LONG-TERM CARE OMBUDSMAN, Office of

Annual Performance Progress Report (APPR) for Fiscal Year (2009-2010)

Proposed KPM's for Biennium (2011-2013)

Original Submission Date: 2010

Finalize Date: 12/16/2010

2009-2010 KPM #	2009-2010 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 once a quarter.
5	Percentage of assisted living and residential care facilities visited once a quarter.
6	Percentage of adult foster care homes visited once a quarter.
7	Number of request for assistance from consumers, the public, facility staff and agencies.
8	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 2011-2013
NEW	**Title:** Visit 100% of nursing facilities at least once annually. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
NEW	**Title:** Visit 80% of residential care and assisted living facilities at least once annually. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
NEW	**Title:** Visit 40% of adult foster care homes at least once annually. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
NEW	**Title:** Ombudsmen will respond to calls for assistance or complaints within 2 days of intake. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
NEW	**Title:** Ombudsmen will close all cases not referred to other agencies within 30 days. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
NEW	**Title:** Ombudsmen will resolve 85% of cases to the satisfaction of the resident or complainant. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
NEW	**Title:** Ombudsmen will respond to at least 5000 requests about Oregon's LTC system annually. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.

New Delete	Proposed Key Performance Measures (KPM's) for Biennium 2011-2013
NEW	**Title:** Agency will train 75 new volunteers annually. **Rationale:** To track the number of volunteers recruited, screened and trained, which is a core part of our core mission.
NEW	**Title:** Agency will participate in at least 250 system-wide advocacy meetings at the local, regional, state and national levels per year. **Rationale:** To track the number and type of system advocacy meetings, which is part of our core mission.
DELETE	**Title:** Percentage of non-referred complaints where action is needed that are partially or fully resolved. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
DELETE	**Title:** Average initial response time to non-referred cases. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
DELETE	**Title:** Average time to close non-referred cases. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
DELETE	**Title:** Percentage of nursing facilities visited once a quarter. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
DELETE	**Title:** Percentage of assisted living and residential care facilities visited once a quarter. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.
DELETE	**Title:** Percentage of adult foster care homes visited once a quarter. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.

New Delete	Proposed Key Performance Measures (KPM's) for Biennium 2011-2013
DELETE	**Title:** Number of request for assistance from consumers, the public, facility staff and agencies. **Rationale:** To use agency resources more efficiently and to more thoroughly explain our core mission to the public, other agencies and legislators.

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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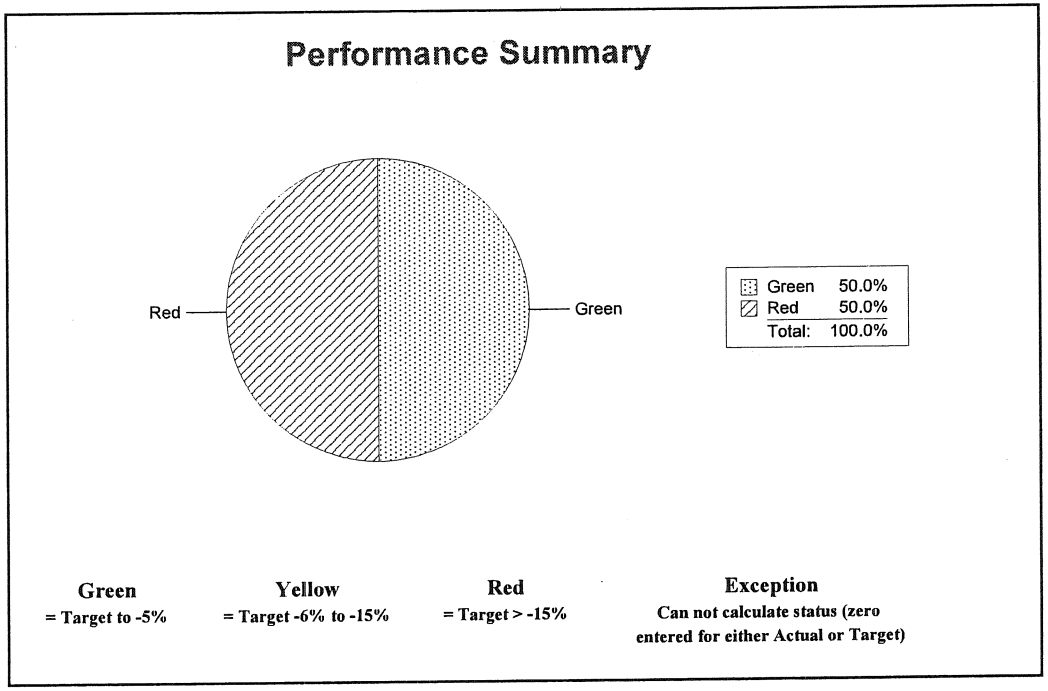


