Welcome to October! Hurricane season is winding down and despite the recent peak, COVID-19 numbers are dropping, offering hope that we may be heading toward the backside of this pandemic. It’s been a long twenty months, but we are better informed and better equipped as a program to deal with it and provide the advocacy our residents need and deserve.

I’m encouraged that so many of you have found it personally safe for you to return to in-person visitations. Others are still faithfully calling their residents to check up on them and provide both information and assistance. You are an amazing group of volunteers.

Although the number of volunteers dipped during the pandemic, it is starting the upward climb thanks to the multimedia advertising we were able to secure with the temporary influx of federal dollars. But as you well know, the best advertisement is you sharing with your friends and neighbors the experiences you have had in making life better for residents in long-term care facilities. They hear your stories, but they feel your compassion and often it triggers them to join our efforts. Keep telling the story! “Many hands make light work.”

I want to give a “shout out” to the Florida Health Care Association for making it possible for our District Managers and Regional Managers to attend the Annual Joint Training for Nursing Homes and Assisted Living Facilities. This training is geared toward instructing and updating administrators and staff from these facilities on timely issues and concerns. Our folks will be able to take the information they learned back to the district and volunteers so that we all can be better informed.

We have been working hard to prepare a state-wide training event for all staff and volunteers to be held at the Rosen Hotel in Orlando from October 26th through the 29th. Not only do we have some dynamic speakers informing us on important topics, but we also have a wonderful opportunity to meet, greet, learn from, and be invigorated by fellow ombudsmen throughout the state who share a passion for residents and for advocacy.

Let’s enjoy October together and make a difference in the lives of others!

A Note from the State Ombudsman
By Michael Phillips, State Ombudsman

Hey, October is Resident’s Rights Month which carries the theme “My Rights, My Home, My Life.” Our offices are already receiving shipments of the new activity book we have created for nursing home and assisted living residents that focus on resident rights. Because the rights are different for nursing homes and assisted living facilities, there is a book specifically for nursing homes and another for assisted living facilities. What is unique about these books is that we have provided a postage free envelope and a questionnaire in the binding that will allow the resident to provide us with private comments or concerns. Can’t wait to hear what they may say.

Contents

Success Stories & Kudos .................... 2
Recognition ........................................... 3
Central Office Updates....................... 4-5
Council Activity ................................. 6-7
Summary of Top Complaints ............... 8
Linette Geisel  
South Central Council  
Serving since 2018

We received a complaint that the housekeeper was not doing a good job and the facility was dirty. Shower walls were reported to not be cleaned and residents’ rooms not vacuumed in months. These issues had been brought up by individuals and the Resident Council to the executive director, but nothing changed.

The executive director was informed of the complaint. When Certified Ombudsman Linette Geisel visited the facility, she found that a new housekeeper had been hired. Residents interviewed during the follow-up visit said the new housekeeper is wonderful and doing a great job.

One resident reported the new housekeeper even defrosted resident’s freezer for the first time in years.

Maritza Ramos-Pratt  
East Central Council  
Serving since 2008

Having been away for a period time, the East Central Ombudsman volunteers were elated to see long time volunteer (over 12 years) Maritza Ramos-Pratt attend the July meeting. Maritza, at one time, per the district chair, went out and did 40 facility assessments because, “they had to be done.”

Maritza is an Army veteran, dietician by trade in her earlier years and a chaplain. Maritza earned her doctorate degree and was a hospital chaplain until her retirement. Her sense of humor and being bi-lingual is a gift to District 9. Her first words upon her recent return were, “how are my buildings?”

Phil Lachapelle  
West Coast Council  
Serving since 2009

Phil was able to have an assisted living facility rescind a 45-day discharge notice for a confused resident. The complainant felt like the facility was retaliating against her mother, the resident, because of an infection. After Phil reviewed the resident’s record, he pointed out that the resident’s recent test results were negative. The administrator and owner of the facility rescinded the discharge and the resident was allowed to stay.

Marcella Lancaster  
South Central Council  
Serving since 2019

A complaint was received that a nursing home was using styrofoam to serve residents’ meals in, which was causing the food to be cold by the time it reached residents’ rooms. Certified Ombudsman Mrs. Marcella Lancaster spoke with the Kitchen Director about the complaints of cold food. Soon after, the community was no longer serving food in Styrofoam and were in the process of purchasing new food carts.

There were no further complaints regarding the temperature of the food. This same community also had a complaint of shortage of staff. Mrs. Lancaster spoke with the administrator about this concern. The administrator stated AHCA had been there that week and they were found to be in compliance with staffing. He admitted that they were using temporary agency staff because it had been difficult to find applicants who would even agree to an interview.

The community’s Regional Consultant was assisting the recruiting three times a week. Residents interviewed during a follow-up, reported appropriate amount of staff at that time.

Wanda Harrison  
South Central Council  
Serving since 2013

A complainant reported a family member was being unsafely discharged from a facility. The resident had been in pain and did not feel like doing therapy so the facility stopped the therapy and told the family to pick resident up by the end of the week. No written discharge notice was given.

The complainant stated the resident was in no condition to return home. Certified Ombudsman Wanda Harrison began discussions with the Administrator. The plan to discharge the resident was eventually dropped and the resident was allowed to remain in the facility. The resident also began receiving restorative therapy. The resident’s family was relieved and happy with this outcome.
Join us in congratulating Valerie Healy of the Southwest Council in celebrating 15 years as a certified Ombudsman!

“Valerie has been influential in assisting with assessments and cases, but she’s also been a great asset to our program as a mentor and guide. May she continue to inspire future and existing Ombudsman.”

-Diandra Talor, Southwest District Ombudsman Manager

These volunteers have put in the hours! Let’s celebrate their continued dedication to those who need us most.
Nursing homes continue to be governed by guidance from CMS regarding visitation that was last revised on April 27, 2021 (QSO 20-39 NH); although an additional memo released September 10, 2021 changed some of the testing requirements. Some highlights of this guidance are provided here.

### When Visitation May Be Restricted

Indoor visits should be allowed for all residents (regardless of vaccination status) except when:

- The county’s test positivity rate (found at data.cms.gov) is greater than 10%, and the facility’s resident vaccination rate (found at medicare.gov/care-compare) is less than 70%.
- There is an “outbreak” which means a new COVID-19 case among existing residents or staff.
- The resident to be visited has a confirmed COVID-19 infection or is under quarantine (new residents, readmissions, unvaccinated residents who have had close contact with someone infected with COVID-19).

### Central Office Updates

**Current COVID-19 Visitation Rules**  
*By Lynn Hearn, Legal Advocate*

<table>
<thead>
<tr>
<th>VISITATION should:</th>
<th>VISITORS should:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Be person-centered, taking into consideration the resident’s physical, mental and psychosocial well-being, and support their quality of life</td>
<td>• Be screened for signs and symptoms of COVID-19</td>
</tr>
<tr>
<td>• Be outdoors, if practicable</td>
<td>• NOT be required to be tested or vaccinated (or show proof of such) as a condition of visitation</td>
</tr>
<tr>
<td>• Be conducted with an adequate degree of privacy</td>
<td>• Wear face coverings and social distance at least six feet between individuals.</td>
</tr>
<tr>
<td>• Not be conducted in the resident’s room if the resident has a roommate</td>
<td>• However, if the resident is fully vaccinated, they can choose to have close contact (including touch) with their visitor, while wearing a face mask</td>
</tr>
<tr>
<td>• Not be restricted without a reasonable clinical or safety cause</td>
<td></td>
</tr>
</tbody>
</table>

**Facility’s Obligations During an Outbreak**

- Suspend all indoor visitation (except for visits required by federal disability law or compassionate care visits, as described below)
- Allow outdoor visitation for residents who are not symptomatic and have not had close contact with an infected person
- Inform visitors about the outbreak so they can make informed decisions about visitation
- **Conduct outbreak testing:**
  - Facilities can use contact tracing or broad-based testing (facility-wide or group-level, i.e., unit or floor).
  - Contract tracing may be used if the facility can identify close contacts of the infected individual.
  - If there are no cases in other units of the facility, visitation can resume in the units with no COVID-19 cases (but should remain suspended on the affected unit).
  - Outbreak testing continues until it identifies no new cases among staff or residents for at least 14 days since the most recent positive result.
**Compassionate Care Situations**

- Compassionate care visits should be allowed at all times, for any resident, regardless of vaccination status, the county’s positivity rate, or the facility’s outbreak status.
- *Examples of compassionate care situations include, but are not limited to:*
  - A resident who is new to the facility and struggling with the change in environment.
  - A resident who is grieving after a loved one recently passed away.
  - A resident who needs cueing and encouragement with eating or drinking.
  - A resident who is experiencing emotional distress, less interactive, crying more frequently.
  - An end-of-life situation.
- Compassionate care visits can be conducted by any individual who can meet the resident’s needs; they need not be family members.

**Especially for the Ombudsman**

- Like other visitors, an ombudsman may NOT be required to be tested or vaccinated (or show proof of such) as a condition of visitation.
- Ombudsmen should adhere to the core principles of COVID-19 infection prevention, such as participating in screening for signs and symptoms of COVID-19, wearing face coverings, and social distancing at least six feet.
- If in-person access by the ombudsman is deemed inadvisable, the facility must facilitate alternate resident communication with the ombudsman, such as by phone or other technology.
- If an ombudsman believes a facility is limiting visitors without a reasonable clinical and safety cause, it should make a referral to AHCA for investigation.

**Coming Soon!**

- CMS rule regarding mandatory vaccines for nursing home staff in facilities that participate in Medicaid or Medicare. AHCA will enforce this.
**Council Activity | East Region**

North Dade - District Manager Jessica Gloria sets up a recruitment table at the Miami Dade College for their job fair.

**Council Activity | West Region**

South Central - Lee Earls, Council Chair (left) and Samantha Kotz, Admin. Assistant (right) setting up their first face-to-face meeting since the COVID shut-downs.

**Council Activity | North Region**

Northwest - A recent 'Volunteer Appreciation Luncheon' held by the Northwest District Office in honor of their volunteers.

First Coast South - Lisa Dale, District Ombudsman Manager of the First Coast South office, poses with her volunteers for their "Breakfast of Champions" event.
State Council - Altamonte Springs, August, 2021. The face-to-face quarterly State Council meeting was a success. Many faces we have not seen since the COVID-19 pandemic shook up our regular routine.

State Council - Jo Ann Quiles, East Region Manager (middle), Choice Edwards (right), and Shahzad Kashar (left).

State Council - Marie Brand (left), Irene Dion (middle), and Mary Darling (right).
### Summary of Top Complaints

Under State law, the Long-Term Care Ombudsman Program is responsible for publishing its complaint data each quarter. The following data reflects verified complaints from cases closed between April 1 and June 30, 2021. The data also shows the number of these complaints resolved.

**Complaint Data Terms:**
- **Verified** – It is determined after work (interviews, record inspection, observation, etc.) that the circumstances described in the complaint are generally accurate.
- **Not Verified** – It is determined after work (interviews, record inspection, observation, etc.) that the circumstances described are not generally accurate. Verification is determined by the ombudsman.
- **Resolved** – The complaint was addressed to the satisfaction of the resident. Resolved is one of several disposition codes used by the Program. Resolution is determined by the resident.

To learn more about the Long-Term Care Ombudsman Program’s complaint or facility assessment data, call toll-free 1 (888) 831-0404, and ask to transferred to a representative in your area. All services are free and confidential.

---

### Quarter 3 | July 1 – September 30, 2021

#### Top 5 complaints accepted in Nursing Homes

<table>
<thead>
<tr>
<th>Complaint</th>
<th># Complaints</th>
<th># Verified</th>
<th># Not Verified</th>
<th># Resolved/Partially Resolved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal hygiene</td>
<td>30</td>
<td>6</td>
<td>24</td>
<td>10</td>
</tr>
<tr>
<td>Medications</td>
<td>28</td>
<td>9</td>
<td>19</td>
<td>11</td>
</tr>
<tr>
<td>Personal property</td>
<td>26</td>
<td>17</td>
<td>9</td>
<td>17</td>
</tr>
<tr>
<td>Response to requests for assistance</td>
<td>26</td>
<td>13</td>
<td>13</td>
<td>16</td>
</tr>
<tr>
<td>Visitors</td>
<td>22</td>
<td>11</td>
<td>11</td>
<td>11</td>
</tr>
</tbody>
</table>

#### Top 5 complaints accepted in ALF and AFCH

<table>
<thead>
<tr>
<th>Complaint</th>
<th># Complaints</th>
<th># Verified</th>
<th># Not Verified</th>
<th># Resolved/Partially Resolved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food services</td>
<td>26</td>
<td>9</td>
<td>17</td>
<td>11</td>
</tr>
<tr>
<td>Housekeeping, laundry and pest abatement</td>
<td>24</td>
<td>16</td>
<td>8</td>
<td>17</td>
</tr>
<tr>
<td>Medications</td>
<td>19</td>
<td>9</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>Staffing</td>
<td>17</td>
<td>12</td>
<td>5</td>
<td>12</td>
</tr>
<tr>
<td>Personal Property</td>
<td>15</td>
<td>6</td>
<td>9</td>
<td>6</td>
</tr>
</tbody>
</table>

#### Statewide Statistics

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Beds</td>
<td>202,716</td>
</tr>
<tr>
<td>Number of Certified Ombudsmen</td>
<td>200</td>
</tr>
<tr>
<td>Number of Volunteers in Training</td>
<td>37</td>
</tr>
<tr>
<td>Facility Assessments</td>
<td>678</td>
</tr>
<tr>
<td>Facility Visitations</td>
<td>72</td>
</tr>
<tr>
<td>Complaint Investigations*</td>
<td>1,105</td>
</tr>
</tbody>
</table>

*All data reflects both initiation and closure dates that may overlap quarterly reporting.