Fiscal Year 2011 Annual Report

Funding

In FY2011, the budget for the Long Term Care Ombudsman Program (LTCP) totaled $2,825,135. The largest portion of funds supporting the program (74% or $2,103,301) was from federal sources, which includes federal carryover. State funds made up 13% ($351,900) while local funds made up the remaining 13% ($351,900). There has been no substantial increase in federal funds for the LTCP since FY2000.

For the eighth year and through a memorandum of understanding between the Illinois Department of Public Health and the Illinois Department on Aging, a renewal grant of civil monetary penalty funds (CMP) was awarded to the Ombudsman program. The LTCP received a 16% increase in the budget with the addition of $450,000 CMP funds.

Legislative Advocacy

The Office of the State Ombudsman has been diligently working to secure additional program funding through the new Nursing Home Care Reform law. This law would allocate $20 million of the long-term care provider assessment tax increase to the number of paid ombudsmen and IDPH surveys to expand home and community-based services.

Statewide Plan

The Ombudsman Program’s statewide plan focused on nursing home safety. Pursuant to the Nursing Home Care Act, the Criminal History Analysis Reports (CHAR) details

Long-Term Care Systems Rebalancing

Money Follows the Person (MFP): The MFP Demonstration Project supports States in creating systems and services to transition Medicaid-eligible persons residing in institutional settings to appropriate home and community-based settings (HCBS). Between March 1, 2010 and June 30, 2011 Ombudsmen made over 700 referrals to MFP transitional coordinators.

The MDS 3.0/Section Q has opened the door for Ombudsmen to talk to facilities about further developing individualized care practices. The Office is looking into the best method and protocol for the ombudsmen to respond to the anticipated high demand for MFP services.

Barriers and Challenges

The LTCP has been unable to meet the recommended federal staffing ratio by the Institute of Medicine of 1:2000 paid long-term care ombudsmen per licensed long-term care facility bed. The statewide ratio in Illinois is 1:3500; it is significantly higher in Chicago and Cook county. This lack of adequate paid staffing has made it difficult to meet the demands. This is reflected in the decrease of regular visits, attendance at resident and family council meetings, and a lack of engagement with the culture change movement.

Certification training is costly and time consuming; therefore, on-line training is being explored as an alternative.

Recommendations

The statewide funding crisis has led to a lack of community-based services, which includes housing options. The settlement of the “Colbert vs. Quinn” lawsuit will launch thousands of developmentally disabled residents into the Cook county communities. The Office recommends that additional state funding be allocated to better serve those individuals with mental or physical disabilities who are candidates for transitioning to the community; that DMH expand the MFP program state-wide to allow those with mental illness throughout Illinois to benefit from the MFP program; and that the ombudsman role be expanded to provide advocacy in the community for people returning to their own homes.

Ombudsman...Resident Advocate

whether and to what extent the identified offender(s) criminal history necessitates the implementation of security measures within the long-term care facility. A copy of the report is provided to the SLTCO and the Chief of Police of the municipality in which the facility is located. After ombudsmen receive Criminal History Analysis Reports (CHARs), they provide follow-up at nursing facilities when a pattern is found or a resident is listed as high-risk.

Complaints and Consultations

The LTCP handled 6,936 complaints during FY11 of which 76% of the verified complaints were fully or partially resolved to the satisfaction of the resident involved in the case. There were 17,651 consultations handled by the Ombudsman program. The complexity of cases has substantially increased, including a growing amount of financial exploitation, family disputes, legal issues, and more than 500 cases of involuntary discharges.

Facility Closures

There has been a considerable increase in nursing facility closures, many of which are a result of late Medicaid reimbursement payments, low reimbursement rates and for other financial reasons. The Ombudsman Program played a substantial role in facility closures across the state by working with the facilities for a smooth transition and providing follow-up to those residents who were transferred.

Training

The Ombudsman Program conducted 10 Level I trainings and 7 Level II trainings with emphasis on training ombudsmen about Money Follows the Person. The 29th Annual Elder Rights Conference, held in downtown Chicago, included a special track designed for ombudsmen and nursing home advocates.

Upgraded OmbudsManager

Like 25 other States, the Illinois Ombudsman Program has been investing in the OmbudsManager data collection program since 2005. In the Spring of 2011, the Illinois LTCP began the data migration to OmbudsManager v2.0. The State Office provided online training tutorials and webinars. Weekly conference calls were held between the State Office and Harmony to troubleshoot the problems they were encountering with the new program being significantly slower. The State and local ombudsmen will also work toward the goal of strengthening consistency with data entry.

Regular Presence Visits

Despite no additional funding, the LTCP continued its push to be visible in Illinois long-term care facilities. Ombudsmen made 15,303 regular presence visits to long-term care facilities representing 47% of NFs visited in 2011. Ombudsmen spent more time at troubled facilities and made more telephone contacts with residents instead of face to face visits, in an attempt to limit travel costs.