1. SCOPE OF REPORT

The Agency's performance measures reflect essential services, including identifying, investigating and resolving complaints made by or on behalf of Oregon's 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 care and ensure residents' rights as citizens. The only essential service not reflected in the current 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 nursing homes, assisted living, residential and adult foster homes. In addition to the thousands of complaints it investigates and resolves, the Agency referred 500 complaints to (APS) Adult Protective Services, Licensing, and other agencies for further investigation and action.

3. PERFORMANCE SUMMARY

The Agency received 4312 requests for assistance from consumers, the public, facility staff and agencies. This number is less than the 5,300 target. Facility visitation, essential as the primary means by which facility residents access the services of the Agency, is measured by quarterly visits. Program representatives visited 58% of residential care and assisted living facilities quarterly (target 50%), fell short of the 20% target by visiting 12% of adult foster homes and also did not achieve the nursing facility quarterly target of 85% with 80% of the nursing homes visited quarterly. The Agency partially or fully resolved 97% of complaints where action was needed, exceeding the 95% target. The overall customer satisfaction rating was 75% missing the 90% target. The average initial response took 1.72 days and the target was 2 days. This is an improvement over the previous year, when it took 2.22 days for the initial response. In 2010, it took the Agency an average of 28 days to close non-referred cases. This is a 6-day improvement over 2009!

4. CHALLENGES

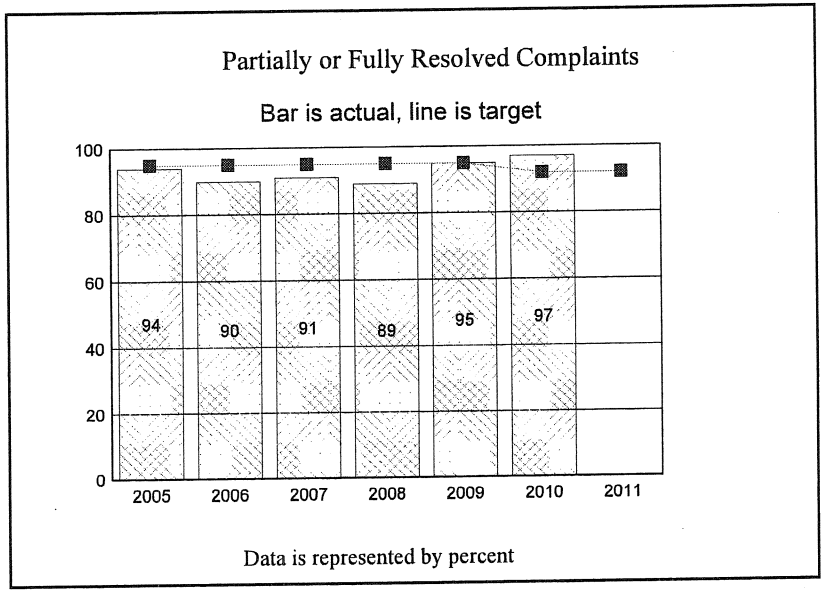
(a.) The Agency needs more than 175 new volunteers to serve unmet needs of 43,000 Oregon long term care residents. This number will also cover attrition of existing sworn volunteers. If we are successful in this recruitment, we will also need at least 3 FTE volunteer supervisors to guide the efforts of the new recruits.(b.) The agency will lose its Medicaid-related funding on June 30, 2011 which requires increasing General Funds to replace the revenue.(c.) With anticipated cuts to DHS in 2011-2013, we anticipate the need for <u>more</u> ombudsmen presence in all levels of care across the state.

