The Maine Long-Term Care Ombudsman Program

ANNUAL REPORT 2021

207-621-1079 / 800-499-0229
www.maineombudsman.org

61 Winthrop St., Augusta, ME 04330
mltcp@maineombudsman.org
While we continue to endure the COVID-19 pandemic, this past year marked many positive milestones. The first was the reopening of many long-term care facilities allowing for more visitation by family and friends with their loved ones. LTCOP was proud to be a part of these safe reunions.

Once guidance from the Centers for Medicare and Medicaid (CMS) changed to allow in-person visits, our staff resumed our on-site work. We prioritized those long-term care homes with a history of significant survey deficiencies and complaints. Prior to resuming visits, we established visitation protocols with infection control as a priority. All staff and volunteers were trained regarding proper use of personal protective equipment (PPE.) LTCOP worked with volunteers to determine when they felt comfortable resuming in-person visits.

LTCOP staff continued meetings with the Division of Licensing and Certification (DLC) staff every other week. We attended stakeholder meetings held for providers and community agencies focused on COVID-19. With the participation from Dr. Stephen Sears, with the Maine CDC and Bill Montejo, with the Division of Licensing and Certification, we provided information on CMS guidelines for visitation. Every step of the way, we were there for families to answer questions, address concerns, and provide support.

Today, we continue to see improvements in vaccination rates but remain deeply concerned by Maine’s staffing shortage and its impact on quality care for long-term care consumers. LTCOP remains committed to working with those in the long-term care system, their families and regulatory agencies, to develop solutions that support and strengthen the direct care workforce.

Be well and stay safe,

Brenda Gallant, R.N.
Executive Director
Advocates for Long-term Care Consumers
Our program serves residents of nursing homes, assisted housing programs including residential care and assisted living, consumers receiving home care services including homemaker, adult day and hospice. We also serve patients in hospitals facing barriers in accessing long-term care services.

Advocacy for Residents in Nursing Homes
During FY21, LTCOP received 595 nursing home complaints including complaints related to quality of care, admission and discharge, staffing, resident rights, dietary/food service and COVID-19 related complaints. LTCOP continues to meet regularly with DLC to review nursing home issues impacting residents. These meetings provide an opportunity to share information about nursing homes with COVID-19 outbreaks, as well as problem solve complaints that LTCOP receives from residents and family members about visit restrictions.

Advocacy for Residents in Assisted Housing
During FY21, LTCOP received 460 assisted housing complaints including complaints related to quality of care, admission and discharge, resident rights, staffing, and COVID-19 related complaints. LTCOP staff and volunteers reached out regularly to assisted housing homes to provide information to staff on where to access the latest COVID-19 guidance from DLC, Office of Aging and Disability Services (OADS) and CDC. LTCOP staff joined monthly meetings with these agencies and assisted housing providers to receive updates and hear questions from providers.

Advocacy for Home Care Consumers
Whenever possible older adults and adults with disabilities who need long-term services and supports want to remain in their homes. The pandemic continued to bring challenges to home care consumers in FY21, affecting staffing, adult day programming, and access to their typical informal supports. The pandemic added strain on the direct workforce shortage, resulting in a systemic lack of staffing. LTCOP continued to receive calls from consumers and their family members about the difficulty of not being able to find staff. We connected consumers with assistive technology/DME, adult day services, self-directed care options, and community volunteer-based programs.

During FY21, LTCOP received 192 home care complaints including:
- 68 needing more home care services/lack of staff complaints
- 32 termination/reduction/denial of services complaints
- 14 assessing services agency/assessment process complaints.

In FY21 staff and volunteers made 149 visits to long-term care homes across the state. For those homes not receiving an in person visit, LTCOP staff and volunteers made 1867 outreach calls and virtual visits to facilities, residents and family members.
Hospital Patient Advocacy

LTCOP provided advocacy for patients in hospitals who experienced barriers in accessing long-term services and supports. These patients were unable to access long-term services and supports due to a variety of reasons including; dementia with symptoms of distress that can be challenging to manage, behavioral health challenges, bariatric needs, complex medical needs, lack of payment source, young age, and criminal history. Historically, these individuals waited weeks, months or even years, for services to be set up at home or in a long-term care home.

LTCOP’s ability to meet with patients continued to be impacted by the pandemic. We’ve adapted through phone calls and virtual meetings with patients and their representatives. Our staff reviewed referral records and worked to resolve barriers delaying discharge. LTCOP patient advocates are familiar with the culture of the long-term care homes around the state, making it easier to identify which homes may be a good fit for a patient. We continued to participate in a biweekly case review call with OADS staff to review issues regarding outcomes of Preadmission Screening and Resident Reviews (PASRR), and individuals needing or waiting for Brain Injury and Other-Related Conditions waivers.

Barriers to Discharge

These are the most common barriers to discharge in FY2021 (some had more than one).

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behaviors</td>
<td>105</td>
</tr>
<tr>
<td>Complex medical needs</td>
<td>70</td>
</tr>
<tr>
<td>Mental health</td>
<td>63</td>
</tr>
<tr>
<td>Payment source</td>
<td>18</td>
</tr>
<tr>
<td>Substance use disorder</td>
<td>14</td>
</tr>
<tr>
<td>Bariatric</td>
<td>14</td>
</tr>
<tr>
<td>Age</td>
<td>12</td>
</tr>
<tr>
<td>Cognition</td>
<td>10</td>
</tr>
<tr>
<td>Homelessness</td>
<td>9</td>
</tr>
<tr>
<td>Criminal History</td>
<td>2</td>
</tr>
</tbody>
</table>

Transition Assistance

LTCOP received calls from nursing home residents wanting to transition to the community. We worked with these residents as well as those in assisted housing settings or who are patients in hospitals who wanted to transition to the community.

When children with complex medical needs transition from children’s to adult home care services, families find there is not always a comparable adult program available that will meet their child’s needs. LTCOP received referrals from families who were getting 24/7 staffing under PDN IV children’s services, but were not eligible for 24/7 care under adult programming. Additionally, these transitions often presented challenges for consumers to continue accessing programming such as adult day services, or their ability to have the support they needed in the community.
LTCOP provided advocacy for these families by helping in the appeal process and/or in the requests for an Americans with Disabilities Act (ADA) reasonable accommodation so they can continue to have their needs met in adult programming. In cases where families were looking for admission in a long-term care home, or if home care staffing could not be found, LTCOP assisted in the search for appropriate placement.

**Legislative Advocacy**

LTCOP submits testimony on all long-term care legislation. Our testimony reflects the issues we observe as a result of our work with consumers. Funding for long-term services and supports is critical in assuring access and quality services. We testified in support of the funding included in the Biennial budget for nursing homes and noted that any percentage increase should be passed along to the direct care staff. We also supported funding for home delivered meals, wage increases for direct care workers across all long-term services and support settings, and legislation that proposed implementation of the Commission to Study Long-term Care Workforce Issues. Lastly, LTCOP initiated successful legislation to create a stakeholder group to consider a plan for the implementation of a family caregiver assessment.

**Volunteer Program**

Our Volunteer Program is an integral part of LTCOP’s efforts to ensure that the mission of the organization is accomplished. The Volunteer Ombudsman Representatives in many ways are seen as the heart of the program, serving in capacities that best suit their abilities and the needs of the program. Volunteers enhance the services of LTCOP as skillfully trained advocates certified by the State Ombudsman. They provide a voice for the concerns of long-term care residents who are living in nursing homes, residential care homes, and assisted living programs. Our volunteers assist in complaint investigations, visit long-term care homes quarterly, and provide education to long-term care staff. When pandemic protocols didn't allow for in-person visits, our volunteers provided outreach by phone and virtually to all long-term care homes to ensure they remained aware of LTCOP’s advocacy services.

During this reporting period, the Volunteer Program maintained an average of 25 Volunteer Ombudsman Representatives that were assigned to visit 10 nursing homes and 7 assisted housing homes across the state. Volunteers contributed 393 hours during which they made 59 routine visits to their assigned homes. Through the efforts of Regional Ombudsmen and volunteers, LTCOP provided 12 resident rights and mandatory reporting in-services for long-term care staff.
The Maine Long-Term Care Ombudsman Program is a non-profit agency whose mission is to advocate for quality of care and life for residents in nursing homes, residential care, and assisted living. Our services are free and confidential.

What does the Maine Long-Term Ombudsman Program do?

- Educate residents, their family, and facility staff about residents’ rights.
- Investigate and resolve complaints to improve residents’ quality of life and care.
- Represent residents’ interests before governmental agencies.
- Guide residents through the sometimes complex long-term care system.

Staff Directory

Brenda Gallant, RN
Executive Director
State Long-Term Care Ombudsman

Hyein Berg
Chief Financial Officer

Lori Barbee
Administrative Assistant

Judy White
Administrative Assistant

Joanne West
Intake Worker

Nicole Marchesi
Volunteer Program Manager

Patricia Thorsen, LSW
Ombudsman Program Manager

Danielle Malcolm, LMSW
Home Care Ombudsman

Maria Woodward, LSW
Regional Ombudsman

Bre Chamberlain
Regional Ombudsman

Susan McKeen
Regional Ombudsman

Trinity Baker, LPN
Project Manager

Allison Knight, LSW
Transition Manager

Pamela Marshall
Outreach Specialist

Bethany Tompkins
Regional Ombudsman

Erica Golden, LSW
Regional Ombudsman

Christopher Allen
Regional Ombudsman

Sergio Gutierrez
Database Developer

Please contact us if you need assistance.

207-621-1079 / 800-499-0229
61 Winthrop St., Augusta, ME 04330
www.maineombudsman.org
mltcop@maineombudsman.org