LONG-TERM CARE OMBUDSMAN, Office of

Annual Performance Progress Report (APPR) for Fiscal Year (2011-2012)

Original Submission Date: 2012

Finalize Date: 1/11/2012

2011-2012 KPM #	2011-2012 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 2013-2015
	Title: **Rationale:**

LONG-TERM CARE OMBUDSMAN, Office of	I. EXECUTIVE SUMMARY

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.

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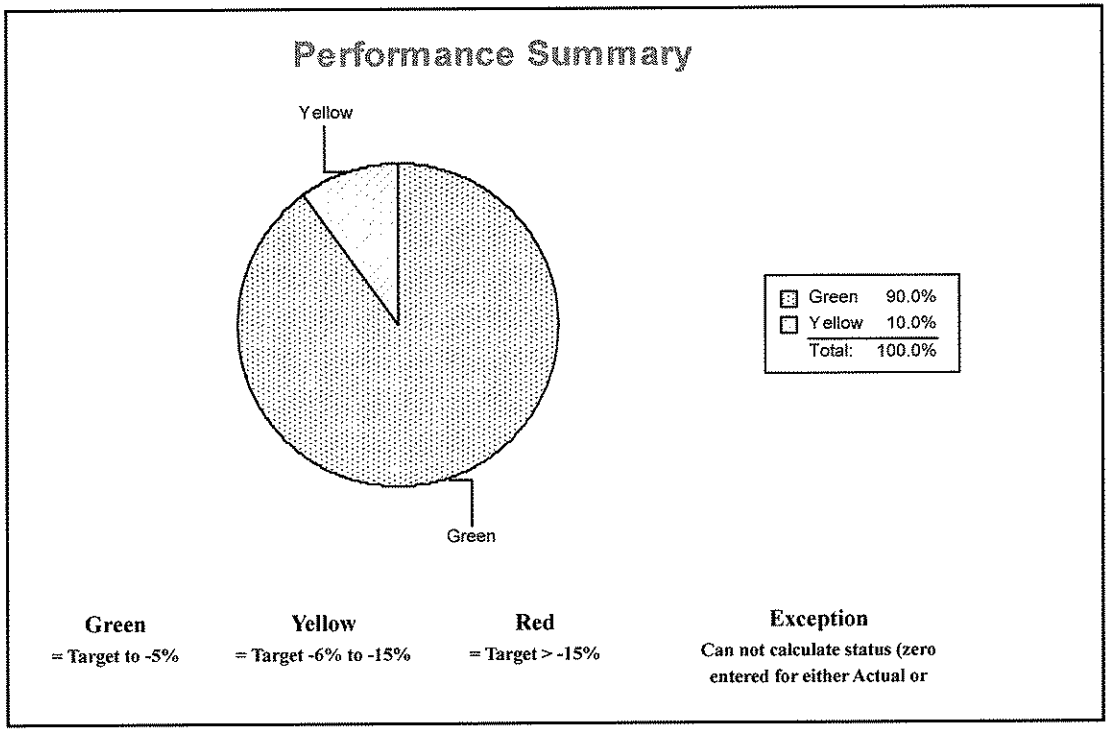


1. SCOPE OF REPORT

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; advocating on behalf of long-term care facility residents; monitoring the implementation of federal, state and local laws, rules and policies as they affect long-term care residents; and participating in efforts to promote quality and ensure residents' rights as citizens. The only essential service not reflected in previous performance measures is the Agency's advocacy for and participation in systemic system changes to promote and protect the rights and interests of long-term care residents, as directed in the Statute. This is reflected in the new KPM's.

2. THE OREGON CONTEXT

The Agency serves both a consumer protection and a quality assurance function for the vulnerable population of Oregonians living in licensed nursing homes, assisted living, residential and adult foster homes. In addition to the thousands of complaints it investigates and resolves, the Agency referred 589 complaints to (APS) Adult Protective Services, Licensing, and other agencies for further investigation, action and resolution.

3. PERFORMANCE SUMMARY

The Agency received 4,770 requests for assistance from consumers, the public, facility staff and agencies. This number is slightly less than the 5,000 target. Facility visitation, essential as the primary means by which facility residents access the services of the Agency, is measured by annual visits. Program representatives visited 90% of residential care and assisted living facilities (target 80%), 59% of adult foster homes (target 40%) and 100% of the nursing facilities (target 100%)! The Agency partially or fully resolved 99% of complaints where action was needed, exceeding the 97% target. The overall customer satisfaction rating was 90%, exceeding the 80% target. The average initial response took 2.2 days and the target was 2 days. In 2011, it took the Agency an average of 26.2 days to close non-referred cases. This is a 2-day improvement over 2010!

