

LTC Council Meeting

May 6, 2020

Welcome from Director Basta

Thanks for the great work being done across the state in the midst of the pandemic

Kelly Richards:

Thanks for the willingness to join the call and collaborate.

Roll Call:

Julie Preston

Kim Polermo

Matt Hartman – no

Laurie Hendron – no

Marcia Johnson

Carolyn Peck

Wayne Smallwood – no. retired. He has a replacement. Karin Zosel (Jeneane will send Kelly the contact info)

David Sutter

Kurt _____ - no

Greg Wilson

Malinda McDonald

HFS – Jeanene Brickey

Phil Miller

John Hosteny

Allie Johnson

Gwen Diehl

Josh from Sect of State

Aimee Isham - ?

ROs, PSA01 CWM/PSA02CCDJ Katie/PSA02DuP – Trish/PSA03 Jen/PSA04 Theresa / PSA05 Angie / PSA06 Stephen / PSA07 Megan / PSA / PSA09 Terri / PSA11 Elaina / PSA12 Bernard /

Jessica Belsly / Chuck Miller / Joe Danner / Amy / Lora / Selma / Samantha / Jason

March 16th Kelly issued memo suspending face to face visits as a result of direction from CMS. The LTCOP has not been doing face to face visits. Our advocacy has been done via phone, email, video conferencing. We have developed post cards, FAQ, rights flyer and posters. These were sent with the invite. We are reaching out to activity directors and resident council presidents. In regards to window visits, we are working with the facility to coordinate those visits to see what residents would want to meet with

an Ombudsman where appropriate. We're still handling complaints and following up on those. Ombudsmen are looking for innovated ways to contact facilities. One Ombudsman did an information 101 as he called BINGO remotely.

PSA01 – Cathy Weightman-Moore. Stay connected with resident, families, and facilities. They learned quickly that phone calls didn't work everywhere, so they did a progression of calls and emails to facilities to check in and see how we can stay in touch with residents. Asking about care plans. Providing info about the stimulus checks. Barrier has been reaching residents who are unable to do telephone or video chats. Beginning window visits today and including their own postcards since the ones aren't ready from the Office. Some residents call often to have that link to the outside.

PSA02 DuPage – Trish N. Work closely with local health department and hospitals. Working with barriers hospitals are having getting residents readmitted to Assisted Living. Contacting all current open case residents and/or representatives. Working with facilities to make sure the facility is keeping residents informed of what measures they are taking for infection control. Contacting facilities to get a current census. Working to keep volunteers in the loop. Received a PC on Friday thanking Trish for the help her CO was able to clarify for her regarding a loved one in a facility. Barriers – being put into a counseling role because residents are very anxious due to isolation and fear of the virus / compassion fatigue staff are facing as they hear stories from family members.

PSA02 Lake – Suzanne Courtheaux. Similar things listed previously. Reaching out to past clients and other residents they have relationships with. Created FAQ flyer and it is posted on the LAC website. Distributed flyer to all facilities about the stimulus funds. At a COVID-19 only facility, they got a list of all residents and called each resident to inform them about the Ombudsman Program. Staff member called BINGO yesterday. Success story – resident in skilled facility and completed rehab. The independent living facility said he can't come back. Ombudsman worked with the resident to advocate that he could get back into his independent living facility.

PSA02 CCDJ – Katie Harrison. Continue to see increase of COVID-19 cases in facilities. Similar activities as other Programs. They've seen an increase in calls from family members who were not aware of the Program previously. Barriers – not being able to talk face to face. Confidentiality has been an issue. Exploring the idea of window visits, but have not yet started. Volunteer coordinator passing educational opportunities to volunteers. Success story – overall relationship with facility staff has improved. Staff are seeing the Ombudsman Program is trying to help the residents, not make things more difficult.

Question – why would a facility not allow window visits? One case they were working on the staff didn't want to allow a family member to do a window visits. There may be issues of layout of buildings.

PSA03 – Jen Glackin. Barriers – working on the facilities that received strike notices. Having difficulty communicating with ICF-DDs. Facility getting mixed info on how to handle PPE. Info from IDPH webinars conflicts with local health department guidance on PPE. Similar contacts as other programs. Success –staff becoming more familiar with thinking outside the box in ways to meet the resident needs.

PSA04 – Theresa Kuhlman. Outreach efforts are similar. Facility staff are seeing the Ombudsman Program is a resource for them as the Ombudsmen help residents. Handing info out at the end of a facility parade to family members. Success story – a resident was unnecessarily sent to the hospital, but NH refused to readmit the resident. Barriers – staffing issues. Facility closures.

PSA05 – Angie Baker. Facility closure in March. Doing similar work to other programs. Call facilities bi-weekly. Overall experiencing a sincere cooperation between facility staff and the Ombudsman Program. Providing meaningful activities has been a challenge, but getting residents outside seems to give a big boost to residents. Communities seem to be stepping up to support facility staff and therefore helping residents.

PSA06 – Stephen Maxwell. Outreach similar to other programs, primarily by phone. Reaching out to facilities bi-weekly. Sent out a slide to the local access tv channels within facilities. No new cases have been COVID-19 related. Barriers – doing work at home while children are there. Work by phone has been difficult as the Ombudsman sits on a hold a lot. Not being able to see the person has been a major challenge. Residents stress level has been increasing. Only 1 positive case in the facility so there is a lot of anger in the community as there aren't many cases.

PSA07 – Megan Jizmagian. Outreach similar to other programs. Working to stay up to date on the info being provided and sharing that info with facility staff. Facility staff looking to the Ombudsman Program as a resource. Majority of the outreach has been with family members and staff. Challenges have been reaching out to residents but don't have work phones, so getting info back has been hard. With the stimulus money, looking at outreach to residents. Adding call forwarding to office phones. Coordinating the start of window visits. Haven't received many new cases. Sharing ideas with activity directors as to what types of activities other facilities are doing to keep residents engaged.

PSA08- Chris Sutton. Outreach similar to other programs. Keep a separate tracking log to ensure track resident and facility staff member every two weeks. Focus on trying to reach resident council president. Providing info about counseling services to facilities and talking about how they are working to support the mental health of the residents. They've conducted 4 window visits so far. Challenges – residents waiting an extensive time for being changed. A resident not being allowed to transfer.

PSA09 – Terri Simpson. Outreach similar to other programs. They were the first program do conduct successful window visits. Residents were appreciative of this form

of communication. There has been a lot of helpful resource sharing between the Regional Ombudsmen Programs as well as with the State Office. They've sent hand-written notes to residents and staff within the facilities. They've been looking at facilities' social media pages to see what they are posting. Barrier – staff not using PPE, no internet/Wi-Fi in many facilities as well as poor phone service. A major barrier is the lack of monitoring and oversight within the facilities.

PSA10 – Misti Hinterscher. Similar outreach to other programs. Misti is a new RO, so she has been learning the job during this challenging time. They've had trouble reaching residents by phone. Staff say the residents are busy or sleeping, but the Ombudsman doesn't know if that is true or the staff just doesn't want to enable the communication. Residents have been frustrated not being able to see their physician in person.

PSA11 – Elaina Finnie. Similar outreach to other programs. They've been making bi-weekly contact with facility staff. They've been working with Activity Directors to hear about creative ways they are conducting activities – recently some facilities are using the TikTok app. There has been an increase of community support. After delivering postcards with Ombudsman information to facilities, the Program has seen an increase in calls. Barriers - No Wi-Fi/cell phones service at many of the facilities. Success – resident able to leave skilled care after therapy ended.

PSA12 – Bernard Cobbins. Thankful for support of other Ombudsmen and PPE delivery. Core duties not changed. TikTok, cell phones, tablets, other means. Increase in engagement with facilities by email and phone call providing I&A to them to connect with their health department. Facilities refusing to take residents back from hospital. They've been successful getting the NH to take residents back pointing out they need to follow IDPH/CMS guidance. Working with first responder organization. Looking at response to the strike and what happens if needing evacuations. Difficult to investigate complaints when they can't investigate in person.

PSA13 – Lawrence Wagner. Echo what Suzanne said. Tracking a new lawsuit filed yesterday - Cicero filed a lawsuit saying facility isn't protecting residents.

Strike Notice Update – Don't have a lot of info at this point. Kelly continually trying to get info from IDPH. Kelly is working regularly with ACL. ACL suggested National Guard could be back up if staff strike. SEIU update today is they are still in negotiations that are moving slowly, but moving forward.

Discharge Notices – Executive Order issued last week suspending all discharge hearings for non-payment.

Home Care Ombudsman Program – LaRhonda Williams. Unable to access participants in person has been a challenge. Using email primarily to send documents. Willing to conduct community education via webinar. They have 3 openings. Home Services Program are suspending termination because we are in a national emergency. However, some HSP waive participants are still receiving termination notices. Asking community partners to include HCOP info in newsletters and other correspondence.

Jeanene Brickey – HFS. Most staff working from home. Working to make sure DHS is still processing applications. As things change, they are issuing provider notices.

Phil Miller – ISP. Most staff working from home. Some staff are doing window visits if necessary. Working with a COVID-19 fraud taskforce.

Ali Johnson – DHS Compliance Officer. Williams/Colbert having difficulty to reach those class members. Setting up telehealth services. Will encourage partners to work more closely with the Ombudsman Program in terms of what the resident rights are. Working with IDPH to create a letter and guidance document in case a class member chooses to self-discharge due to COVID-19.

Gwen Diehl – Veterans Home. Creating negative pressure isolation rooms so they can keep residents who test positive. 7 – 10 beds at each facility. There is only 1 positive test in the veteran homes.

Malinda McDonald – Resident. The important thing to do is family visits through window or skype, etc. She's seen a lot of residents decline because they haven't had family contact. Communication about the strike plan has not been communicated with families and that would be helpful.

Next meeting scheduled for June 9th.