

# Office of the State Long-Term Care Ombudsman



## ANNUAL REPORT FFY 2012

**Beverley L. Laubert**  
State Long-Term Care Ombudsman



## Ombudsman Stepping Up For Elder Rights

Dear Long-Term Care Consumers and Supporters:

We are pleased to present the 2012 annual report of the Ohio Office of the State Long-Term Care Ombudsman. This report represents the hard work of dedicated ombudsman staff and volunteers and the experiences of consumers. Without these caring and compassionate representatives of the Office, we would not be able to fulfill our mission:

To seek resolution of problems and advocate for the rights of home care consumers and residents of long-term care facilities with the goal of enhancing the quality of life and care of consumers.

We strive to fulfill this responsibility every day through effective individual and systems advocacy to improve long-term care in Ohio.

2012 was a great year to be an ombudsman. We helped nursing home residents through crises such as closings that required people to move to a new home. We asked Governor Kasich to add a personal needs allowance increase in his next budget proposal. And we had significant influence in the development of MyCare Ohio for consumers who are eligible for Medicare and Medicaid, resulting in a key role for the ombudsman and the promise of greater visibility among home care consumers. This report provides detail about some of these efforts and other important advocacy still needed.

I appreciate your partnership and look forward to future collaboration to achieve excellence for long-term care consumers.

Best regards,

A handwritten signature in blue ink that reads "Beverley L. Laubert".

## POLICY RECOMMENDATIONS

### Nursing Home Quality Incentives

**Information about nursing home progress on quality incentives should be available to the public.** *The State Ombudsman and members of her staff are actively involved in policy-level discussions to enhance quality incentives in Ohio. The State Ombudsman joined the Director of the Ohio Department of Aging to produce videos to explain the incentives.*

### Personal Needs Allowance

**Personal Needs Allowance for nursing home residents should be increased to \$60.00 per month.** *The State Ombudsman requested an increase and it was included in the Governor's budget for \$45 in 2014 and \$50 in 2015. The bill was being considered by the Ohio Senate at the time of this printing.*

### Consumer Access

**Ombudsmen must be visible and accessible advocates in Ohio's restructured system of long-term care services and supports, especially home and community-based services.** *The State Ombudsman participates in stakeholder discussions related to development of a restructured system where all consumers have access to their advocate.*

### Guardianship Reform

**County Probate Courts should implement standards for professional guardians voluntarily until the Supreme Court of Ohio implements standards and certification for professional guardians statewide.** *The Adult Guardianship Subcommittee turned to development of training for guardians.*

### Resident Councils in Nursing Homes

**Nursing homes should work with resident councils to develop person-centered care strategies, improve resident and family satisfaction, and achieve quality incentives.** *Ombudsmen spent 1,389 hours working with councils and 40% of that time was focused on person-centered care. The State Ombudsman proposed more emphasis on resident councils during regulatory reform meetings for the 2014-2015 budget.*

### Sex Offender Notification

**Persons living in long-term care facilities should receive the same notification about registered sex offenders as people living in the community.** *HB 24 was passed by the Ohio House and was introduced in the Senate. At the time of this printing, House Bill 87 had been introduced in the 130<sup>th</sup> General Assembly.*

