Program Mission

“The mission of the Florida Long-Term Care Ombudsman Program is to improve the quality of life for all Florida long-term care residents by advocating for and protecting their health, safety, welfare, and rights.”
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The mission of Florida’s Long-Term Care Ombudsman Program (LTCOP) is to improve quality of life for all long-term care residents by advocating for and protecting their health, safety, welfare, and rights. The statewide, volunteer-based program works through 13 district offices and gives a voice to residents of nursing homes, assisted living facilities, adult family-care homes, and continuing care retirement communities. LTCOP advocates work tirelessly to identify, investigate, and resolve the concerns of residents and their loved ones.

Florida’s State Ombudsman works with an advisory council to coordinate voluntary organizational assistance and reach consensus among districts on issues affecting residents. The State Ombudsman, in conjunction with the council members and volunteer input, monitors and comments on federal, state, and local laws, regulations, and policies.

LTCOP’s important work over the past year was challenged by COVID-19, but the State Ombudsman, staff, and volunteers rose to the challenge and quickly implemented new procedures and processes to reach out to residents and respond to the needs of families. The LTCOP team showed resilience and resourcefulness to continue their tasks. And while the pandemic momentarily stalled a process, they responded with ingenuity and determination.

The outstanding volunteers of LTCOP truly make a difference in the lives of residents, their families, and their communities. I could not be prouder to stand with the staff and volunteers of this program. Their commitment and dedication are inspiring, and I thank them on behalf of the Department of Elder Affairs.

Richard Prudom, Secretary
Florida Department of Elder Affairs
As Florida's State Ombudsman, it is an honor to represent the residents and their families who reach out to us – our staff and volunteers of the Long-Term Care Ombudsman Program (LTCOP) – to improve their health and well-being. The COVID-19 pandemic has made our mission even more crucial.

In the beginning, we knew very little about COVID-19 other than it disproportionally affected those over 65 and those with a compromised immune system. Due to its high transmission rate and ability to spread via asymptomatic individuals, restricting personal visitation was one of the chosen protocols used to protect residents in long-term care facilities.

LTCOP is a volunteer-based program structured to have frequent visits with residents in these facilities to help resolve any issue they may have relative to their health, safety, welfare, and rights. Because 80% of our volunteers are over 65 years of age – placing them at high risk for adverse COVID-19 outcomes – we did not want to risk their health, nor that of the residents we are charged to protect. We limited our in-person visits and relied instead on technology to fulfill our mission. At the September 2020 State Council meeting, LTCOP made plans to purchase electronic tablets to allow our ombudsmen to hold virtual meetings with residents and groups of residents without going into the facilities. Since the onset of the pandemic, our faithful and dedicated ombudsmen have been calling the facilities regularly and speaking with residents. In so doing, they have addressed 3,489 complaints and conducted over 14,000 consultations.

Our volunteer ombudsmen deeply miss the frequent in-person visits with their beloved residents and long for a time when greater contact is permitted. Until then, they remain committed and eager to provide their advocacy.

I am proud of our volunteers and impressed by their compassion, ingenuity, and selfless, steadfast commitment to meeting the needs of their fellow Floridians in long-term care facilities.

Michael Phillips, State Ombudsman
Long-Term Care Ombudsman Program
Program Data

Ombudsman Program in Numbers

<table>
<thead>
<tr>
<th></th>
<th>OCT – DEC</th>
<th>JAN – MAR</th>
<th>APR – JUN</th>
<th>JUL – SEP</th>
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<tr>
<td>Long-Term Care Beds</td>
<td>194,572</td>
<td>196,449</td>
<td>197,681</td>
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<td>Certified Ombudsmen</td>
<td>270</td>
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<td>Volunteers in Training</td>
<td>39</td>
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<td>Complaint Investigations*</td>
<td>1,548</td>
<td>1,558</td>
<td>975</td>
<td>1,037</td>
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<td>Facility Visitations**</td>
<td>318</td>
<td>1,255</td>
<td>2</td>
<td>1</td>
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<td>Facility Assessments**</td>
<td>1,601</td>
<td>1,132</td>
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</table>

*Reflects both initiation and closure dates that may overlap quarterly reporting periods.

