



***A Long-Term Care Ombudsman:***

***Advocates*** for increased consumer protections in state and federal laws and regulations.

***Educates*** residents about their rights.

***Empowers*** and supports resident and families to discuss concerns with facility staff.

***Identifies*** and seeks to remedy gaps in facility, government or community services.

***Protects*** the health, safety, welfare and rights of residents of nursing homes and other adult care homes.

***Provides*** information and assistance about Long-Term care services and supports

***Receives*** and investigates complaints, and helps residents resolve problems.

***Represents*** residents interest before governmental agencies.

***Respects*** the privacy and confidentiality of residents and complainants.

December 2014


Dear Friends of Kansas Long-Term Care Residents:

The Office of the State Long-Term Care Ombudsman is pleased to provide our 2014 Annual Report. This report provides a snapshot of the Kansas Long-Term Care Ombudsman program. It contains not only the statistics gathered by the Ombudsman, but it also contains information about the program and its purpose. The Kansas Long-Term Care Ombudsman is part of a national program, funded by state and federal funds, which works toward ensuring that Long-Term care residents are afforded their rights and that their quality of life is the best it can be.

The Office of the State Long-Term Care Ombudsman Program performs a vital resident advocacy and empowerment role. This past year has seen an increase in our presence in Long-Term care facilities. This is demonstrated through facility visits, participation in resident and family council meetings, and training for facility staff. We have made efforts to increase our visibility in the community by increasing the number of community education programs and were successful in increasing the number of volunteers working with our program. Our staff and certified ombudsman volunteers have answered thousands of questions, provided consultations to hundreds of people and made a difference in the lives of countless residents.

We hope this report will be informative and helpful to you as we work together to improve the quality of life for our fellow Kansans who need long term care. I look forward to our future service and your support.

Respectfully submitted,



Barbara J. Hickert

State Long-Term Care Ombudsman

## Overview of Accomplishments

- Received and worked to resolve 2174 complaints on behalf of Long-Term care facility residents
- Made 4,708 facility visits to Long-Term care facilities
- Assisted all residents of a nursing facility through relocation after their home was evacuated due to flooding
- Recruited and trained 42 new volunteer ombudsman, resulting in a 12% increase in the total number of volunteers
- Volunteers contributed 6,733 hours of service to our program
- Attended 214 resident and family council meetings
- Provided 26 in-service training sessions to 762 facility staff members
- Provided input to KDADS surveyors prior to or during 47 surveys
- Provided information and assistance to 556 individuals, and to 432 Long-Term care facility staff members
- Resolved or partially resolved 86% percent of complaints received
- Provided education on Long-Term care issues to 82 community, civic and church organizations across the state
- Conducted satisfaction survey with Certified Ombudsmen Volunteers





# Purpose & Organization

## Mission & Overview

The Mission of the Long-Term Care Ombudsman Program is to advocate for the well-being, safety and rights of residents of Kansas Long-Term care facilities, by assisting them in attaining the highest possible quality of life

The mission of the office of the Long-Term Care Ombudsman is to enhance the quality of life and the quality of services for the long-care consumers living in Kansas's adult care homes through advocacy, education and empowerment. The office promotes person-directed living which respects individual values and preserves individual rights.

Ombudsmen investigate complaints, work to resolve individual concerns and identify problems and then advocate for changes to address those problems. Ombudsmen promote advocacy and the development of problem solving skills through education and training for consumers, their families and caregivers, providers and the community.

There is no fee or charge for ombudsman services.

## Program History

The Long-Term Care Ombudsman Program is authorized by the federal Older American's Act and the Kansas Long-Term Care Ombudsman statutes 75-7301 through 75-7314.

Long-Term Care Ombudsman programs were created in the mid-1970's to advocate for the rights and needs of Long Term Care Residents. The program operates in all fifty states and two U.S. territories as required by the Older Americans Act. Every state has a Long-Term Care Ombudsman Office which guides efforts to improve the lives of residents in Long-Term Care Facilities.

The Kansas Long-Term Care Ombudsman Program was implemented in 1975 upon receiving federal grant funding from the Administration on Aging. The program was located within the Division of Aging.

The Certified Ombudsman Volunteer program was created in August of 1996. The volunteer program started as a pilot program in Shawnee and Johnson Counties.

Legislation in 1998 moved the Ombudsman program out of the Department of Aging and made it an independent agency attached to the Department of Administration.

