



Annual Report

FEDERAL FISCAL YEAR 2017

October 1, 2016 – September 30, 2017

LETTER OF SUBMISSION

June 25, 2018

The Honorable Kim Reynolds
Members of the General Assembly

Dear Governor Reynolds and Members of the General Assembly:

I am pleased to present this annual report of the Office of the State Long-Term Care Ombudsman for Federal Fiscal Year 2017. This report is produced pursuant to Iowa Code 231.42, which requires that this Office annually report to the Governor and the General Assembly on:

1. The activities of this Office; and
2. Recommendations for improving the health, safety, welfare and rights of residents and tenants living in Iowa's nursing facilities, residential care facilities, assisted living programs and elder group homes.

This report reflects the efforts of the State Long-Term Care Ombudsman by sharing program highlights and discussing issues encountered by the Office in carrying out its mandate to act as an advocate for Iowans residing in long-term care.

Respectfully submitted,



Cynthia Pederson, J.D.
State Long-Term Care Ombudsman





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EXECUTIVE SUMMARY

The Office of the State Long-Term Care Ombudsman (OSLTCO) is authorized by the federal Older Americans Act and the state Older Iowans Act. Operating as a distinct entity within the Iowa Department on Aging, its mission is to protect the health, safety, welfare and rights of individuals residing in long-term care facilities by providing advocacy, investigating complaints with residents'/tenants' permission and seeking resolutions to problems, with the goal of enhancing quality of life and care.

In Federal Fiscal Year 2017 (Oct. 1, 2016 – Sept. 30, 2017), the OSLTCO worked to protect the rights of the more than 54,000 Iowans living in Iowa's nursing facilities, residential care facilities, assisted living programs and elder group homes. Activities included:

- Advocating for residents'/tenants' rights and quality care in nursing facilities, residential care facilities and assisted living programs;
- Resolving complaints made by or on behalf of residents/tenants of long-term care facilities;
- Educating consumers and long-term care providers about residents'/tenants' rights;
- Promoting the development of citizen

organizations, family councils and resident councils;

- Providing information to the public on nursing facilities and other long-term care facilities, the rights of residents/tenants and legislative and policy issues; and
- Promoting community involvement through volunteer opportunities.

Additionally, the OSLTCO oversees the state's Managed Care Ombudsman Program, which advocates for the rights of nearly 39,000 Medicaid managed care members who reside in long-term care facilities and/or who are enrolled in one of Medicaid's seven home and community-based services (HCBS) waivers.

This Annual Report discusses the accomplishments of the OSLTCO in FFY 2017 as staff members worked to represent the interests of Iowa's long-term care residents and tenants and eligible Medicaid managed care members; seek resolution to their concerns; identify advocacy issues and provide recommendations; and promote individual choice, dignity and respect in an effort to support a philosophy of person-centered planning.

A LONG-TERM CARE OMBUDSMAN:

Educates long-term care residents and tenants about their rights.

Empowers and supports residents/tenants and their families to discuss concerns with facility staff.

Identifies and seeks to remedy gaps in facility, community or government services.

Protects the health, safety, welfare and rights of long-term care residents and tenants.

Receives and investigates complaints.

Assists residents/tenants and their families resolve problems.

Advocates for increased consumer protections in state and federal laws and regulations.

Represents the interests of residents/tenants before governmental agencies.

Respects the privacy and confidentiality of residents/tenants and complainants.

YEAR IN REVIEW

Federal Fiscal Year 2017 (Oct. 1, 2016 – Sept. 30, 2017) was a year of transition for the Office of the State Long-Term Care Ombudsman (OSLTCO). In addition to changes in leadership, the OSLTCO worked through a decrease in funding and modifications to previous operations. With so many changes in such a short span of time, it is important to understand that the overarching role of the OSLTCO and its responsibilities to the citizens of Iowa have stayed the same.

Mandated by the Older Americans Act and the Older Iowans Act, the OSLTCO advocates for the rights of individuals who are residents or tenants of Iowa's long-term care facilities. The purpose of this advocacy is to solve issues; resolve complaints; improve the quality of life and care; and protect the health, safety, welfare and rights of Iowans who reside in nursing facilities, residential care facilities, assisted living programs and elder group homes. In FFY 2017, there were 847 long-term care facilities operating in the state, accounting for 54,608 beds and units.

In addition, since the establishment of managed care for Iowa's Medicaid members in 2016, the OSLTCO has developed a Managed Care Ombudsman

Program that advocates for the rights of members who reside in long-term care facilities and/or who are enrolled in one of Medicaid's seven home and community-based services (HCBS) waivers. In FFY 2017, that accounted for 38,701 individuals.

The potential number of Iowans who could be served by the OSLTCO is approximately 93,000; however, within that number is an overlap of Medicaid members who are also residents of long-term care facilities.

Equally as important is a clear understanding of what the OSLTCO does not have the authority to do. Employees of the OSLTCO are not emergency responders; staff members respond to requests for assistance within 2-3 business days and, due to confidentiality considerations in most cases, must receive permission from the resident/tenant or the decision maker for the resident/tenant prior to investigating or attempting to resolve a concern.

The OSLTCO does not have the authority to regulate Iowa's long-term care facilities, nor does it inspect them for violations or deficiencies; the authority for that rests with the Iowa Department of Inspections and Appeals.



LONG-TERM CARE FACILITIES IN IOWA (FFY 2017)

LONG-TERM CARE FACILITY TYPE	# OF FACILITIES IN IOWA	# OF BEDS/ UNITS IN IOWA
Nursing Facilities	442	31,143
Residential Care Facilities	64	2,046
Assisted Living Programs	339	21,411
Elder Group Homes	2	8
TOTAL	847	54,608

YEAR IN REVIEW

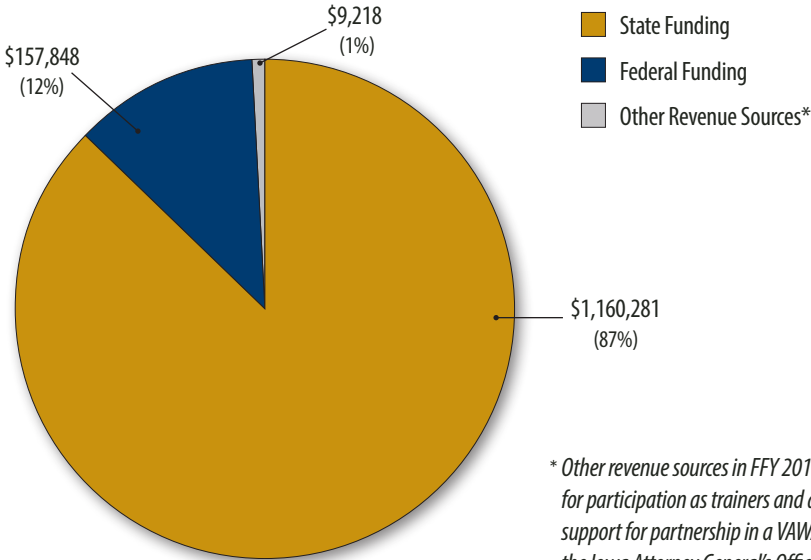
Finally, through the Managed Care Ombudsman Program, the OSLTCO only has the jurisdiction to serve Iowa's Medicaid managed care members who reside in long-term care facilities or who are enrolled in one of Medicaid's seven HCBS waivers. It does not have the authority to serve all Iowans who are enrolled in Medicaid managed care.

CORRECTION TO PREVIOUSLY REPORTED DATA

During the preparation of the FFY 2016 Annual Report, there was an overlap in data entry that resulted in a duplicated count of some visits to facilities by the OSLTCO. While this error was not discovered prior to the release of that publication, the OSLTCO has verified the data reported and is publishing the following corrections:

- In FFY 2016, the OSLTCO made 2,668 non-complaint-related visits (as opposed to 4,346, as previously reported).
- In FFY 2016, the OSLTCO made 687 complaint-related visits (as opposed to 696, as previously reported).

OFFICE OF THE STATE LONG-TERM CARE OMBUDSMAN FUNDING SOURCES
(FFY 2017)



** Other revenue sources in FFY 2017 included \$9,217.64 for participation as trainers and administrative support for partnership in a VAWA grant received by the Iowa Attorney General's Office to educate law enforcement, victim services professionals, judges and prosecutors about elder abuse.*

YEAR IN REVIEW

FFY 2017 LEADERSHIP

During FFY 2017, two different individuals served as State Long-Term Care Ombudsman. Deanna Clingan-Fischer, who had been in the position for five years, left the OSLTCO in August 2017 to pursue other opportunities.

At that time, Cynthia Pederson was named interim State Long-Term Care Ombudsman and supervised the OSLTCO for the remainder of FFY 2017. In October 2017, Pederson was offered and accepted the position of State Long-Term Care Ombudsman.

STAFF REDUCTIONS

In order to balance expenses with revenue in FFY 2017, it was necessary to make adjustments to the OSLTCO's largest expense: staff costs.

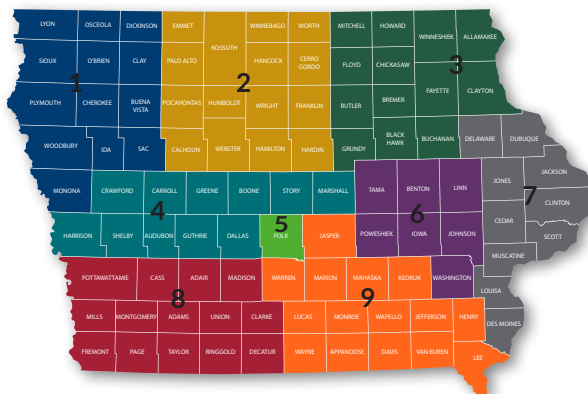
A review of state appropriations to the Managed Care Ombudsman Program for State Fiscal Years 2016 and 2017 revealed that all positions funded by the Legislature were required to be Managed Care Ombudsmen, a job classification of Long-Term Care Ombudsmen. However, the staffing of the program for FFY 2017

OSLTCO ORGANIZATIONAL STRUCTURE

(FFY 2017)

Deanna Clingan-Fischer, State Long-Term Care Ombudsman (9/30/16 - 8/17)

Cynthia Pederson, Interim State Long-Term Care Ombudsman (8/17 - 9/30/17)



Long-Term Care Ombudsmen (by Region):

- | | |
|-------------------------|------------------------|
| 1 Kim Weaver | 6 Pam Railsback |
| 2 Stacia Timmer | 7 Kim Cooper |
| 3 Jennifer Golle | 8 Julie Pollock |
| 4 Melanie Kempf | 9 Vacant |
| 5 Tonya Amos | |

Program Staff:

Cynthia Pederson, Discharge Specialist
Merea Bentrott, Project Specialist

Policy:

Lynzey Kenworthy, Policy Coordinator/
Legislative Liaison

Managed Care Ombudsman Program:

Pamela Heagle, Managed Care Ombudsman
Kelli Todd, Program Manager
Kelsey Zantigh, Managed Care Ombudsman

Administrative Support:

Katie Mulford, Administrative Assistant
Pat Wyatt, Secretary

Volunteer Ombudsman Program:

Sarah Hinzman, Volunteer Coordinator
Shannon Snyder, AmeriCorps VISTA Member
Jennifer Nguyen-Vu, AmeriCorps VISTA Member

YEAR IN REVIEW

consisted of two Managed Care Ombudsmen and one Program Manager, which is a job classified by the State of Iowa as an Executive Officer I position. Due to budget reductions, the salary of the Program Manager could not be covered by the limited revenue of the OSLTCO, and the Program Manager was laid off in September 2017.

The Policy Coordinator/Legislative Liaison position for the OSLTCO was a position funded for the first nine months of FFY 2017 by the Iowa Department on Aging, as that position also served as the Department's Legal Services Developer. Due to the Department's own budgetary considerations, the Department advised the OSLTCO that it would no longer be able to fund the position after the end of State Fiscal Year 2017, which ended June 30. The former State Long-Term Care Ombudsman decided to pay for the position with OSLTCO funds effective July 1, 2017; however, the OSLTCO's funding was not sufficient to meet this expense and the Policy Coordinator/Legislative Liaison was laid off in early FFY 2018.

In addition to eliminating these two positions, a number of OSLTCO staff voluntarily resigned in FFY 2017. To ensure services to Iowans were not

reduced, the OSLTCO left those positions unfilled and reassigned job duties to existing staff members.

FURTHER BUDGET-BALANCING ACTIVITY

Another change to the OSLTCO occurred in July 2017, when the former State Long-Term Care Ombudsman instituted a cost-savings measure for the last three months of this reporting year that resulted in the elimination of fleet vehicles used by the Long-Term Care Ombudsmen.

During the last quarter of this reporting period, the OSLTCO conducted advocacy efforts via telephone and other technology (similar to how physicians and other medical professionals are increasingly relying on telemedicine to reach rural and homebound patients). In the event there is an issue with communication or if a resident/tenant does not feel comfortable using telephone or technology, a Volunteer Ombudsman, if available, may be sent to the facility to contact the individual and address the issue or concern.

VOLUNTEER OMBUDSMAN PROGRAM

In FFY 2017, Volunteer Ombudsmen across the state served as an essential extension of the Long-Term Care Ombudsmen, acting as representatives of the

"Thank you for assisting us in making sure the nursing facility would accept the resident back after his hospitalization. They had initially refused, but changed their mind after the Long-Term Care Ombudsman became involved."

Hospital Nurse Manager



YEAR IN REVIEW

OSLTCO and working with residents, families and staff in their assigned facilities at least three hours per month.

At the end of FFY 2017, the Volunteer Ombudsman Program had 72 volunteers throughout Iowa, 67 of whom served in 62 of the state's nursing facilities and five who served in four of the state's residential care facilities. Due to the fact that the fleet vehicles were eliminated for the Long-Term Care Ombudsmen and travel to facilities was curtailed, several Volunteer Ombudsmen agreed to assist the OSLTCO by investigating cases and communicating with residents who lived outside of the volunteers' assigned facility.

As a result of their efforts, Volunteer Ombudsmen assisted long-term care residents resolve 1,470 matters in FFY 2017, and made 2,018 visits to facilities across Iowa. In addition, five administrative volunteers helped the OSLTCO accomplish tasks in the Des Moines office, including data entry, filing and mailings.

In FFY 2017, the OSLTCO completed its final year of participation with the AmeriCorps VISTA (Volunteers in Service to America) program. Over the course

of the year, two VISTA members assisted with the coordination and management of the Volunteer Ombudsman Program, with responsibilities that ranged from recruiting and training new volunteers to conducting statewide conference calls and organizing the annual volunteer recognition event.



The final VISTA member's placement with the OSLTCO ended in August 2017.

MANAGED CARE OMBUDSMAN PROGRAM

The OSLTCO, through its Managed Care Ombudsman Program, advocates for Iowa's

"Your presentation was excellent and thoroughly enjoyed by everyone. The information you shared was very enlightening. Our Ombudsmen gained valuable insight into your recommendations and strategies for establishing effective partnerships, protecting residents' rights and addressing the challenges of dementia-related illnesses."

Georgia State Long-Term Care Ombudsman

YEAR IN REVIEW

Medicaid managed care members who reside in long-term care facilities and/or who are enrolled in one of Medicaid's seven home and community-based services (HCBS) waivers. Those individuals and their family members can contact the Managed Care Ombudsman for assistance in understanding the waiver programs or to ask for help with issues arising with their managed care organization.

In FFY 2017, data was tracked by contacts made to the Managed Care Ombudsman Program. This system, which counts as a contact any occurrence of an individual reaching out to the program, was established when the program was implemented in April 2016. Because the number of contacts received by the program is not representative of the number of complaints received or the number of cases opened, the data tracking system has changed for FFY 2018.

In FFY 2017, 38,701 Iowa Medicaid members were eligible to be served by the Managed Care Ombudsman Program. A total of 4,187 contacts were received by the program during the year.

MOST FREQUENT ISSUES ADDRESSED BY THE MANAGED CARE OMBUDSMAN (BASED ON CONTACTS)

ISSUE CATEGORY	# ADDRESSED
Services being reduced, denied or terminated	1,819
Care planning participation	441
Access to information or information sharing	417
Change in care setting	350
Access to preferred/necessary durable medical equipment	329
MCO was rude or gave poor customer service	308



"I'd like to thank the Managed Care Ombudsman for all she has done for my child, and for me. She has been an exceptional person to work with as she is dedicated, hard-working and has followed through with me and with what needed to be done. I couldn't have done this alone and am so grateful for her support. Her work ethic and willingness to resolve the need to get my child home to Iowa and into a facility has been remarkable. I feel relieved, exhausted, but also happy that my child is getting the best care available."

Parent of Medicaid Managed Care Member

ACTIVITIES OF THE OFFICE

All Iowans residing in long-term care facilities have equal and consistent access to a Long-Term Care Ombudsman. When questions and concerns arise, the Long-Term Care Ombudsman is viewed as a trusted, knowledgeable resource by residents/tenants, family members and facility staff.

ADVOCACY

Long-Term Care Ombudsmen are first and foremost advocates for residents and tenants living in long-term care settings. Advocacy can include anything from speaking up for a single individual who is adversely impacted to working toward systemic change to ensure that all individuals residing in long-term care facilities are treated with dignity and respect.

Advocacy can also encompass reviewing and commenting on rules, regulations and laws; recommending policy changes when the health, safety, welfare or rights of residents/tenants are impacted; or educating residents/tenants, family members, care providers, policymakers and the general public on issues of concern to individuals residing in assisted living programs, nursing facilities, residential care facilities and elder group homes.

In FFY 2017, representatives of the OSLTCO provided 7,334.59 hours of advocacy for Iowans residing in long-term care facilities.

COMPLAINTS AND CASES

With resident/tenant permission, Long-Term Care Ombudsmen are required to investigate and try to resolve complaints made by or on behalf of residents/tenants of long-term care facilities that adversely affect their health, safety, welfare or rights. Complaints can come from any source, including a resident/tenant, facility employee, family member or friend, volunteer or a Long-Term Care Ombudsman.

Each complaint that is brought to, or initiated by, the Long-Term Care Ombudsman on behalf of one or more residents/tenants and requires investigation, resolution strategy and follow-up is considered a case. A case may consist of one or more complaints.

In FFY 2017, representatives of the OSLTCO responded to 1,332 complaints on behalf of long-term care residents/tenants, opened 780 cases and closed 783 cases.

INSTANCES OF PROGRAM ACTIVITIES IN FFY 2017:

Providing technical assistance	2,779
Visiting residents/tenants (non-complaint-related)	2,161
Providing information to individuals	2,003
Consulting with facilities/providers	1,314
Visiting residents/tenants (complaint-related)	470
Monitoring legislation and regulations	201
Working with resident councils	136
Participating in facility surveys	128
Providing community education	50
Training Ombudsmen/Volunteers	36
Working with the media	28
Training facility staff	22
Working with family councils	4

CONCERNS, TRENDS AND RECOMMENDATIONS

Of the 1,332 complaints the OSLTCO received in FFY 2017, more than three-quarters (1,030) were made by or on behalf of residents living in nursing facilities. Complainants most frequently contacted the OSLTCO with concerns regarding discharge or eviction notices and procedures. The second highest number of complaints received had to do with a resident's right to exercise preference or choice and other civil/religious rights, including a resident's right to smoke. Failure of facility staff to respond to calls for assistance was the third major cause of complaints.

Another 12 percent of complaints made to the OSLTCO in FY 2017 were made by or on behalf of tenants of assisted living programs. Of the 162 complaints filed, the majority again had to do with discharge or eviction notices and procedures. That was followed by complaints about food service quality/quantity and legal guardianship/conservatorship/powers of attorney/wills.

The final 80 complaints received by the OSLTCO in FFY 2017 were made by or on behalf of residents living in residential care facilities. Of those, the highest number of complaints pertained to a resident's right to exercise preference or choice and

other civil/religious rights, including a resident's right to smoke. Complaints about residential care facilities also included concerns regarding discharge or eviction notices and procedures, dignity/respect/staff attitudes and medication organization and administration.

The concerns reported over the course of the year are representative of challenges facing long-term care facilities not only across the state, but throughout the nation. By focusing on these emerging trends and analyzing their underlying causes, the OSLTCO can better position itself to address and resolve the issues that are negatively impacting the quality of life and care of Iowa's long-term care residents and tenants.

INVOLUNTARY DISCHARGE

The number-one reason that residents/tenants and their decision makers reached out to the OSLTCO in FFY 2017 was due to involuntary discharge. This was a troubling trend seen across the nation, where the decision to discharge a resident/tenant against their will was at times complicated by allegations of behaviors that made it difficult to find alternative placement for those individuals.

"I ran across your card this morning and I wanted to let you know that my loved one passed away last week. They were so appreciative of the time you spent listening to their care concerns. You gave them a voice they felt they didn't have in some circumstances there, and they needed that."

Relative of Nursing Facility Resident

RESOLUTION OF COMPLAINTS

COMPLAINT OUTCOME	# OF COMPLAINTS	% OF TOTAL COMPLAINTS
Resolved to satisfaction of complainant	584	45%
Partially resolved, but some problem remained	331	25%
Withdrawn before final outcome of investigation	133	10%
Not resolved to satisfaction of complainant	130	10%
No action needed	117	8%
Referred to another agency	37	2%

CONCERNS, TRENDS AND RECOMMENDATIONS

Although Iowa Administrative Code and updated CMS regulations require long-term care facilities to send a copy of each involuntary discharge notice to the OSLTCO, many residents/tenants do not know they have due process rights when it comes to involuntary discharge, nor do they realize they have the right to appeal the decision.

In FFY 2017, the OSLTCO received 227 notices of involuntary discharge and investigated 119 complaints related to admission/transfer/discharge/eviction.

In order to ensure long-term care residents/tenants understand their rights surrounding involuntary discharge and transfers, the OSLTCO recommends advocates and stakeholders work together to:

1. Provide education regarding the new CMS regulations on improper discharges to hospitals and on appeal rights for involuntary discharges and transfers.
2. Educate oversight and protective agencies about financial exploitation to protect residents/tenants from involuntary discharge/transfer due to a fiduciary's lack of action in applying for assistance or a fiduciary's non-payment of facility expenses.

3. Educate residents/tenants about their rights regarding a transfer to another room.

AUTONOMY, CHOICE AND RIGHTS

Another major concern that caused long-term care residents/tenants to reach out to the OSLTCO in FFY 2017 had to do with the individual's right to exercise preference or choice and other civil/religious rights, including the right to smoke. While facilities do have an obligation to establish policies that protect the health and safety of all residents/tenants, those policies may not infringe on an individual's rights to make decisions.

Too many times, individuals residing in long-term care are treated as if they cannot participate in decision-making or voice an opinion about their needs. Because of a pervasive belief that individuals give up their right to make decisions when they move into a new environment, choices regarding simple preferences, such as which pharmacy they use or who can come to visit them, are too often taken out of their hands.

In FFY 2017, the OSLTCO investigated 88 complaints related to autonomy/choice/exercise of rights.

"I can't begin to tell you how grateful we are for everything the Local Long-Term Care Ombudsman has done for my loved one. We know it's her job, but just the way she did things... Personally, it brought me a lot of comfort because even though I can't be there, I know my loved one is in good hands."

Relative of Nursing Facility Resident



CONCERNS, TRENDS AND RECOMMENDATIONS

In order to ensure residents/tenants residing in long-term care facilities are allowed to direct their own care and have choice and the ability to exercise their rights, the OSLTCO recommends advocates and stakeholders work together to:

1. Educate residents/tenants on the new CMS regulations that allow for greater focus on individual preferences, giving them increased control and choice.
2. Promote self-determination of residents/tenants to live in an environment that supports choice.
3. Involve residents/tenants in developing their plans of care and identifying their needs, strengths, goals, life history and personal preferences.

FAILURE TO RESPOND

Facility responsiveness was another major cause for concern among Iowa's long-term care residents/tenants in FFY 2017. Nationwide, individuals residing in long-term care cite the failure of staff to respond to call lights or requests for assistance as one of their top complaints.

Unfortunately, unanswered call lights can lead to

inadequate care for residents/tenants, as well as injuries from falls that ensue when individuals cannot get timely assistance with activities of daily living. Additionally, because long-term care residents/tenants attach importance to timely responses to their call lights, a lack of responsiveness can also lead to a loss of self-worth and/or the willingness and ability to advocate on one's own behalf.

In FFY 2017, the OSLTCO investigated 61 complaints related to failure to respond.

In order to ensure long-term care residents/tenants receive care and services that enhance their quality of life, the OSLTCO recommends advocates and stakeholders work together to:

1. Monitor facilities' implementation of new CMS regulations that require care and treatment to be provided in accordance with the individual's choice, developing a person-centered care plan and a comprehensive assessment.
2. Monitor facility staffing practices to ensure that the personal needs and preferences of residents/tenants are being met.
3. Review staffing practices to ensure sufficient staff are in place to meet residents'/tenants' needs.

MEDICATION MISMANAGEMENT

Issues with medication organization and administration also provided the impetus for many long-term care residents/tenants to reach out to the OSLTCO in FFY 2017. A troubling trend that has become increasingly frequent is the diversion of



CONCERNS, TRENDS AND RECOMMENDATIONS

opioids prescribed to residents/tenants by staff.

Medication diversion is defined as the transfer of a controlled substance from a lawful channel of use to an unlawful channel of use, and the diversion of opioids has become a national concern as the country's opioid crisis threatens the ability of individuals residing in long-term care to receive the medications they rely on for comfort and quality of life.

In FFY 2017, the OSLTCO investigated 53 complaints related to medication mismanagement. In order to ensure residents/tenants residing in long-term care facilities receive the appropriate doses of prescribed medications in accordance with their physician's orders, the OSLTCO recommends advocates and stakeholders work together to:

1. Monitor facility staffing practices to ensure that all employees who administer or supervise medications are properly trained.
2. Educate residents/tenants and their decision makers on medication diversion, signs and symptoms of substance abuse and how to report concerns regarding medication diversion to the appropriate authorities.

DIGNITY AND RESPECT

A final common concern brought to the attention of the OSLTCO in FY 2017 had to do with facility staff attitudes and their treatment of long-term care residents/tenants. While representatives of the OSLTCO were able, in many cases, to meet with individuals and their family members and facility staff to formulate productive responses to comments, treating residents/tenants with a lack of dignity and respect is a societal trend that should be monitored.

The respect for and dignity of an individual residing in a long-term care facility is challenged primarily through negative interactions between staff and residents/tenants, a lack of regard for residents'/tenants' privacy and a general insensitivity to the needs and desires of a population living in a long-term care environment. These attitudes leave residents/tenants feeling disempowered and devalued, which severely impacts quality of life and care.

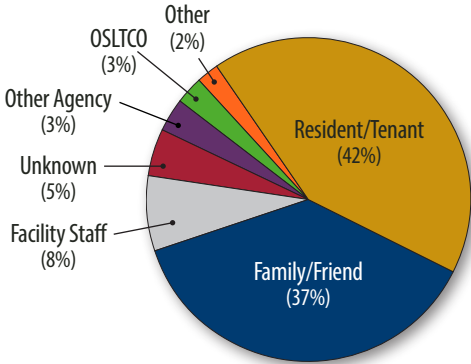
In FFY 2017, the OSLTCO investigated 48 complaints related to dignity/respect/staff attitudes.

In order to ensure long-term care residents/tenants are treated, at all times, with dignity and respect by

COMPLAINTS RECEIVED BY FACILITY TYPE

LONG-TERM CARE FACILITY TYPE	# OF COMPLAINTS RECEIVED	% OF TOTAL COMPLAINTS RECEIVED
Nursing Facilities	1,090	82%
Residential Care Facilities	80	6%
Assisted Living Programs	162	12%
Elder Group Homes	0	0%
TOTAL	1,332	100%

SOURCE OF COMPLAINTS RECEIVED



CONCERNS, TRENDS AND RECOMMENDATIONS

facility staff members, the OSLTCO recommends advocates and stakeholders work together to:

1. Provide training opportunities for facility staff that address resident/tenant rights, autonomy and dignity from a variety of cultural perspectives.
2. Monitor facility staffing practices to ensure that the personal needs and preferences of residents/tenants are being met.

CONCLUSION

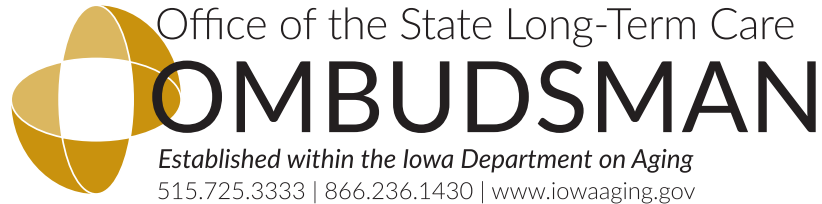
In FFY 2017, the OSLTCO met the challenges encountered and continued to serve the advocacy needs of Iowans living in long-term care settings and Medicaid managed care members residing in long-term care facilities or receiving an HCBS waiver.

Looking ahead to FFY 2018, the OSLTCO will continue to meet its responsibilities to Iowa's growing long-term care population by developing innovative solutions to current financial constraints and practice modifications to previous methods of operations within the Office.

ISSUES TO WATCH IN FFY 2018:

During FFY 2018 (Oct. 1, 2017 - Sept. 30, 2018), some of the key issues the OSLTCO will continue to monitor include:

1. Staffing levels that are sufficient to meet the needs of residents/tenants and the correlation to quality care.
2. Discharges and transfers from long-term care facilities to hospitals to ensure protocols exist to honor due process rights.
3. Prescribing and distribution of opioids to residents/tenants, use of opioids by residents/tenants and the impact on their well-being.
4. Long-term care options for individuals who are difficult to place due to challenging behaviors, such as mental health needs, or having a criminal background.
5. Pre-Admission Screening and Resident Review (PASRR) and the correlation between the need to provide specialized services and non-admission to long-term care facilities.
6. Medicaid managed care and the correlation between Medicaid as a payment source and non-admission to long-term care facilities.
7. Mental health care treatment, supports and access to services provided through the state's mental health care system redesign and the impact on residents/tenants.
8. Implementation of all resident/tenant rights to ensure individuals' voices are heard, respected and honored.
9. Ongoing education to residents/tenants and family members regarding the phased implementation of new federal regulations.



Office of the State Long-Term Care

OMBUDSMAN

Established within the Iowa Department on Aging

515.725.3333 | 866.236.1430 | www.iowaaging.gov