



**OFFICE OF THE  
NEVADA STATE  
LONG TERM CARE  
OMBUDSMAN**

**ANNUAL REPORT**

*Federal Fiscal Year 2008*

Submitted by:

Teresa Stricker, LASW  
Nevada State Long Term Care Ombudsman  
Division for Aging Services / Elder Rights Unit



**JIM GIBBONS**  
Governor

STATE OF NEVADA  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
**DIVISION FOR AGING SERVICES**

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**MICHAEL WILLDEN**  
Director

**CAROL SALA**  
Administrator

May 8, 2009

Dear Colleagues and Friends of Long Term Care Residents,

I am pleased to present the 2008 Annual Report of Nevada's Long Term Care Ombudsman Program.

The Nevada Long Term Care Ombudsman Program is responsible for advocating for the rights of residents over the age of 60 who reside in Nevada's nursing homes and group homes. We strive to fulfill this responsibility every day by providing prompt and fair resolution of complaints made by or on behalf of residents in long term care.

This report reflects the efforts of our highly dedicated Ombudsmen (Elder Rights Advocates).

I hope this report will be useful to you. I invite you to contact me should you have questions or need assistance.

Sincerely,

A handwritten signature in cursive script that reads "Teresa L. Stricker".

Teresa L. Stricker, LASW  
State Long Term Care Ombudsman

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## INTRODUCTION

This first edition of the Office of the Nevada State Long Term Care Ombudsman's Annual Report gives the reader a sense of the program's history, role, and progress over the past year. In Nevada the Ombudsmen are referred to as Elder Rights Advocates (ERA).

## MISSION

The Long Term Care Ombudsman Program (LTCOP) in Nevada is mandated by state and federal laws to protect the health, safety, welfare, and rights of residents over the age of 60 who reside in nursing homes, residential facilities for groups, and homes for individual residential care. These residents are often among the most isolated and vulnerable citizens in Nevada.

It is our mission to advocate for and on behalf of the residents we serve to improve the quality of life and quality of care in long term care settings.

## HISTORY

The idea of an Ombudsman Program was developed originally by Dr. Arthur Flemming and was influenced by a Swedish model. The word "Ombudsman" (Om-budz-man) is a Swedish word meaning advocacy. Dr. Flemming's idea was proposed to President Nixon and was included in his nursing home agenda in 1971. This Presidential directive helped states establish units to respond to complaints made by or on behalf of individual residents in long term care.

- 1972 Contracts were granted for the first Nursing Home Ombudsman Demonstration Projects. These original projects had an impressive record of complaint resolution.
- 1975 All states could seek funds for Ombudsman activities. Funding came from the Administration on Aging (AoA) for the development of Area Agencies on Aging (AAA's) for Ombudsman activities.
- 1978 All states were required to operate a Nursing Home Ombudsman Program and amendments were enacted into the Older Americans Act (OAA).
- 1981 The Nursing Home Ombudsman Program's name was changed to "Long Term Care Ombudsman Program" due to expanded responsibilities in other long term care settings such as group homes and assisted living facilities.
- 1983 Advocates for Residents of Facilities for Long Term Care was added to the Nevada Revised Statutes (NRS 427A.125).
- 1991 The Office of the State Long Term Care Ombudsman was created and added to the Nevada Revised Statutes (NRS 427A.300).

## THE OMBUSMAN PROGRAM TODAY

Certified Elder Rights Advocates are located within the Division for Aging Services (DAS) offices in Carson City, Reno, Elko, and Las Vegas. Advocacy services are available statewide to all long term care residents over the age of 60.

Until recently, the Ombudsman Program was responsible for investigating allegations of elder abuse in long term care facilities. After much research and program evaluation, it was decided to transfer the elder abuse investigation responsibilities to the Elder Protective Service (EPS) Program. This change has eliminated conflicts regarding confidentiality and consent, thus allowing the Ombudsman Program to concentrate solely on advocating for residents and resolving complaints.

The Long Term Care Ombudsman Program is increasingly charged with balancing consumer requests for advocacy including information regarding long term care placements, and the need to educate and inform the public about elder abuse, resident rights, resident councils, family councils, and to see that residents receive quality care and enjoy the highest quality of life possible.

- There are 5,332 residents living in Nevada's 48 nursing homes
- There are 5,924 residents who reside in 341 Residential Facilities for Groups (group homes/assisted living facilities)
- There are 412 residents who reside in 206 Homes for Individual Residential Care (HIRC), facilities with a census of 2 residents or less

## OLDER AMERICANS ACT

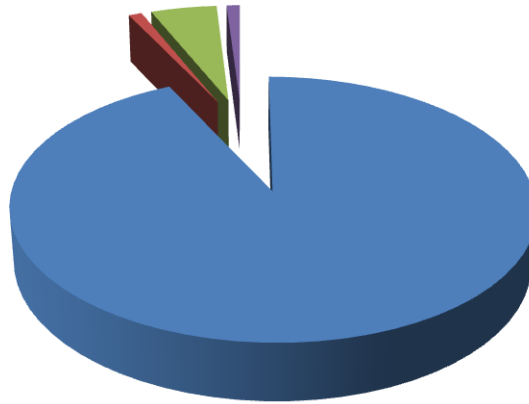
As directed by the Older Americans Act, the duties of the Long Term Care Ombudsman Program are to provide assistance in the development of new or improved programs to help older persons. The duties are as follows:

- Identify, investigate, and resolve complaints made by or on behalf of residents relating to health, safety, welfare, or their rights.

The Elder Rights Advocates are skilled in identifying the underlying cause of problems and working with the residents and the facilities to achieve effective and meaningful resolutions.

Currently, the LTCOP resolves complaints to the satisfaction of residents 92% of the time, far exceeding the national average of 60%. The chart below illustrates the complaint dispositions.

- Fully Resolved (92%)
- Partially Resolved (1%)
- Withdrawn/Other (6%)
- Not resolved (1%)



- Provide services to assist the residents in protecting their health, safety, welfare, and rights and to inform them about the means of available services.

Elder Rights Advocates spend much of their time in facilities advocating on behalf of the residents. They play a vital role in conveying information and guidance to residents and their families, friends, legal representatives, and facility staff and caregivers about other public and private agencies and services available. Each Elder Rights Advocate is responsible for specific nursing facilities, and conducts routine visits that are unannounced. In addition, Elder Rights Advocates make unannounced visits to residential facilities for groups and homes for individual residential care. Although not mandated by federal law, an effort is made to visit each of these facility types as often as possible.

- Ensure that the residents have regular and timely access to services provided through the LTCOP and that the residents and complainants receive timely responses.

Elder Rights Advocates make every attempt to investigate complaints timely and efficiently. A concerted effort involving intake workers, Elder Rights Advocates, supervisors, and the State Long Term Care Ombudsman (SLTCO) ensure each complaint is attended to and handled appropriately. These procedures are continually reviewed and monitored to encompass and ensure maintenance of the standards and goals of the Office of the SLTCO and the LTCOP.

- Represent the interests of residents before governmental agencies and seek administrative, legal, and other remedies to protect the health, safety, welfare, and rights of residents.

The SLTCO is involved with various committees and task forces within the community. Of particular interest is the Senior Issues Response Team (SIRT), a monthly meeting chaired by the SLTCO and attended by representatives of regulatory, administrative, and

legal entities statewide that are concerned about the welfare of seniors. A separate task force has also been set up to deal with the growing concern of unlicensed group homes in an effort to better orchestrate a multi-agency response. Members include all branches of law enforcement, state, county, and city regulatory, administrative, and social service agencies. The SLTCO also provides valuable testimony to various administrative, judicial, and legislative hearings in support of the rights of residents.

- Provide administrative and technical assistance to the Elder Rights Advocates.

The SLTCO is available to assist the Elder Rights Advocates in sorting through the details of challenging cases, providing resources and information, and offering support and encouragement as they deal with the multitude of tasks associated with this position. Guidance and assistance is also provided to Elder Rights Advocates who must testify before administrative, legal, and judicial bodies.

- Analyze, comment on, and monitor the development and implementation of federal, state, and local laws, regulations, and other governmental policies and actions that pertain to the health, safety, welfare, and rights of the residents and with respect to the adequacy of long term care facilities and services in the state; recommend any changes in such laws, regulations, policies, and actions as deemed appropriate; and facilitate public comment on the laws, regulations, policies, and actions.

The SLTCO works closely with the Elder Rights Attorney and Elder Rights Chief in this area.

- Provide training for representatives of the Office to promote the development of citizen organizations that participate in the program and provide technical support for the development of resident and family councils to protect the well-being and rights of residents.

The SLTCO is currently exploring options and models of volunteer programs already existing in other states in order to make a determination on the viability of such a program in Nevada. Locally, the LTCOP has offered numerous group and individual training sessions and counseling on how to approach and organize family councils. This effort has paid off as the Elder Rights Advocates are seeing much success in cultivating family councils since the LTCOP began its advocacy-based effort in February of 2008. In the ten months since, the Elder Rights Advocates have assisted in the formation of family councils in at least a fourth of their assigned facilities where none existed before and have cultivated and incited ensuing interest in the remaining nursing facilities.

#### CERTIFICATION PROCESS FOR OMBUDSMAN

The Division for Aging Services recognized the need for the development of a comprehensive “Training and Certification” process for all Elder Rights Advocates.

In late 2007, work began on this project and by early spring 2008 the training manual and certification process was completed. Elder Rights Advocates, the Elder Rights Attorney, the

Deputy Administrator and Elder Rights Chief all completed the rigorous training process and became certified in June 2008 after passing a comprehensive testing process.

### CURRENT FOCUS

Elder Rights Advocates visit each nursing facility at least quarterly on a routine non-complaint related visit (unannounced) in order to meet with residents, family members and facility staff regarding issues and concerns.

The LTCOP has made a concerted effort to present an increased presence in residential facilities for groups and homes for individual residential care. Unannounced routine visits are conducted in order to provide residents with information regarding the Ombudsman Program and to provide advocacy and assistance when requested.

The LTCOP conducts a variety of educational training sessions to residents, resident council members, family members, facilities, community entities, and caregivers. Available topics include, resident rights, elder abuse, mandatory reporting of elder abuse, signs and symptoms of abuse, family council development, and many more. Educational training is a free service.

Elder Rights Advocates provide the Bureau of Health Care Quality and Compliance (BHCCQ) (formerly the Bureau of Licensure and Certification) with pertinent information regarding trends and concerns prior to each of the surveys they conduct. The Elder Rights Advocates also attend many survey exits which are conducted by BHCCQ at the completion of a facility survey. This is done in order to stay abreast of issues, trends, and findings that could affect the quality of care or quality of life of residents.

### PROGRAM HIGHLIGHTS

The Ombudsman Program is dedicated to improving quality care and is at the forefront of the “Advancing Excellence” campaign. We have joined a host of consumer, provider, and quality improvement entities in order to effect positive change in nursing homes. In the early fall of 2008, Nevada became the second state to achieve 100% facility participation in this campaign. Each Elder Rights Advocate is working diligently with residents, families, and facilities to reach the goals they have set.

Another area the LTCOP began work on is providing resident councils with literature about councils such as the right to a private space within a facility to hold meetings, exclusive participation by residents, staff and others are invited guests only, etc. Additionally, assistance is given as requested with any issues the council may have.

The LTCOP is proud to offer training and guidance to family members considering joining or starting a family council. A detailed brochure has been developed and is available to family members.

The LTCOP has put systems in place to monitor facility trends and data associated with quality of care, services and outcomes. This further leads to opportunities for specific analysis of these trends and subsequent planning in regards to service delivery in the long term care system.

#### OMBUDSMAN PROGRAM ACTIVITY – ADVOCACY IN MOTION in 2008

- 461 Routine non-complaint related visits were made to Nevada’s Nursing Homes and Group Homes
- 2890 Complaints were investigated and resolved in Nursing Homes
- 1369 Complaints were investigated and resolved in Group Homes
- 90 Training sessions were conducted for residents, family members, community agencies and facility staff
- 88 Survey exit meetings were attended by the Ombudsman Program
- 442 Consultations were provided to facilities
- 466 Information and consultations were provided to individuals (residents, family members, prospective residents, etc.)

#### COMPLAINT TRENDS

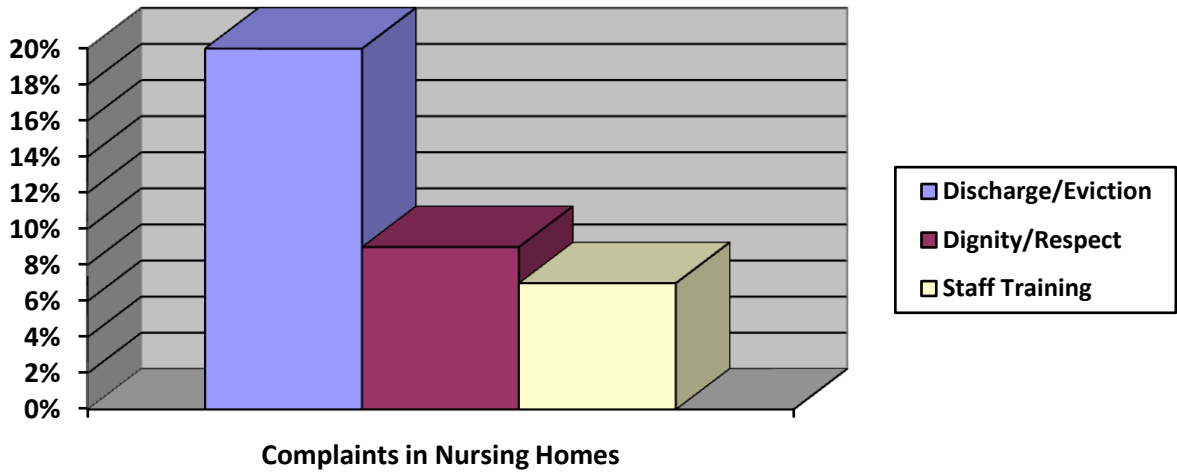
Prior to February 1, 2008, the Long Term Care Ombudsman Program required long term care facilities to self-report significant incidents. Elder Rights Advocates would then investigate these reports made by facilities on significant incidents similar to a regulatory capacity. The facility self-reports comprised almost 98% of the complaints handled by the Elder Rights Advocates.

As mentioned previously, as of February 1, 2008, the Nevada State Long Term Care Ombudsman Program began a campaign to focus solely on advocacy concerns and issues on behalf of residents of long term care and group homes. Prior to this change, the SLTCO met with the Executive Director and President of the Nevada Health Care Association (NHCA) in order to educate them and gain their support. The SLTCO made a presentation to the NHCA at their annual meeting in August 2008, outlining the changes, meeting with providers and answering questions. Additionally, a letter defining the advocacy role of the LTCOP was sent to all 595 facilities statewide. As a result, the LTCOP does not investigate facility self reports. The Elder Rights Advocates are fully driven and directed by the needs of the residents they so proudly serve.



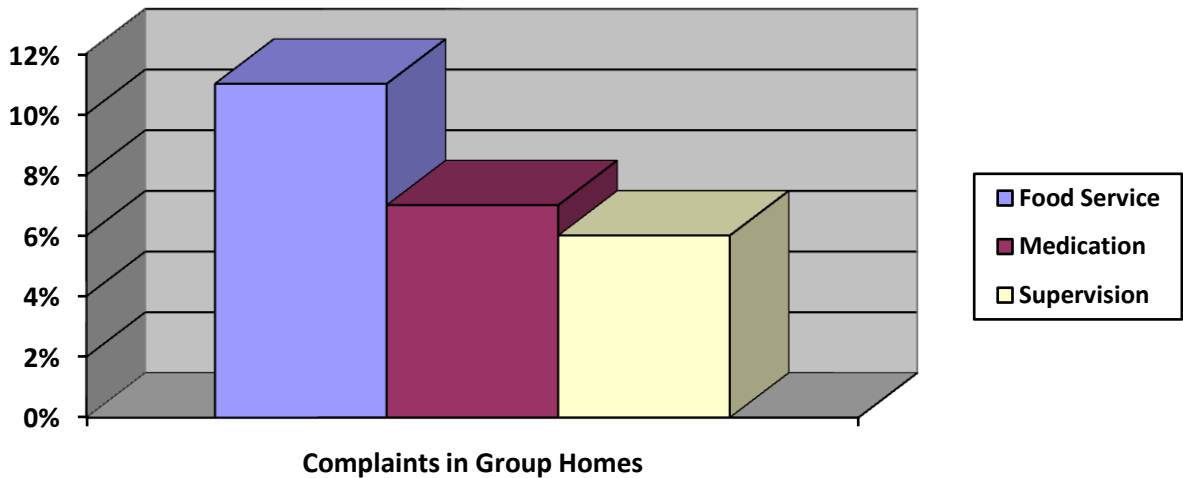
The top three complaint trends in nursing homes were:

1. Discharge / Eviction (20%)
2. Dignity / Respect (9%)
3. Staff Training (7%)



The top three complaint trends in group homes were:

1. Food Services (11%)
2. Medication Issues (7%)
3. Supervision (6%)



## GROWTH

Nevada continues to lead the nation in population growth, ranking in the top five of the fastest growing states annually. This growth in population has put increasing strain on the already understaffed LTCOP and the responsibilities of the SLTCO. However, due to the dedication of the Elder Rights Advocates and staff, the quality and level of care offered to residents of facilities has not been sacrificed and continues to lead the nation in satisfactory ratings of the program's compliant investigations.

These tables indicate the expected population growth by age group indicating the percent change from year 2000 as determined by the US Census Bureau and the Nevada State Demographer.

Year	Statewide Population Projections	Percent change from year 2000
2000	1,998,257	-
2005	2,352,086	17%
2010	2,690,531	35%
2015	3,058,190	53%
2020	3,452,283	73%
2025	3,863,298	93%
2030	4,282,102	114%

Year	Population Projections for persons 60+	Percent change from year 2000
2000	15%	-
2005	16%	7%
2010	18%	18%
2015	20%	31%
2020	22%	45%
2025	24%	57%
2030	25%	66%

Year	Population Projections for persons 75+	Percent change from year 2000
2000	4.4%	-
2005	4.3%	-2.2%
2010	4.2%	-5%
2015	4.5%	2.2%
2020	4.7%	6.85
2025	5.7%	30%
2030	6.6%	50%

Year	Population Projections for persons 85+	Percent change from year 2000
2000	0.9%	-
2005	1.0%	11%
2010	1.2%	22%
2015	1.4%	56%
2020	1.5%	67%
2025	1.6%	78%
2030	1.9%	111%

## HIGHLIGHTS IN ADVOCACY

The Nevada State Long Term Care Ombudsman Program advocates for residents’ rights and promotes quality of care in all facilities statewide. The State Long Term Care Ombudsman is involved with national issues as a member of the National Association of State Ombudsman Programs (NASOP). The SLTCO also works closely with HealthInsight to promote the Centers for Medicare/Medicaid Services’ initiatives to improve quality of care in nursing homes.

Additionally, the State Long Term Care Ombudsman attended gatherings of the National Citizens Coalition for Nursing Home Reform, the Nevada Health Care Association, the Advancing Excellence in America’s Nursing Homes Coalition, and various state and local health care advocacy groups.

Of particular interest is the Advancing Excellence in America’s Nursing Homes Coalition and Nevada’s Local Area Networks of Excellence (LANE), an ongoing, coalition-based campaign concerned about the care for the elderly, chronically ill and disabled, as well as those recuperating in a nursing home environment.

This voluntary campaign:

- Monitors key indicators of nursing home care quality – both clinical quality and organizational improvement goals
- Promotes excellence in care giving
- Acknowledges the critical role nursing home staff have in providing care
- Recognizes the important role of consumers to the success of the campaign by contributing ideas and suggestions

As a designated campaign leader, the State Long Term Care Ombudsman directs efforts and initiatives to maintain the standards set forth, achieving 100% statewide participation among facilities caring for long term care residents.

	<b>NATIONAL</b>	<b>NEVADA</b>
<b>Percentage of nursing homes enrolled</b>	<b>45.4%</b>	<b>100%</b>
Pressure Ulcers	<b>12%</b>	<b>12%</b>
Restraints	<b>5%</b>	<b>5%</b>
Chronic Pain	<b>4%</b>	<b>5%</b>
Acute Pain	<b>20%</b>	<b>22%</b>

Nevada closely resembles the national averages for quality indicators, such as pressure ulcers, restraints, chronic pain, and acute pain.

## **SUMMARY**

There have been many challenges in 2008, and the Nevada Long Term Care Ombudsman Program has met them without hesitation. As we envisioned significant changes that would improve our advocacy efforts, we immediately began to implement innovative ideas to reach this goal.

The office of the State Long Term Care Ombudsman saw the intrinsic value in continued Ombudsman presence in the facilities. The LTCO program is conducting routine visits to skilled nursing facilities, residential facilities for groups and homes for individual residential care. This effort has achieved continued presence in facilities and has established a rapport with the residents, families, and staff so that the needs of the residents can be more readily identified providing for quick resolution to issues affecting all residents.

Abuse cases were directed to Elder Protective Services, leaving time for the LTCOP to concentrate on advocating for the resident. Certification Training was conducted for all Elder Rights Advocates, resulting in each becoming certified by the State Long Term Care Ombudsman.

The Long Term Care Ombudsman Program in Nevada has made great strides throughout this past year. We have increased the number of educational training sessions in the facilities. Topics include mandatory reporting of elder abuse, the role of the Ombudsman, resident rights, signs of elder abuse, and the development of family councils. Emphasis has been placed on attending resident and family council meetings. The Elder Rights Advocates provide information regarding trends to the BHCQC as they attend exit surveys. This has been helpful in building communications between the BHCQC and the LTCOP. Our program has been actively surveying volunteer programs in other states in order to incorporate volunteers in Nevada to assist in our advocacy efforts. Other areas of achievement include involvement in the Advancing Excellence campaign, attendance at the annual National Citizens Coalition for Nursing Home Reform conference, involvement with Nevada's Quality Improvement Organization; HealthInsight, and the improvement of technical systems for the purpose of data tracking.

While the Nevada Long Term Care Ombudsman Program has made systemic changes and improvements in advocacy, we have not lost sight of the long term goals that are yet to be realized. With unyielding resolve, these goals will most certainly be met. Together, we will strive toward creating a better and stronger program, and in that quest, one constant remains above all, our continued commitment to advocate for all residents in long term care.