### ***What is an Ombudsman?***

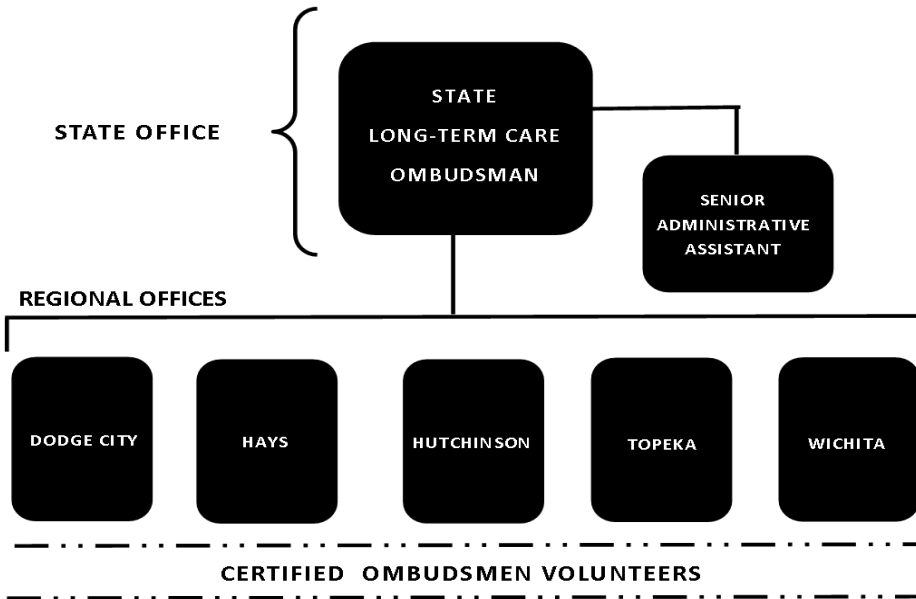
***The word "ombudsman" is Swedish and means "one who speaks on behalf of another". The Ombudsman is an advocate for residents of Long-Term care facilities***

# Structure

The Office of the State Long-Term Care Ombudsman operates as a separate agency within Kansas Department of Administration. The State Ombudsman is appointed by the governor and confirmed by the Senate. The program is supported by a Senior Administrative Assistant. Additionally, there are 8 Regional Long-Term Care Ombudsman in offices across the state: Wichita, South Hutchinson, Topeka, Hays, and Dodge City.

From these locations, the regional ombudsman investigate, handle complaints and visit all Long-Term care facilities in Kansas. In addition, the staff also provides support and guidance to certified ombudsman volunteers, consult with facility staff, and conduct in-service training. One of the programs most valued resource is the 140 Certified Ombudsman who volunteer throughout the state. During this reporting period, volunteers provided 6,733 hours of services to our program.

## PROGRAM STRUCTURE



## Certified Ombudsman Volunteers

The Certified Ombudsmen who volunteer for our agency are truly the heart of our program. One hundred and forty volunteers actively served in the Long-Term Care Ombudsman program and contributed 6,733 hours in FY14. Regional staff ombudsman recruited, trained and supervises volunteers, while state office staff approved training and issued certifications for each ombudsman. A total of 42 new volunteer ombudsman completed their training and were certified during this time period.

Each Certified Ombudsman is assigned to one facility near his or her home. We ask these volunteers visit the facility once a week to meet with residents. Every ombudsman encourages self-advocacy and interaction among residents, staff and community. The Certified Ombudsman works to ensures that the legal rights of the residents are being honored and receives, investigates and resolves concern made by or on behalf of residents.

We provide new volunteers with 30 hours of classroom and on-site training regarding elder rights, the regulatory process, plans of care, advocacy, the aging process, communication, problem solving and facility staff structure. Once a volunteer has successfully completed training, the newly certified Ombudsman volunteer and the regional staff match the Certified Ombudsman with a facility. Following placement, regional staff provide ongoing support and training.

