

	ER/LTCOP/3151
AGING AND DISABILITY SERVICES DIVISION	Section: 100
HOW TO MANUAL	Subject: INTRODUCTION

100 INTRODUCTION

The Long-Term Care Ombudsman Program (LTCOP) in Nevada is mandated by state and federal laws to protect the health, safety, welfare, and rights of residents over the age of 60 who reside in nursing homes, residential facilities for groups, and homes for individual residential care.

The LTCOP exists to protect the human and civil rights of a Long Term Care (LTC) resident and to promote his/her autonomy through individual and collective advocacy efforts to enhance his/her quality of life in long term care settings. The LTCOP is a resident centered advocacy program. The program will make every reasonable effort to assist, represent and intervene on behalf of the resident.

	ER/LTCOP/3151
AGING AND DISABILITY SERVICES DIVISION	Section: 101
HOW TO MANUAL	Subject: AUTHORITY

101 AUTHORITY

1. The LTCOP is federally mandated by the Older Americans Act.

OLDER AMERICANS ACT, TITLE 42, THE PUBLIC HEALTH AND WELFARE CHAPTER 35, PROGRAMS FOR OLDER AMERICANS, SUBCHAPTER XI, ALLOTMENTS FOR VULNERABLE ELDER RIGHTS PROTECTION ACTIVITIES, PART A, STATE PROVISIONS, SUBPART II, OMBUDSMAN PROGRAMS
2. The State of Nevada authorizes Ombudsmen to advocate for the protection of the health, safety, welfare and rights of residents of facilities for long-term care. NRS 427A.125
3. Aging and Disability Services Division Long Term Care Ombudsman Handbook.
4. The State Long Term Care Ombudsman (SLTCO) serves on a full-time basis as the head of the Office of the State Long Term Care Ombudsman.
5. The SLTCO certifies representatives as appropriate to fulfill the obligations of the Office.

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AGING AND DISABILITY SERVICES DIVISION	Section: 102
HOW TO MANUAL	Subject: ACCESS

102 ACCESS

1. Access to facilities and services: At reasonable times, without notice, the Ombudsman can enter and have immediate access to residents in a long term care facility including, but not limited to, nursing facilities, residential facilities for groups, assisted living facilities, and homes for individual residential care. (NRS 427A.135)
2. Confidential access to residents: The Ombudsman is ensured private and unimpeded communication with residents and may communicate in private with a resident with the resident's consent, without restriction or threat of intimidation or reprisal.
3. Access to records in hard-copy and/or electronic format: With the consent of the resident or his/her surrogate or legal representative, the Ombudsman has access to all records that pertain to the complaint being investigated. The SLTCO and/or certified Ombudsman who has obtained Supervisory approval may move forward with obtaining records if it is in the resident's best interest in the case that consent cannot be obtained or if a legal guardian refuses permission.
4. The Ombudsman has access to administrative records, policies and documents of a long term care facility to which the resident or public has access. The Ombudsman advocates for access to any record needed to investigate a complaint and to represent the interests of the resident.
5. The Ombudsman ensures that appropriate agencies are able to gain access to any necessary records including, but not limited to:
 - a. Survey reports,
 - b. Investigations,
 - c. Licensing or certification activities, or
 - d. Any other actions of the state regulatory agency involving the facility.

The SLTCO provides program representatives with access to information described above.

6. The SLTCOP has a toll free number that is publicized for program service access.
7. The Ombudsman ensures responsiveness when contact is initiated by a resident or complainant. Outreach is provided to residents through face-to-face contact and other necessary and/or appropriate means.
8. The Ombudsman assures that the SLTCOP address and toll-free number is displayed on program posters in at least one prominent place in each long term care facility.
9. The Ombudsman endeavors to accommodate language diversity by making program services available in non-English language formats as necessary/needed.

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AGING AND DISABILITY SERVICES DIVISION	Section: 103
HOW TO MANUAL	Subject: DISCLOSURE & CONFIDENTIALITY

103 DISCLOSURE AND CONFIDENTIALITY

1. The Ombudsman maintains all complaint-related information provided to or developed by the Ombudsman as confidential. Confidential information includes electronic and hard copy records, identities of residents and complainants, and whether an individual communicated with or contacted an Ombudsman. An Ombudsman does not disclose any information about a resident or complainant without the individuals consent or a court order.
2. The Ombudsman protects the identity of the resident or complainant unless consent is provided, even if it compromises the Ombudsman’s ability to effectively advocate. If consent is not provided, investigations are conducted only if they can be carried out without identifying the resident or complainant. When the resident is unable to consent to disclosure, disclosure is permitted only with the approval of the STLCO. If the identity is assumed by another party, the Ombudsman does not acknowledge the assumption.
3. The Ombudsman adheres to consent requirements in the Older Americans Act. A person with legal authority to make decisions for a resident may consent to disclosure if the resident is unable. If a legal representative is determined by the Ombudsman not to be acting in the resident’s best interest, the Ombudsman obtains approval from the SLTCO to take action.
4. In the case of a resident who cannot consent and who does not have a legal representative, the Ombudsman may, acting in the resident’s best interest, take action on behalf of a resident’s substituted judgment, known wishes, or assumed best interests.
5. The SLTCO is custodian of all Ombudsman records and is responsible for making decisions about disclosure and, if necessary, ensuring legal representation for that purpose. In exercising discretion, the SLTCO establishes a consistent protocol for disclosing records and ensures resident rights are protected.
6. Paper records are stored in a locked environment and electronic records are password-protected.
7. The Ombudsman only responds to written requests for confidential Ombudsman records. The Ombudsman notifies an oral requestor that all requests for records must be made in writing. If a subpoena is received the SLTCO should be notified immediately. The SLTCO takes appropriate measures to protect the records. If a court order is received that requests records with identifying information about clients other than those named in a lawsuit or other legal action, the Ombudsman attempts to protect the identity of all other residents by redacting documents appropriately.

