSMAN REPORTING SYSTEM TABLE 3 USER GUIDE

State Program Information

September 30, 2020

Agenda

- Greetings from ACL
- Data Management Plan
- OAAPS
- Table 3 Guide review
- Open Dialogue
- Resources

Questions? Use the Q&A or Chat box.



Question & Answer

The Q&A window allows you to ask questions to the host and panelists. They can either reply back to you via text in the Q&A window or answer your question live.

- 1. Click Q&A to open the Q&A window.
- 2. Type your question into the Q&A box. Click Send.

• •	Q&A	
Y	ou have no question.	
What happens whe	en I raise my hand? I	
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Send Anonymou	isly	Send

Chat

The in-meeting chat allows you to send chat messages to and send a message to the host, panelists, and attendees (if permitted).

1. Click Chat to open the in-meeting chat.



- The chat will appear on the right side of your Zoom window if you are not in full screen. If you are in full screen, it will appear in a window that you can move around your screen as needed.
- 3. To change who you are chatting with, click the drop down beside To:.



4. Type your message and press Enter.

Louise Ryan

Ombudsman Program Specialist

Administration on Aging /Administration for Community Living

Poll Question #1

Have you created or reviewed and updated a State Office data management plan since the data management training last April? Choose one response.

- Yes, created an LTCO program data management plan
 Yes, reviewed and updated our LTCO program data management plan
- No, but I thought about it

Data Management

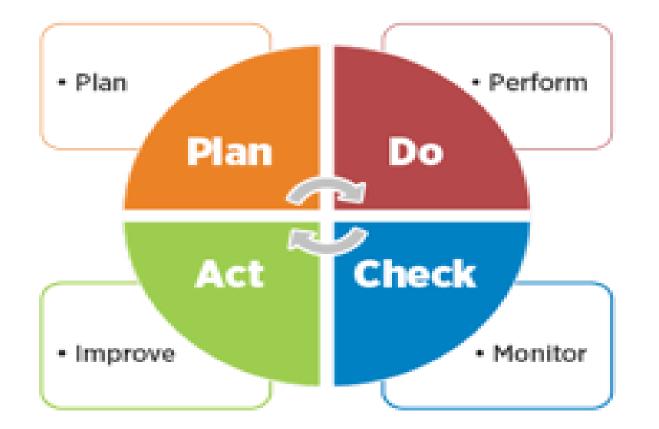
Key recommendations:

- Review Office policies that correlate with data completeness, accuracy, consistency, and timeliness.
- Review or create a data management plan.
- Meet with IT staff to create or review data reports that are required for data quality reviews.
- Specify responsibilities of the Office, Supervisors, and representatives for regularly scheduled data quality reviews.
- Create Case Review template for supervisors to use when reviewing cases.
- Establish minimum baseline goals for specific outcomes.

Data Management Plan Components



Data Management – Plan



https://asq.org/quality-resources/pdca-cycle (Baldridge Criteria)

Data Management Webinar and Materials

- Ombudsman Program Data Management to Ensure Quality (April 21, 2020)
 - NORS/OAAPS (private-SLTCO side) <u>https://ltcombudsman.org/state_home/</u> <u>state_support/NORS</u>
 - State Ombudsman NORS Training (public)

https://ltcombudsman.org/omb_suppor t/nors/state-ombudsman-nors-training

National Ombudsman Reporting System (NORS) Data Management Guide

The National Long-Term Care Ombudsman Resource Center

This Data Management Guide describes the tasks, resource materials, examples and tips, and responsibilities of the State Long-Term Care Ombudsman (Ombudsman) and representatives of the Office of the State Long-Term Care Ombudsman (representatives). The Ombudsman is responsible for overseeing the program's policies and procedures, management of data, budgeting and contracting, training, and designation of representatives (paid and volunteer). Ombudsman are also responsible for independently developing and providing final approval of an annual report through the annual submission of National Ombudsman Reporting System (NORS) data into the Administration for Community Living's (ACL) approved software, the Older Americans Act Program Performance System (OAAPS.) This Guide outlines a few OAAPS related tasks. More detailed information about OAAPS reporting will be provided in the forthcoming Title VII Table 3 User Guide and training. Some of the responsibilities for representatives identified below may only apply to those that manage a local Ombudsman entity (LOE), some may apply to all paid representatives. Data management includes collection and documentation of all the cases, complaints, and activities of all representatives, including volunteers.

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This Guide provides examples of types of data reports for each aspect of a data management plan in order to support your Office's ability to collect, analyze, and report on your program's data. It is not intended to be exhaustive for every NORS data element. The "examples and tips" below are not requirements as state policies and procedures may vary; however, they are intended to be considerations to assist states in ensuring data timeliness, completeness, consistency, and accuracy. As you develop a data management plan be sure to allow for time and resources to ensure that your data collection software can accommodate the following:

- All facilities (nursing facilities and residential care communities) are in the system by type and facility name.
- · Volunteer representatives' cases, complaints, activities, and hours donated are routinely entered into the system.

Task	Resource Materials	Examples and Tips		State Ombudsman Responsibilities	Representative Responsibilities
Create or review the Office's Data Management Plan. Ensure data timeliness, completeness, consistency, and accuracy.	LTCOP Code of Federal Regulations Book The Data Management Association Functional Framework Blog Your Guide to Data Quality Management Visit the NORS/OAAPS page on the State Ombudsman website for	At a minimum, the plan should include: 1) data timeliness, 2) data completeness, 3) data consistency, and 4) data accuracy. The Office's policies and procedures complies with the Ombudsman program's code of federal regulations (45 CFR 1324). The Data Management Plan aligns with the Office's policies and procedures.	•	Review Office policies that correlate with data timeliness, completeness, consistency, and accuracy. Learn and use your program's data collection software and reporting capacity. Ensure that state Office staff, including the state Ombudsman has a process for entering their data (cases, complaints, activities, etc.)	 Participate in creating, reviewing, or updating Office's data management plan. Data entry in accordance with NORS Tables 1-3.

https://ltcombudsman.org/uploads/files/support/NOR S_Data_Management_Guide_-_FINAL.pdf

QUESTIONS

Older Americans Act Performance System (OAAPS)

- OAAPS is the Older Americans Act Performance System.
- OAAPS is replacing the Ombudsman Reporting Tool (ORT).
- The State Long-Term Care Ombudsman or their designee will use OAAPS to submit the state annual National Ombudsman Reporting System (NORS) report.

OAAPS Highlights: What The National Long-Term Care You Need to Know Now

Ombudsman Resource Center

What is OAAPS?

OAAPS is the Older Americans Act Performance System. OAAPS is replacing the Ombudsman Reporting Tool (ORT). The State Long-Term Care Ombudsman or their designee will use OAAPS to submit the state annual National Ombudsman Reporting System (NORS) report.

Who Uses OAAPS?

State and tribal programs who provide Older Americans Act (OAA) services will use OAAPS. The OAAPS refers to the various OAA programs by their title in the Older Americans Act, thus the Ombudsman Program is referred to as Title VII. You may find Title VII resources on the OAAPS resource page. The Administration for Community Living (ACL) will use OAAPS to monitor performance data and collect information from state LTC Ombudsman programs as required by the Older Americans Act and Ombudsman program regulation.

How Do I Access OAAPS?

You may access OAAPS at https://oaaps.acl.gov/app/welcome. There is a new, required process for administrative users to verify credentials using a program called "Okta." All state Ombudsmen were assigned as a state Administrator User and received an Okta invitation. Once signed up through Okta, the user can go directly to OAAPS and bypass Okta. ACL recommends that programs have another state Administrative User. An Administrative User can add state level users and set the level of access. To establish an Administrative User account contact Louise Ryan, Ombudsman Program Specialist, Louise.Ryan@acl.hhs.gov.

Is Data Entry the Same in OAAPS as ORT?

No. The main way the OAAPS differs from the ORT is that case and complaint data must be uploaded as data files. There is no option to manually enter cases and complaints. States will have the option of uploading numeric program activity data in a file labeled "All Other Data" or may manually enter this data.

When Do I Submit Our NORS Report in OAAPS?

States will submit Federal Fiscal Year (FFY) 2020 data in the OAAPS for the first time in January 2021.

How Can I Prepare for Using OAAPS?

OAAPS is available now for users to explore and become familiar with in advance of reporting in January 2021. ACL strongly encourages Ombudsman programs to practice submitting a report. Review the reference materials for Title VII that include a user guide, seven quick reference guides, and three recorded webinar trainings. Reference materials are available on this page and training webinars are available here. Review the technical documents and practice uploading data files by using the sample data files available on this page.

Who Do I Contact for OAAPS Technical Assistance?

ACL and ICF, the system developer, will provide system-related technical assistance (e.g., issues uploading a file). You can receive technical assistance by contacting OAAPSHelpdesk@acl.hhs.gov.

Who Do I Contact for Programmatic Technical Assistance?

ACL and The Lewin Group, subcontract with the National Ombudsman Resource Center (NORC), for programmatic technical assistance. Click here for NORS training materials, recorded webinars, guides, and FAQs. NORC will also provide training and support for state Ombudsmen regarding OAAPS. For assistance contact ombudcenter@theconsumervoice.org.

Who Do I Contact for Questions about the Ombudsman Reporting Tool (ORT)? For questions about the ORT or the FY 2019 NORS Report, go to https://www.napisdata.us/ort2 or contact Louise Rvan, Ombudsman Program Specialist.

https://ltcombudsman.org/uploads/files/support/OAAP S-Highlights-final.pdf

OAAPS Resources

https://oaaps.acl.gov/app/welcome



Poll Question #2

Do you have user access to OAAPS and have you tried testing entries and file uploads? Choose one response.

Yes, have access and have done test entries and file uploads.
 Yes, have access but have <u>not</u> done any test entries or file uploads.
 No, I do not have access.

OAAPS Access and Assistance

For access to OAAPS contact: Louise Ryan, Ombudsman Program Specialist, AoA/ACL louise.ryan@acl.hhs.gov

For assistance with any technical difficulties related to access, testing of input and data file uploads, use the "Contact Us" link on the OAAPS home page

For programmatic assistance with NORS contact: <u>ombudcenter@theconsumervoice.org</u>

SITE SUPPORT About OAAPS Contact Us OAAPSHelpdesk@acl.hhs.gov Viewers & Players Accessibility Privacy Policy

Important Dates

October 2020 – December 31, 2020

State LTCO access OAAPS, review the technical assistance resources, and practice submitting reports. Collect case - complaint data in the appropriate file report.

January 2021 Submit federal fiscal year 2020 data in OAAPS for the first time.

ACL NORS Table 3 & NORS Table 3 User Guide

Administration for Community Living/Administration on Aging- Office of Long-Term Care Ombudsman Programs

National Ombudsman Reporting System (NORS) Table 3: State Program Information OMB Control Number 0985-0005 Expiration Date: 04/30/2021

State Program Data Elements

States will submit a wide range of elements describing their statewide Ombudsman program grouped into a range of categories. Each of these sets of elements is presented in the subsections below.

Part A-Complaint Example

States will submit complaint example data that provide narrative description and disposition information regarding two to three closed complaints during the reporting period.

Composite Data Element	Element Description	Quantifier	Туре	Codes and Values	Examples and Reporting Tips
Complaint Example	Provides information regarding two to three complaints during the reporting period.	Multiple	Composite data element subsuming element numbers S01-S06	Not Applicable (NA) (not a coded element)	Selection of complaint examples is at the State Ombudsman's discretion.

Elements included for each case example:

Element Number	Data Element	Element Definition	Quantifier	Туре	Codes and Values	Examples and Reporting Tips
S-01	Facility or Setting	Type of Facility or setting for the complaint.	Single per complaint example	Alphanumeric	See Table 1, CA-04	Select one example from a nursing facility, and one from a residential care community facility. A third example is optional.
S-02	Description	Narrative of the problem.	Single per complaint example	Alphanumeric	NA (not a coded element)	Maximum length of 3,400 characters (about 500 words).
S-03	Complaint code	See Table 1, CD 03 for complaint definition.	Single per complaint example	Alphanumeric	See Table 1, CD 04 and Table 2	Select the complaint code associated with each complaint example.

https://ltcombudsman.org/uploads/files/support/NORS _Table_3__Program_Information_04-30-2021-1.pdf ACLOAAPS Older Americans Act Performance System

Long-Term Care Ombudsman Program (LTCOP) Older Americans Act Performance System (OAAPS) Submission

National Ombudsman Reporting System (NORS) Table 3 – Guidance

https://ltcombudsman.org/uploads/files/support/A CL-OAAPS-Table-3-Guide.pdf

National Reporting System References

Ombudsman Reporting Tool

ORT (FY 2009 – FY 2019) https://napisdata.us/ort2

Older American Act Performance Systems

OAAPS

Ombudsman programs Fiscal Year 2020 https://oaaps.acl.gov/app/welcome

Table 3 User Guide

The NORS Table 3 Guide focuses on data and narratives programmatic guidance.