# Complaint Summary

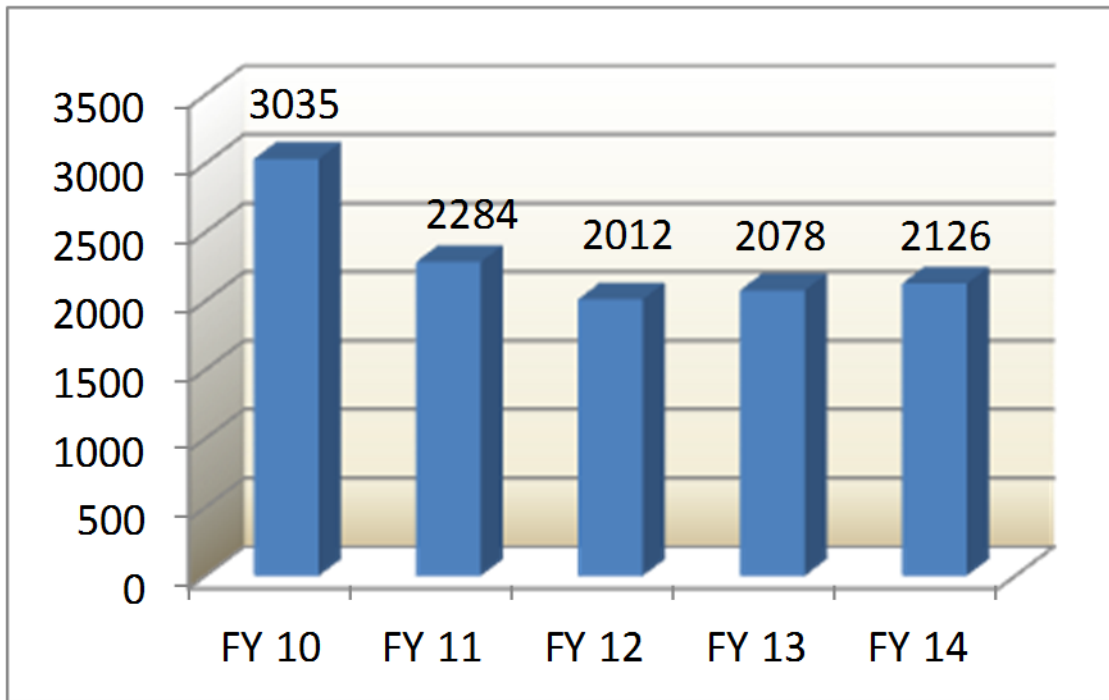
## 2,126 Complaints Handled in FY14

Complaint: a concern brought to, or initiated by, the ombudsman for investigation and action by or on behalf of one or more residents of a Long-Term care facility relating to the health, safety, welfare or rights of a resident

A principal function of the ombudsman program is to investigate and work to resolve complaints made by or on behalf of residents of Long-Term care facilities. In handling complaints, Ombudsmen respect resident and complainant confidentially, encourage resident empowerment, and focus complaint resolutions on the resident's wishes.

Ombudsmen completed a total of 2126 complaint investigation in FY14. Often, a single complaint may affect more than one resident; in fact, a group or even the entire population of a Long-Term care facility may be affected. For example, a complaint regarding the quality of food served at a facility may affect the entire resident population.

