

PENNYRILE LONG-TERM CARE OMBUDSMAN PROGRAM

1. GENERAL RESPONSIBILITIES

The Long Term Care Ombudsman Program, herein referred to as LTCOP is responsible for investigating and resolving complaints by or on behalf of older individuals who are residents of long term care facilities and shall pursue administrative, legal and other appropriate resolutions on behalf of residents of long-term care facilities.

- (1) All services shall be provided in accordance with the approved Area Plan.
- (2) Services shall be provided in a manner consistent with provisions of Title III of the Older Americans Act and regulations promulgated there under.
- (3) Volunteers and paid staff with the same responsibilities shall meet comparable requirements for training and skills.
- (4) Services shall be provided under the supervision of qualified personnel.
- (5) Services shall be accessible to older persons by telephone, correspondence, or person-to-person contact.
- (6) The delivery of services shall be performed only by staff and volunteers trained and certified to deliver those services. New staff shall receive an orientation and shall be trained prior to assuming responsibilities.
- (7) No staff person or volunteers for the LTCOP shall accept personal gratuities (gifts or money) from participants or vendors.
- (8) No staff person or volunteers for the LTCOP shall, without prior approval of the supervisor, pay bills or cash checks for clients or participants.
- (9) There shall be designated staff that is trained and skilled in assessing and dealing with the needs of the elderly and in the delivery of each service.
- (10) There shall be a staff person, qualified by training or experience, responsible for administering each service and supervising assigned staff.
- (11) An accurate record of services provided will be maintained in the OmbudsManager data system.

2. SPECIFIC RESPONSIBILITIES OF THE DISTRICT OMBUDSMAN

The District Ombudsman Program shall be responsible for the following specific responsibilities:

- (1) Represent all long term care residents within the area development district.
- (2) Assure resident's rights are upheld and promote quality care in long term care facilities.
- (3) Promote citizen involvement in order to assure regular visitations especially for those residents without available family or friends.
- (4) Recruit volunteers for the LTCOP.
- (5) Investigate and work to resolve complaints on behalf of long term care residents.
- (6) Prepare and submit reports for the State Long Term Care Ombudsman in a format and time frame provided by the State.

- (7) Advise the public about the availability of current State, Local and Federal inspection reports, statements of deficiency and plans for correction for individual long term care facilities in the service area.
- (8) Publicize the existence and function of the local and State LTC Ombudsman Program.
- (9) Organize and implement and active volunteer program.
- (10) Assist in the development of resident or family council.
- (11) Sponsor community education and training programs to long term care facilities, human service workers, families and the long term care about long term care and residents' rights issues.
- (12) Attend required training and provide in-service training for staff and volunteers of local programs.
- (13) Maintain records in accordance with Federal and State laws and regulations, including procedures to protect the identity, confidentiality and privacy of clients.
- (14) The ombudsman shall not be subject in any conflict of interest issue in the performance of such representative's official duties.

3. COMPLAINT INVESTIGATION

The LTC Ombudsman Program shall investigate and resolve complaints made by or on behalf of older individuals who are residents of LTC facilities relating to administrative action which adversely affect the health, safety, welfare and rights of residents. This may include contact with the adult/complainant, staff of the long term care facility and other collateral contacts.

The LTC Ombudsman shall respond to complaints by non- elderly long term care facility residents or by those acting directly in their behalf where such action will either:

- a. Benefit older residents of that long term care facility or older residents of long term care facilities in general, or be the only viable avenue of assistance available to the complainant, and
- b. Will not significantly diminish the LTC Ombudsman Program's efforts on behalf of older persons.

4. CONFIDENTIALITY

All investigatory files, complaints, responses to complaints and all other information related to any complaint or investigation maintained by the Ombudsman Program shall be considered confidential information in accordance with Section 307 of the Older Americans Act.

No person who gains access to residents' records shall discuss or disclose information in the records or disclosure a resident's identity outside of the Ombudsman Program without written consent of such resident or complainant, or upon a court order.