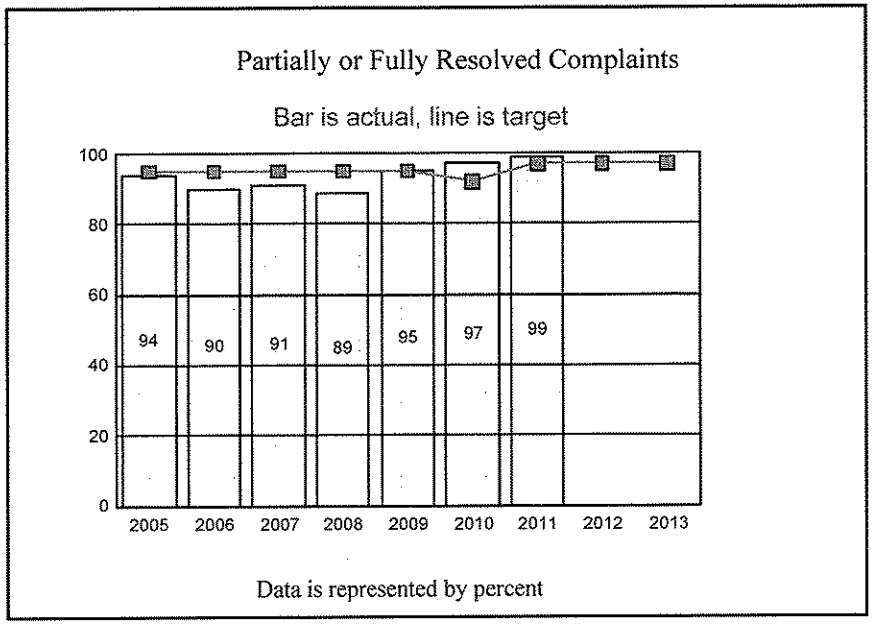
4. CHALLENGES

(a.) The Agency needs more than 275 total volunteers to serve unmet needs of 43,000 Oregon long term care residents. (We currently have 200 volunteers.) This number will also cover attrition of existing sworn volunteers. If we are successful in this recruitment, we will also need at least 3 more FTE Deputy Ombudsmen to guide the efforts of the new recruits. (b.) The agency lost its Medicaid-related funding on June 30, 2011and received General Funds to replace the revenue.(c.) With anticipated cuts to DHS, we anticipate the need for more volunteer ombudsmen serving in all levels of care across the state.

5. RESOURCES AND EFFICIENCY

Agency expenditures for FFY 2011 were $533,855 General Fund and $748,799 Other Funds. The volunteer workforce consists of Certified Ombudsmen, Recruitment and Screening Committee members, IT and Finance Volunteers, and Administrative Volunteers. Volunteers made 12,606 visits to all levels of long-term care facilities during the year. They reported 22,984 hours of activity. The value of this time donated to the State of Oregon is valued at $490,938 (based on $21.36 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 ombudsman staff and volunteers.	
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 long-term care residents, which are reflected by higher percentages. This measure reflects those complaints that the volunteer ombudsman and paid staff worked to resolve. This measure excludes complaints which are referred to another Agency for action.

3. HOW WE ARE DOING

In 2011, 99% of the non-referred complaints that required action were partially or fully resolved, exceeding the target of 97%.

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 on Aging is for Federal Fiscal Year 2010. Oregon's percentage of complaints that were not resolved is 1% in 2011, compared to the 5.57% national rate reported for 2010.

5. FACTORS AFFECTING RESULTS

The resolution rates of staff and volunteers is very similar. The Certified Ombudsman volunteers, who handled 80% of the non-referred complaints, resolved or partially resolved 99% of complaints, an increase from 97% in 2010. Staff resolved, or partially resolved, 97% of complaints -- up from 96% in 2010.

6. WHAT NEEDS TO BE DONE

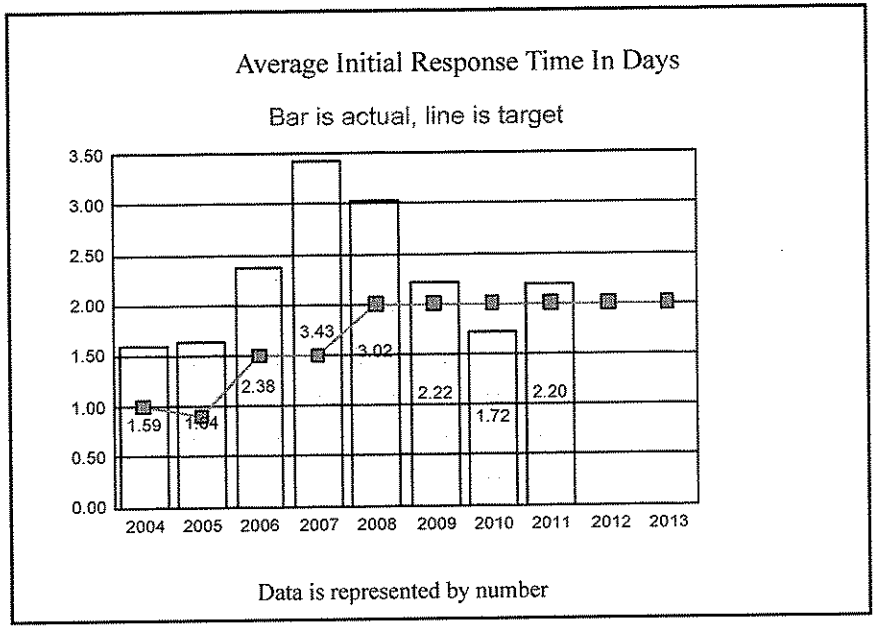
The biggest challenge to our Agency continues to be the need to increase the number of citizen volunteers assigned to licensed long term care facilities across the state. These volunteers are supervised on a 1 to about 25-30 ratio by paid agency program staff called Deputy State Long-Term Care Ombudsmen. 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 Administration on Aging.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2011 (October 2010-September 2011), collected from case and activity reports prepared by the State Ombudsman, Deputy Ombudsmen and volunteers. 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 throughout the year, and at the end of the year all data is further validated and checked for consistency in the development of this report and a similar report for the Federal Administration on Aging. In addition, the introduction of electronic case and activity reporting in mid 2010 has significantly improved both the timliness and accuracy of the Agency data. Approximately two-thirds of our current volunteers now report electronically. The Agency also has a volunteer IT committee, chaired by a member of 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 ombudsman staff and volunteers.	
Owner	Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533.	



1. OUR STRATEGY

A timely first step on a case is the fundamental step toward the agency goal to identify, investigate and resolve complaints made by or on behalf of residents of licensed long-term care facilities in Oregon.

