

2024 ANNUAL REPORT

Connecticut Long Term Care
Ombudsman Program



A Word from the State Ombudsman

As we reflect on the accomplishments and challenges of the past year, I want to begin by extending my deepest appreciation to all of you—residents, families, advocates, volunteers, and partners—for your unwavering dedication to the rights, dignity, and well-being of long-term care residents in Connecticut. It is your commitment that has fueled our collective efforts, allowing us to make meaningful progress in advocating for individuals receiving long-term services and supports.

This past year has been one of significant change and continued advocacy. The Connecticut Long Term Care Ombudsman Program (LTCOP) has remained focused on ensuring that residents in all care settings, whether in nursing homes, residential care homes, or home- and community-based services, receive the care and protections they deserve. Our mission is clear: to protect the rights of individuals in long-term care, promote their ability to make informed choices, and amplify their voices in every decision that impacts their lives.

We have seen several important legislative successes this year, thanks to the hard work and collaboration of so many dedicated individuals and organizations. Through efforts like the passage of HB5001 and HB5046, we've achieved greater transparency in care, strengthened protections for residents, and laid the groundwork for future reforms that will further enhance the quality of life for those in long-term care. These wins would not have been possible without the strong bipartisan support and leadership of the Speaker of the House, the Aging Committee, and our Governor, all of whom have demonstrated an unwavering commitment to meeting the needs of older adults and individuals in long-term care.

Despite these victories, we recognize that challenges remain. The fear of retaliation continues to prevent many residents from raising grievances, and we are committed to revitalizing our training and advocacy efforts to address this issue. Additionally, we continue to advocate for policies that ensure fair access to care, particularly for those impacted by facility closures or who face systemic barriers to receiving the services they need.

Our work is never done, but with each new challenge comes an opportunity for growth. We are steadfast in our efforts to build more inclusive communities within long-term care, where every resident—regardless of their background or care setting—feels empowered, respected, and heard. As we move forward, we are committed to expanding our Community Ombudsman Program, strengthening resident councils, and promoting the important role of essential caregivers, who provide critical support to residents during both times of stability and crisis.

Above all, I want to remind you that the Long Term Care Ombudsman Program is here for you. Whether you have concerns about care, need assistance navigating transitions, or simply want to share your experiences, we are ready to listen and advocate on your behalf. Your insights continue to shape our strategies and inform our advocacy, ensuring that the voices of residents remain at the center of everything we do.

Thank you to all who have contributed to the success of this program—residents, families, staff, volunteers, and partners. Together, we will continue to push for a more compassionate, transparent, and responsive long-term care system in Connecticut, where dignity, respect, and choice are at the forefront of every decision.



Sincerely,

A handwritten signature in blue ink that reads "Mairead Painter".

Mairead Painter

Connecticut State Long Term Care Ombudsman

Contents

Executive Summary	4
Overview	8
Operating Budget	9
Updates & Activities	10
Bringing Individuals to the Forefront	12
Supporting Individuals to Shape Legislation	13
Expanding Awareness: 2024 Outreach Campaign	14
Data Collected & Analyzed	15
Problems Experienced & Complaints Made	17
Successes & Barriers	20
Challenges, Opportunities, & Recommendations	23
Ongoing Challenges & Opportunities 2024	26
Recommendations for 2025	30
Policy, Regulatory, & Legislative Recommendations	32
Summary of Key Legislative Bills Passed in the 2024 Connecticut Legislative Session	34
National Activities 2024	37
Closures & Evacuations	38
Closing Statement & Acknowledgments	40

Executive Summary

The following information provides a high-level summary of the overall 2024 Long Term Care Ombudsman Program (LTCOP) Annual Report:

- The Office of the State Ombudsman offered advocacy services to approximately 30,000 Connecticut residents living in long-term care facilities.
- In 2024, LTCOP staff diligently investigated complaints and concerns raised by or on behalf of residents: 4,413 complaints received; 2,627 cases closed; 863 consultations provided to individuals; 334 consultations provided to facility staff, including informational materials and assistance.
- Of the 4,413 complaints received in 2024, the highest category of complaints was related to “care.” This category received 1,264 complaints with the largest subcategory of the complaints, 243, being in “response to requests for assistance.”
- In addition to the 2,627 closed cases in 2024, the LTCOP staff participated in many other activities throughout the year, including completing one or more visits to 397 facilities; 165 licensure and certification surveys; 47 community education presentations; 4 training sessions to facility staff; and placements for residents following 7 nursing home closures, 2 residential care home closures, as well as an evacuation of a residential care home.
- The Community Ombudsman Program continued to expand, providing advocacy to individuals receiving long-term services and supports in home- and community-based settings. This was particularly significant as it helped residents access services in the least restrictive settings possible.
- The LTCOP continued its active involvement in providing support for facility closures, bankruptcies, and receiverships. Working alongside Resident Advocates and state agencies, the LTCOP ensured residents were given the opportunity to make informed choices about their next steps, exploring community-based options where possible.
- Through impactful educational materials, the LTCOP successfully increased awareness and compliance with the Home- and Community-Based Services (HCBS) settings rule among Residential Care Homes.
- The 2024 Connecticut Legislative Session, spanning from February 7 to May 8, resulted in numerous legislative successes that were heavily influenced by the advocacy efforts of the LTCOP, the E-Board, and the statewide Family Council. These

groups presented testimony during public hearings on key nursing home reform bills, such as HB 5001 and HB 5046.

- Legislative successes included enhanced privacy measures; electronic nursing facility waiting lists, improving transparency and accuracy in the admissions process; the creation of a Connecticut-specific nursing home dashboard, improving public access to care comparisons, and requiring the display of links to Medicare's Nursing Home Care Compare website to empower families to make informed decisions about care facilities.
- Barriers that prevented optimal operation of the program in 2024 included resource shortages; fear of retaliation; shortage of resident advocates (RAs); inadequate civil penalties for abandonment; and inconsistent compliance with HCBS waiver requirements.
- The LTCOP continued to use social media and virtual platforms as mechanisms to reach residents and family members, providing real-time information related to residents' rights and long-term care.
- The LTCOP worked with industry and partner agencies to increase the number of Residential Care Homes (RCHs) complying with the HCBS settings rule.
- The LTCOP worked with national advocacy partners as requested to explore their development of a discharge portal and legislation like the one for use here in CT to promote discharge portals throughout the country in order to ensure transparency and consistency in discharge processes.
- The LTCOP partnered with Elion Caspi to reevaluate the fear of retaliation experienced by residents in long-term care facilities.
- The LTCOP worked to prohibit facilities from denying admission to individuals based on mental health treatment history by utilizing CHRO-enacted legislation which categorized such refusals as discrimination.
- The LTCOP used newly enacted legislative requirements in order to have nursing facilities accept all residents during emergencies, including closures or evacuations.
- The LTCOP is able to use the new real-time tracking of facility bed availability in order to improve emergency response efficiency.
- The LTCOP participated in interagency training on Medication for Opioid Use Disorder (MOUD) to ensure safe transitions from hospitals to nursing homes* and community settings, mitigating relapse risk and ensuring appropriate treatments.

*The term "nursing home" also includes "skilled nursing facility."

- The LTCOP developed and distributed handouts for new social workers in nursing facilities, focusing on important discharge documents and community waiver programs like Money Follows the Person (MFP).
- The LTCOP added an additional Community Ombudsman in order to advocate for individuals receiving care in home-and community-based settings, ensuring their rights and access to services in the least restrictive environments.
- The LTCOP conducted a targeted outreach campaign from August 19, to September 29, 2024, to increase awareness of its services and resources. Using programmatic display advertising, Hispanic TV spots on Telemundo and Univision, CT Public Radio sponsorships, and digital ads on CTPublic.org, the campaign reached a diverse audience, including caregivers for aging parents and individuals with disabilities. With over 3.5 million impressions across all platforms and a click-through rate (CTR) of 0.31%, the campaign exceeded industry benchmarks while fostering public awareness and proactive engagement. This comprehensive effort highlighted LTCOP's commitment to inclusivity and accessibility, ensuring its resources were effectively communicated to those in need.