- Data and narratives are needed to explain the work of Ombudsman programs.
- Combination of both presents the best advocacy platform.
- Narratives help to make the data real.

General Tips for Writing Narratives

• Write the narratives in a Word (or similar) document first. Edit, check spelling and grammar. Copy and paste into the OAAPS software.

 Maximum length of narratives is 500 words each. While working in a Word document use the "Word Count" feature under the "Review" tab to help you track your word count.

• Be concise with description narratives.

Do not copy and paste case notes from your software program.

General Tips for Writing Narratives

- Use common acronyms. Examples are LTCOP, LTCO, LTC, NH, and RRC. Spell out state specific agency names or titles.
- Identify collaborating partners and their roles, as appropriate.
- Consider examples which:
 - had a broader advocacy impact.
 - resulted in a statewide legislative advocacy issue.
 - involved a COVID-19 issue

Part A. Complaint Examples

Choose complaints from cases closed in FFY, reporting period.

Two complaint examples are required
 One Nursing Facility example
 One Residential Care Community example

 Optional – one complaint example from a nursing facility, residential care community, or Other LTCO service.

At least one of the 2 or 3 complaint examples submitted must be a COVID-19 example.

1a. Complaint Narrative (ORT submission)

The Long-Term Care Ombudsman Program (LTCOP) encountered a case where a resident, who identifies as being a part of the LGBT community, was <u>sent anonymous notes</u> that were anti-LGBT in nature. The representative met with the resident and the resident gave permission for her to investigate the complaint and speak with the nursing home staff and local authorities to investigate the concern. Unfortunately, they were unable to identify the person who sent the notes, but it did trigger a larger conversation as a result. Facility staff worked with the resident and a local attorney to develop a new resident....

1a. Complaint Narrative (ORT submission) continued

....handbook that added specific language and a statement referencing discrimination and protected classes. The result of the revised resident handbook delivered a sense of comfort and satisfaction for the resident. Additionally, on a broader scope, it was an accomplishment for the program in that the nursing home, being part of one of our larger religious groups, agreed to initiate marked changes in policy that would benefit and protect residents in all their facilities and campuses.

Facility or Setting Nursing Facility

Description (narrative of the problem)

A resident who identifies as being part of the LGBT community received anonymous notes that were anti-LGBT in nature several times over a month. The notes were left on his bed when he and his roommate were out of their room. When speaking with the representative of the Office the resident provided consent for the Ombudsman program to investigate the complaint, discuss it with facility staff, and refer it to local law enforcement. The resident also shared that he was very upset about the

derogatory notes and was meeting with a therapist for counseling. He said the notes triggered memories of harassment and verbal abuse in the past and he does not feel safe at the facility. The resident asked the representative to meet with him and his therapist to discuss how to address this specific situation and issues at a facility-level to help ensure the rights of LGBT residents are respected.

Complaint category
Neglect, Exploitation(choose from drop-down menu)A. Abuse, GrossComplaint code
psychological(choose from drop-down menu)A03. Abuse:Verification(select option)Verified

Disposition narrative (narrative of the resolution)

Law enforcement officers were unable to pursue criminal charges as they could not identify the person who wrote the notes. However, this incident led to a larger conversation about diversity, the experience of LGBT elders, and the need for changes to ensure the facility is inclusive and welcoming. <u>The</u> <u>representative shared resources regarding creating a welcoming community</u> from the National Resource Center on LGBT Aging and a residents' rights fact <u>sheet for LGBT elders by NORC, Lambda Legal, and the National Resource</u> <u>Center on LGBT Aging with the resident and facility staff.</u>

Using those resources as guides, the facility staff worked with the resident and a local attorney to develop a new resident handbook that added specific language and a statement referencing discrimination and protected classes. The resident handbook, facility literature, and resident admission materials were revised to use inclusive and welcoming language. The facility staff shared the updated materials with all residents and their representatives. <u>At the suggestion of the representative, the facility staff invited her to provide an inservice training about residents' rights, LGBT aging issues, and inclusion.</u>

The resident told the representative that he was satisfied with the resolution and felt more comfortable knowing the facility staff wants to ensure that he, and all LGBT residents, are treated with respect and dignity. Additionally, the nursing home is part of a larger corporation with multiple campuses and the corporate office agreed to implement similar changes to company-wide policies and procedures to ensure the entire chain is inclusive and welcoming. Based on her experience with this case, the representative asked the SLTCO to provide training to all representatives about LGBT older adults. The SLTCO has consulted with the National Resource Center on LGBT Aging to provide training and review the program's current initial certification training to ensure it is relevant and inclusive.

Part B. Systems Issues

Refer to the NORS Table 3: State Program Information (NORS Table 3) for examples and reporting tips for the systems issues data elements. You must enter at least two and up to three systems issues examples manually. Describe up to three priority long-term care, services, or supports issues identified by the Ombudsman and the leadership and advocacy activities the Office employed to address these priority issues.

- Select the Systems Issue they are modeled after the complaint topics A-L and an O-Other option if the topic does not fit in A-L. If you select O-Other write a brief description in the text box.
- The status of the issue refers to whether the complaint is new this reporting year (FFY) and not fully resolved, an unresolved issue from the prior FFY, or a resolved or partially resolved issue that was new this FFY or an ongoing issue from the previous FFY.
- For "affected setting" you may choose "not specific to a setting" or "nursing facility" and/or "residential care community."

- Describe the problem....
- Describe the barriers to resolution....
- What is the difference between problem and barrier?
- Example:
 - Shortage of direct care staff is the problem
 - Poor management, low wages, lack of a career ladder are barriers

Select all that apply

- Provided information to public or public agency
- Provided Information to legislator or legislative staff
- Recommended changes to laws, regulations, policies or actions through written or oral testimony.
- Provided leadership or participated on a task force
- Provided information to the media
- Provided educational forums; facilitated public comment on laws, regulations, policies or actions
- Developed and disseminated information
- Legal action where an Ombudsman program initiates legal action
- Engaged in LTC facility corporate wide strategy including providing information or recommendations to corporate leadership
- Other Resolution Strategies not included above
 - Write a brief description

- Select the resolution strategies used to address the issue.
- Refer to the examples and reporting tips in NORS Table 3 for help identifying resolution strategies.
- Describe the resolution strategies you used to address this issue. Provide details such as collaborative efforts, implementation of statewide advocacy and involvement of representatives, community education related to the issue, and any policy, regulatory, legislative, or other outcomes.

