PROGRAM AND PRACTICE:

LTCOP ADVOCACY IN ASSISTED LIVING FACILITIES



LOCAL LTCOP PROGRAM ASSESSMENT: CURRENT ACTIVITIES IN ASSISTED LIVING FACILITIES¹

This resource provides specific points for local LTCO programs to consider in assessing their current activities to support residents in assisted living facilities (ALFs). Regular program self-evaluation and assessment is critical to ensure that resources are maximized and to identify program strengths and areas for improvement. The lack of federal regulations for ALFs and reliance on often minimal state regulations and enforcement means increasing LTCO presence in these facilities and systems advocacy to strengthen the laws, regulations, and policies responsible for these settings is critical. The prompts provided below are intended to identify core areas of consideration as an introduction to program assessment, not to serve as an assessment process or form.

Consult your state LTCOP policies and procedures or speak with your LTCOP supervisor and/or State LTCO if you are unsure of any of the following questions.

Assisted Living Facilities in Your Region

Licensed Facilities

- What are the license types for assisted living facilities in your state?
 - Review your state statute, state LTCOP policies and procedures, guidance and/or certification training regarding licensure and identification of ALFs.
- How are the license types defined? For example:
 - Are they based on the capacity of the facility (e.g. type limited to certain number of beds)?
 - Are license types dependent on the level of assistance provided?
- Are there specialty designations that are part of this license type, such as the provision of specialized care for persons living with dementia, with mental illness or developmental/intellectual disabilities?
- Is there a defined set of residents' rights in statute? In regulation?
- How do you learn about licensed, operating ALFs in your region?
 - Ask your LTCO supervisor and/or State LTCO about receiving facility information.

Unlicensed Facilities

- According to state statute does your program have authority to assist residents living in unlicensed ALFs?
 - o If so, what is your role, if any, in visiting and/or identifying unlicensed ALFs?
 - If not, how does your program proceed if they receive a complaint regarding an unlicensed ALF or learn of an unlicensed ALF?

Regulatory Structure

- What is the regulatory structure? For example:
 - o Are there separate regulatory entities based on the type of facility license?
 - What are your state's policies and practices regarding local LTCO program communications with licensing and certification agency representatives?

¹ Due to the variation in facility type, terminology and licensure for these facilities by states the term "assisted living facilities" (ALFs) is used in this compendium to refer to all non-nursing homes covered by LTCO such as: board and care facilities, residential care homes, adult foster care homes, and personal care homes.

 If applicable, consult your SLTCOP policies and procedures regarding LTCO communication and coordination with representatives of the licensing and certification agency.

Medicaid and other government programs

- Does Medicaid pay for services in some or all of these facilities?
- \circ $\;$ Are you familiar with the waiver programs that pay for these services?
- Do you have regular communication with Medicaid case managers in your region?
- Are you familiar with the State's Home and Community Based Services (HCBS) transition plan required by the CMS HCBS Settings Rule (2014)?

Regional Coverage

- How are your regional resources allocated in order to ensure that residents living in ALFs have access to and knowledge of the ombudsman program and how to contact it?²
 - Review your grants, local resources, and donations.
 - Does the SLTCOP require or recommend a ratio of LTCO per LTC beds (beds in nursing homes and assisted living facilities)?³
- Has the State LTCO established visitation standards or benchmarks for the frequency of LTCO visits to assisted living facilities (e.g. quarterly or annual visits)? According to the "Instructions for Completing the State Long Term Care Ombudsman Program Reporting Form for the National Ombudsman Reporting System (NORS)" visits on a "regular basis" are no less "than quarterly" and are "not in response to a complaint, by paid and volunteer Ombudsmen.⁴
 - If yes, is your regional program achieving the standard?
 - \circ $\;$ Have you developed an annual plan for conducting routine visits?
 - If your State LTCO program policies and procedures allow regional programs to determine which facilities to visit, how do you decide which ALFs to visit and how do you prioritize your visits (e.g. number and/or type of complaints, facility size and/or type, location, residents using waiver services)?
- Do volunteer LTCO visit ALFs?
 - Are there additional training requirements specific to LTCO advocacy in this setting?

Data Review and Performance Goals

- Review your program's report data for information such as:
 - Number of assisted living beds compared to nursing home beds.
 - Percent of NHs and ALFs visited regularly.⁵ How do they compare?
 - Analyze ALF complaint data compared to NHs (e.g. number of closed cases, total complaints, percent verified, resolved complaints per 100 beds).
 - What are the top complaint issues in ALFs? How do they compare with complaint issues in NHs?
 - How does your program compare to similar local LTCOPs in your state?