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AGING AND DISABILITY SERVICES DIVISION	Section: 104
HOW TO MANUAL	Subject: DUTIES OF THE OMBUDSMAN

104 DUTIES OF THE OMBUDSMAN

Under state and federal law the Ombudsman have many duties including:

1. Receive, investigate and attempt to resolve complaints made by or on behalf of residents of facilities for long-term care.
2. Investigate acts, practices, policies or procedures of any facility for long-term care or any governmental agency which relates to such care and may adversely affect the health, safety, welfare or civil rights of residents of such facilities, and report the results of the investigations to the SLTCO and the Aging and Disability Services Division (ADSD) Administrator.
3. Record and analyze information and complaints about facilities for long-term care to identify problems affecting their residents.
4. Provide for the support and development of resident and family councils to protect the well-being and rights of residents of facilities for long-term care.
5. Coordinate services within the Nevada Department of Health and Human Services which may affect residents and prospective residents of facilities for long-term care to ensure that such services are made available to eligible persons.
6. Recommend and review policies, legislation and regulations, both in effect and proposed, which affect facilities for long-term care.
7. Upon request, advise and assist the Governor, the Legislature and public and private groups in formulating and putting into effect policies which affect facilities for long-term care and their residents.
8. Provide information to interested persons and to the general public concerning the functions and activities of the Ombudsman.

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AGING AND DISABILITY SERVICES DIVISION	Section: 105
HOW TO MANUAL	Subject: TRAINING

105 TRAINING

The LTCOP has a broad mandate that encompasses: resolving problems on behalf of individual residents; assisting residents in protecting their safety, health, and rights; providing information to residents, families, and long term care providers; and representing the needs of residents before governmental and other agencies. To be effective as an Ombudsman, an individual must have a relevant knowledge and skills base. Thus the State of Nevada LTCOP has developed training for new Ombudsmen as well as on-going training for current Ombudsmen.

1. The new Ombudsman candidate in Nevada will complete 30 hours of classroom training, conducted by a trainer that has been approved by the SLTCO. The training will consist of information on Federal and State laws, the structure and policies of the program, and investigative and complaint resolution skills.
2. A field visit to a nursing home, a residential facility for groups, and a home for individual residential care will be conducted early in the training process (for new Ombudsmen only). This will enable the trainee to gain a better understanding of the LTC structure.
3. Once the individual has completed the classroom training, they will be required to conduct three (3) complaint investigations and three (3) Routine Visits. (The field training is not part of the 30-hour classroom training) The Ombudsman Supervisor will accompany the trainee on each visit completed. After both classroom and field training have been satisfactorily completed, the SLTCO will grant a certification and designate the individual a Certified Long Term Care Ombudsman.
4. Nevada certified Long Term Care Ombudsmen will receive eight (8) hours of continuing education annually. This will include policy and procedure updates and a refresher on Ombudsman skills.

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AGING AND DISABILITY SERVICES DIVISION	Section: 106
HOW TO MANUAL	Subject: CONFLICT OF INTEREST

106 CONFLICT OF INTEREST

A conflict of interest as it relates to the SLTCOP means that other interests intrude upon, interfere with, threaten to negate, or give the appearance of interfering with or negating the ability of the state ombudsman, state level staff of the office, local ombudsmen, or volunteers to advocate without compromise on behalf of residents of long term care facilities. It also means any situation that would create a reasonable appearance of a conflict of interest.

1. The SLTCO and certified representatives (SLTCOP employees and Volunteers) of the program abide by conflict of interest laws and policies. Conflicts of interest apply to the operation of the program and individual representatives.
 - A. Aging and Disability Services Division shall:
 - i. ensure that no individual, or member of the immediate family of an individual is subject to a conflict of interest;
 - ii. ensure that no representative or employee of the Office of Long Term Care Ombudsman or member of the immediate family of the employee, or representative, is subject to a conflict of interest;
 - iii. ensure that the Ombudsman or representative does not have a direct involvement in the licensing or certification of a long-term care facility or of a provider of a long-term care service;
 - iv. ensure that the Ombudsman or representative does not have an ownership or investment interest (represented by equity, debt, or other financial relationship) in a long-term care facility or a long-term care service;
 - v. ensure that the Ombudsman or representative is not employed by, or participating in the management of, a long-term care facility; and
 - vi. ensure that the Ombudsman or representative does not receive, or have the right to receive, directly or indirectly, remuneration (in cash or in kind) under a compensation arrangement with an owner or operator of a long-term care facility.
 - vii. ensure that the Ombudsman or representative does not have any current fiduciary interest, either direct, indirect or implied in any long term care facility
2. Aging and Disability Services Division along with the SLTCO reserves the right to decertify Ombudsman and program representatives (SLTOP employees and volunteers) for the following reasons:
 - A. breach of confidentiality;
 - B. adversarial approach while conducting program business;
 - C. failure to follow program policy;
 - D. having conflicts of interest that cannot be remedied or are not divulged;
 - E. not meeting program standards for visiting facilities and residents or requirements for ongoing training;
 - F. per the discretion of the SLTCO.