**Total Complaints for FY10 through FY14**

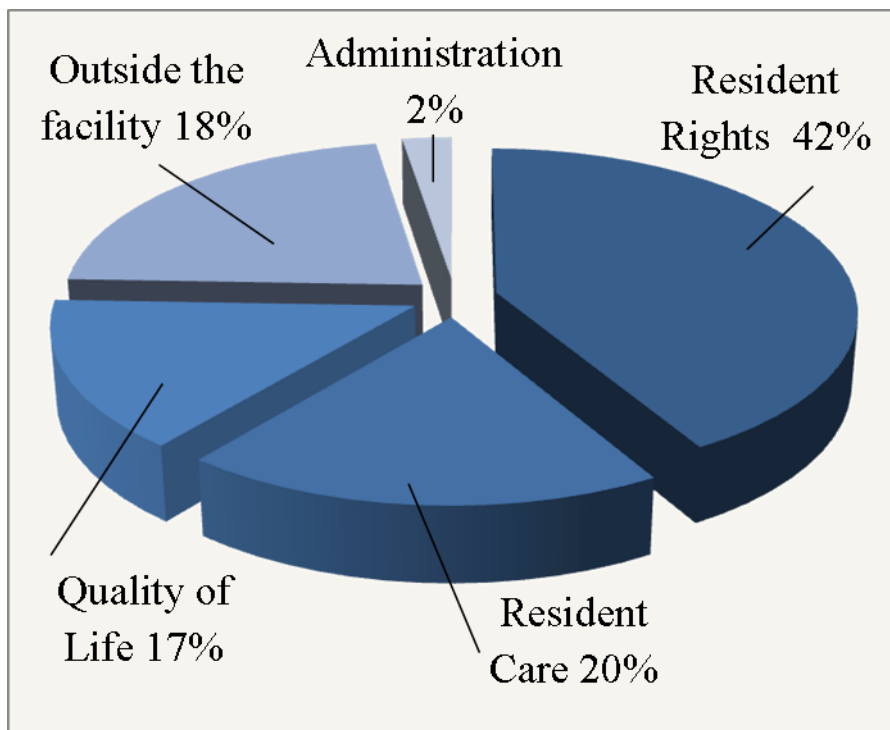




## Complaint Categories

Ombudsmen investigate a wide variety of complaints each year. Specific complaints range from privacy, dignity and care issues to improper medication administration and discharge planning procedures.

Complaints are grouped into five categories: Resident Rights, Resident Care, Quality of Life, Administration and Problems outside of Facility. The graph to the right shows these five categories and the percent of each to the total number of complaint handled in FY14. The largest number of complaints handled during this report year concerned resident rights (42%) and the smallest number were complaints about administration (2%). The following pages have more detailed information on each of these five categories.



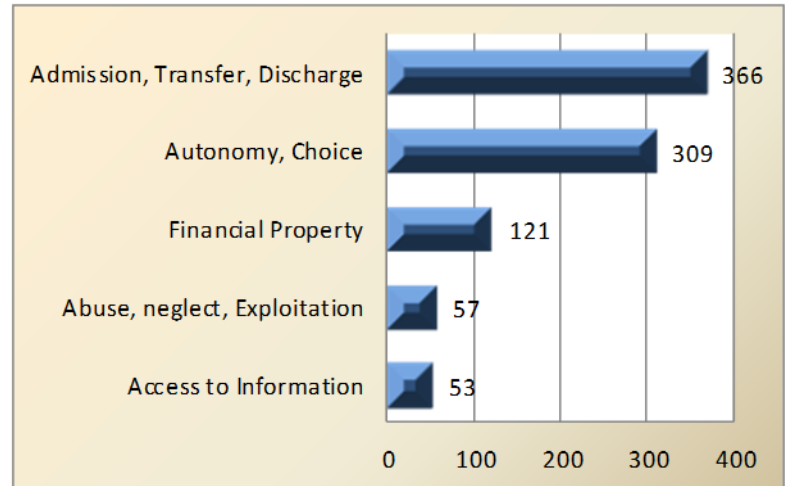
The chart below list the top ten complaints handled by ombudsmen in FY14 across all categories.

## Most Frequent Complaints in FY14

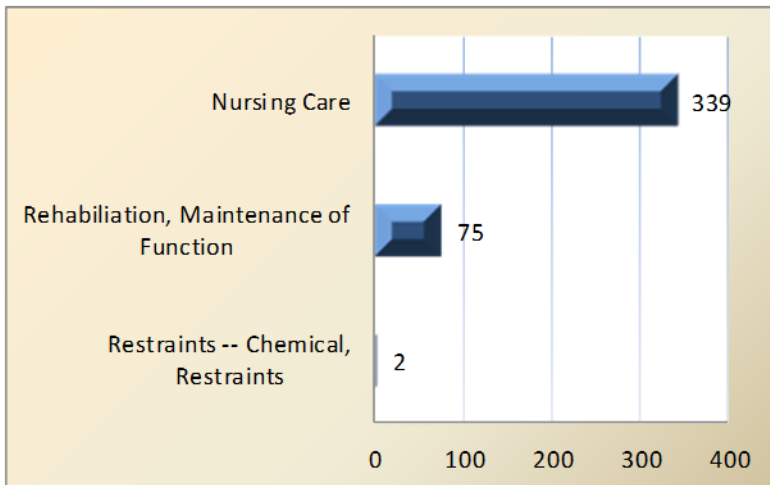
Complaint	Number	Percentage
Involuntary Discharge	324	15%
Family Conflict; interference	103	5%
Dignity, Respect — Staff Attitudes	102	5%
Legal — Guardianship, conservatorship, Power of Attorney	87	4%
Exercise preference/choice	81	4%
Medications—Administration, organization	71	3%
Decertification/Closure	70	3%
Food Service—quality, quantity choice, temperature	58	3%
Resident Conflict, including roommates	57	3%
Failure to Respond to Requests for Assistance	53	2%

## Resident Rights - 901 Complaints

In 2014, 36 percent of the complaints about resident rights related to involuntary discharge, eviction or room transfers. An additional 34 percent of complaints related to autonomy which includes issues of dignity, respect, choice and privacy. Complaints about refusal to admit or readmit after transfer to a hospital continued to be made as residents with complex care needs encountered difficulty finding nursing homes or alternative residential facilities willing to meet their care needs.



