

Nursing Home Ombudsman Agency of the Bluegrass (NHOA)

The mission of NHOA is to improve
the quality of care for residents living
in long-term care facilities

Our Vision

NHOA envisions a world where long term care consumers receive quality individualized care in a home like environment. We envision your community as a place where people who need long term care receive the attention they need in a dignified manor.

SLTCOP

- State Long Term Care Ombudsman Program
- US Administration on Aging requires every state to have a State Ombudsman
- NHOA expanded last year to house this program
- Responsibilities include: training and technical assistance to district ombudsmen and reporting to federal government

What is an ombudsman?

- Ombudsman [om-buh dz-muh n] is a Swedish word for advocate. A long-term care (LTC) ombudsman is an advocate for individuals and their families who need the services of a LTC facility.
- LTC Ombudsmen are trained to impartially investigate and resolve concerns of residents in long-term care facilities.



LTC in the Bluegrass District

Anderson, Bourbon, Boyle, Clark, Estill, Fayette, Franklin, Garrard, Harrison, Jessamine, Lincoln, Madison, Mercer, Nicholas, Powell, Scott, and Woodford Counties

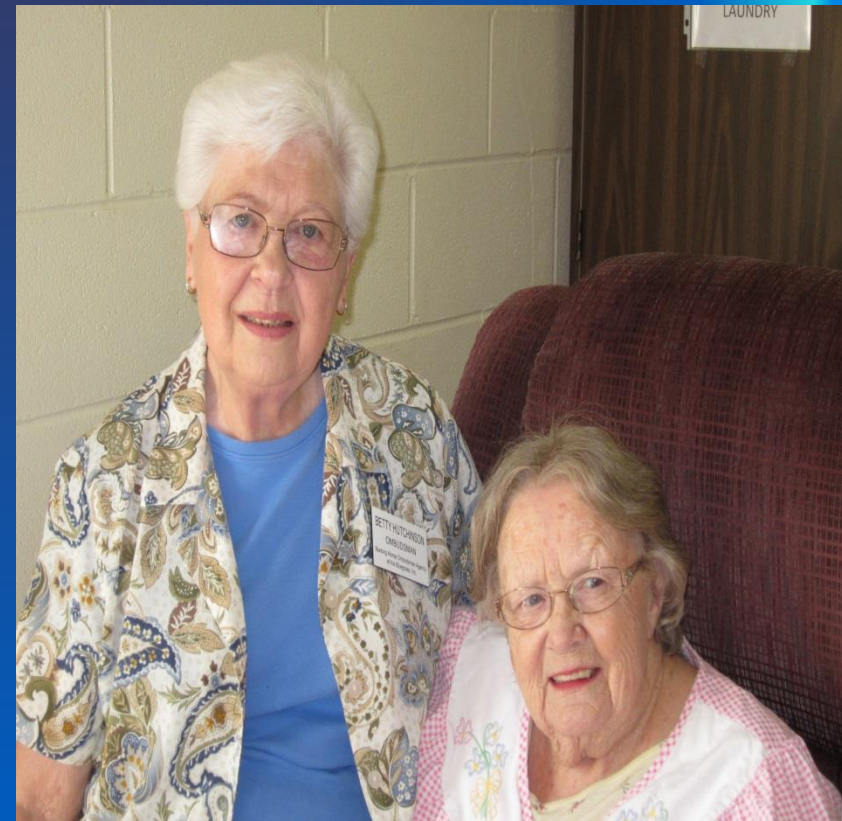
- Over 80 LTC facilities including nursing, personal care, and family care homes
- 5,000+ residents

Who is NHOA Serving?

- Residents in LTC are approximately 70% female
- Average age is 80 years old
- Approximately 15% are relatively young
- 69% are using Medicaid
- 14% are using Medicare for rehabilitation
- 50% have a type of dementia
- Residents with psychological diagnoses increased 17% between 2003-2008. Residents needing psychiatric care is increasing.

What NHOA does...

- Protect the rights of residents in LTC settings
- Identify, investigate and work to solve problems
- Provide regular monitoring visits to residents
- Provide information and assistance to the community
- Monitor government actions affecting residents
- All services and programs are free of charge to residents and families.



Bluegrass Ombudsmen Service by the Numbers 2014

- NHOA ombudsmen made over 6,890 site visits to long-term care facilities to monitor care and advocate for residents.
- NHOA ombudsmen identified, investigated, and worked to resolve 1,785 complaints.
- NHOA identified 60 complaints of abuse and neglect.
- Poor care, injuries, falls, failure to respond to call bells, failure to follow doctor orders, pressure ulcers, and failure to notice a change in resident's condition made up 30% of complaints.
- NHOA helped individuals and families on over 5,615 occasions with nursing facility placement, care planning, and questions about rights, abuse, Medicare and Medicaid.