5. RESOURCES AND EFFICIENCY

Agency expenditures for FFY 2010 were $584,774 General Fund and $932,128 Other Funds. The volunteer workforce consists of Certified Ombudsmen, Recruitment and Screening Committee members, IT and Finance volunteers, and Administrative volunteers. Volunteers made 11,343 visits to all levels of long-term care facilities during the year. They reported 21,648 hours of activity. The value of this time donated to the State of Oregon is valued at $451,360 (based on $20.85 per hour, a rate established by the Independent Sector.)

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

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, excluding those that are referred to another Agency for action, those that are withdrawn by the complainant and those that are not verified.

3. HOW WE ARE DOING

In 2010, 97% of the non-referred complaints that required action were partially or fully resolved, exceeding the target of 92%.

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 2008. It is not possible to separate out the non-referred complaints in the federal data, however, when looking at all complaints, Oregon's percentage of complaints that were not resolved is 6%, equal to the 6% national figure.

5. FACTORS AFFECTING RESULTS

The resolution rates of staff and volunteers is very similar. The Certified Ombudsman volunteers, who handled 82% of the non-referred complaints, resolved or partially resolved 97% of complaints, an increase from 96% in 2009. By contrast, staff resolved or partially resolved 96% of complaints up from 94% in 2009.

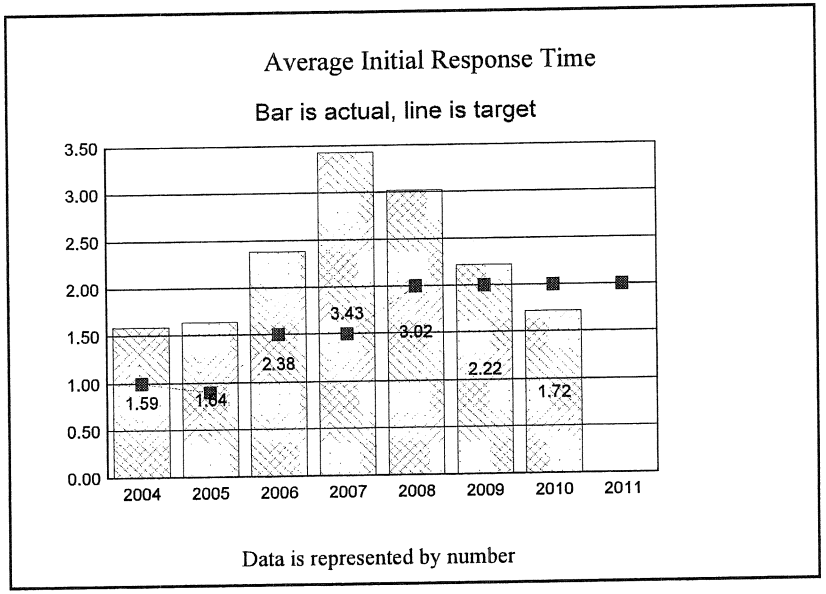
6. WHAT NEEDS TO BE DONE

The biggest challenge to our Agency continues to be the need to increase the number of citizen volunteers assigned to 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 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 2008 report on Long Term Care.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2010 (October 2009-September 2010), collected from case reports prepared by the Certified Ombudsman volunteers and field staff (Deputy State Long-Term Care Ombudsmen). The reports of the Certified Ombudsmen 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 #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 long-term care facilities.

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 1.72 days average response time is an improvement over the 2009 data, and exceeds the target of 2.00 days. The average initial response time for the Certified Ombudsman volunteers, who handled 73% of the cases was 1.29 days. The average initial response time of field staff (Deputy State Long-Term Care Ombudsmen) which handled 27% of the cases was 2.92 days.

4. HOW WE COMPARE

This data is not available.

5. FACTORS AFFECTING RESULTS

The improvement in the field staff's (Deputy State Long-Term Care Ombudsmen) response time results from increased education, experience on the job, and efficiency created by office teamwork.

