

2020 Annual Report Connecticut Long-Term Care Ombudsman Program

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Overview of the Connecticut Long-Term Care Ombudsman Program

The Connecticut Long-Term Care Ombudsman Program (LTCOP) protects and promotes the rights and quality of life for residents of skilled nursing facilities, residential care homes and managed residential care communities, also known as assisted living facilities. This is a program that is mandated by the Federal Older Americans Act and Connecticut General Statutes Sec. 17a-405 (Formerly Sec. 17b-400). The program consists of one State Ombudsman, eight Regional Ombudsmen, one Administrative Assistant, two Clerical/Intake Staff, and a group of volunteers known as Resident Advocates (RA's).

The State Ombudsman works with state agencies, advocacy organizations, policy makers, legislators, and stakeholders to improve systems that strengthen protections at the state and federal level.

The Regional Ombudsmen (RO's) provide a voice to residents' concerns. Equally important, RO's empower residents to exercise their rights. This is achieved through direct consultation and complaint resolution with the individual at their home. The Regional Ombudsmen respond to residents' concerns and act based on the resident's direction. Regional Ombudsmen are a highly professional, expert group of advocates who work tirelessly to assist residents to achieve their desired outcome for their complaint. Regional Ombudsmen explore all avenues to fully understand an issue and reach a satisfactory resolution. Receiving complaints and working to find a resolution is the largest part of the Regional Ombudsman's work, but they also engage in many other advocacy activities. The Regional Ombudsmen promote Resident Councils by providing support and facilitating the needs of the Resident Councils as they arise. They also support the work of the Executive Board of Presidents of Resident Councils and provide outreach to the public. Regional Ombudsmen attend senior fairs throughout the state, providing presentations to various groups. During nursing home closures, Regional Ombudsmen maintain an active role to inform and support resident choice about where they will move. During facility bankruptcy reorganizations and receiverships, the Regional Ombudsmen also increase their presence in the homes to support residents and ensure their rights are honored in what can be a difficult and anxious time.

Resident Advocates are trained by Ombudsman staff in residents' rights and problem solving. Resident Advocates spend four hours per week in one assigned nursing home and help residents solve problems or address concerns with facility administration.

In partnership with residents, resident representatives, community partners, and other support stakeholders, the LTCOP celebrates collaborative achievements of many individuals and partners. The Connecticut Long-Term Care Ombudsman Program is dedicated to the ethos of providing residents with opportunities to give voice to their concerns.

The Ombudsman Program has an operating budget of \$ 1,830,896, plus an additional \$64,279.24 in CARES Act funding.

- Federal Funds: \$ 349,040 (\$ 191,271 from Title VII, Chapter 2 of the Older Americans Act, and \$ 157,769 from Title IIIB of the Older Americans Act)
- State Funds: \$ 1,481,856
- COVID-19 related funds \$64,279.24

Activities Carried Out by the Office

The Mission of the Connecticut Long-Term Care Ombudsman Program is to protect the health, safety, welfare, and rights of long-term care residents by:

- Investigating complaints and concerns made by or on behalf of residents in a timely and prompt manner.
- Bringing residents to the forefront to voice their concerns directly to public officials on issues affecting their lives.
- Supporting residents in their quest to shape their own legislative agenda and to represent their interests before governmental agencies.

In 2019, the staff of the Ombudsman program fulfilled their mission and requirements by:

- Investigating complaints and concerns made by or on behalf of residents in a timely and prompt manner:
 - ➤ 4,850 complaints received
 - 2,843 cases were closed
 - > 1,086 consultations were provided to individuals
 - > 769 consultations were provided for information and assistance to staff
- Bringing residents to the forefront to voice their concerns directly to public officials on issues affecting their lives:

The Office of the State Ombudsman developed materials for residents that focused on recovery and the support needed as we all begin to heal after the pandemic. The theme of the Annual Voices Forum was "Connection Matters - Our Voices LOUDER than EVER" and the residents were given tools and participated in a trauma and recovery training.

