



**The National Long-Term Care
Ombudsman Resource Center**

INITIAL CERTIFICATION TRAINING CURRICULUM FOR LONG-TERM CARE OMBUDSMAN PROGRAMS

Module 10: Documentation

WELCOME AND INTRODUCTION

Section 1

Welcome

- Your name
- Where you are from
- One thing you learned from Module 9
- What you hope to learn since the last module



ANY
QUESTIONS
?

Today's Agenda

Section 1: Welcome and Introduction (15 minutes)

Section 2: Long-Term Care Ombudsman Program Reporting Requirements (60 minutes)

----BREAK----- (15 minutes)

Section 3: Accurate Documentation (60 minutes)

Section 4: Conclusion (20 minutes)

Module 10 Learning Objectives

- The core National Ombudsman Reporting System (NORS) documentation requirements
- A case, a complaint, and information and assistance
- The LTCOP documentation requirements
- The purpose of documentation
- How to document
- What information must be documented

LONG-TERM CARE OMBUDSMAN PROGRAM REPORTING REQUIREMENTS

Section 2

Confidentiality

- All files, records, and other information of the Ombudsman program are the property of the Office.
- Such records must be kept confidential.
- Resident and complainant identifying information must be kept confidential and cannot be disclosed without consent.

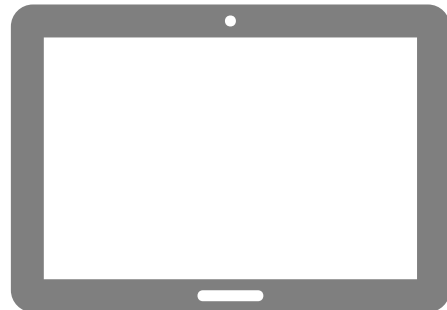
Important Reminder

The Office must have access at all times.

You must follow state and federal requirements regarding disclosure.

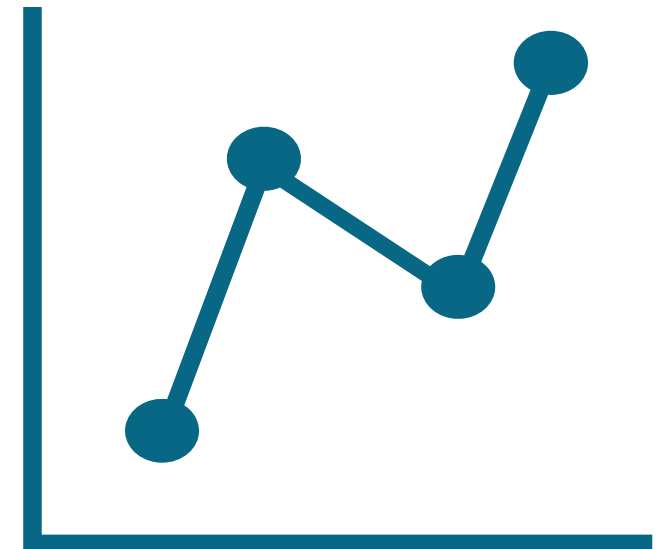
You must follow program policies and procedures for confidentiality and disclosure.