## Mission & Structure

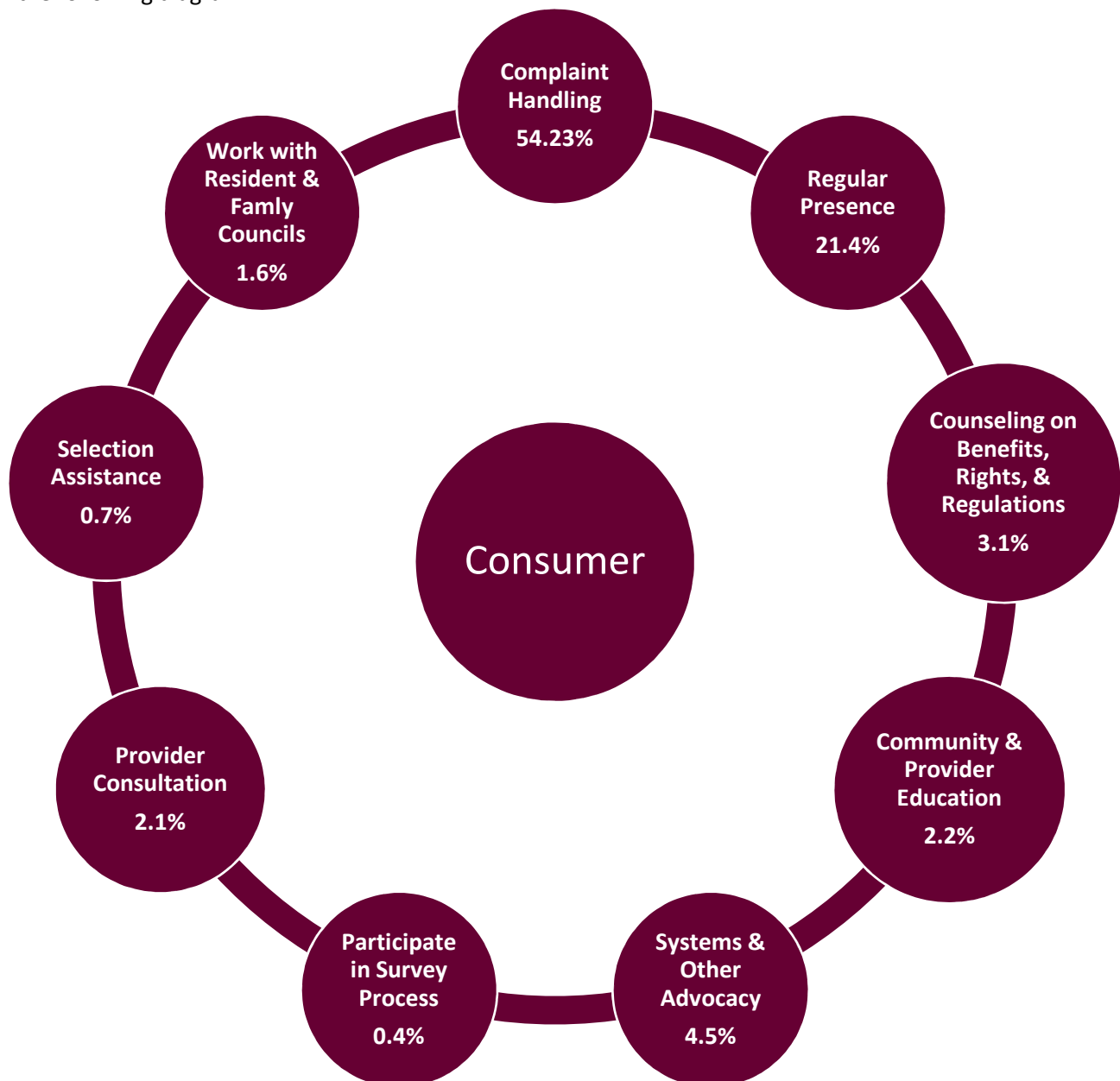
As mandated by the Older Americans Act and Ohio law, the mission of the Long-Term Care Ombudsman Program is to seek resolution of problems and advocate for the rights of home care consumers and residents of long-term care facilities with the goal of enhancing the quality of life and care of consumers.

The State Ombudsman designates 12 regional programs and certifies about 350 volunteers and 80 paid staff statewide as representatives of the Office.

## Ombudsman Core Services

Supplementing individual advocacy, ombudsmen **strive for system change** such as **promotion of person-centered care** and passage of legislation that would improve quality in all long-term settings, including home.

Ombudsman core services and the percentage of total time reported on each service in FFY 2012 are reflected in the following diagram.



## Advocacy & General Information

Ombudsmen are the voice of consumers on a variety of topics and activities. Representatives of the Office spent **50,700 hours providing advocacy services** in addition to complaint handling.