Doctor Sheri Gibson presented, "Trauma During COVID-19: Healing Through Relationships."

Dr. Gibson received her Ph.D. in Clinical Psychology with an emphasis in Geropsychology from the University of Colorado, Colorado Springs (UCCS). She is an instructor for the Psychology Department at UCCS and a faculty affiliate with the UCCS.

This annual event provides an opportunity for Presidents of Resident Councils in nursing homes to speak directly to public officials and agency heads in attendance, letting them know important issues they are dealing with and how these issues impact their quality of life. This year the event was held virtually due to the pandemic, but these important connections were still made. We found that some people preferred the virtual access and were able to attend, when otherwise they would not have been able to participate.

- Supporting residents in their quest to shape their own legislative agenda and to represent the residents' interests before governmental agencies:
 - The Executive Board of Presidents of Resident Councils, a smaller regional representation of residents who are the Presidents of the Resident Councils at their nursing home, actively engaged in legislative advocacy at the General Assembly throughout the 2020 legislative session, reaching out to legislators, meeting with them, and providing testimony at public hearings when able. Some of their areas of outreach and advocacy included the Personal Needs Allowance legislation and increased staffing. Unfortunately, the session was ended early due to the pandemic and we were not able to move any bills forward in the 2020 session.
 - LTCOP testified to the key Aging, Human Services, and Public Health Committees.

Data Collected and Analyzed

The Office of the State Ombudsman offered advocacy services to approximately 25,000 Connecticut residents living in long-term care (LTC) facilities, skilled nursing facilities, residential care homes and assisted living facilities. There was a sharp decrease in the number of residents in long-term care due to the lives lost during the pandemic and overall decline in LTC admissions. The program saw significant changes in the data due to two factors. On 10/1/2019, the Administration for Community Living (ACL) implemented the greatest revisions to the National Ombudsman Reporting System (NORS) since the system was first established. These revisions required that data collection systems be changed, and Long-Term Care Ombudsmen, and their program representatives, be trained. There are new data definitions, codes, and data submission procedures in a new system called Older Americans Act Performance System (OAAPS). These changes were made to encourage consistency among states, but also impact our ability to make comprehensive data comparisons or identify trends related to previous reports. All these data changes came at the same time we saw the historic impact of COVID-19 on LTC communities. Because of this it is difficult to make year over year comparisons.

The staff participated in:

- 4,850 complaints received
- 2,843 cases were closed
- 202 facility visits other than for complaints (unduplicated)
- 777 consultations to facilities
- 48 training sessions for Ombudsman staff and volunteers
- 43 licensure and certification surveys
- 182 community education presentations
- 8 trainings to facility staff
- 2 nursing home closures
- 1 Residential Care Home closure

Problems Experienced and Complaints Made

Please note that this year's complaint category/type is different than previous years. Even with the definition changes, residents and/or their relatives or friends continued to be the main source of complaints received. Of the 4,850 complaints received in 2020, the highest category of complaints was related to "Care". This category received 1,384 complaints with the largest subcategory of the complaints, 273, being in "Care planning". These complaints are often initiated because the individual making the complaint does not believe there is consistent follow through to meet the goals set in the person-centered care plan. If invited by the resident or their representative, Ombudsmen participate in Resident Care Plan meetings. We received many reports that care plan meetings were not happening regularly and even when they were held, staffing concerns and infection control measures impacted their ability to have their person-centered plans of care met. The lack of access, ability to assess the resident or speak privately made it extremely difficult for family members and Regional Ombudsman to advocate on behalf of the residents.

The second largest area of concern was in the category of "Resident Rights". This area received 963 complaints with 252 of those complaints being directly related to the subcategory "Visitors" followed closely by "Dignity and respect". Most of the complaints about Resident Rights and visitation were directly related to the pandemic and COVID-19 restrictions in place at a federal level. It also took long-term care communities a long time to fully understand and implement compassionate care and end of life visits. This is not an area that we traditionally see many complaints, however due to the protections related to resident's rights being waived at a federal level, residents were extremely impacted.