Documenting Information

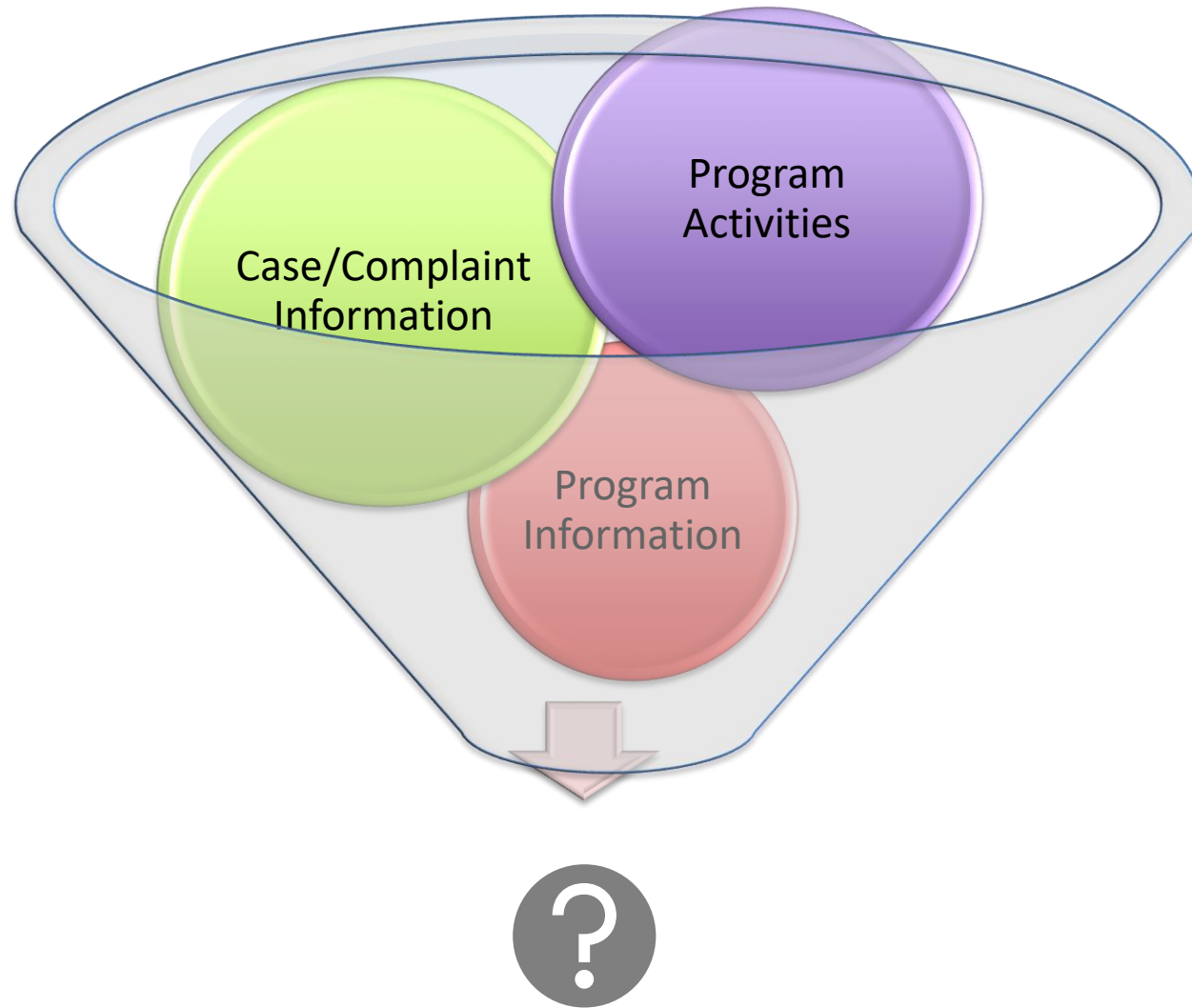


The National Ombudsman Reporting System (NORS)

- Captures data on:
 - Cases
 - Complaints
 - LTCOP Activities
 - Program information



Data Reporting – The Bigger Picture



Your day-to-day work not only makes a difference for the residents with whom you are working, but also for all residents across the country.

→ **Activities**

Ombudsman Program Activities

- Facility visits
- Information and assistance
- Training for representatives of the Office
- Training for facility staff
- State survey participation
- Resident Council and Family Council participation
- Community education

Information and Assistance

- Providing information about issues impacting residents
- Providing assistance without opening a case and working to resolve a complaint



Ombudsman Program Cases

- At least one complaint
- Complainant
- Complaint code(s)
- Setting
- Verification
- Resolution and referral
- Case notes



→ Add state-specific process for documentation training

Complaint

Complainant

Complaint Code

Setting

Verification

Referral

Disposition

→ State-Specific - Opening and Closing a Case

Opening a Case

- Open as soon as possible
- One complainant per case
- Intake information



Referral Codes

- 01 - Licensing, regulatory, or certification agency
- 02 - Adult protective services
- 03 - Law enforcement or prosecutor
- 04 - Protection and advocacy
- 05 - Legal services
- 06 - No referral was made
- 99 - Other

Closing a Case



Complaint verification



Referral agency code



Disposition code



Closure date



All documentation is entered

Disposition Codes

01 - partially or fully resolved

02 - no action needed or
withdrawn

03 - not resolved



→ State Documentation Requirements

ACCURATE DOCUMENTATION

Section 3

Why Document?

**Provides a
factual
accounting**

- Shows interactions and observations in a clear and factual manner
- Does not include impressions, emotions, and preconceived ideas
- Enables a representative to pick up where another left off

**Tracks the
progress of
the case**

- Allows for a review of actions completed.
- Documents the timeframes of actions to be completed.
- Records all actions needed to achieve resolution.

Monitors the performance of the LTCOP

- Provides a formal record.
- Verifies that you have fulfilled required duties.
- Verifies that the LTCOP has complied with state and federal requirements.