2. ABOUT THE TARGETS

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 in getting an issue resolved. Recognizing the importance to the residents, our Agency strives to respond and resolve problems quickly, reflected in a lower response time.

3. HOW WE ARE DOING

The 2.2 days average response time is slower than the 2010 data, and still exceeds the target of 2.00 days. The average initial response time for the Certified Ombudsman volunteers, who handled 83% of the cases was 1.8 days. The average initial response time of field staff (Deputy State Long-Term Care Ombudsmen) which handled 17% of the cases was 4.7 days.

4. HOW WE COMPARE

This data is not available.

5. FACTORS AFFECTING RESULTS

In 2010 the Agency saw a huge increase in the recruitment and training of new volunteers. The increase in volunteers and their need for initial supervision combined with staff changes, budget cuts and furloughs, increased the staff response time. We believe we have stabilized staff and hope to see even faster response times for the next reporting period.

6. WHAT NEEDS TO BE DONE

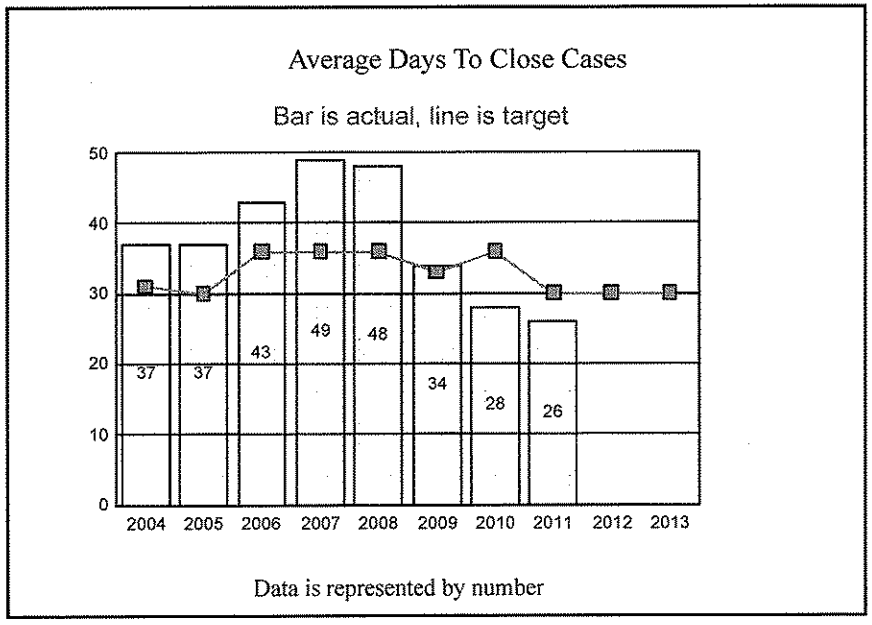
The highest priority of the Agency is recruitment, training and retention of volunteers across the state to extend the reach of the Agency into all levels of care, and to maximize the general fund dollars used to their greatest extent. The Agency is restricted by the numbers of paid staff who work with volunteers to operationalize the mission.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2011 (October 2010-September 2011), collected from case and activity reports prepared by the State Ombudsman,

Deputy Ombudsmen and volunteers. 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 throughout the year, and at the end of the year all data is further validated and checked for consistency in the development of this report and a similar report for the Federal Administration on Aging.

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 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 ombudsman staff and volunteers.	
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 better 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

Once again, the Agency was able to reduce case closure time year over year. 2011 decreased by another 2 days. The average of 26.2 days is below the target of 30 days!

4. HOW WE COMPARE

This data is not available.

5. FACTORS AFFECTING RESULTS

The Certified Ombudsman volunteers met the target averaging 26.2 days to close a case. This is a two day decrease over FFY 2010. Field staff (Deputy State Long-Term Care Ombudsmen) also met the target reducing their time by 5 days, taking an average of 26.4 days to close cases. Cases are identified, opened, resolved, and closed by Certified Ombudsman volunteers and Deputy State Long-Term Care Ombudsmen. In practice, the more complicated cases are handled by field staff (Deputy State Long-Term Care Ombudsmen).

6. WHAT NEEDS TO BE DONE

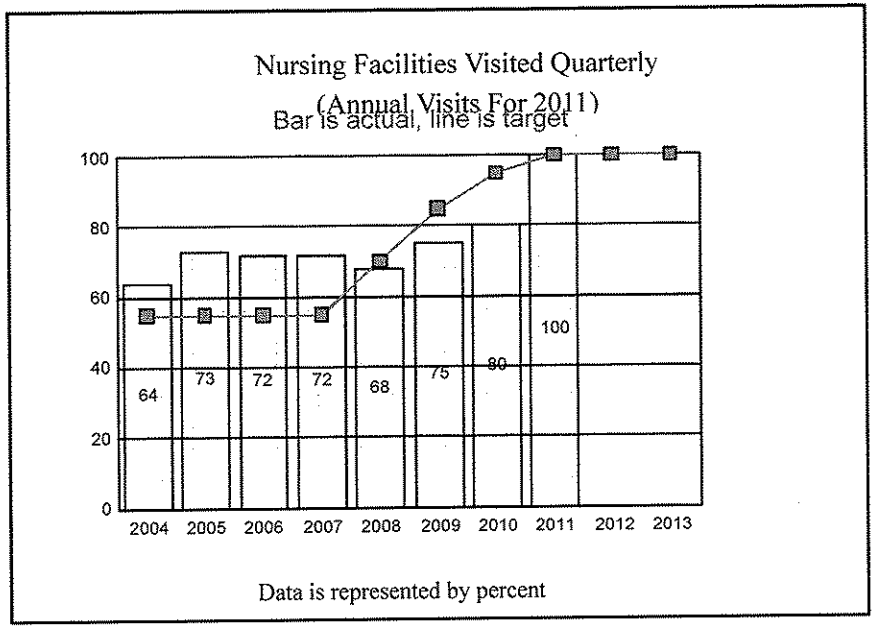
With the current and anticipated reduction in DHS staff working with abuse investigation and licensing, it is unlikely that the closure rate improvements can be sustained for next year's report.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2011 (October 2010-September 2011), collected from case and activity reports prepared by the State Ombudsman,

Deputy Ombudsmen and volunteers. 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 throughout the year, and at the end of the year all data is further validated and checked for consistency in the development of this report and a similar report for the Federal Administration on Aging.