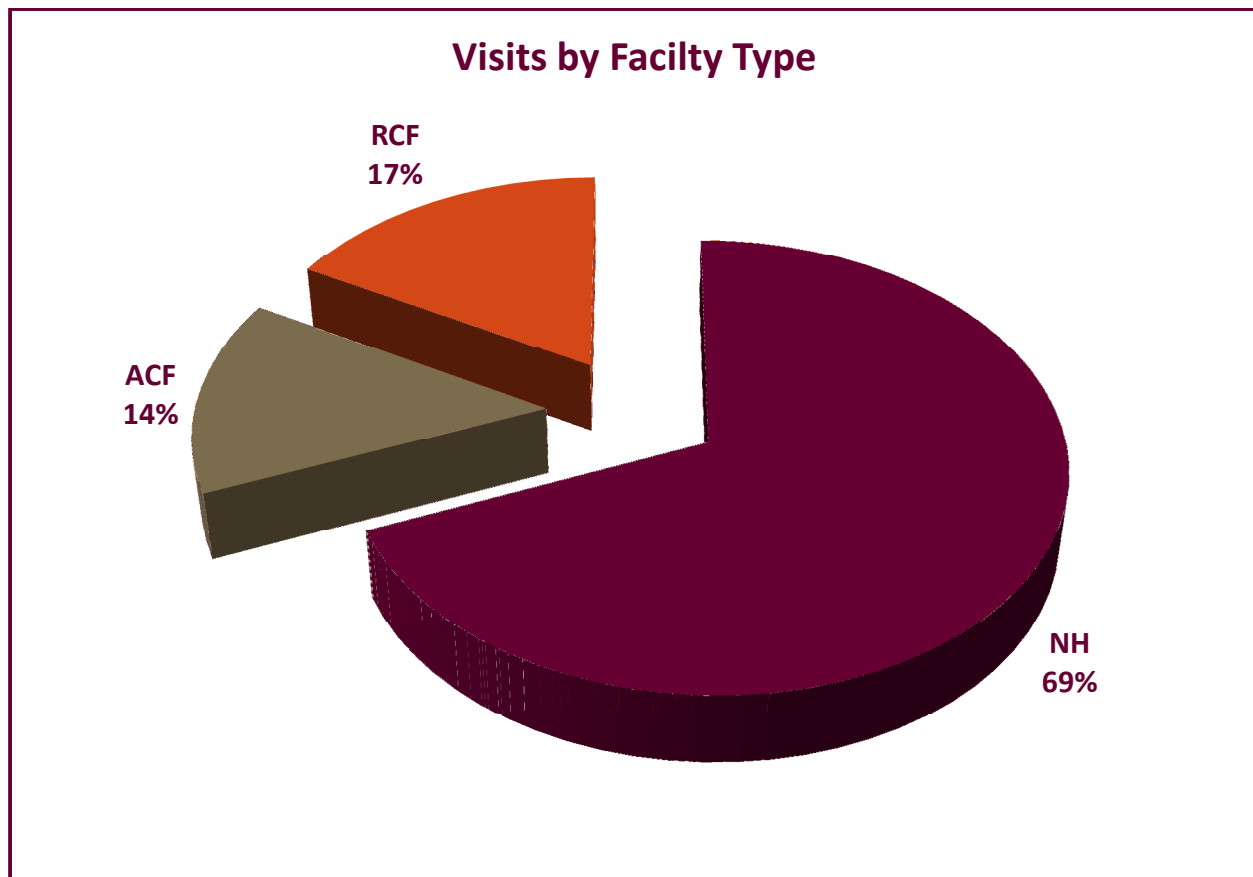
Advocacy takes many forms:

- reviewing, analyzing, commenting on, and monitoring the enforcement of laws and regulations;
- participating in Ohio Department of Health survey process by sharing information gleaned from regular presence in long-term care facilities;
- training staff and volunteers to be more effective advocates;
- recommending policy & advising local, state, and federal government agencies on long-term care issues; &
- educating the public, consumers, providers, and policy makers.