6. WHAT NEEDS TO BE DONE

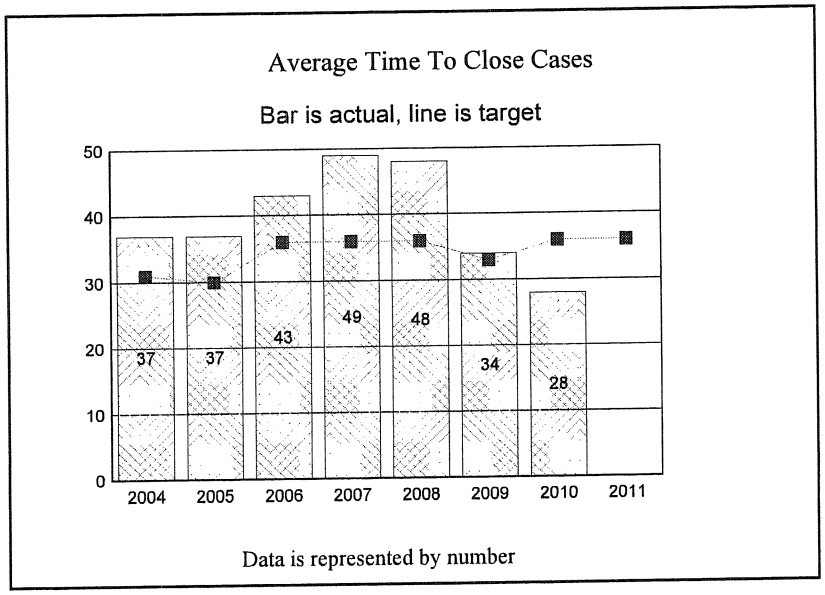
The highest priority of the Agency now is recruitment, training and retention of volunteers across the state to extend the reach of the Agency into all levels of care, and to maximize the general fund dollars used to their greatest extent. Secondly, the Agency Budget for 2011-2013 needs to be approved and funded despite the shift in funding sources.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2010 (October 2009-September 2010), collected from case reports prepared by the Certified Ombudsman volunteers and field staff (Deputy State Long-Term Care Ombudsmen). The reports of the Certified Ombudsmen 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 by 6 days. The average of 28 days is well below the target of 36 days!

4. HOW WE COMPARE

This data is not available.

5. FACTORS AFFECTING RESULTS

The Certified Ombudsman volunteers met the target averaging 27 days to close a case. This is a five day decrease over FFY 2009. Field staff (Deputy State Long-Term Care Ombudsmen) also met the target reducing their time by 7 days, taking an average of 32 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

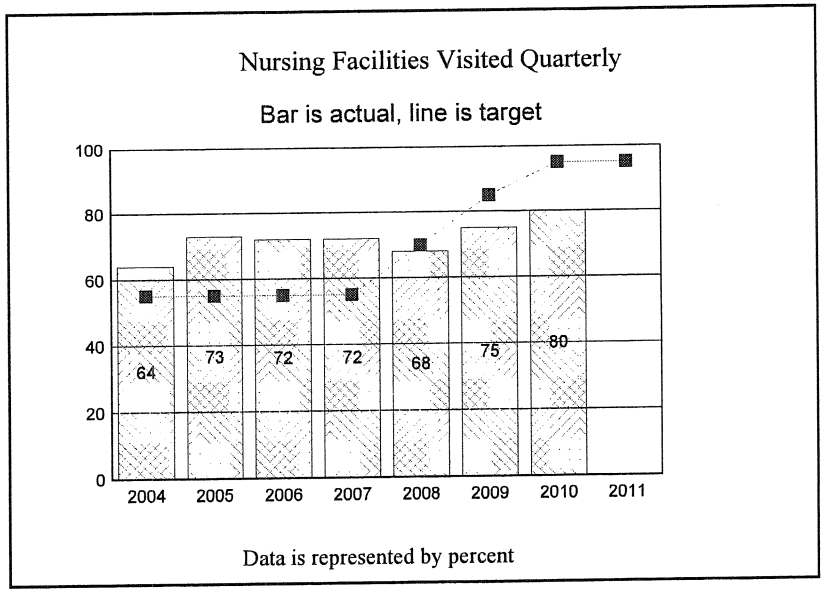
With the current and anticipated reduction in DHS staff working with abuse investigation and licensing, it is unlikely that the closure rate improvements can be sustained for next year's report.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2010 (October 2009-September 2008), collected from case reports prepared by the Certified Ombudsman Volunteers and field staff (Deputy State Long-Term Care Ombudsmen). The reports of the Certified Ombudsmen 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 once a quarter.	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 long-term care facility buildings in Oregon.