**Provides an
official
record of
complaints**

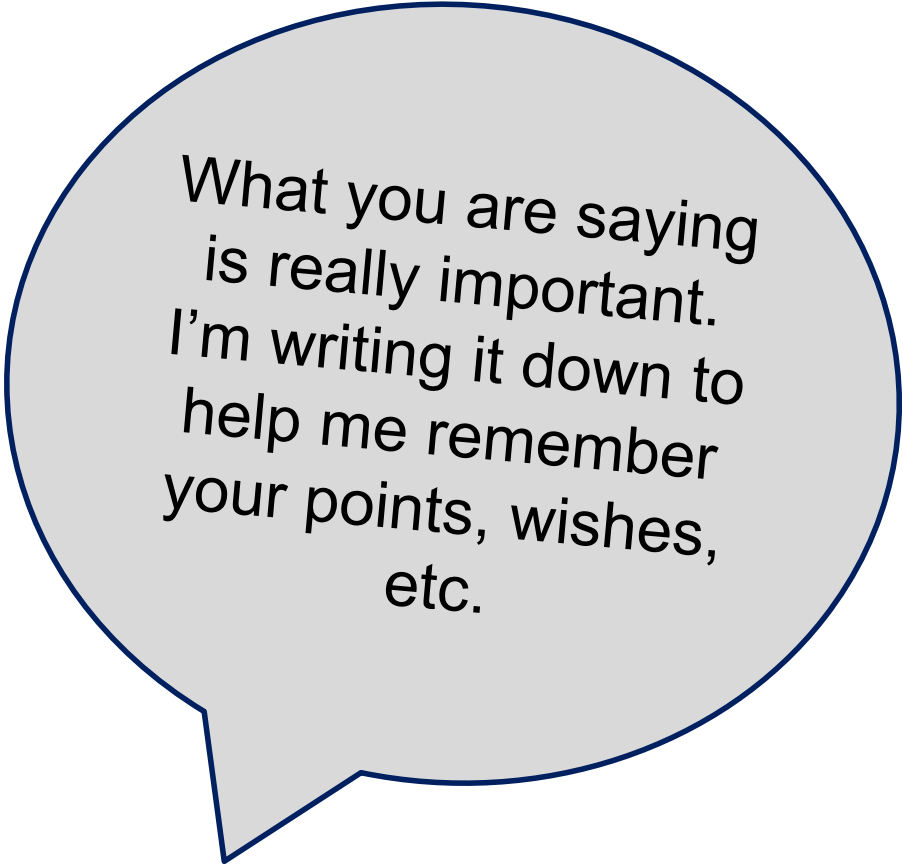
- Demonstrates violations of residents' rights and facilities' poor practices.
- Tracks the complaint trends.
- Helps bring about systems change creating better quality of life and/or quality of care for residents.




How to Obtain Consent (Long-Term Care Ombudsman) Part 2

- If it's not in the database_____.
- Documentation is proof that the Ombudsman has_____.

Note Taking



What you are saying
is really important.
I'm writing it down to
help me remember
your points, wishes,
etc.



Thank you for sharing this
information. I'm taking
notes to make sure I
understand exactly what
you are saying. I cannot
share anything you say to
me without your
permission.

What to Document

Who

Names

Titles

Relationship to
resident

What

The complaint

Information
obtained

Where

Location of
the
occurrence(s)

When

Dates

Times

Why

Root cause

Topics

<i>Topic Area</i>	<i>Description</i>
<i>The problem</i>	Define the nature and extent of the problem.
<i>The resident</i>	Describe relevant facts about the resident gained through observation, interviews, and possibly record reviews.

Topic Area

Description

*Permission(s)
granted*

Explain exactly what permission(s) the resident has granted you.

- Each person to whom the resident gives you consent to release their identity and talk about the problem.
- Permission received or not received to disclose records. Be specific.
- Clearly state the plan of action including the agreed upon actions each party will take.

Topic Area

Description

Actions taken

Document all actions taken.

- Interviews
- Face-to-face visits
- Phone calls
- Emails
- Record reviews
- Referrals
- A change in the plan of action

Evidence

Provide information gathered during the investigation.

Topic Area

Description

Follow-up

Document all follow-up actions.

*Resolution/
outcome*

Describe the resident's perspective of the outcome of your advocacy.

- Is the problem resolved?
- If so, to what extent?
- What is the resident's level of satisfaction?

