Larry Hogan Governor

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Rona E. Kramer Secretary

DEPARTMENT OF AGING

Long-Term Care Ombudsman Program **FACT SHEET April 2017**

Authority: Annotated Code of Maryland, Title 10 – Human Services – Sections 212-214 Older Americans Act, including the requirements of 42 U.S.C. § 3058G

Protecting the rights and promoting the well-being of residents of long-term care facilities

The Long-Term Care Ombudsman Program serves 48,000+ people in 230 Nursing Homes and 1461 Assisted Living Facilities through:

- The Office of the State Long-Term Care Ombudsman at the Maryland Department of Aging with a State Ombudsman and Ombudsman Specialist
- 19 Local Offices (34 FTEs) located in Area Agencies on Aging ٠
- 155 volunteers (103 designated) donating over 13,000 hours (designated) ٠

In FY16, the Long-Term Care Ombudsman Program provided:

- 3504 Quarterly Facility visits
- 9004 Consultations to individuals
- 335 Community Ed. Sessions
- 624 Meetings with resident councils

Sources of complaints:

- Residents 43%
- Relative/Friend 34%

- 3671 Complaints addressed
- 3781 Consultations to facilities
- 100 Meetings with family councils
- 204 Participation in facility surveys
- Anonymous 11%
- Facility/Staff 4% •
- Other Non relative guardian, bankers, ciergy, public officials, other agencies

Most frequent complaints handled in Nursing Homes:

- 1. Discharge/eviction planning, notice, procedures, abandonment
- 2. Failure to respond to requests for assistance call bells, etc.
- 3. Medications administration, organization
- 4. Dignity, respect staff attitudes
- 5. Care plan/resident assessment inadequate, failure to follow plan or physician's orders
- 6. Personal Hygiene includes nail care and oral hygiene, dressing and grooming
- 7. Exercise preference/choice and/or civil/religious rights, individual's right to smoke
- 8. Food service quantity, quality, variation, choice, condiments, utensils, menu
- 9. Accidents or injury of unknown origin, falls, improper handling
- 10. Symptoms unattended, including pain, pain not managed, no notice to others of change in condition

Most frequent complaints handled in Assisted Living Facilities:

- 1. Discharge/ Eviction- planning, notice, procedures, abandonment
- 2. Medications- administration, organization
- 3. Dignity, respect staff attitudes
- 4. Exercise preference/choice and/or civil/religious rights, individual's right to smoke
- 5. Equipment/building disrepair, hazard, poor lighting, fire safety, not secure
- 6. Furnishing, storage for residents
- 7. Care Plan/resident assessment inadequate, failure to follow plan or physician's orders
- Privacy telephone, visitors, couples, mail Personal funds – mismanaged, access/information denied, deposits and other money not returned

Air/environment: temperature and quality

Abuse, physical (including corporal punishment)
Billing/charges – notice, approval, questionable, accounting wrong or denied

Program Information:

The Long-Term Care Ombudsman Program is guided by federal and state laws and regulations that create a program of individual and systemic advocacy for those who live in nursing homes and assisted living facilities.

The Long-Term Care Ombudsman Program works throughout the state and country to protect the rights and promote the well being of residents who are oftentimes medically fragile, vulnerable and isolated (40% have no regular visits by family or friends).

Volunteers are well trained and well equipped to serve as ombudsmen. To be designated, they must complete a minimum of 20 hours orientation, be mentored by an experienced ombudsman to conduct facility visits, and receive additional training to resolve complaints.

Ombudsman representatives throughout the state respond to grievances with the goal to resolve them at the lowest possible level based on the wishes/needs of the resident. They are guided by the resident/resident representative in their actions. Ombudsmen seek to empower residents, their family members and resident representatives to better understand the long-term care system and address their needs using a variety of strategies. Ombudsmen may act with or on behalf of residents.

Confidentiality is central to ombudsman work. No names or identifying information are released without permission.

Ombudsmen are proactive, working to prevent neglect/abuse and promote residents' rights. They provide staff training, educational forums, work with resident and family councils, and are involved in local, county and statewide discussions that address policies related to long term care.

State Ombudsman Goals:

- 1) Provide the resources needed to ensure that the Maryland Long-Term Care Ombudsman Program is operated consistently with Older American's Act provisions and operating consistently within and between the local ombudsman programs.
- 2) Advocate with and on behalf of Maryland residents who live in long-term care facilities.
- Promote quality of care <u>and</u> quality of life for residents including those with dementia through training, consultations, highlighting successful practices, and public policies that support person-centered care.

This Fact Sheet summarizes the FY16 (October 1, 2015 – September 30, 2016) data submitted to the Administration for Community Living. For more information contact Stevanne Ellis, State Long-Term Care Ombudsman, stevanne.ellis@maryland.gov, 1-800-243-3425 (toll free in Maryland) or 410-767-1100.