Long-Term Care Ombudsman Programs:

Enhancing Credibility and Effectiveness – Part Two

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Objectives of this Workshop

Participants will:

– Understand what the National Ombudsman Reporting System (NORS) says about LTC Ombudsman services provided to residents
– Understand how ACL uses NORS and performance measures to report on the LTC Ombudsman work
– Learn about the LTC Ombudsman Evaluation Design and how it can support your state’s LTC Ombudsman Program
– Learn about plans to update NORS

We encourage participants to:

– Share perspectives on how to best describe & measure the LTCOP’s value
– Suggest key questions we should be asking to describe program services & impact
 Older American’s Act – lays the foundation for NORS

(c) REPORTING SYSTEM.—The State agency shall establish a statewide uniform reporting system to—

(1) collect and analyze data relating to complaints and conditions in long-term care facilities and to residents for the purpose of identifying and resolving significant problems; and

(2) submit the data, on a regular basis, to—

(A) the agency of the State responsible for licensing or certifying long-term care facilities in the State;

(B) other State and Federal entities that the Ombudsman determines to be appropriate;

(C) the Assistant Secretary; and

(D) the National Ombudsman Resource Center established in section 202(a)(21).
Older American’s Act – Reporting Requirements

Section 712 - (h) ADMINISTRATION.—The State agency shall require the Office to—

(1) prepare an annual report—

(A) describing the activities carried out by the Office in the year for which the report is prepared;

(B) containing and analyzing the data collected under subsection (c);

(C) evaluating the problems experienced by, and the complaints made by or on behalf of, residents;

(ii) identifying barriers that prevent the optimal operation of the program; and
Older American’s Act (continued)

D) containing recommendations for—

(i) improving quality of the care and life of the residents; and

(ii) protecting the health, safety, welfare, and rights of the residents;

(E)(i) analyzing the success of the program including success in providing services to residents of board and care facilities and other similar adult care facilities; and
Older American’s Act (continued)

(F) providing policy, regulatory, and legislative recommendations to solve identified problems, to resolve the complaints, to improve the quality of care and life of residents, to protect the health, safety, welfare, and rights of residents, and to remove the barriers;
What is NORS?

National Ombudsman Reporting System

Data elements that LTC Ombudsmen are required to collect: **Cases/Complaints:**
- Types of Complaints
- *Verification* (or not) of Complaints
- and outcome (resolution)

**Programmatic:**
- Funds Expended & sources
- Staff FTE
- Numbers of Volunteers and hours
- # of facilities & beds
Activities – both at the State & Local level, including:

- Training – of Ombudsmen & Facility Staff
- Non-complaint visits;
- Resident and family councils;
- Community Education
- Media Contacts, discussions, interviews;
- Systems issues (narrative)
- Optional: Case example & Use of Legal Counsel
NORS 2012 Data

Complaint Investigation and Resolution

- Long-Term Care Ombudsmen provide an alternative dispute resolution service, resolving complaints for or on behalf of long-term care facility residents and completed resolution work on 193,650 complaints.

- Ombudsmen resolved or partially resolved 73 percent of these complaints to the satisfaction of the resident or complainant.
2012 Data (continued)

In addition to complaint processing, ombudsmen provided . . .

- **309,423 consultations to individuals.** Consultations most frequently addressed included: alternatives to institutional care, information on Medicaid, transfer, discharge and eviction, & residents’ rights.

- **111,353 consultations to long-term care facility staff** on residents’ rights, observations about care, providing resources for assisting persons living with dementia, and transfer and discharge requirements.

- **a regular presence in 68% of nursing homes** and **25% of board and care**, assisted living and similar homes.
Ombudsmen Programs

- Provided more than 5,000 training sessions for facility staff
- Participated in 21,365 resident council and 2,858 family council meetings.
- Conducted 10,764 community education sessions

All of this work was accomplished by:

- 1,180 FTE staff ombudsmen
- Over 8712 volunteers designated to carry out the LTCO duties
- Value of volunteers – donated 766,733 hours at an estimated value* of nearly $17 million
Additional Highlights – Complaint Trends

The five most frequent nursing facility complaints:

• improper eviction or inadequate discharge/planning;
• unanswered requests for assistance;
• lack of respect for residents, poor staff attitudes;
• quality of life, specifically resident/roommate conflict;
• medications – their administration and organization;
Additional highlights – Complaint Trends

The five most frequent board and care complaints:

• medications – administration and organization;
• inadequate or no discharge/eviction notice or planning;
• quality, quantity, variation and choice of food;
• lack of respect for residents, poor staff attitudes and equipment or building hazards.
Federal Measures: Outcomes & Outputs

AoA reports Measures to assist in budget development at the legislative and executive levels.