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AGING AND DISABILITY SERVICES DIVISION	Section:	107
HOW TO MANUAL	Subject:	NON-INTERFERENCE

107

NON-INTERFERENCE

1. 1. The SLTCOP educates Aging and Disability Services Division, providers, legal counsel, and others about non-interference and penalties for violations.
2. The SLTCOP ensures that state statute and policies comply with Older Americans Act Provisions for non-interference.
 - a. NRS 427A.135(3) state: “A person shall not willfully interfere with the Ombudsman or an advocate in the performance of any investigation or visitation pursuant to this section. If any person is found, after notice and a hearing, to have willfully violated any provision of this subsection, the Director, at the request of the Administrator, may refer the matter to the Health Division of the Department for the imposition of an administrative fine of not more than \$1,000 for each violation.”
3. The SLTCOP identifies interference and reports it to the Administration on Aging, and Aging and Disability Services Division recommends, and pursues remedies to remove the interference.

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AGING AND DISABILITY SERVICES DIVISION	Section:	108
HOW TO MANUAL	Subject:	DATA

108 DATA

1. The SLTCOP collects data in the Ombudsmanager online database. The Ombudsmanager system meets the Administration on Aging requirements for annual reporting in the National Ombudsman Reporting System (NORS).
2. The SLTCOP uses data to help consumers make informed choices about where they will receive long-term care services.
3. The SLTCOP shares aggregated complaint summary data with consumers, media and policy makers and respond to individual requests from consumers for specific provider data.
4. The SLTCOP share information with surveyors/complaint investigators when requested before annual surveys, and when violations of regulation are detected. The SLTCOP is responsible for following up on complaints referred to the complaint investigator to determine disposition.
5. The STLTCOP follows ADSD policy regarding protection of sensitive data. The Ombudsmanager system is protected against access to individuals outside the office to ensure confidentiality.
6. The SLTCOP follows ADSD, State, and Federal policies regarding record retention.

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AGING AND DISABILITY SERVICES DIVISION	Section: 109
HOW TO MANUAL	Subject: PROGRAM STANDARDS

109 PROGRAM STANDARDS

1. Ombudsmen are employees of ADSD; as such Ombudsmen must adhere to ADSD policy and procedure.
2. The STLCOP standard working hours are Monday through Friday (excluding state holidays) 8:00am to 5:00pm. Ombudsmen may work flexible hours with ADSD approval.
3. Individual voicemail and email auto-reply messages must reflect employee leave and expected return.
4. Individual voicemail and email must be checked regularly throughout the day. Voicemail and email must be responded to within 24 hours or one business day.
5. The Electronic In and Out (EIO) board must be updated each time an employee leaves or returns to the office.
6. The Time Tracking for each employee must be accurately completed at the end of each pay period.
7. SLTCOP staff should make an effort to book agency vehicles (where applicable) in advance prior to requesting a motor pool vehicle.
8. 4:00pm to 5:00pm coverage schedules must be checked weekly to ensure there is program staff until 5pm each day. Any schedule changes are the responsibility of each employee. Should changes occur, notification must be sent to intake and the appropriate SLTCOP supervisor.
9. SLTCOP staff must wear official state identification badges while visiting facilities.
10. Business cards shall be provided to residents, staff and families as requested or as appropriate.
11. Long Term Care Ombudsman Program posters are required in all facilities. LTCO staff should ensure that posters are posted in their assigned facilities; if a facility does not have a poster the LTCO will provide the facility with the poster.

	ER/LTCOP/3151
AGING AND DISABILITY SERVICES DIVISION	Section: 110
HOW TO MANUAL	Subject: PROFESSIONAL CONDUCT

110 PROFESSIONAL CONDUCT

LTCO staff shall conduct themselves in a professional manner at all times.

1. When in a facility, LTCO are required to be respectful, courteous, and not interfere with the day-to-day activities of a facility or their staff.
 - a. The LTCO should monitor their interactions with facility staff, residents, and families to ensure they are not perceived as threatening, intimidating, or misusing their statutory authority.
 - b. The LTCO shall not direct facility staff or provide legal advice of any kind to the facility, resident, or other involved parties.
 - c. Residents, families, and facility staff are considered clients of the agency whether or not a case is open or closed.
 - d. Ombudsmen shall not use any facility equipment including phones, copy machines, fax machines, etc.

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AGING AND DISABILITY SERVICES DIVISION	Section: 111
HOW TO MANUAL	Subject: INTAKE PROCESS

111 INTAKE PROCESS

1. Intake receives complaints by or on behalf of residents 60-years of age or older residing in long term care settings.
2. Intake processes the complaint and forwards to the SLTCOP Supervisor (North or South as appropriate) who makes the decision to open a case or complete a program activity if appropriate. If there is a difference of opinion about whether a case should be opened the SLTCO or Social Services Chief will make the final determination.
3. SLTCOP staff may also receive complaints via direct calls or while visiting with residents in the facility. Intake forms must be completed and sent to SLTCOP supervisor who will make the decision to open a case or complete a program activity as appropriate.
4. Intake staff then opens a case and completes all intake sections in Ombudsmanager including the intake journal.
5. Complete past and present case history within Aging and Disability Services Division is entered by intake staff and appears in the intake summary box within the overview page of Ombudsmanager.

