The Silver Panther Newsletter WINTER EDITION 2017



Statewide Coalition of Presidents of Resident Councils
Executive Board Members
Grace Bligé-Curry, Karen Hawley,
Mary DePasquale, Helen Fitch,
Charlene Paquin, Jeanette Sullivan-Martinez,
Ann Nichols, Dave Thompson

LEGISLATIVE UPDATE

The Legislative Office Building is bustling with activity as the new lawmaking session is underway. There are hundreds of bills being proposed and discussed. Nancy Shaffer, State Ombudsman and Dan Lerman, Regional Ombudsman are closely monitoring the developments each day and follow the progress of bills important to those in long term care settings, as they move through the various committees. See below, for a sample of the legislation that has been proposed.

SB 326-An act concerning access to medical records and the fees charged for medical records. (*State Ombudsman provided testimony*)

SB 811 An act concerning the Patients' Bill of Rights for Long Term Care Residents/focus on room transfers/ study. (State Ombudsman provided testimony)

SB 770 An act concerning an increase in the Personal Needs Allowance (State Ombudsman provided testimony)

HB 5664 An act concerning the requirement to install video cameras in rooms of non-verbal nursing home residents.

HB 7029 An act concerning the protection of elderly persons of actual or suspected financial abuse. (*State Ombudsman provided testimony*)

HB 6984 An act concerning requiring the State Ombudsman to investigate concerns of recipients of home and community based services. (State Ombudsman provided testimony)

If you are interested in following the progress of the legislative session please visitwww.cga.ct.gov and insert the number of the proposed bill into "bill search.

BEST PRACTICE

(Save our Personal Needs Allowance)

In this difficult budget climate the governor has proposed a decrease in nursing home resident's personal needs allowance from the current \$60.00 to \$50.00 per month. The LTCOP created petitions that were included in the VOICES packet in preparation for this development. We are including a copy of that petition and encourage you to consider obtaining signatures and utilizing some of the great tips below for maximizing participation.

Best Practices tips for collecting signatures:

- At your monthly resident council meetings explain the petition and have residents sign
- Collaborate with families on behalf of the resident's that cannot sign.
- At fund raisers have the petition available for signatures.
- Work with your therapeutic recreational director to have the petition available for signature during activities.
- Display the petition at the front desk to alert family and friends of this proposal and to encourage participation.
- One facility organized a social event with a raffle and plans on having the petition available for signature.

If you would like to share a Best Practice that you're doing at your facility, please E-mail it to:

Best Practice Committee at <u>Brenda.Torres@ct.gov</u>

FOR RETURNING SIGNED PETITIONS

FAX: 860 424-4808

Department on Aging –Long Term Care Ombudsman Program

55 Farmington Avenue

Hartford, CT 06105

PETITION

TO The Connecticut General Assembly

WHEREAS the cost of living in Connecticut continues to rise and the economic climate has forced a decrease in personal needs allowance for nursing home residents, making essentials such as sufficient proper clothing a challenge to obtain

WE the undersigned petition the Connecticut General Assembly as follows: -

Maintain the current \$60 Personal Need Allowance

Name (printed)	Address (printed)	Signature			



FACT SHEET

ASSESSMENT AND CARE PLANNING: THE KEY TO QUALITY CARE

Every person in a nursing home has a right to good care, under the law. The law says the home must help people "attain or maintain" their highest level of well-being - physically, mentally and emotionally. To give good care staff must assess each resident and plan care to support each person's life-long patterns, and current interests, strengths and needs. Resident and family involvement in care planning gives staff information they need to make sure residents get good care and the care they deserve.

WHAT IS A RESIDENT ASSESSMENT?

Assessments gather information about how well residents can take care of yourselves and when you need help in "functional abilities" -- how well you can walk, talk, eat, dress, bathe, see, hear, communicate, understand and remember. Staff also about residents' habits, activities relationships so they can help residents live more comfortably and feel more at home. assessment helps staff look for what is causing a problem. For instance, poor balance could be caused by medications, sitting too much, weak muscles, poor-fitting shoes, a urinary infection or an ear ache. Staff must know the cause in order to give treatment.