2. ABOUT THE TARGETS

The higher the percentage of facilities receiving visits at least quarterly, 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 80% of Oregon's nursing facilities at least quarterly in FFY 2010, missing the 95% target, but a significant improvement over the 2008 result.

4. HOW WE COMPARE

The most recent national data published by the Administration on Aging for all long-term care ombudsman programs is for Federal Fiscal Year 2008, when 80% of nursing facilities received quarterly visits. In 2008, 68% of Oregon facilities had visits.

5. FACTORS AFFECTING RESULTS

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

6. WHAT NEEDS TO BE DONE

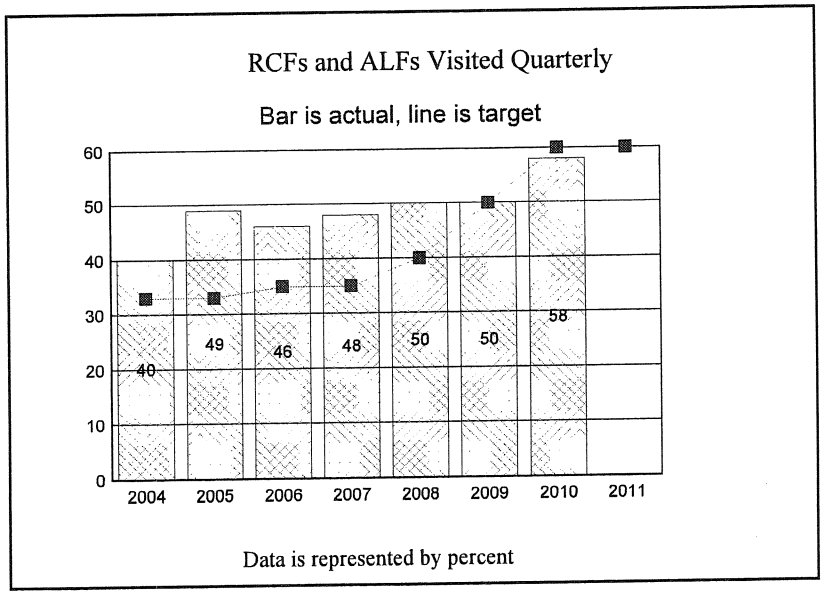
Increased visibility, transparency, public relations efforts, and the dedicated efforts of a full time Volunteer Recruiter are increasing volunteer numbers in all areas.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2010 (October 2009-September 2008), collected from case reports prepared by the Certified Ombudsman Volunteers and field staff (Deputy State Long-Term Care Ombudsmen). The reports of the Certified Ombudsmen 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 once a quarter.	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 quarterly, 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 58% of Oregon's assisted living and residential care facilities at least quarterly in FFY 2010, up from 50% in 2009! The Agency visitation has trended upward since 2000, and this target was only 2% below the goal established.

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

Visits are limited by the number of staff and volunteers. The agency strives to visit as many settings as possible given the limited resources we have.

