

VOICES 2023



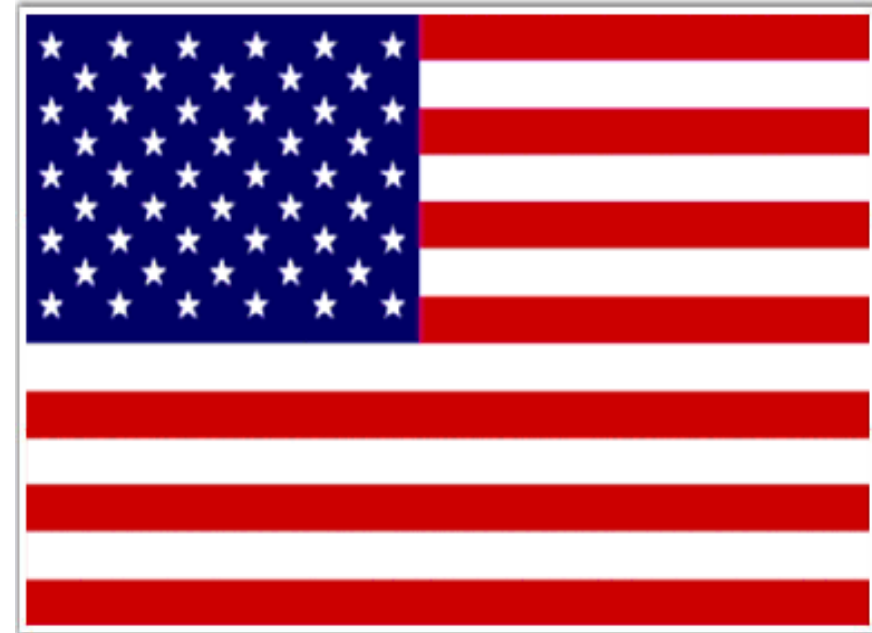
*Receiving Quality Care Through Goals,
Preferences, and Priorities*

**Aging and
Disability
Services**



Pledge of Allegiance

I pledge allegiance to the
flag of the United States of
America and to the
Republic for which it stands;
one Nation under God,
indivisible with Liberty and
Justice for ALL.





Welcome

Mairead Painter
State Long-Term
Care Ombudsman



Opening Remarks

Commissioner Amy Porter
Department of Aging
and
Disability Services

Improving Resident Experiences



**Julie Robison,
Ph.D.**

**Professor of
Medicine, UConn
Center on Aging**

Improving Resident Experiences: UConn Center on Aging Updates

Voices Forum
October 6, 2023

JULIE ROBISON, PHD
UCONN CENTER ON AGING

Overview of 2 New Initiatives

- New statewide nursing home resident and family satisfaction survey (CoreQ)
- Research grant focused on Money Follows the Person, dementia and race/ethnicity

Nursing Home Satisfaction Survey – CoreQ

- UConn Center on Aging will administer a nursing home satisfaction survey to nursing home residents and their families
- CoreQ survey - developed by a gerontologist at West Virginia University
- Independently tested as a valid and reliable measure for nursing home satisfaction and endorsed by the National Quality Forum (NQF)
- Satisfaction is directly linked to quality of care outcomes
- CoreQ will be administered yearly in every Medicaid-funded nursing home in CT
- CT Department of Social Services will use CoreQ results to adjust Medicaid rates paid to nursing homes based on quality of care
- CoreQ is one of several quality of care indicators that CT DSS will use for rate-setting
- Goal: incentive to each nursing home to improve resident and family experience and quality of care

Nursing Home Satisfaction Survey – CoreQ

- UConn Center on Aging research staff will go to every Medicaid-funded nursing home in CT and administer the survey in person to long-stay nursing home residents.
- UConn will survey 20 residents in each nursing home and 20 family members.
- UConn will randomly select the residents and family members who will receive the survey. The nursing home staff will not be involved in selecting who receives the survey.
- Residents with severe cognitive impairment, on hospice or with conservators will not be surveyed, but family members of all long-stay residents are eligible.
- Family members will receive the survey via mail or email, with telephone follow-up.
- 1st year will test the process, 2nd year will affect payment rates

Nursing Home Satisfaction Survey – CoreQ

Survey Questions

Response choices: Poor, Average, Good, Very good, Excellent

- 1) In recommending this facility to your friends and family, how would you rate it overall?
- 2) Overall, how would you rate the staff?
- 3) How would you rate the care you (your family member) receive(s)?

Researchers tested 22 questions and found the combined score of these items represent overall resident satisfaction with the nursing facility

Nursing Home Satisfaction Survey – CoreQ

Questions?

Overview of 2 New Initiatives

Second initiative:

Research grant focused on Money Follows the Person, dementia and race/ethnicity

Increasing successful returns to community living from nursing facilities through the Money Follows the Person program

ELLIS DILLON PHD & JULIE ROBISON PHD

UConn Center on Aging

Background

- **Background:** Most people living with dementia want to remain in the community, but they are generally less likely than people without dementia to successfully return to the community following nursing facility stays.
- **The program:** Medicaid's Money Follows the Person (MFP) program has helped over 100,000 individuals nationally return to community living after nursing facility stays. Connecticut has one of the highest rates of participation among over 40 participating states.
- **The problem:** People with dementia are less likely to use the MFP program, but we don't know why. Race and ethnicity also play a role: in Connecticut Black and Hispanic MFP participants are more likely than White participants to complete moves back to the community.
- **Research goal:** To discover what is causing these disparities and recommend ways to improve opportunities to return to community living for everyone who wants to.
- **The study:** National Institute on Aging grant, study period: 2023-2028

Research plan

- 1. In-depth interviews with 48 individuals eligible for MFP (with and without dementia) and 40 of their informal caregivers about the reasons they stayed in the Nursing Facility or moved out.**
 - People who (1) never applied to MFP, (2) applied but did not move out, (3) moved out but returned to a nursing home, and (4) moved out and stayed in the community.
- 2. Ask MFP staff and Nursing Facility staff about their experiences and ideas through focus groups, interviews, and a survey to be administered to all MFP-involved staff.**
- 3. Analyze existing data to find reasons for disparities for people with dementia overall and within racial and ethnic groups.**

Requests for you

This research will be better with advice from nursing home residents on:

- How to recruit older adults and family members/caregivers
- Considerations for interviewing residents in nursing facilities
- How to share what we learned broadly with nursing facilities, residents, and other stakeholders and interested groups

Increasing successful returns through MFP

Questions & Suggestions?