WHAT IS A PLAN OF CARE?

A plan of care is a strategy for how the staff will help a resident. It says what each staff person will do and when it will happen (for instance—The nursing assistant will help Mrs. Jones walk to each meal to build her strength). Care plans must be reviewed regularly to make sure they work and must be revised as needed. For care plans to work, residents must feel like they meet your needs and must be comfortable with them. Care plans can address any medical or non-medical problem (example: incompatibility with a roommate).

WHAT IS A CARE PLANNING CONFERENCE?

A care planning conference is a meeting where staff and residents/families talk about life in the facility-meals, activities, therapies, personal schedule, medical and nursing care, and emotional needs. Residents/families can bring up problems, ask questions, or offer information to help staff provide care. All staff who work with a resident should be involved--nursing assistants, nurse, physician, social worker, activities staff, dietician, occupational and physical therapists.

WHEN ARE CARE PLANNING CONFERENCES HELD?

Care planning meetings must occur every three months, and whenever there is a big change in a resident's physical or mental health that might require a change in care. The care plan must be completed within 7 days after an assessment. Assessments must be completed within 14 days of admission and at least once a year, with reviews every three months and when a resident's condition changes.

WHAT SHOULD YOU TALK ABOUT AT THE MEETING?

Talk about what you need, how you feel; ask questions about care and the daily routine, about food, activities, interests, staff, personal care, medications, and how well you get around. Staff must talk to you about treatment decisions, such as medications and restraints, and can only do what you agree to. You may have to be persistent about your concerns and choices. For help with problems, contact your local ombudsman, advocacy group or others listed on the next page.

HOW RESIDENTS AND THEIR FAMILIES CAN PARTICIPATE IN CARE PLANNING

Residents have the right to make choices about care, services, daily schedule and life in the facility, and to be involved in the care planning meeting. Participating is the only way to be heard.

Before the meeting:

- Tell staff how you feel, your concerns, what help you need or questions you have; plan your agenda of questions, needs, problems and goals for yourself and your care.
- Know, or ask your doctor or the staff, about your condition, care and treatment.
- Ask staff to hold the meeting when your family can come, if you want them there.

During the meeting:

- Discuss options for treatment and for meeting your needs and preferences. Ask questions if you need terms or procedures explained to you.
- Be sure you understand and agree with the care plan and feel it meets your needs. Ask for a copy of your care plan.
- Ask with whom to talk if you need changes in it.

After the meeting:

See how your care plan is followed; talk with nurse aides, other staff or the doctor about it.

Families:

- Support your relative's agenda, choices and participation in the meeting.
- Even if your relative has dementia, involve her/him in care planning as much as possible. Always assume that s/he may understand and communicate at some level. Help the staff find ways to communicate with and work with your relative.
- Help watch how the care plan is working and talk with staff if questions arise.

A Good Plan Should:

- Be specific, individualized and written in common language that everyone can understand;
- Reflect residents' concerns and support residents' well-being, functioning and rights; Not label residents' choices or needs as "problem behaviors;"
- Use a multi-disciplinary team approach and use outside referrals as needed;
- Be re-evaluated and revised routinely Watch for care plans that never change.

For more information and resources on assessment and care planning, go to www.theconsumervoice.org

National Consumer Voice for Quality Long-Term Care (formerly NCCNHR) is a nonprofit organization founded in 1975 by Elma E. Holder to protect the rights, safety and dignity of American's long-term care residents.

PLEASE WELCOME OUR NEW VOLUNTEER RESIDENT ADVOCATES

The Ombudsman Program is pleased to report that three new volunteer resident advocates have joined the team. The group received specialized training in December 2016 that included learning about the history of Ombudsman work, the laws and statutes that govern skilled nursing homes and the many ways a volunteer can provide vital assistance to the often vulnerable population we serve. The training provided reading and resource materials, case discussions, and culminated in a meeting with the State Ombudsman, Nancy Shaffer January 11th, 2017.

Marsha Goldberg, who is placed at Fresh River in East Windsor is retired from the State of Connecticut, Department of Social Services from her work as a Principal Cost Analyst. Marsha looks forward to volunteering and joined to "educate herself to be of assistance in trying times." Joanne Krekian is placed at Middlesex Health Care Center. Joanne snapped a photo of the Ombudsman posting while visiting a loved one and thought to herself..I would like to do this. Joanne states "while my family was navigating the nursing home system, it was difficult and confusing for us." She hopes to provide visits that empower residents to address issues. Linda Rosen will be volunteering at Governors House in Simsbury. Linda has 35 plus years of working as a highly trained speech pathologist in various settings. Linda states that after many years of working in skilled nursing facilities and listening to the challenges a resident may face, she developed a strong desire to advocate for their needs with problem solving and conflict resolution.

The Ombudsman is grateful for this terrific group of new volunteers and we wish them well in their pursuits! If you or anyone you know is interested in learning about the Volunteer Resident Advocate program please contact us at :1-866-388-1888

LTCOP Retirement News

Michael Michalski, senior regional ombudsman in the Long Term Care Ombudsman Program (LTCOP) has announced his retirement from state service. Michael began his career in September of 1994, beginning his tenure in the Waterbury office and then transferring to the Hartford office. Over the years, he's been witness to the LTCOP moving from the former Department on Aging to the Department of Social Services and now, once again, housed within a new Department on Aging, under the direction of Commissioner Betsy Ritter.

Michael has worked with a multitude of residents and nursing home administrators encouraging and fulfilling residents' rights and advocating for resident centered care. He particularly enjoyed speaking with residents and getting their perspective on how their needs could be best met while living in a long term care facility. Michael was an active participant in several key committees, including, Challenging Behaviors, Cultural Change, Fear of Retaliation, Best Practices, Voices Forum, Statewide Coalition of Presidents of Resident Councils.

Michael expressed his gratitude for the assistance of the many volunteer resident advocates that devote many long and challenging hours to improving the quality of care and quality of life for residents living in nursing facilities. Michael also wished to express his thanks to Nancy Shaffer, our State Ombudsman and his colleagues for working closely and cohesively as a team for the common good of Connecticut residents.

Michael was honored at a luncheon at the State Department on Aging and also at a private dinner with the immediate staff of the LTCOP.

Michael will be missed by all who knew him and we wish him well in the pursuit of his new chapter in life.

LONG TERM CARE OMBUDSMAN STAFF & COMMISSIONER RITTER/SDA





MICHAEL & HIS WIFE RUTHIE

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Created by Karen Hawley

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Statewide Coalition of Presidents of Resident Councils (SCPRC)

Executive Board Members

Mary DePasquale Ellis Manor Care

Grace Blige-Curry Newington Health Emeritus Member

Charlene Paquin Grandview Rehabilitation Helen Fitch Valerie Manor

Karen Hawley Geer Memorial Healthcare Emeritus Member Valley Dave Thompson Candlewood Valley Health

Jeanette Sullivan-Martinez Pendleton Healthcare

Ann Nichols Sheriden Woods

NANCY B. SHAFFER - STATE LONG TERM CARE OMBUDSMAN

860-424-5200

Desiree Pina - Administrative Assistant 860-424-5239

CONTACT YOUR REGIONAL OMBUDSMAN

TOLL FREE NUMBER

1-866-388-1888

WESTERN

INTAKE NUMBER 203-597-4181 Sheila Hayden - Intake Coordinator

Regional Ombudsmen Kim Massey, Amber Burke & Patricia Calderone

SOUTHERN

INTAKE NUMBER 860-823-3366 Stephanie Booth - Intake Coordinator

Regional Ombudsmen Brenda Foreman, Dan Lerman & Lindsay Jesshop

NORTHERN

INTAKE NUMBER 860-424-5221 Stephanie Booth/Sheila Hayden - Intake Coordinator

Regional Ombudsmen Brenda Torres & Thomas Pantaleo