The area that we saw the third largest number of complaints was "Admission/transfer/discharge" that had 629 complaints, with the largest area of complaints being in the subcategory of "Discharge or eviction". This has been a high complaint category nationally as well as in our state. This might

be attributed to the ongoing education and outreach provided by the LTCOP. Ombudsmen assist residents to understand their rights and, if they wish, refer them to legal assistance organizations. The Ombudsmen work to understand and resolve the reasons for the involuntary discharge, consulting with the resident and nursing home or residential care home to clarify all reasons for the notice. They try to negotiate a satisfactory resolution for the resident. June 6, 2020: Governor Lamont signed Executive Order 7XX, this order suspended involuntary discharges of nursing facility residents and residential care home residents who may be discharged to homeless shelters, except during emergency situations or with respect to COVID-19 recovered discharges. This order supported the care and services to individuals that otherwise could have been at extreme risk.

The program also offered Facebook live sessions three times a week for almost 6 months. During these sessions hundreds of complaints and questions were addresses that are not captured in this data.

Recommendations

- Full restoration of resident's rights
 - An Essential Caregiver law that always protects residents' access to at least 2 people, even during a public emergency.
- With high complaint numbers related to involuntary transfer/discharges we need a case tracking system that specifically tracks the notices, facility, notice dates, appeals and outcomes.
 - This level of data will allow the program to provide the appropriate oversight and advocacy to address these concerns.
 - The Long-Term Care Ombudsman program recommends that guidelines and protections continue to be developed for all levels of the system.
 - One data and tracking system for all state agencies.
- Access to the technology of the residents choosing in their room/home.
- Wi-Fi available to all resident rooms, giving them access to the outside world.
- To have Informed Choice provided to all individuals living in a long-term setting.
 - The individual should set the primary goal as to where they wish to receive their long-term services and support.
 - All options are explored to reach this goal if possible.
- Universal boilerplate contract for Managed Residential Communities providing resident protections and expectations.
- Greater state oversight in Managed Residential Communities.
 - Annual surveys
 - Minimum staffing levels for memory care units

Requirement for all LTC communities required documentation to be inclusive of people who
might otherwise be excluded or marginalized, such as those having physical or mental
disabilities or belonging to other minority groups.

Successes and Barriers of the Program

Successes in providing services to residents of long-term care facilities

- The program began using social media as a mechanism to reach residents and family members due to barriers created by the pandemic. This has created an opportunity to get information directly to the individuals we serve in real time. This also offered the opportunity for them to engage with the program, ask questions and get answers on the spot. When the program's team members could not enter the facilities, it was imperative that we developed alternative ways to reach them to provide advocacy and information. The governor commissioned a third-party study known as the Mathematica report. In this report residents and family members identified that having access to the program using technology was something that they wanted us to continue moving forward. The program will now be doing monthly education sessions through social media that are able to be accessed through different types of technology.
- The use of technology has provided an opportunity to connect family members from around
 the state in a way we have never connected them in the past. We have pulled these
 connections together to begin the state's first statewide family council. The LTCOP has
 committed to supporting this council and will be working to formalize the group. This will be
 one of the first statewide family councils in the country.
- Connecticut is one of the only states with an active Statewide Coalition of Presidents of Resident Councils, or Executive Board. The Executive Board has an active role advocating for their fellow residents of skilled nursing facilities. Executive Board members bring issues to the attention of the State Ombudsman and they advocate and offer ideas and solutions about how the Program can promote the quality of life and well-being of long-term care residents throughout the state. They advise the Office of the State Ombudsman about policy and legislative initiatives that will make their lives and the lives of their peers better. Connecticut has incredible involvement from these residents contacting media as well as drafting letters and statements regarding issues of importance. Executive Board members are encouraged to reach out to their legislative body to make their voices heard and they assist other residents in completing these functions as well. It has been a privilege for the Ombudsman Program to be a part of this resident advocacy effort. Connecticut offers a unique experience that is not duplicated in any other state. We bring residents together at the Annual Voices Forum, as well as engaging the Executive Board members in regular monthly conference calls. We use all these interactions to inform the Program and identify

