



# Our Mission...

The mission of the Florida Long-Term Care Ombudsman Program is to improve the quality of life for all Florida long-term care residents by advocating for and protecting their health, safety, welfare, and rights.



- Message from the Secretary
- Message from the State Ombudsman
- Policy Pursuits & Recommendations
- Who are the Ombudsman?
- Program Data
- 12 State Council Updates
- 14 Success Stories
- Program Map & Contact Information

# SECRETARY

Florida is widely recognized as a state that is friendly to retirees and elders. Today, Florida has the largest elder population in the nation, with 5.9 million residents over 60 years of age. Florida is also home to the fastest-growing population of seniors 65 and older, making it imperative that the Sunshine State provide an environment where seniors can live well and age well. To that end, the Department of Elder Affairs is charged with promoting the well-being, safety, and independence of Florida's seniors, their families, and caregivers.

The Florida Long-Term Care Ombudsman Program (LTCOP) plays a vital role in fulfilling this mission. The Program and its statewide network of volunteers independently strive to improve the quality of life for long-term care residents by advocating for and protecting their health, safety, welfare, and rights in Florida's 4,148 long-term care facilities. The Program's volunteers – called "ombudsmen" – live in the communities they serve and receive special training regarding the laws, rules, and regulations governing long-term care facilities, along with methods of investigation and conflict resolutions. Ombudsmen endeavor to resolve grievances, uncover systemic issues, and ensure a better life for Florida's long-term care residents.

Through ingenuity, determination, and the sheer dedication of a remarkable volunteer base, the Program was able to reach out and respond to the needs of residents in Florida's long-term care facilities over the last year, notwithstanding the challenges presented by the pandemic.

I could not be prouder to stand with the staff and volunteers of this Program. Their commitment and dedication are incredibly inspiring.

On behalf of the Department of Elder Affairs, I offer my sincere thanks and gratitude.

Pichard Prudom Socretary

Richard Prudom, Secretary Florida Department of Elder Affairs

# message from the STATE OMBUDSMAN

A plea in ancient literature penned some 3,000 years ago laments: "Do not cast me away when I am old; do not forsake me when my strength is gone." Three millennia later, we hear the same plea from residents in long-term care facilities.

The sentiments of being cast away and forsaken were accentuated this year by quarantines, isolation, and broad restrictions on indoor facility visits that prevented family, friends, and even ombudsmen from entering facilities. Thus, many of those cries went unheard. Like the proverbial tree that falls in the forest, there must be someone there to hear it.

To work around these restrictions, the Long-Term Care Ombudsman Program (LTCOP) purchased electronic tablets that allowed for virtual visits. Tables, chairs, and small tents were acquired to facilitate outdoor visits.

Near the end of the fiscal year, restrictions were being relaxed and our amazing volunteers were returning to the facilities and personally engaging the residents to resolve problems.

The pandemic has made our ability to reach residents more difficult due to a shortage of volunteers. The Long-Term Care Ombudsman Program lost 18% of its volunteer force due to health concerns in 2020 and another 10% in 2021. To combat this decline in volunteers, LTCOP engaged in

extensive and varied advertising campaigns yielding 37 new volunteers-intraining. While these numbers are encouraging, there remains a critical shortage of volunteers who are willing and able to address the concerns

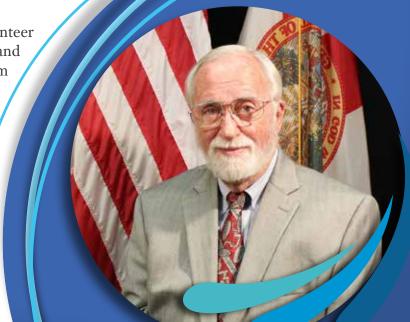
of residents in Florida's 4,148 facilities.

Despite the hurdles presented this year, our dedicated volunteer ombudsmen have displayed remarkable persistence and ingenuity in reaching out to our residents to assure them that they are not cast away or forsaken. We will continue to stand with them to ensure their health, safety, welfare, and rights are preserved.