## Regular Presence

Ombudsmen provide valuable **consultation and prevention** when they have opportunities to communicate and collaborate with care providers and consumers. Ombudsman presence in facilities (i.e., nursing homes, adult care facilities, and residential care facilities) **provides consumers with essential access** to information and advocacy services and provides ombudsmen the opportunity to:

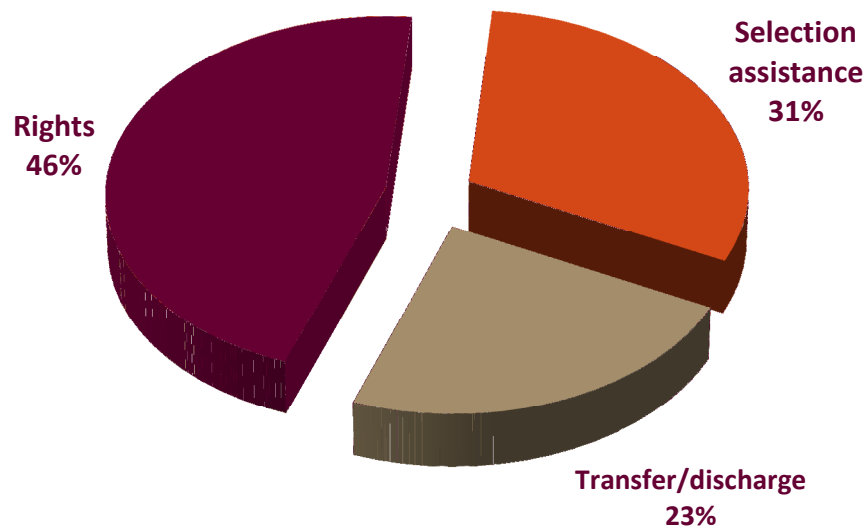
- educate consumers and providers about person-centered care
- identify and work to resolve problems related to the quality of care
- inform consumers of their rights and help them to expect excellence
- identify consumers who are ready to return to the community



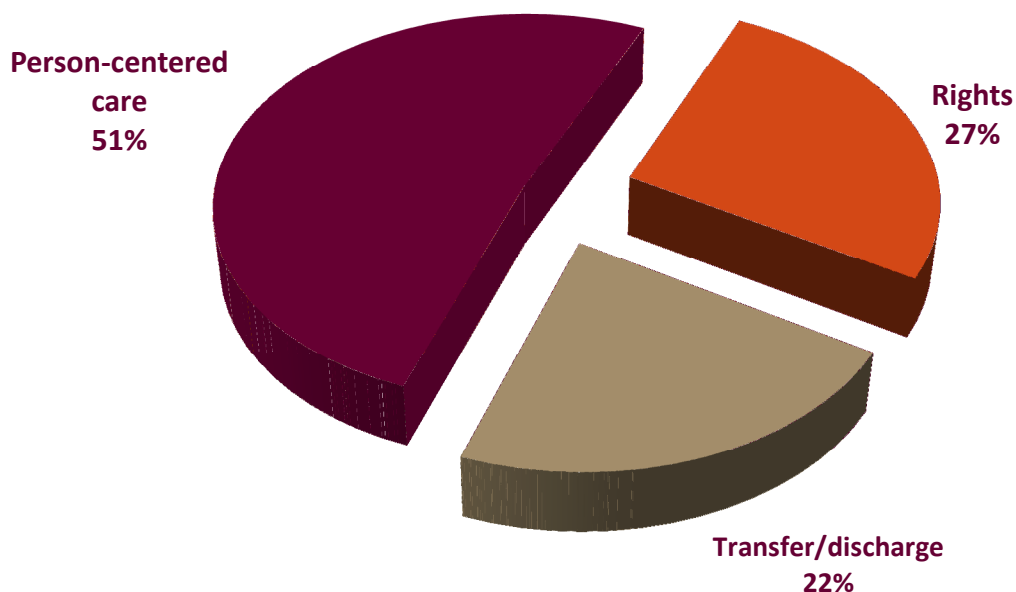
## Consultation to Individuals & Providers

Ombudsmen are a resource to providers and consult with them on varied topics related to the services they provide. In FFY 2012, ombudsmen responded to nearly **2,137 requests** for consultation by providers and **6,502 requests** for consultation by individuals. By **helping providers improve services through proactive consultation**, ombudsmen attempt to avert complaints that require a more reactive response. We expect that our emphasis on person-centered care will result in an increase in this activity.

