

LONG-TERM CARE OMBUDSMAN, Office of
Annual Performance Progress Report (APPR) for Fiscal Year (2013-2014)

Original Submission Date: 2014

Finalize Date: 1/15/2015

| 2013-2014 KPM # | 2013-2014 Approved Key Performance Measures (KPMs) |
|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | Percentage of non-referred complaints where action is needed that are partially or fully resolved. |
| 2 | Average initial response time to non-referred cases. |
| 3 | Average time to close non-referred cases. |
| 4 | Percentage of nursing facilities visited at least once annually. |
| 5 | Percentage of assisted living and residential care facilities visited at least once annually. |
| 6 | Percentage of adult foster care homes visited at least once annually. |
| 7 | Number of requests for assistance from consumers, the public, facility staff and agencies. |
| 8 | Participation in system-wide advocacy meetings at the local, regional, state and national levels. |
| 9 | Total number of certified ombudsmen volunteer hours annually. |
| 10 | Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information. |

| New Delete | Proposed Key Performance Measures (KPM's) for Biennium 2015-2017 |
|-----------------------|-------------------------------------------------------------------------|
| | Title: Rationale: |

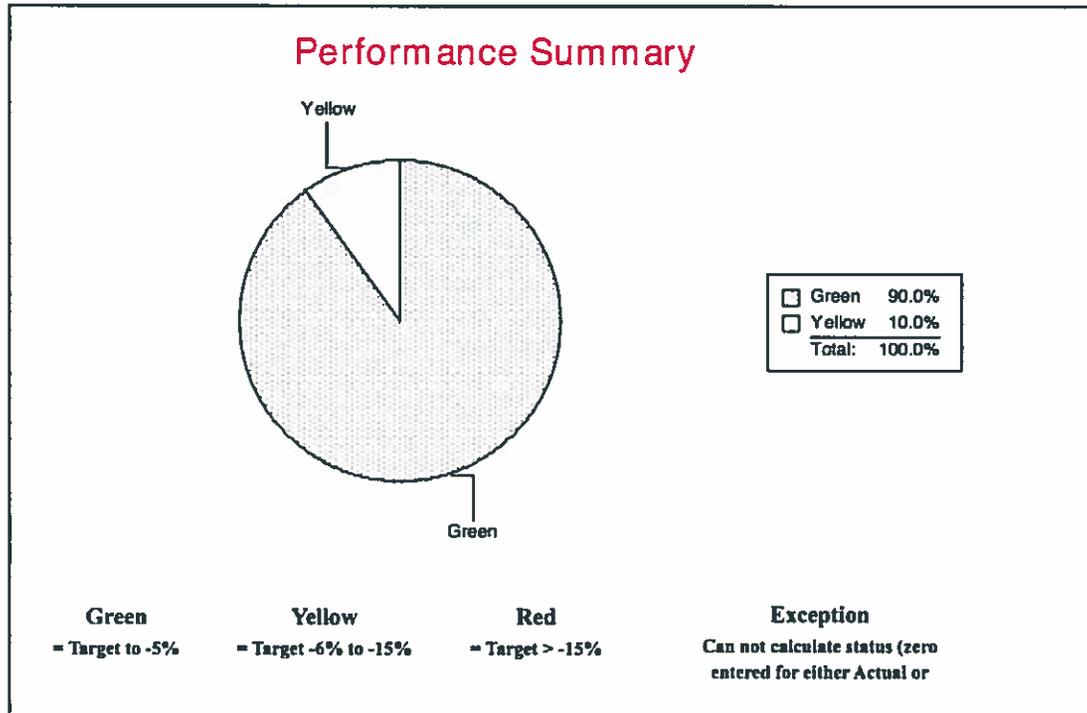
Agency Mission: To Enhance The Quality Of Life, Improve The Level Of Care, Protect The Rights Of The Individual And Promote The Dignity Of Each Oregon Citizen Living In A Nursing Facility, Residential Care Facility, Assisted Living Facility Or Adult Foster Care Home.

Contact: Mary Jaeger

Contact Phone: 503-378-6533

Alternate: Tracey Behnke

Alternate Phone: 503-378-6533



1. SCOPE OF REPORT

The Agency's performance measures reflect essential services: including identifying, investigating and resolving complaints made by, or on behalf of, Oregon's licensed long-term care facility residents and monitoring the implementation of federal, state and other applicable local laws, rules and policies that impact the residents we serve. The agency uses the data it collects in system advocacy for quality improvement and to assure residents' rights in licensed long-term care facilities.

2. THE OREGON CONTEXT

The Agency serves both a consumer protection and a quality assurance function for the vulnerable population of 43,000 potential residents living in licensed Skilled Nursing Facilities (SNF), Assisted Living Facilities (ALF), Residential Care Facilities (RCF), and Adult Foster Homes (AFH). In addition to the thousands of complaints it investigates and resolves, the Agency refers complaints to Adult Protective Services (APS), Licensing, and other agencies for further investigation, action and resolution. All agency data is used by legislative and statewide work groups to advocate for and enhance the quality of care in Oregon licensed long-term care facilities and settings.

3. PERFORMANCE SUMMARY

The Agency documented a total of 5,906 requests for assistance from licensed long-term care facility consumers, the public, facility staff, state and federal agencies, other health care professionals and the media. This number is once again greater than the 5,000 target, and larger than the previous year's total. Facility visitation, essential as the primary means by which facility residents access the services of the Agency, is measured by annual visits. Volunteers and staff visited 96% of RCF's and ALF's (target 80%), 80% of AFH's (target 40%) and 100% of the SNF's (target 100%)! The improved AFH number is due to the efforts of our volunteers. The Agency partially or fully resolved 97% of complaints where action was needed! The overall customer satisfaction rating was 75%, below the 85% target. Regarding customer satisfaction, it is important to take into consideration the frail nature of our customer base residing in LTC facilities. The average initial response took 1.9 days and the target was 2 days. In 2014, it took the Agency an average of 29.1 days to close non-referred cases.

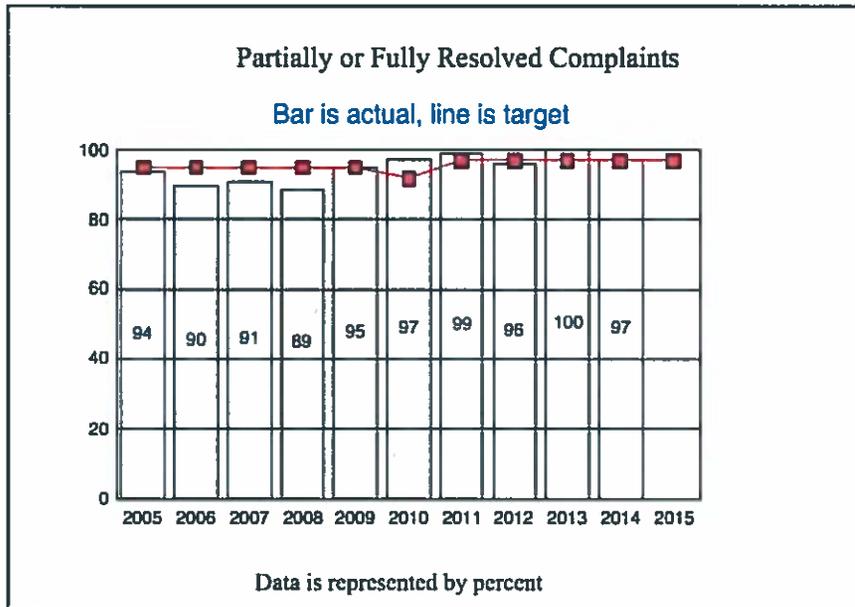
4. CHALLENGES

To fully accomplish our mission the Agency needs more than 275 volunteer ombudsmen assigned to serve the 43,000 potential residents of licensed long-term care facilities. To coach and mentor the needed volunteers we still need at least 3 additional full-time Deputy Ombudsmen.

5. RESOURCES AND EFFICIENCY

Agency expenditures for FFY 2014 were \$1,084,014 General Funds and \$457,801 Other Funds. The volunteer workforce consists of: Certified Ombudsmen, Recruitment and Screening Committee members, IT and Finance Volunteers, Legislative Advocacy Volunteers and Administrative and Executive Volunteers. Certified Ombudsmen Volunteers made 12,624 documented visits, to all levels of licensed long-term care facilities during the year. They reported 25,617 hours of documented activity. The value of this time donated to the State of Oregon is valued at over \$600,000 (\$619,566.) This estimate is based on \$22.55 per hour, a rate established by the Independent Sector.

| | | |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------|
| KPM #1 | Percentage of non-referred complaints where action is needed that are partially or fully resolved. | 2005 |
| Goal | Goal #1: Identify, investigate and resolve complaints made by or on behalf of residents of long-term care facilities. | |
| Oregon Context | Federal legislation: Section 307 (a) (12) and Section 712 of the Older Americans Act, as amended. State enabling legislation: ORS 441.100-153. | |
| Data Source | From case reports submitted by volunteers and staff. | |
| Owner | Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. | |



1. OUR STRATEGY

This measure contributes to the Agency's mission to improve the level of care and enhance the quality of life for Oregon's long-term care residents.

2. ABOUT THE TARGETS

The Agency strives to bring about positive changes for licensed long-term care residents, which are reflected by higher percentages. This measure reflects those complaints that the Certified Ombudsmen Volunteers and paid staff worked to resolve. This measure excludes complaints which are referred to another Agency for action.

3. HOW WE ARE DOING

In 2014, 97% of the non-referred complaints that required action were partially or fully resolved!

4. HOW WE COMPARE

This performance measure looks only at the non-referred cases that were handled by the Agency and not referred anywhere else for action. The most recent national data published by the Administration for Community Living (ACL) was for Federal Fiscal Year 2011. Oregon's percentage of resolved complaints is 97%.

5. FACTORS AFFECTING RESULTS

The resolution rate of volunteers and staff is very similar. The Certified Ombudsman Volunteers, handled 80% of the non-referred complaints and along with staff, resolved or partially resolved 97% of complaints.

6. WHAT NEEDS TO BE DONE

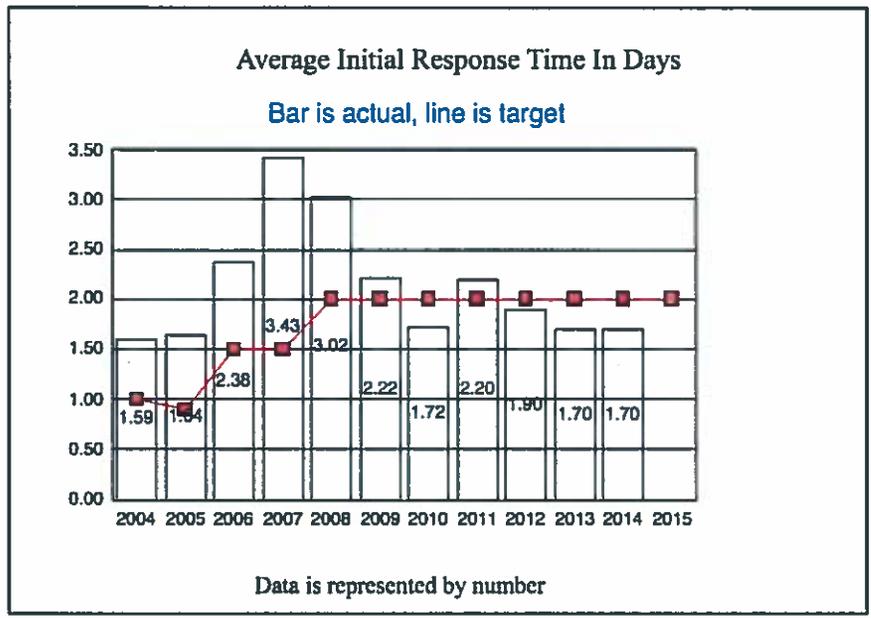
The biggest challenge to our Agency continues to be the need to increase the number of citizen volunteers assigned to licensed long-term care facilities across the state. Our volunteers are supervised on a 1 to about 25-30 ratio by paid agency program staff called Deputy State Long-Term Care Ombudsmen. Oregon continues to rank among the lowest of all 50 states in the ratio of paid staff to number of long-term care beds, according to the ACL.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2014 (October 2013-September 2014), collected from case and activity reports submitted by Certified Ombudsmen Volunteers and staff. The reports of the volunteers are reviewed by their supervising Deputy before submission for data entry, where all reports are reviewed

for technical accuracy before being entered. The data files are checked periodically for accuracy, and at the end of the year all data is further validated in the development of this report, and a similar report, for the Federal Administration for Community Living (ACL). In addition, the introduction of electronic case and activity reporting in mid 2010 has significantly improved both the timeliness and accuracy of the Agency data. Approximately 90% of our current volunteers now report electronically! The Agency also has a Volunteer IT Committee, chaired by a member of the RFAC: Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee established by ORS 441.137.

| | | |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------|
| KPM #2 | Average initial response time to non-referred cases. | 2003 |
| Goal | Goal #1: Identify, investigate and resolve complaints made by or on behalf of residents of long-term care facilities. | |
| Oregon Context | Federal legislation: Section 307 (a) (12) and Section 712 of the Older Americans Act, as amended. State enabling legislation: ORS 441.100-153. | |
| Data Source | From case reports submitted by volunteers and staff. | |
| Owner | Office of the Long Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. | |



1. OUR STRATEGY

A timely initial response is critical in identifying, investigating and resolving concerns/complaints made to the Agency by or on behalf of residents in licensed long-term care facilities.

2. ABOUT THE TARGETS

Many of the individuals who contact our Agency for assistance have been unsuccessful at solving the problem on their own and feel a sense of urgency in getting an issue resolved. Recognizing the importance to the residents, our Agency strives to respond and resolve problems quickly, which is reflected in a lower response time.

3. HOW WE ARE DOING

The 1.7 days average response time is equivalent to the 2013 data, and is better than the target of 2.00 days. The average initial response time for the Certified Ombudsman Volunteers, who handled 80% of the cases, was 1.5 days. The average initial response time of Deputy State Long-Term Care Ombudsmen, who handled 20% of the cases, was 2.4 days.

4. HOW WE COMPARE

This data is not available.

5. FACTORS AFFECTING RESULTS

These results are impacted by a slight increase in the number of Certified Ombudsman Volunteers who can respond to requests for local assistance far more quickly than paid staff. The Agency was awarded the Governor's Award for a Statewide Volunteer Agency in FFY 2012, and is still proud to be considered as such!

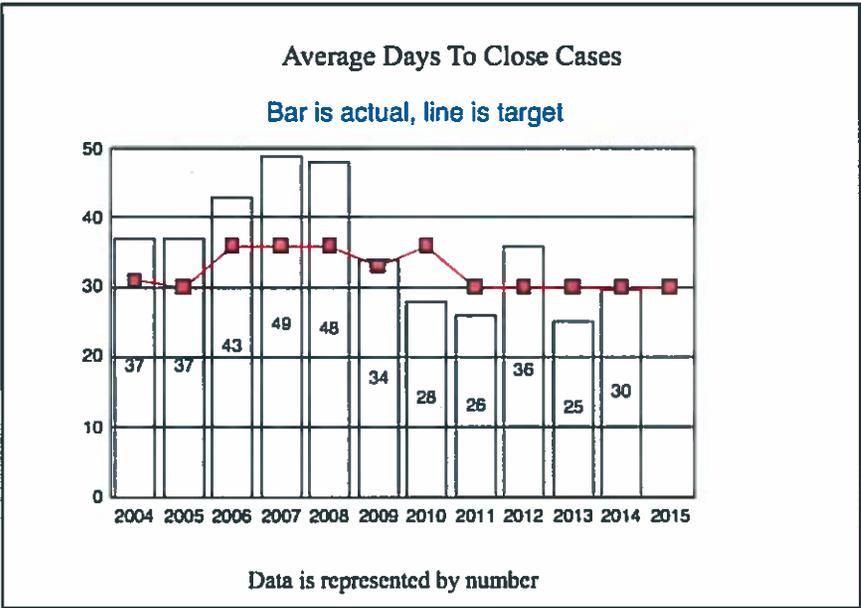
6. WHAT NEEDS TO BE DONE

The highest priority of the Agency continues to be recruiting, training and supporting volunteers across the state. This extends our reach into all levels of care, maximizing the General Fund dollars granted to us. The Agency is restricted by the number of paid staff who work with volunteers to operationalize its very important mission.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2014 (October 2013-September 2014), collected from case and activity reports submitted by Certified Ombudsmen Volunteers and staff. The reports of the volunteers are reviewed by their supervising Deputy before submission for data entry, where all reports are reviewed for technical accuracy before being entered. The data files are checked periodically for accuracy, and at the end of the year all data is further validated in the development of this report, and a similar report, for the Federal Administration for Community Living (ACL). In addition, the introduction of electronic case and activity reporting in mid 2010 has significantly improved both the timeliness and accuracy of the Agency data. Approximately 90% of our current volunteers now report electronically. The Agency also has a Volunteer IT Committee, chaired by a member of the Residential Facilities Advisory Committee, formerly known as the Long Term Care Advisory Committee established by ORS 441.137.

| | | |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------|
| KPM #3 | Average time to close non-referred cases. | 2003 |
| Goal | Goal #1: Identify, investigate and resolve complaints made by or on behalf of residents of licensed long-term care facilities. | |
| Oregon Context | Federal legislation: Section 307 (a) (12) and Section 712 of the Older Americans Act, as amended. State enabling legislation: ORS 441.100-153. | |
| Data Source | From case reports submitted by volunteers and staff. | |
| Owner | Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. | |



1. OUR STRATEGY

The timely completion or closure of cases contributes to the Agency goal to identify, investigate and resolve complaints made by or on behalf of residents of long-term care facilities.

2. ABOUT THE TARGETS

The less time it takes to complete a case, the faster the service to the resident. Many of the individuals who contact this Agency for assistance have been unsuccessful at solving the problem on their own and feel a sense of urgency to get an issue resolved. Recognizing the importance to the residents, the Agency strives to respond and resolve problems as quickly as possible.

3. HOW WE ARE DOING

The Agency case closure time was 29.6 days: Volunteer Ombudsmen took 27.9 days, and Deputy staff took 36.9 days, for an overall average of 29.6 days.

4. HOW WE COMPARE

This data is not available.

5. FACTORS AFFECTING RESULTS

The Agency continues to recruit many new Certified Ombudsman Volunteers. Their time to close cases decreased in this time period as reporting procedures became more familiar. Cases are identified, opened, resolved, and closed by Certified Ombudsman Volunteers and Deputy State Long-Term Care Ombudsmen. In practice, the cases involving multiple agency interactions are generally handled by experienced Deputy State Long-Term Care Ombudsmen.

6. WHAT NEEDS TO BE DONE

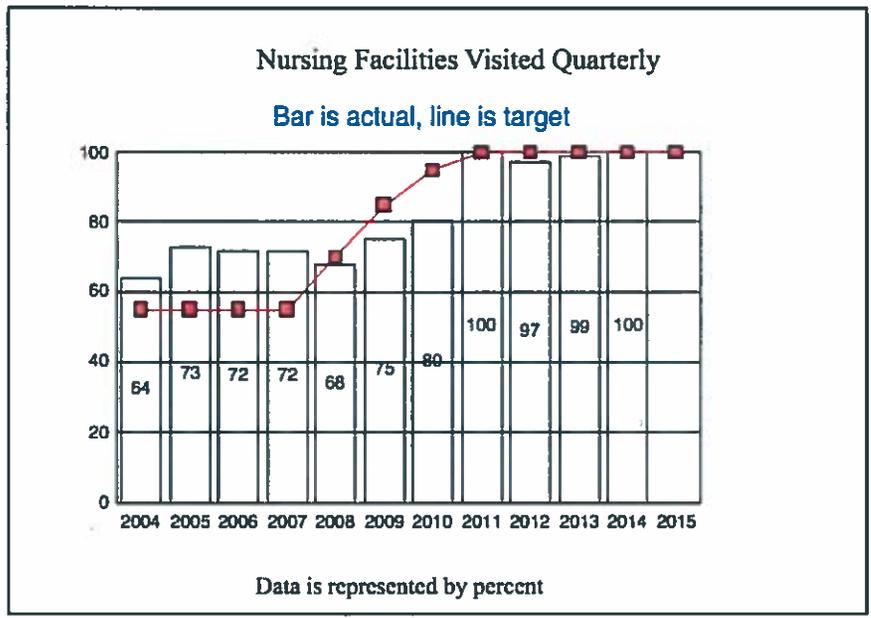
The Agency continues to emphasize reducing case closing times through inperson and online training, as well as emphasize timely case closures with other Agencies.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2014 (October 2013-September 2014), collected from case and activity reports submitted by Certified Ombudsmen Volunteers and staff. The reports of the volunteers are reviewed by their supervising Deputy before submission for data entry, where all reports are reviewed for technical accuracy before being entered. The data files are checked periodically for accuracy, and at the end of the year all data is further validated in the

development of this report, and a similar report, for the Federal Administration for Community Living (ACL). In addition, the introduction of electronic case and activity reporting in mid 2010 has significantly improved both the timeliness and accuracy of the Agency data. Approximately 90% of our current volunteers now report electronically. The Agency also has a Volunteer IT Committee, chaired by a member of the Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee established by ORS 441.137.

| | | |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------|
| KPM #4 | Percentage of nursing facilities visited at least once annually. | 2003 |
| Goal | Goal #2: Establish a routine presence in long-term care facilities using a cadre of trained program volunteers. | |
| Oregon Context | Federal legislation: Section 307 (a) (12) and Section 712 of the Older Americans Act, as amended. State enabling legislation: ORS 441.100-153. | |
| Data Source | Monthly activity reports submitted by volunteers and staff. | |
| Owner | Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. | |



1. OUR STRATEGY

Regular facility visitation by Certified Ombudsman Volunteers and Deputy State Long-Term Care Ombudsmen is the primary method for delivering the Agency's services to Oregon's long-term care residents. A secondary method is rapid response to complaint calls to our 1-800 number, which is posted in all

levels of licensed long-term care facilities in Oregon. We also are receiving more and more requests for services and information via email requests and via our Agency website.

2. ABOUT THE TARGETS

The higher the percentage of facilities receiving annual visits, the greater the number of residents having access to ombudsman services. For purposes of Federal oversight and reporting, the Agency also tracks the number of facilities receiving a visit at least quarterly.

3. HOW WE ARE DOING

Program representatives visited 100% of Oregon's Skilled Nursing Facilities (SNF's) in FFY 2014.

4. HOW WE COMPARE

This information is not available on an annual basis.

5. FACTORS AFFECTING RESULTS

Facility visitation is limited by the number of program volunteers and staff. A statewide volunteer recruitment effort continues to increase volunteer presence in all areas of Oregon, thereby increasing visitation to facilities, especially adult foster care homes.

6. WHAT NEEDS TO BE DONE

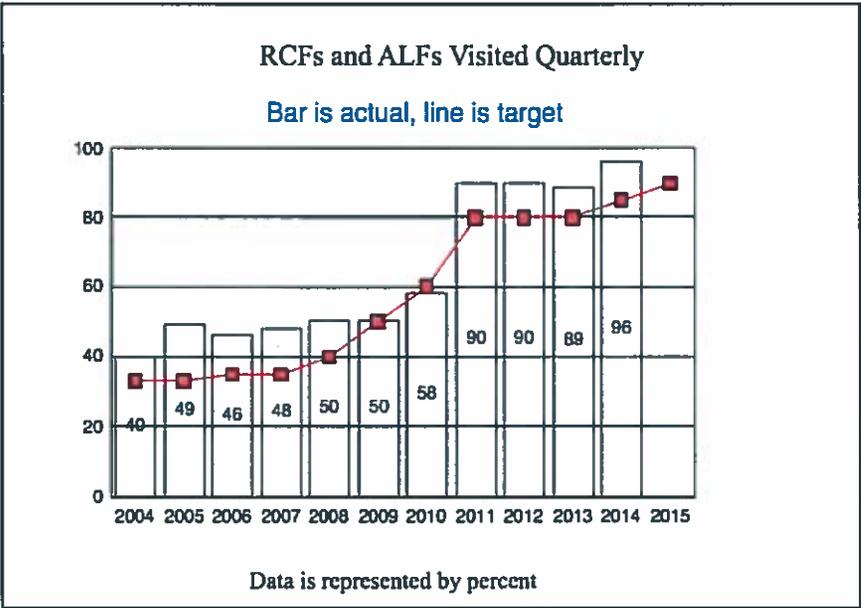
Increased visibility, transparency, public relations efforts, and the dedicated efforts of a full-time Volunteer Recruiter are increasing volunteer numbers.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2014 (October 2013-September 2014), collected from case and activity reports submitted by Certified Ombudsmen Volunteers and staff. The reports of the volunteers are reviewed by their supervising Deputy before submission for data entry, where all reports are reviewed for technical accuracy before being entered. The data files are checked periodically for accuracy, and at the end of the year all data is further validated in the development of this report, and a similar report, for the Federal Administration for Community Living (ACL). In addition, the introduction of electronic case

and activity reporting in mid 2010 has significantly improved both the timeliness and accuracy of the Agency data. Approximatey 90% of our current volunteers now report electronically. The Agency also has a Volunteer IT Committee, chaired by a member of the Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee established by ORS 441.137.

| | | |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------|
| KPM #5 | Percentage of assisted living and residential care facilities visited at least once annually. | 2003 |
| Goal | Goal #2: Establish a routine presence in long-term care facilities using a cadre of trained program volunteers. | |
| Oregon Context | Federal legislation: Section 307 (a) (12) and Section 712 of the Older Americans Act, as amended. State enabling legislation: ORS 441.100-153. | |
| Data Source | Monthly activity reports submitted by volunteers and staff. | |
| Owner | Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. | |



1. OUR STRATEGY

Regular facility visitation by Certified Ombudsman Volunteers and Deputy State Long-Term Care Ombudsmen is the primary method of delivering the Agency's services to Oregon's long-term care residents.

2. ABOUT THE TARGETS

The higher the percentage of facilities receiving visits, the greater the number of residents having access to ombudsman services. For purposes of Federal oversight and reporting, the Agency tracks the number of facilities receiving a visit at least quarterly.

3. HOW WE ARE DOING

Program representatives visited 96% of Oregon's licensed Assisted Living (ALFs) and Residential Care (RCFs) facilities at least once during FFY 2014. The Agency visitation schedule correlates directly with the number of volunteers and staff and demonstrates the willingness of volunteers to "go the extra mile". This result surpassed the goal of 85% annually.

4. HOW WE COMPARE

This information is not available.

5. FACTORS AFFECTING RESULTS

Visits are limited only by the number of Certified Ombudsman Volunteers and staff. The agency strives to visit as many settings as possible given the limited volunteer and paid resources available.

6. WHAT NEEDS TO BE DONE

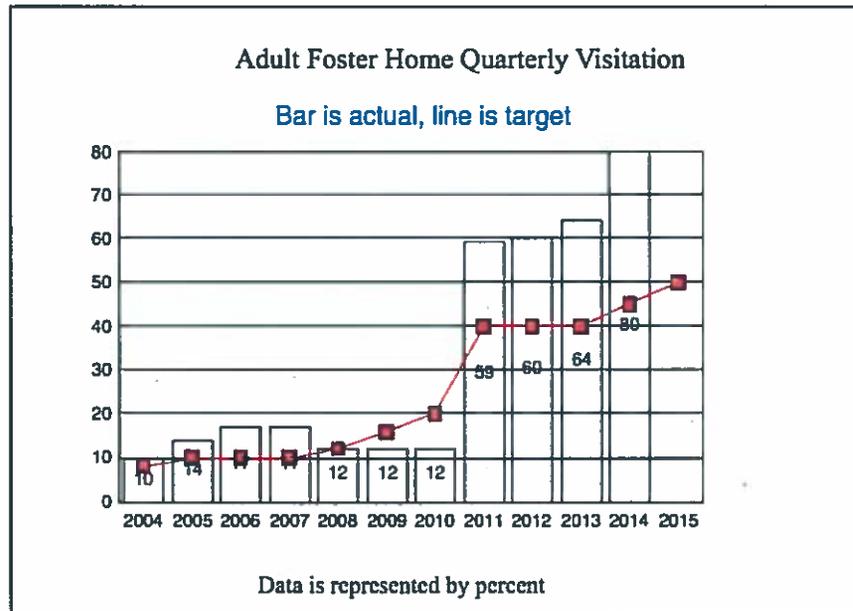
To achieve Agency goals, we will continue to recruit, train and supervise as many volunteers as possible!

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2014 (October 2013-September 2014), collected from case and activity reports submitted by Certified Ombudsmen Volunteers and staff. The reports of the volunteers are reviewed by their supervising Deputy before submission for data entry, where all reports are reviewed for technical accuracy before being entered. The data files are checked periodically for accuracy, and at the end of the year all data is further validated in the development of this report, and a similar report, for the Federal Administration for Community Living (ACL). In addition, the introduction of electronic case

and activity reporting in mid 2010 has significantly improved both the timeliness and accuracy of the Agency data. Approximately 90% of our current volunteers now report electronically. The Agency also has a Volunteer IT Committee, chaired by a member of the Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee established by ORS 441.137.

| | | |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------|
| KPM #6 | Percentage of adult foster care homes visited at least once annually. | 2003 |
| Goal | Goal #2: Establish a routine presence in long-term care facilities using a cadre of trained program volunteers. | |
| Oregon Context | Federal legislation: Section 307 (a) (12) and Section 712 of the Older Americans Act, as amended. State enabling legislation: ORS 441.100-153. | |
| Data Source | Monthly activity reports submitted by volunteers and staff. | |
| Owner | Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. | |



1. OUR STRATEGY

Regular facility visitation by volunteers and Deputy State Long-Term Care Ombudsmen is the primary method of delivering the Agency's services to Oregon's long-term care residents.

2. ABOUT THE TARGETS

The higher the percentage of facilities receiving visits at least annually, the greater the number of residents having access to Certified Ombudsman Volunteer ombudsman services. The targets are set based on the number of volunteers and staff available.

3. HOW WE ARE DOING

Program representatives visited 80% of Oregon's adult foster homes at least once this period. This again dramatically surpassed the target of 45% for this measure!

4. HOW WE COMPARE

National data collected by the Federal Administration for Community Living combines all community-based care facilities together, including adult foster care homes. No current applicable data is available.

5. FACTORS AFFECTING RESULTS

Visitation is limited by the number of Deputy State Long-Term Care Ombudsmen, Certified Ombudsman Volunteers and the large number of adult foster homes (over 1,800 statewide).

6. WHAT NEEDS TO BE DONE

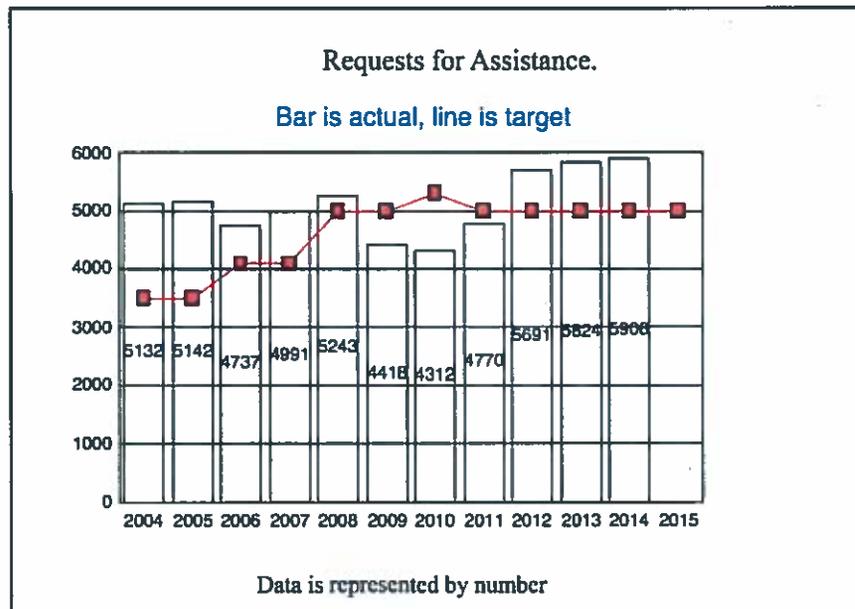
By adjusting the frequency of foster home visits, we expanded our coverage to AFH facilities significantly across the state. We plan to continue this approach and plan that increased numbers of volunteers will positively impact our presence in licensd adult foster homes.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2014 (October 2013-September 2014), collected from case and activity reports submitted by Certified Ombudsmen Volunteers and staff. The reports of the volunteers are reviewed by their supervising Deputy before submission for data entry, where all reports are reviewed for technical accuracy before being entered. The data files are checked periodically for accuracy, and at the end of the year all data is further validated in the

development of this report, and a similar report, for the Federal Administration for Community Living (ACL). In addition, the introduction of electronic case and activity reporting in mid 2010 has significantly improved both the timeliness and accuracy of the Agency data. Approximately 90% of our current volunteers now report electronically. The Agency also has a Volunteer IT Committee, chaired by a member of the Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee established by ORS 441.137.

| | | |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------|
| KPM #7 | Number of requests for assistance from consumers, the public, facility staff and agencies. | 2003 |
| Goal | Goal #3: Ensure that consumers, the public, facility staff and agencies are aware of the Ombudsman program and its services. | |
| Oregon Context | Federal legislation: Section 307 (a) (12) and Section 712 of the Older Americans Act, as amended. State enabling legislation: ORS 441.100-153. | |
| Data Source | From case and activity reports submitted by volunteers and staff. | |
| Owner | Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. | |



1. OUR STRATEGY

Increasing awareness of the Agency and our services to vulnerable Oregonians helps assure that residents, families and the public know to call our Agency when they have questions or concerns regarding residents in long-term care facilities. In addition, all facilities with an assigned volunteer have a poster with the

volunteer's name and direct phone contact information. Facilities without an assigned volunteer have a poster with our general toll-free 800 number.

2. ABOUT THE TARGETS

An increase in contacts indicates that individuals, their families and other agencies and programs are aware of the program and are accessing our services.

3. HOW WE ARE DOING

In FFY 2014, there were 5,906 documented requests for assistance.

4. HOW WE COMPARE

This information is not available.

5. FACTORS AFFECTING RESULTS

The volunteers' visits to facilities are the primary means of increasing program awareness. In 2013-2014, program representatives made 12,963 documented visits to all levels of licensed long-term care facilities in Oregon. The Agency utilizes newspaper articles, participates in health fairs and other community events, distributes brochures and takes other steps to increase public awareness of the program, including participating in various online volunteer recruitment sites. The Agency's website is another key method of reaching the public. In addition, articles are placed in local newspapers about individual volunteers when they are certified and recognizing service years. In addition, the agency director participates in a wide variety of long-term committees and legislatively appointed task forces which reinforces the agency's mission.

6. WHAT NEEDS TO BE DONE

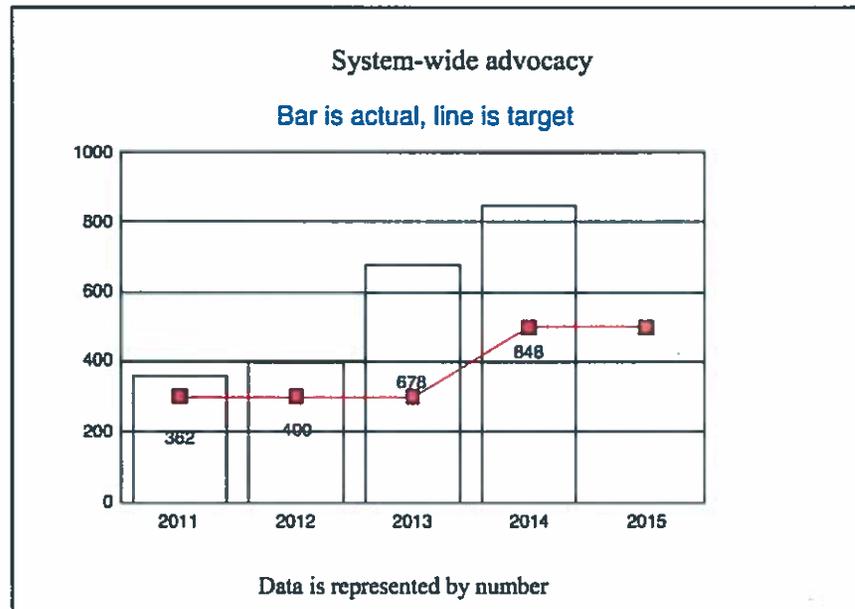
The Agency will continue its efforts to increase public awareness and transparency of the program with the goal of increasing volunteers statewide, as well as raising awareness of the 800 number for consumers and residents to call. Many complaints now also arrive at the Agency via email.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2014 (October 2013-September 2014), collected from case and activity reports submitted by Certified Ombudsmen

Volunteers and staff. The reports of the volunteers are reviewed by their supervising Deputy before submission for data entry, where all reports are reviewed for technical accuracy before being entered. The data files are checked periodically for accuracy, and at the end of the year all data is further validated in the development of this report, and a similar report, for the Federal Administration for Community Living (ACL). In addition, the introduction of electronic case and activity reporting in mid 2010 has significantly improved both the timeliness and accuracy of the Agency data. Approximately 90% of our current volunteers now report electronically. The Agency also has a Volunteer IT Committee, chaired by a member of the Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee established by ORS 441.137.

| | |
|-----------------------|----------------------------------------------------------------------------------------------------|
| KPM #8 | Participation in system-wide advocacy meetings at the local, regional, state and national levels. |
| Goal | Ensure participation and representation by LTCO in Advocacy meetings at local and national levels. |
| Oregon Context | State enabling legislation: ORS 441.100-153. |
| Data Source | From activity reports submitted by volunteers and staff. |
| Owner | Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. |



1. OUR STRATEGY

Historically, the State Long-Term Care Ombudsman was responsible for all system advocacy for the agency. By including staff and a wide variety of volunteers in this measure, our Federal and State mandates for system advocacy will continue to have a broader reach across Oregon and result in positive

system changes.

2. ABOUT THE TARGETS

By seeking out and participating in specific advocacy venues, staff and volunteers continue to expand the Agency's input into systemic long-term care issues.

3. HOW WE ARE DOING

The agency documented participation in 848 events regarding the program and mission. By emphasizing participation at all levels and across all state regions, we hope to impact systemic statewide long-term care and quality issues. We once again significantly surpassed the target of 500 thanks to group efforts by staff and volunteers.

4. HOW WE COMPARE

This data is not available.

5. FACTORS AFFECTING RESULTS

Volunteers and staff have increased awareness of the importance of documenting their system advocacy efforts. We are hopeful that statewide efforts impact the overall improvement of the system of care for vulnerable Oregonians.

6. WHAT NEEDS TO BE DONE

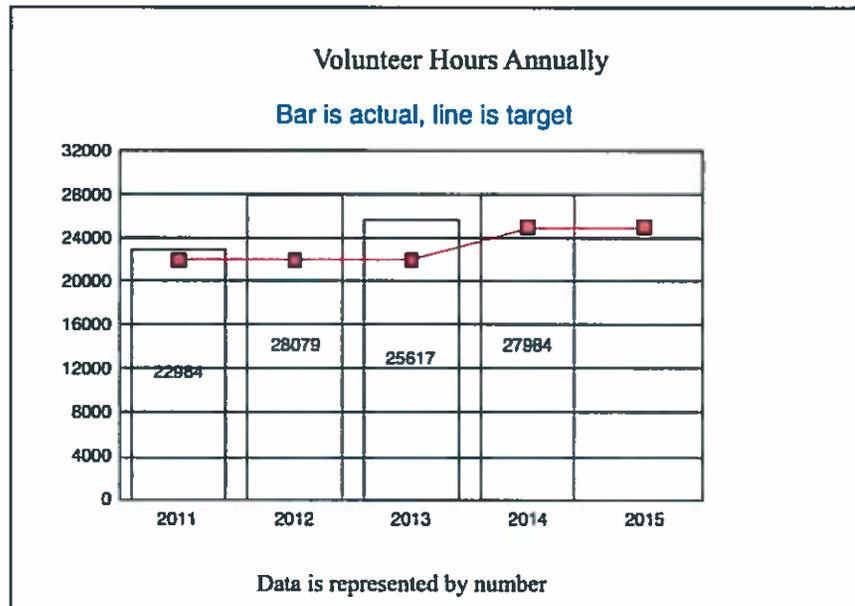
Management anticipates that increased participation by volunteers and staff at the local, regional and state levels will have a positive impact on quality of care in Oregon's licensed long term-care facilities.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2014 (October 2013-September 2014), collected from case and activity reports submitted by Certified Ombudsmen Volunteers and staff; including our Long-Term Care Advisory Committee members. The reports of the volunteers are reviewed by their supervising Deputy before submission for data entry, where all reports are reviewed for technical accuracy before being entered. The data files are checked periodically for

accuracy and at the end of the year all data is further validated in the development of this report, and a similar report, for the Federal Administration for Community Living (ACL). In addition, the introduction of electronic case and activity reporting in mid 2010 has significantly improved both the timeliness and accuracy of the Agency data. Approximately 90% of our current volunteers now report electronically. The Agency also has a Volunteer IT Committee, chaired by a member of the Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee established by ORS 441.137.

| | | |
|-----------------------|------------------------------------------------------------------------------|--|
| KPM #9 | Total number of certified ombudsmen volunteer hours annually. | |
| Goal | Ensure documentation of completed volunteer hours. | |
| Oregon Context | State enabling legislation: ORS 441.100-153. | |
| Data Source | From activity reports submitted by volunteers and staff. | |
| Owner | Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. | |



1. OUR STRATEGY

The best return on Oregon's investment in our Agency is the volunteer to staff ratio. One paid FTE Deputy Ombudsman can supervise 15 to 40 trained volunteers, increasing our coverage of facilities across the state exponentially. Therefore, the Agency will focus on maintaining our recruiting, training and

retention strategies to maximize total volunteer hours contributed. In addition, the agency also uses a wide variety of volunteers to augment agency functions i.e. IT, Finance, Graphics and other administrative/executive agency needs.

2. ABOUT THE TARGETS

Paid agency staff cannot begin to cover all of the licensed beds in Oregon. By utilizing volunteers in all parts of the state more residents' concerns can be addressed. Our average ratio of volunteers is 25-30 per paid Deputy State Long-Term Care Ombudsman and we hope to continue to increase our coverage through staff increases.

3. HOW WE ARE DOING

Volunteers completed 27,984 hours of service in FFY 2014. The Agency has increased the number of volunteers over the past three years. With a focus on total volunteer hours, rather than the actual number of volunteers, the Agency can better track growth and consistency over time. We once again exceeded the target of 25,000 hours donated by volunteers.

4. HOW WE COMPARE

Compared to National Long-Term Care Ombudsman data, Oregon's program continues to rank among the highest number of volunteers per paid staff in the country.

5. FACTORS AFFECTING RESULTS

Numbers of supervised volunteers are directly affected by the number of paid deputy ombudsmen. Current staff is essentially at capacity now, due to aggressive recruiting and retention. Without deputy ombudsmen coaching and encouragement, volunteers will likely become discouraged and leave our program. We are attentive to volunteer retention strategies, particularly because of the demographics of our volunteers.

6. WHAT NEEDS TO BE DONE

Agency will continue to recruit, train and supervise as many volunteers as possible. We will also continue vigilance around volunteer retention.

7. ABOUT THE DATA

The data is from Federal Fiscal Year 2014 (October 2013-September 2014), collected from case and activity reports submitted by Certified Ombudsmen Volunteers and staff. The reports of the volunteers are reviewed by their supervising Deputy before submission for data entry, where all reports are reviewed for technical accuracy before being entered. The data files are checked periodically for accuracy, and at the end of the year all data is further validated in the development of this report, and a similar report, for the Federal Administration for Community Living (ACL). In addition, the introduction of electronic case and activity reporting in mid 2010 has significantly improved both the timeliness and accuracy of the Agency data. Approximately 90% of our current volunteers now report electronically. The Agency also has a Volunteer IT Committee, chaired by a member of the Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee established by ORS 441.137.

| | | |
|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| KPM #10 | Percent of customers rating their satisfaction with the agency’s customer service as “good” or “excellent”: overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information. | 2006 |
| Goal | To achieve excellent customer satisfaction. | |
| Oregon Context | Federal legislation: Section 307 (a) (12) and Section 712 of the Older Americans Act, as amended. State enabling legislation: ORS 441.100-153. | |
| Data Source | Survey of customers who contacted the Agency for assistance. | |
| Owner | Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533. | |



1. OUR STRATEGY

Providing excellent customer service in advocacy to facility residents is important to achieving agency goals.

2. ABOUT THE TARGETS

Higher percentages could reflect better perception of service by customers. However, our biggest challenge is actually getting feedback from extremely vulnerable seniors who often do not have the capacity or access for responding to questions and surveys.

3. HOW WE ARE DOING

75% of customers rated the Agency's overall customer service as good or excellent. The highest rated categories were timeliness, knowledge and helpfulness. These are followed by accuracy and availability. These scores are most likely due to the increasingly complex nature of records and regulations around long term care and resident medical information as well as misunderstandings by complainants about what is possible under state and federal law. Statistically, the return rate this period was too low to allow meaningful comparisons to goals.

4. HOW WE COMPARE

The rating for the Agency's overall customer service was 75%. Comparable data from other agencies is not available.

5. FACTORS AFFECTING RESULTS

The sample for the survey was selected from the customers who directly contacted the Salem office for assistance. This subset is more likely to be available for a telephone survey, and because it is not dependent on reports coming in from the volunteers from the field, the Agency has good control of the sample. However, this method is not entirely satisfactory, because for the most part, an elderly resident can be difficult to survey either in person or through other methods. Long-term care facility residents typically initiate services directly with the local Certified Ombudsman Volunteer assigned to their facility and have the benefit of regular and direct contact. Furthermore, it is the resident who the Agency is working to satisfy, not necessarily other callers, whose wishes can sometimes be different or contradictory, from those of the resident. For a number of respondents, the lower satisfaction with the availability of information was tied to difficulties they had in initially identifying the Agency as a source of help, and looking to our agency to solve or resolve questions beyond our statutory scope.

6. WHAT NEEDS TO BE DONE

The Agency continues to explore new avenues for increasing customer satisfaction responses by using new survey tools and methods. The survey is now available on our website.

7. ABOUT THE DATA

Our phone calls and surveys are done throughout the year, closer to the closing of the case. Our QA data is statistically insignificant, due to the rate of return on surveys and the frail nature of those we assist under our mandate.

Agency Mission: To Enhance The Quality Of Life, Improve The Level Of Care, Protect The Rights Of The Individual And Promote The Dignity Of Each Oregon Citizen Living In A Nursing Facility, Residential Care Facility, Assisted Living Facility Or Adult Foster Care Home.

Contact: Mary Jaeger

Contact Phone: 503-378-6533

Alternate: Tracey Behnke

Alternate Phone: 503-378-6533

The following questions indicate how performance measures and data are used for management and accountability purposes.

1. INCLUSIVITY

- * **Staff :** Agency staff primarily supervise Certified Ombudsman Volunteers. Their collective insights and input are used to continue the Agency mission and recruit/retain more volunteers across the state in accordance with our Oregon Statute and the Federal Older Americans Act.
- * **Elected Officials:** The appointed Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee which monitors the program for the Governor and the Legislature, produces an annual report regarding the state of long term care in Oregon and items related to long term care policy; the Agency communicates performance results as part of the budgetary process, and, upon request. The Agency also shares a progress report with Agency highlights with Legislators, community partners, and concerned citizens.
- * **Stakeholders:** The monthly meetings of the Residential Facilities Advisory Committee, formerly known as the Long-Term Care Advisory Committee served as the source of public and stakeholder involvement and input. The Committee follows Public Meetings Laws and posts both agendas and minutes on the Agency website.
- * **Citizens:** Because the meetings of the Residential Facilities Advisory Committee (RFAC) are public meetings, citizens are invited to attend and Public Meeting protocols are followed. Monthly meeting notices and minutes are posted on our website, per Public Meetings protocols and emailed to our communication list.

2 MANAGING FOR RESULTS

Data on key performance measures are reviewed quarterly. This information is used to positively impact Oregon policies regarding residents of licensed long-term care facilities. Since the implementation of performance measures, the staff reviews cases regularly, focusing on data tied to the measures. These reviews assure a timely and appropriate response to requests for assistance.

3 STAFF TRAINING

Performance measures are reviewed twice yearly and as needed with staff and are shared with the Residential Facilities Advisory Committee on a quarterly basis.

4 COMMUNICATING RESULTS

*** Staff :** The performance measures are reviewed with staff on a quarterly basis. In addition, progress on recruiting and training new volunteers is reviewed at each weekly staff meeting.

*** Elected Officials:** The Residential Facilities Advisory Committee which monitors the program for the Governor and the Legislature, produces an annual report to the Legislature and Governor about agency performance, recommendations and aging related issues; the Agency communicates performance results about the budget process and upon request. The Agency will now share a brief progress report with Agency highlights with Legislators.

*** Stakeholders:** The Agency communicates performance results through written reports and presentations, including reports to the Residential Facilities Advisory Committee. Program and agency information is routinely distributed to volunteers, agency staff, legislators and stakeholders in order to reinforce Agency progress and transparency. The Agency also distributes a quarterly report titled "Ombudsman Outcomes" to the legislature and public which highlights volunteer efforts to assure positive results for residents in licensed long-term care facilities.

*** Citizens:** The performance measures and the annual report are posted on the Agency's website, along with other relevant agency information.

Agency Management Report

KPMs For Reporting Year 2014

Finalize Date: 1/15/2015

Agency: **LONG-TERM CARE OMBUDSMAN, Office of**

| | Green = Target to -5% | Yellow = Target -6% to -15% | Red = Target > -15% | Pending | Exception Can not calculate status (zero entered for either Actual or Target) |
|-----------------------|--------------------------|--------------------------------|------------------------|---------|-------------------------------------------------------------------------------------|
| Summary Stats: | 90.00% | 10.00% | 0.00% | 0.00% | 0.00% |

Detailed Report:

| KPMs | Actual | Target | Status | Most Recent Year | Management Comments |
|--------------------------------------------------------------------------------------------------------|--------|--------|--------|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 - Percentage of non-referred complaints where action is needed that are partially or fully resolved. | 97 | 97 | Green | 2014 | The Agency mandate is to impact positive changes for long-term care residents in licensed facilities. The measure includes the complaints that ombudsmen worked to resolve, excluding those referred to another Agency for action. The Certified Ombudsman Volunteers handled 80% of the non-referred complaints and along with staff, resolved or partially resolved 100% of complaints. |
| 2 - Average initial response time to non-referred cases. | 1.70 | 2.00 | Green | 2014 | A timely response to a request for help is important to those who contact our Agency for assistance. The 1.7 days average response time is better than the target. The average initial response time for the Certified Ombudsman Volunteers, who handled 80% of the cases was 1.5 days, and the staff response was 2.4 days. Continued recruitment, combined with consistent GF funding will further improve this result for residents of licensed facilities. |
| 3 - Average time to close non-referred cases. | 30 | 30 | Green | 2014 | The timely completion of cases is important to individuals who contact our Agency for assistance. Responding and resolving problems quickly has a significant impact on the quality of life and quality of care to long-term care facility residents. |

Agency Management Report

KPMs For Reporting Year 2014

Finalize Date: 1/15/2015

| KPMs | Actual | Target | Status | Most Recent Year | Management Comments |
|---------------------------------------------------------------------------------------------------|--------|--------|--------|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4 - Percentage of nursing facilities visited at least once annually. | 100 | 100 | Green | 2014 | Facility visitation is the primary means by which residents of licensed long-term care facilities access ombudsman services. Our Agency achieved a high visitation rate for the facilities across Oregon. Volunteers and staff visited 100% of Oregon's licensed Skilled Nursing Facilities in FFY 2014. |
| 5 - Percentage of assisted living and residential care facilities visited at least once annually. | 96 | 85 | Green | 2014 | The Agency's performance has consistently met or exceeded this target every year. Program representatives visited 96% of Oregon's Assisted Living and Residential Care Facilities in FFY 2014. |
| 6 - Percentage of adult foster care homes visited at least once annually. | 80 | 45 | Green | 2014 | The sheer number of licensed Adult Foster Homes (over 1,800) poses considerable challenges to the Agency's ability to make visits. Program representatives visited 80% of Oregon's Adult Foster Homes. In FFY 2014, volunteers agreed to conduct <u>additional</u> visits to Adult Foster Homes some of which had previously never been visited. The Agency's goal continues to be recruitment and support of volunteers across the state which will also increase Agency visits to Adult Foster Homes in Oregon. |
| 7 - Number of requests for assistance from consumers, the public, facility staff and agencies. | 5,906 | 5,000 | Green | 2014 | There were 5906 requests, exceeding the goal of 5000. Our Agency created new and additional collateral materials to increase resident and public awareness of the 800# and services available from our Agency. Volunteer Ombudsmen made the majority of 12,963 visits to facilities in FFY 2014. |

Agency Management Report

KPMs For Reporting Year 2014

Finalize Date: 1/15/2015

| KPMs | Actual | Target | Status | Most Recent Year | Management Comments |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------|--------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 - Participation in system-wide advocacy meetings at the local, regional, state and national levels. | 848 | 500 | Green | 2014 | The State Long-Term Care Ombudsman and the Agency are required by the Statute to participate in system advocacy events and advocate for systemic improvements in the long-term care system. We more than doubled the target which demonstrates significant ombudsmen input on aging advocacy efforts. |
| 9 - Total number of certified ombudsmen volunteer hours annually. | 27,984 | 25,000 | Green | 2014 | Measuring total volunteer hours over time illustrates a more accurate picture of recruitment, retention and results. The Agency exceeded the target. These hours represent over \$600,000 in contributed services to the great State of Oregon. |
| 10 - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information. | 75 | 85 | Yellow | 2014 | Providing customers with a timely and high quality level of service is a priority for the Agency. The Agency's overall customer satisfaction is 75% toward a goal of 85%. The Agency relies on assistance from several overburdened state agencies and community organizations such as APS, Licensing and Legal Aid, for resolution of many issues, including resident complaints. Residents can become frustrated with our Agency due to the lengthy resolution timelines for complaints referred to other outside groups. |

This report provides high-level performance information which may not be sufficient to fully explain the complexities associated with some of the reported measurement results. Please reference the agency's most recent Annual Performance Progress Report to better understand a measure's intent, performance history, factors impacting performance and data gather and calculation methodology.