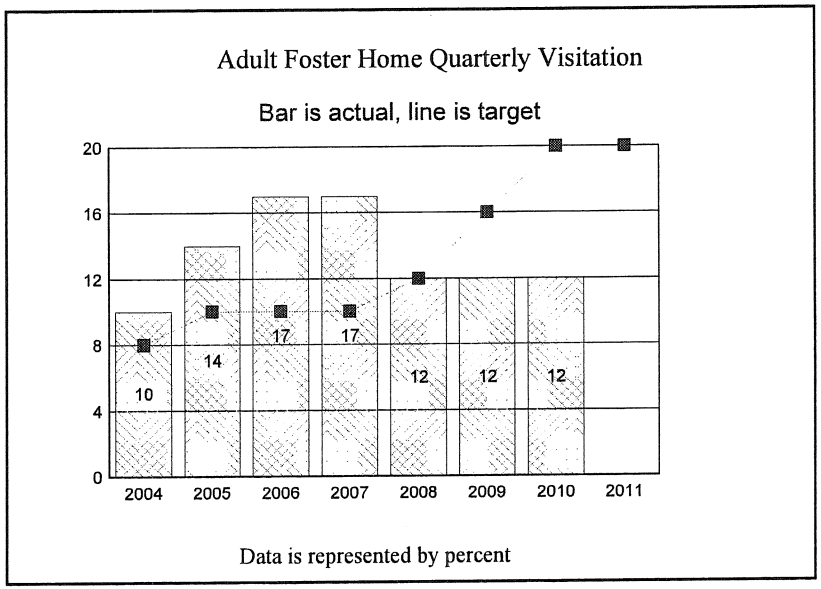
6. WHAT NEEDS TO BE DONE

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

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2010 (October 2009-September 2008), collected from case reports prepared by the Certified Ombudsman Volunteers and field staff (Deputy State Long-Term Care Ombudsmen). The reports of the Certified Ombudsmen 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 once a quarter.	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 quarterly, 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 12% of Oregon's adult foster homes at least quarterly, the same as the previous year. This missed the target by 8% for this measure. However visitation in adult foster homes has increased significantly since 2001, when the program visited only 1.5%.

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 sheer number of adult foster homes (approximately 1,700 statewide).

6. WHAT NEEDS TO BE DONE

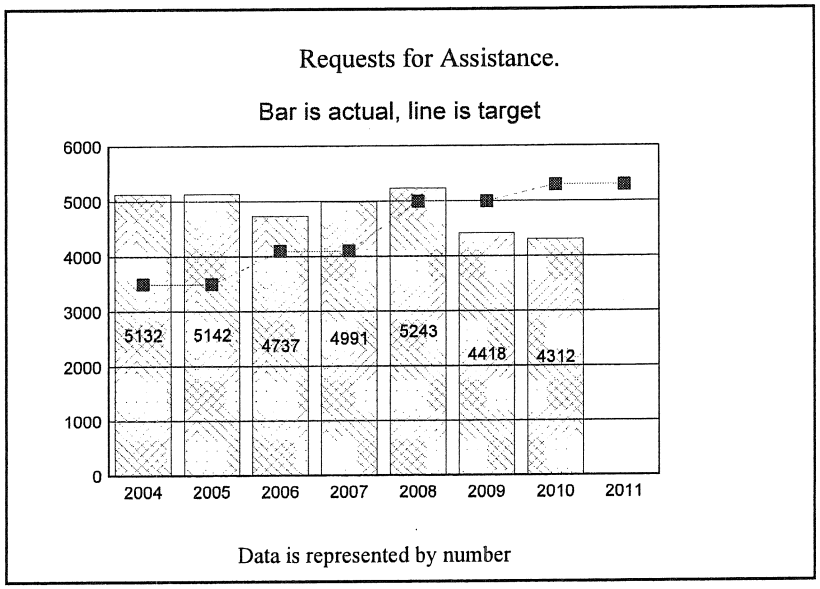
By adjusting the frequency of foster home visits, we plan to expand our coverage to AFH facilities significantly across the state. Increased number of volunteers will also impact our presence in AFH.

7. ABOUT THE DATA

This data is from Federal Fiscal Year 2010 (October 2009-September 2008), collected from case reports prepared by the Certified Ombudsman Volunteers and field staff (Deputy State Long-Term Care Ombudsmen). The reports of the Certified Ombudsmen 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 request 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 is essential for ensuring that Oregonians know to call the Agency when they have questions about long-term care or concerns about residents.

2. ABOUT THE TARGETS

An increase in contacts indicates that individuals are aware of the program and are accessing its services.

3. HOW WE ARE DOING

In FFY 2010, there were 4,312 requests for assistance, slightly lower than the previous year, and less than the target of 5300.

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 2009-2010, program representatives made 11,343 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.