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 staff and volunteers.	
Owner	Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533.	



1. OUR STRATEGY

Regular facility visitation by volunteers and field staff (Deputy State Long-Term Care Ombudsmen) is the primary method of 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 facility buildings in Oregon. We also are receiving 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 visits annually, the greater the number of residents having access to ombudsman services. The targets are set based on the number of volunteers and staff available. 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 nursing facilities FFY 2011, which is a significant achievement!

4. HOW WE COMPARE

This information is not available on an annual basis.

5. FACTORS AFFECTING RESULTS

Visitation is limited by the number of program volunteer 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

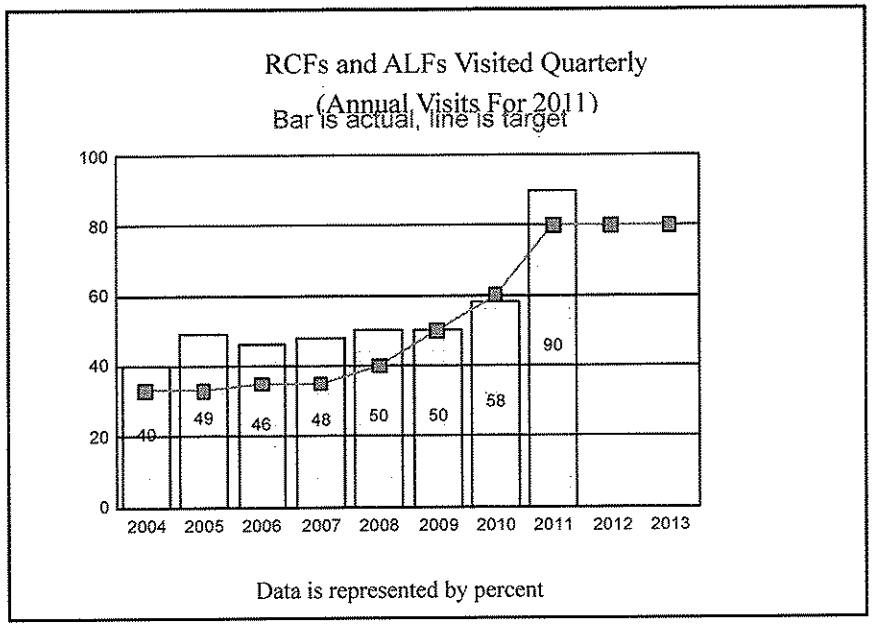
Increased visibility, transparency, public relations efforts, and the dedicated efforts of a full time Volunteer Recruiter are increasing volunteer numbers in all areas.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2011 (October 2010-September 2011), collected from case and activity reports prepared by the State Ombudsman, Deputy Ombudsmen and volunteers. Effective October 1, 2010 the agency goal for this measure changed from quarterly visits to annual visits. 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 throughout the year, and at the end of the year all data is further validated and checked for consistency in the development of this report and a similar report for the Federal Administration on Aging.

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 staff and volunteers.	
Owner	Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533.	



1. OUR STRATEGY

Regular facility visitation by volunteers and field staff (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. The targets are set based on the number of volunteers and staff available. 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 90% of Oregon's licensed assisted living and residential care facilities at least once during FFY 2011. The Agency visitation schedule corrolates directly with the number of volunteers and staff. This result surpassed the goal of 80% annually.

4. HOW WE COMPARE

This information is not available.

5. FACTORS AFFECTING RESULTS

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

6. WHAT NEEDS TO BE DONE

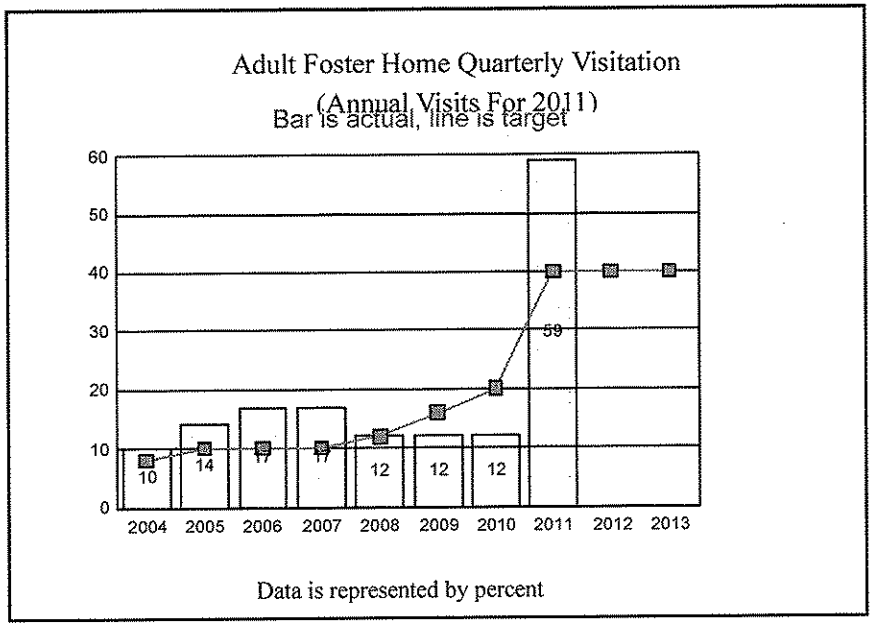
Because visits are limited by actual number of volunteers and staff, the Agency will continue to recruit, train and supervise as many volunteers as possible!

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2011 (October 2010-September 2011), collected from case and activity reports prepared by the State Ombudsman, Deputy Ombudsmen and volunteers. Effective October 1, 2010 the agency goal for this measure changed from quarterly visits to annual visits. 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 throughout the year, and at the end of the year all data is further validated and checked for

consistency in the development of this report and a similar report for the Federal Administration on Aging.

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 staff and volunteers.	
Owner	Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533.	



1. OUR STRATEGY

Regular facility visitation by volunteers and field staff (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 volunteer ombudsman services. The targets are set based on the number of volunteers and staff available. 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 59% of Oregon's adult foster homes at least once this period. This surpassed the target of 40% by 47.5% for this measure!

4. HOW WE COMPARE

National data collected by the Administration on Aging combines all community-based care facilities together, including adult foster care homes. The most recent national data available is for 2008, when the percentage visited quarterly for all programs was 46%, and Oregon's was 20%.

5. FACTORS AFFECTING RESULTS

Visitation is limited by the number of field staff (Deputy State Long-Term Care Ombudsmen), volunteers and the large number of adult foster homes (approximately 1,700 statewide).

6. WHAT NEEDS TO BE DONE

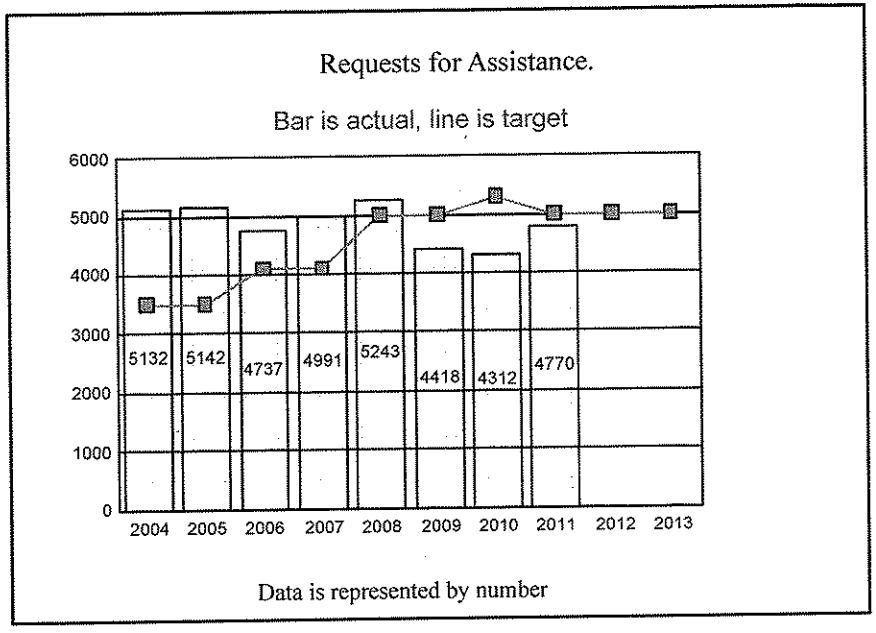
By adjusting the frequency of foster home visits, we expanded our coverage to AFH facilities significantly across the state. We plan to continue this approach and plan that increased numbers of volunteers will positively impact our presence in licensd adult foster homes.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2011 (October 2010-September 2011), collected from case and activity reports prepared by the State Ombudsman, Deputy Ombudsmen and volunteers. Effective October 1, 2010 the agency goal for this measure changed from quarterly visits to annual visits. 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 throughout the year, and at the end of the year all data is further validated and checked for consistency in the development of this report and a similar report for the Federal Administration on Aging.

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 ombudsman staff and volunteers.	
Owner	Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533.	



1. OUR STRATEGY

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

direct phone contact information.

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 2011, there were 4,770 requests for assistance, slightly higher than the previous year, but less than the target of 5,000.

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 2010-2011, program representatives made 12,643 visits. The Agency places online requests, 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.

6. WHAT NEEDS TO BE DONE

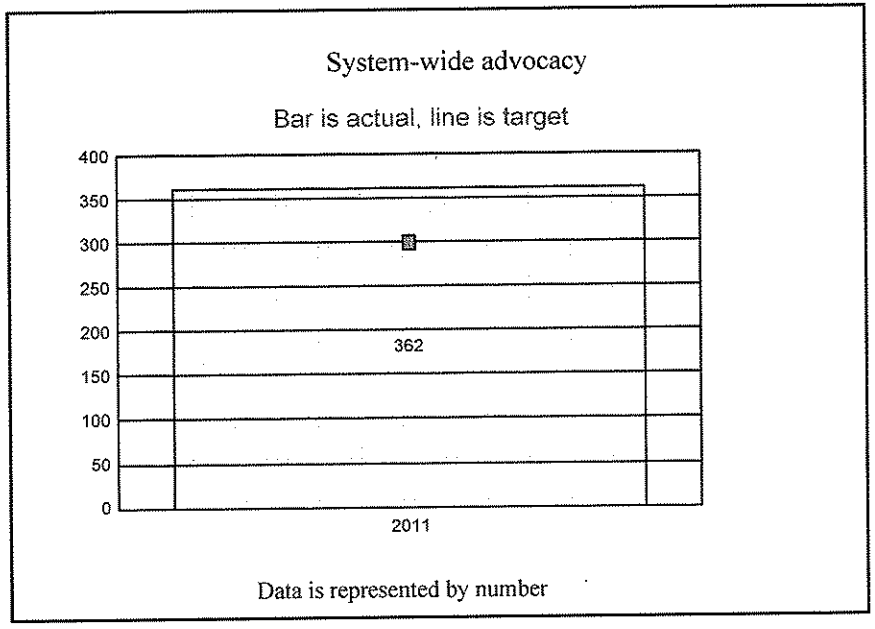
The Agency will continue its efforts to increase public awareness and transparency of the program with the goal of increasing volunteers statewide, as well as raising awareness of the 800 number for consumers and residents to call. The Agency redesigned the 800 number poster, and other collateral materials which support the program.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2011 (October 2010-September 2011), collected from case and activity reports prepared by the State Ombudsman, Deputy Ombudsmen and volunteers. 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 throughout the year, and at the end of the year all data is further validated and checked for consistency in the development of this report and a similar report for the Federal Administration on Aging.

KPM #8	Participation in system-wide advocacy meetings at the local, regional, state and national levels.
Goal	.
Oregon Context	.
Data Source	.
Owner	Office of the Long-Term Care Ombudsman, Mary Jaeger, Director, 503-378-6533.



1. OUR STRATEGY

Historically the State Long Term Care Ombudsman conducted 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 have broader reach across Oregon and result in positive system changes.

2. ABOUT THE TARGETS

Analysis of activity and time reports demonstrated that staff and volunteers were already participating in select system advocacy events and efforts. By seeking out and participating in specific advocacy venues, staff and volunteers expanded the Agency's input into systemic long-term care issues.

3. HOW WE ARE DOING

Analysis of activity reports and timesheets shows increased participation in a wide variety of system advocacy by staff and volunteeers. By emphasizing participation at all levels and and across all state regions, we hope to impact statewide long term care issues. We exceeded our initial target of 300 by 62, which is 20% over the goal.

4. HOW WE COMPARE

This data is not available.

5. FACTORS AFFECTING RESULTS

Volunteers and staff have a primary responsibility to resident complaints, concerns and follow-up before participation in system advocacy efforts. Due to tight agency staffing and potentcial cuts in DHS, agencies results could be limited. However, we are hopeful that statewide efforts will indeed have an impact.

6. WHAT NEEDS TO BE DONE

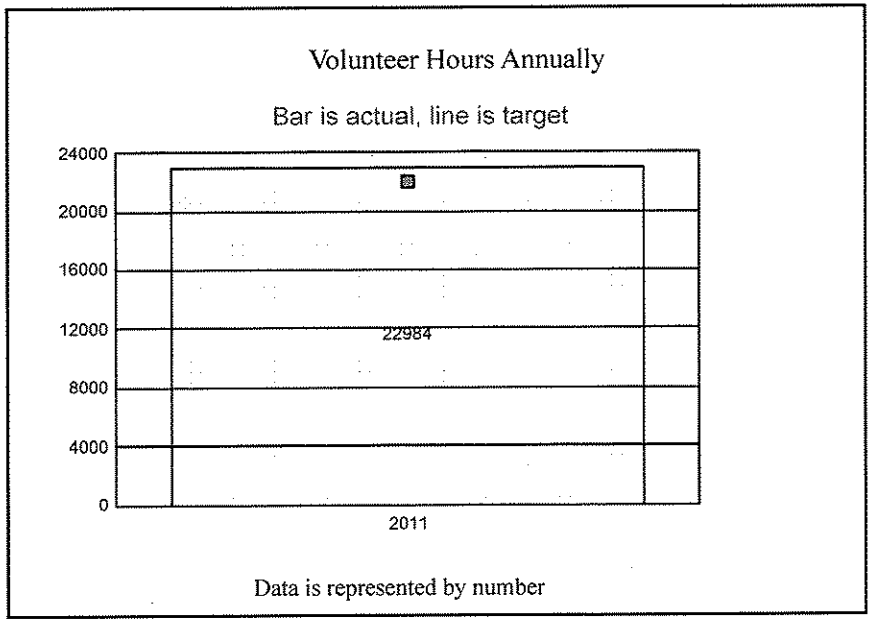
Management anticipates that increased participation by volunteers and staff at the local, regional and state levels will have a positive impact on quality of care in Oregon's licensed long-term care facilities.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2011 (October 2010-September 2011), collected from case and activity reports prepared by the State Ombudsman, Deputy Ombudsmen and volunteers; 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 throughout the year, and at the end of the year all data is further validated and checked for consistency in the development of this

report and a similar report for the Federal Administration on Aging.

KPM #9	Total number of certified ombudsmen volunteer hours annually.
Goal	.
Oregon Context	.
Data Source	.
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 25 to 30 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.

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 ratio of volunteers is 25-30 per paid deputy ombudsman and we hope to continue to increase our coverge through minor staff increases.

3. HOW WE ARE DOING

The Agency has dramatically increased the number of volunteers over the past two years. The agency will now focus on volunteer hours, rather than the actual number of volunteers, to better track growth and consistency over time. We exceeded the target by 984, which is 4% over the goal.

4. HOW WE COMPARE

The 2010 AOA National Ombudsman report shows that Oregon, with 200 volunteers and 8 program staff, had 25 volunteers per paid program staff member. Based on this report, Oregon ranks 49th highest in volunteers per staff. Only Arkansas and North Carolina reported more volunteers per staff. The national average in 2010 was 7.55 volunteers per staff. For this same 2010 reporting period, Oregon had 5,409 licensed long term care beds per paid LTCO staff. The US average was 2,527 beds per staff. In this measure, Oregon ranked 50th out of 51 state and territory programs. Only Minnesota had more beds per staff.