1a. Systems Issues Narrative (ORT submission)

Guardianship Systems reform. The State Long Term Care Ombudsman (SLTCO) worked with the State of Court staff to obtain a Working Interdisciplinary Networks of Guardianship Stakeholders (WINGS) grant. The SLTCO is on the steering committee and participates on all the individual committees. The WINGS group was able to get Supported Decision-Making Agreement (SDMA) legislation passed. The SLTCO presented at the first SDMA statewide conference on how SDMA could be used for older adults. The Governor signed the bill into law at this conference. The SLTCO also provided training to LTCO staff on the use of SDMA.

1b. Systems Issues Narrative (OAAPS submission example)

Systems issue category (choose from drop-down menu)

L- System and Others (non-facility)

Problem description (description of the issue or problem) <u>After analyzing program complaint data, we identified a trend</u> <u>regarding unnecessarily restrictive guardianships</u> limiting resident decision-making. We found that older adults had few supportive decision-making (SDM) options other than guardianship. Our state's guardianship laws were very dated and had not been updated to include less restrictive options.

1b. Systems Issues Narrative (OAAPS submission example) continued

Adults found that when the court appointed a guardian that almost all their rights were lost. The courts tended to appoint full guardianship rather than limited guardianship options. The requirements for probate judges are that they must be at least 25 years of age, a high school graduate, a U.S. citizen, and a county resident for at least two years preceding the election. Based on guardianship appointments, it was clear that probate judges would benefit from training about the options for a person who needs support but not full guardianship (e.g., least restrictive alternatives, supported decision-making). This was a concern of many residents, advocacy organizations, and some probate judges; however, there was a leadership void in addressing the problem.

Barriers description (description of the barriers for the issue) Our state needed a coalition focused on reforming the guardianship system, funding to establish the coalition, and amended or new legislation to address solutions for supporting adults in need. The SLTCO worked with the state court staff to obtain a Working Interdisciplinary Networks of Guardianship Stakeholders (WINGS) grant. The National Guardianship Network, with coordination by The American Bar Association Commission on Law and Aging, created the WINGS concept to support court-led partnerships in states to drive changes in guardianship policy and practice.

Barriers Description continued:

Initially we were challenged in the start-up of our WINGS group. Different people who needed to be in the group were delayed in joining. Eventually all groups were represented, and we made progress in working on our objectives. The first legislator who agreed to sponsor the legislation had to decline further work on the issue due to serious health problems. He helped us find a new sponsor of the bill. The new legislator and her staff had to be caught up on WINGS progress to date and the group also worked to incorporate the legislator's input.

Issue status(choose from drop-down menu)Fully or Partially Resolved including issues that are newly reported
or an ongoing issue from last year.

Affected Setting(select checkbox/checkboxes)Not specific to a setting

- **Resolution Strategies** (select all that apply)
- Provided information to public or private agency
- Provided information to legislator or legislative staff
- Recommended changes to laws, regulations, policies or action through written or oral testimony
- Provided leadership or participated on a task force
- Provided information to the media
- Provided educational forums; facilitated public comment on laws, regulations, policies or actions
- Developed and disseminated information.

Other Resolution Strategies (add a resolution strategy not included above)

Resolution Description(narrative description of resolution strategiesused during fiscal year)

The <u>SLTCO is on the WINGS steering committee</u> and participates on the individual committees. The WINGS group was able to get Supported Decision-Making Agreement legislation passed. The <u>SLTCO provided written and oral testimony</u> on the bill before the judicial committee.

The <u>SLTCO presented at the first SDMA</u> statewide conference on how SDMA could be used for individuals over the age of 60. The SLTCO worked with WINGS group members to make sure that the media were present when the Governor signed the bill into law at this conference. Additional interviews with the media took place after the bill signing.

Resolution Description continued

The SLTCO <u>also provided training</u> to Ombudsman program staff and volunteers about SDMA, least restrictive options to guardianship, and residents' rights. The <u>training included</u> case examples and role play regarding residents' rights and decision-making. Members of the WINGS steering committee successfully advocated for including SDMA training and information about the National Guardianship Association's Standards of Practice into the state association of <u>probate judges initial and continued education training</u>.

WINGS <u>developed literature</u> about the new SMDA options. WINGS members, including the SLTCO, made the literature available through their various constituent groups, advocates, long-term care providers, and the public.

Part C. Organizational Structure

Report the locations based on the last day of the FFY (September 30th).

State Ombudsman Program Structure:

- Centralized representatives are employees of the central State Office. Under this structure, staff typically report to the state Ombudsman, regardless of their physical location.
- Decentralized Office of the SLTCO is housed in a state agency or contracted entity, but representatives of the Office are employed by another contracted entity designated by the SLTCO as a local Ombudsman entity.

Note: In OAAPS, the organizational structure and location are separate entries from the organizational conflicts of interest (COI).

Part C. Organizational Structure

- Location of Office of State LTCO
- (choose from drop-down menu)
 - State Unit on Aging
 - Inside state government
 - Stand-alone agency inside state government
 - Within a private, non-profit agency
 - Stand-alone private, non-profit agency.

Part C. Organizational Structure

Local Ombudsman Entities

Specify the type of agency and number of entities in each type. If there are no entities select "there are no local Ombudsman entities in the state." OAAPS will block out the local entities list.

- Area Agency on Aging (AAA)
- Non-profit agency, with 501c (3) status
- Legal Services provider
- Stand-alone non-profit
- Other Locations Type the name of the type of location
 - Example: University Geriatric Center

Part D. Staff and Volunteers

A representative of the Office is defined in the Ombudsman program Final Rule as "employees or volunteers designated by the Ombudsman to fulfill the duties set forth in § 1324.19(a), whether personnel supervision is provided by the Ombudsman or his or her designees or by an agency hosting a local Ombudsman entity designated by the Ombudsman pursuant to section 712(a)(5) of the Act." <u>NORS Table 3, Part D</u> provides element descriptions, examples, and reporting tips for calculating the number of staff and volunteers.

All counts are as of September 30.

Part D. Staff and Volunteers

The requested data for staff in the Office of the State LTCO and local Ombudsman entities (LOEs) is the same in OAAPS. The guidance below applies to the Office of the State LTCO and LOEs.

- **Staff Count**: Report the number of employees that are designated as representatives of the Office
 - as a whole number,
 - both full-time and part-time,
 - total count of staff that work full-time and part-time.
- Full-Time Equivalent Count: Identify the number (may not be a whole number) of full-time equivalents (FTEs). See Guidance and Table 3 for detailed examples.