Michael W. Lhilleps

Michael Phillips, State Ombudsman

Long-Term Care Ombudsman Program



# policy pursuits & RECOMMENDATIONS

Lynn Hearn, Legal Advocate

Long-Term Care Ombudsman Program

# Culture Change

The Florida Long-Term Care Ombudsman Program embraces the movement underway by many in the long-term care field to shift away from an institutional medical model and toward a "person-directed" approach to care. This transformation, termed "Culture Change," seeks to give elders in long-term care and those who work with them a greater voice in the decisions that pertain to them.

Person-directed care does not call for a rigid set of practices but rather provides a framework for individualized decision-making in areas such as elder care practices, organizational and human resource practices, and physical facility design. Our ombudsmen are receiving ongoing training regarding Culture Change and seek to use this approach when working with facilities to address complaints and concerns raised by residents and family members.

# Florida Legislature

The State Ombudsman and Legal Advocate are registered lobbyists with the Florida Legislature and actively participated in the 2021 Legislative Session. We reviewed and monitored proposed legislation having potential impacts on Floridians residing in long-term care facilities, met with legislators and staff, conferred with industry representatives, proposed amendments, and provided public comments. After the session, we educated ombudsman staff and volunteers regarding the key legislation that passed.

Important new laws were passed in 2021 regarding facility immunity from lawsuits related to the COVID-19 pandemic (SB 72), creation of a new category of nursing assistants called personal care attendants (PCAs) (HB 485), creation of an alternative dispute resolution process for legal disputes involving elders (HB 441), and strengthened criminal laws protecting elders from exploitation (HB 1041). We look forward to actively participating in the upcoming 2022 Legislative Session on proposed legislation related to staffing and other issues that may affect long-term care residents.

# Personal Care Attendants (PCAs)

A 2021 law created a new category of nursing assistants in nursing homes, as an apprenticeship program offering candidates on-the-job training to prepare for the certified nursing assistant (CNA) examination. Because PCAs have direct contact with residents after only 16 hours of education and may be included in a facility's staffing ratio for CNAs, the Long-Term Care Ombudsman Program seeks to ensure that facilities provide high-quality training for PCAs and limit their duties to those permitted by the law.

The LTCOP also wishes to see information regarding facilities' employment of PCAs recorded and made available so the program's effectiveness can be measured accurately. Toward these ends, the LTCOP is participating in the administrative rule-making process being conducted by the Agency for Healthcare Administration. It will also continue to monitor the quality of resident care provided by PCAs, in addition to other staff, in Florida's nursing homes.

# Legislative Workgroup

After a nearly two-year hiatus due to lack of a state ombudsman or legal advocate, the State Council reinstituted a legislative workgroup to assist the State Council in making recommendations regarding legislative, regulatory, and administrative policy matters affecting Florida's long-term care residents.

The workgroup meets regularly during publicly noticed meetings and has already provided valuable assistance to the Long-Term Ombudsman Program, particularly with respect to the proposed rule regarding the PCA training program.

# Agency for Health Care Administration

The Long-Term Care Ombudsman Program works closely with the Agency for Healthcare Administration (AHCA), through their respective central offices and field offices, to address situations in which concerns have been raised about a long-term care facility's treatment of a resident. LTCOP and AHCA recently renegotiated a new and improved Memorandum of Understanding which sets out the respective services and information provided to each other to address such concerns. The MOU is in effect for three (3) years.

This exchange of information between LTCOP and AHCA assists in the timely and effective resolution of resident complaints. Representatives from LTCOP and AHCA also meet regularly to address the nature of the concerns they are seeing and explore ways to resolve them.

# who are the OMBUDSMEN?

Florida's Long-Term Care Ombudsman Program was founded in 1975 as a result of the federal Older Americans Act, which grants a special set of residents' rights to individuals who live in long-term care facilities such as nursing homes, assisted living facilities, and adult family care homes. In the state of Florida, a long-term care ombudsman is a trained volunteer who helps to improve the quality of care and quality of life for residents in long-term care settings.

Ombudsmen are community members, from all walks of life, who are passionate about improving the life for residents living in long-term care facilities. They are trained to work with residents and their family members to communicate concerns and resolve problems by providing advocacy, support, education, and empowerment. These volunteers simply want their time and talents to make a difference in improving the lives of people who may be elderly and/or disabled.

Volunteers are also trained in residents' rights, problem solving, communication, intervention, negotiation skills, and working with long-term care staff. They advocate for improving the quality of life for residents, communicating with facility staff and family to resolve their unmet needs and concerns.

Ombudsmen receive and investigate complaints on behalf of nursing home residents and their families and serve as a voice for residents in ensuring that the facility meets mandated legal standards for every person receiving long-term care services. Examples of common issues in nursing homes include: discharges and evictions, medication administration, and matters of personal hygiene. Common issues in assisted living facilities and adult family-care homes include: menu quality, quantity, and variation; medication administration; and general housekeeping or cleanliness. Ombudsmen work to resolve residents' concerns. All complaints are confidential, and all services are provided at no charge.

Ombudsmen are the heart of our program. These special individuals dedicate thousands of unpaid hours each year toward ensuring that the voices of Florida's long-term care facility residents are heard and problems resolved.

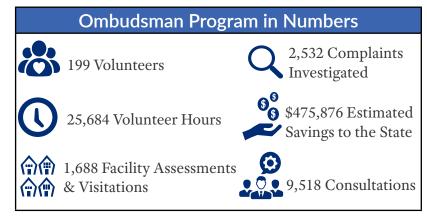
You can be trained and certified as a State of Florida Long-Term Care Ombudsman and make a difference in the lives of people living in nursing homes, assisted living facilities, and adult family care homes. In addition to having the satisfaction of knowing that you are improving the care of long-term care residents, you will have the opportunity to make new friends and increase your understanding of aging and the aging process.





#### Year in Review

Florida's Long-Term Care Ombudsman Program (LTCOP) achieved new milestones in success during the past year. Here are some of the highlights and accomplishments that the Ombudsman Program's dedicated staff and volunteers achieved:

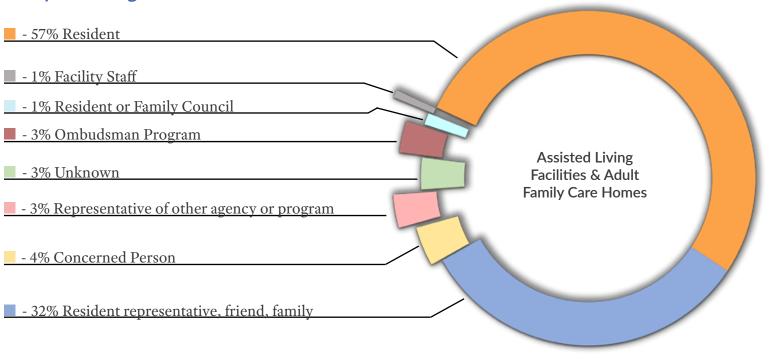


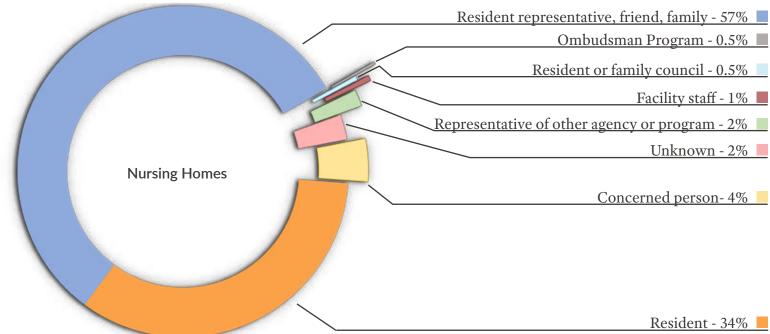
# Quarterly Ombudsman Program Data

	OCT - DEC	JAN-MAR	APR-JUN	JUL - SEP
Long-Term Care Beds	199,082	200,042	202,113	202,716
Certified Ombudsmen	193	189	189	200
Volunteers in Training	18	32	33	37
Complaint Investigations*	946	918	1,040	1,105
Facility Visitations	3	27	64	72
Facility Assessments	11	46	437	678

<sup>\*</sup> These numbers reflect both initiation and closure dates that may overlap quarterly reporting periods, therefore they are not an accurate representation of case numbers annually.

# Complaint Origins

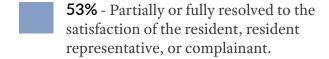


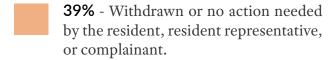


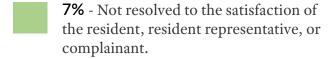
# Complaint Resolution

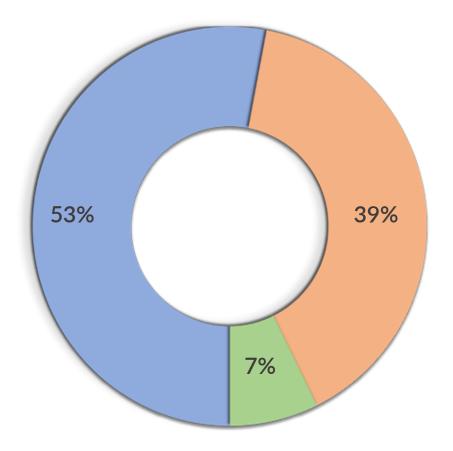
A complaint is closed when the issue is addressed to the satisfaction of the resident or complainant.

The following chart shows what types of disposition codes were assigned to closed cases in Federal Fiscal Year 2021.









**Top 5 Complaints** 

	Assisted Living Facilities & Adult Family Care Homes	Nursing Homes	
1	Personal Property	Personal Property	
2	Food services	Medications	
3	Medications	Response to requests for assistance	
4	Housekeeping, laundry, & pest abatement	Visitors	
5	Billing & charges	Personal Hygiene	



### **Overview**

The Long-Term Care Ombudsman Program's State Council is composed solely of volunteers and serves as an advisory body to assist the State Ombudsman in reaching a consensus among local councils on issues affecting residents and impacting the optimal operation of the program.

#### State Council Chair Elected

Outgoing State Chair Dr. Carol Weideman nominated Marie Brand for State Chair in December 2020, and this nomination was met with unanimous consent from the State Council members. Marie has been advocating for residents and their families as a certified ombudsmen for over 16 years! Her fellow ombudsmen describe her as hardworking, admirable, a great teacher, and a team player.

"She goes above and beyond to assist the District Manager, the Council, and all of the residents in long term care facilities."

Thank you, Marie, for your many years of service and strong commitment to the LTCOP! Congratulations on your appointment as State Chair for the Florida Long-Term Care State Council!

### Fiscal Year 2020 State Council Review

In 2020, the State Council recommended:

- » Development of new legislative work-group;
- » Guide for newly elected State Council Representatives;
- » Continuing education requirement update;
- » Facilitate referrals from our program to the Agency for Health Care Administration (AHCA);
- » Encourage the development of staffing levels and training in Memory Care Units;
- Recommend fines to facilities for refusing to re-admit a resident;
- » Consider the needs of personal aids in the dining area; and
- » Increase ombudsman recruitment.

# Fiscal Year 2021 State Council Recommendations and Discussion

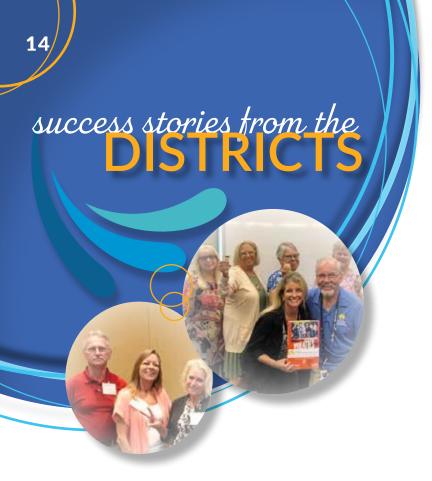
The following were actions taken during the State Council's FY 2020 quarterly meetings:

» Tablets purchased to help ombudsmen with visitation when not permitted to enter a facility;

- TV and radio advertising for the recruitment of volunteers;
- The production of new resident activity booklets for facilities;
- Resident Council President pins for recognition; >>
- Ombudsman Quarterly Newsletter publication; >>
- Ombudsman Corner various suggested topics; >>
- LTCOP Staff & Volunteer Educational Conference; and

Face-to-face State Council meetings and local council meetings.





### Northwest Council

A resident contacted the district office, stating that he was not happy and he felt imprisoned. The resident strongly stated he wanted to go live in the town he was raised. The resident stated he had a brain injury several years ago, and he felt he had improved mentally and physically.

He stated that his daughter was found to be exploiting and depleting him financially, and that is why he was appointed a professional guardian. The resident wanted to assign a friend from his home-town as his new guardian, so the ombudsman contacted the current guardian. The current guardian stated it was very unlikely, due to the lengthy process needed to transfer out-of-state, and that the courts would need to approve it.

The ombudsman contacted the resident's friend from home and explained the process and expenses involved. The friend hired an attorney, then was approved to have the responsibilities of the resident's care assigned to them.

Almost two years later, all paperwork and requests to reassign the guardian have been approved and the final arrangements for the resident to return to their hometown will soon be a reality.

#### First Coast South Council

An assisted living facility resident was told that a new contract needed to be signed and the price of care was being raised 18%. The facility had changed the terms to add medication assistance, at an additional \$450.00 per month. The original contract was all inclusive.

The resident was facing the possibility of having to move to a less expensive place. The ombudsman went to the facility, obtained consent, and investigated. She scheduled a meeting with the resident, the daughter, administration, the corporate CEO, and nursing staff.

The ombudsman was able to work with all parties and come up with a resolution to the resident's satisfaction. The resident did not have to pay the \$450.00 a month. The facility agreed to allow a family member to use a pill minder and fill it weekly for the resident, thus avoiding the extra charge.

The resident, family and staff at the facility were all able to agree on this plan of action and the resident was able to stay in his home.

#### North Central Council

A resident reported that the water pressure in her room's bathroom was too low for her to adequately take a shower.

The resident complained to the facility at first and they did replace the shower head, but that did not solve the problem. Once the ombudsman became involved, the facility tried other measures to resolve the resident's complaint and offered to move her to a different room that they knew had better water pressure. The complaint was resolved and the resident was very satisfied with the resolution.

#### Withlacoochee Council

A resident reported that she had paid a sizable amount of money to her Power of Attorney (POA) to have repairs done to her home, but they had not been done and this was delaying her discharge. The ombudsman learned that the POA had placed the resident at the assisted living facility and had obtained \$15,000 to hire an outside contractor to get the home updated and suitable for the resident's return.

It was determined that the job was not completed after a reasonable time-frame and that the referenced contractor was the POA's husband. The case was referred to the local sheriff's office for a criminal financial exploitation investigation.

#### Panhandle Council

The Panhandle District received a call from a distraught resident. The resident had been in pain due to a foot deformity since birth and the pain had progressed throughout the years. The resident's physician stated that surgery was needed to alleviate the pain. The resident complained that the facility would not schedule the surgery and he had asked many times for their assistance with no reply.

Within a few weeks, the resident was scheduled to have

surgery done on his foot, thanks to the volunteer's assistance. The ombudsman left the case open until after the surgery to assure that the resident was out of pain and the facility was aiding in scheduling follow-up appointments. Two months after this case was opened, the surgery was a success, and the resident was thankful for the ombudsman who worked his case.

#### East Central Council

A resident who had come from the hospital was having difficulty convincing the facility to follow the hospital discharge guidelines. Thanks to the ombudsman's tenacity, he was able to convince the director of nursing that the hospital's regimen would benefit the resident and would avoid frequent emergency room visits.

The ombudsman spoke on behalf of the resident and explained the benefits of the doctor's order. The director of nursing agreed to have the hospital's discharge instructions followed. The resident is quite pleased with the determination and results brought about by the volunteer.



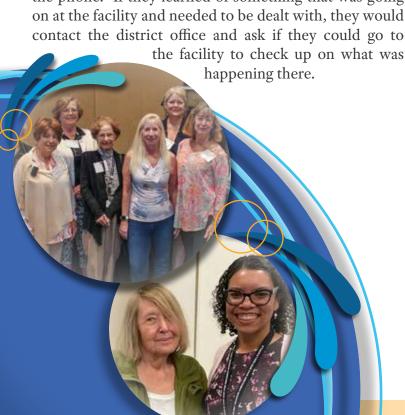
### **Brevard Council**

District 18 volunteers were very active participants at the 31st Annual Brevard County Post-Acute and Long Term Care symposium, a conference that averages over 500 attendees per year. District 18 volunteers were noted to be sharing their love for our program throughout the presymposium.

All visitors to the table were greeted by their smiles and complete explanations about the Florida Long-Term Care Ombudsman Program.

### First Coast Council

During the initial COVID-19 pandemic and the surge caused by the Delta variant, members of the First Coast North council stayed in contact with their facilities over the phone. If they learned of something that was going on at the facility and needed to be dealt with, they would contact the district office and ask if they could go to



#### Southwest Council

Two ombudsmen from the Southwest District provided a great resolution for a resident whose facility's new ownership imposed a \$25 monthly surcharge for payments made by check. The ombudsmen spoke with the business office director, who agreed to waive the \$25 surcharge for three months to provide residents enough time to establish payments through bank bill pay or electronic payment.

The resident was satisfied with this outcome and the time allotted for her to decide how best to proceed.

#### West Central Council

An ombudsman was able to reduce a bill for a resident by proving the resident and his belongings were no longer in the assisted living facility. After the ombudsman's investigation, it was determined that the resident believed he was due a refund, whereas the executive director believed none was due based upon the written agreement between the parties.

The volunteer assisted the parties in negotiating a fair resolution allowing the facility to keep rent already paid but forgiving approximately \$1,500 of rent the facility claimed was still due for October, 2021 under the agreement. Both parties voluntarily accepted the agreement to settle the matter.

#### Mid & South Pinellas Council

An ombudsman from District 6 was able to explain Medicare benefits to a resident who was confused and about to make insurance decisions not based in fact.

The resident also wanted to receive showers instead of

bed baths which the volunteer was able to get changed. The resident now receives showers on a regular basis.

Finally, the resident wanted to continue with physical therapy which had been denied. Through the volunteer's intervention regarding the resident's insurance, the resident was re-assessed and is now receiving physical therapy covered by Medicare.

#### Pasco & N. Pinellas Council

District 7 received a case for a resident who was being charged a "COVID-19 Fee" and felt the fee should be part of the regular monthly charge.

After many months of collecting information and meetings between the facility administrator and AHCA, it was determined that the fee was not allowed and an agreed refund would be distributed to all the residents who were charged the fee.

#### South Central Council

A facility took a resident's stimulus money without the resident's knowledge or consent and used it for back pay of rent owed by a third party payer source. The volunteer informed the administration that the stimulus money was for the resident's personal use and not intended for the facility.

The administration was hesitant to return the money, insisting that they had verbal consent from the resident. The resident denied any knowledge of the transaction. Eventually, the facility didreimburse the resident's account for the stimulus money which had been withdrawn. The resident was grateful for the ombudsman's assistance.



### Palm Beach Council

Residents and families received notice from their facility that rent and/or fees for services would be increasing as much as 25-38%. This came during the height of the pandemic when residents/families would not be able to move their loved ones safely. The volunteer contacted the administrator regarding the complaint. She confirmed a letter had been sent to 48 residents that fees would be increasing in 30 days. The administrator stated the decision was made above her.

The volunteer asked for and received contact information for the owner of the facility who, once contacted, explained the reasoning. The ombudsman explained that the current economic landscape would make it impossible or very difficult for many to pay due to the pandemic and difficulty in relocating.

The volunteer asked for fees to be kept at current level at this time. Later that day, the volunteer received a call from the administrator stating that after a call with the owner it had been decided they would be holding off on increases at this time.



### Treasure Coast Council

A resident was in a facility for two weeks, and the family attempted to reach facility staff no less than 16 times to communicate with the resident. The family received no returned phone calls. The resident was unable to pick up a phone and thus was not able to speak with his wife. The ombudsman contacted the executive director who stated there was an iPad on the resident's unit, to enable residents to have face to face time with their families.

The director of nursing and the administrator reached out to the complainant and agreed to allow her in the facility for a short, physically distanced visit and assured the complainant that future calls would be handled appropriately.

#### **Broward Council**

A resident called and explained that his partner of 30 years had been sent to another facility after being hospitalized, and he desperately wanted to be reunited with her.

The ombudsman contacted both facilities and advocated for them to be placed together again, and to make sure the partner was safely transferred to her original facility.

After being separated for almost 3 months, the partners were finally reunited and the gentleman could not be any happier knowing his love was back with him as he faced another round of medical treatments.

The couple is now planning on getting married so they can prevent this separation from ever happening again.

#### North Dade Council

During a visit to an assisted living facility, a resident asked for the ombudsman's help. The resident is an 82 year-old man who used to be homeless with medical conditions and a very painful back disorder. Due to his condition, he was unable to sit up and spent most of the time laying in bed. He was crying asking for help, depressed, did not want to eat, and expressed to the ombudsman that he wanted to die.

After a case was opened and consent was obtained from the resident, the volunteer spoke with the administrator and case manager to address the situation. The primary doctor only came once a month and wrote a prescription for pain medication.

After speaking with the case manager and explaining the situation, the case manager decided to do a second health and mental assessment of the resident to determine if he could get the help to reduce his pain.

Due to advocacy, the resident was first sent to a pain treatment clinic and later sent to the hospital for a procedure to relieve pain and restore mobility. After rehabilitation, the resident was released to the assisted living facility.

# South Dade & Florida Keys Council

A concerned family member reached out to the district office and explained that she was having difficulty getting in touch with her mother at a facility. The resident is unable to hold a phone, so she relied on the facility answering the phone to be able to speak with her mother.

The family member explained that the facility does not answer the phones, and when they do, she is transferred to units that still do not answer. The family member could not even contact her mother on Mother's Day. She reported this to the facility administration several times before coming to the ombudsman program for help.

The volunteer assigned to her case advised the family member to request a review of the resident's care plan, as the resident was unable to hold the phone herself. With the revised plan, the resident was to be provided with FaceTime, and the family is to communicate suggestions to meet the needs of the resident and family for communication.

Facility management provided and implemented a plan that included another process for the telephone to be picked up by various personnel with various tiers. Portable telephone numbers were also made available in the event families were not able to get through on the regular lines.

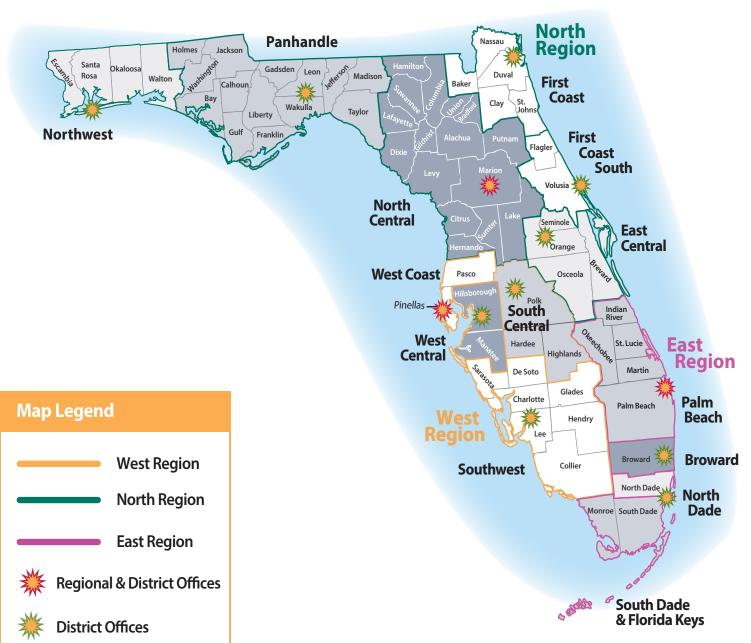
Management agreed to continually monitor the process and confirmed the process is providing adequate services for families. In addition, an email was received at the ombudsman office from the nursing home administrator providing an action plan.

The ombudsman contacted the family member who confirmed the administrator contacted her and they arranged more FaceTime opportunities to address the care-plan if needed.

The family member will continue to monitor and communicate with administration. If additional assistance is needed, the family member will contact the ombudsman program. Everyone was very thankful to the ombudsman for this outcome.







# **Program Contact Information**

#### Northwest

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#### **Panhandle**

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#### **North Central**

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#### **First Coast**

Midtown Centre Office Park, 3300 Bldg. 4161 Carmichael Ave., Ste. 141 Jacksonville, FL 32207 Phone: (904) 391-3942 Fax: (904) 391-3944

#### **East Central**

400 W. Robinson St., Ste. S709 Orlando, FL 32801 Phone: (407) 245-0651 Fax: (407) 245-0653

#### **First Coast South**

210 N. Palmetto Ave., Ste. 403 Daytona Beach, FL 32114 Phone: (386) 226-7846 Fax: (386) 226-7849

#### **West Coast**

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#### **Central Office**

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#### **West Central**

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701 W. Fletcher Ave.

#### Southwest

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#### **Broward**

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#### **South Dade**

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