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AGING AND DISABILITY SERVICES DIVISION	Section: 112
HOW TO MANUAL	Subject: COMPLAINT INVESTIGATION

112 COMPLAINT INVESTIGATION

The SLTCOP’s goal in problem solving is achieving satisfaction for residents. The approach an LTCO uses is critical not only to the immediate outcome but also to effectiveness in the future with residents and staff.

1. Upon initial receipt of the case, the LTCO is responsible for reviewing the case file, ADSD history, and entering appropriate complaint codes into Ombudsmanager (see exhibit).
2. Cases must be initiated as soon as possible or within seven (7) working days. Urgent cases must be prioritized and initiated as appropriate and per LTCO Supervisor direction.
3. Investigations are intended to be a fact finding undertaking to determine whether complaints are verified or not verified.
 - a. Verified: It is determined after work (interviews, record inspection, observation, etc.) that the circumstances described in the complaint are generally accurate.
 - b. Not Verified: It is determined after work (interviews, record inspection, observation, etc.) that the circumstances described in the complaint are not generally accurate.
 - c. Should an LTCO be unclear on whether to determine whether a complaint code should be Verified or Not Verified the Conclusion Tool worksheet shall be used to determine appropriate disposition. Additionally, LTCO shall seek guidance from their supervisor if they are unclear as to how a complaint should be disposed. (see exhibit)

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AGING AND DISABILITY SERVICES DIVISION	Section: 112
HOW TO MANUAL	Subject: COMPLAINT INVESTIGATION

112 COMPLAINT INVESTIGATION (cont.)

4. LTCO should take the following steps when conducting an investigation:
 - a. Visit with and interview the resident in a private area.
 - i. If a case is opened for “all residents” the LTCO should first interview a sample of residents from the facility, preferably residents who appear alert and oriented.
 - b. Obtain consent from the resident(s) to advocate on their behalf.
 - c. Determine what steps, if any, the resident(s) have taken to resolve the problem on their own behalf.
 - d. During resident interview ascertain specific details as to who, what, when, where and why regarding the residents complaint(s).
 - e. Determine what the resident(s) feels would resolve the complaint.
 - f. Determine which facility staff, family members, state agencies, other related agencies need to be interviewed and conduct said interviews.
 - g. Determine which documents need to be collected to verify or not verify a complaint. Collect documents as necessary.
 - h. Conduct observation, as necessary, to determine if the complaint is verified or not verified.
 - i. Determine a plan to resolve the complaint to the resident’s satisfaction. Communicate with the resident(s) to determine if the plan is agreeable.
 - j. Work with facility staff and others, as appropriate, to implement a resolution to the resident(s) complaint.
 - k. Conduct follow-up visit and ensure resident is satisfied with the complaint resolution and observe to ensure the resolution is a permanent solution.
 - l. Contact the complainant, as appropriate, prior to case closure.
5. Cases must be closed within 90 days. If a case must be opened longer than 90 days the Ombudsman must have SLTCOP Supervisor approval.
6. Each LTCO is responsible for the completeness and accuracy of cases at the time of closure.
7. Probationary LTCO must ask for supervisor review prior to case closure.

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AGING AND DISABILITY SERVICES DIVISION	Section: 113
HOW TO MANUAL	Subject: COMPLAINT DOCUMENTATION

113 COMPLAINT DOCUMENTATION

1. Documentation within the Ombudsmanager system is to be written in the third person. Documentation must be completed no later than 3 working days after occurrence e.g. facility visits, phone call, etc.
 - a. Each case related contact must be recorded in the Ombudsmanager system.
 - b. Information should be presented in an objective manner avoiding any emotional or opinionated remarks.
 - c. Pertinent statements from residents or collateral contacts should be quoted.
 - d. Medical diagnoses should not be referenced in case notes unless relevant to the case

2. When the LTCO speaks with someone related to the case the first name, last name, and titles should be used indicating the relationship to the resident.
 - a. Subsequent references may be identified as husband, wife, Director of Nursing (D.O.N.), etc. Refrain from using the resident’s name throughout your documentation; instead use “resident.”
 - i. Abbreviations are acceptable as long as they are recognized by most professionals.

3. The LTCO is responsible for the accuracy of the entire case. The LTCO will ensure accuracy in the “Intake Journal” and will complete the “Investigation Journal” and the “Case Summary Journal” within Ombudsmanager. In the event an addendum is required, the LTCO will complete an “Addendum Journal.”

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AGING AND DISABILITY SERVICES DIVISION	Section: 113
HOW TO MANUAL	Subject: COMPLAINT DOCUMENTATION

113 COMPLAINT DOCUMENTATION (cont.)

4. Journals within case files:

a. Intake Journal format

- i. Complaint statement (description of the problem)
- ii. Documentation of time spent entering the case.
- iii. If LTCO determines that there are inaccuracies or that information is missing from the intake statement she/he should notify the LTCO Supervisor who can remedy the situation by speaking with the intake supervisor, or by making changes as appropriate.

b. Investigation Journal contains:

- i. The first entry in the Investigation Journal should be the first activity on the case.
- ii. Documentation of LTCO's observation as to whether the resident appeared alert and/or oriented.
- iii. Documentation of resident's consent to proceed with the investigation. In the case of a resident who does not appear to be able to provide consent and who does not have a legal representative, the LTCO may, acting in the resident's best interest, take action on behalf of a resident's substituted judgment, known wishes, or assumed best interests.
- iv. A plan of action (what the LTCO states they will do, who they will speak with, etc. to remedy the problem.)
- v. Each visit, contact, or receipt of additional information is to be dated and separately entered into the Investigation Journal. Each entry should end with the LTCO's initials and time spent along with any travel time spent.
- vi. Exhibits collected throughout the investigation should be noted in the Investigation Journal. (Example: *Facility DON provided LTCO with Medication Administration Record (see case file, Exhibit A)*)

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AGING AND DISABILITY SERVICES DIVISION	Section: 113
HOW TO MANUAL	Subject: COMPLAINT DOCUMENTATION

113 COMPLAINT DOCUMENTATION (cont.)

- vii. Emails regarding cases should be summarized within the investigation summary. Emails should generally not be included as case documentation, if an LTCO believes an email should be included in the case notes she/he shall seek the approval of the LTCO Supervisor.
- c. Case Summary Journal
 - i. The case summary should contain a concise summary of case activity and outcome.
 - ii. Each complaint should be listed with the appropriate code referenced.
 - iii. Verification is determined at the completion of your investigation based on the facts and information uncovered during the investigation. LTCO should indicate in the Case Summary Journal what the verification disposition is for each code.
 - iv. If a case was referred to the SLTOP by a Community Based Care (CBC) worker, a memorandum document should be sent to the referring CBC worker (see Exhibit ___). This memo should state that the concern was investigated and provide the case disposition (Verified/Not Verified).
 - v. Case summaries are signed, dated and time spent on documentation is noted.
- 5. Printed Case Files should contain the following:
 - a. Left Side: Items collected upon intake and internal documents (*ex. Facility self-reports, faxed reports, intake statement, referrals to other agencies, CBC memorandums*)
 - b. Right Side: Printed completed case notes and labeled case exhibits in ascending sequential order.
- 6. Companion cases are to be treated as separate investigations. Journals should reflect the specific individuals and actions taken related to the specific complaints.

AGING AND DISABILITY SERVICES DIVISION	Section: 113
HOW TO MANUAL	Subject: COMPLAINT DOCUMENTATION

113 COMPLAINT DOCUMENTATION (cont.)

7. The LTCO may reference companion cases within the Investigation Journal.
8. LTCO are not permitted to delete cases within the Ombudsmanager system; cases that need to be deleted are to be forwarded to the LTCO Supervisor.
9. Facility change forms are to be utilized when a new facility becomes licensed; a facility changes ownership, or when a facility closes. Completed facility change forms are sent to the AAI in the Las Vegas office for processing. (See exhibit)

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AGING AND DISABILITY SERVICES DIVISION	Section: 114
HOW TO MANUAL	Subject: REFERRALS TO OTHER AGENCIES

114 REFERRALS TO OTHER AGENCIES

It is often necessary for the SLTCOP to make referrals to other agencies. It is the role of the LTCO to determine when these referrals are necessary and to which entity the referral is most appropriate.

1. All referrals must be reviewed and approved by the LTCO Supervisor or designee prior to submission. This includes, but is not limited to, referrals to:
 - a. Bureau of Health Care Quality and Compliance (BHCQC)
 - b. Law Enforcement
 - c. State Boards (Licensing)
 - d. CBC
 - e. EPS
 - f. Attorney General's Office
 - g. Guardianship Hearing(s)/Court(s)

2. Letters to the court or outside party recommending guardianship or denial of guardianship, referrals to law enforcement, licensing boards etc, are to be written on agency letterhead and must be reviewed and approved by the LTCO Supervisor prior to submittal. Format and content of letter:
 - a. Name, title, and address of intended party.
 - b. Identify whom the letter is regarding including the name, date of birth, and social security number.
 - c. Salutation
 - d. Initial paragraph should identify the reason for the letter or referral and acknowledge ADSD's role in the issue at hand.
 - e. Second paragraph provides history with ADSD, a detailed yet, concise summary of the LTCO findings.

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AGING AND DISABILITY SERVICES DIVISION	Section: 115
HOW TO MANUAL	Subject: CASE REVIEW

115 CASE REVIEW

Case review is essential for ensuring that appropriate advocacy work has been conducted, residents concerns have been addressed, cases are completed appropriately, and that data is entered per National Ombudsman Reporting System (NORS) standards.