### Consultation to Individuals



### Consultation to Providers



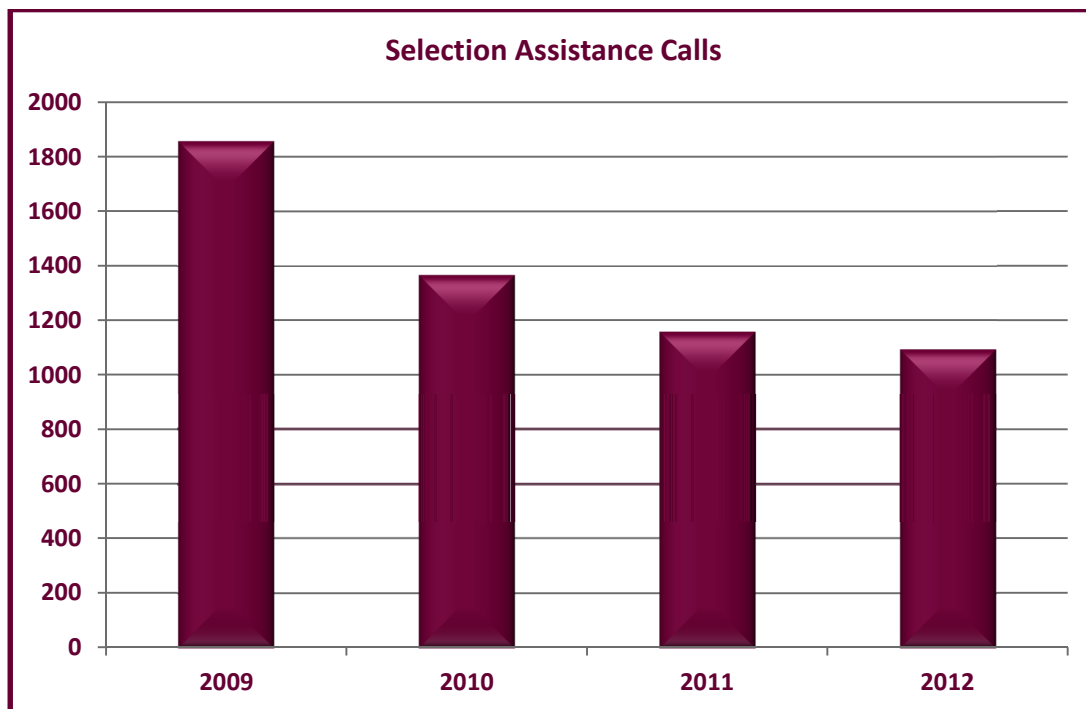
## Long-Term Care Consumer Guide



Helping people select quality long-term care services is an essential element of our core services. Selection assistance goes beyond choosing a provider for services; best practices ensure that the consumer's needs are met in the least institutional setting in a person-centered manner and that the consumer is educated to "expect excellence" wherever they receive care.

The ombudsman program spent **630 hours assisting 1,096 consumers in selecting long-term care services in FFY 2012**. A valuable selection assistance tool available to ombudsmen and the public is the Long-Term Care Consumer Guide, our web site at [www.ltcOhio.org](http://www.ltcOhio.org). The site provides comparative information, such as regulatory compliance, satisfaction survey results and facility services and policies, about nursing homes and residential care facilities. The site will be expanded in FFY 2013 to include adult care facilities. In FFY 2012, there were approximately **54,000 visitors** to the site.

One of the most popular resources on the Consumer Guide is the annual consumer satisfaction survey in long-term care facilities. The consumer satisfaction survey data are included in the quality incentive formula for Ohio Medicaid reimbursement.



Selection Assistance has steadily declined in recent years; the Office attributes the decline to the use of the LTC Consumer Guide and other internet-based resources.

## Person-Centered Care

"**Culture change**" is the common name given to the national movement for the transformation of long-term care services, based on person-centered values and practices where the voices of consumers and those working with them are honored. **Core person-centered values are choice, dignity, respect, self-determination and purposeful living.**

Culture change transformation supports the creation of both long and short-term living environments as well as community-based settings where both consumers and their caregivers are able to **express choice and practice self-determination in meaningful ways at every level of daily life.** Consumers should feel at home wherever they live. The Office of the State Long-Term Care Ombudsman works to influence and support person-centered care in all settings.

Transformation may require changes in organizational practices leading to better outcomes for consumers and direct care workers in a cost-effective way:

- Consistent assignment of staff to consumers
- Empowering direct-care workers
- 24-hour availability of food
- Meal choice
- Bathing choice
- Consumer and family satisfaction
- Personalization of the living environment
- Elimination of overhead paging
- Meaningful life experiences



## Ombudsman Person-Centered Strategies Project

In FFY 12, the SLTCO's share of Resident Protection funds were dedicated to furthering person-centered care in nursing homes that was above and beyond existing person-centered care promotion. Each regional program was awarded an allocation of these funds based on projects of their own design. Using these funds, our regional programs worked intensively with select nursing homes to implement person-centered care through efforts such as intensive technical assistance and special focus teams. Many of our programs planned day-long training sessions for their selected providers with national person-centered care experts. Some nursing home residents received specially designed volunteer training with the goal of them becoming their own person-centered care advocate, while another program regularly gathered providers to share best practices and implementation tips.



## Ombudsman HOME Choice Transition Coordination Services



Many nursing home residents would prefer to live on their own in the community but often lack the resources needed to move out, such as a house or apartment or social supports. If a resident has been living in the nursing home for months or years, the moving out process can seem daunting. Many residents are unsure of how to even initiate a move. The Home Choice Program transitions older adults and persons with disabilities from institutions to the community. This federal program, known nationwide as Money Follows the Program, aims to balance the long-term services and support system from a high-cost institutional setting to a person-centered system that offers choice of where individuals live and receive high-quality services and supports. A unique part of this program links participants with transition coordinators for assistance in locating housing, setting up a household and connecting to community services.

Nine of the 12 regional long-term care ombudsman programs provided transition coordination services through the HOME Choice program. In FFY 2012, our regional programs received 375 HOME Choice cases and closed 441 cases. Within those cases, **ombudsmen assisted 68.5% of consumers in successfully transitioning from the nursing home to the community.**



## Ombudsman Volunteers

Ombudsman volunteers are critical to the program. Associates are the core of our presence in long-term care facilities providing information and access to residents.

- Volunteers completed **72.2% of all nursing home advocacy visits.**
- Volunteers completed **31.6% of all adult care facility visits.**
- Volunteers completed **48.6% of all residential care facility visits.**
- Volunteers were responsible for **72.1% of all work with resident councils.**

## Ombudsman Quality Measures

The Office of the State Long-Term Care Ombudsman developed Ombudsman Quality Measures (OQMs) to serve as indicators of regional ombudsman program performance. Regional programs and State Office staff collaborated to identify indicators of quality ombudsman performance in a variety of areas.

Ongoing economic challenges have increased the focus on **volunteer utilization**. Appropriate and effective utilization of volunteers is an indicator of quality program performance because volunteers are the entrance to the program for many consumers.

QUALITY MEASURE	INDICATOR	RESULT
Volunteer utilization	Hours spent assisting with complaints	1,906.4 hours, a decrease of 64.4 hours
Volunteer utilization	Percentage of intakes completed by volunteers	7.4%, a decrease of 0.2%
Complaint resolution	Percentage of complaints resolved	75.4%, a decrease of 2.8%
Regular presence	Percentage of NHs visited quarterly	47.9%, an increase of 10.4%
Regular presence	Percentage of ACFs visited quarterly	19.6%, an increase of 5.4%
Regular presence	Percentage of RCFs visited quarterly	26.7%, an increase of 6.6%

An increase in volunteer utilization reflects an increase in volunteer time commitment as the total number of volunteers has remained steady at about 370. More information about the contribution of ombudsman volunteers is provided later in this report. The decrease in the percentage of intakes completed by volunteers is negligible and volunteers are an integral part of increasing ombudsman presence in long-term care facilities.

Ombudsmen are working hard to **improve our presence in home and community-based services (HCBS)** to improve access for consumers but presence in HCBS is more challenging than in facility-based environments. Consumers receiving services in their own homes are more likely to develop close relationships with workers, feel more vulnerable and are more fearful of reprisal or having their services terminated if they complain. Additionally, providers are less familiar with the ombudsman program and are therefore less likely to refer consumers.



## Complaint Resolution

**9,149 complaints were received** in FFY 2012, a decrease from the 10,329 complaints received the previous year. The ombudsman program works with consumers, providers, regulators, and others to resolve complaints about services. Empowerment of consumers is a priority; providing information and resources so a person is able to work through the system by him or herself respects the self-determination of individual consumers. In an effort to streamline reporting and reduce the burden on regional ombudsmen, FFY 12 was the first year that ombudsmen could report complaints handled entirely through empowerment as advocacy activity rather than opening a case. The State Office will continue to watch this.

Ombudsmen **closed 9,420 complaints** and **verified 74.2%**.

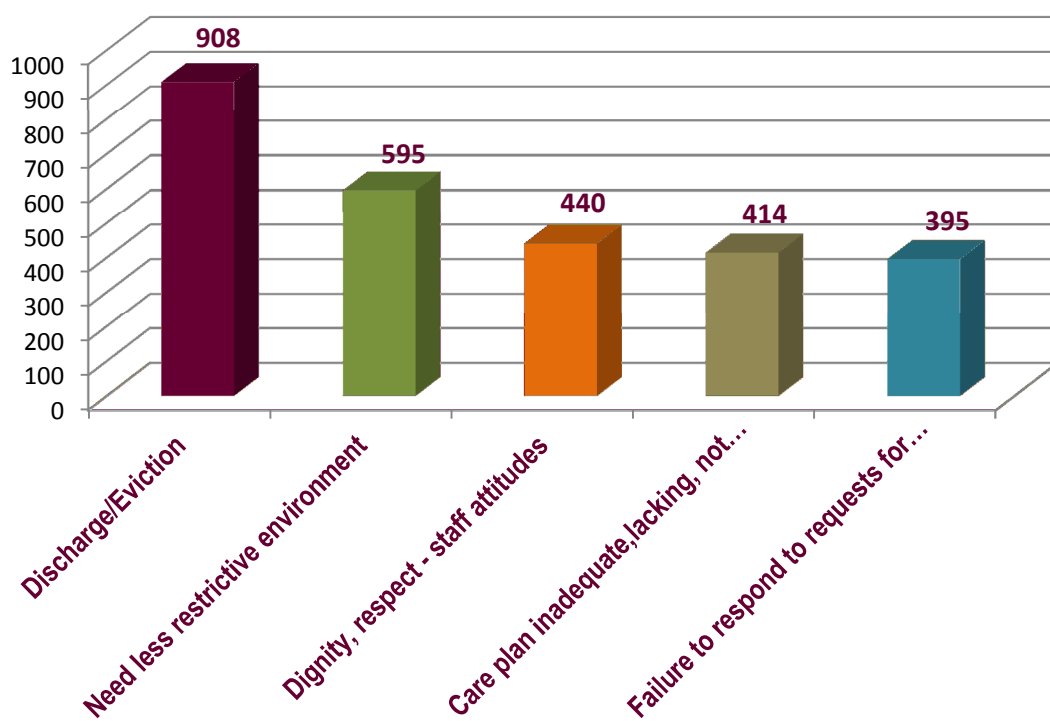
Ombudsmen **resolved or empowered consumers to resolve 79.1% of complaints.**

The Office works closely with other agencies such as regulatory and law enforcement agencies to resolve complaints. When providers don't readily work with ombudsmen to resolve complaints, the ombudsman might refer problems to other agencies. In 2012, **2% of complaints were referred to other agencies.** When ombudsmen are able to resolve complaints without regulatory intervention, we contribute to conservation of regulatory resources and reduction of the regulatory burden on providers.

Timely response leads to timely resolution. Ombudsmen respond to complaints alleging physical harm within one business day. In FFY 2012, **5.3% of complaints alleged physical harm.** For all other complaints, the **average time between intake and initiating an investigation was 3.8 days, a decrease of 0.8 days.**

Ombudsmen attempt to resolve complaints quickly and then follow-up to ensure that the resolution remains effective. The average **length of time a case was open was 67.5 days.** This excludes HOME Choice cases because of the complexity of returning to the community without an established living arrangement. The average length of time a HOME Choice transition coordination case is open is **206 days.**

### Most Frequent Complaints Received



## **Code of Ethics for Long-Term Care Ombudsmen**

### **The National Association of State Long-Term Care Ombudsman Programs**

**The ombudsman provides services with respect for human dignity and the individuality of the client, unrestricted by considerations of age, social or economic status, personal characteristics, or lifestyle choices.**

**The ombudsman respects and promotes the client's right to self-determination.**

**The ombudsman makes every reasonable effort to ascertain and act in accordance with the client's wishes.**

**The ombudsman acts to protect vulnerable individuals from abuse and neglect.**

**The ombudsman safeguards the client's right to privacy by protecting confidential information.**

**The ombudsman remains knowledgeable in areas relevant to the long-term care system, especially regulatory and legislative information, and long-term care service options.**

**The ombudsman acts in accordance with the standards and practices of the Long-Term Care Ombudsman Program, and with respect for the policies of the sponsoring organization.**

**The ombudsman will provide professional advocacy services unrestricted by his/her personal belief or opinion.**

**The ombudsman participates in efforts to promote a quality, long-term care system.**

**The ombudsman participates in efforts to maintain and promote the integrity of the Long-Term Care Ombudsman Program.**

**The ombudsman supports a strict conflict of interest standard that prohibits any financial interest in the delivery or provision of nursing home, board, and care services, or other long-term care services that are within their scope of involvement.**

**The ombudsman shall conduct himself/herself in a manner that will strengthen the statewide and national ombudsman network.**

## **State Ombudsman's Office**

**BEVERLEY L. LAUBERT**  
**State Long-Term Care Ombudsman**

**ERIN J. PETTEGREW**  
**Ombudsman Projects Coordinator**

**PATI PRESLEY**  
**Ombudsman Information Specialist**

**LATOSHA M. SLAPPY**  
**Ombudsman Education & Data Coordinator**

**HILARY A. STAI**  
**Ombudsman Quality Improvement Coordinator**

**KARLA WARREN**  
**Legal Services Developer, Ombudsman**

## Ohio's Regional Long-Term Care Ombudsman Programs

REGIONAL OMBUDSMAN PROGRAMS	COUNTIES SERVED	TELEPHONE NUMBERS
Cincinnati	Butler, Clermont, Clinton, Hamilton, Warren	800-488-6070 513-345-4160
Dayton	Champaign, Clark, Darke, Greene, Logan, Miami, Montgomery, Preble, Shelby	800-395-8267 937-223-4613
Lima	Allen, Auglaize, Hancock, Hardin, Mercer, Putnam, Van Wert	800-653-7778 419-222-0563
Toledo	Defiance, Erie, Fulton, Henry, Lucas, Ottawa, Paulding, Sandusky, Williams, Wood	800-542-1874 419-259-2891
Mansfield	Ashland, Crawford, Huron, Knox, Marion, Morrow, Richland, Seneca, Wyandot	800-860-5799 419-524-4144
Columbus	Delaware, Fairfield, Franklin, Fayette, Licking, Madison, Pickaway, Union	800-536-5891 614-857-1241
Portsmouth	Adams, Brown, Gallia, Highland, Jackson, Lawrence, Pike, Ross, Scioto, Vinton	800-582-7277 740-355-3145
Marietta	Athens, Hocking, Meigs, Monroe, Morgan, Noble, Perry, Washington	800-331-2644 740-373-6400
Dover	Belmont, Carroll, Coshocton, Guernsey, Harrison Holmes, Jefferson, Muskingum, Tuscarawas	800-967-0615 330-364-3465
Cleveland	Cuyahoga, Geauga, Lake, Lorain, Medina	800-365-3112 216-696-2719
Uniontown	Portage, Stark, Summit, Wayne	800-421-7277 330-896-9172
Niles	Ashtabula, Trumbull, Columbiana, Mahoning	800-686-7367 330-505-2300