Part D. Staff and Volunteers

The requested data for volunteers in the Office of the State LTCO and local Ombudsman entities (LOEs) is the same in OAAPS. The guidance below applies to the Office of the State LTCO and LOEs.

- Volunteer representatives: Provide the total number of volunteers designated as representatives.
- Volunteer representative hours: Identify the number (may not be a whole number) of volunteer hours donated by volunteer representatives.
- Other volunteers: Provide with a whole number the total number of other types of volunteers who are not representatives of the local entities.

Part D. Staff and Volunteers Example

The Office has three employees representing 2.5 full-time equivalents (e.g., two employees are full-time, and one employee works part-time). There are zero state Office representative volunteers and zero volunteer hours. There is one volunteer who is not a representative of the state Office.

Office of the SLTCO

Total staff	3
Total full-time equivalent (FTE)	2.5
Total state volunteer representatives	0
Total hours donated by state volunteer representatives	0
Total other volunteers (not representatives)	1

State Ombudsmen are to: identify, remedy or remove organizational conflicts of interest and report to ACL in accordance with NORS (data collection) and into the OAAPS (reporting tool).

Why does this matter?

- Accountability for remedying COI;
- Reflects on the credibility and effectiveness of the LTC Ombudsman Program.

For examples of how to identify and remedy or remove organizational conflicts of interest, visit the <u>NORC website</u> which has examples of strategies for addressing COI, including SLTCOP policies and procedures, memoranda of understanding, program structures, state laws and regulations.

- States will need to enter pertinent organizational COI information into OAAPS.
- In this first reporting year the "select from last year's submission" is not available since the previous year of organizational conflicts of interest (COI) data was submitted in ORT.
- A state may have addressed all conflicts and reported the remedy or removal for the conflicts in the ORT; however, ACL requires states to report <u>all</u> conflicts of interest (even those with remedies already in place).
- This new report will provide ACL with the ability to determine quickly the most common types of conflicts and the number of conflicts in each program.

OLD: When submitting in ORT states could list several conflicts and identify the same remedy for all conflicts.

NEW: OAAPS asks users:

• to select *each conflict of interest* in a drop-down menu;

• to indicate the location of *each* conflict (state, local, or both); and

 to provide a narrative description of the remedy or removal for <u>each</u> conflict.

It is possible to have the same remedy for different conflicts. ACL will evaluate each remedy and follow-up with any questions.

You may want to review previous ORT reports and use this information to report, along with any updates, into OAAPS. States first reported organizational conflicts of interest in FY2016.

After the first year of NORS submission into OAAPS, states may "select from last year's submission" and roll over conflicts and remedies that still exist, in addition to adding any new conflicts.

If a state reported no conflicts of interest in their first report in 2016 and it was approved by ACL, they may select the checkbox for "no conflicts were identified among the state Office or local Ombudsman entities" if no new conflicts exist.

Tips for narratives describing the COI remedy:

- Narratives are to be accurate and complete.
- Each conflict identified requires a narrative that describes the remedy or removal.
- The description cannot be longer than 3,400 characters (approximately 500 words each).
- You can "bundle" the same conflict if it applies to several Ombudsman entities. For example, 7 AAA's are providers of longterm services and supports. It is <u>one conflict</u> that applies to seven entities.

1a. State Office COI Description (ORT submission)

The Office of the SLTCO is housed in the Department of Aging, which in turn is within a large umbrella agency (Health & Human Services Administration - HHSA), which also houses the Department of Public Health (DPH). Being housed within HHSA places the Ombudsman program in an organization that is responsible for licensing, surveying, or certifying long-term care facilities (DPH). The Department of Aging (DA) also operates the Community Based Adult Services (CBAS) Branch, which is the Medicaid funding source for licensed adult day health care (ADHC) centers. While these facilities are licensed by the Department of Public Health (DPH), staff of DA certify ADHC centers to participate in Medicaid. The LTC Ombudsman Program receives and investigates reports of abuse, neglect, and exploitation at these sites. DPH licenses and certifies skilled nursing facilities, distinct parts of hospitals that provide skilled nursing, nursing facilities, intermediate care facilities (ICF), ICFs for the developmentally disabled (DD), ICF/DD-Habilitative, ICF/DD-Nursing, congregate living health facilities, and swing beds in acute care facilities.

1a. State Office COI Description (ORT submission) continued

To remedy these conflicts, the SLTCO does not report to the Deputy Director of Aging and Long-Term Care Services, the division that houses the ADHC certification program. While DA and OSLTCO are in the same umbrella agency (HHSA) as Department of Public Health (DPH), Department of Aging and OSLTCO are organizationally separate and distinct from the licensing and regulatory agencies.

1a. State Office COI Description (ORT submission) continued

Hard files are kept in locked offices or locked filing cabinets accessible only to LTCOP staff. For electronic data, the LTCOP program has a separate database, and this database is accessible only to LTCOP staff. Databases are protected, in part, by passwords, and passwords are never shared. A firewall prevents any cross-over between the LTCOP and other agency programs. Active Directory Security Groups are used to manage file access. Employees must be added to a security group to access file shares mapped to that group. Employees who are required to access files for the LTCOP must be added to the Ombudsman security group by an IT administrator. All such changes are documented via Help Desk ticketing. Administrative remedies - All employees of the organization sign a conflict of interest statement annually. There is a Computer and Electronic Data Privacy Policy in place to prevent access to LTCOP data by non LTCOP staff members.

1b. State Office COI (OAAPS submission example)

Select the types of organizational conflicts of interest identified and describe steps taken by the State agency and the Ombudsman to remedy or remove identified conflicts.

Conflict of interest type (choose from drop-down menu)

Licenses, surveys, or certifies LTC facilities

Location (choose from drop-down menu)

>State

Conflict of interest type (choose from drop-down menu)

Licenses, surveys, or certifies LTC services

Location (choose from drop-down menu)

State

1b. State Office COI (OAAPS submission example) continued

Remedy (description of remedy used to remove the conflict of interest)

The Department of Aging, in which the State Long-Term Care Ombudsman program (SLTCO) program is located, is housed within a large umbrella agency which is responsible for licensing, surveying, or certifying long-term care facilities and services. To remedy these conflicts, the SLTCO does not report to the Deputy Director of Aging and Long-Term Care Services, the division that houses the ADHC certification program. While DA and OSLTCO are in the same umbrella agency (HHSA) as Department of Public Health (DPH), Department of Aging and OSLTCO are organizationally separate and distinct from the licensing and regulatory agencies.

