

A SELF-EVALUATION AND CONTINUOUS QUALITY IMPROVEMENT TOOL FOR STATE LONG-TERM CARE OMBUDSMAN PROGRAMS:

Mini-Tool

There are 13 components with multiple indicators within each component in the Self-Evaluation and Continuous Quality Improvement Tool for State Long-Term Care Ombudsman Programs. This mini-tool captures three indicators from each component in order for users to quickly evaluate major aspects of their program and identify program strengths and opportunities for improvement. Each component listed below should be scored separately in order to prioritize areas for improvement. Once program strengths and opportunities for improvement are identified the user can utilize the comprehensive self-evaluation tool for in-depth analysis of those specific areas. The page numbers for each component are provided below and the comprehensive tool can be accessed here:

http://www.ltombudsman.org/sites/default/files/norc/State-PE-Tool-FINAL_0.pdf

**These tools are designed to encourage program evaluation and improvement, not to monitor program performance or individual ombudsman performance.*

Evaluation Component	Indicator	Score (enter 1-5) 1= Never 5= Always
I. Program Access	1. State licensing and certification agency staff, including the complaint handling unit and surveyors, understands the program, its scope and its role, and make appropriate referrals.	
	2. Callers receive a prompt, timely response to their call within an established time frame (this does not mean that the program must respond to calls 24 hours a day).	
	3. 100% of all long-term care facilities are visited at least quarterly (NOTE: a visit includes contact with residents, not just with the administrator or facility staff and involves listening to and observing residents).	
For the complete Program Access component refer to pg. 8 of the comprehensive tool		TOTAL 0
II. Program Management	1. There is regular, periodic evaluation of the statewide program and local Ombudsman entities.	
	2. There is strong, ongoing two-way communication - including the dissemination of written information - between the Office of the State Ombudsman and representatives of the Office.	
	3. There is a systematic process for recruiting volunteers.	
For the complete Program Management component refer to pg. 13 of the comprehensive tool		TOTAL 0
III. Complaint Handling	1. The type of complaint work conducted by the program is consistent with the role of a resident advocate and is distinct and separate from the duties of other entities such as the regulatory agency, adult protective services, or the nursing facility.	
	2. Representatives of the Office are given clear guidance and training about how to handle complex situations such as how to proceed when a resident did not or cannot provide consent and complaints involving allegations of	
	3. Accurate, objective, and complete documentation and case notes are maintained for each case.	
For the complete Complaint Handling component refer to pg. 24 of the comprehensive tool		TOTAL 0

A SELF-EVALUATION AND CONTINUOUS QUALITY IMPROVEMENT TOOL FOR STATE LONG-TERM CARE OMBUDSMAN PROGRAMS:

Mini-Tool

IV. Education/ Information and Assistance	1. The program has easy to understand, written information available to educate residents, families, and the public on a wide range of nursing home issues and advocacy topics (e.g., abuse, neglect, restraints, transfers/discharges; selecting a nursing home, what quality nursing home care looks like).	
	2. The program promotes the development and strengthening of resident and family councils in each long-term care facility.	
	3. The program seeks opportunities to educate consumer groups, advocacy groups and the public about residents' rights, long-term care and issues affecting residents.	
For the complete Education/Information & Assistance component refer to pg. 30 of the comprehensive tool		TOTAL 0
V. Training	1. Training content is appropriate for adult learners (e.g., content is immediately relevant and applicable to trainee's work).	
	2. New representatives of the Office are paired with a mentor both during and for up to a year following their certification. The mentor accompanies the new representative of the Office on at least one facility visit before the new representative visits on his or her own and is the mentor is available for ongoing consultation and guidance.	
	3. Representatives of the Office that manage local Ombudsman entities receive training in management and supervisory functions, media relations, volunteer management, public education, and program promotion if their job includes these duties.	
For the complete Training component refer to pg. 33 of the comprehensive tool		TOTAL 0
VI. Systems Advocacy	1. The program works together as a whole to address at least one systems advocacy goal that affects residents throughout the state.	
	2. The program is permitted to take a stance on behalf of residents that is contrary to the position of its host	
	3. The program educates residents, their families, citizens' groups and the public about, and involves them in its systems advocacy agenda.	
For the complete Systems Advocacy component refer to pg. 40 of the comprehensive tool		TOTAL 0
VII. Program Integrity	The Office of the State Long-Term Care Ombudsman and all representatives of the Office are housed in an entity of government or agency outside government in which they are free to:	
	1. Represent the interests of residents before governmental agencies, legislative committees, individual legislators and other individuals, groups or entities.	
	2. Communicate directly with directors of government entities, legislators, policy makers and the media about issues affecting residents..	
	3. Provide uncensored public testimony that reflects the views of the Ombudsman program.	
For the complete Program Integrity component refer to pg. 44 of the comprehensive tool		TOTAL 0

A SELF-EVALUATION AND CONTINUOUS QUALITY IMPROVEMENT TOOL FOR STATE LONG-TERM CARE OMBUDSMAN PROGRAMS:

Mini-Tool

VIII. Conflict of Interest	1. Board members of an agency that houses a local Ombudsman entity do not serve in any decision-making, policy-setting or program operation capacity relative to the Ombudsman program if they have the following conflicts of interest: current direct involvement in the licensing or certification of a long-term care facility or a provider of a long-term care service, current employment in, contractual arrangement with, or participation in the management of a long-term care facility, a current financial interest in a long-term care facility or a long-term care service or current membership in a trade association of long-term care facilities.		
	2. The attorney that provides legal counsel to the Ombudsman program does not advise or represent other agencies or interests that have an actual or potential conflict of interest with residents' interests or program duties.		
	3. The program has established policies and procedures for identifying any actual or potential conflicts of interest and determining whether these conflicts can be sufficiently remedied. A conflict can be sufficiently remedied only where the existence of the conflict does not interfere with any duties of the Ombudsman program and where the conflict is not likely to alter the perception of the program as an independent advocate for residents.		
For the complete Conflict of Interest component refer to pg. 47 of the comprehensive tool		TOTAL	0
IX. Confidentiality	1. The program only discloses the identity of a resident or a complainant under the conditions mandated by the Older Americans Act and the Ombudsman Program Rule.		
	2. All communication relating to a complaint remains confidential and is handled only by individuals working within the Ombudsman program.		
	3. Only individuals working with the Ombudsman program have access to Ombudsman program files.		
For the complete Confidentiality component refer to pg. 52 of the comprehensive tool		TOTAL	0
X. Legal Resources	1. The program has adequate legal support for its advocacy responsibilities and for program management functions, e.g. obtaining legal opinions, letters of demand/inquiry to send to facilities and/or Health Dept., training, preparing the State Ombudsman and representatives of the Office to respond to depositions or to participate in hearings when the Ombudsman or representative is not the subject of the legal action, and guidance in developing policies or in taking de-designation actions.		
	2. Legal assistance and counsel is available to the Ombudsman and representatives of the Office to assist with both individual and systems advocacy.		
	3. The program directly employs, contracts, or otherwise has a formal agreement with an attorney who has relevant experience and expertise.		
For the complete Legal Resources component refer to pg. 54 of the comprehensive tool		TOTAL	0

A SELF-EVALUATION AND CONTINUOUS QUALITY IMPROVEMENT TOOL FOR STATE LONG-TERM CARE OMBUDSMAN PROGRAMS:

Mini-Tool

XI. Fiscal Resources	1. The state annually expends on its statewide ombudsman program an amount which is no less than it expended in Title III and Title VII, Chapter 2 (Ombudsman) funds in FY 2000 (or for the year specified in the most recent reauthorization of the Act).	
	2. The program at both the state and local levels continually seeks additional funding from a variety of diverse sources (e.g. civil monetary penalties, Medicaid, foundations, donations, the legislature, etc.).	
	3. Representatives of the Office housed within a designated local Ombudsman entity have control over or input into the program's budget at the local level and make decisions about the use of the program's fiscal resources.	
For the complete Fiscal Resources component refer to pg. 57 of the comprehensive tool		TOTAL
		0
XII. Relationships with Agencies/Entities/Individuals/Citizen Groups/Others	1. The Ombudsman program conducts joint trainings with, provides training to, and receives training from the state licensing and certification agency and any other agency or entity which also investigates complaints in long-term care facilities.	
	2. The program and the agencies/organizations with which it interacts have a clear understanding of each other's roles, responsibilities, capabilities and limitations.	
	3. The program builds alliances with citizens' groups and works with them in the following ways: shares information, provides knowledge and expertise, analyzing policy issues, disseminates information regarding the citizens' group to residents, families and the public and jointly advocates.	
For the complete Relationships with Agencies/Entities/Individuals/Citizen Groups/Others component refer to pg. 60 of the comprehensive tool		TOTAL
		0
XIII. Accountability	1. The statewide and local programs have an advisory board whose role is to provide advice regarding the planning and operation of the program (NOTE: the advisory board does not make decisions for or otherwise serve as a governing body of the program).	
	2. The statewide and local programs have an advisory board whose role is to assist in the planning and implementing of the program's advocacy agenda.	
	3. The advisory board is made up of a majority of long-term care consumers/advocates.	
For the complete Accountability component refer to pg. 63 of the comprehensive tool		TOTAL
		0