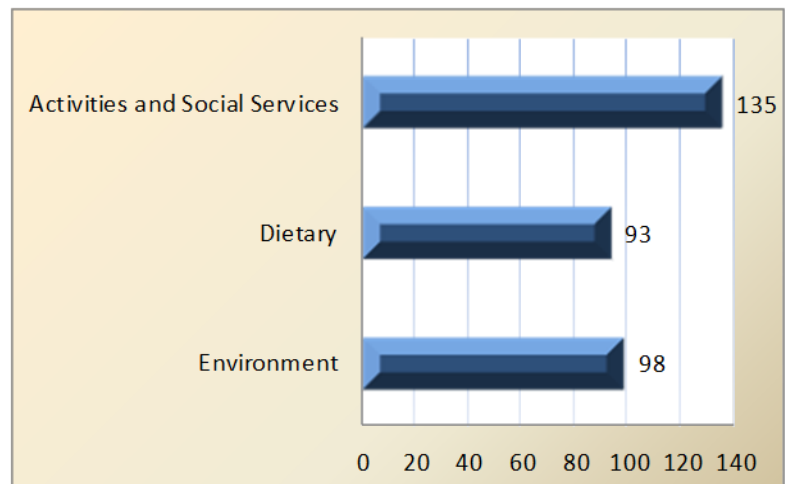
## Resident Care - 416 Complaints



This category relates to the direct, hands-on care provided to residents. A review of the data shows that quality of care remains a large concern for consumers with medication administration presenting the most concern. However, issues which relate to a shortage of staff, such as the failure to answer call lights or respond to requests for assistance and inattention to personal and oral hygiene were also frequently cited.

## Quality of Life - 321 Complaints

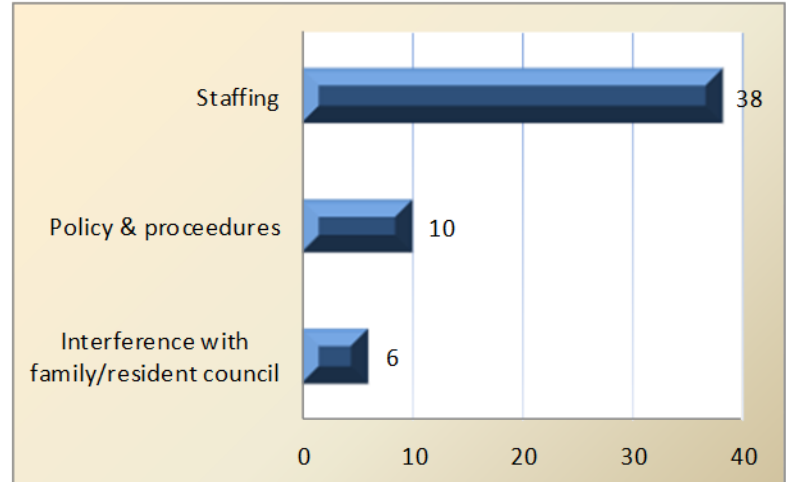
Consumer complaints about environment, food and meaningful activity represent ongoing challenges to the quality of life in residential settings. In 2014, 18 percent of the complaints about quality of life related to resident conflict which includes conflict between roommates. An additional 16 percent of complaints related to the choice and appropriateness of activities offered, a concern that has been increasing significantly over the past three years.



