



## SERVICE STANDARDS

**TITLE: Title III Ombudsman – Updated 2/06**

### I. Definition

Ombudsman or Representative of the Office means any person employed by the Department to fulfill the requirements of the Office or any representative of a Regional Long Term Care Ombudsman Program; provided that representative, whether they are paid for or volunteer their ombudsman services, shall be qualified and authorized by the Department to perform the duties of an ombudsman and is registered with the Office's Ombudsman Representative Registry.

### II. Service Activities May Include:

- A. identifying, investigating and resolving complaints made by or on behalf of, residents of long term care facilities relating to actions, omissions, or decisions of providers, or their representatives, of long term care facilities, of public agencies, or social service agencies, which may adversely affect the health, safety welfare or rights of such residents;
- B. the provision of services to assist residents in protecting the health, safety, welfare or rights of the residents;
- C. informing residents about means of obtaining services and ensure they have regular and timely access to the services;
- D. analyzing, commenting on and monitoring the development and implementation of Federal, State, and local laws, regulations and other governmental policies and actions, that pertain to the health, safety, welfare and rights of the residents, with respect to the adequacy of long term care facilities and services in the State; recommend changes in such laws and facilitate public comment on the laws, regulations and actions; and
- E. training for representatives of the Office; provide technical support for the development of family/resident councils to protect the well-being and rights of residents.

### III. Unit of Service

One hour of staff time expended by a Regional Ombudsman, Community Ombudsman and/or Ombudsman Visitor within the Long Term Care Ombudsman Program.<sup>1</sup>

IV. Service Standard adopted from the Illinois Department on Aging Standards, Long Term Care Ombudsman Program Manual Release 10/01/05.

V. Disaster Response and Assistance Activities (IDOA 602.12)

- A Disaster Plans: Older Americans Act service providers are required to have disaster plans, so as to expedite the delivery of necessary services when a disaster occurs. The disaster assistance efforts of service providers will complement the existing relief efforts provided by federal, state and voluntary organizations.
- B Written Coordination Agreements: Older Americans Act service providers must enter into written coordination agreements and regular, ongoing working relationships with Emergency Services Disaster Agencies (ESDAs), voluntary relief organizations (e.g. American Red Cross, Salvation Army and the Mennonites, etc.) and with local community-based organizations.
- C Activation of Disaster Plans & Assessment of Needs During a Disaster: An Older Americans Act service provider's disaster plan will be activated upon notification by the Area Agency on Aging, the Department on Aging, or the local emergency services disaster official. Activation of the disaster plan requires an assessment of the need to mobilize service provider resources and personnel which will be done in coordination with the American Red Cross, state and local emergency services agencies and/or FEMA during a Presidential declared disaster. The assessment will determine the type of action necessary to serve the special needs of older disaster victims.
- D Northeastern Illinois Area Agency on Aging Disaster Planning Requirements for Funded Service Providers

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<sup>1</sup>. An Ombudsman Visitor trained prior to January 1, 2000 may retain that title. Any volunteer trained on or after January 1, 2000 will be referred to as a Volunteer Community Ombudsman. All volunteers after January 1, 2000 will receive the training and have the authority of Level I Ombudsmen. Volunteers may also receive Level II training at the discretion of the Regional Ombudsman.

1. All funded service providers must:
  - Designate an Emergency Coordinating Officer.
  - Include in their Disaster Assistance and Response Plan:
    - a. A procedure for contacting all at-risk provider consumers, on a prioritized basis, prior to and immediately following a disaster.
    - b. A procedure for after-hours coverage of elder help-lines and other network services, if necessary.
    - c. A procedure to dispatch the Emergency Coordinating Officer or other staff members to shelters in areas outside of the disaster area, to assist older evacuees with special needs, if necessary.
    - d. A procedure to help at-risk older consumers register with any Special Needs Registries of local emergency management agencies.
    - e. A procedure for staff members to be issued a picture I.D. badges for use during any disaster/emergency work.
2. Case Coordination Units must include in their Disaster Assistance and Response Plan:
  - a. An Outreach procedure to receive referrals from other service agencies, conduct neighborhood canvassing, and deliver services to older persons, other than existing consumers, needing emergency relief assistance.
  - b. A Case Management procedure to make available address lists of isolated, homebound or otherwise at-risk older persons to local Emergency Management Coordination offices as appropriate.
  - c. A procedure to assign Information & Assistance and Case Management staff to Emergency Management Coordination centers and/or disaster assistance centers to ensure that older victims in the disaster area receive help, as coordinated through local officials.

## VI. Reports of Abuse, Neglect, and Financial Exploitation

1. Any Older Americans Act service provider who suspects the abuse, neglect, or financial exploitation of an eligible adult may report this suspicion to an agency designated to receive such reports under the Elder Abuse and Neglect Act or to the Department on Aging.
2. In carrying out their professional duties, Older Americans Act service providers are mandated reporters, if they have reason to believe that an eligible adult, who

because of dysfunction is unable to seek assistance for himself or herself, has within the previous 12 months been subjected to abuse, neglect, or financial exploitation. The mandated reporter shall, within 24 hours after developing such belief, report this suspicion to an agency designated to receive such reports under the Elder Abuse and Neglect Act or to the Department on Aging. (IDOA 602.13)

## SERVICE STANDARD ADDENDUM

### **TITLE: III-B Ombudsman**

#### **I. Illinois Department on Aging Ombudsman Service Standards**

Agencies funded to provide Ombudsman services must meet and maintain compliance with Illinois Department on Aging standards, procedures and practices for the Ombudsman Program as specified in the Long Term Care Ombudsman Program Manual.

#### **II. Northeastern Illinois AAoA Ombudsman Service Standard Additions**

In addition to IDOA standards, the Area Agency has established additional requirements for Ombudsman service grantees.

#### **Service Design**

##### **A. Public Awareness**

Agencies must make regular public notice, not less than monthly, regarding the availability of their specific service. This effort must include a means by which the agency may be contacted. Public notice efforts can include mass media notices or presentations, public displays, brochure distribution in public places, or other such means of reaching the general public. One local toll-free telephone number must be used and publicized by the

Regional Program to receive complaints and requests for information. Directory assistance listings in the community service numbers sections of the phone book must appear under the heading "Senior Citizens."

**B. Inquiry/Referral**

The Agency must have and follow written procedures to respond to non-Ombudsman inquiries by referral to other appropriate agencies, such as the CCU. Persons referred for service must be informed of service options and limitations. The Agency must have and follow written procedures for contacting referred clients and/or service providers to determine if services were received and met identified needs, and to assist the older person who was unsuccessfully referred or who may have developed additional needs.

**C. Record-keeping**

A record-keeping system must be in place to keep daily counts of units of service provided.

**D. Resource Development**

Agencies must maintain current information with respect to the opportunities and services available to older persons.

## **E. Access**

### **1. Physical**

Agencies must ensure that all older residents of long-term care facilities in the county have reasonably convenient access to the Regional Ombudsman Program to resolve complaints and/or answer inquiries.

### **2. Program**

Agencies funded to provide Ombudsman services must minimally:

- provide Ombudsman services in the language spoken by the older person, in cases in which a resident does not speak English as their principal language.
- have the capacity or a contractual arrangement to serve deaf persons.

## **F. Service Population/Priorities**

Providers must assign priority, in the provision of services, to those older adults in greatest economic and social need, with particular attention to low-income minority individuals, frail individuals

and individuals who reside in rural settings or are otherwise isolated.

Providers must attempt to provide services to individuals whose incomes are at or below poverty, minority individuals, minority individuals whose incomes are at or below poverty, individuals 75 years and older, and individuals living alone at a rate at least in proportion to the incidence level of each group within the county.

#### **G. Interagency Coordination**

Grantees are required to maintain linkages with other service providers and organizations in their service area.

The program staff must demonstrate cooperative working relationship with:

- Case Coordination Unit;
- legal service providers;
- public assistance organizations;
- Social Security administration offices;
- social and health service providers.

#### **H. Community Relationships**

The service provider must demonstrate involvement in strengthening community relationships by:

- participating in community outreach efforts; and
- encouraging participation in services without expressed favoritism toward any one of the equally qualified competing service providers.