



STATE OF CONNECTICUT

DEPARTMENT OF SOCIAL SERVICES

LONG TERM CARE OMBUDSMAN PROGRAM
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APPROPRIATIONS COMMITTEE

Public Hearing
February 18, 2009

Good evening distinguished chairpersons and members of the Appropriations Committee. My name is Nancy Shaffer and I am the State Long Term Care Ombudsman. I appreciate the opportunity to speak to you tonight on behalf of the aging and disabled long term care residents of Connecticut.

In the State of Connecticut we currently have ten skilled nursing facilities in state receivership. There are also six skilled nursing facilities in bankruptcy. A nursing home closed in December, 2008, and two homes are awaiting the Department of Social Services Commissioner's decision regarding their requests to close. In less than one month twenty-seven skilled nursing facilities face union activity. And, by all accounts, there are other facilities facing the prospect of closing in the very near future. As the State Ombudsman, I am currently the court appointed Patient Care Ombudsman (per the federal Bankruptcy Abuse Prevention and Consumer Protection Act of 2005) in six bankrupt homes, and until recently also the Patient Care Ombudsman in four other homes.

These are perilous times. They are challenging, difficult times for the Connecticut long term care industry and that translates into significantly critical times for long term care residents. Advocacy needs for our most frail and vulnerable Connecticut residents may soon reach an all-time high. Ombudsman caseloads are anticipated to increase as homes struggle to maintain high levels of quality of care and services.

The Long Term Care Ombudsman Program is a uniquely independent program mandated by the Older American's Act. The Ombudsman Program was created during the Nixon administration when the public became increasingly aware of the problems experienced by residents of nursing homes and the need for professional advocacy. As it has evolved over the years, the Ombudsman Program is charged with a wide range of responsibilities including working with individual residents and resolving complaints on their behalf, working with citizen organizations, representing the interests of residents before governmental agencies and initiating and participating in systems advocacy.

In Federal Fiscal Year 2008, the CT Ombudsman Program handled 2,000 complaints, the Regional Ombudsmen and the volunteers logged thousands of hours of visits to homes. The Ombudsman Program serves a vital public purpose, helps many thousands of people and, I can state without doubt, improves the quality of life and the system of long term care in Connecticut.

Please consider:

- At a time when it is crucial that residents and their families are aware of the advocacy of the Long Term Care Ombudsman Program, the loss of all \$360,000 of federal funds for Program activities will mean that minimal outreach and education will be possible. Retaining some of those dollars could make a real difference in the outreach work of the Program and at a time when it may most be needed.
- The Institute of Medicine study recommends a staffing ratio of one paid full time long term care Ombudsman for every 2,000 residents. The Connecticut Program currently has a ratio of one Ombudsman for every 4,000+ residents. It is my understanding that the Governor's budget proposal does not indicate a reduction in Ombudsman staff.
- Currently, it is the Program's policy and practice to respond to individual's complaints within two business days. This practice may require review due to anticipated increases in caseload and could necessitate development of a protocol for "triaging" cases.
- Recent Ombudsman cases: a resident fell out of bed, and was tangled in a heating unit, she was not discovered by staff for a length of time, resulting in such a severe burn that her foot required amputation; families charged privately on a 31 day per month per calendar year basis-resulting in 7 days per year paying for room and board services not rendered; dementia residents fed a few vegetables as their entire supper, a spoonful of eggs as their breakfast; a resident moving out of a closing nursing home and wanting to go to another home which only had a "short term" bed available-with intervention by the Regional Ombudsman, the State Ombudsman in consultation with an Assistant Attorney General, the home was convinced to admit the resident; the numerous residents moving out of closed homes are provided near-daily contact with a Regional Ombudsman-essential when at times residents seem rushed to move out of their home even before a DSS decision to close has been rendered.
- More closings, bankruptcies and receiverships are on the horizon. With the denial of rate increases to nursing facilities as stipulated in the Governor's budget proposal, I fear that facilities which remain in business will feel forced to cut corners in staffing, nourishment, and quality of life areas, all to the detriment of the residents. A staff member from one home recently stated to me, "we've already seen so many cuts, I don't know what more can be cut."
- The CT Ombudsman Program ranks first nationally among other State Ombudsman Programs in its work with Resident Councils. This work is conducted in many ways, but much of the work is done by bringing residents together so that they can collectively have a voice and develop their ideas and plans to improve the care and services they receive in their homes.

- The LTCOP Volunteer Resident Advocates provide an invaluable service to the residents. A complete reduction in all of the \$360,000 federal funds will probably mean that the volunteers will no longer be paid for their mileage. It is predicted that many volunteers will drop out of the Program as a result of not being compensated for their travel expenses. It was a Program volunteer who first discovered that one of the original Haven homes left their residents without heat one October weekend.
- When Haven Healthcare declared bankruptcy in 2007, an outside entity was appointed Patient Care Ombudsman. This gentleman charged \$800,000 for his services over an approximate six month period. Every service provided by the CT Ombudsman Program is delivered at no extra charge to the citizens of the state.

In order to fulfill the federal and state mandates to protect the health, safety, welfare, and well being of long term care residents the Connecticut Long Term Care Ombudsman Program must be able to carry out all activities of the office and these activities should not be diminished due to the financial crisis. There is no other agency or organization that provides individualized advocacy for long term care residents and with such immediate responsiveness. I am very concerned about the well being of our nursing home residents and the difficulties associated with doing the right thing by them in this most austere time.

Respectfully,

Nancy Shaffer, M.A.
State Ombudsman

“The Long Term Care Ombudsmen are the lineman in a football game and their job is to protect the quarterback (the resident). The quarterback counts on and has confidence in their lineman.”

Ms. Ronnie Martin, member of the Executive Board of Resident Councils of Connecticut

“The moral test of government is how it treats those who are in the dawn of life, the children; those who are in the twilight of life, the aged; and those who are in the shadows of life, the sick, the needy and the handicapped.”

From the last speech of Hubert Humphrey, Washington, DC, November 1, 1977