1. The LTCO Supervisor reviews twenty percent (20%) of each of their assigned staff's cases each month. These cases should be selected at random.
 2. The LTCO supervisor will review 100% of the cases of new LTCO staff for the first year prior to case closure.
 3. The LTCO Supervisor reviews each case according to the items listed on the case review form. (See exhibit)
1. The LTCO Supervisor completes the Quality Assurance form for each case reviewed.
 - a. Each Quality Assurance form contains an area for required corrections. The LTCO supervisor provides LTCO staff with this completed form requesting changes.
 - b. The LTCO Supervisor is responsible for ensuring that the changes are made to the case prior to the end of the current month.
 2. LTCO Supervisors reviews the physical case file for each case reviewed to ensure accuracy
 - a. formatted appropriately
 - b. exhibits appropriately entered and labeled
 - c. Ombudsmanager case matches the case file located on the database

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AGING AND DISABILITY SERVICES DIVISION	Section: 116
HOW TO MANUAL	Subject: ROUTINE VISITS

117 ROUTINE VISITS

1. According to Nevada Revised Statute, 427A.135, the Long-Term Care Ombudsman Program will make periodic visits to any facility for long-term care to provide information to the residents of the facility and to review generally any act, practice, policy, procedure or condition which may adversely affect the health, safety, welfare or civil or other rights of any resident of the facility.
2. The Older Americans Act (OAA) specifies in section 712 that the Long Term Care Ombudsman Programs will ensure that residents have regular, timely access to representatives of the program and timely responses to complaints and requests for assistance.
3. Routine Visits are conducted, at a minimum, on a quarterly basis to skilled nursing facilities. The SLTCOP will make routine visits to skilled nursing and large assisted living facilities on a monthly basis and to group homes and homes for individual residential care on a quarterly basis.
4. Routine Visits are unannounced and conducted on different/varied days of the week.
5. Routine Visits are non-complaint related thus case investigations should not occur at the same time that a routine visit is being conducted. It should be noted, as Routine Visits are conducted cases may be generated based on a complaint from a resident or family member. These complaints may be investigated during the routine visit process.
6. When conducting a Routine Visit the LTCO must:
 - a. Review facility's annual survey and complaint surveys prior to visiting the facility
 - b. Set aside appropriate time dependent on the size of the facility being visited
 - c. Wear appropriate state identification
 - d. Announce presence to facility staff
 - e. Review state license to ensure facility is in compliance
 - f. Ensure that Long Term Care Ombudsman poster is posted in facility
 - g. Interview residents and family in quiet and private areas
 - i. Inform residents of the role of the LTCO
 - ii. Ask if they have any concerns or questions they would like to discuss
 - iii. Answer questions as appropriate
 - iv. Provide information about resident rights, resources, Medicaid Administration and Medicaid Outreach as appropriate
 - v. Identify complaints and take action to resolve complaints as appropriate
 - h. Observe residents who are unable to speak for themselves to ensure they are receiving attention and quality care as necessary
 - i. Observe call light wait times as appropriate

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AGING AND DISABILITY SERVICES DIVISION	Section: 116
HOW TO MANUAL	Subject: ROUTINE VISITS

116 ROUTINE VISITS (cont.)

- j. Observe meal service and food quality
 - k. Observe activities and view activity calendar
 - l. Visit with the Resident Council President (wherever applicable) to get an idea of possible facility systems issues
 - m. Visit with Family Council members if applicable
 - n. Introduce the concept of family councils to family members
 - o. Help residents identify where the facility's most recent survey is posted and notify residents of their right to review this document
 - p. If acting as a Volunteer Mentor, discuss the assigned volunteer's performance with facility staff
7. After a Routine Visit has been completed the LTCO must document the visit on a Routine Visit narrative form. The LTCO will file this completed form in the facility file and/or binder. (see exhibit)
 8. After a Routine Visit has been completed the LTCO will complete a program activity form. (see exhibit) This form is submitted to the LTCO Supervisor who forwards it to the program Administrative Assistant for entry into Ombudsmanager.

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AGING AND DISABILITY SERVICES DIVISION	Section: 117
HOW TO MANUAL	Subject: SUBPEONAS

117 SUBPEONAS

A subpoena is a court order requiring information relating to a particular LTCO case. Compliance by the SLTCOP and ADSD is mandatory. Failure to comply may result in civil and legal penalties, and may compromise the results of lengthy and costly investigations.

1. Subpoenas Delivered to the Division:

- a. A subpoena is time-sensitive and must be handled as soon as it arrives in the office. All Division employees are authorized to receive a subpoena related to Division records/employees. If the LTCO to whom it is directed is not available and will not be returning to the office on the day the subpoena is received, then the subpoena must be given to the LTCO supervisor, who must follow this procedure immediately.
- b. When a subpoena is received, the Division databases are researched to determine whether the person named in the subpoena is a Division client (i.e. EPS, Ombudsman or CBC). If the person is not found in the databases, the requestor will be contacted and informed both orally and in writing. Once the requestor has been notified, the subpoena is shredded. If the person is a client of the Division, the following procedure will be followed.
- c. If any employee of the Division receives a subpoena for agency records or to appear in court for a case involving an agency client, the following procedure must be followed:
 - i. A copy of the subpoena is immediately faxed to the Deputy Attorney General (DAG), and the original subpoena must be placed in the client's file. Copies of the subpoena must be sent to the LTCO Supervisor, the STLCO and the Elder Rights Attorney. The subpoena must be entered on the spreadsheet in the folder titled "Subpoenas" located on the "S" Drive. The employee may keep a copy.
 - ii. The LTCO in charge of the case will discuss with their supervisor whether or not complying with the subpoena is in the best interest of the client. If it is determined that compliance is the right thing to do for the client, the DAG and the Elder Rights Attorney will be informed of this fact. However, the DAG will determine whether or not the requested information should be disclosed.
 - iii. If the DAG determines that the requested information should remain confidential, the DAG will send an Objection to Subpoena to the person or entity who requested the information. If the DAG sends an objection to the subpoena the records do not have to be produced unless the person requesting the records obtains a court order. Employees will not testify or produce records unless ordered to do so by a Judge.
 - iv. When the DAG makes the decision that the Division should comply with the subpoena, the records will be sent to the person/entity sending the subpoena, after being redacted, with a copy of a letter from the Elder Rights Attorney, describing which records are included. If the subpoena is for a criminal case from the District Attorney, the DAG will recommend that ADSD comply with the subpoena.

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AGING AND DISABILITY SERVICES DIVISION	Section: 117
HOW TO MANUAL	Subject: SUBPEONAS

117 SUBPEONAS (cont.)

2. The Division will not provide any medical records and/or personal information in response to a subpoena unless ordered to do so by a court. Personal information as defined in NRS 603A.040, includes a person's first name or first initial and last name in combination with one or more of the following data elements:
 - a. Social security number
 - b. Driver's license or identification card number
 - c. Account number, credit card number, debit card number in any combination with any required information to access financial account
3. If the subpoena is for an appearance in court, and the DAG is unable to accompany the Division employee to court, the Elder Rights Attorney and/or LTCO Supervisor will do so, if available.
4. Testifying in Court
 - a. LTCO staff will only go to court if they have been subpoenaed or if they wish to be heard on behalf of a client. LTCO staff must know that if you are in the courtroom, you must be prepared to testify if the Judge requests that you do so.
 - b. As soon as a LTCO knows they might be going to court, the LTCO must notify their Supervisor and the SLTCO in writing of the case, the court date, and why the LTCO will be testifying (e.g. subpoenaed, requested by client's attorney, or guardian's attorney, etc.).
 - c. Review the case prior to the court appearance. It is not necessary to memorize case details; just refresh your memory of the overall case.
 - d. An LTCO may want to take notes of pertinent facts about the case, but discuss this with the Elder Rights Attorney or the Deputy Attorney General (DAG) first. An LTCO should not be afraid to ask if she/he can refer to notes during questioning, if necessary. An LTCO should always ask (looking at the attorney) before looking at her/his notes.
 - e. The LTCO should tell the attorney before and/or during questioning that according to law, you cannot reveal the reporting party's name without a direct order from the Judge.
 - f. If an LTCO would like someone to accompany them to court they should inform their LTCO Supervisor, who will ask either the Elder Rights Attorney or the Deputy Attorney General.
 - g. Depositions should be treated just like courtroom testimony. The rules of evidence do not apply, so the questions can be more wide-ranging and confusing. It would be best for the LTCO Supervisor to request one of the attorneys go to the deposition. The LTCO will get a transcript of their deposition to correct. Try to make as few corrections as possible. Corrections tend to affect the credibility of the deposition.
 - h. In all testimony, listen carefully to the questions and answer with just the information requested. Try to avoid long, narrative answers. If you do not fully understand the question, ask it to be rephrased. If you still do not understand it, ask again.
 - i. Always strive, in court, to be calm, polished, and professional in demeanor and dress. This will add to the LTCO credibility.
 - j. Complete a short, written report on the court proceedings or deposition as soon after your appearance as possible. Put the original in the file and give a copy to the appropriate LTCO Supervisor and STLCO.

	ER/LTCOP/3151
AGING AND DISABILITY SERVICES DIVISION	Section: 118
HOW TO MANUAL	Subject: ACTIVITIES

118 ACTIVITIES

SLTCOP staff participates in multiple different activities. Documentation of these activities is essential for annual reporting to the Administration on Aging (AoA) through the National Ombudsman Reporting System (NORS).

1. Program Activity entries are required for:
 - a. Training for Ombudsman/Volunteers
 - b. Technical Assistance for Local Ombudsman and/or Volunteers
 - c. Training give to facility staff
 - d. Consultations to Facilities/Providers
 - e. Information and Consultation to Individuals
 - f. Facility Coverage
 - g. Participation in Facility Surveys
 - h. Work with resident councils
 - i. Work with family councils
 - j. Community Education
 - k. Work with Media
 - l. Monitoring/work on laws and regulations
 - m. Routine Visits (SNF)
 - n. Routine Visits (GH/ALF/HIRC)
 - o. Referrals to other agencies
 - p. Training attended by Ombudsmen
 - q. Training attended by Volunteers

2. A Program Activity form (see exhibit) is completed for each activity and sent to the LTCO supervisor and Elder Rights Support Staff for entry into the Ombudsmanager database.

3. At the end of each month the LTCO staff are responsible for ensuring that all of their activities for the month have been entered into the Ombudsmanager system.