1b. State Office COI (OAAPS submission example) continued

Remedy continued:

Hard files are kept in locked offices and/or locked filing cabinets accessible only to LTCOP staff. For electronic data, the LTCOP program has a separate database, and this database is accessible only to LTCOP staff. Databases are protected, in part, by passwords, and passwords are never shared. A firewall prevents any cross-over between the LTCOP and other agency programs. Active Directory Security Groups are used to manage file access. Employees must be added to a security group to access file shares mapped to that group. Designated representatives who have access to LTCOP electronic files must be added to the Ombudsman security group by an IT administrator. All such changes are documented via Help Desk ticketing.

1b. State Office COI (OAAPS submission example) continued

Remedy continued:

Additionally, information regarding organizational and individual conflicts of interest and confidentiality is included in the annual ethics training for all employees. Employees also sign an acknowledgement form annually that states they understand and will abide by the policies and procedures to avoid organizational conflicts of interest. There is a Computer and Electronic Data Privacy Policy in place to prevent access to LTCOP data by non LTCOP staff members.

Background: The state Ombudsman has three distinct responsibilities with regards to fiscal management of the Ombudsman program.

- The Ombudsman regulation 45 CFR 1324.13 (f) *Fiscal* management. (paraphrased) requires the Ombudsman to determine the use of the fiscal resources.
- To report funds expended data in accordance with the National Ombudsman Reporting System (NORS).
- To review and certify that the program met Minimum Funding Requirements, in accordance with the Older Americans Act by submitting the Certification of Long-Term Care Ombudsman Program Expenditures form (see page 29 for information on the form).

A *budget* is an estimation of <u>revenue</u> (income) and <u>expenses</u> over a specified future period of time and is usually compiled and re-evaluated on a periodic basis.

Expenditures are "charges made by a non-Federal entity to a project or program for which a Federal award was received."

Budget Line Item	Funding Source	A ppropriation	Budget	Actual Expenditure (Funds Expended-NORS Report Requirement)	Balance
Salary	Total of all Sources	\$149,000	\$149,000	\$119,042	\$29,958
	Title VII, Ch. 2 OMB	\$80,000	\$80,000	\$61,042	\$18,958
	Title III State	\$45,000	\$45,000	\$34,000	\$11,000
	VOCA Grant	\$10,000	\$10,000	\$10,000	\$0
	State General Fund	\$14,000	\$14,000	\$14,000	\$0
Fringe	Total of all Sources	\$44,700	\$44,700	\$40,000	\$4,700
	Title VII, Ch2 OMB	\$10,000	\$10,000	\$9,000	\$1,000
	Title III State	\$25,000	\$25,000	\$22,300	\$2,700
	State General Fund	\$9,700	\$9,700	\$8,700	\$1,000
	VOCA Grant	\$O	\$O	\$0	\$ -

Recommended Schedule to prepare for reporting funds expended:

October	 Remind fiscal staff that the upcoming NORS report is due in January. Give them Part F: Funds Expended from NORS Table 3.
November	• Set an appointment to review NORS Table 3 with fiscal staff.
December	 Work through a rough draft of funds expended with fiscal staff.
January	Report final funds expended.

- Other Reporting Tips
 - The LTCOP Fund Sources chart in the NORS Table 3 Guide provides a comprehensive list of the types of possible fund sources that your program receives.
 - Only include funds which were expended on Ombudsman program activities authorized under Section 712.
 - Do not report "in-kind" support (e.g., free supplies, free rent).

Part F. Funds Expended Example

Funds expended from Older Americans Act sources				
OAA Title VII – Chapter 2	\$ 431, 812			
OAA Title VII – Chapter 3	\$ 2,000			
OAA Title III – State level	\$ 296,890			
OAA Title III – AAA level	\$1,343,321			
Additional Federal Sources	\$ 23,202 Victims of Crime Act Funds			
State Sources	\$1,245,973 State general funds			
Local Funds Expended	\$ 12,000 Local government			
All Funds expended				
Grand total dollars expended from all sources	\$3,355,198			

Part G. Facility Data Elements

1. Gather Facility Information

- In advance, work with your state's licensing and certification agencies to obtain lists of facilities by type and definition and to receive a count of facilities by type. Ideally, these facilities lists are already integrated into your data system.
- These should be all the facility types that your state statute, rules, and regulations authorize Ombudsman program jurisdiction.

Part G. Facility Data Elements

2. Total Count of Facilities. The total count of facilities is based on the last day of the FFY (September 30th). The count of facilities would be inclusive of facilities that have a license or certification but do not currently have residents living there. Ombudsman programs may also report unlicensed facilities, if they provide services.

3. Residential Care Community Reporting Requirements. Enter the following for the first year of OAAPS submission:

- Add RCC types (maximum 500 characters);
- Add definitions of RCC types (maximum 3,400 characters); and
- RCC type capacity.

Part G. Facility Data Elements

Use the definitions found in your state licensing or certification regulations to ensure you accurate narrative descriptions.

Resource: Understanding Residential Care Communities (RCCs) in Your State

 Review tips from NORC's <u>State LTCOP Program Assessment</u>: <u>Understanding</u> <u>Assisted Living Facilities in Your State</u> to assist with understanding RCCs in your state and accessing your state statutes and regulations.

Refer to the guide for additional tips and frequently asked questions regarding entering facility data.

Part G. Facility Data Elements Example

15,000

Licensed Nursing Facilities

- Total number 150
- Total resident capacity

Residential Care Communities

- Total number 300
- Total resident capacity 22,500

Part G. Facility Data Elements Example

RCC type

(Indicate the name of each type of Residential Care Community that is licensed, registered, listed, certified, or otherwise regulated by the state)

Personal care homes

RCC type definition

(Provide a brief description of the state's definition of residential care community)

 Personal care homes are licensed facilities that provide assistance to residents in performing one or more of the activities of daily living (ADLs), including, but not limited to, bathing, walking, excretory functions, feeding, personal grooming, and dressing.

Part G. Facility Data Elements Example

RCC type capacity (Enter minimum or maximum capacity, the minimum/maximum number of beds allowed by license type, or select checkbox of "No Minimum" or "No Maximum")

Minimum – 2 Maximum – 25

Part H. Program Activities

Guidance

Refer to the <u>NORS Table 3: Part H</u> examples and reporting tips for clarification regarding the data elements. The data entries are numeric and should be whole numbers. Use the examples and tips column for guidance often.