Our services are free!



NHOA is an independent non-profit agency funded by donations and grants.

Categories of Complaints LTC Ombudsmen Work to Resolve

- Abuse, Gross Neglect, Financial Exploitation
- Access to Information
- Activities and Social Services
- Billing, Personal Property or Funds Mismanaged
- Care
- Dietary
- Environmental
- Rehabilitation of Maintenance of Function
- Rights and Privacy
- Staffing Shortage and Responsiveness
- Systems Problems (Medicare, Medicaid, DCBS, and other state agency services)

Placement Counseling

- Getting into a Nursing Facility
- Selecting a Quality Facility
- Funding LTC using Medicare , Medicaid, and private sources
- Moving in
- Facility staff roles
- Relationships residents have
- The Right to Care without Discrimination
- Care Requirements
- Restraints
- Rights
- Levels of Care

Federal Standards of Care

- Federal law contains four key standards for nursing facility care
 1. The facility must provide services to help each resident attain or maintain the highest practicable physical, mental and psycho-social well being.
 2. A resident's ability to bathe, dress, groom, transfer, walk toilet, eat, and communicate must not decline unless it is medically unavoidable.
 3. If a resident is unable to carry out activities of daily living, he or she must receive help to maintain good nutrition, grooming, and personal and oral hygiene.
 4. Each resident has the right to make decisions about their care.

Themes Underlying Residents' Rights

Are reinforced in the
two primary provisions of the law

1. Quality of Care
2. Quality of Life



RESIDENTS HAVE THE RIGHT TO

- Receive adequate appropriate care
- Participate in their care
- Refuse medication and treatment
- Make personal decisions
- Reasonable accommodations
- Privacy and Confidentially
- Be treated with respect and dignity
- **Be free from abuse**
- Self-determination
- File a complaint
- Visits
- Transfer and discharge rights

Uniqueness of Abuse & Neglect in LTC Settings

Physical Abuse

- Force-feeding
- Overly hot or overly cold water
- Improper use of restraints or medicine
- Harmful genital practices

Uniqueness of Abuse & Neglect in LTC Settings

Caregiver Neglect

- Failure to bathe residents, brush teeth, change dirty clothes
- Failure to assist residents with eating
- Failure to turn/reposition residents
- Failure to assist residents with toileting/changing of incontinence supplies
- Failure to protect residents and abandonment

Uniqueness of Abuse & Neglect in LTC Settings

Psychological Abuse

- Threatening
- Using insults, demeaning language or ridicule
- Isolating a resident
- Prohibiting free choice
- Ignoring resident questions or comments
- Exposure
- Talking about a resident as if they weren't there
- Sexual harassment

Uniqueness of Abuse & Neglect in LTC Settings

Exploitation

- Financial Exploitation: An improper course of conduct, with or without informed consent of the resident that results in monetary, personal, or other benefit, gain, or profit for the perpetrator, or monetary or personal loss for the resident.
- Violation of personal rights: forcing residents to act against their will or preventing them from making choices that adults should be free to make.

Frequency of Abuse in LTC

A Practical Guide for Preventing Abuse in Long-term Care Facilities: Abuse-Proofing Your Facility. Chapter 2: The Hardest Part: Facing Up to the Problem of Abuse by Dr Karl Pillemer, Diane Menio, and Beth Hudson Keller's

- **23%** of staff reported personally insulting or swearing at a resident in the past month
- **8%** said they personally had threatened a resident in the past month
- **10%** said they personally had pushed, grabbed, or shoved a resident in the past month
- **17%** said they personally had used excessive restraint with a resident in the past month

Responding to Abuse and Neglect of Nursing Home Residents

- Believe them
- “I think you must have been hurt, and it wasn’t your fault. I want to understand what happened, so I can help you feel safe. Will you tell me what happened?”
- Controlling *your* emotions
- Praise the resident for telling you what happened.
- Reassuring the resident that you still care for him/her.
- Be prepared.
- Get medical attention
- Residents may also need counseling or help dealing with emotions that follow abuse and neglect.

Who to turn to?

- The statewide abuse hotline **1-800-752-6200** or your local Department for Community Based Services Adult Protection office.
- Local law enforcement or State Police. Call **911** if a resident is in immediate danger.
- The Office of Inspector General (OIG) Eastern Region **(859) 246-2301**
- State LTC Ombudsman Program **859-277-9215**

Thank You Bluegrass EAPC!

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SLTCOP

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