- legislative and policy initiatives to support residents and Resident Councils throughout the state.
- (Ongoing from previous year due to the pandemic) One of the program's areas of focus was
 related to LGBTQ+ inclusivity work and this had previously been a focus. However, this year
 we began to focus on the idea of Inclusive Communities for All. This is a public and private
 partnership that was spearheaded by the Long-Term Care (LTC) communities. To
 accomplish this goal, the program:
 - Partnered with state agencies, community partners, other advocacy groups and long-term care communities to form the Inclusive Communities for All workgroup.
 - Vision Statement:
 - A diverse group of providers, advocates, government agencies, professionals, and individuals that works collaboratively to strengthen the long-term care continuum to be inclusive, accepting and welcoming for all individuals so they may invariably be their authentic selves.

Mission:

To cultivate communities that care for one another and build bridges of common humanity while maintaining respect for every individual. To give voice, identity and specific attention to individuals who identify with one or more marginalized or disempowered group. To curate a toolbox of Inclusive Communities Educational Resources that is utilized across the long-term care continuum.

o Goal:

Create an educational toolkit and video series offered to residents, family members, and staff members of LTC facilities to help create and cultivate inclusive LTC communities. This toolkit will include educational materials as well as application techniques broken down into specific subchapters relating to various marginalized groups and how to ensure that all individuals within the community are able to be their authentic selves.

Objectives:

- Provide resources free of charge that are vetted and championed throughout the LTC industry. These educational materials will be available to residents, family members and staff to help create and cultivate inclusive LTC communities.
- Continue ongoing outreach to provider groups to discuss inclusion in Long-Term Care facilities.
- Maintain LTCOP website and other outreach materials to reflect inclusivity vision for clients on Long Term Services and Supports.

 Facility bankruptcies, receiverships, and closures – Along with resident advocates and other state agencies, including the Money Follows the Person team at the Department of Social Services, the Ombudsman Program maintained a presence at each of the homes to ensure that residents had an opportunity for Informed Choice. The program staff empowered residents to explore all options and develop a person-centered plan where they could reside in the setting of their choice that best met their identified wants and needs.

Bankruptcies - none

Receiverships

Name	Town	Outcome
Waterbury Gardens	Waterbury	Outcome pending

Closures

Name	Town
Bridgeport Health care Center	Bridgeport

Barriers that Prevent the Optimal Operation of the Program

When the pandemic hit LTCOP team members were not allowed to access residents inside of any of the facilities. This created an extreme barrier related to complaint investigations, confidentiality, and overall access to our program. We believe our numbers would have been much higher this year if we had traditional access to all the residents in all the facilities. Many if not most had no means to reach us.

There has also been a growth in the number of Assisted Living Facilities built in the state and this increased the number of individuals that are served. There have been nursing home closures, bankruptcies and receiverships that are extremely demanding of the program's time and advocacy. The complexity of cases has increased steadily over the past few years. The LTC market has changed as has the time a Regional Ombudsman has to dedicate to each case.

The program has a historic low in the number of Resident Advocates (RA's). The RA's have been an integral component to the program for many years; however, with people working later in life or choosing to leave the state once they retire; our pool of volunteers has greatly diminished. The State Ombudsman identified new ways to generate potential volunteers and is slowly increasing the number of RA's.

Policy, Regulatory and Legislative Recommendations

Systemic Advocacy

The Office of the State Ombudsman is honored to be a member of and participate in many statewide stakeholder groups relevant to its advocacy work for long-term care residents. These groups include:

- The National Association of State Long-Term Care Ombudsman Programs (NASOP),
- Connecticut Long-Term Care Advisory Council,
- Connecticut Nursing Home Financial Advisory Committee,
- Co Chair of the Connecticut Elder Justice Coalition, LGBT+ Aging Advocacy Group,
- The Medicaid Long Term Services & Supports Rebalancing Initiatives Steering Committee

Collaborations include many esteemed long-term services and supports partners such as:

- The Center for Medicare Advocacy,
- Statewide Connecticut Legal Services,
- Connecticut Partnership to Improve Dementia Care,
- Lesbian, Gay, Bisexual & Transgender (LGBT) Aging Advocacy,
- Inclusive Communities for all workgroup

Legislative Advocacy

The 2020 CT regular legislative session began and ended quickly due to the pandemic. Some key legislative advocacy the Office of the State Ombudsman supported in 2020 was related to visitation and access. The State Long-Term Care Ombudsman and a Regional Ombudsman participated in the Governor's nursing home and assisted living oversight work group. This work group came together to address issues related to long-term care and proposed changes for the 2021 session.

National and State Advocacy Activities

Advocacy at both the national and state level focused on the restoration of resident's rights, visitation and quality care being provided throughout the pandemic. At the national level we saw small gains related to visitation and access however federal waivers remain in place and there is still a need for resident's rights to be fully restored.

Information Regarding Challenges in Long-Term Care Facilities and Opportunities for Change

Challenges	Opportunities
The changing landscape of Connecticut's long- term services and supports (LTSS) presents challenges to consumers' rights to Informed Choice as well as the right to health, safety and well-being no matter the setting in which LTSS are received.	The Office of the State Ombudsman is committed to the State's efforts to rebalance the LTSS systems. The Ombudsman will be a part of the conversation for Informed Choice and advocacy for individuals choosing to live and receive LTSS in the community.
Ensure that residential care home residents know about and can fully exercise their rights and access the Ombudsman.	The Office of the State Ombudsman will continue to work with other advocates to provide necessary outreach and educational materials to residential care home residents as the introduction of the Home and Community Based Settings rule is considered for residential care homes.
Ombudsman cases are more complex with a focus on involuntary discharges and person-centered care planning. This has been a national trend.	 The Office of the State Ombudsman will continue to explore policy and legislative remedies for involuntary discharges. The program is offering training for residents and staff on Person-Centered care plans, the importance of this tool and how it can assist in improving their quality of life. The Ombudsman will continue to actively engage with the partner agencies and other advocacy groups to address these concerns and advocate for appropriate notice, appeal rights and individualized person-centered care plans.
Connecticut continues to have nursing home closures. This impacts the residents' lives significantly, as they are forced to make decisions they did not foresee.	The Office of the State Ombudsman will maintain a presence at each of the closing homes to ensure that residents have an opportunity for Informed Choice when deciding where they will move. The State and Regional Ombudsman will meet with residents regularly to explain their rights in the closure process.

	 When appropriate, the State Ombudsman will accept appointment as the federal Patient Care Ombudsman.
Opioid Epidemic continues to grow and impact our long-term care communities. This increases the risk for homelessness and need for long-term care.	 The Office of the State Ombudsman will partner with all appropriate entities to find ways to address this epidemic as it increases the risk of elder abuse and exploitation. The Ombudsman will continue to actively look at how this impacts the ability to access pain medication at the end of life. The Ombudsman will collaborate with other state agencies to explore the LTSS options related to telehealth and Medication Assisted Treatment (MAT). The Ombudsman will collaborate with other state agencies to explore options for housing and least restrictive environment.
As the composition of our long-term care	The Office of the State Ombudsman will form
communities has changed, we need to ensure	an Inclusive Communities workgroup to
that these communities are inclusive, welcoming	discuss gaps and develop tools to assist long-
and accepting for all.	term care communities to be inclusive.

State Ombudsman:

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