Information or records maintained by the Ombudsman Program shall be disclosed only at the discretion of the Ombudsman having authority over the disposition of such files except that the identity or identifying information of any complainant or resident shall not be disclosed by such ombudsman unless:

- (1) The complainant or resident, or a legal representative of either, consents in writing to the disclosure; or
- (2) A court orders the disclosure; and
- (3) Permission is obtained by the State Long Term Care Ombudsman to release such records.

The following procedure shall be followed to maintain confidentiality:

- (1) All complaint files maintained by the programs are to be secured in locked file cabinets.
- (2) Complaint files maintained on a computerized system are to have secured access codes and computer software containing complaint file information shall be stored in a locked file.
- (3) All client-identifying information retained by or developed by the Ombudsman pertaining to complaints is to be considered confidential and is not to be discussed nor the identity of the resident disclosed, unless permission is granted by resident or legal guardian by signed consent or verbal consent that is documented. The information shall be used with collaborating agencies in pursuit of a resolution.
- (4) The confidentiality and disclosure procedures do not preclude the Ombudsman's use of otherwise confidential information in the files for preparation and disclosure of statistical, case study, and other data, provided the Ombudsman does not disclose the identity of persons otherwise protected in this section.
- (5) Each resident or his guardian shall approve or refuse the release of medical and/or personal records to any individuals outside the facility, except as otherwise specified by statute or regulation.

5. CONDUCT OF INVESTIGATION

The ombudsman, upon entering the facility, shall promptly advise the Administrator or his designated representative of their presence. The ombudsman shall not enter the living area of any resident without identifying self to the resident, knocking on their door and waiting for a response to enter. If no response knock again, wait for response then gently look in to see if resident is available.

The following procedures are to be followed when interviewing a complainant:

- (1) Establish personal contact with the resident/complainant. This should include face-to-face contact with the complainant;
- (2) The interview is to be conducted in private, if possible;
- (3) Identify yourself and state the purpose of the interview;
- (4) Identify relevant issue areas raised by the complaint and explain your responsibility to investigate;
- (5) Allow the resident to give a complete account of the situation;
- (6) Determine relationship of any attitude toward the staff of the long term care facility;
- (7) Determine whether this one time incident is part of a pattern of repeated incidents;
- (8) Determine what the resident wishes to do about the situation and offer alternatives as appropriate;
- (9) Determine if there are other services needed not stated in the complaint;

- (10) When appropriate, share your findings and observations with the resident, complainant and state your intentions or recommendations.

The following procedures are to be followed when interviewing staff of long term care facilities:

- (1) Conduct the interview in private, if possible;
- (2) Identify yourself and state the purpose of the interview;
- (3) Share the nature of the allegations and explain your responsibility to investigate;
- (4) Allow the staff to respond to the allegation;
- (5) When appropriate, share findings and observations and state your intentions or recommendations;
- (6) If appropriate, the interview should be centered on what can be done to remedy the situation that led to the complaint.

The following procedures are to be considered when determining the results of the investigation:

- (1) Review resident's account of the situation;
- (2) Review the account of the situation provided by the administrator, operator and/or other employees of the long term care facility;
- (3) Review the information supplied by collateral contacts;
- (4) Review records and documents;
- (5) Evaluate the consistency of all accounts and documents;
- (6) Consider the mental status of all persons interviewed;
- (7) Consider the credibility of persons interviewed and the documents examined;
- (8) Consider possible motives for fabrication;
- (9) Review previous reports involving the resident and/or the long term care facility.
- (10) Classify the complaint as follows:
 - 0 Information only; no complaint/investigation
 - 1 Regulatory or legislative action required
 - 2 Not resolved to satisfaction of resident or complainant
 - 3 Complaint withdrawn by resident or complainant
 - 4 Referred; received no final report
 - 5 Referred; other agency failed to act
 - 6 Not action needed/appropriate
 - 7 Partially resolved, but some problem remains
 - 8 Resolved to satisfaction of resident or complainant
 - 9 Other

6. COMPLAINT RESOLUTION

When a complaint is substantiated, or when there is some identification that the complaint is substantiated, resolution shall involve taking beneficial action on behalf of the complainant/resident. The investigating Ombudsman shall take immediate steps to resolve the complaint. The method used in resolving a specific complaint must be determined by the severity, character and extent of the problem.