“It’s not just about addressing the day-to-day issues we face—though there are plenty of those. [The Ombudsman Program’s] invaluable assistance has given me the confidence and platform to advocate for meaningful changes.”

– John B., Resident



Pictured Above Left to Right:

Top row: John Balisciano

Middle Row: Charles Urniezus, Lawrence Laracuenta, Rodney Brooks

Bottom Row: Lydia Petrucci, Resident Council Vice President; Julia Savage; Resident Council President; Robert “Bobby” Willis

Overview

The LTCOP protects and promotes the rights and quality of life for residents of nursing homes, 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-870 (Formerly Sec. 17b-405). LTCOP consists of one State Ombudsman, one Community Ombudsman Manager, eight Regional Long Term Care Ombudsmen (ROs), one Community Ombudsman, one Administrative Assistant, two Clerical/Intake Staff, and a group of volunteers known as Resident Advocates (RAs).

The State Ombudsman and Community Ombudsman Manager collaborate with state agencies, advocacy groups, policymakers, legislators, and other stakeholders to enhance systems that bolster protections at both the state and federal levels. They also identify service gaps and work to address them. Regional Long Term Care and Community Ombudsmen serve as advocates, bringing individuals' concerns to the forefront and empowering them to exercise their rights. This is accomplished through direct consultation and complaint resolution, always acting in alignment with the individual's preferences. Regional Ombudsmen (ROs) are highly skilled advocates who dedicate themselves to

helping individuals achieve their desired outcomes, investigating issues thoroughly and pursuing resolutions that meet the individual's needs.

While handling complaints is a significant aspect of the ROs' responsibilities, they also engage in various other advocacy efforts. They actively support Resident Councils (RCs), facilitating their work and addressing emerging needs, as well as assisting the Executive Board of Presidents of RCs. ROs provide public outreach by participating in senior fairs and delivering presentations to community groups. During nursing home closures, they play a critical role in ensuring residents are informed and supported in making relocation choices. Similarly, during facility bankruptcies or receiverships, ROs increase their presence to safeguard residents' rights during these challenging transitions. Resident Advocates (RAs), trained by Ombudsman staff, dedicate four hours a week to an assigned nursing home, working directly with residents to address issues and collaborate with facility administration to resolve concerns.

Operating Budget

Program Funding for the Ombudsman Program for FFY 2024

Listed below is the expenditure information required for the submission of the annual National Ombudsman Reporting System (NORS) report. Please note that the total reported for State Funds includes fringe benefit amounts.

The LTCOP has an operating budget of

\$2,340,860

Federal Funds

\$434,516

\$268,080 from Older Americans Act (OAA) Title VII, Chapter 2 • • • • •

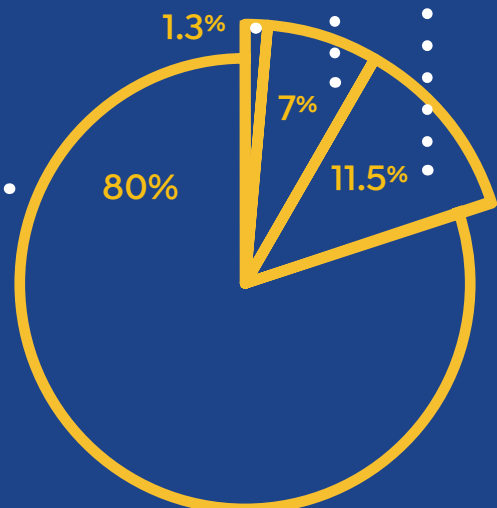
\$166,436 from OAA Title III provided at State Level • • • • •

Other Federal Funds - ARP Title VII

\$31,462 • • • • •

State Funds

\$1,874,882 • • • • •



Updates & Activities

MISSION STATEMENT

The mission of the Connecticut LTCOP is to protect the health, safety, welfare, and rights of individuals receiving long-term services and supports by:

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

INVESTIGATIONS

In 2024, LTCOP staff diligently addressed complaints and concerns brought forward by or on behalf of residents. However, the ongoing increase in complaint volume highlighted significant challenges in maintaining timely access to services for all residents.

In 2024, the Community Ombudsman Program was launched to extend the LTCOP's advocacy to a broader range of long-term care settings, addressing the unique needs of individuals in community environments. However, significant challenges, including budgetary constraints and operational demands, have hindered its full implementation. The closure of multiple facilities, including seven skilled nursing facilities and one residential care home, and the relocation of over 800 individuals

statewide have further strained LTCOP resources.

Despite these obstacles, the program remains committed to ensuring that all individuals receiving long-term services and supports (LTSS) have access to advocacy services, regardless of their residence. Efforts are transitioning from foundational development to active implementation and expansion to fulfill the program's legislative vision.

To sustain and grow the program, critical resources are needed:

- Specialized software systems to efficiently track and manage state-specific Ombudsman data within the federal framework, ensuring compliance with regulations.

- Enhanced Transportation Resources to empower Community Ombudsmen to reach individuals across larger geographic areas, ensuring access to diverse client populations in their own homes, which are not concentrated in congregate settings like skilled nursing facilities, assisted living facilities, or residential care homes.
- Additional staff to provide comprehensive and equitable advocacy services statewide.

The LTCOP acknowledges the transformative potential of a fully realized Community Ombudsman Program. Meeting these resource needs is essential to serving the increasing demand for advocacy services across Connecticut.

By promptly identifying, addressing, and resolving concerns within its scope, the program serves as a cost-effective mechanism for mitigating issues at the earliest stage, preventing escalation into more complex and costly problems for state systems. While the Community Ombudsman Program is currently focused on providing information and assistance to individuals in community settings, these efforts play a vital role in addressing challenges proactively and directing individuals to appropriate resources. Research indicates that increased LTCOP funding correlates with better outcomes, such as reduced unnecessary antipsychotic medication use, further underscoring the program's value in reducing the strain on state resources.

Additionally, LTCOP provides critical information and support to residents, families, and facility staff, fostering environments where potential problems are identified and addressed early. This proactive approach not only protects the well-being of individuals, but also reduces the likelihood of more intensive and costly interventions.

The LTCOP remains committed to securing the resources necessary to expand the Community Ombudsman Program and enhance its capacity to serve individuals effectively. By collaborating with partners, stakeholders, and the broader community, the LTCOP continues to work toward fulfilling the legislative vision of this initiative, ensuring that all individuals receiving LTSS have access to timely, robust, and impactful advocacy services.

4,413
COMPLAINTS RECEIVED

2,627
CASES WERE CLOSED

863
INFO AND CONSULTS TO
INDIVIDUALS

334
INFO AND CONSULTS TO
FACILITY STAFF

Bringing Individuals To The Forefront

The 28th Annual Voices Forum

The 28th Annual Voices Forum, held on October 4, 2024, embraced the theme **“Voices United, Empowering Choices: Strength in Advocacy”**; and continued its tradition of empowering residents, advocates, and stakeholders to collaborate for meaningful change in long-term care. Organized by the Statewide Coalition of Presidents of Resident Councils (SPCRC) and the Connecticut Long Term Care Ombudsman Program (LTCOP), this event provided a platform for thought-provoking discussions, impactful presentations, and the sharing of resources to foster dignity and quality of life in care communities.

The forum brought together Resident Council presidents, advocates, stakeholders, and legislative members, creating a unique opportunity for direct dialogue and engagement. Resident Council presidents not only deepened their understanding of the legislative process, but also had the chance to review achievements from the last legislative session and identify priority advocacy issues for the upcoming session. The presence of legislative members and department leadership offered attendees a first-hand opportunity to engage with policymakers, fostering meaningful discussions on long-term care policies and empowering attendees to drive systemic change.

Key presentations included:

Christine Weston, Director of Community Options at the Department of Social Services, who delivered an insightful session on the **Money Follows the Person Program**, highlighting how it supports transitions from institutional care to community-based settings.

Irma Rappaport, representing the Essential Caregivers Movement, shared her compelling story of advocacy and underscored the critical role essential caregivers play in resident well-being, tying her message to the themes of connection and empowerment. She also discussed the importance of legislative advancements like the Essential Caregivers Act of 2024.