How to Document

Effective Documentation is:	Effective Documentation is not:
Chronological	Out of chronological order
Complete and accurate	Incomplete or inaccurate
Concise and organized	Unnecessarily wordy and disorganized
Clear and free from uncommon abbreviations	Difficult to understand
Confidential	Available to anyone outside of the LTCOP
Inclusive of necessary facts	Opinionated or full of useless information
Entered as soon as possible into the system	Delayed

Effective or Ineffective Documentation?

1. "When I entered the facility the activities director stopped me and was so excited about the upcoming fair she is organizing for the residents. She invited me to the event. Since Sharon has a complaint about activities, I brought it up to Kim and she said it was resolved."

2. "I have followed up with resident, Ralph, two times and both times he seems uncertain of what he wants to do about moving home. I think he is being influenced by his son."

3. “When entering White Oaks Assisted Living the morning of May 26, 2021, I saw several staff assisting residents out of the building. I spoke with resident Mel Jackson, who said they think the fire alarm was pulled by a resident, but he did not know which resident. Another resident named Rosalee said she smelled smoke on the first floor, but no alarm went off. The manager, Bill, came over and said they were “looking into it” then immediately went back into the building. I talked with other residents outside who all said they aren’t sure what is going on and did not hear the fire alarm. They expressed concern about a potential broken alarm and asked if I would look into it. I stayed outside of the building and after about 10 minutes, the fire trucks arrived. I observed the situation for another 15 minutes and saw no other concerns. I will call the manager this afternoon.”

Fact or Opinion?

1. “Of course, the manager yelled. He always gets mad when I bring problems to him.”
2. “The manager raised his voice saying he was tired of constantly getting complaints from the LTCOP.”



Objective or Subjective?

“Travis stood up from his chair, shook his head, and said he needed a break. He left the room and walked down the hall.”

Objective

“Travis became angry and stormed out of the room.”

Subjective

“Travis was anxious and tried to leave the facility.”

Subjective



Objective language
describes behaviors &
observations

hit, ran, cried, slept, did not speak, laughed, answered
yes or no questions, did not sign the document

Subjective language
labels behaviors &
interjects opinions

depressed, confused, inconsiderate, emotional, dirty,
angry, refused care, hostile, happy, sad

Role Play – Jo Phillips

- Narrator
- Representative - Alex
- Resident - Jo
- Manager



Case Notes Checklist



In general, did I...

- ✓ Record all events in chronological order by date and approximate time?
- ✓ Use quotes, when possible?
- ✓ Limit the use of abbreviations?
- ✓ Use names and titles of individuals and not “he,” “she,” “they”?
- ✓ Use objective language?
- ✓ Attach all required documents?

- Documenting **intake** information, did I include...

- ✓ The description of the problem?

- ✓ Steps taken to resolve the problem?

- ✓ The complainant's opinion of the resident's ability to communicate informed consent?

- ✓ Permission to reveal the complainant's identity?



- Documenting the remainder of the investigation, did I include...



- ✓ The resident's perception of the problem(s)?
- ✓ The resident's desired outcome?
- ✓ The initial plan of action, including all involved parties?
- ✓ Each step taken in the investigation process?



- ✓ All actions taken to resolve the complaint(s)?
- ✓ A statement about the resident's satisfaction with the resolution?
- ✓ Follow-up communication with the resident or other relevant parties?

Jo Phillips case notes

Use the documentation check list to write case notes for both visits with Jo Phillips.



Common Mistakes



Writing unnecessary information



Leaving out essential information



Using unclear or confusing language

NORS Documentation Training

- NORS four-part training reviews basic principles, definitions, codes, and activities.
 - **Part I** - Case, Complaint, Complainant, and Information and Assistance Basic Principles
 - **Part II** - Complaint Coding Basic Principles
 - **Part III** - Verification, Disposition, Referral, and Closing Cases Basic Principles
 - **Part IV** - Ombudsman Program Activities Basic Principles

→ Next Steps

CONCLUSION

Section 4

Module 10 Questions

1. What questions do I still have?
2. What confuses me?
3. What am I excited about?
4. What am I going to do next?
 - a. Click in the hyperlinks in my manual
 - b. Re-watch videos
 - c. Research the resources
 - d. Read the training manual
 - e. Go on a facility visit with an experienced representative
 - f. Complete certification paperwork
 - g. Other_____

QUESTIONS?

ADDITIONAL RESOURCES

Refer to your trainee manual for other sources of information related to topics discussed in this module.

Contact Information

- INSERT PRESENTER CONTACT INFORMATION



The National Long-Term Care Ombudsman Resource Center

Connect with us:

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The National LTC Ombudsman Resource Center



@LTCombudcenter



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