**Number does not reflect assessments and visits conducted during quarterly period and not entered until a later date.

Quarterly Ombudsman Program Data

*Includes staff and volunteer data.

**Based on $27.20 per hour. Value of each volunteer hour as estimated by Independent Sector, 2020.
**Program Data**

**Complaint Resolution**

A complaint is closed when the issue is addressed to the satisfaction of the resident or complainant. The following chart shows what types of disposition codes were assigned to closed cases in Federal Fiscal Year 2020.

![Pie chart showing complaint resolution types]

- **51%** – Partially or fully resolved to the satisfaction of the resident, resident representative or complainant.
- **44%** – Withdrawn or no action needed by the resident, resident representative or complainant.
- **5%** – Not resolved to the satisfaction of the resident, resident representative or complainant.

**Top 5 Complaints**

<table>
<thead>
<tr>
<th>#</th>
<th>Assisted Living Facilities &amp; Adult Family Care Homes</th>
<th>Nursing Homes</th>
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<tr>
<td>1</td>
<td>Medications</td>
<td>Medications</td>
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<tr>
<td>2</td>
<td>Food services</td>
<td>Discharge or eviction</td>
</tr>
<tr>
<td>3</td>
<td>Housekeeping, laundry, and pest abatement (includes infection control)</td>
<td>Symptoms unattended</td>
</tr>
<tr>
<td>4</td>
<td>Staffing</td>
<td>Personal Property</td>
</tr>
<tr>
<td>5</td>
<td>Dignity and respect</td>
<td>Response to requests for assistance</td>
</tr>
</tbody>
</table>
Program Data

Complaint Origins

Origin of Complaints in Nursing Homes

- 51% – Resident representative, friend, family
- 38% – Resident
- 4% – Unknown
- 3% – Concerned person
- 2% – Ombudsman Program
- 1% – Facility staff
- 1% – Resident or family council
- <1% – Representative of other agency or program

Origin of Complaints in Assisted Living Facilities and Adult Family Care Homes

- 53% – Resident
- 28% – Resident representative, friend, family
- 6% – Ombudsman Program
- 6% – Unknown
- 4% – Concerned person
- 2% – Facility staff
- 1% – Representative of other agency or program
- <1% – Resident or family council
Program Highlights and Success Stories

Frail elders and adults with disabilities are often overlooked. Ombudsmen observe what others may not notice and work diligently to see that residents are safe, healthy, treated with dignity, and have their rights respected. The following pages share updates from the State Council and stories from local councils that characterize the work of ombudsmen. The stories are bound together by residents who are able to have a better quality of life and increased quality of care due, in part, to the dedicated advocacy of ombudsmen.

State Council Updates and Discussion

Overview
The State Council is composed of volunteer ombudsmen who have been elected by their peers from each of the 18 local ombudsmen councils throughout the state to serve as an advisory body to the State Ombudsman.

State Council Chair Elected
The Council conducted its first meeting of the 2020 fiscal year in December 2019 and voted to elect Dr. Carol Weideman, of the West Coast Council, to the State Council Chair’s position for her first term.

Prior Year Recommendations and Actions
The State Council recommended the program strengthen and support resident councils by developing a resident council handbook to be distributed to all long-term care facilities in the state. The State Ombudsman allocated resources for the development, printing, and distribution of a resident council handbook for residents who would like to create a council within their homes. The State Council also recommended in the previous fiscal year that administrative secretary positions be recategorized into permanent career service positions in order to increase job retention among vital support staff. Although funding was not available to create additional career service positions, approvals were authorized for pay increases for many support staff.