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 supervision, 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

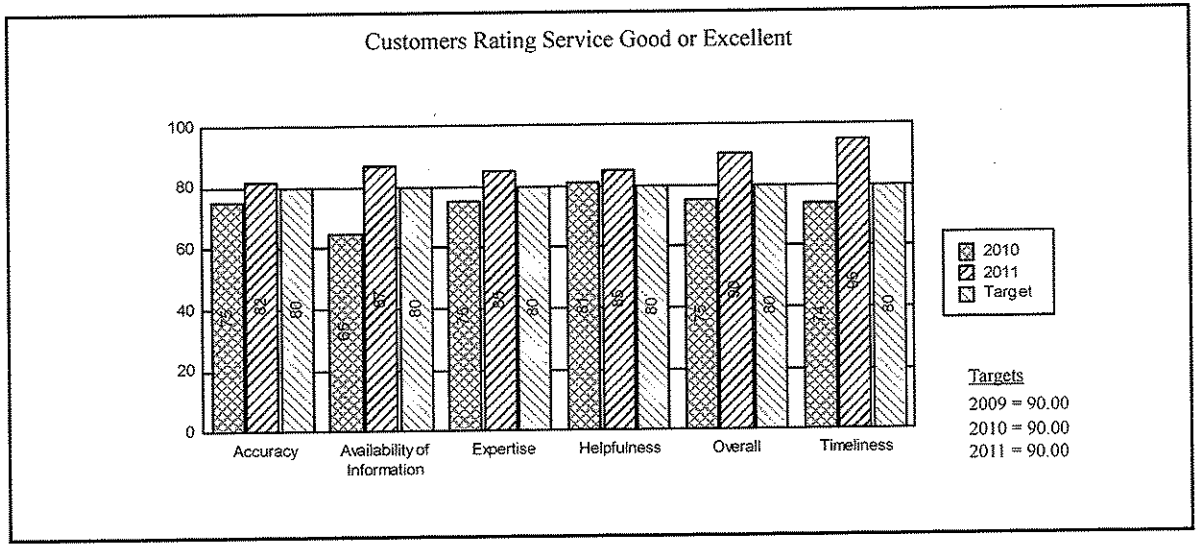
Agency will continue to recruit, train and supervise as many volunteers as possible, despite limited agency budget. We will also continue vigilance around volunteer retention.

7. ABOUT THE DATA

The data is from Federal Fiscal Year 2011 (October 2010-September 2011), collected from case and activity reports prepared by the State Ombudsman, Deputy Ombudsmen and volunteers. 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 throughout the year, and at the end of the year all data is further validated and checked for consistency in the development of this report and a similar report for the Federal Administration on Aging. In addition, the Agency has recruited and is utilizing, the professional skills of I.T. and Finance executives who contribute numerous hours of free consultation to the program.

LONG-TERM CARE OMBUDSMAN, Office of	II. KEY MEASURE ANALYSIS

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 to facility residents is important to improving the Agency's performance and achieving its 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

90% of customers rated the Agency's overall customer service as good or excellent. The highest rated category (95%) was "timeliness", followed by "availability" (87%), "knowledge of the responder" (85%) and "helpfulnes" (85%). The lowest rating was for "accuracy" (82%). This is most likely due to the 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 the law.

4. HOW WE COMPARE

The rating for the Agency's overall customer service was 90%. 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. From a sample of 318, only 40 were reached and completed the survey. We created a system to allow for more immediate feedback, including follow up letters, postcards, and a feedback section added to our website that the public can access easily. We are continuing to explore other methods, survey tools and ideas from other state ombudsman programs who use feedback measures.

LONG-TERM CARE OMBUDSMAN, Office of	III. USING PERFORMANCE DATA

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 volunteer ombudsmen. 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 Long-Term Care Advisory Committee which monitors the program for the Governor and the Legislature, produces an annual report regarding Agency issues and items related to long term care policy; the Agency communicates performance results pursuant to the budgetary process and upon request. The Agency also shares a progress report with Agency highlights with Legislators and community partners. * **Stakeholders:** The monthly meetings of the Long-Term Care Advisory Committee served as the source of public and stakeholder involvement and input. * **Citizens:** Because the meetings of the Long Term Care Advisory Committee 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 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 quarterly with staff and are shared with the Long Term Care 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 Long-Term Care 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 Long-Term Care Advisory Committee. Program and agency information is routinely distributed to agency staff, volunteers, legislators and stakeholders in order to reinforce Agency progress and transparency. The Agency also distributes a report titled "Ombudsman Outcomes" to the legislature and public which highlights volunteer activities. * **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 2012

Finalize Date: 1/11/2012

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.	99	97	Green	2011	The Agency is mandated to impact positive changes for long-term care residents in licensed facilities, which are reflected by higher percentages. The measure includes the complaints that ombudsmen worked to resolve, excluding those referred to another Agency for action. 99% of the non-referred complaints that required action were partially or fully resolved exceeding the target of 97%. Ombudsman volunteers, who handled 80% of the non-referred complaints, resolved or partially resolved 99% of complaints. Staff resolved or partially resolved 99% of complaints. To continue to achieve this level of success, however, requires increases and stability in the number of the Deputy Ombudsman who work with 25-30 volunteers each--and are at maximum capacity.

Agency Management Report

KPMs For Reporting Year 2012

Finalize Date: 1/11/2012

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
2 - Average initial response time to non-referred cases.	2.20	2.00	Yellow	2011	A timely first action on a case is important to those who contact the Agency for assistance. The 2.20 days average response time is slightly worse than 2010 data, and misses the target of 2.00 days by a few hours. The average initial response time for the Certified Ombudsman volunteers, who handled 83% of the cases was 1.8 days. The average initial response time of field staff (Deputy State Long-Term Care Ombudsmen) which handled 17% of the cases was 4.7 days, While cases continue to become more complex, the Agency volunteers actually handled more complaints than 2010 by 10%. Continued recruitment, combined with consistent GF funding will continue to improve this result.
3 - Average time to close non-referred cases.	26	30	Green	2011	The timely completion or closure of cases is important to individuals who contact the 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. The Agency continues to improve case closure time with stable staff and an increase in certified volunteers. The average of 26 days is well below the target of 30. Looking back to 2009 when the target was 36 days, the Agency has made outstanding progress on this measure of cases handled directly by the Agency!

Agency Management Report

KPMs For Reporting Year 2012

Finalize Date: 1/11/2012

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
4 - Percentage of nursing facilities visited at least once annually.	100	100	Green	2011	Effective October 1, 2010 the Agency goal for this measure changed from quarterly visits to annual visits. Facility visitation is the primary means by which long-term care residents access ombudsman services. Although visitation is limited by the number of program staff and volunteers, the agency achieved a high visitation rate for nursing facilities throughout the state. Volunteers and staff visited 100% of Oregon's licensed nursing facilities in FFY 2011. Increased visibility, transparency and public relations efforts have attracted increased awareness of the program and attract more volunteers to assist in facility statewide visitation.
5 - Percentage of assisted living and residential care facilities visited at least once annually.	90	80	Green	2011	Effective October 1, 2010 the Agency goal for this measure changed from quarterly visits to annual visits. The Agency's performance has almost met or exceeded this target every year, demonstrating a commitment to reach the residents of Oregon's community-based long-term care facilities across the state. Program representatives visited 90% of Oregon's assisted living and residential care facilities in FFY 2011. The Agency exceeded the target by 10%.

Agency Management Report

KPMs For Reporting Year 2012

Finalize Date: 1/11/2012

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
6 - Percentage of adult foster care homes visited at least once annually.	59	40	Green	2011	Effective October 1, 2010 the Agency goal for this measure changed from quarterly visits to annual visits. The sheer number of licensed adult foster homes (over 1,700) poses considerable challenges to the Agency's ability to make visits. Program representatives visited 59% of Oregon's adult foster homes. Visitation in adult foster homes has increased significantly since 2001, when the program visited only 1.5%. In FFY 2011, volunteers agreed to conduct additional visits to adult foster homes that had previously never been visited. Visits are limited by number of volunteers and staff needed to supervise them. The Agency's goal continues to be recruitment and support of volunteers across the state. This will in turn increase Agency visits to adult foster homes in Oregon.
7 - Number of requests for assistance from consumers, the public, facility staff and agencies.	4,770	5,000	Green	2011	There were 4,770 requests, representing 95% toward the goal of 5000. The Agency created new and additional collateral materials to increase resident and public awareness of the 800# and services available from our Agency.
8 - Participation in system-wide advocacy meetings at the local, regional, state and national levels.	362	300	Green	2011	Effective October 1, 2010 the Agency began tracking system advocacy efforts of staff and volunteers as defined in our Oregon Statute. We hope this will impact quality of care for long term care residents. We exceeded our initial target of 300 events by 62, which is 20% over the goal.
9 - Total number of certified ombudsmen volunteer hours annually.	22,984	22,000	Green	2011	Effective October 1, 2010 the Agency began tracking the actual number of volunteers' hours, rather than the number of volunteers. We believe that measuring volunteer hours will give a more accurate picture of recruitment, retention and results. We exceeded the target by 984, which is 4% over the goal.

Agency Management Report

KPMs For Reporting Year 2012

Finalize Date: 1/11/2012

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
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.	90	80	Green	2011	Providing customers with a timely and high quality level of service is a priority for the Agency. 90% of customers rated the Agency's overall customer service as good or excellent. The highest rated category (95%) was "timeliness", followed by "availability of information" (87%), "expertise" and "helpfulness" at 85% each. The lowest rating was for "accuracy" at 82%. The Agency relies on assistance from several other overburdened state agencies and community agencies like Legal Aid, for resolution of many issues, including resident complaints.

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.

Legislatively Approved 2011-2013 Key Performance Measures

Agency: LONG-TERM CARE OMBUDSMAN, Office of

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.

Legislatively Proposed KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2012	Target 2013
1 - Percentage of non-referred complaints where action is needed that are partially or fully resolved.		Approved KPM	99.00	97.00	97.00
2 - Average initial response time to non-referred cases.		Approved KPM	2.20	2.00	2.00
3 - Average time to close non-referred cases.		Approved KPM	26.00	30.00	30.00
4 - Percentage of nursing facilities visited at least once annually.		Approved KPM	100.00	100.00	100.00
5 - Percentage of assisted living and residential care facilities visited at least once annually.		Approved KPM	90.00	80.00	80.00
6 - Percentage of adult foster care homes visited at least once annually.		Approved KPM	59.00	40.00	40.00
7 - Number of requests for assistance from consumers, the public, facility staff and agencies.		Approved KPM	4,770.00	5,000.00	5,000.00
8 - Participation in system-wide advocacy meetings at the local, regional, state and national levels.		Approved KPM	362.00		
9 - Total number of certified ombudsmen volunteer hours annually.		Approved KPM	22,984.00		
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.	Accuracy	Approved KPM	82.00	80.00	80.00
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.	Availability of Information	Approved KPM	87.00	80.00	80.00
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.	Expertise	Approved KPM	85.00	80.00	80.00

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Legislatively Proposed KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2012	Target 2013
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.	Helpfulness	Approved KPM	85.00	80.00	80.00
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.	Overall	Approved KPM	90.00	80.00	80.00
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.	Timeliness	Approved KPM	95.00	80.00	80.00

LFO Recommendation:

Sub-Committee Action: