

Dear Citizens of Minnesota:

I am honored to present the 2018 Annual Report of the Minnesota Long-Term Care Ombudsman Program, a program of the Minnesota Board on Aging.

Aging is one thing we all have in common. When you think of aging, what are your initial thoughts? Unfortunately, older adults are commonly subjected to negative stereotypes. The tendency to devalue aging has been in vogue in our “youth-adoring” country, and these messages become internalized.

Older adults are subjected to a variety of stereotypes which lead to ageism, a form of prejudice. Ageism may foster elder abuse when older adults are devalued. News reports highlighting elder abuse in Minnesota have made the front page on a regular basis. The ugly truth is that elder abuse is real, manifests in many forms, and recognizes no boundaries.

The Office of Ombudsman for Long-Term Care saw a 150 percent increase in cases of abuse, neglect, and financial exploitation of vulnerable elders from 2015 to 2018. Regrettably, Minnesota ranks at the bottom in this country in terms of Ombudsmen consumer advocate capacity available to consumers.

With 10,000 elders retiring daily and 50 million elders projected to be 65 and older by 2020, the number of vulnerable elders with lesser incomes and assets is soaring. Too often, elders lose their civil rights, their homes, and their lifelong savings through undue influence and coercion, intimidation, isolation and misrepresentation.

Elders who receive long-term care services have rights under federal and state law. Elders are entitled to quality of life, quality of care, and independent consumer advocacy services when needed. The Office of Ombudsman for Long-Term Care advocates directly for and on behalf of consumers of long-term care services to resolve problems with a focus on prevention.

Yours Sincerely,

A handwritten signature in black ink that reads "Cheryl Hennen". The signature is written in a cursive, flowing style.

Cheryl Hennen
State Long-Term Care Ombudsman

Overview: Role of the Office of Ombudsman for Long-Term Care (OOLTC)

What We Do

- Identify, investigate, and resolve resident complaints
- Provide information and consultation to residents and their families as part of cases and also support resident councils and family councils
- Advocate for systemic change within long-term care facilities
- Inform public agencies about the problems of residents by evaluating and reporting on regulations, laws, policies, and actions that may adversely affect people who receive long-term care services

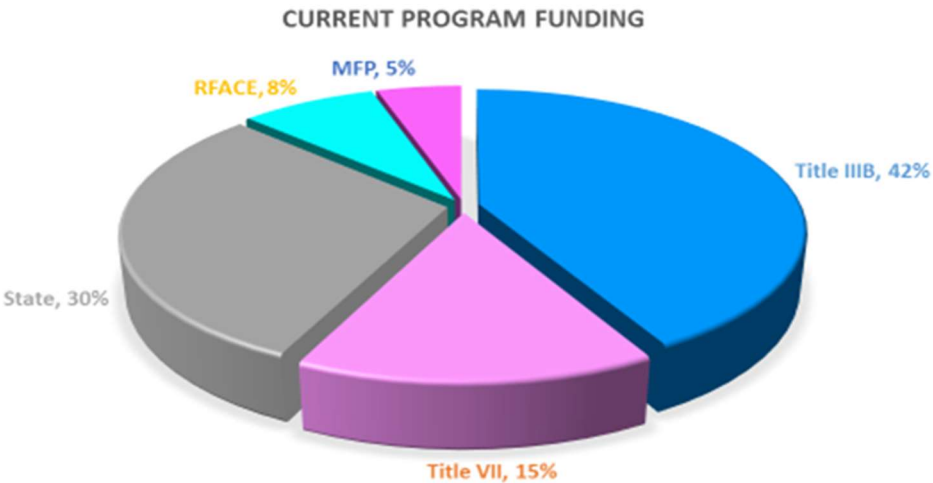
Authority

Ombudsmen have authority to do their work from many sources.

- 42 U.S.C. § 3058g, Older Americans Act (OAA) ombudsman statute
- Minn. Stat. § 256.9742, Minnesota ombudsman statute
- Minnesota Board on Aging
- Administration Community Living/Administration on Aging for Ombudsman program compliance

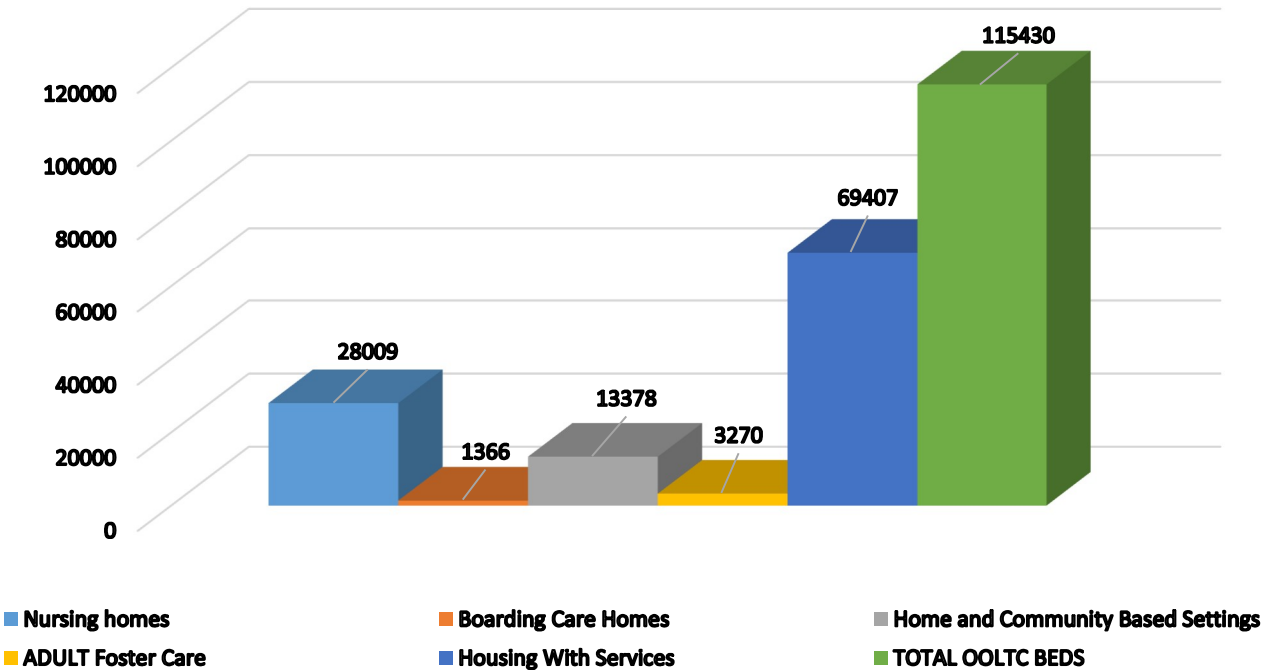
Funding Sources

Ombudsman program funding comes from a variety of sources.



Where Do Our Residents Live?

Statewide Provider Settings at a Glance



What We Accomplished

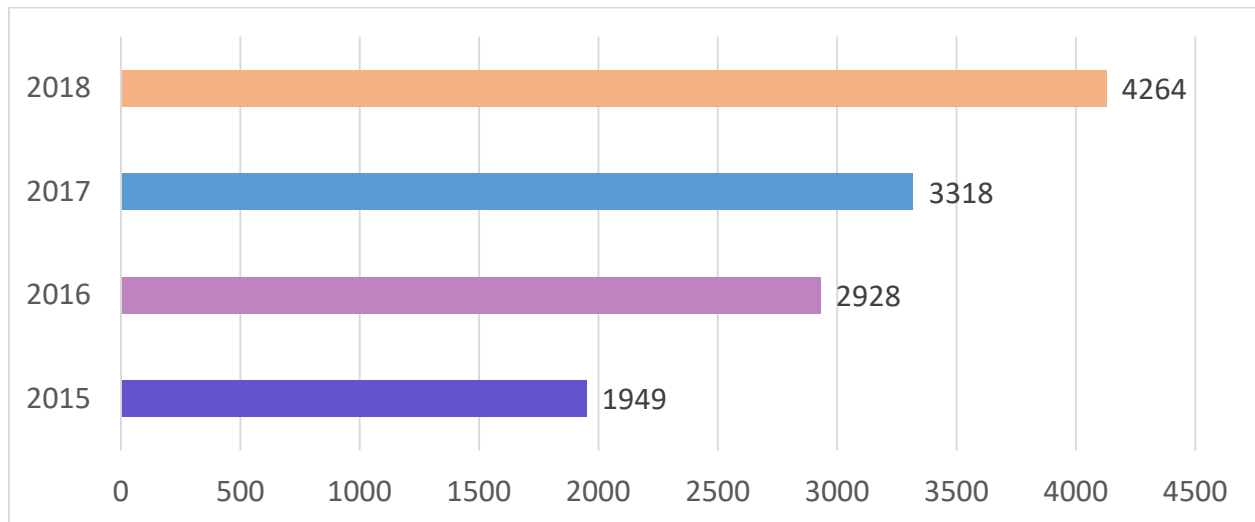
In the 2017-2018 program year, the Minnesota Long-Term Care Ombudsman Program:

- Investigated 4,264 complaints made by or on behalf of residents in long-term care facilities.
- Responded to approximately 400 calls per month made to the statewide toll-free Ombudsman intake line.
- Visited 592 facilities at least quarterly, not in response to complaints, to observe facility conditions and be available to residents for assistance.
- Provided 4,886 individual consultations on topics such as resident care, Advance Health Care Directives (AHCD), and Ombudsman services, roles, and responsibilities.
- Completed 2,399 consultations to facility staff on topics such as resident rights, resident care issues, and Ombudsman services, roles and responsibilities.
- Conducted 69 training sessions for facility staff on topics such as elder abuse prevention, mandated reporter responsibilities, resident rights, and the role of the Ombudsman in skilled nursing facilities and residential care facilities for the elderly.



- Delivered 81 community education sessions, including senior care events, health fairs, and other presentations to the public.
- Supported 760 resident and family councils and their rights to self-advocacy by attending, at the request of council members, resident council meetings and family council meetings in facilities.
- Participated in 309 facility surveys conducted by state licensing agencies to provide information to surveyors and advocate for residents.

Complaints to OOLTC are Steadily Increasing



Elder Abuse Complaints Continue to Rise

Between 2015 and 2018, OOLTC has seen a 150% increase in complaints about abuse, neglect, or financial exploitation. The number of these complaints has increased each year.

Other Complaints on the Rise

Between 2017 and 2018, complaints have risen in every complaint category, such as:

- Environment/Safety - 47% rise
- Autonomy/Choice/Preferences/Rights - 21% rise
- Staffing - 33% rise
- Dietary/Nutrition Services - 34% rise

Ombudsmen Make a Real Difference

Case Highlight #1

The OOLTC received a call from concerned friends of an elderly man with dementia who moved to Minnesota to live with his niece. His niece had him sign power of attorney paperwork and quickly took over decision making for him. Before long, and although he has low care needs, she moved him into a locked memory care unit at an assisted living facility and directed no contact with his out-of-state friends. The Regional Ombudsman took a person-centered approach. The client was clear that he did not want to stay in the locked unit and he wanted to be able to speak with his friends. The Regional Ombudsman worked with the resident and eventually the Power of Attorney was removed and investigated for financial exploitation. The resident agreed that he needed help with decision making and was appointed a guardian who has supported his wishes.

Thanks to help from his regional ombudsman, the client now is no longer living in a locked unit and has good access to his friends and to the outdoors.

Case Highlight #2

The resident lives with debilitating illnesses and continues to need a high level of care following an organ transplant. The Regional Ombudsman assigned to his case has helped him with complaints related to incontinence care, possible neglect by the facility, and his right to dignity and respect. The resident's fiancée wrote to thank the Regional Ombudsman:

"I can't thank you (our ombudsman) enough for all the support you've been in this new rollercoaster life that we've been living since transplant. Really. Thank you!"



Minnesota Veterans Homes: Another Opportunity for Advocacy

Regional Ombudsman, Maisie Blaine, highlights her work at the Veterans Home in Silver Bay.

If you take a drive up the North Shore and visit the Minnesota Veterans Home in Silver Bay, one of the unique individuals you may meet is Magnus Nelson. Magnus was drafted and served in the Army starting in 1951. Magnus was stationed in Baumholder, Germany and worked in a special squadron. Magnus married and spent some 56 years with his wife Ruth, who has since passed away. The two raised 7 children together and have numerous grandchildren. Magnus provided for the family working as a truck driver, mechanic and equipment operator. He spent over 30 years in the logging industry doing a variety of important jobs in and around logging camps.

A request for help from the Regional Ombudsman was made due to an involuntary discharge notice received from the Minnesota Veterans Home. The Regional Ombudsman became involved, confirmed that Magnus wished to stay at the Veterans Home, and assisted with navigating the reconsideration process offered to Magnus under federal regulations. This reconsideration hearing resulted in the Veterans Home rescinding the discharge notice and avoiding what can often be a lengthy discharge appeal process.

The care team agreed to work with Magnus and his family to better assess and address his needs. A year later Magnus continues to live at the Minnesota Veterans Home and have his needs successfully met at the Veterans Home in Silver Bay.

Statewide, there were 31 cases opened at the five Minnesota Veterans Homes and over 230 case and non-case activities completed by OOLTC.

Self-Advocacy Specialist

Self-Advocacy Specialist helps empower residents to speak for themselves



Residents in nursing homes may feel like they don't have a voice and cannot participate in their own care and activity planning. However, residents of any ability level have the right to express their own choices in how they spend their days. The OOLTC created a two-year position entirely focused on resident education and training about self-empowerment. Self-Advocacy Specialist Jane Brink was the perfect fit for the job. The project educates nursing home residents on their rights, the principles of person-centered care, the right to live in the most integrated, least

restrictive setting possible and the associated resources to achieve these goals. The project included a research and information gathering phase in fall of 2017 where more than 124 residents and 250 stakeholders, including facility staff, gave input. From that research, the project specialist developed modules under the theme: "You are the Key: Stand up for Yourself and Each Other." Those modules include the basics of resident-self advocacy and the creation of a personal one-page description of "what is important to you."



Resident councils who request the training are given highest priority. As the project moved from a research phase to training in facilities, more than 8 resident councils invited Jane to give presentations. Jane trained residents at an area-wide Resident Council in Fergus Falls as one of her first events, which helped expose

residents from multiple facilities to training materials. Thirty-five nurses were also given person-centered training at a local conference. Dozens more presentations to over 500 residents have been held since the program year ended. The project continues to expand with more facilities scheduled for training sessions in the next year.

Measuring Success

How do we gauge OOLTC success with residents?

One way to measure success is through our customer satisfaction survey process. As cases close, clients and complainants are sent satisfaction surveys about the service received from the regional ombudsman.

Of 351 surveys mailed out in the program year, the overall satisfaction rate was 4.5 out of 5. Residents are overwhelmingly pleased with services received from the Regional Ombudsman.

Statements from surveys returned to the program this year

“My interaction with the ombudsman greatly improved my ability to advocate for my mother’s well-being by...advising and supporting me in my preparation for a meeting with the facility’s leadership to express my family’s concerns about my mother’s care in the memory unit, as well as participating in the meeting as a facilitator.”

A resident wrote: “The other resident has not harassed me, threatened me, or tried to injure me and leaves me alone. Thank you for your help.”

“The Ombudsman immediately got the care of my father improved 100%. The communication improved 100%. Thank you! The Ombudsman is amazing.”

“The Ombudsman was able to correct the 7 month long situation in one hour! Wow! How grateful our family is for his help in dealing with this problem.”

“Working with my ombudsman was very helpful. He checked into things promptly, got back to me in a timely manner, and has followed through on things and even checked back to see if there has been any changes. He has been great to work with.” - Resident

A former nursing home resident wrote: “He took time and explained to me what the nursing home could do and not do, so finally the Ombudsman told me that I had a right to move to another nursing home...Once my doctor adjusted my medication in three days I was perfect. If it wasn’t for the Ombudsman’s great assistance, I would be locked up in a nursing home for the rest of my life...I am doing fantastic in my own home.”

**These statements may be edited for confidentiality.*

OOLTC at the Capitol (2017-2018)

Speaking up for Resident Rights in LTC Settings

The *Star Tribune* published a five-part series of articles in November 2017 that helped to spark major interest in nursing home and assisted living conditions for residents in Minnesota. These articles highlighted elder abuse and inadequacies in investigations of complaints of abuse by the Minnesota Department of Health's Office of Health Facility Complaints ("OHFC"). There were roughly 400 reports of abuse every week involving residents of elder care facilities to OHFC, separate from other licensing complaints made to the Department of Health, and they were not being properly investigated. These articles helped to prompt variety of reports and legislative efforts, and the Minnesota Office of Ombudsman for Long-Term Care ("OOLTC") was a significant part of these efforts.

In the legislative session in the spring of 2018, the OOLTC proposed an increase in funding to provide additional full-time ombudsman positions. Minnesota is at the bottom in the country in ratio of ombudsman per long-term care bed. With additional staff, OOLTC would be able to provide additional services to more residents, provide more education, and conduct many other important activities that will improve quality of life and quality of care for residents. OOLTC met with numerous legislators and others to promote this increase in staffing. 10 additional staff for OOLTC was ultimately part of a package of bills vetoed by the Governor in 2018.



After the 2018 session, OOLTC was among a group of stakeholders who remained interested in effecting positive change in Minnesota's long-term care system. Multiple stakeholders including government, providers, and consumers participated in workgroups coordinated by the Minnesota Department of Health, which began in September 2018. These workgroups discussed assisted living licensure and other important topics affecting older and vulnerable adults in

Minnesota. Cheryl Hennen chaired the Consumer Rights Subcommittee, and OOLTC staff members participated in each of the subcommittees. The efforts of these workgroups ultimately led to the passage in 2019 of the Elder Care and Vulnerable Adult Protection Act, which provided 17 additional staff for the Ombudsman program in Minnesota. The results of the 2019 session will be covered extensively in the 2018-2019 annual report.

OOLTC will continue to promote systemic changes that are needed for consumers.

Systemic Work with Long-Term Care Providers

Systemic Work

In addition to complaint work, OOLTC conducts systemic work with LTC providers.

OOLTC has met with senior corporate staff of two providers in Minnesota that have shown significant problems across multiple care settings related to resident rights. OOLTC regional staff expressed concerns that these providers were showing many similar problems across facilities, so OOLTC determined to address these issues in a systemic manner.

Some of the common problems identified at settings operated by these companies were problems with quality of care (such as negative staff attitudes, poor staff levels and training, and failure to provide person-centered care), and lack of knowledge and respect for resident rights (such as improper discharges and refusals to readmit).

OOLTC separately met with corporate staff. Specific information was given to the providers outlining overall concerns with their facilities as well as individual breakdowns of issues as well as strengths seen at each facility. The specific information included: common complaints found throughout the data; ombudsman complaint history by month; types of complaints to the ombudsman's office; resident and family council activities; state and federal nursing home compare data; complaints to the Office of Health Facility and Complaints (including number of complaints and concerns raised); and general observations from the regional ombudsmen assigned to each facility. The providers shared their perspectives and expressed that they were aware of some of the issues identified. They promised to follow up on the issues and continue to work on quality of life and quality of care. OOLTC plans to continue to follow up with corporate management of these providers to ensure that the problems identified are improving.

Another example of systemic work:

Ombudsman helped residents who needed to relocate from assisted living facilities which closed in the metro area. There were three closures this program year.

The Certified Ombudsman Volunteer Program

Volunteers are another key to Ombudsman Success

The Certified Ombudsman Volunteer Program is a service of the Office of Ombudsman for Long-Term Care. Certified Ombudsman Volunteers (COVs) complete extensive training, building a foundation that equips COVs to advocate, empower and educate consumers of long-term care services and supports.

COVs extend the reach of Regional Ombudsmen (ROs) by building trusting relationships with residents and providing a regular presence in assigned facilities.

COVs enhance the quality of life and services for people receiving long-term services and supports through volunteerism. A few examples of the work they do:

- COV and RO met with the facility's Social Service Director, Director of Nursing and Administration. This meeting resulted in a successful exchange of information and review of policies.
- COV worked with a resident and facility staff to resolve a concern over the resident not receiving his social security funds.
- COV was able to coordinate with the facility to have the resident's dentures replaced at no cost to the resident.
- COV advocated for the residents to have the facility provide two speakers for the computer in the facility's library.

COV Program at a Glance

35 COVs
provided
advocacy
services
throughout
Minnesota.

2572 hours
were
generously
donated.

COVs spanned
16 counties and
9 regions.

COVs spent over
200 hours
working with
resident and
family councils.

COV Highlight: Larry Clausen

- Larry volunteers in two Minneapolis facilities, including the Minneapolis Veterans Home.
- Lifelong volunteer for healthcare and social justice causes.
- Retired. Previous: Executive Director of Arizona Developmental Disabilities Planning Council and extensive career in long-term care service.

“Nursing home residents are the epitome of reliance, giving up independence in hopes of sustaining the last chapters of their lives in a comfortable and secure environment. Each time that I enter the facility I hope that I can make myself available to the individuals who need help in achieving the goals of dignity and some degree of satisfaction with their lives in a congregate setting.” – Larry Clausen

COV Directory

Ana Westerfelt	Fred Simon	Marion Jacobson
Audrey Wiita	Gary Hennen	Michele Murphy
Barb Risken	Gloria Alexander	Molly Tackaberry
Barb Spears	Halle O'Falvey	Myrna Yenter
Betty Clark	Jim Sowles	Pat Loban
Betty Johnson	Jo Hennen	Pat Westman
Charlotte Hanson	Joy Mesia	Patricia McCormick
Christine Marcotte	Kathy Konstant	Ronna Locketz
David Odabashian	Kelli Turcotte	Rose Hansmeyer
Dorothy Chizek	Larry Clausen	Sue Halverson
Edith Hoyum	Louis Solwes	Tom Oven
Elizabeth Spohr	Mary France	

The Office of Ombudsman for Long-Term Care

Central Office Staff

Staff	Title
Cheryl Hennen	State Long-Term Care Ombudsman
Natasha Merz	Deputy State Long-Term Care Ombudsman
Aisha Elmquist	Ombudsman Specialist
Jane Wolff	Program Advocacy Coordinator
Emmanuel Anthony	Management Analyst 4
Sharon Guzman	Office Administrator

Regional Ombudsman Staff – Metro Area

Staff	Region	County/City
Jim Dostal	West Metro	Carver, McLeod, and Scott County. Cities: Deephaven, Eden Prairie, Golden Valley, Hopkins, Long Lake, Loretto, Maple Plain, Minnetonka, Minnetrista, Mound, Plymouth, Shorewood, Spring Park, & Wayzata.
Lori Goetz	Southeast Metro	Dakota and Southern Washington County. Cities: Bloomington, Edina & Richfield.
Jane Wolff	Minneapolis	Minneapolis. Cities of Lakeville and Burnsville.
Kristen Rice	Metro-Minneapolis	Minneapolis & St. Louis Park
Sally Schoephoerster	Metro-Northwest	Arden Hills, Brooklyn center, Brooklyn Park, Crystal, Falcon Heights, Maple Grove, Moundsview, New Brighton, New Hope, Osseo, Robbinsdale, Roseville & St. Anthony Village.
Paula Wieczorek	Metro-Northeast	Ramsey County & Northern Washington County.

Regional Ombudsman Staff – Greater Minnesota

Staff	Region	County/City
Maisie Blaine	Northeastern MN	Cook, Itasca, Koochiching, Lake & St. Louis
Dan Tupy	North Central MN	Aitkin, Carlton, Cass, Crow Wing, Hubbard, Kanabec & Wadena
Sylvia Hasara	Southwestern MN	Brown, Cottonwood, Faribault, Jackson, Lincoln, Lyon, Martin, Murray, Nobles, Pipestone, Redwood, Renville, Rock, Watonwan & Yellow Medicine
Ann Holme	West Central MN	Big Stone, Chippewa, Douglas, Grant, Kandiyohi, Lac qui Parle, Otter Tail, Stevens, Swift, Traverse & Wilkin
Cory Jones	Northwestern MN	Becker, Beltrami, Clay, Clearwater, Kittson, Lake of the Woods, Mahnommen, Marshall, Norman, Pennington, Polk, Red Lake & Roseau
Dave Christianson	South Central MN	Blue Earth, Le Sueur, Nicollet, Rice, Scott, Sibley & Waseca
Jamie Kunst	Southeastern MN	Dodge, Goodhue, Fillmore, Freeborn, Houston, Mower, Olmsted, Steele, Wabasha & Winona
Tiffany Carlson	Mid-Central MN	Benton, Mille Lacs, Pope, Sherburne, Stearns & Todd
Wendy Weidner	East Central MN	Anoka, Chisago, Isanti, Meeker, Pine, Wright & the cities of Rogers, Champlin, Dayton & Elk River