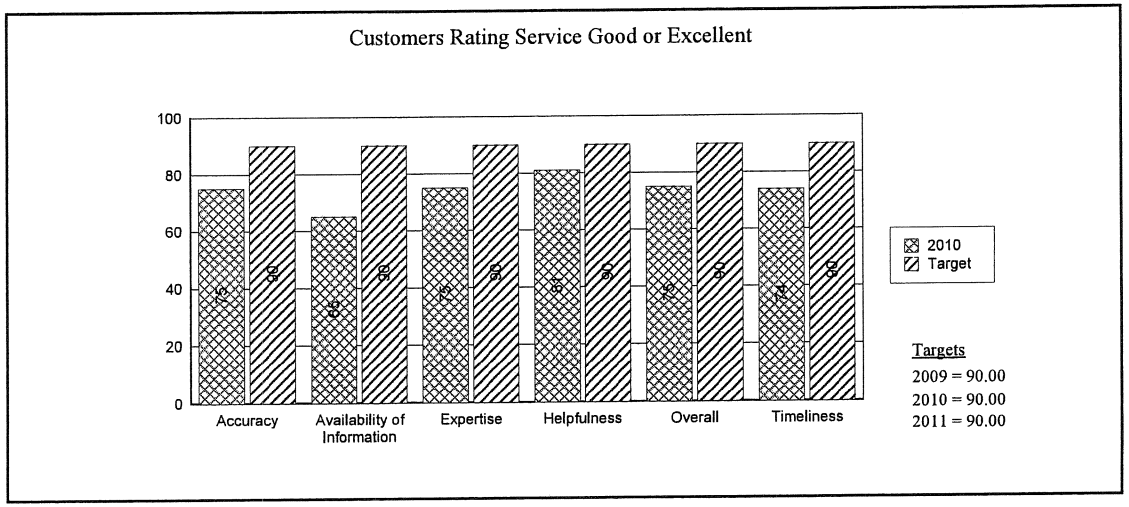
6. WHAT NEEDS TO BE DONE

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 2010 (October 2009-September 2008), collected from case reports prepared by the Certified Ombudsman Volunteers and field staff (Deputy State Long-Term Care Ombudsmen). The reports of the Certified Ombudsmen 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	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 actual feedback from extremely vulnerable seniors who do not have the capacity or access for responding.

3. HOW WE ARE DOING

75% of customers rated the Agency's overall customer service as good or excellent. The highest rated category (81%) was the "willingness to help", followed by "accuracy" (75%), "knowledge of the responder" (75%) and "timeliness" (74%). The lowest rating was for "availability of information" at 65%. This is most likely due to the complex nature of records and regulations around long term care and resident medical information.

4. HOW WE COMPARE

The rating for the Agency's overall customer service was 75%. Two other Agencies' results were available to the Agency: the Public Utility Commission's customer satisfaction rating was 66%, and the Department of Consumer and Business Services was 88%.

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 the complete universe 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.

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 658, only 65 were reached and completed the survey. We are creating a system to allow for more immediate feedback, including follow up letters, postcards, and a feedback section we are adding 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:** 503-378-6396

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

1. INCLUSIVITY	* **Staff :** Agency staff also supervise volunteer ombudsmen. Their collective insights and input are being used to continue the Agency mission and recruit/retain more volunteers across the state. * **Elected Officials:** The appointed Long-Term Care Advisory Committee which monitors the program for the Governor and the Legislature, produces a biennial report regarding Agency performance; the Agency communicates performance results pursuant to the budgetary process and upon request. The Agency will now share a brief progress report with Agency highlights with Legislators. * **Stakeholders:** The monthly meetings of the Long-Term Care Advisory Committee served as the source of stakeholder involvement. * **Citizens:** Because the meetings of the Long Term Care Advisory Committee are considered public meetings, citizens are invited to attend and Public Meeting protocols are followed. Monthly meeting notices and minutes are now posted on our website, per Public Meetings protocols.
2 MANAGING FOR RESULTS	Data on key performance measures are reviewed quarterly. This information will be 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 now will be shared with the Long Term Care Advisory Committee on a quarterly basis.
4 COMMUNICATING RESULTS	* **Staff :** The performance measures are now 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. * **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 2010

Finalize Date: 12/16/2010

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:	50.00%	0.00%	50.00%	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	92	Green	2010	The Agency strives to bring about positive changes for long-term care residents, which are reflected by higher percentages. The measure includes the complaints that ombudsmen worked to resolve, excluding those referred to another Agency for action or withdrawn by the complainant and those that were not verified. 97% of the non-referred complaints that required action were partially or fully resolved exceeding the target of 92%. Ombudsman volunteers, who handled 82% of the non-referred complaints, resolved or partially resolved 97% of complaints. Staff resolved or partially resolved 96% of complaints, up from 94% in 2009. The recent increase from four to six full-time field staff (Deputy State Long-Term Care Ombudsmen) continues to expedite complaint resolution along with an increase in the number of volunteer ombudsman.

Agency Management Report

KPMs For Reporting Year 2010

Finalize Date: 12/16/2010

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
2 - Average initial response time to non-referred cases.	1.72	2.00	Green	2010	A timely first action on a case is important to those that contact the agency for assistance. The 1.72 days average response time is an improvement over the 2009 data, and exceeds the target of 2.00 days. The average initial response time for the Certified Ombudsman volunteers, who handled 73% of the cases was 1.29 days. The average initial response time of field staff (Deputy State Long-Term Care Ombudsmen) which handled 27% of the cases was 2.92 days, The highest priority of the Agency now is recruitment, training and retention of volunteers across the state to further improve the response time of the Agency. This continues to maximize the Agency's general fund dollars to their greatest extent.
3 - Average time to close non-referred cases.	28	36	Green	2010	The timely completion or closure of cases is important to individuals who contact the Agency for assistance. Responding and resolving problems quickly can have a significant impact on the quality of life and quality of care to long-term care facility residents. The Agency improved case closure time by six days. The average of 28 days is well below the target of 36 days! With 2 FTE staff positions added in 2009, the length of time it takes for field staff (Deputy State Long-Term Care Ombudsmen) to complete cases has declined. In addition, the Volunteer Recruiter continues to increase the exposure of the program and thereby increasing the number of applicants who become ombudsman volunteers.

Agency Management Report

KPMs For Reporting Year 2010

Finalize Date: 12/16/2010

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
4 - Percentage of nursing facilities visited once a quarter.	80	95	Red	2010	Facility visitation is the primary means by which long-term care facility residents access ombudsman services. Although visitation is limited by the number of program staff and volunteers, the agency maintains a high visitation rate of nursing facilities throughout the state. Program representatives visited 80% of Oregon's nursing facilities at least quarterly in FFY 2010. Increased visibility, transparency and public relations efforts are occurring in order to increase awareness of the program and numbers of volunteers statewide to assist in facility visitation.
5 - Percentage of assisted living and residential care facilities visited once a quarter.	58	60	Green	2010	The Agency's performance has almost met or exceeded this target every year, demonstrating a commitment to reach the residents of Oregon's long-term care facilities. Program representatives visited 58% of Oregon's assisted living and residential care facilities at least quarterly in FFY 2010.
6 - Percentage of adult foster care homes visited once a quarter.	12	20	Red	2010	The sheer number of adult foster homes (approximately 1,700) coupled with the tremendous growth in the number of residential care and assisted living facilities poses considerable challenges to the Agency's ability to visit these homes. Program representatives visited 12% of Oregon's adult foster homes at least quarterly. Visitation in adult foster homes has increased significantly since 2001, when the program visited only 1.5%. 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.

Agency Management Report

KPMs For Reporting Year 2010

Finalize Date: 12/16/2010

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
7 - Number of request for assistance from consumers, the public, facility staff and agencies.	4,312	5,300	Red	2010	There were 4,312 represents 81% toward the goal of 5300. The Agency has created a new poster and other collateral materials to increase public awareness of the 800# and access to help through our office.
8 - 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	90	Red	2010	Providing customers with a quality service that is delivered in a timely manner is a priority for the agency. 75% of customers rated the Agency's overall customer service as good or excellent. The highest rated category (81%) was the "willingness to help", followed by the "accuracy" (75%), "knowledge of the responder" (75%) and "timeliness" at 74%. The lowest rating was for "availability of information" at 65%. This is most likely due to the complex nature of records and regulations around long term care and access. In addition, the Agency relies on assistance from several other overburdened state agencies 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.