Outcomes:
- Decrease the average number of complaints per LTC facility
- Decrease the number of complaints not resolved to the satisfaction of the resident.
Federal Measures: Outcomes & Outputs

Outputs:

- Decrease the number of complaints
- Number of Ombudsman Consultations - project an increase
- Facilities regularly visited not in response to a complaint – project a decrease
Where to find the data?
NORS Next

Goals:

- Revise NORS to ensure the data helps ACL (and states) to better understand and describe the impact and activities of long-term care ombudsman programs
- Simplify the data collection requirements
- Determine how technology can enhance states and ACL’s ability to utilize data, and access data more frequently
- Minimize disruption to what states have invested in with regards to their data software program
NORS Next Workgroups:

• One internal at ACL which met in 2012
• Now an external group comprised of State & local LTCO’s and ACL regional staff
• Work will expand in the next year to include focus groups and broader inclusion for feedback on proposed data elements

➢ Do you have ideas on how to best describe the LTC Ombudsman Program’s value, services, impact?
➢ Is there data that your state collects at the state level beyond the federal requirements?
LTCOP National Evaluation Design
Susan Jenkins, Social Service Analyst

• Development of a family of four logic models
• Drafting a set of overarching research questions
• Identification of data collection tools and data sources that inform those questions

➢ The goal was to identify a way to realistically measure the broad impact of the LTCOP
Research Questions

Process Evaluation Questions

1. How is the LTCOP structured and how does it operate at the local, state, and federal levels?
2. How do LTCOPs use existing resources to resolve problems of individual residents and to bring about changes at the facility and governmental (local, state and federal) levels that will improve the quality of services available/provided?
3. With whom do LTCOPs partner, and how do LTCOPs work with partner programs?
4. How does the LTCOP provide feedback on successful practices and areas for improvement?

Outcomes Evaluation Questions

1. Are the critical functions, including federally mandated responsibilities, of the LTCOP at the local, state, and federal levels carried out effectively and efficiently?
2. How effective is the LTCOP in ensuring services for the full range of residents of LTSS facilities, including individuals with the greatest economic and social needs?
3. How cost-effective is the LTCOP at the local and state levels?
4. What impact do LTCOPs have on long-term care practices, programs, and policies?
5. What impact do LTCOPs have on residents’ health, safety, welfare, and rights?
Data Sources

• Using existing data where possible—especially for the process data collection

• Multiple levels of data collection (Federal, State, local, staff & volunteers, residents/family members)
Key Elements of the Proposed Approach

- **Scalable** because each information gathering activity can involve larger or smaller sample sizes (e.g. numbers of people, organizations).

- **Flexible** because we can incorporate larger or smaller numbers of distinct information gathering activities (e.g. number of focus groups, number of surveys).

- **Multi-modal** because it involves data collection using both qualitative (e.g. focus groups) and quantitative (e.g. surveys, cohort study) methods.
Highlights

• Complaint resolution, knowledge gains, management improvements

• Case studies of unique sites or exemplary practices (e.g., advocacy)

• Ecological approach-looking at the impact of broad initiatives over time and within the context of other events (e.g., educational campaigns)
Highlights (cont.)

• Commissioned papers on meaningful but infrequent events (e.g., legislative changes)

• Cost study identifying both explicit and implicit costs, measuring their use, and monetizing the value of those resources (e.g., to ensure capture of donated goods and volunteer time)
Open Issues

• Measuring ‘avoided’ or minimized problems
• Timeframes for measuring legislative changes and their effects
• Assessing State and local-level data quality
• Identifying primary outcomes to which LTCOPs can be held accountable
Final Report

• Available on the AoA website at:
  http://www.aoa.gov/AoARoot/Program_Results/docs/LTCOP%20Evaluation%20Study%20Design_01312013.pdf
Additional Resources


- NORS data in excel files through 2010

- National Ombudsman Resource Center – Has a state and local self-evaluation tool in addition to NORS training materials