DAVID Y. IGE GOVERNOR OF HAWAII

VIRGINIA PRESSLER, M.D.

DIRECTOR OF HEALTH



TERRI BYERS DIRECTOR

STATE OF HAWAII EXECUTIVE OFFICE ON AGING NO. 1 CAPITOL DISTRICT 250 SOUTH HOTEL STREET, SUITE 406 HONOLULU, HAWAII 96813-2831 eoa@doh.hawaii.gov

Testimony COMMENTING on HB1884 MAKING AN APPROPRIATION FOR THE OFFICE OF THE LTC OMBUDSMAN PROGRAM

COMMITTEE ON HUMAN SERVICES

REPRESENTATIVE DEE MORIKAWA, CHAIR REPRESENTATIVE BERTRAND KOBAYASHI, VICE CHAIR

Testimony of Terri Byers Director, Executive Office on Aging Attached Agency to the Department of Health

Hearing Date: February 4, 2016, 8:30 a.m. Room Number: 329

1 **Office Testimony:** The Executive Office on Aging (EOA) would like to provide comments on

2 HB1884.

Fiscal Implications: This measure appropriates \$300,000 for three postions in the Office of the
Long Term Care Ombudsman.

Purpose and Justification: The Long Term Care Ombudsman Program (LTCOP) is operated
within the Executive Office on Aging, the designated State Unit on Aging and recipient of Older
American's Act grant funding. Title VII of the Older American's Act for the LTCOP partially
funds two positions within the Executive Office on Aging. One position functions as the State
Long Term Care Ombudsman and the other as the LTCOP volunteer coordinator. As the Title
VII grant award is minimal, the Executive Office on Aging uses other resources to offset the
salaries of the two positions and provide for a small operating budget.

EOA is currently looking at ways to improve the efficiency of the LTCOP and is consideringorganizational placement among the options. Under federal law, the State Unit on Aging has the

1 authority to determine program placement under one of three scenarios provided there are no

- 2 inherent conflicts of interest: 1) within the SUA, 2) within another state agency, or 3) within any
- 3 public agency or nonprofit organization that establishes a separately identifiable distinct entity.

Recommendations: Additional resources would dramatically improve program effectiveness and draw greater interest from prospective partners should we move forward on procuring the service. If this bill is advanced, I would urge that bill language be flexible to allow funding for both salary and program operations (equipment, supplies, mileage, travel, etc), provided that its enactment does not reduce or replace priorities within the Administration's supplemental budget request.

10 Thank you for the opportunity to testify.

House Committees on Human Services H.B. No. 1884 Making an Appropriation for the Office of the LTC Ombudsman Program

> Testimony of John G. McDermott, LSW, ACSW, M.Div. State Long Term Care Ombudsman

> > February 4, 2016

Good morning, Chair Dee Morikawa, Vice Chair Bertrand Kobayashi and members of the Human Services Committee.

I am here to testify **strongly in favor** of H.B. 1884.

Mahalo for giving me this opportunity to testify before you. Ironically it was almost exactly 10 years ago today (Feb. 6, 2006) that I first testified in support of these 3 Neighbor Island positions. And today passage of this bill is even more important. My name is John G. McDermott and I have been the State Long Term Care Ombudsman (SLTCO) since August, 1998. The Office of the Long Term Care Ombudsman is both federally and state mandated and has been part of the Executive Office on Aging since 1975. Our primary responsibility, per the Older Americans Act, is to be an "advocate" for residents of licensed nursing homes, assisted living facilities, adult residential care homes. That total population in Hawai'i has grown from 8,606 in 2006 to now 12,340.

We all know the "Silver Tsunami" has arrived. The 2014 State Census lists 228,128 residents as 65 and older, or 16.1% of the State population. This population is increasing quickly and so will the need for long term care beds as our Kupuna become more dependent on outside care. Since traditional nursing homes are so expensive to build, staff and maintain, we have seen an increase in home and community based options. Found throughout all the Neighbor Islands and Oahu, these smaller facilities have placed additional burdens on the LTCO Program.

Kauai County has 5 nursing homes with 333 beds, 1 assisted living facility with 100 beds, 19 community care foster family homes with 46 beds and 15 adult residential care homes with 122 beds. That's a total of 40 long term care facilities with 601 beds. 17.4% (12,279) of Kauai's population in 2014 were 65 or older. Kauai has the state's highest median age at 41.4 years so the need for more long term care beds will only grow, and so too will the need for advocates. Currently the LTCOP has no ombudsman volunteers on Kauai, the last 2 returning to the Mainland for health reasons.

Maui County has 4 nursing homes with 459 beds, 1 assisted living facility with 144 beds, 50 community care foster family homes with 121 beds and 15 adult residential care homes with 84 beds. That's a total of 70 long term care facilities with 808 beds. 15.1% (24,682) of Maui's population in 2014 were 65 or older. Currently the LTCOP has only one ombudsman volunteer on Maui and one on Lanai.

Hawaii County has 9 nursing homes with 886 beds, 1 assisted living facility with 220 beds, 125 community care foster family homes with 336 beds and 52 adult residential care homes with 234 beds. That's a total of 187 long term care facilities with 1,676 beds. 17.5% (34,035) of Hawaii's population in 2014 were 65 or older. The median age is 41.4 years. Currently the LTCOP has only one ombudsmen volunteer in Hilo.

Oahu, the most populated island, has 32 nursing homes with 2,829 beds, 11 assisted living facilities with 1,766 beds, 951 community care foster family homes with 2,397 beds and 411 adult residential care homes with 2,263 beds. That's a total of 1,405 long term care facilities with 9,255 beds. 15.8% (157,132) of Oahu's population in 2014 were 65 or older. Currently the LTCOP has only 5 ombudsman volunteers on Oahu.

Since 2001 we have trained and certified over 180 volunteers but volunteers are only required to make a one year commitment. The vast majority have stayed longer than that but eventually they do move on. We desperately need more volunteers BUT volunteers are no substitute for full-time, highly trained, paid ombudsmen who will be there 40 hours a week year after year consistantly.

The Older Americans Act mandates the LTCOP to "ensure residents have **regular and timely access** to the services provided through the Office and that the residents and complainants receive timely responses from representatives of the Office to complaints." The Administration for Community Living (ACL) interprets "regular" visits to mean "quarterly." It also mandates we "provide technical support for the formation of Resident and Family Councils, promote the development of citizen organizations, recruit for volunteer representatives," and do whatever it takes to "protect the health, safety, welfare and rights of the residents."

In June of 2015 the Executive Office on Aging was re-organized. My Ombudsman Specialist position was eliminated and my Volunteer Coordinator position now reports to the EOA Director, not me, so there is only one ombudsman position left (me) to cover the entire State.

When I stared there was a State Long Term Care Ombudsman position and an Ombudsman Specialist position. Thanks to former EOA Director Marilyn Seely, former DOH Director Bruce Anderson, strong support from AARP, Kokua Council, HARA, PABEA, the public, the media, and many legislators (especially Chun-Oakland, Levin, and Fukunaga) we were given two additional positions - the Volunteer Coordinator and a Clerical Support staffer in 2001. Today, with a staff of one, we have moved as far backwards as possible. The Legislature gave, and EOA took away. *No other state in the country has a LTCOP with one staff member.*

The Institute on Medicine's 1995 report <u>"Real People Real Problems: An Evaluation of the Long-</u> <u>Term Care Ombudsman Programs of the Older Americans Act"</u> recommended that at a **minimum**, states should have one full time paid LTC ombudsman per every 2,000 residents. Hawaii just has me... for 12,340 residents in 1,702 facilities spread over 6 islands.

We receive no money designated specifically for the LTCOP from the Legislature. Our state funding comes from EOA's budget. Until recently that annual allotment was only \$13,500. Starting in July of 2015 it was increased to \$37,343 but that still calculates to only \$3.00 per resident! With our current staffing and budget, quarterly visits to every facility are impossible to meet and places us out of compliance. Without these 3 additional positions, I will barely be able to cover Oahu. The Neighbor Islands will never see me or have access to ombudsman services. This just isn't fair to our Kupuna and their ohana and so I'm counting on all of you to please pass this bill and please save the Long Term Care Ombudsman Program. Mahalo.