⁴ Instructions for Completing the State LTCOP Reporting Form for the National Ombudsman Reporting System (NORS)

http://ltcombudsman.org/uploads/files/support/Instructions Final 2019.pdf

² According to the "Instructions for Completing the State Long Term Care Ombudsman Program Reporting Form for the National Ombudsman Reporting System (NORS)" visits on a "regular basis" are no less "than quarterly" and are "not in response to a complaint, by paid and volunteer Ombudsmen.

³ The 1995 Institute of Medicine study titled, "Real People, Real Problems: An Evaluation of the Long-Term Care Ombudsman Programs of the Older Americans Act" recommends a LTCO staffing ratio of one full-time paid staff LTCO per 2,000 long-term care facility beds.

⁵ Refer to the first footnote to see the definition of "regular basis."

- Are LTCO services as accessible to residents in ALFs as they are to residents in nursing homes?
 - How does the number of regular visits to ALFs compare to regular visits to nursing homes in your region?
 - Review several years of program data to determine how ALF visits compare to NH visits in your region and identify trends.
 - Conduct a data review on a monthly, quarterly, semi-annual and/or annual basis.

Access and Outreach

- How do residents of ALFs learn about the LTCO program and how to contact the program?
 - Are LTCO program posters and/or other program materials distributed to ALFs? By whom?
 - Do you and your program representatives provide or check for posters and/or other program materials during facility visits?
 - Are outreach materials distributed to other agencies and organizations [e.g. Adult Protective Services, assisted living provider association, Aging and Disability Resource Centers (ADRCs), Protection and Advocacy agency (P&A)]?
 - o Is this information included on your LLTCOP website?
 - Does your program provide community education regarding the role of the LTCOP in ALFs (e.g. community presentations, media outreach)?
- How do you communicate with other stakeholders and represent the interests of ALF residents? Such as regional representatives of:
 - o State Licensing and Certification Agency
 - State ALF provider associations
 - \circ $\;$ State Medicaid Agency and other entities responsible for managing the waiver programs
 - Adult Protective Services
 - Protection and Advocacy
 - Agencies and organizations involved in transitions from NHs to the community including Centers for Independent Living
 - o Local provider associations
 - o Department of Veterans Affairs

Systems Advocacy Agenda

Systems advocacy is an essential function of the LTCO program. LTCO identify trends and issues from their program data, information provided by individuals' experiences with ALFs, and their personal observations to advocate for systems changes to improve quality of life and care. Developing a systems advocacy agenda may be even more critical due to the lack of federal regulations.

- Have you identified systems issues experienced by residents in ALFs?
 - o If not, review your program data to identify trends (e.g. what are the top complaints, consultations).
 - Coordinate with the State LTCO regarding systems advocacy opportunities, strategies (e.g. work with the media, collaboration with other organizations concerned with ALF issues, community education, legislative or regulatory action), and priorities.

Resources

<u>Program Assessment</u> Self-Evaluation and Continuous Quality Improvement Tool for State and Local Ombudsman Programs <u>http://ltcombudsman.org/omb_support/pm/program-effectiveness</u>

<u>Communication and Collaboration</u> CMS and AoA Discussion with State LTC Ombudsmen and State Survey Agencies <u>http://ltcombudsman.org/omb_support/pm/Collaboration</u>

Home and Community Based Services (includes information regarding the Medicaid HCBS Final Rule) http://ltcombudsman.org/issues/home-and-community-based-services

<u>Data</u>

National Ombudsman Reporting System (NORS) Training Materials http://ltcombudsman.org/ombudsman-support/training#NORS

Raising Expectations - AARP State Scorecard on Long-Term Care Services and Supports for Older Adults, People with Physical Disabilities and Family Caregivers http://www.longtermscorecard.org/

Outreach

Ombudsman Advocacy Challenges in Assisted Living: Outreach and Discharge http://ltcombudsman.org/uploads/files/support/norc-ombudsman-advocacy-challenges-in-al-2001.pdf

Supporting Well Informed Consumers: The Role of the Long-Term Care Ombudsman

http://ltcombudsman.org/uploads/files/support/Sharing-Info-w-Consumers0605.pdf

This project was supported, in part, by grant number 900M002, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy.