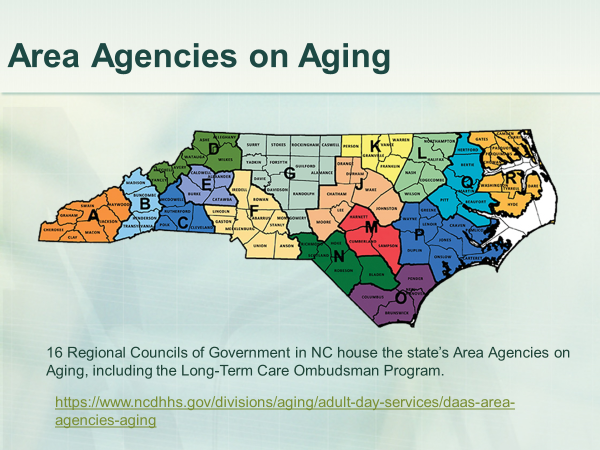
**Adult Services Committee Meeting 4/10/2024**

**Committee Members:** Samantha Hurd, Micah Ennis and Tracie McMillan

**Approval of the March 13, 2024 meeting minutes**: Tracie McMillan, Lori Langley

**Presentation by:** Kim Johnson, Piedmont Triad Regional Council; Duties and Responsibilities of Ombudsman



Under the umbrella of the Regional Council, the AAA provides planning, development and implementation of aging services in the region:

* Home and Community Care Block Grant
* Family Caregiver Support Program
* Extended Health Promotion Programs, which include walking initiatives, preventing falls, etc.
* Long Term Care Ombudsman support and services

Ombudsman is a Swedish term, which means one acting as the advocate for clients in exercising their rights, and/or in helping them to negotiate the complex rules and regulations of a given bureaucracy.

* Ombudsman are located in state facilities, Medicaid and private sector. AAA ombudsman advocate for residents in LTC facilities.

Ombudsman:

* Investigate and attempt to resolve problems, concerns, complaints either by a resident or on behalf of a resident.
* Empower residents to assert their rights
* Support the voice of the resident to assert their rights
* Prove technical assistance to residents, families and staff
* Educate facility staff
* Promote Elder Abuse awareness
* Advocate for changes in laws, regulations and policies which benefit residents

Long-Term Care Ombudsman serve residents in nursing homes, adult care home and family care homes. There are no income or referral requirements. A complaint can be made by phone, email or fax and there are no fees charged to the residents or families.

Ombudsmen receive complaints about Resident’s Rights and the resident is always the client.

The ombudsman will visit the resident in person, at the facility, and discusses the complaint with the resident. The resident has the right to withdraw the complaint.

If a resident lacks capacity, the ombudsman can act on behalf of the resident’s legal representative.

What are the steps the ombudsman takes when investigating a complaint?

* The ombudsman gathers the information and obtains consent to investigate the concerns.
* They provide information about rights, options and may provide referrals to other agencies
* They work with the resident to help achieve the resident’s goals
* Ombudsman do not provide emergency crisis response
* Ombudsman may collaborate with DSS or other entities with the resident’s permission

Common Complaints:

* Slow response to requests for help
* Payment issues
* Transfer/Discharge
* Medication Administration
* Right to exercise choice and preferences, like when to wake up, take a shower, etc.
* Not following the care plan/doctor’s orders
* Housekeeping/cleanliness
* Staff professionalism-treating the resident with rudeness or insensitivity

Limits of Ombudsmen Jurisdiction

* Complaint investigation can only occur when a resident is currently in a LTC facility
* Complaints after the resident leaves the facility are referred to DSS for the AHS or DHSR. Ombudsman cannot continue investigation if the resident leaves the facility, they have to refer it to DSS or DHSR, if SNF.
* Ombudsman do not investigate abuse; these allegations are referred to DSS, DHSR or Law Enforcement
* Ombudsman respect the rights of residents and don’t judge their decisions; residents have the right to make their own choices, whether “good or bad.” Ombudsman support the residents right to make their choice, even if others disagree with it.

Who can make complaints? It can come from anyone, but the resident is the client.

All information shared with the Ombudsman is confidential; information can only be shared with the proper consent. Even if the complaint is anonymous, they can still initiate an investigation.

An Ombudsman can and will initiate an investigation, the reporter remains anonymous.

An Ombudsman also:

* Supports the work of resident and family councils
* Make regular, unannounced visits to facilities
* Provide consultations with residents, families and facility staff
* Provide LTC staff with training and education
* Help education community and community partners
* Advocate for system changes
* Awareness to Elder Abuse

We cannot help people move into facilities, but we can share information about where facilities are located, we can help guide families know what questions to ask when visiting facilities, etc.

Ombudsman and DSS Intersect:

* Complaint referrals
* Sharing information regarding concerns in facilities-ombudsman may see something in the facility and call the AHS to share that information. Be involved with facility opening and closures- many times, they don’t know of a facility opening. AHS may want to reach out when a facility is licensed in the county and share a list with the ombudsman.
* Elder Abuse Multidisciplinary Teams-they can help with providing education, information, strategies, etc.
* Answer questions about benefits, regulations and resident’s rights
* Also help link individuals to other AAA programs and services

If we can’t find a resolution, we will refer it to a regulatory agency, like AHS or DHSR.

Community Advisory Committees

* Local citizens appointed by County Commissioners. They volunteer their time and serve as advocates for residents in LTC. These citizens have an interest in good quality of care for LTC facilities.

*WORLD ELDER ABUSE AWARENESS DAY: Piedmont Triade Elder Abuse Awareness Walk, Stroll and Roll*

Saturday, June 15, 2024 at Triad Park Kernersville. For more information go to [www.ptrc.org/walk](http://www.ptrc.org/walk)

**Contact information for Kim Johnson, Senior Long Term Care Ombudsman, Piedmont Triad Regional Council, Area Agency on Aging,** [**kjohnson@ptrc.org**](mailto:kjohnson@ptrc.org) **336-904-0300** [**http://www.ptrc.org**](http://www.ptrc.org)

Questions: How do you handle staffing issues? Involve DSS if necessary, help families understand that it may not be uncommon to wait on a call button response that is 10-15 minutes.

How do you handle food complaints? We focus on specific situations. Eg. Green beans overcooked on Tuesday, work with staff to help them plan better. Meat too tough, help staff understand dental needs, etc.

**Partner Updates:**

**• DHSR/ACLS: Tamara Talbot-Winstead, Training manager and County Liaison:**

Adult and Family Care Home Rule Changes, re-adoption effective April 1, 2024

Adult Care Home:

* 10A NCAC 13F 0702 Discharge of Residents
* 10A NCAC 13F .1307 Special Care Unit Resident profile and Care plan

Family Care Home:

* 10 A NCAC 13G .0705 Discharge of Residents; clarifies definition of an emergency
* 10A NCAC 13G .1301 Use of Physical Restraints and Alternatives

Communication was sent out on these changes on March 15, 2024; training occurred on March 14, 2024 and information, along with the training and PowerPoint, is on the DSS SharePoint.

Monitoring and Complaint Investigation Logs for 3rd quarter are due April 15, 2024. Please remember to submit both logs, even if you did not have any complaints during that period of time. There are on SharePoint under Quarterly Focused Monitoring 3rd Quarter and Complaint Investigation.

Outcomes-make sure that when you turn in your log; no pending outcomes. Eg. If open in the 2nd quarter, you need to update the outcome in the 3rd quarter report.

Upcoming Training Opportunities:

* Complaint Investigation Training at Guilford DSS May 2-3, 2024, registration opened on 3/22 and closes on 4/26. Register through NC Terms. AHS and Supervisors target audience. Questions should be directed to [DHSR.AdultCare.Trainings@dhhs.nc.gov](mailto:DHSR.AdultCare.Trainings@dhhs.nc.gov) or email her.
* Thursday, May 9, 2024 9:30 to 11:45, DSS Bi-Monthly Training/Updates covering the adult and family care home changes effective June 1, 2024 and accounting for residents’ personal funds. It will be an MS Teams training. Not in NC Terms, not mandatory. Link will be sent out. Resident funds are an area for the quarterly focus. There is no registration requirement.

Contacts:

Tamara Talbot-Winstead: [tamara.talbot@dhhs.nc.gov](mailto:tamara.talbot@dhhs.nc.gov) (910-3-5-4816

[DHSR.AdultCare.Trainings@dhhs.nc.gov](mailto:DHSR.AdultCare.Trainings@dhhs.nc.gov): Training needs and resources, staffing updates and SharePoint access

[DHSR.AdultCare.Questions@dhhs.nc.gov](mailto:DHSR.AdultCare.Questions@dhhs.nc.gov): for general non-urgent questions

Training question:

Bimonthly trainings-count toward training requirements. Official recommendation for meeting the training hours. No refresher training offered any more. They have updated other trainings. You do have to have 16 CEUs annually. The bimonthly trainings will give you 12-14 hrs; the 1068 trainings-2 per year-you can pull up the previous 1068 trainings and they will count. 1068-nutrition and food service and resident discharge-those will be this year. DAAS training-severe and persistent mental illness training, can we use those-Tamara-yes, this is an appropriate CEU.

**• Division of Social Services: Sarah Richardson**

Monthly survey sent out on April 1 and that is due by 5 pm April 10, 2024.

Next statewide consultation meeting April 25, 2024; links are on the SharePoint site. Adult Services SA meeting starts at 10 AM and Adult Services statewide consultation meeting 9:00 AM-these are now two different meetings and two separate links. March was the first month they separated the meetings. That meeting was recorded and is available on the site.

MAC Reimbursement report for February 2024

* APS/MAC-$556,215.16; MAC Standard: $501,741.97

Division of Aging site has been restructured. Any links for forms and manuals on the SharePoint site will still work, even with the updated manuals consolidated site. [WWW.NCDHHS.GOV/DIVISIONS/SOCIAL-SERVICES](http://WWW.NCDHHS.GOV/DIVISIONS/SOCIAL-SERVICES)

*Adult Services is under Aging until July 1.*

<HTTPS://POLICIES/NCDHHS.GOV> - Policies and manuals.

There are hyperlinks for adult services-please review. You can find information on those adult services program areas (placement, guardianship, etc.). The upgrade happened last week; new features such as additional languages and search engine. The design is more user friendly.

**• DMH: Lisa Jackson**

Unable to be here; shared the following information:

* **Tailored Plans:** At a legislative committee hearing on 4/3, NC Medicaid shared that the Local Management Entities (LMEs) that will run Tailored Plans – Alliance Health, Partners Health Management, Trillium Health Resources, and Vaya Health – are all ready to go live. The virtual TP Readiness Re-reviews with the LME/MCOs in preparation for going live as Tailored Plans on July 1, 2024 wrapped up on 3/22.
* **Rhett Melton, CEO of Partners Health Management** has announced he will be retiring effective July 31st. A replacement has not yet been named.
* **TBI Waiver Advisory Committee**: The primary purpose of this committee is to make recommendations and provide support on the statewide expansion of the TBI Waiver. These monthly meetings will be held virtually and will be open to the public.

**Date/Time:** Thursday, April 25, 2024, 3:00-4:00pm

**Contact:** Email: [TBIContact@dhhs.nc.gov](mailto:TBIContact@dhhs.nc.gov) to request the meeting link.

* **New Tailored Plan Resources and Information Link:** On 4/12, with input from many in the community, DHHS launched [new resources and information](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fmedicaid.ncdhhs.gov%2Ftailored-plans%2Ftoolkit&data=05%7C02%7Clisa.jackson%40dhhs.nc.gov%7C034b8d70ce3f4e2fa2c808dc5b2095b6%7C7a7681dcb9d0449a85c3ecc26cd7ed19%7C0%7C0%7C638485442840878840%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=Bqc6J%2FmUaZN3kfnEinWvMcQCJJbdXZjHQ604On1l0Tk%3D&reserved=0) to help people know what to expect with the launch of Tailored Plans. Here is the link: **https://medicaid.ncdhhs.gov/tailored-plans/toolkit**

Please share the resources below about Tailored Plans with the communities you serve. There is important information about what to expect and actions that people can take between now and July to prepare for this move.

* **Link to bilingual Essentials deck:** This presentation communicates key information, answers to FAQs, what to expect ahead of the Tailored Plans Launch and resources to help North Carolinians navigate the process.
* **Link to bilingual one-page flyer:** Let people know what actions they need to take before Tailored Plans launch.
* **Link to bilingual social media posts:** Content and graphics to post on your social and digital channels.
* **Link to landing page**: New page to learn more about key dates and download bilingual resources to prepare people for Tailored Plans.

Here’s the link for additional information about Tailored Plan services: [**https://medicaid.ncdhhs.gov/tailored-plans?utm\_source=medicaid.nc.gov&utm\_medium=referral**](https://medicaid.ncdhhs.gov/tailored-plans?utm_source=medicaid.nc.gov&utm_medium=referral)

Reminder: No committee meetings in May

Any questions? None.

Any suggestions for future topics? Targeted discussion on specific topics around best practices. Please email us.