

EXAMPLES OF INDIVIDUAL AND SYSTEMIC ADVOCACY

Individuals with disabilities receiving or in need of long-term services and supports have available nationally at least two advocacy organizations – the Long-Term Care Ombudsman program and Protection and Advocacy (P&A). Individuals residing in long-term care facilities may encounter challenges and opportunities with which they need an advocate. Ideally, Ombudsman programs and P&A programs can work together in the best interests of long-term care consumers.

Individual and Systemic Advocacy Examples

Maine

The Maine Long-Term Care Ombudsman program and the Maine Disability Rights Network work together to resolve the concerns of home and community-based services recipients and long-term care residents.¹ The Maine Ombudsman program provides services to both residents of long-term care facilities and recipients of home and community-based services. The following examples of Ombudsman program and P&A collaboration for advocacy on behalf of individual consumers were provided by Brenda Gallant, Maine State Ombudsman.

A consumer “aging out” of children’s services due to his upcoming 21st birthday was no longer eligible to receive the twelve hours per night of nursing services he needed. He was not medically eligible for an adult Medicaid home care program that allowed for the same amount of nursing hours and he needed these hours in order to remain in his home. The Ombudsman program advocated for him to maintain twelve hours per night of nursing care and the Office of Aging and Disability Services gave him an exception to the medical eligibility so he could access that care. Additionally, he had been approved for Medicaid HCBS Intellectual Disability (ID) Waiver and was on a wait list for community support services with a specific agency. He received a termination notice for the HCBS ID waiver services because he had not accessed the HCBS ID waiver services within six months of accepting the waiver. The Ombudsman program referred his case to the P&A for assistance and the P&A appealed the decision of the HCBS ID waiver program. A community support program had availability and the consumer was able to remain on the ID waiver program. Due to this advocacy, he was able to remain in his home and continue receiving the much needed services.

A consumer needed the carpet removed from his rental home because it was hindering his mobility with his wheelchair. The Ombudsman program needed the legal assistance of the P&A to help with the landlord/tenant issue. They were successful in getting the carpet removed and new flooring installed.

A resident living in a skilled nursing facility (SNF) was working with Homeward Bound (Money Follows the Person program) to transition back into the community. While working on the transition planning, the resident was denied SNF care during a Level of Care (LoC) review. Although a P&A would usually not work to keep someone in a nursing facility, the Ombudsman program asked the P&A to assist the resident by

¹ For additional information about the Maine Long-Term Care Ombudsman Program and Disability Rights Main visit <https://www.maineombudsman.org/> and <http://drme.org/>.

appealing the LoC denial so she could remain in the nursing facility and continue with the MFP transition planning. The effort was successful and the woman made a smooth transition out of the facility back home with the help of the Homeward Bound program.

The two Maine programs have worked together for years on matters such as legislative bills, administrative rule changes, legislative mandated committees relevant to long-term care consumers, and a supportive decision-making work group. To further solidify their partnership they met recently to discuss developing a written agreement.

Kentucky

The KY State Ombudsman, Sherry Culp, states that she and the Director of the Kentucky Protection and Advocacy program meet quarterly and the local staff of both programs meet regularly.² The following example of the programs working together has helped all staff involved from both programs better address the needs of individuals with a primary diagnoses of mental illness, residing in low-income personal care homes (PCHs).

The Kentucky Long-Term Care Ombudsman Program and Kentucky Protection and Advocacy program worked together on a lawsuit settlement that assists residents of certain types of personal care homes (PCHs) in leaving the PCH and transitioning into affordable housing along with appropriate services and supports.

The KY P&A represented residents living in PCHs, utilizing State Supplementation funds for the residents' care, in suing the state for more appropriate housing and services. The KY LTCOP advocates for the residents by ensuring that the residents are part of their transition planning and receive all the services and supports afforded to them via the lawsuit. The Ombudsman program also makes sure that the resident was fully informed and understands choices regarding their housing, case management, supported employment, crisis services, and Peer Support Services. Over a period of three years, approximately nineteen million dollars will be used to provide housing and services for up to six hundred people. Working together on the settlement has helped staff together better address the needs of people with a primary diagnoses of mental illness, residing in low-income PCHs.

Note: This resource is part of series of materials regarding Ombudsman program and P&A collaboration, visit the NORC [website](#) for additional information on this topic.

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² For additional information regarding the Kentucky Long-Term Care Ombudsman Program and Kentucky Protection and Advocacy visit <http://chfs.ky.gov/dail/kltcop.htm> and <http://www.kypa.net/>.