The **Reality Poets**, featured in the award-winning documentary “Fire Through Dry Grass,” showcased how art and personal narratives can drive advocacy, highlighting the resilience of marginalized communities in long-term care. Their work sparked discussions about addressing systemic neglect and empowering residents to lead change.

Attendees gained actionable tools and resources, such as guides on strengthening Resident Councils and navigating advocacy within long-term care facilities. The forum culminated in the presentation of two significant awards: the **Carol Rosenwald Spirit of Advocacy Award** and the **Brian Capshaw Rock Star Award**.

Supporting Individuals To Shape Legislation



LTCOP empowers residents to actively participate in shaping legislation by providing the knowledge, tools, and support needed to advocate for policies that prioritize their rights and well-being. Through guidance, collaboration, and access to resources, LTCOP enables residents to engage with lawmakers, craft impactful testimonies, and advocate for systemic improvements in long-term care.

One example of this support is the assistance LTCOP provided to the Executive Board of Presidents of Resident Councils (E-Board) during the 2023-2024 legislative session. The E-Board, composed of Resident Council presidents from across the state, actively engaged in legislative advocacy by reaching out to legislators, attending public hearings, and providing testimony on issues such as staffing challenges and resident rights. LTCOP staff supported these efforts by helping individuals craft testimonies that highlighted their lived experiences and the importance of legislative reforms. These efforts underscored the transformative impact of

resident-led advocacy in shaping policies to improve quality of care and transparency in long-term care facilities.

Additionally, the E-Board Retreat, held annually, offers a focused opportunity for residents to deepen their legislative advocacy efforts. During this year's retreat on August 8, 2024, members engaged with Assistant Attorney Generals for the program, who provided critical insights into legal issues affecting older adults and shared strategies for advancing LTCOP initiatives. Discussions with Dillon Ellis, Ph.D., and Christine Bailey from the UConn Health Center on Aging explored research opportunities in Connecticut nursing homes and trends in aging. A working lunch with State Representative Mitch Bolinsky, ranking member of the Aging Committee, further enriched the retreat, fostering meaningful dialogue on policy priorities. These programs not only educate and inspire participants, but also strengthen their capacity to advocate effectively for legislative changes that benefit long-term care residents statewide.

Expanding Awareness: 2024 Outreach Campaign

The Connecticut Long Term Care Ombudsman Program (LTCOP) conducted a targeted outreach campaign from August 19, to September 29, 2024, designed to increase public awareness of its services, promote proactive engagement, and ensure accessibility for diverse communities.

The campaign utilized multiple platforms, achieving significant reach and engagement:

PROGRAMMATIC DISPLAY ADVERTISING:

The campaign generated **1.46 million impressions** and **4,549 clicks**, achieving a **click-through rate (CTR) of 0.31%**, which aligns with industry benchmarks ranging from 0.08% to 0.46%. English-language ads performed slightly better than Spanish-language ads, with CTRs of 0.34% and 0.28%, respectively. Additionally, the campaign included 191,381 added-value impressions.

HISPANIC TV ADVERTISING:

Aired commercials on Telemundo and Univision, delivering **325,000 impressions** and fostering trust within the Hispanic community.

CT PUBLIC RADIO SPONSORSHIP:

Six weeks of statewide local news sponsorships provided consistent exposure, delivering **over 1.5 million impressions**.

DIGITAL PRESENCE ON CTPUBLIC.ORG:

Enhanced Pencil Ads, Sponsored Content, and public service announcements (PSA) videos contributed additional impressions and clicks, further increasing visibility.

The campaign successfully reached over 3.5 million impressions across all platforms, engaging key audiences, such as caregivers for aging parents and families of children with disabilities. By leveraging diverse channels, LTCOP enhanced public awareness of residents' rights, helping to identify and address issues early, improving quality of life, and reducing the need for costly interventions.

Data Collected & Analyzed

The Office of the State Ombudsman offered advocacy services to approximately 30,000 Connecticut residents living in long-term care facilities, including nursing homes, residential care homes, and assisted living facilities, throughout 2024.

The long-term care sector continues to navigate the challenges of the post-pandemic landscape; while statewide facility census numbers show consistent recovery, nuances within these metrics highlight a more complex picture. Despite occupancy percentages rising to **86.44% in September 2024**, up from **84.98% in September 2023**, the overall bed capacity declined, with **22,182 beds available in 2024 compared to 22,787 in 2023**. Since 2021, nearly 1,500 beds have been taken offline, reflecting the interplay between post-pandemic recovery, operational challenges, and reduced capacity. These shifts make year-over-year comparisons increasingly complex.

Amid these shifts, one trend remains clear: the significant increase in complaints received by LTCOP over the past 15 years. Since **2009**, the program has seen a steady rise in complaints, culminating in **4,413 complaints in 2024**, compared to **1,545 in 2009**. This upward trajectory reflects not only the growing awareness and utilization of LTCOP's services, but also the evolving complexities of the long-term care environment.

These data underscore the critical role of LTCOP in addressing the needs of residents during a time of significant transformation within the long-term care system. The Office remains steadfast in its mission to advocate for the health, safety, and rights of Connecticut's long-term care residents, adapting to meet the demands of an ever-changing landscape.

IN 2024, THE STAFF WERE ENGAGED WITH THE FOLLOWING ACTIVITIES:

4,413 COMPLAINTS RECEIVED

2,627 CASES CLOSED

400 FACILITIES RECEIVED ONE OR MORE VISITS

863 CONSULTATIONS PROVIDED FOR INDIVIDUALS

165 LICENSURE & CERTIFICATION SURVEY RESPONDENTS

47 COMMUNITY EDUCATION PRESENTATIONS

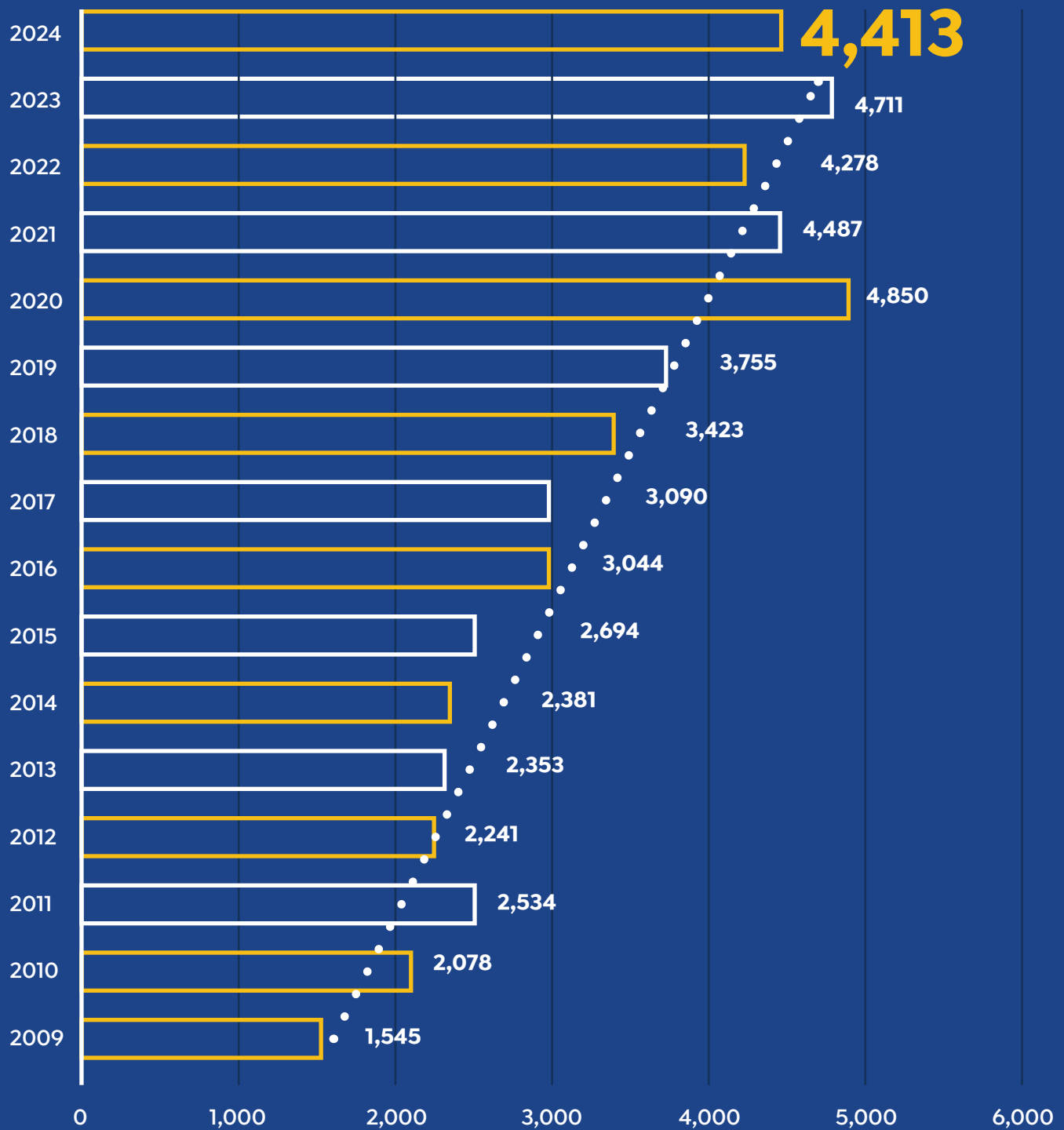
4 TRAININGS TO FACILITY STAFF

7 NURSING HOME CLOSURES

2 RESIDENTIAL CARE HOME CLOSURES

1 RESIDENTIAL CARE HOME EVACUATION

Total Complaints Trend: 2009 - 2024



Problems Experienced & Complaints Made

The **4,413 complaints** received in 2024 illustrate the continued challenges faced by residents and their representatives. The most frequent category of complaints was related to **“care,”** accounting for **1,264 complaints**. Within this category, the largest subcategory, **243 complaints**, related to “response to requests for assistance.” These complaints highlight concerns about inconsistent follow-through or delayed responses from facility staff, often tied to deficiencies in staffing and adherence to person-centered care plans. Ombudsmen frequently participated in care plan meetings to address these issues and investigate staffing patterns contributing to inadequate call bell response times.

The second most prevalent category of complaints, **“admission/transfer/discharge,”** totaled **666 complaints**, with **444 specific cases** focused on **“discharge or eviction.”** This area of concern remains significant, both nationally and statewide, particularly in the context of reduced licensed beds and facility closures.

The third largest category of complaints received in 2024 was **“autonomy, choice, rights,”** totaling **559 complaints**. Within this category, two prominent subcategories emerged: **“Dignity and Respect”** with **137 complaints** and **“Live in a Less Restrictive Setting”** with **131 complaints**.

DIGNITY AND RESPECT

In the National Ombudsman Reporting System (NORS), the **“Dignity and Respect”** subcategory addresses situations where facility staff fail to honor or promote a resident’s dignity, sense of self-worth, or respect. These complaints often involve instances of staff rudeness, insensitivity, or other behaviors that demean or diminish the resident’s personal value. For example:

- Residents reporting staff dismissiveness or belittling comments during interactions.
- Instances where care or services are provided in a way that disregards the resident’s preferences or cultural sensitivities.
- Staff failing to recognize the resident’s individuality, leading to feelings of neglect or invisibility.

It is critical to distinguish these complaints from more severe forms of mistreatment, such as verbal or psychological abuse, which are categorized separately in NORS under other subcategories. While “Dignity and Respect” issues do not always escalate to abuse, they represent an erosion of the fundamental principles of person-centered care and respect for resident autonomy. These complaints highlight the need for ongoing staff training and facility oversight to ensure that residents are treated with the respect and compassion they deserve.

LIVE IN A LEAST RESTRICTIVE SETTING

The **“Live in a Least Restrictive Setting”** subcategory addresses complaints where residents are not afforded the opportunity to live in an environment that provides the least restrictive level of care while still meeting their needs. This reflects a broader principle under **“Resident Rights”** to promote independence and autonomy. Common issues in this category include:

- Residents being placed in nursing homes or other institutional settings when their needs could be met in community-based care or less restrictive environments, such as assisted living or independent housing.
- Lack of exploration or support for transitioning residents to less restrictive settings, despite eligibility or expressed preference to move.
- Systemic barriers, such as insufficient resources, inadequate staff knowledge, or reluctance to pursue alternatives, that prevent residents from achieving their preferred living arrangements.

These complaints highlight the need to respect residents’ self-determination, and ensure compliance with policies and legal frameworks, such as the **Olmstead decision** and programs like **Money Follows the Person**, which are designed to promote community integration for individuals receiving long-term services and supports.

The **“Live in a Least Restrictive Setting”** category underscores the importance of advocacy and education within the LTCOP to ensure residents and their representatives are aware of their rights and options. It also points to the systemic need for enhanced collaboration between facilities, Ombudsmen, and community resources to reduce institutional bias and promote more inclusive, independent living environments for long-term care residents.

The growing numbers in the categories of “Dignity and Respect” and “Live in a Least Restrictive Setting” emphasize the critical role of the Ombudsman program in addressing these issues through advocacy, education, and proactive outreach. By empowering residents and their representatives, the LTCOP fosters environments that uphold individual autonomy, dignity, and choice while reinforcing the principles of person-centered care planning.

A significant aspect of this advocacy involves addressing involuntary discharges and evictions, which remain a pressing concern for residents statewide. Ombudsmen are instrumental in helping residents understand their rights and, when necessary, connecting them to legal assistance organizations. They work collaboratively with residents and facility staff to uncover and resolve the root causes of discharge notices, aiming to negotiate satisfactory outcomes. Recognizing that not all nursing homes report involuntary discharges adequately to LTCOP, Ombudsmen actively intervene to ensure residents are protected. In cases of emergency closures, where procedural rights may be limited due to health and safety concerns, Ombudsmen prioritize the immediate safe placement of residents while continuing to advocate for their long-term rights and well-being. This comprehensive approach underscores LTCOP's pivotal role in addressing both systemic challenges and individual cases, ensuring that residents receive the respect, care, and autonomy they deserve.

“

Knowing that an Ombudsman is readily available and familiar with our individual circumstances provides reassurance and a sense of security.

”

– Jeanette Sullivan-Martinez, Resident

Successes & Barriers

SUCCESSES IN PROVIDING SERVICES TO RESIDENTS OF LONG-TERM CARE FACILITIES IN 2024:

- **Increased Access & Information:** The Long Term Care Ombudsman Program (LTCOP) continued to use social media and virtual platforms as mechanisms to reach residents and family members, providing real-time information related to residents' rights and long-term care. These sessions allowed individuals to ask questions, receive answers, and engage directly with LTCOP. We also expanded our educational offerings on social media to cover new topics and reach broader audiences.
- **Broadening Resident Advocacy and Involvement:** Connecticut remains one of the few states with a highly **active Statewide Coalition of Presidents of Resident Councils**. This year, the coalition, led by the Executive Board, continued to advocate for residents' rights and provide input on policy and legislative initiatives. The Executive Board played a key role in shaping discussions on the rights of residents, particularly around issues like transparency, accountability, and quality of care. Regular monthly meetings allowed the Board to inform the State Ombudsman on critical issues and provide solutions, strengthening the resident-led advocacy movement across the state.
- **Expansion of Community Ombudsman Program:** The **Community Ombudsman Program** continued to expand, providing advocacy to individuals receiving long-term services and supports in home-and community-based settings. This was particularly significant as it helped residents access services in the least restrictive settings possible. The program played a key role in ensuring that residents living outside of nursing facilities were empowered to voice their concerns and access necessary care.
- **Addressing Facility Closures and Receiverships:** The LTCOP continued its active involvement in **facility closures, bankruptcies, and receiverships**. Working alongside RAs and state agencies, the LTCOP ensured residents were given the opportunity to make **informed choices** about their next steps, exploring community-based options where possible. This involved creating person-centered care plans and discharge plans that aligned with residents' needs, focusing on empowering individuals to make decisions that best suited their personal circumstances.

- **Educational Progress on HCBS Waiver Compliance:** The LTCOP successfully increased awareness and compliance with the **Home and Community-Based Services (HCBS) settings rule** among RCHs. By working with interagency partners and providing targeted educational resources, we helped more facilities meet the requirements to offer HCBS waivers, expanding residents' access to essential community-based care services.
- **Legislative Advocacy and Systemic Change:** The 2024 Connecticut Legislative Session, spanning from February 7, to May 8, resulted in numerous legislative successes that were heavily influenced by the advocacy efforts of the LTCOP, the E-Board, and the statewide Family Council. These groups presented testimony during public hearings on key nursing home reform bills, such as **HB 5001** and **HB 5046**, which addressed ongoing challenges in transparency, accountability, and care quality.

NOTABLE LEGISLATIVE SUCCESSES INCLUDED:

- **Enhanced privacy measures**, such as limiting room occupancy to no more than two beds, aimed at reducing overcrowding and increasing resident privacy.
- **Electronic nursing facility waiting lists**, improving transparency and accuracy in the admissions process.

- The creation of a **Connecticut-specific nursing home dashboard**, improving public access to care comparisons, and requiring the display of links to **Medicare's Nursing Home Care Compare** website to empower families to make informed decisions about care facilities.
- **Protections against discrimination** in admissions based on a history of mental health treatment, ensuring fair access to care.
- **Workplace violence prevention standards** to safeguard residents and staff, promoting a safer care environment.
- **Increased regulatory authority** for disciplining facilities that fall short of care standards, reinforcing accountability.
- **Statutory definitions for direct care staff**, ensuring appropriate staffing levels to improve care quality.
- **Presumptive eligibility for the Connecticut Home Care Program for Elders (CHCPE)**, allowing for faster access to services while eligibility processes are completed, reducing delays in care initiation.

These legislative achievements have created a stronger framework for resident rights, transparency, and accountability within Connecticut's long-term care system, enabling a higher standard of care and greater dignity for residents.

BARRIERS THAT PREVENTED OPTIMAL OPERATION OF THE PROGRAM IN 2024:

- Despite its successes, the LTCOP continues to face resource limitations as the demand for advocacy grows. The increasing number of assisted living facilities has expanded the scope of the program, while the closures of nursing homes have created additional complexities in relocating and supporting displaced individuals. These distinct challenges further strain a department already stretched beyond the recommended staffing ratio of one full-time equivalent Ombudsman per 2,000 beds, making it increasingly difficult to address the growing need for services effectively.
- **Fear of Retaliation:** Fear of retaliation remains a major barrier preventing residents from voicing concerns or filing grievances. Despite efforts to provide training on this issue, the current program is outdated and less effective, highlighting the need for revitalization to address ongoing resident concerns.
- **Shortage of Resident Advocates (RAs):** The LTCOP continues to struggle with a **shortage of RAs**, which limits its ability to

serve the needs of residents effectively. Recruitment and retention of RAs have been challenging due to factors such as increased work demands and volunteers retiring soon after joining the program.

- **Inadequate Civil Penalties for Abandonment:** The **civil monetary penalty for abandonment** in healthcare facilities, currently set at \$100, is insufficient to deter neglectful behaviors. This low penalty weakens the state's ability to hold facilities accountable for failing to meet care standards, leaving residents vulnerable.
- **Inconsistent Compliance with Home- and Community-Based Services (HCBS) Waiver Requirements:** Some **Residential Care Homes** still struggle with compliance regarding **HCBS waiver requirements**, limiting residents' access to critical community-based services and care.

Challenges, Opportunities, & Recommendations

In 2023, the Long Term Care Ombudsman Program (LTCOP) navigated a shifting landscape in Connecticut's long-term services and supports. We operated in an environment marked by regulatory updates, facility closures, and the growing complexity of care needs. These changes underscored the importance of safeguarding residents' rights, ensuring informed choice, and providing advocacy across all care settings—from nursing facilities to community-based services. Throughout the past year, our efforts focused on addressing systemic challenges while leveraging opportunities to enhance the quality of life for those we serve.

IDENTIFIED CHALLENGES:

- The changing landscape of long-term services and supports in Connecticut presented **challenges to ensuring residents' rights to informed choice, health, safety, and well-being**, regardless of the care setting.
- As the composition of our long-term care communities continues to evolve, we face the challenge of ensuring that these communities are **inclusive, welcoming, and accepting of all residents**, regardless of background or identity. The growing diversity in care settings requires a more intentional approach to fostering inclusivity.
- Facility closures created **logistical and emotional challenges** for residents, including proximity to support systems and access to safe transitions.
- The complexity of **involuntary discharges** grew, adding strain to the advocacy efforts of the LTCOP, and external barriers, such as housing availability and document retrieval, hindered successful transitions.

IDENTIFIED OPPORTUNITIES:

These challenges provided an opportunity for growth and advocacy:

- We expanded the **Community Ombudsman Program** to advocate for residents in home- and community-based settings, reinforcing their right to receive care in the least restrictive environment possible.
- The LTCOP took an active role in Connecticut's **Rightsized Rebalancing Steering Committee**, contributing to the state's efforts to rebalance the long-term services and supports system and advocate for informed choice.
- Our collaboration with national advocacy partners focused on addressing systemic issues, such as discharge rights and involuntary transfers, while supporting legislative efforts to protect residents.

PROGRESS AND SOLUTIONS 2023-2024:

In response to the challenges and opportunities identified in 2023, we made significant progress:

- **Home- and Community-Based Services (HCBS) Compliance:** We saw an increase in the number of Residential Care Homes complying with the **HCBS settings rule**, enabling them to offer HCBS waivers and expand care options for residents.
- **Discharge Rights:** We continued discussions with national advocacy partners to promote the creation of a **national discharge portal**, ensuring transparency and consistency in discharge processes. Additionally, we maintained advocacy efforts around involuntary discharges by establishing a **data portal** that tracks and analyzes involuntary transfers, informing our push for policy and legislative changes.
- To address the evolving **inclusivity** challenge, the Ombudsman Program partnered with **Elion Caspi** to reevaluate the fear of retaliation experienced by residents in long-term care facilities. This partnership was part of Caspi's project titled "A Bridge Over Scary Water: Ombudsman Program Strategies and Barriers in Addressing Residents' Fear of Retaliation in Long-Term Care Homes".

The project, funded by the LTCOP, involved interviews with 50 Ombudsman representatives from 32 states. The final report, submitted on September 30, 2024, is the largest known project addressing solutions to this long-standing issue in long-term care homes. The insights from this project are foundational for our next steps in tackling fear of retaliation in these settings.

- **Resident Rights in Admissions and Closures:**
 - Legislative approval now prohibits facilities from denying admission to individuals based on **mental health treatment history**, categorizing such refusals as discrimination.
 - **Nursing facilities** are now required to accept residents during emergencies, including closures or evacuations, subject to bed availability. This ensures that, as much as possible, no individual is left without care during critical times.
- **Emergency Preparedness:** The state transitioned from the **Mutual Aid** system to the **Protect Advisor** provider emergency preparedness program, enabling real-time tracking of facility bed availability and improving emergency response efficiency.

- **Opioid Epidemic and Complex Care:**

Our staff participated in interagency training on **Medication for Opioid Use Disorder (MOUD)** to ensure safe transitions from hospitals to nursing homes and community settings, mitigating relapse risk and ensuring appropriate treatments. Legislative changes were also enacted to address the stigma surrounding mental health treatment history in admissions.

- **Resources for Social Workers:** We developed and distributed handouts for new social workers in nursing facilities, focusing on **important discharge documents** and **community waiver**

programs like Money Follows the Person (MFP). The **Important Discharge Documents Checklist** is a key tool that helps residents and staff organize vital documents needed for transitions, medical appointments, and emergency care.

- **Community Ombudsman Program**

Expansion: The inclusion of an additional Community Ombudsman enabled us to enhance our advocacy efforts for individuals receiving care in home- and community-based settings. This growth allowed us to better ensure their rights, improve access to services, and support care in the least restrictive environments.

“

Fear is retaliation in itself. It psychologically affects the resident internally. They're dependent on staff in the facility and they feel helpless.

”

– Elion Caspi, lead author, “A Bridge Over Scary Water: Ombudsman Program Strategies and Barriers in Addressing Residents’ Fear of Retaliation in Long-Term Care Homes”

Ongoing Challenges & Opportunities 2024

Despite the progress made in 2023, several challenges remain for the Long Term Care Ombudsman Program (LTCOP):

Challenge:

Fear of Retaliation and the Need for Inclusive Communities: Many residents continue to experience fear of retaliation when raising grievances, preventing them from voicing their concerns. This fear is often exacerbated in environments that do not feel inclusive or supportive of diverse perspectives and experiences. Building truly **inclusive communities** within long-term care settings—where all residents, regardless of their background, identity, or health status, feel welcomed and respected—is essential to reducing this fear. By fostering an environment of inclusivity, we can empower residents to speak up without fear of retaliation, ensuring that their concerns are heard and addressed. This ongoing challenge emphasizes the need for updated, engaging training and advocacy tools that not only focus on the mechanics of raising grievances, but also promote a culture of inclusivity and safety for all residents.

Opportunity:

Revitalization of Fear of Retaliation Training: There is an opportunity to modernize and make the **fear of retaliation training** more “evergreen” and continuously relevant. This update would empower residents to raise concerns without fear and build their confidence to advocate for themselves in a safer, more supportive environment.

Challenge:

Facility Closures and Transitions: The logistical challenges posed by facility closures, particularly in nursing homes and Residential Care Homes (RCHs), remain significant. These closures often force residents to move far from their support systems, making it difficult to ensure a smooth transition and proper coordination of transportation during relocations.

Challenge:

Personal Needs Allowance (PNA) Adjustments: Despite a previous increase in the PNA for residents in nursing homes, the lack of automatic, ongoing adjustments tied to the **Cost of Living Adjustment (COLA)** has left many residents struggling to afford basic personal items. Rising inflation continues to erode their purchasing power, limiting their ability to maintain a dignified existence.

Opportunity:

Legislative Reforms for Discharge Notice Rights and Emergency Preparedness: Legislative reforms can be pursued to align the **discharge notice rights** of RCH residents with those of nursing homes. Additionally, there is a chance to strengthen **emergency preparedness standards** to ensure nursing homes fully participate in emergency networks and improve coordination during closures or evacuations.

Opportunity:

Automatic PNA Increases: A clear legislative opportunity exists to advocate for **automatic PNA increases** tied to **COLA**. This would ensure that residents can maintain their purchasing power and meet their personal needs despite inflation, helping secure their right to a dignified life.

Challenge:

Home and Community-Based Services (HCBS)

Settings Rule Compliance: A number of RCHs still do not meet the standards required for participation in **HCBS waivers**. Ensuring compliance across all facilities remains a priority to expand access to community-based care options for residents.

Challenge:

Pre-Dispute Arbitration Agreements: Nursing homes and RCHs continue to solicit or enforce **pre-dispute arbitration agreements** from residents, which can prevent them from seeking justice through the courts in cases of abuse, neglect, or inadequate care. These agreements often limit transparency and may pressure residents or their representatives into signing without fully understanding the consequences.

Opportunity:

Educational Expansion for HCBS Waiver

Compliance: Continued efforts to improve **HCBS settings rule compliance** present an opportunity to expand access to community-based care. Providing targeted training and resources to non-compliant RCHs will help ensure more facilities meet the necessary standards, aligning with the state's goals for long-term care rebalancing.

Opportunity:

Elimination of Pre-Dispute Arbitration Agreements:

There is a strong opportunity to push for the elimination of **pre-dispute arbitration agreements**, giving residents and their families full access to legal recourse. This would promote transparency, fairness, and greater accountability within long-term care facilities.

Challenge:

Civil Monetary Penalties for Abandonment:

The current civil monetary penalty of \$100 for abandonment in healthcare facilities is inadequate to deter neglectful behavior. This penalty does not reflect the severity of harm caused by abandonment, leaving residents vulnerable and failing to hold facilities accountable.

Opportunity:

Increase in Civil Penalties for Abandonment:

Increasing the **civil monetary penalties for abandonment** represents a critical opportunity to improve protections for residents. By raising the financial consequences for neglectful behavior, facilities would be compelled to prioritize safety and care quality, reducing instances of abandonment.

Recommendations for 2025

In light of these opportunities and challenges, the LTCOP proposes the following specific recommendations to improve the quality of care and advocacy for individuals receiving long-term services and supports in Connecticut:

**FEAR OF
RETALIATION
TRAINING
REVITALIZATION**

Recommendation:
Revitalize and modernize the fear of retaliation training to make it more engaging for both residents and staff. This updated training should be regularly refreshed to empower residents to raise grievances without fear of retaliation.

Rationale:
Fear of retaliation remains a major barrier preventing residents from voicing concerns. Updated, continuous training will help residents feel safer and more supported when raising issues, leading to a better quality of life.

**ALIGNMENT OF
DISCHARGE
NOTICE RIGHTS**

Recommendation:
Align the discharge notice rights for Residential Care Homes (RCHs) with those of nursing homes to ensure equal protection for all residents facing discharge.

Rationale:
Consistency in discharge processes across care settings is essential to protecting resident rights and ensuring fair treatment. Legislative reform will help close this gap, offering stronger protections for residents in all care settings.

**ADDRESSING
INVOLUNTARY
DISCHARGES
AND EMERGENCY
PREPAREDNESS**

Recommendation:
Establish clear emergency response standards that ensure nursing homes fully participate in emergency networks, particularly during closures or evacuations. This includes creating standardized procedures for handling involuntary discharges during such events.

Rationale:
Facility closures and evacuations can severely disrupt residents’ lives. Standardized approaches to discharges and emergency preparedness will help protect residents and ensure timely, safe placements.

**AUTOMATIC
PERSONAL NEEDS
ALLOWANCE (PNA)
ADJUSTMENTS**

Recommendation:

Introduce legislation that ties PNA increases to Cost of Living Adjustments (COLA) to help residents in nursing homes keep pace with inflation and afford basic personal items.

Rationale:

Inflation continues to reduce the purchasing power of residents, many of whom already struggle to afford necessities. Tying the PNA to COLA will ensure that residents maintain their standard of living.

**ELIMINATION OF
PRE-DISPUTE
ARBITRATION
AGREEMENTS**

Recommendation:

Push for legislation prohibiting pre-dispute arbitration agreements in nursing homes and RCHs, ensuring that residents and families can access the court system for cases of abuse, neglect, or substandard care.

Rationale:

Pre-dispute arbitration agreements limit residents' legal rights and reduce transparency. Eliminating these agreements will ensure that residents have access to justice and accountability.

**INCREASED CIVIL
PENALTIES FOR
ABANDONMENT**

Recommendation:

Amend Connecticut's regulations to significantly increase the civil monetary penalty for abandonment, raising the penalty to reflect the severity of harm caused by neglectful behaviors.

Rationale:

The current penalty of \$100 is insufficient to deter abandonment and other neglectful actions. A higher penalty will incentivize facilities to meet their obligations and protect residents.

**ONGOING
EDUCATION FOR
HCBS WAIVER
COMPLIANCE**

Recommendation:

Continue educational efforts to improve HCBS settings rule compliance by providing targeted resources and training to RCHs that have not yet met the necessary standards for HCBS waivers.

Rationale:

Expanding access to HCBS waivers will improve care quality and options for residents, enabling more people to receive care in community settings in line with Connecticut's long-term care rebalancing goals.

By addressing these challenges through focused opportunities and concrete recommendations, the LTCOP will continue to enhance its advocacy for long-term care residents, ensuring their rights and well-being are upheld in all care environments across Connecticut.

Policy, Regulatory, & Legislative Recommendations

A BRIEF OVERVIEW: THE 2024 CONNECTICUT LEGISLATIVE SESSION

The 2024 Connecticut Legislative Session, which ran from February 7, to May 8, marked a pivotal period for advancing significant policy changes in long-term care.

On February 29, and March 5, 2024, the Long Term Care Ombudsman Program (LTCOP), the Executive Board (E-Board), statewide Family Council, and various advocacy groups convened at the Legislative Office Building to participate in public hearings on several critical nursing home reform bills, including comprehensive measures such as HB 5001 and HB 5046. The primary objective was to highlight the persistent challenges faced by long-term care residents in Connecticut; and to advocate for greater transparency, accountability, and quality of care.

While not all proposed bills were passed, the session resulted in the enactment of several key reforms aimed at improving the quality, choice, and transparency of care. These legislative successes exemplify strong bipartisan collaboration across multiple committees. The LTCOP and the Executive Board of the Statewide Coalition of Presidents of Resident Councils extend their sincere appreciation to the Speaker of the House and the Aging Committee. Their efforts have further demonstrated an unwavering commitment to meeting the

needs of older adults and those in long-term care across the state.

The implementation of these reforms is anticipated to not only generate cost savings, but to also significantly enhance the quality of life for older adults and individuals in long-term care, promoting a more dignified and independent lifestyle within their chosen communities.

NOTABLY, THE SESSION RESULTED IN THE FOLLOWING KEY LEGISLATIVE MEASURES:

Enhanced Privacy Measures: The session implemented new rules limiting room occupancy to no more than two beds, aimed at reducing overcrowding and increasing privacy for residents.

Electronic Nursing Facility Waiting Lists: A new mandate requires nursing facilities to transition to an electronic format for waiting lists, enhancing the accuracy and transparency of the admissions process.

Promoting Best Practices and Care Comparisons: The legislature mandated that links to the Medicare Nursing Home Care Compare website be displayed on both the Department of Social Services (DSS) and Department of Public Health (DPH) websites. Additionally, the creation of a Connecticut-specific nursing home dashboard was initiated to help residents and their families make more informed choices about care facilities.



The Ombudsman not only aids in resolving issues more swiftly than formal grievance procedures, but in my experience, they play an important role in educating both residents and staff about our rights and the facility's responsibilities.

—Bobby Willis, Resident



Development of a Centers of Excellence

Program: This program was created to incentivize nursing homes that meet specific evidence-based standards for high-quality, person-centered care.

THE SESSION ALSO ADDRESSED CRITICAL ISSUES OF FAIRNESS AND SAFETY:

Prohibition of Discrimination Based on Mental Health Treatment History: The new laws prohibit discrimination in admissions based on a history of mental health treatment, ensuring equal access to care for all residents.

Workplace Violence Prevention Standards: Enhanced standards were introduced to safeguard both residents and staff from violence, creating safer care environments.

Transfer of Residents from Closing Facilities: The legislature now requires nursing homes to admit residents transferring from facilities that are closing, without regard to waiting lists, to minimize the risk of transfer trauma and help residents remain in their communities of origin.

Additionally, **regulatory authorities were given enhanced powers** to discipline facilities that fall short in care practices, ensuring accountability and maintaining high care standards.

Moreover, these recent legislative changes have significantly enhanced the **flexibility and responsiveness of the Ombudsman Program**, ensuring that individuals receiving care can access essential services more rapidly and in their preferred settings.

Collectively, these measures improve the operational transparency, safety, and quality of care in Connecticut's nursing, residential, and community care settings, thereby enhancing the quality of life for older populations.

Summary of Key Legislative Bills Passed in the 2024 Connecticut Legislative Session

HB 5001: SUPPORTING CONNECTICUT SENIORS AND IMPROVING NURSING AND HOME-BASED CARE (PUBLIC ACT 24-39)

This comprehensive bill addresses several aspects of long-term care and home care improvements, aiming to enhance transparency, care quality, and resident protections. Key provisions include:

Home Care Provider Registry: The bill mandates the creation of a state-run home care provider registry by January 1, 2025. The registry will be available online and will list qualified providers to promote awareness, provider recruitment, and retention.

Quality of Care Links: The bill requires the Department of Social Services and the Department of Public Health to include direct links to Medicare's Care Compare tool to enable easier access for families when assessing nursing home quality.

Expansion of Fingerprinting Locations: To enhance background checks for home care and health service providers, the bill expands fingerprinting locations statewide.

Identification Requirements: From October 1, 2024, all home health care agency employees must wear ID badges during appointments to ensure better service verification and security.

Presumptive Medicaid Eligibility: Establishes a system for presumptive Medicaid eligibility

for home care applicants, allowing them to receive care for up to 90 days while their full eligibility is determined.

HB 5046: PROMOTING NURSING HOME RESIDENT QUALITY OF LIFE (PUBLIC ACT 24-141)

This bill focuses on enhancing the quality of life for nursing home residents by setting clear standards for care and management. Key provisions include:

Room Capacity Limits: As of July 1, 2026, no new nursing home residents can be placed in rooms with more than two beds, reducing overcrowding and improving privacy.

Nursing Home Waiting Lists: Nursing homes must admit residents transferring from facilities that are closing, regardless of their waiting list position, to minimize the risk of transfer trauma.

Enforcement of State Laws: Extends penalties for nursing homes that violate state laws, ensuring consistency with penalties for violations of federal laws.

MRC Homes: Requires Managed Residential Communities (MRCs) to include fee adjustment information in their residency agreements, provide 90 days' notice for fee increases, and offer refunds for certain fees if they are unable to meet a resident's needs.

Fee Disclosure: Assisted Living Services
Agencies must disclose fee increases at least 60 days before they take effect and provide a history of fee increases for the past three years if requested.

Nursing Facility Management Oversight:
Expands the criteria for issuing nursing facility management certificates and increases penalties for non-compliance.

SB 1: CONCERNING THE HEALTH AND SAFETY OF CONNECTICUT RESIDENTS (PUBLIC ACT 24-19)

This bill strengthens health and safety protections in nursing homes and other healthcare facilities. Key provisions include:

Workplace Violence Prevention: Requires healthcare facilities to adopt and implement workplace violence prevention standards, which may also be a condition for Medicaid reimbursement.

Combating Loneliness and Isolation:
Establishes working groups to address loneliness and isolation among older adults, including a pilot program that uses technology to foster social engagement.

Direct Care Definition: Establishes a statutory definition for “direct care,” which includes hands-on tasks like feeding, bathing, toileting, and lifting, ensuring these tasks are included under minimum staffing levels.

Ambulance Prior Authorization:
Prohibits health carriers from requiring prior authorization for medically necessary ambulance transport to hospitals, ensuring timely access to emergency care.

Peer-Run Respite Center: Requires the Department of Mental Health & Addiction Services to establish a peer-run respite center to provide support services to adults experiencing distress during a mental health crisis.

Mental Health Admissions: Prohibits nursing homes from denying admission solely because an individual has received mental health services in the past, addressing potential discrimination.

SB 308: IMPLEMENTING TASK FORCE RECOMMENDATIONS FOR WHEELCHAIR REPAIR (PUBLIC ACT 24-58)

This bill introduces new regulations to improve the timely repair of wheelchairs, enhancing service quality for individuals relying on these devices. Key provisions include:

Timely Repair Requirements: Requires wheelchair dealers to repair wheelchairs within 10 business days, provided the consumer has made the wheelchair available and necessary prior authorizations have been obtained. Repairs must be performed at the consumer’s home if requested.

Complaint Mechanism: The Office of the Healthcare Advocate will maintain a complaint line for repair issues and report annually to legislative committees.

Reporting Requirements: Dealers contracting with the Department of Social Services must report statistics on repair times annually to enhance oversight.

No New Prescriptions for Repairs: Prohibits the requirement of new prescriptions or prior authorizations for repairs, unless the original prescription is older than five years.

CRT and Wheelchair Repair Advisory

Council: Establishes a council to monitor and recommend improvements to wheelchair repairs, ensuring timely service for users.

HB 5457: NURSING HOME WAITING LISTS (PUBLIC ACT 24-17)

This bill mandates electronic waiting lists for nursing homes to improve transparency and streamline the admissions process. Key provisions include:

Electronic Waiting Lists: Requires nursing homes to maintain their waiting lists in an electronic format by July 1, 2025.

Non-Discrimination and Admission Order:

Nursing homes must process admissions in the order applications are received, and they are prohibited from discriminating

against indigent applicants based on their payment source.

Active Management: Nursing homes must periodically confirm applicants' interest in remaining on the list and can remove unresponsive applicants.

HB 5308: ABSENTEE VOTING FOR NURSING HOME RESIDENTS (PUBLIC ACT 24-34)

This bill ensures that nursing home residents can still participate in elections, even if they fall ill shortly before the election. Key provisions include:

Absentee Ballots: Allows nursing home and hospital patients who become ill within six days before an election to vote via absentee ballot.

Appointment of a Designee: Residents can appoint a designee to deliver the absentee ballot, ensuring that they can participate in the voting process despite health issues.

HB 5146: DISCLOSURES OF FINANCIAL RECORDS (PUBLIC ACT 24-84)

This bill ensures that financial institutions provide customer financial records to the Department of Social Services within 20 days upon receiving a signed certification, speeding up the eligibility determination process for Medicaid and other state aid services.

National Activities 2024

The Long Term Care Ombudsman Program (LTCOP) actively supports several national legislative initiatives that aim to improve the quality of care and protect the rights of individuals receiving long-term services and supports. Our key advocacy efforts for 2024 include:

National Essential Caregivers Bill: We strongly support the passage of this bill, which would ensure that individuals in long-term care settings have the right to designate essential caregivers, even during public health emergencies. This legislation is critical to maintaining continuity of care and connection by allowing essential caregivers to provide physical and emotional support to their loved ones, regardless of broader restrictions that may be in place during crises.

Prohibition of Mandatory Arbitration Agreements: LTCOP advocates for the elimination of mandatory arbitration clauses in long-term care contracts. These clauses often prevent residents from pursuing legal action in cases of abuse, neglect, or inadequate care. By eliminating mandatory arbitration, residents and their families would retain full access to the legal system, ensuring that they can seek justice and hold facilities accountable when necessary.

Centers for Medicare & Medicaid Services' (CMS) Minimum Staffing Requirements:

We support the CMS's newly established minimum staffing standards for nursing homes. These standards include requirements for registered nurse coverage and specific hours of care per resident per day, which are essential to ensuring that residents receive adequate and appropriate care.

Reauthorization of the Older Americans Act (OAA): LTCOP continues to advocate for updates to the regulations associated with the reauthorization of the OAA. These updates aim to strengthen vital programs and services that support older adults and their caregivers, ensuring that they continue to receive the necessary resources and protections.

“While our role in nursing home closures is vital and not anything I would change, an increase in staffing for the Long Term Care Ombudsman Program is needed to continue to provide the high level of support to the residents of Connecticut that we serve.”

- Cynthia Scott, RO, oversaw the closure of Abbott Terrace in 2024

Closures & Evacuations

Closures

Nursing homes

Nursing Home and Residential Care Home Closures From 10/1/23 – 9/30/24

FACILITY NAME	TOWN	BED COUNT	DATE
CHESTERFIELDS HEALTH CARE CENTER	CHESTER	60	11/01/2023
WATERBURY GARDENS NURSING AND REHAB	WATERBURY	135	11/30/2023
CRESTFIELD REHAB CENTER & FERNWOOD MANOR	MANCHESTER	95	12/30/2023
FARMINGTON CARE CENTER	FARMINGTON	105	12/29/2023
MIDDLESEX HEALTHCARE CENTER	MIDDLETOWN	150	02/09/2024
TRINITY TERRACES	WATERTOWN	46	05/07/2024
ABBOTT TERRACE	WATERBURY	205	PENDING
TOTAL		796	

Residential Care Homes

FACILITY NAME	TOWN	BED COUNT	DATE
EVANGELICAL BAPTIST HOME	ASHFORD	25	03/01/2024
TOTAL		25	

Evacuations

Nursing Home and Residential Care Home Evacuations From 10/1/23 – 9/30/24

FACILITY NAME	TOWN	BED COUNT	DATE
HIGH CHASE LLC	WILLINGTON	36	2/26/2024
TOTAL		36	

Receiverships

FACILITY NAME	TOWN	OUTCOME
WATERBURY GARDENS	WATERBURY	CLOSED

Bankruptcies

There were no bankruptcies in FY 2024.

Closing Statement & Acknowledgments

As we conclude the 2024 Annual Report of the Connecticut Long Term Care Ombudsman Program (LTCOP), we reflect with immense pride on a year marked by significant progress and critical advocacy. Our work this year has been shaped by the collective effort of so many who are deeply committed to safeguarding the dignity, rights, and well-being of those in long-term care across our state.

First and foremost, we extend **special recognition and heartfelt thanks** to the **Speaker of the House**, the **Governor**, and the **Aging Committee** for their outstanding leadership and dedication during this year's legislative session. Your vision and unwavering commitment have resulted in transformative legislative actions that will protect and elevate the lives of older adults and those receiving long-term care. The reforms achieved through this session exemplify the spirit of bipartisan collaboration, and your work will leave a lasting, positive impact on Connecticut's care landscape for years to come.

We also express our deepest gratitude to **Commissioner Amy Porter** and the team at **Aging and Disability Services (ADS)**. Your tireless partnership with LTCOP has been invaluable in advancing our shared mission of advocating for older adults and individuals with disabilities. Together, we have created pathways to ensure that all residents in long-term care receive the support and protections they deserve.

To the **Executive Board of the Statewide Coalition of Presidents of Resident Councils**, we are truly inspired by your dedication and advocacy on behalf of your fellow residents. Your leadership and input have been instrumental in shaping legislative priorities and ensuring that the voices of residents remain at the heart of our work. This year, your collective strength has amplified the call for change, and we are grateful for the partnership and passion you bring to our shared mission.

We would also like to recognize and thank our **volunteer Resident Advocates**. Together with our LTCOP team, who are the lifeblood of our program. Your commitment to standing by residents, your unwavering dedication, and the countless hours you spend listening, supporting, and advocating for those in need cannot be overstated. You are the hands and hearts that bring our mission to life every day, and your work has touched the lives of so many in profound ways.

A special acknowledgment goes to the **family members of residents**. Your courage in sharing your stories and insights has been invaluable in helping us better understand the realities of long-term care. Your voices have been a driving force behind many of our advocacy efforts, and we thank you for standing alongside us as we work to create a more compassionate and accountable care system.

We also want to express our gratitude to **our colleagues across state agencies** and the **Office of Policy and Management (OPM)**. Your collaborative spirit and willingness to engage in meaningful discussions have been crucial as we navigate the complexities of long-term care reform together. Your expertise and support have helped guide us in shaping policies that truly reflect the needs of those we serve.

Our appreciation extends to our **national and external advocacy partners**—including **AARP**, **The National Consumer Voice for Quality Long Term Care**, and other organizations—who have helped us align our state-level work with broader national efforts to reform long-term care. Your expertise and tireless advocacy at the national level have been critical in helping us push for systemic change here in Connecticut.

Finally, we would be remiss if we did not acknowledge our **legislative champions** in the **Aging Committee**, **Human Services Committee**, and **Public Health Committee**. Your leadership and commitment to addressing the needs of long-term care residents have been critical to achieving legislative successes this year. Your work in passing key reforms has not only advanced residents' rights, but has also set the stage for a brighter and more equitable future in long-term care.

As we close this year, we recognize that while much has been accomplished, the road ahead is still filled with challenges. However, we remain confident that with the ongoing support of this dedicated community—legislators, advocates, residents, and families alike—we will continue to make strides toward a more just, compassionate, and responsive long-term care system. Together, we are building a future where the dignity, rights, and well-being of all long-term care residents are respected and upheld.

Thank you all for your partnership, your tireless efforts, and your unwavering commitment to improving the lives of Connecticut's long-term care residents.

Sincerely,

The Connecticut Long Term Care
Ombudsman Program

Prepared By:
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SCAN HERE 