Julie Robison, PhD

jrobison@uchc.edu

UConn Center on Aging



Connecticut Statewide
FAMILY COUNCIL

CTSWFamilyCouncil@gmail.com

THE IMPORTANCE OF FAMILY COUNCILS

Presented By:

Liz Stern.;

The CT Statewide Family Council

WHAT IS A FAMILY COUNCIL?

- An independent, organized group of people living in a long-term care facility that meets on a regular basis to discuss concerns and develop suggestions to improve services or resolve differences within the facility.



RIGHTS OF FAMILY COUNCILS

The Federal Nursing Home Reform Law Says:

42 CFR sec.483.15(c)

- A resident's family has the right to meet in the facility with the families of other residents in the facility.
- The facility must provide a family group, if one exists, with private space.
- Staff or visitors may attend meetings at the group's invitation.
- The facility must provide a designated staff person responsible for providing assistance and responding to written requests that result from group meetings.
- When a family group exists, the facility must listen to the views and act upon the grievances and recommendations of residents and families concerning propose



FAMILY LED FAMILY COUNCILS BENEFIT FAMILIES, RESIDENTS, AND FACILITY PERSONNEL

Open Communication

- Family members feel free to voice concerns without reservation in meetings where staff are not present.
- Gives facilities honest feedback to use for continuous quality improvement efforts.

PURPOSE OF FAMILY COUNCIL

- Gives family members a place to constructively channel their concerns, questions and suggestions within the nursing home setting. This can be alternative to filing complaints with outside agencies such as the ombudsman program or survey agency.
- To focus on collective goals and provide a collective voice regarding concerns and improvements toward quality care.
- Builds trusting relationships between families and staff.

PROMOTING AND ESTABLISHING FAMILY COUNCILS CAN BE CHALLENGING

One challenge faced by many family councils in nursing homes is recruiting and maintaining members.

Once established frequent changes in residents and, therefore, family members, can cause levels of participation to fluctuate and have an impact on the stability of a family council.

***Residents can help by spreading the word about family councils with their loved ones and discussing this at resident council meetings!*

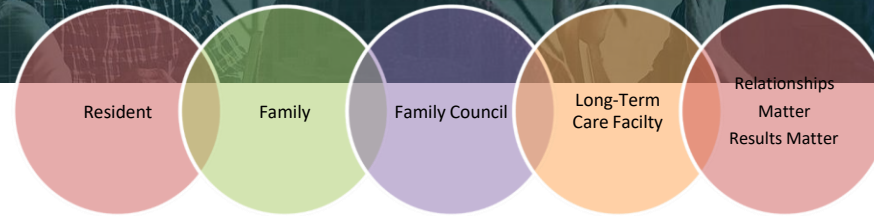
***Can we ask you to spread the word?*

SPREAD THE WORD



- Consider making Family Council discussion on your Resident Council agenda
- Identify a family member/friend who may be interested in learning about Family Council
- Make a Connection with your ombudsman, a willing staff member, or handing out Family Council Info

Inside Your Silver Panther and on Family Council Web Page



Join, Start and Support a Family Council at your loved one's facility!
Meetings are held Quarterly. Additional meetings will be scheduled as needed.

Name: _____
Address: _____
Phone: _____ Email: _____
Resident's Name: _____ Resident's Room #: _____

I am interested in joining the Family Council: Yes No
I am interested in starting a Family Council: Yes No

I am a member of a Family Council and interested in joining the Statewide Family Council
 Yes No

Please indicate if the Family Council Chair/Co may contact you directly Yes No

Please indicate availability for a meeting Morning Afternoon Early Evening

Do you prefer to meet in person virtually?

.....
Please indicate an alternate that could attend the meetings if you are unavailable. They will receive any correspondence sent.

Name: _____
Address: _____
Phone: _____

For more information about the CT Statewide Family Council please visit the webpage at:

<https://portal.ct.gov/LTCOP/State-Wide-Family-Council> or contact

ctswfamilycouncil@gmail.com

Connecticut State Wide Family Council



CTSWFamilyCouncil@gmail.com

THE CT STATEWIDE FAMILY COUNCIL

- Connecticut has a statewide family council which meets monthly to discuss best practice and encourage the growth of family councils throughout the state. (CTSWFC)
- If you are interested in joining, go to the dedicated [CT Statewide Family Council](#) web page. Email CTSWFamilyCouncil@gmail.com or Scan the QR Code for More Information.

RESOURCES FOR FAMILY COUNCILS

- CTLTCOP Family Council Web Page - <https://portal.ct.gov/LTCOP/Resident-and-Family-Councils>
- CTLTCOP State Wide Family Council Web Page - <https://portal.ct.gov/LTCOP/State-Wide-Family-Council>
- Family Council Signup Sheet - [Family Council Sign Up Form](#)
- What is a Family Council Handout - [What is a Family Council?](#)
- National Consumer Voice Family council center contains factsheets and other materials related to family council creation, maintenance, rights under federal law and advocacy. It also has information about family council grants, networking opportunities, other ways to get involved in long-term care advocacy and additional resources. <https://theconsumervoice.org/issues/family/family-council-center>
- Consumer Voice Guide to Leading Effective Family Councils - <https://theconsumervoice.org/uploads/files/family-member/Guide-toEffective-Family-Councils.pdf>
- LTCC Resident and Family Council Resource - <https://nursinghome411.org/wp-content/uploads/2023/05/Family-Council-Resource-Packet-Online-062023.pdf>

Awards

Carol Rosenwald Spirit of Advocacy



Quentin Williams (1983 -2023)
House of Representatives
100th District

Brian Capshaw Rockstar Award



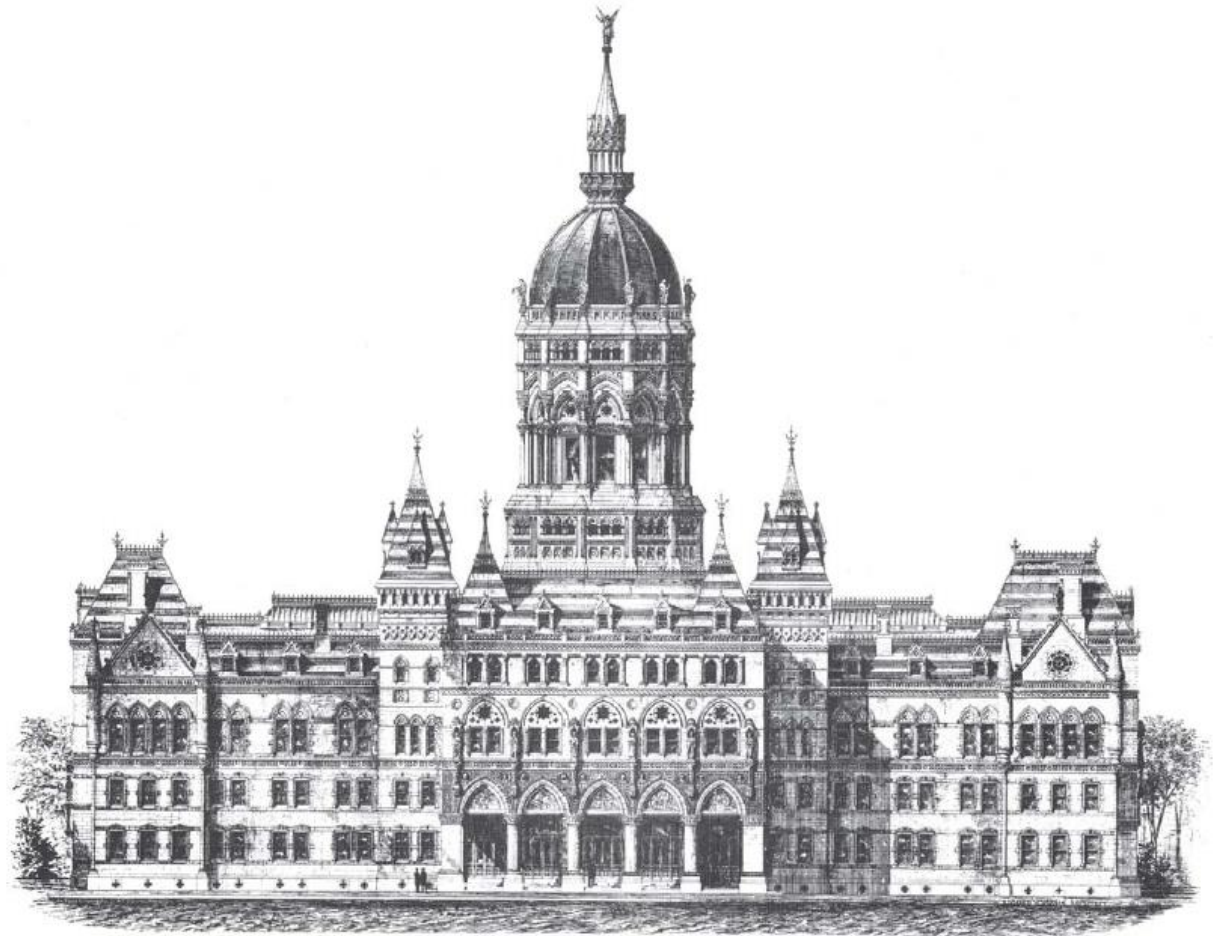
Toby Edelman
Senior Policy Attorney
Center for Medicare Advocacy

A close-up, low-angle shot of a pair of brass scales of justice. The scales are positioned on the left side of the frame, with the pans hanging from a central beam. The background is a gradient of blue, transitioning from a lighter blue on the left to a darker blue on the right. The scales are slightly out of focus, emphasizing the text overlay.

Legislative Update

Legislative Session General Overview

- ▶ Started January 4th and ended June 7th
- ▶ Democrats controlled both the House and Senate by large majorities again this year (98-53 in the House and 24-12 in the Senate).
- ▶ A state budget was approved late session
- ▶ A large 2022-23 state budget surplus and large state rainy day fund cushion
- ▶ The state budget included tax cuts for the first time in decades in CT
- ▶ Other bills related to implementation of early voting, greater phased-in income tax exemptions for retirement income, and gun violence reform



Nursing Homes and LTC

1. Greater Nursing Home Transparency for CT DSS cost reporting
2. Greater Public Availability of such Reports
3. More efficient use of state and federal funds by nursing homes
4. Improved review and requirements for nursing home change of ownership
5. Greater protections for residents related to Involuntary Discharge Notices
6. Many other consumer and resident/family friendly measures



JEANETTE SULLIVAN-MARTINEZ
President
Statewide Coalition of Presidents of Resident Councils

I would like to take a few minutes to walk you through



HUMAN SERVICES AND AGING COMMITTEES
February 16th Joint Public Hearing

At West Side Kids Center, where I'm at and it's been a
still, but they are



HUMAN SERVICES AND AGING COMMITTEES
February 16th Joint Public Hearing



HUMAN SERVICES AND AGING COMMITTEES
February 16th Joint Public Hearing

time, but they figured out how to get me off the



"YOU CAN LOOK AWAY,
BUT THIS IS MY
EVERYDAY!"

Connecticut Long Term Care Ombudsman Program

1-866-388-1888

Key Bills Passed or Adopted This Session

- ▶ **HB 5004** An Act Implementing Early Voting
- ▶ **HB 5781** An Act Concerning Notice of Proposed Involuntary Transfer or Discharge of a Nursing Facility Resident, Family Councils in Managed Residential Communities, Coordination of Dementia Services, Nursing Home Transparency and Homemaker-Companion Agencies
- ▶ **HB 6731** An Act Concerning The Department of Public Health's Recommendations Regarding Change in Ownership of Health Care Facilities
- ▶ **HB 6733** An Act Concerning The Department of Public Health's Recommendations Regarding Various Revisions To The Public Health Statutes

Key Bills Cont

- ▶ **HB 6741** - An Act Improving the Safety of Health Care Providers and Patients,
- ▶ **HB 6775** - An Act Concerning Mandated Reporters
- ▶ **SB 956** - An Act Requiring Discharge Standards Regarding Follow-Up Appointments and Prescription Medications for Patients Being Discharged From A Hospital or Nursing Home Facility
- ▶ **SB 989** - An Act Concerning Nonprofit Provider Retention of Contract Savings, Community Health Worker Medicaid Reimbursement and Studies of Medicaid Rates of Reimbursement, Nursing Home Transportation and Nursing Home Waiting Lists.
- ▶ **SB 1088** - Financial Exploitation of Senior Citizens, Banking
- ▶ **HB 6941** - The State Budget Bill: An Act Concerning the State Budget for the Biennium Ending June 30, 2025, and Making Appropriations Therefor, and Provisions Related to Revenue and Other Items Implementing the State Budget



National Advocacy

CMS Proposed Minimum Staffing Requirement

- Nursing homes would be required to provide only 3 hours of direct care per resident per day. This requirement would include only .55 hours of Registered Nurse (RN) care and 2.45 hours of certified nurse aide (CNA) care. The NPRM failed to propose a minimum for licensed practical nurses (LPNs) who play a critical role in nursing home care.
- Facilities would be eligible for waivers from complying with this minimum if they met certain criteria.
- Implementation of the requirement would be phased in over a 3-year period.
- Additionally, facilities would be required to have an RN on staff 24 hours a day, 7 days a week.
- Nationally, this requirement would be an increase from the current requirement of eight hours per day. However here in Connecticut due to legislation passed in the 2021 legislative session, there is already 24 hour RN nurse requirement.

National Minimum Staffing Standards Resources

- ▶ [Consumer Voice Staffing in Nursing Homes Link](#)
- ▶ [Better Staffing is Achievable](#)
- ▶ [Instructions on how to Submit Comment](#)
- ▶ [Inadequate Staffing During the COVID-19 Pandemic and Its Catastrophic Effects on Nursing Homes Residents](#) (March 2022)
- ▶ [The Need for Higher Minimum Staffing Standards](#) (2016)

This report eviws how nursing homes have serious quality problems, in part, because of inadequate levels of nurse staffing. The report by Charlene Harrington, John F. Schnelle, Margaret McGregor and Sandra F. Simmons discusses the relationship between nursin ghome quality and staffing and the barriers to staffing reform. Multiple studies have demonstrated a need for higher minimum nurse staffing standards in nursing homes as it is shown to have a positive relationship with nursing home quality. Yet, many barriers prevent the implementation of higher staffing standards like concerns about cost and enforcement and strong nursing home industry political opposition.
- ▶ [Appropriateness of Minimum Nurse Staffing Ratios in Nursing Homes - Report to Congress: Phase II Overview: Background, Study Approach, Findings, and Conclusions](#) This purpose of this report is to complete the Report to Congress that was mandated by Public Law 101-508 which required the Secretary to report to the Congress on the appropriateness of establishing minimum caregiver ratios for Medicare and Medicaid certified nursing homes. A Phase I report of preliminary findings was delivered to Congress in July 2000.
- ▶ Nurse Staffing Standards Recommended by Consumer Voice: In 1998, Consumer Voice's members approved what are widely known as the [Consumer Voice Minimum Staffing Standards for nursing homes](#).
- ▶ [Consumer Perspective on Quality Care \(Executive Summary\)](#) This 1985 document is still a seminal study of quality care as defined by the experts -- nursing home residents themselves. It recounts the research, discussions and findings of a Consumer Voice survey of 400 residents in 15 cities and shows their strong endorsement of nurse staffing as the most important component of care.

Looking Forward: Legislative Session 2024



Judy Stein
Executive Director/Attorney



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*Help for
Connecticut
Medicare
Beneficiaries*



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Help for Connecticut Medicare Beneficiaries

Judy Stein, Executive Director/Attorney

October 6, 2023



Center for
Medicare Advocacy

MedicareAdvocacy.org

The Center for Medicare Advocacy, founded in CT in 1986, is a non-profit, non-partisan law organization that works to advance access to comprehensive Medicare, health equity, and quality health care.

Based in Connecticut and DC, with additional attorneys in CA and MA

- Staffed by attorneys, advocates, communication and technical experts, nurse consultant
- Medicare-related education, legal analysis, writing, assistance, and advocacy
 - **Free for Connecticut residents**
- Expertise in Medicare coverage and appeals, and nursing home resident rights
- Systemic change – Policy/Litigation
 - Based on our experience with the problems of real people

MedicareAdvocacy.org

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Services Available for Connecticut Residents

- Medicare-related case evaluations, legal assistance, and advocacy
- Medicare and related education and advocacy
- Resident Rights education and advocacy (**Toby Edelman**)
- CT resources and section on our website,
MedicareAdvocacy.org

<https://MedicareAdvocacy.org/medicare-info/connecticut-consumers-guide/>

(860)456-7790 / (800)262-4414

Connecticut LTC Ombudsman Program and Center for Medicare Advocacy Partnership

- Optimize the value of each organization's expertise and resources on behalf of CT's long term care facility residents, families and helpers.
- Share resources to maximize impact
- Participate in joint education efforts
- Provide information and referrals as appropriate for services available from each organization

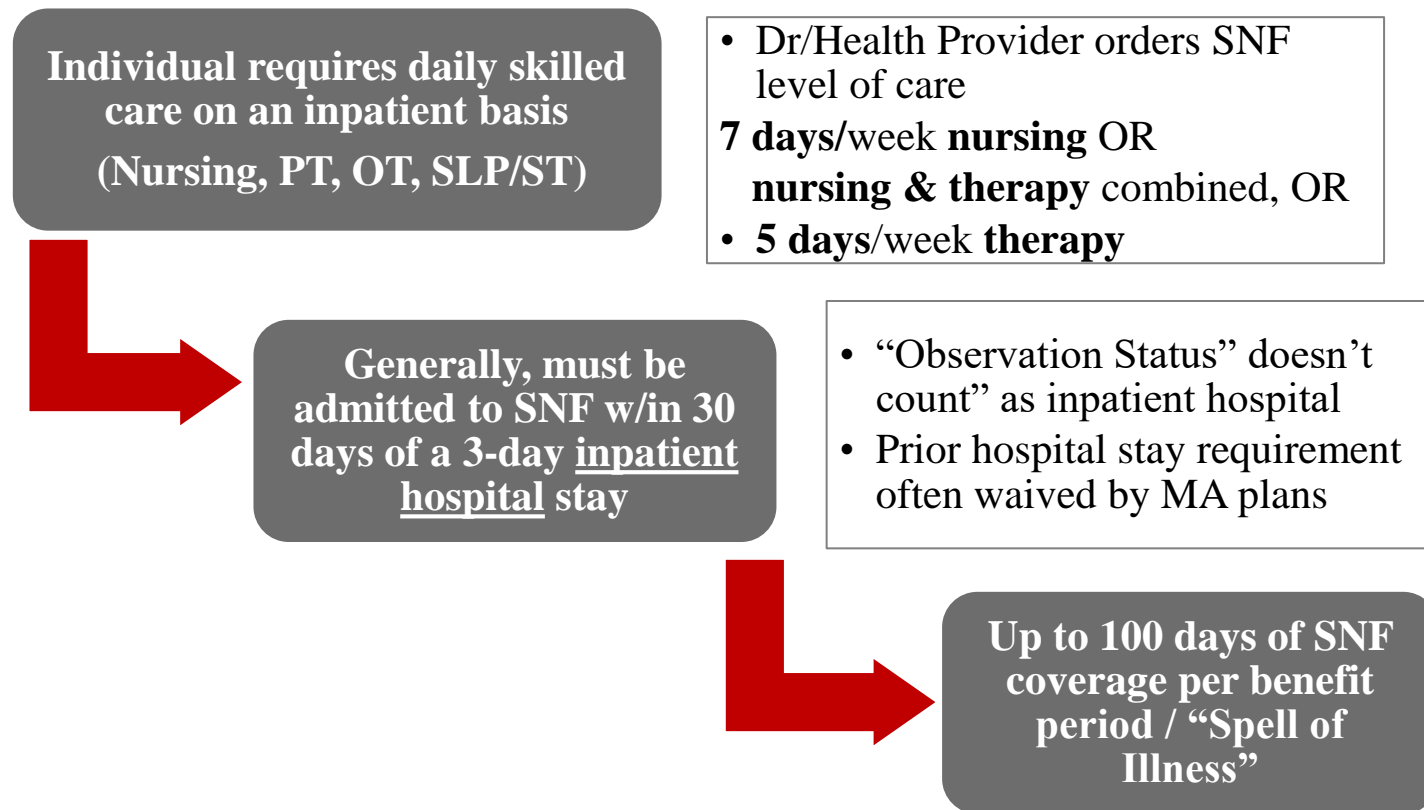
Skilled Nursing Facility (SNF) Medicare Coverage Criteria

- Physician/health practitioner must certify SNF level-of-care is necessary
- Generally, must have a prior 3-day qualifying hospital stay
 - Inpatient, Medicare-covered hospital stay
 - Emergency room and “observation status” do not count
 - Medicare Advantage plans often waive
- Generally, must enter SNF w/in 30 days of hospital discharge
 - Unless it is not medically appropriate to begin a course of treatment until beyond 30 days

Skilled Nursing Facility Medicare Coverage

- Up to 100 days of coverage per “Benefit Period”
- No deductible or co-payment for days 1-20
- Co-payment for days 21-100 (\$200/day in 2023)
- Medicare pays if individual receives daily skilled care:
 - Medically reasonable and necessary
 - Can be safely and effectively performed only by, or under the supervision of, professional or technical personnel
 - “Daily” = 7 days a week of skilled nursing and/or therapy
OR 5 days a week of therapy

Skilled Nursing Facility (SNF) Coverage Criteria



Skilled Nursing Facility Medicare Coverage

Reminder: Improvement is Not Required:

The “restoration potential” of a patient is not the deciding factor in determining whether skilled services are needed. Even if full recovery or medical improvement is not possible, a patient may need skilled services to prevent further deterioration or preserve current capabilities.

42 CFR §409.32

Related Medicare Coverage For Nursing Home Residents

- **Therapy** services (PT/OT/SLP) can be covered after 100 days of SNF coverage expires. (If the individual has Part B)
- **Ambulance** coverage for medically necessary transport to the nearest provider of services that are not available in the SNF can be covered.
- **Hospice** coverage can be available. For items, services, and drugs for pain relief, symptom management, counseling. Not for room & board.
- **Durable medical equipment (DME)** is considered included in Medicare's payment to SNF. It is not covered separately for SNF residents after SNF coverage ends.

MEDICARE ADVANTAGE

- Under the Law – Must provide at least the same coverage as traditional Medicare.
- But – In practice, often more restrictive:
 - Prior Authorizations
 - Ongoing repeated denials

Note: MA plans may waive the required 3-day inpatient hospital stay for nursing home coverage

Medicare Open Enrollment Period

Oct. 15 – Dec. 7, 2023

(For 2024 Coverage)

Call CHOICES at 1-800-994-9422

For a free unbiased review of unique individual circumstances and a knowledgeable review of Medicare public and private options in Connecticut, including screening for the Medicare Savings Program (MSP)





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For further information, to receive the Center's free weekly electronic newsletter, *CMA Alert*, update emails and webinar announcements, contact:

Communications@MedicareAdvocacy.org

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ENGAGING INTEREST DURING RESIDENT COUNCIL MEETINGS

Presented By:

John Balisciano Jr.;

The Statewide Coalition of Presidents
of Resident Councils

PURPOSE OF RESIDENT COUNCIL

- To give residents participation in affairs within the facility
- To give residents a forum for discussion of concerns within the facility
- To serve as a line of communication between residents and staff
- To serve as an informational forum
- To empower residents to advocate on issues that affect their home, community, quality of care and life
- To discuss concerns to determine patterns and allow for formal resolution
- Ensures that the nursing home is working to residents' best interest and creating homelike environments based on resident preferences

BENEFITS OF A RESIDENT COUNCIL

To Residents:

- A resident council is an organized and ongoing support mechanism for residents
- Through shared experiences, residents are able to draw strength from one another
- Residents feel comfortable discussing their concerns and or/wishes in a safe environment.
- Resident Councils also provide an opportunity for resident interaction and engagement with their peers

To the Home:

- Resident Councils allow for greater communication between residents and staff
- Resident councils provide discussion opportunities for a collaboration between resident & staff
- A mechanism to address concerns to improve the quality of life and care in the facility.

MODEL RESIDENT COUNCIL

- Residents run the council; residents fill key positions such as President, Vice President, Treasurer, Secretary
- The council receives no interference from the facility staff
- Residents feel comfortable speaking freely, raising issues and concerns
- Residents are treated in a dignified manner
- Resident issues and concerns are taken seriously
- Issues and concerns are promptly addressed by the appropriate department



RESIDENT COUNCIL BEST PRACTICES

- Resident Council meetings are marketed and advertised; consider invitations
- Council meetings are consistent; same day, time, and location each month
- Each meeting has a prepared agenda with input from Council members
- Council is governed by By-Laws that are unique to the Home/Community; by-laws detail election process
- Minutes are taken, reviewed, and approved by Council members
- Council Communication Form is utilized; passed on to appropriate departments; resolution indicated; signed off by both Administration and Resident Council
- Meetings are accessible to all residents wishing to participate; use of adaptive technology and recording meetings for those that cannot come in person
- Resident Council and Food Committee are separate and distinct meetings

Sample Agenda for Sunnydale Resident Council

March 4th, 2017

1:30 pm

Sunnydale Meeting Room B

1:30 Call to Order, Welcome, and Introductions.

1:35 Roll Call.

1:40 Reading of Last Meeting's Minutes.

1:45 Committee Reports: Standing, then temporary committees give reports.

2:00 Unfinished Business: Introduction of new topics, ideas, suggestions, and votes.

2:15 Citizen Communication: Limit to two minutes per person.

2:20 Announcements: Informing the council of other subjects and events.

2:30 Adjourn: The meeting comes to an end by majority consensus.

Resident Council Meeting Agenda

August 2023

Old Business---Refer to the July minutes

New Business---

- 1) Introduce the new Administrator to residents.
- 2) Welcomed back Ashley as our Recreation Director
- 3) Mention that I need to re-evaluate how to do meetings each month.
- 4) Need to show the Retaliation video next month.
- 5) October is Resident's Rights month--- theme Amplifying our Voices.
- 6) Voices Forum is October 6th.
- 7) Talk about starting a Family Council

Department Issues/Concerns---

Nursing---

Housekeeping/Laundry---

Maintenance---

Recreation---

Sample of Council Meeting Minutes ¹⁸

Name of Council
(Council Meeting Minutes: Month Day, Year)
(time and location)

Board Members:

Present: Jerry Smith, Mary Parker, Elizabeth Drucker, Pat Kyumoto, Jack Porter, Mary Rifkin and Leslie Zevon; Quorum present? Yes

Others Present: Staff Representative, Sheila Swanson

Proceedings: Meeting called to order at 1:30 p.m. by Chair, Elizabeth Drucker
(Last month's) meeting minutes were amended and approved.

Chair's Report: Recommends that council should continue efforts to inform other residents of their voting rights. After brief discussion, council agreed.

Swanson mentioned that staff member, Sheila's husband is ill and in the hospital. MOTION direct the Sunshine Committee to send handwritten cards to Shelia's husband, expressing the council's sympathy and support; seconded and passed.

Grievances Committee report provided by Chair, Jerry Smith:

Smith explained that several residents have come forward to complain about the lack of choices for breakfast. MOTION to compile the complaints and present to staff; seconded and passed.

Volunteer Services Committee's report provided by Chair, Mary Rifkin:

Rifkin updated the council about the committee's work to make blankets for the homeless; she explained the council would like to begin a food drive for the month of November. MOTION to begin a food drive in November; seconded; DISCUSSION several members had concerns about how the planning would go, MOTION to assign the volunteer services committee to plan the details and report back to the committee; seconded and passed.

Citizen Communication: Jones from the third floor explains they have been having temperature issues and that it is too hot in the summer months. MOTION for Jerry Smith to meet with Mrs. Jones and facility staff and report back; seconded and passed.

Assessment of the Meeting: Drucker noted that the past three meetings have ended on time. She thanked the members for being mindful of the agenda and time in their discussions.

Meeting adjourned at 2:30 p.m.
Minutes submitted by Secretary, Mary Parker.

https://theconsumervoice.org/uploads/files/long-term-care-recipient/Resident_Council_Toolkit_FINAL_ELECTRONIC.pdf

ENGAGING RESIDENTS DURING MEETINGS

- **Give them a chance to raise concerns and listen to their concerns.**
- **Remind residents that the facility needs to be held accountable.**
- **Residents need to identify problems and come up with solutions from a resident's perspective.**
- **Allow residents to recognize staff if they feel deserving of recognition.**
- **Open discussions on topics of interest to residents:**
 1. **How to file a Grievance**
 2. **What's included in a Care planning meeting.**
 3. **Go over the Residents Right's**

KEYS TO SUCCESS

- **Self-interest** ----- Residents will want to be involved if the council is discussing an issue that is important to them. It may be helpful to identify the issues of interest for the council members and focus on those issues during the meeting.
- **Results**----- Getting results is a big motivator for residents to continue to attend the council meetings. Thus, the council is viewed as a forum for resolving concerns, implementing new ideas, and sharing suggestions
- **Recognition**----- recognize council members who provide helpful solutions, or make important contributions to the council

KEYS TO SUCCESS (CONT)

- Accountability - The Council must always keep written records of any actions by the Council affecting any or all the Residents.
- Policy Change Requests - A Resident may ask the Council to convince the Facility to change any practices the Resident deems unnecessary or harmful.





IT'S YOUR CHOICE, LETS HEAR YOUR VOICE!

Submitted by Jeanette Martinez, E-Board Member

<https://portal.ct.gov/LTCOP/Content/Executive-Board-RCP/Executive-Board-RCP>

Resident council has been very rewarding for me. When I came to the home in which I live I was very sad for several days and then realized that what I was feeling wasn't different from anyone else.

My hope was that I would be able to adjust and change things in the home to benefit me and the other residence. Resident council gave me that opportunity. I've been influential in many things in my building from a residential store to even changes on our food menu. This not only helps me, but it also aided others in my building.

If this is something that you would like to be a part of, contact the State Ombudsmen's office 1-866-388-1888 and ask to speak with the Regional Ombudsman that visits your building and let them know your interest.

The Statewide Coalition of Presidents of Resident Councils (SCPRC) is also looking for new members. While initially membership was just open to the resident council presidents only, we have opened it up to allow for other nursing home member to join and participate if they wish to advocate on their behalf and others to make changes in the lives of nursing home residents. If this is something you feel strongly about please let us know.



It's Your Choice, Let's Hear Your VOICE!

**Are You a Nursing Home Resident
Interested in Making a Difference?**

**The Coalition is Seeking New
Members!**

You Will:

- + Be a voice for nursing home residents**
- + Represent your peers in the nursing home**
- + Advocate for resident rights and interests**

THE STATEWIDE COALITION OF PRESIDENTS OF RESIDENT COUNCILS

John Balisciano Jr. <i>President</i>	Hewitt Health and Rehab
Susan Bilansky	Hebrew Home
Martha Leland	Touchpoints of Manchester
Thomas Dorman	Amberwoods of Farmington
Jeanette Sullivan-Martinez	Pendleton Healthcare



RESIDENT COUNCIL RESOURCES

- Factsheet to learn more about [the Rights of Resident Councils in Nursing Homes](#).
- Another factsheet to learn more about [the Rights of Resident And Family Councils in Nursing Homes](#)
- [Advocate Effectively](#): Read a list of suggestions for advocacy tips as you advocate for yourself, including how to document concerns.
- Resident Council Toolkit for Residents of Nursing Homes and Assisted Living Facilities - https://theconsumervoice.org/uploads/files/long-term-care-recipient/Resident_Council_Toolkit_FINAL_ELECTRONIC.pdf
- Adult Home Resident Council Tool Kit <https://ciadny.org/wp-content/uploads/2023/03/AdultHomeResidentCouncilToolkit-3rd-Edition-2022.pdf>
- Sample by-laws [https://theconsumervoice.org/uploads/files/events/SAMPLE-Resident-Council-Bylaws_\(1\).pdf](https://theconsumervoice.org/uploads/files/events/SAMPLE-Resident-Council-Bylaws_(1).pdf)
- Roberts Rules of Order Simple - https://assembly.cornell.edu/sites/default/files/roberts_rules_simplified.pdf
- Roberts Rules of Order Summary - <https://isaontario.com/wp-content/uploads/2019/01/Roberts-Rules-of-Order-Summary-Version.pdf>

**To our Resident Advocates who selflessly
volunteer their time advocating on behalf of
nursing home residents.
Thank You!**

<u>Volunteer</u>	<u>Facility</u>
Ann Marie Fumo	Middlesex Healthcare Center
Barbara Clerkin	Apple Rehab Old Saybrook
Brenda Fife	Geer Nursing and Rehabilitation Center
Colleen Mcdermott	Touchpoints of Farmington
Deb Ciofi	Bayview Health Care Center
Doreen Near	Mystic Healthcare
Jennifer Glick	Chelsea Place
Joyce Werden	Norwich Sub-Acute (Norwichtown)
Karen Haabestad	Apple Rehab Mystic
Kevin Place	Candlewood Valley Nursing Home
Linda Rosen	Governor's House
Richard Steele	Beechwood
Susan Williams	Touchpoints at Chestnut
Vy Pham	Civita of Newington



Resident and
Staff Raffle

The background features abstract, overlapping geometric shapes in various shades of blue, ranging from light sky blue to deep navy blue. These shapes are primarily located on the right side of the frame, creating a modern, layered effect. The rest of the background is plain white.

Lunch

**Open
Microphone
& Panel
Discussion**



Closing

Mairead Painter
State Long-Term Care
Ombudsman



To Contact the Long-Term Care Ombudsman Program

TOLL FREE

1-866-388-1888

You can e-mail us: ltop@ct.gov

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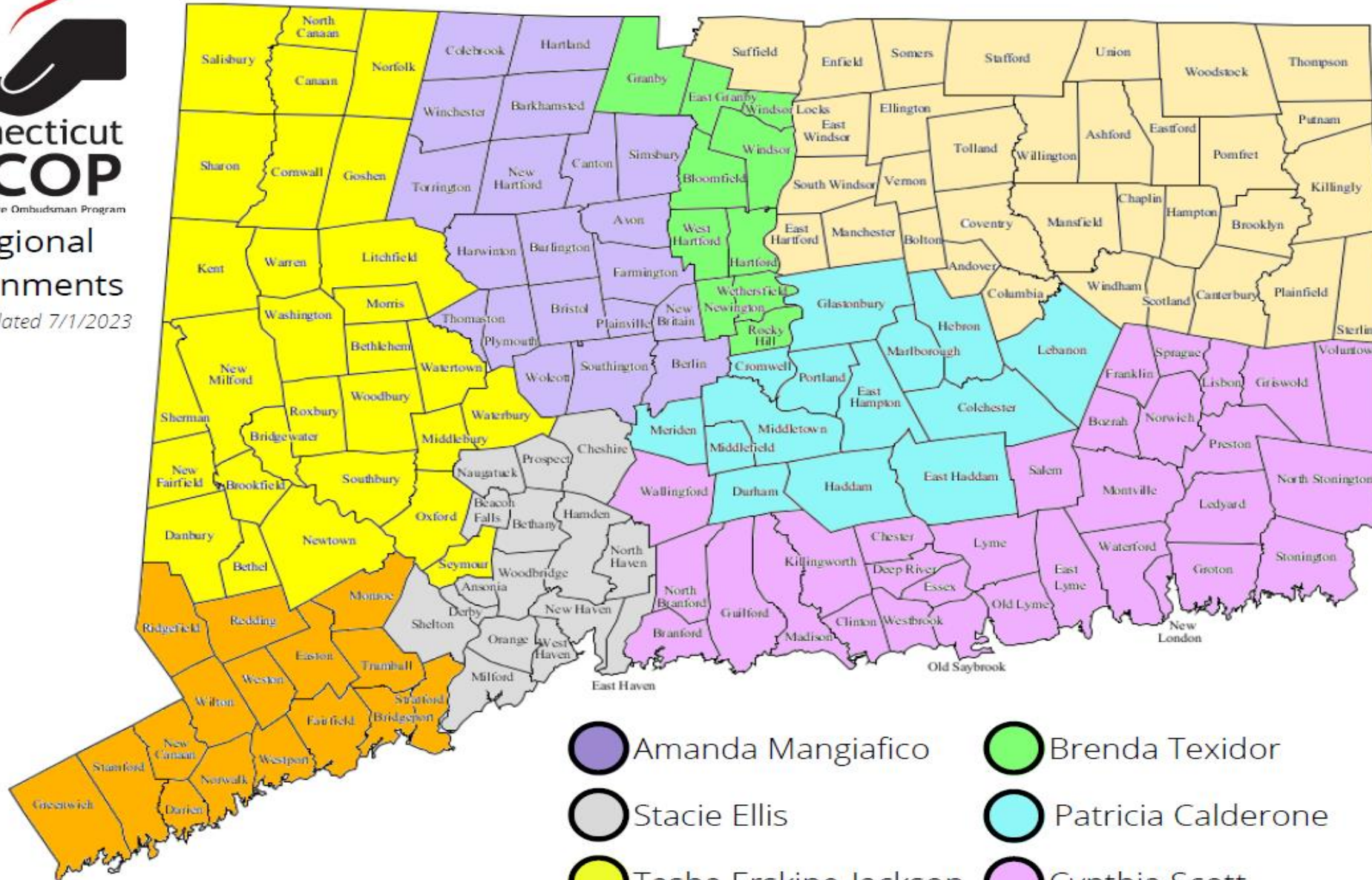


**Connecticut
LTCOP**

Long Term Care Ombudsman Program

Regional Assignments

Last Updated 7/1/2023



● Amanda Mangiafico

● Brenda Texidor

● Stacie Ellis

● Patricia Calderone

● Tasha Erskine-Jackson

● Cynthia Scott

● Sylvia Crespo

● Kiomara Cruz



Voices Forum 2023 Post Event Survey

**Anyone can respond,
Anonymous**

**Scan the QR code to Vote
or go to:**

<https://forms.office.com/g/qaaZNRAWn1>