Discussion
The State Council addressed various issues related to program functions and activities. The following are actions taken during the State Council’s FY 2019 quarterly meetings:

- Development of new Legislative Workgroup/Committee;
- Six-question survey regarding the Long-Term Care Ombudsman Program;
- Update continuing education
Program Highlights and Success Stories

- Facilitate referrals from our program to Agency Health Care Administration (AHCA);
- Coordinate with sister agencies during facility closures;
- Encourage the development of staffing levels and training in Memory Care Units;
- Increase ombudsman recruitments;
- Develop a guide for newly elected State Council Representatives;
- Recommend fines to facilities for refusing to re-admit a resident;
- Identify concerns in Adult Family Care Homes (AFCH) with regard to resident safety and staffing levels;
- Have quarterly visitations to small Assisted Living Facilities and AFCH; and
- Consider the needs of personal aids in the dining area

Local Council Success Stories

Northwest
A resident phoned the Northwest Council, stating he had not received a monthly allotment in the past six months. After further questioning, he admitted the facility denied him access to these funds after an instance where he had been drinking with a friend off facility premises. He said he was not belligerent or causing any community issues upon his return and strongly expressed that he wished to resume attending scheduled outings with other residents.

The ombudsman obtained consent to discuss the issue with the director of the facility and the appointed guardian. The director verified that the resident had shown no signs of aggression or cause disorder in the community and replied, “he is always cordial and polite.” There was no confirmed evidence that the resident abused or purchased alcohol regularly.

The ombudsman then met with the resident and guardian. He found the guardian’s reason was that she witnessed the resident stumbling and nearly unrecognizable upon his return that evening. This behavior stood out to the guardian, as the resident is always very concerned with his appearance. He appeared to be highly intoxicated, which made the guardian concerned for his safety and well-being. The guardian shared his records on file stating the resident has issues with alcoholism. The ombudsman stressed to the guardian that this was not a reasonable cause to restrict the resident from attending outings, citing Section 429.28(1)(e), Florida Statutes, which states that residents retain
Program Highlights and Success Stories

“the right to pursue the highest level of independence, autonomy, and interaction within the community.”

The guardian agreed to meet with senior management to discuss options to allow the resident to access funds without having cash to walk to the store and acquire liquor of his free will. This meeting resulted in the suggestion that a prepaid merchant card be purchased for the resident. The following week, the resident called to thank the ombudsman and inform the council that he just returned from a group outing at Red Lobster, where he had a wonderful time.

Panhandle
Ombudsman Marshall Kapp, of the Panhandle district, was appointed in June 2020 to serve on the Centers for Medicare & Medicaid Services (CMS) Coronavirus Commission for Safety and Quality in Nursing Homes. This national commission comprised resident advocates, infectious disease experts, directors and administrators of nursing homes, academics, state authorities, clinicians, a medical ethicist, and a nursing home resident. Together, the appointees provided independent recommendations to CMS to inform the agency’s current and future responses to COVID-19 in American nursing homes.

Now a Professor Emeritus, Kapp was the founding director of the Florida State University Center for Innovative Collaboration in Medicine and Law, with faculty appointments as professor, Department of Geriatrics, FSU College of Medicine, and professor of medicine and law in the FSU College of Law. He is currently an adjunct professor at the Stetson University College of Law and FSU College of Law, editor emeritus of the Journal of Legal Medicine, and a fellow of the Gerontological Society of America (GSA) and the American College of Legal Medicine (ACLM).

In addition to his work in academia, Panhandle District Manager Deborah Gerrell describes Kapp as an asset to the Panhandle District Ombudsman Council. “He has a wealth of knowledge and is always available when volunteers are needed,” writes Gerrell. “We are so excited that Marshall was appointed to the new Coronavirus Commission, and we wish him well while taking on another great service for our elders within Long-Term Care Facilities.”

The CMS Coronavirus Commission delivered its report on September 1, 2020.
**North Central**

The local office received a call from a distraught woman stating that she could not speak with her aunt, a long-term care resident. She explained that the facility restricted her calls and mail because the resident’s Power of Attorney (POA) advised the facility that the resident may have no phone calls and that the facility should save all of the resident’s mail for the POA.

Upon learning of the situation, a local ombudsman immediately contacted the resident for consent and confirmed that she genuinely missed talking with her niece. The ombudsman explained to the resident and the facility administrator that the POA could not restrict phone calls to the resident nor request the resident’s mail be withheld, as this is a clear violation of resident rights. Additionally, the ombudsman contacted the POA to explain resident rights and informed her that the resident’s communication restrictions should not continue. All parties agreed, and the facility administrator quickly allowed the resident to resume telephone conversations with her beloved niece.

**First Coast**

When a COVID-positive ALF resident and his family were struggling to locate a facility where he could continue his recovery after several weeks in the hospital, a local ombudsman took the initiative to ensure this resident did not fall through the cracks. The resident’s wife received repeated calls from the hospital, informing her that she needed to find a facility where her husband could continue his recovery. The resident was denied admittance to his original facility, and all those his wife contacted because he continued to test positive for COVID-19. Although his COVID-19-related symptoms were abating, his physical strength was rapidly deteriorating due to his prolonged stay in a hospital bed.

After a series of phone calls and discussions with colleagues over several weeks, the ombudsman successfully located a facility that would accept the resident. He was discharged from the hospital and transferred to the new facility, where he continued his recovery with his loved ones’ support.

**First Coast South**

The First Coast South Ombudsman office received a telephone call from a family member whose loved one resides at a nursing facility. The complainant was upset with the way the staff ignored or “dismissed” the complainant’s concerns. The staff did not provide documents when the complainant requested them. Following a 45-day discharge notice, the resident went ten days without her blood pressure medication because staff did not reorder it in a timely manner. The resident’s hygiene
Program Highlights and Success Stories

was also not attended to, with the resident frequently found sitting in soiled clothes for several hours and even going for a period of two weeks without a shower. Additionally, the adult diapers that the complainant purchased for the resident were stolen, and the staff dressed the resident in adult diapers that were too small. The complainant also reported frequent incorrect billing, with the facility adding late fees even though the bill is paid on time.

After receiving the case, the ombudsman contacted the complainant and resident to obtain consent. The ombudsman spoke to the facility administrator for assistance with this case. After investigation, the ombudsman determined that the resident’s billing information was inaccurate, which is why the facility issued the discharge notice, neglected the resident’s personal hygiene needs, and did not order the resident’s medications on time.

Thanks to the ombudsman’s dedication and perseverance, this case was resolved to the resident and complainant’s satisfaction. The resident is again receiving her regularly scheduled showers, the facility is in regular contact with the resident’s POA, and the facility is also providing the resident’s medication on time.

East Central
An ombudsman manager was instrumental in helping work on behalf of an Orange County nursing home resident to obtain the guardian of his choice. This resident helped raise his niece, and the pair remain very close, as demonstrated by the stories the resident shared. Because of the support of the ombudsman working on his case, the resident’s niece was selected to serve as his guardian. This appointment has provided both parties with a sense of wholeness and peace of mind. The new guardian knows her uncle very well and looks forward to ensuring his future days are happy and enjoyable.

West Coast
The West Coast office has benefited immensely from an ombudsman who brings years of experience – including business operations, administration, leadership, and healthcare management – to his volunteer work with the Ombudsman Program. This ombudsman continually goes above and beyond to assist his district and council with researching identified items, quickly going to work during meetings on any topic he learns that needs more information or analysis. He has pulled together information in a summarized format to provide the district manager, state council representative, and others in need of the information. This continual dedication to presenting thoroughly-researched facts in a clear, concise format has helped tremendously during a year unlike any other.
West Central
While placing phone calls to facilities during the COVID-19 pandemic, a local ombudsman learned that a small facility did not have personal protective equipment (PPE). After documenting this and directing the facility to contact the Florida Division of Emergency Management (FDEM), the ombudsman continued placing calls to facilities on her list.

The next facility she called was larger, and a staff member informed her that they had a supply of extra PPE. When the ombudsman asked if it would be possible to share some of their additional supplies with the smaller facility, the staff member agreed. Because of this ombudsman, the smaller facility was able to receive a supply of PPE while they awaited the shipment from FDEM.

South Central
The local office received a case in which a resident receiving hospice care had been given weeks to live and was not allowed to have visitors despite Governor DeSantis’s order allowing visitation for residents experiencing end-of-life circumstances.