From:	mailinglist@capitol.hawaii.gov
Sent:	Sunday, January 31, 2016 4:58 PM
To:	HUStestimony
Cc:	marseel@aol.com
Subject:	Submitted testimony for HB1884 on Feb 4, 2016 08:30AM

<u>HB1884</u>

Submitted on: 1/31/2016 Testimony for HUS on Feb 4, 2016 08:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Marilyn	Individual	Comments Only	No

Comments: Members of the Committee Quality standards for disabled, ill people are among the most important measures to be considered by any policy making body. They are also difficult to achieve without proper monitoring and education. The LTC Ombudsman program has a long history of oversight and advocacy for vulnerable folks in institutional and residential care. It has long proven itself invaluable for identifying life and death issues and in general contributing to the overall quality of life for folks who need it most. Ombudsmen not only seek out and identify wrong doing but work with providers to maintain and improve care. Patients and residents can reach outside their facilities for a supporter who understands their situation and is working on their behalf. Incidences abound where without the help of Ombudsmen crisis after crisis would have occurred. This program is long overdue for expansion to meet the bare minimum requirements for state wide oversight. I am in strong support of this measure and I ask that you do the same. Thank you, Marilyn R Seely

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Barbara J. Service Testimony

I am a senior citizen and a resident of House District 19 and Senate District 9. I am a member of the CARE Coalition and an active member of AARP, Kokua Council and the Hawaii Alliance of Retired Americans.

I strongly support HB1884 to add three positions to the Long-Term Care Ombudsman's office. The ombudsman is essentially a one man operation who is responsible for more than 12,000 nursing home and care home patients in the entire state. It is imperative that there be an ombudsman specialist on each island to be able to provide this service which is critically necessary for our frail elderly.

Thank you for the opportunity to testify.

- TO: HOUSE COMMITTEE ON HUMAN SERVICES Representative Representative Dee Morikawa, Chair Representative Bertrand Kobayashi, Vice Chair
- **FROM:** Eldon L. Wegner, Ph.D., Policy Board for Elder Affairs (PABEA)
- **SUBJECT: HB 1884** Making an Appropriation for the Office of the Long-Term Care Ombudsman Program
- **HEARING:** 8:30 am Thursday, February 4, 2016 Conference Room 329, Hawaii State Capitol
- **POSITION**: The Policy Board for Elder Affairs **strongly supports HB 1884** which would appropriate \$300,000 to the Long-Term Care Ombudsman Program Appropriates \$300,000 to the office of the long-term care ombudsman for three full-time (3.0 FTE) ombudsman specialist positions; one each on Kauai, Maui, and Hawaii.

RATIONALE:

The Policy Board for Elder Affairs has a statutory obligation to advocate on behalf of the senior citizens of Hawaii. While we advise the Executive Office on Aging, we do not speak on behalf of the Executive Office of Aging.

Long-term care facilities provide critical care for our most frail elder population. The state Ombudsman Program is charged with oversight of the large numbers of residents of licensed nursing homes, assisted living facilities, adult residential care homes, expanded adult residential care homes, and community care foster family homes. A total of 12,340 persons in Hawaii live in these facilities. There are hundreds of these facilities in each of the four counties.

Unfortunately, there are instances of poor quality of care, violations of civil rights, and even abuse which occasionally come to attention. These residents are usually powerless to protect themselves. Thus, the best protection to assure quality of care and respectful treatment of residents is to provide access to outside monitoring.

The State Ombudsman's Program, which is required by the Federal Administration on Aging, is expected to visit these facilities quarterly as well as to investigate complaints. The Ombudsman's Program in Hawaii has never had enough resources to meet this expectation. In recent years, the staff has been reduced to 1 person based in Honolulu who has no resources to oversee the Neighbor Island facilities. In past years, there was staff to coordinate a volunteer program which was especially helpful in reaching facilities on the Neighbor Islands. However, due to budget cuts, that position was eliminated and the volunteer program has thus become infeasible to maintain.

HB 1884 would create 3 full-time ombudsman specialists, one for each of the Neighbor Island counties. The resulting presence of staff on the Neighbor Islands would be a major step in addressing the serious gaps in fulfilling the role of the Ombudsman Program.

We need to be concerned that frail persons receive the kinds of care which we would want for ourselves and for our family members. Families in Hawaii count on the facilities providing that level of care. I urge you to pass this appropriation which will improve the oversight which is very necessary to assure this protection.

Thank you for allowing me to offer testimony.



TO:	Committee on Human Services Rep. Dee Morikawa, Chair
	Rep. Bertrand Kobayashi, Vice Chair
FROM:	Sarah Yuan, Ph.D., Chair Legislative Committee Policy Advisory Board for Elder Affairs (PABEA)
HEARING:	8:30 AM Thursday, February 4, 2016 Conference Room 329, Hawaii State Capitol
SUBJECT:	HB 1884 Making an Appropriation for the Office of the Long-Term Care Ombudsman Program
POSITION:	PABEA strongly supports HB 1884 which appropriates \$300,000 to the office of the long-term care ombudsman office to establish 3 full-time ombudsman specialist positions, one each on Kauai, Maui, and Hawaii.

RATIONALE:

The Policy Advisory Board for Elder Affairs has a statutory obligation to advocate on behalf of the senior citizens of Hawaii. While we advise the Executive Office on Aging, we do not speak on its behalf.

The PABEA strongly supports bill HB 1884 which appropriates funds to establish 3 Neighbor Island positions for the Long-Term Care Ombudsman program. According to the Older American Act, the LTC Ombudsman Office's responsibility is to advocate for residents in long-term care facilities as well as community-based care homes, assisted living facilities, and community care foster family homes. The Ombudsman Office should ensure that residents have regular and timely access to its services and that any complaints will be responded in a timely manner. The Older American Act also mandates the Office to provide technical support for the Resident and Family Councils in the long-term care settings.

Currently, about 12,340 residents live in these settings, and 25% of them are on Kauai, Maui, and Hawaii Islands combined. With the recent reorganization of the Executive Office on Aging, the LTC Ombudsman Office is down to only one staff member. The Office used to have a volunteer coordinator and over 180 volunteers were trained and certified in the past 15 years; however, the availability of volunteers fluctuated and the turnover rate was high. As of now, the total number of active volunteers is eight, and there is no ombudsman volunteer on Kauai.

The minimum staffing ratio, as recommended by the Institute on Medicine in its 1995 report was 1 fulltime ombudsman staff to 2,000 long-term care residents. Although the number of residents on each of the neighbor island counties is less than 2,000, having one ombudsman staff in each county would be necessary to ensure timely and accessible services for the residents in each county. We also expect the number of long-term care residents to continue to grow rapidly in the next 20 years.

Thank you for the opportunity to testify.

Edward Thompson, III

From: Sent:	mailinglist@capitol.hawaii.gov Thursday, February 04, 2016 5:06 AM	LAT
To: Cc:	HUStestimony john.a.h.tomoso@gmail.com	
Subject:	Submitted testimony for HB1884 on Feb 4, 2016 08:30AM	

<u>HB1884</u>

Submitted on: 2/4/2016 Testimony for HUS on Feb 4, 2016 08:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing	
John A. H. Tomoso	Individual	Comments Only	No	

Comments: As a Caregiver here on Maui, I am aware of the advocacy that is needed, within the Aging Network, to support my efforts. Although my mother is not in a Nursing or Care Home, or Assisted Living Facility, I do know of fellow Caregivers who have a parent or loved-one in one of these. The LTCO, once established here on Maui, can greatly assist in advocacy, by answering questions and being of assistance to make sure their love-one is cared for in the proper and best way. Just the other day, my Mother inquired about a friend in a Care Home and called the family member in charge. She found out that their Father was now in a Care Home. The Family member was having some problems with the care and didn't have his questions answered satisfactorily. Mahalo John A. H. Tomoso 51 Ku'ula Street Kahului, HI 96732-2906

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