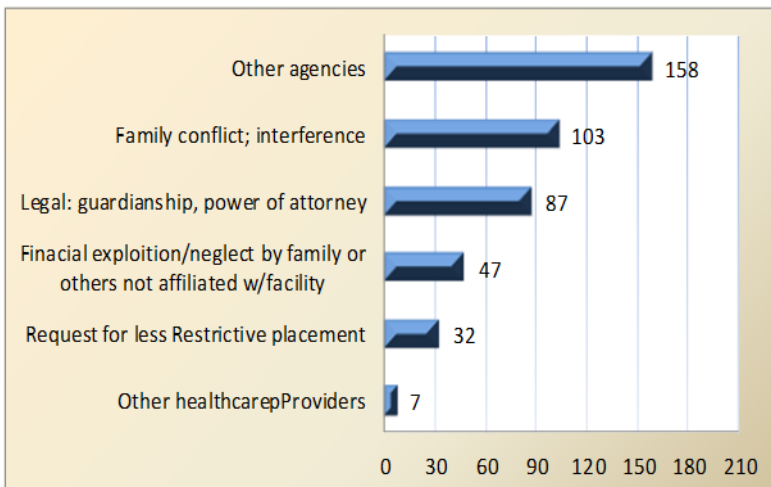


## Administrative—54 Complaints

Ombudsmen received 54 complaints about administrative concerns, the largest number of these were related to staffing problem. Having a sufficient numbers of staff, and who know the residents and their care is one of the most important keys to providing quality care. Consistent staff assignments rather than rotating assessments is shown to improve the quality of care and life for residents. Consistent assignment occurs when residents are consistently cared for by the same caregivers, particularly CNAs and nurses.



## Outside of the Facility - 434 Complaints

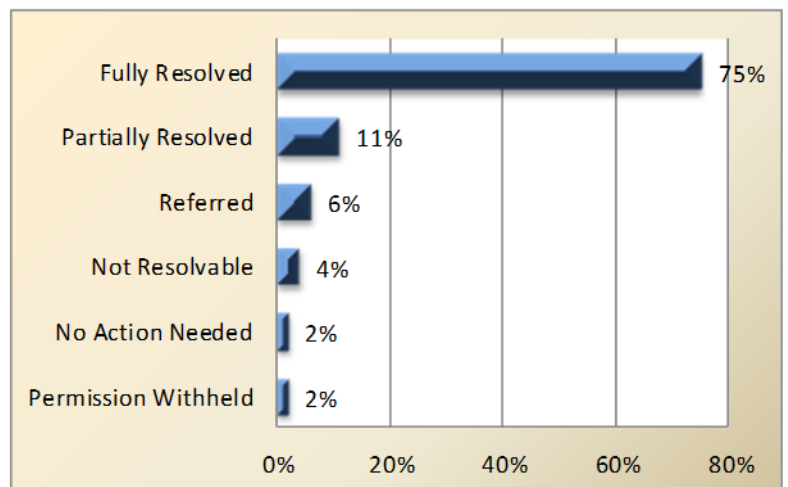


Complaints related to factors outside the facility may be about outside agencies, family or other healthcare providers. Complaints about other agencies typically are about Medicare, Medicaid, or VA benefits. However, 25 percent of complaints in the category involve issues of family conflict and another 20 percent involve concerns that guardians, conservators or persons holding health care power of attorney were trying to improperly limit the rights and choices of the consumer.

## Complaint Resolution

Complaint investigations may result in any number of outcomes. Ombudsmen continually strive for the highest level of resolution possible keeping in mind that residents' rights are the foundation of our program. Residents do not always give us permission to work on their behalf or withdraw permission during the process.

A complaint is "resolved" when the complaint/problem is addressed to the satisfaction of the resident or complainant if the resident is not able to make their wished known.





# Consultation and training

## Consultation and Training

### Consultation to residents and families

In addition to resolving complaints, ombudsmen work with residents, family members and friends by responding to a variety of questions. Requests for information are most frequently related to resident care, resident's rights, finding and interpreting regulations, and admission and discharge procedures. Ombudsmen answered 556 requests for information from consumers, and the friends and family who care for them.

One way an ombudsman provides support and consultation to a resident is by attending their care plan meeting. This meeting includes members of a resident's interdisciplinary care team and includes a review of the resident's total plan of care. Preparation for these meetings can and should bring the resident's interests to the heart of the discussion and empower residents and families to help drive the process.

### Resident and family councils

Ombudsmen help work to promote and support the formation of resident and family councils. An ombudsman may attend meetings only at the invitation of the group and are often asked to provide information to councils about the role of the ombudsman, problem-solving techniques, facility rules and regulations, and resident rights. family councils. Ombudsman attended 183 resident council meetings, and in 31 family council meetings on behalf of residents and family members.

### Community Outreach and Education

Ombudsmen conducted community outreach throughout the state through participation in health fairs, presentations at local senior centers, church and civic groups, and involvement in various community events. Ombudsmen provided education at these events on the rights of residents, the services of the ombudsman program, resident care practices, and elder abuse. In FY14, ombudsman provided 82 educational and other outreach activities.

### In-service training to facility staff

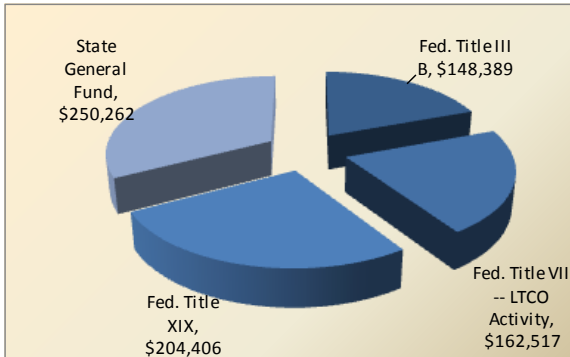
The majority of nursing home and assisted living facility staff receive in-service education where they work. Ombudsman are often requested to provide onsite training. Frequent topics Ombudsman provided 26 trainings to 762 facility staff on such topics as residents' rights, recognizing and preventing abuse neglect and exploitation, person-centered care, and the role of the ombudsman.

### Consultation to facility staff

Ombudsman are resources to staff who encounter complex problems as care and services are being provided. Consultations available on any subject that affects a resident's life in a facility. Common consultations subjects include residents' rights, discharge procedures and planning, the ombudsman roles, and interpretation of regulations. Ombudsmen provided a total of 432 consultations to facility staff.

# Funding & Recommendations

## Funding for FY 14



Expenditures for the Long-Term Care Ombudsman Program totaled \$765,574 in FY 14. Federal dollars, 67 percent, are the largest funding source for the Ombudsman program. State general funds supply the remaining 33 percent. The chart to the left shows a breakdown of the total funding for the Ombudsman program in FY14.

## Recommendations

**Misuse of Antipsychotic Medications:** Residents of Long-Term care facilities are all too often placed on antipsychotic medications despite having no proper diagnosis of psychosis to warrant their use. When used inappropriately these medications place elders at increased risk of injury, harm and even death, and destroy the quality of life and dignity of the elder. In 2012, a national action plan was launched by CMS to decrease the use of these drugs in nursing homes. Since then CMS has measured a 17.1% reduction in the national prevalence of antipsychotics in nursing home residents. The agency is now seeking to cut their use by 25% by the end of next year and 30% by the end of 2016. While other states have made much more improvement than others, Kansas had only a modest decrease which resulted in Kansas moving from 45th to 47th in terms of states with the highest usage of these potential dangers drugs.

The misuse of antipsychotic drugs is a complicated, many-pronged issue that will need to involve consumers, family members, physicians, regulators and facility staff. Approaches should include: establishing minimum care standards for dementia care units, mandating dementia training for all adult care staff, educating doctors and other prescribers as well as consumers, requiring informed consent before antipsychotics can be given to a nursing home resident and promoting inventions know to be successful, such as the Music and Memory Program.

**Discharge Protection:** Involuntarily discharging and relocating residents often adversely affects the mental and physical health of the resident. Kansas should strengthen the regulations designed to protect residents from inappropriate involuntary discharges. Kansas should implement an administrative appeal process for residents in all adult care homes to challenge involuntary discharges; develop and implement a Uniform Disclosure Statement to provide consumers upfront with services that can be provided by the facility; develop and implement a uniform involuntary discharge notice. Facilities should be required to send the ombudsman office a copy of each discharge notice given to residents.

**Ombudsman Program:** The Long-Term Care Ombudsman program needs continued commitment through funding and state support to remain a vital program dedicated to advocating for the health, safety, welfare and right of residents in long term care facilities. Since 2008 our program has experienced a 27 percent cut in state general funding as well as a 5 percent cut in Federal funding. Our program needs funding restored and efforts made to increase funding to meet national recommendations for regional staffing. Additionally a successful volunteer program requires a devoted ombudsman to serve as a volunteer coordinator to recruit, mentor and train Ombudsman volunteers.



*For more information, or to secure the services  
of an Ombudsman,*

*Call or write*

Office of the Kansas Long-Term Care Ombudsman

900 SW Jackson  
Suite 1041  
Topeka, KS 66612

(785) 296-3017 Phone

(785) 296-3916 Fax

Visit Our Website at:

[www.kansasombudsmanksgov.com/](http://www.kansasombudsmanksgov.com/)