NORC's <u>NORS Part IV training materials</u> address the data elements for training, facility visits, survey participation, resident council and family council participation, and community education. The NORC <u>NORS Frequently Asked</u> <u>Questions</u> provide additional details and clarification.

Part H. Program Activities Guidance - Training for Representatives of the Office

Training Hours: States are required to report the total hours of training required for an individual (paid or volunteer) to achieve certification which allows an individual to be eligible for designation as a representative of the Office of the State LTC Ombudsman.

Continuing Education: States must report the annual number of hours of inservice hours required for all representatives of the Office to maintain designation.

Individuals Completing Certification Training: States must also report the total number of individuals (paid or volunteer) completing certification training within the federal fiscal year (by September 30th).

Part H. Program Activities Guidance - Training for Facility Staff

The data elements pertaining to **training sessions provided to nursing facility staff and residential care community** staff are all numerical data. Training may be in person, or web-based and typically includes an agenda and learning outcome(s).

Distance learning. States may report distance learning as a training session; however, there must be a way to determine that individuals completed the training. For example, posting a PowerPoint training without requiring registration to attend the training would not count as a training instance because it is static information.

Part H. Program Activities Guidance

Information and Assistance: Information and assistance is providing information about issues impacting residents (e.g., resident rights, care issues, services) and/or providing assistance without opening a case and working to resolve a complaint. Information and assistance to nursing facility staff, residential care community staff, and individuals must be reported as a whole number.

Part H. Program Activities Guidance

Facility visits both for nursing facilities and residential care communities are categorized by (1) number of facilities that received at least one visit, (2) count of all visits to facilities, and (3) number of routine visits to each facility in all four quarters of the year.

Facility survey participation report the number of survey instances for both nursing facilities and residential care communities.

Resident and family council participation report the number of instances both nursing facilities and residential care communities. Activities include attendance at meetings, meeting with leadership, and training council members.

Part H. Program Activities Guidance

Community Education: Provide the total count of **community education outreach sessions** provided by the Ombudsman program. Newsletters, blogs, and other forms of media do not count as community education.

State and local level coordination activities: Choose the agencies or programs that the Ombudsman program has led state or local level coordination activities relevant to the health, safety, well-being, or rights of resident of long-term care facilities. Report any leadership activities and/or state/local-level coordination, where the state Ombudsman provides state-level coordination, and support for appropriate local Ombudsman entity coordination, between the Ombudsman program and other entities with responsibilities relevant to the health, safety, well-being or rights of residents of long-term care facilities.

Part H. Program Activities Facility Visits Example

Facility Visits	Nursing Facility	Residential Care Community
Number of facilities that received one or more visits	50	90
Number of visits for all facilities	950	390
Number of facilities that received routine access	50	50

Part H. State and Local Level Coordination Activities Example

There are no state and local level coordination activities.

(choose this option and no other choices, if applicable)

Check all the appropriate boxes for coordination activities (choose all that apply) Note: All entities except for two were selected for this example.

- Area agency on aging programs
- Aging and disability resource centers
- Adult protective services program
- Protection and advocacy systems
- Facility and long-term care provider licensure and certification programs
- The state Medicaid fraud control unit
- State and local law enforcement agencies
- The State legal assistance developer and legal assistance programs
- Centers for Independent Living

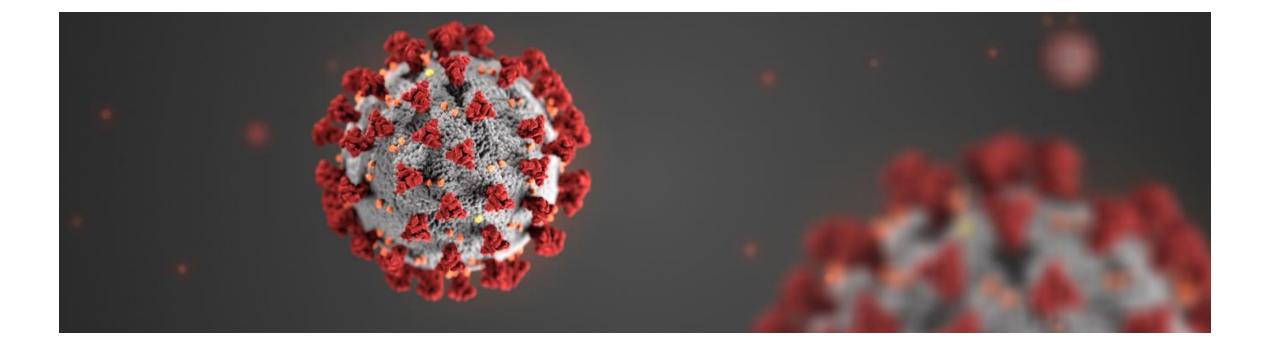
Other Coordination Activities (Add a state and local coordination activity not listed above.)

Part H – State and Local Level Coordination Activities Example

Describe any state or local level coordination and leadership activities with the entities listed, as applicable. (maximum 5,000 characters)

In response to COVID-19 the state Ombudsman contacted the state's Assistive Technology (AT) program to learn about new technology opportunities for residents. The Ombudsman identified that prior to the State LTCO program's work with the AT program their services and resources were not available to residents of residential care communities. Many residents of RCCs could benefit from personal assistive technology devices that are not provided by the RCC. For example, during the COVID-19 pandemic, we coordinated with the AT program to loan Kindle and iPad devices to residents so that they could communicate with Ombudsman representatives and their friends and family members.

COVID-19 Information



COVID-19 and Data

 For the FFY2020 NORS submission, 1 of 3 complaint narratives and 1 of 3 systems issues should discuss COVID-19 related work.

 Visits with residents through a window of the facility or outdoors on the facility grounds count and should be recorded as a facility visit.

COVID-19 and Data

 Visits with residents by telephone or computer app do not count as a facility visit. These would be recorded in the case record as a part of the investigation steps *or* as information and assistance if the resident does not have a complaint.

Document any COVID-19 related information pertinent to the case.

 Share and review the COVID-19 complaint scenarios with representatives. These may be found in the NORC COVID-19 Toolkit for LTCO.

COVID-19 and Data

ACL understands that there will be fewer facility visits beginning March 2020 due to the national pandemic and that this will significantly impact goals for facility visits for the year.

CARES Act expended funds will be recorded under "Other Federal Fund Sources."