All reasonable avenues of assistance to the complainant/resident, directly or by referral, shall be addressed, and if such efforts are unsuccessful, the Ombudsman shall so advise the complainant(s) and provide the individual(s) with information explaining how to proceed independently.

Procedure to follow in complaint resolution may include, but are not limited to the following:

- (1) Persuading or negotiating at nursing home administrative level to change particular nursing home behavior, pattern or practice affecting a resident(s);
- (2) Consulting with a resident, relative, or nursing home staff person to resolve a problem;
- (3) Effecting positive enforcement action by a regulatory agency;
- (4) Proposing regulatory or statutory changes or additions;
- (5) Communicating with community groups and professional organizations; and
- (6) Encouraging the utilization of legal services assistance by the complainant/resident(s).

7. MONITORING COMPLAINT RESOLUTIONS

The resolution process shall include follow up and ongoing monitoring, as appropriate, of the situation after a reasonable period of time through contact with the complainant or resident, or otherwise where appropriate, for the purpose of determining that the causes giving rise to the complaint have not been repeated and have not recurred. Such follow-up shall be documented in the complaint file.

8. POLICIES AND PROCEDURES FOR VOLUNTEERS

The purpose of the Volunteer Program is to work cooperatively with the nursing home of the Pennyryle Area to improve quality of life for residents by placing volunteers in the facilities for one-on-one visitation to residents. It is our belief that the volunteers who regularly visit the residents as an advocate will be of great assistance to the facility in ensuring quality care.

- (1) Each volunteer will complete an application, background check, Board of Nursing check, Signed Conflict of Interest form, Signed Confidentiality Agreement and Signed Unannounced Survey Confidentiality Agreement form and attend an initial training session prior to nursing home placement.
- (2) Certified Volunteers will also pass a Certification test and attend 20 additional hours of training.
- (3) The volunteer agrees to a commitment of ordinarily spending a minimum of one to four hours weekly in one-on-one visitation with residents and will follow the job description.
- (4) The District Ombudsman will arrange for the volunteer's placement in the respective facilities.
- (5) Volunteers will attend an orientation, conducted by the District Ombudsman, at the facility where they were placed.
- (6) Volunteers will "sign-in" when entering the facility at a place in the home designated for visitors and/or volunteers, as applicable.
- (7) The volunteer may be flexible each week in choosing the day and hour when they will visit the facility, but will not visit after 8:00 p.m. Early morning visiting is not usually a convenient time for the resident or the facility.

- (8) If during visitation the volunteer identifies any concern or problem of the resident she/he will refer these immediately to the designated person.
- (9) The volunteers will not perform services for the resident such as feeding, assisting in and out of bed, etc. and will observe the safety regulations of the facility. If the resident requests any service or voices a need, the volunteer will refer these to the charge nurse or other appropriate staff for action.
- (10) The volunteer will always knock before entering a resident's room.
- (11) The volunteer will carefully follow any posted restrictions for the resident and when in doubt, first confer with the charge nurse.
- (12) Time records of hours spent in the facilities and/or attending training/in-service programs is to be completed each month and sent to the Ombudsman's office.
- (13) It is recommended that no food be taken to residents. However, for special occasions, food may be taken only with prior permission from the staff.

9. FREQUENCY OF FACILITY VISITS

There are 32 facilities in the Pennyrile Area. All facilities are visited once each calendar quarter. At least one hour of visiting time is spent in each facility at the time of the quarterly visit.

The number of family care homes may vary from time to time. Family care homes are also visited quarterly.