Two local ombudsmen teamed up to resolve the situation. After contacting the hospice manager to confirm the resident’s end-of-life status, the ombudsmen negotiated with the facility staff to allow her loved ones to visit her at the facility during her final days. In addition to ensuring the resident was able to receive visits from her loved ones, the ombudsmen were also able to have the resident’s room moved closer to the facility’s entrance. This helped prevent contact between the resident’s visitors and others at the facility, thereby protecting them from possible COVID-19 exposure.

South Central
The South Central office received a complaint that a resident’s clothing had been missing for three weeks. When the resident’s family purchased new outfits to replace the lost clothing, the facility refused to reimburse the family for the expense. After the facility eventually agreed to reimburse the funds, the facility administrator continually procrastinated in completing and filing the necessary paperwork. The ombudsman assigned to the case persisted, frequently following up with the facility about the issue. Because of the ombudsman’s persistence and determination, the resident’s family received their reimbursement after three and a half months.

Palm Beach
Following an overnight hospital stay, a resident was discharged and transported back to their nursing facility by ambulance. The facility staff on-site, however, refused to re-admit the resident. The Ombudsman Program was contacted and spoke with several staff members at various levels, all of whom refused admittance. The ombudsman
insisted that the staff contact the facility administrator so she could explain the situation to him. After speaking at length with the administrator, the resident gained admittance back to the facility.

**Broward**

What started as a complaint regarding a resident discharge from an ALF in early March 2020 quickly escalated to a case which remained open for six months while the ombudsman navigated the various concerns experienced by this resident, who had been refused the right to review and visit other facilities or her doctor. The ombudsman negotiated with the administrator to ensure that the resident could continue to see her doctors for routine bloodwork and other care during Florida’s lockdown period. The resident was finally able to go out and visit other potential facilities in September. This resident would always ask the ombudsman: “Are you still my advocate?” The ombudsman always replied, “yes,” knowing that the resident would feel more at ease with the assurance that someone was looking out for her interests. The resident was delighted that she was finally able to find a good fit at a new facility.

**North Dade**

During the COVID-19 pandemic, the North Dade ombudsmen have implemented new practices to ensure they can continue to advocate for long-term care residents effectively. To maintain a strong relationship with residents while also respecting social distancing guidelines, North Dade ombudsmen communicate with their residents via telephone on a monthly basis. The ombudsmen aim to assure residents that they are not alone by listening to their concerns and conversing about things like the resident’s hobbies and family.

The North Dade office has received a great deal of positive feedback from residents. The residents explained that speaking with the ombudsmen every month helps create a sense of normalcy and companionship, especially during this period of social isolation. In some cases, the residents do not have any living family members and have expressed immense gratitude for the ombudsmen’s continual companionship. The ombudsmen have also found that this communication has helped them better connect with the residents they serve.

**South Dade & the Keys**

The South Dade & Florida Keys office received a complaint where the complainant – the resident’s daughter and POA – received a text message from the facility administrator notifying her of a $500 increase in rent. Unfortunately, family members did not have the opportunity to read and discuss
this contract with the resident, who lacked capacity due to advanced age and physical and mental medical complications. The administrator stated that if the resident could not pay the rent, the resident would be forced to vacate the facility.

After obtaining the consent from the resident’s POA, the ombudsman contacted the facility’s administrator. The administrator provided documentation explaining that the facility would not implement this change until the eviction moratorium and restrictions governing rental fee increases during the COVID-19 pandemic are lifted. The resident’s family was relieved to receive this news and will continue paying their original monthly rental fees.

Central Office Updates

• 2020 marks the second year the LTCOP presented the President’s Volunteer Service Award (PVSA) to its volunteers, with 132 ombudsmen meeting or exceeding the 100 hours of service required to receive this prestigious award. Among these, four ombudsmen received the gold award for completing over 500 hours of service. Additionally, the LTCOP renewed its designation as a Certifying Organization for the PVSA, allowing the LTCOP to continue presenting awards to eligible volunteers on behalf of the President of the United States.

• The LTCOP helped the Department of Economic Opportunity (DEO) process re-employment assistance applications during the early stages of the COVID-19 pandemic. Qualifying team members volunteered to transfer data from scanned paper applications into digital forms through the secure DEO portal.

• The LTCOP initiated plans for a statewide recruitment and awareness advertising campaign on television and radio, beginning during Q1 2021.

• The Ombudsman Training Coordinator created virtual training seminars to prepare staff and volunteers for re-entry to facilities, ensuring adequate knowledge of best practices for donning and doffing PPE, handwashing, social distancing, and other infection control measures.
2020 Legislative Proposals

The Florida Long-Term Care Ombudsman Program has a responsibility to analyze, comment on, and monitor the development and implementation of federal, state, and local laws, rules, and regulations, and other governmental policies and actions, that pertain to the health, safety, welfare, and rights of long-term care residents and to recommend any changes in such laws, rules, regulations, policies, and actions as the office determines to be appropriate and necessary (Section 400.0065(1)(g), Florida Statutes). This responsibility rests exclusively with the State Ombudsman working with the Program’s legal advocate.

Unfortunately, both the state ombudsman and the legal advocate resigned at the beginning of the fiscal year. The state ombudsman position was filled in August of 2020, and the legal advocate position will be filled on February 1, 2021.

In the last two months of the fiscal year, the new state ombudsman worked with the Secretary of the Department of Elder Affairs on the Governor’s Task Force to make critical changes in designating caregiver status to family members, thus allowing them to visit their loved ones in long-term care facilities during the pandemic.

A legislative committee was established within the state council at the end of the fiscal year and is charged with identifying and recommending to the state ombudsman areas in the laws rules and regulations that, if changed or implemented, will increase the protection and enhance the lives of long-term care residents in Florida.
Long-term care ombudsmen are available to serve long-term care residents and their families in all 67 counties. The map below shows the 14 district and regional Long-Term Care Ombudsman Program offices throughout Florida. Some offices are co-located within the same space.
Program Contact Information

Northwest
1101 Gulf Breeze Parkway
Bldg. 3, Ste. 5
Gulf Breeze, FL 32561
Phone: (850) 916-6720
Fax: (850) 916-6722

Panhandle
4040 Esplanade Way
Tallahassee, FL 32399
Phone: (850) 921-4703
Fax: (850) 391-1382

North Central
1515 East Silver Springs Blvd.,
#203
Ocala, FL 34470
Phone: (352) 620-3088
Fax: (352) 732-1797

First Coast
Midtown Centre Office Park, 3300 Bldg.
4161 Carmichael Ave., Ste. 141
Jacksonville, FL 32207
Phone: (904) 391-3942
Fax: (904) 391-3944

First Coast South
210 N. Palmetto Ave., Ste. 403
Daytona Beach, FL 32114
Phone: (386) 226-7846
Fax: (386) 226-7849

East Central
400 W. Robinson St., Ste. S709
Orlando, FL 32801
Phone: (407) 245-0651
Fax: (407) 245-0653

West Coast
11351 Ulmerton Rd., Ste. 303
Largo, FL 33778
Phone: (727) 588-6912
Fax: (727) 588-3648

Central Office
4040 Esplanade Way
Tallahassee, FL 32399
Phone: (850) 414-2323
Fax: (850) 414-2377

West Central
701 W. Fletcher Ave.
Ste. C
Tampa, FL 33612
Phone: (813) 558-5591
Fax: (813) 375-3932

Southwest
2295 Victoria Ave., Rm. 152
Ft. Myers, FL 33901
Phone: (239) 338-2563
Fax: (239) 338-2549

South Central
200 N. Kentucky Ave., #224
Lakeland, FL 33801
Phone: (863) 413-2764
Fax: (863) 413-2766

Palm Beach
111 S. Sapodilla Ave.
#125A-B-C
West Palm Beach, FL 33401
Phone: (561) 837-5038
Fax: (561) 650-6885

Broward
8333 W. McNabb Rd., Ste. 231
Tamarac, FL 33321
Phone: (954) 597-2266
Fax: (954) 597-2268

North Dade
9495 Sunset Dr., Ste. B100
Miami, FL 33173
Phone: (305) 273-3294
Fax: (786) 336-1424

South Dade
9495 Sunset Dr., Ste. B100
Miami, FL 33173
Phone: (305) 273-3250
Fax: (305) 671-7247

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FLORIDA
OMBUDSMAN
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