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AGING AND DISABILITY SERVICES DIVISION	Section: 118
HOW TO MANUAL	Subject: ACTIVITIES

118 ACTIVITIES (cont.)

4. Program Activities are completed for activities related to Medicaid Administration and Medicaid Outreach services rendered by the Ombudsman Program. These duties are also tracked in the time tracking system.
 - i. Medicaid Outreach Duties Include:
 1. Telephone and/or face-to-face consultations with public, residents, families, facility staff about the Medicaid system.
 2. Assist individuals/families in identifying and choosing Medicaid providers including how to select a nursing home or group home.
 3. Provide public presentations in both long-term care facilities and the community regarding the Medicaid program including eligibility, services, Medicaid Waiver programs, etc.
 - ii. Medicaid Administrative Duties Include:
 1. Visit newly admitted Medicaid pending and eligible residents and their families – provide handouts including information about Medicaid eligibility, Medicaid services including Waiver programs, patient liability, etc.
 2. Monitor and evaluate quality of Medicaid services and provider qualifications including:
 - Identify provider service issues that affect quality of care and work to resolve.
 - Collaborate with Division of Public and Behavioral Health (DPBH) to improve quality of care and services by communicating areas of concern prior to surveys and as needed.
 - Make referrals of potential violations of Medicare/Medicaid regulations and State regulations to both DPBH and BELTCA.
 - Communicate with CBC regarding provider issues and problems.

	ER/LTCOP/3151
AGING AND DISABILITY SERVICES DIVISION	Section: 119
HOW TO MANUAL	Subject: TRAININGS

119 TRAININGS

According to the Older Americans Act the SLTCOP shall provide services to assist residents in protecting the health, safety, welfare, and rights of residents. As part of these services the SLTCOP in Nevada offers training to long term care facilities, hospice agencies, community groups, and other groups on topics ranging from Elder Abuse, Resident Rights, and Customer Service, among other topics.

1. LTCOs will identify areas within their assigned facilities wherein the staff would benefit from additional training. LTCOs will offer and provide training to facilities as appropriate.
2. LTCOs will provide training to community groups and interested parties as requested and per LTCO Supervisor direction and approval.
3. LTCOs will only use approved PowerPoint presentations when conducting training. If a new training is requested the LTCO will request training material from the LTCO Supervisor.
4. LTCOs will complete a program activity for each training conducted.

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AGING AND DISABILITY SERVICES DIVISION	Section: 120
HOW TO MANUAL	Subject: RESIDENT AND FAMILY COUNCILS

120 RESIDENT AND FAMILY COUNCILS

The Older Americans Act requires that the SLTOP provide technical support for the development of resident and family councils to protect the wellbeing and rights of residents.

1. Resident Councils:
 - a. LTCOs will seek permission from the Resident Council president to regularly attend Resident Council meetings at her/his assigned facilities.
 - b. LTCOs will provide technical support to residents and facility staff to support and strengthen Resident Councils.
2. Family Councils:
 - a. LTCOs will encourage the development of family councils in all of her/his assigned Skilled Nursing Facilities. LTCOs will utilize family council development strategies in the SLTCOP training manual.
 - b. LTCOs will provide technical assistance to support and strengthen Family Councils.
 - c. LTCOs will attend Family Council meetings when requested and as appropriate.

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AGING AND DISABILITY SERVICES DIVISION	Section: 121
HOW TO MANUAL	Subject: VOLUNTEER LONG TERM CARE OMBUDSMAN PROGRAM

121 VOLUNTEER LONG TERM CARE OMBUDSMAN PROGRAM

NRS 427A.127 allows for the creation of a volunteer advocacy program and for the appointment of volunteer advocates. The SLTCOP manages the Nevada Volunteer Long Term Care Ombudsman Program (VLTCOP) by recruiting, screening, training, mentoring and supporting certified volunteers.

1. Volunteers must adhere to VLTCOP policy. (See exhibit)
2. LTCO Supervisors are responsible for volunteer supervision:
 - b. LTCO Supervisors ensure recruitment efforts in conjunction with the VLTCOP program officer.
 - c. LTCO Supervisors screen and interview volunteers to determine if conflicts of interest exist and to ensure volunteer is appropriate for the program.
 - d. LTCO Supervisors ensure that volunteers receive required training and certify volunteers as appropriate.
 - e. LTCO Supervisors match volunteers to facilities and to Volunteer Mentors.
 - f. LTCO Supervisors ensure that LTCO staff adhere to the Volunteer Mentor Handbook. (see exhibit)
 - g. LTCO Supervisors ensure that VLTCOP activities are accounted for.
 - h. LTCO Supervisors provide counseling and support to volunteers as appropriate.

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AGING AND DISABILITY SERVICES DIVISION	Section: 121
HOW TO MANUAL	Subject: VOLUNTEER LONG TERM CARE OMBUDSMAN PROGRAM

121 VOLUNTEER LONG TERM CARE OMBUDSMAN PROGRAM (cont.)

3. LTCO staff act as mentors for volunteers appointed to advocate at their assigned facilities.
 - a. The LTCO staff is responsible for adhering to the process and policy located in the Volunteer Mentor Handbook.
 - b. The LTCO staff is responsible for ensuring that volunteers turn in their weekly activities and routine visit narratives.
 - c. The LTCO staff is responsible for reviewing volunteer visit narratives and providing feedback to volunteers, opening cases, and following up with residents as appropriate.
 - d. The LTCO staff is responsible for providing feedback on volunteer performance to the LTCO Supervisor as requested and per their discretion.
 - e. The LTCO staff is responsible for regularly ensuring resident and facility satisfaction with their assigned volunteer's advocacy efforts.
 - f. The LTCO staff is responsible for completing program activities on each occasion that technical assistance is provided to a volunteer.