QUESTIONS

RESOURCES

NORS/OAAPS Resources

 NORS Instructions, Training, and Materials

https://ltcombudsman.org/omb_support/nors

- NORS Frequently Asked Questions
 <u>https://ltcombudsman.org/omb_support/nors/nors-faqs</u>
- NORS/OAAPS (SLTCO webpage) <u>https://ltcombudsman.org/state_home/state_supp_ort/NORS</u>
- Documenting Activities During COVID-19 FAQs

https://ltcombudsman.org/omb_support/nors/norsfaqs#documenting

NORS FAQs: COVID-19



IMPORTANT NOTE ABOUT VISITS: Inperson visits with residents are a core part of Ombudsman program outreach and advocacy and NORS reinforces this importance by requesting that Ombudsman programs report all visits. However, during the COVID-19 pandemic, visits have been dramatically curtailed. It is important that Ombudsman programs accurately reflect this decrease to show the impact of the pandemic on the program and residents. There is no substitute for an in-person visit, while outreach by other means is necessary, we do not want to give the impression that the program operated as usual. ACL anticipates that there will be a sharp decrease in visits, and that is appropriate, given the circumstances.

NEW Q: Due to visitation restrictions related to COVID-19, I am not visiting residents inside long-term care facilities. However, I am visiting with residents outside on the grounds of the facility or providing "window visits" (having a conversation through a window or other designated space). Do outdoor visits and window visits count as visits?

A: Yes, Since you are on-site at the facility and speaking with one or more residents, you may document outdoor visits and window visits a visits. Document the type of visit, i.e. complaint or non-complaint related in accordance with NORS codes. See Part IV of the NORS Training Materials, the Administration for Community Uning (AcL) NORS Table 3, and the NORS FAQ about <u>documenting visits</u> for more information about documenting visits and other activities.

NEW Q: After several attempts to connect with facility staff, they are not returning my calls or emails. What complaint code do I use?

NEW Q: The facility is not returning calls and/or emails to family members of resid for assistance, what complaint code do I use?

A: Use complaint code B01 - Access to information and records when a facility doe: of residents. The <u>ACL NORS Table 2</u> Examples and Reporting Tips for B01 says this of the administrative records, policies, and documents, to which the residents have, o long-term care facilities."

However, if the family member is attempting to follow-up with the facility staff reg not returning their calls complaint code **Do5** – **Response to complaints** may be mor defines this code as "facility staff ignores or trivializes a resident complaint or there thereby limiting the resident's ability to resolve a problem directly with the adminis

NEW Q: Facility staff are not answering phone calls after multiple attempts. What c

A: Use complaint code Joi – Administrative oversight when facility staff are not an attempts. The <u>ACL NORS Table 2</u> Definition for Joi says, "Mismanagement includin absent, unresponsive, inadequately trained or not supervising staff; incomplete, m background screening not performed; illegal policies/practices and similar complaint

Q: Due to COVID-19 visitation restrictions, I am contacting residents to check-in with phone, email, and/or video calls. Do I count phone, email, and/or video conversatio complaint visits" or information and assistance?

OAAPS Highlights: What You Need to Know Now

What is OAAPS?

OAAPS is the Older Americans Act Performance System. OAAPS is replacing the Ombudsman Reporting Tool (ORT). The State Long-Term Care Ombudsman or their designee will use OAAPS to submit the state annual National Ombudsman Reporting System (NORS) report.

Who Uses OAAPS?

State and tribal programs who provide Older Americans Act (OAA) services will use OAAPS. The OAAPS refers to the various OAA programs by their title in the Older Americans Act, thus the Ombudsman Program is referred to as Title VII. You may find Title VII resources on the OAAPS resource page. The Administration for Community Living (ACL) will use OAAPS to monitor performance data and collect information from state LTC Ombudsman programs as required by the Older Americans Act and Ombudsman program regulation.

How Do I Access OAAPS?

You may access OAAPS at https://oaaps.acl.gov/app/welcome. There is a new, required process for administrative users to verify credentials using a program called "Okta." All state Ombudsmen were assigned as a state Administrator User and received an Okta invitation. Once signed up through Okta, the user can go directly to OAAPS and bypass Okta. ACL recommends that programs have another state Administrative User. An Administrative User can add state level users and set the level of access. To establish an Administrative User account contact Louise Rvan, Ombudsman Program Specialist, Louise Rvan@acl.htps.gov.

Is Data Entry the Same in OAAPS as ORT?

No. The main way the OAAPS differs from the ORT is that case and complaint data must be uploaded as data files. There is no option to manually enter cases and complaints. States will have the option of uploading numeric program activity data in a file labeled "All Other Data" or may manually enter this data.

When Do I Submit Our NORS Report in OAAPS?

States will submit Federal Fiscal Year (FFY) 2020 data in the OAAPS for the first time in January 2021.

How Can I Prepare for Using OAAPS?

OAAPS is available now for users to explore and become familiar with in advance of reporting in January 2021. ACL strongly encourages Ombudsman programs to practice submitting a report. Review the reference materials for Title VII that include a user guide, seven quick reference guides, and three recorded webinar trainings. Reference materials are available on this page and training webinars are available here. Review the technical documents and practice uploading data files by using the sample data files available on this page.

Who Do I Contact for OAAPS Technical Assistance?

ACL and ICF, the system developer, will provide system-related technical assistance (e.g., issues uploading a file). You can receive technical assistance by contacting OAAPSHelpdesk@acl.hhs.gov.

Who Do I Contact for Programmatic Technical Assistance?

ACL and The Lewin Group, subcontract with the National Ombudsman Resource Center (NORC), for programmatic technical assistance. Click <u>here</u> for NORS training materials, recorded webinars, guides, and FAQS. NORC will also provide training and support for state Ombudsmen regarding OAAPS. For assistance contact <u>ombudcenter@theconsumervolce.org</u>.

Who Do I Contact for Questions about the Ombudsman Reporting Tool (ORT)?

For questions about the ORT or the FY 2019 NORS Report, go to <u>https://www.napisdata.us/ortz</u> or contact Louise Ryan, Ombudsman Program Specialist.

Summary Review

- Greetings from ACL
- Data Management Plan
- OAAPS
- Table 3 Guide review
- Open Dialogue
- Resources

Contact Information

Amity Overall-Laib, NORC Director aoveralllaib@theconsumervoice.org (202) 332-2275 ext. 207

Louise Ryan, Ombudsman Program Specialist, AoA/ACL louise.ryan@acl.hhs.gov (202) 795-7355

Maria Greene NORC Consultant <u>mgreene@theconsumervoice.org</u> (770) 668-6366

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buds •
manThe National Long-Term Care
Ombudsman Resource Center

Connect with us:

www.ltcombudsman.org

ombudcenter@theconsumervoice.org

The National LTC Ombudsman Resource Center



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