

*The Colorado Long-Term Care Ombudsman Program*

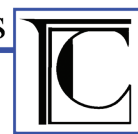
# Annual Report 2005



**October 1, 2004 – September 30, 2005**



The Legal Center for People  
with Disabilities and Older People



*Colorado's Protection & Advocacy System*

Revised Edition

*This report is dedicated to the residents of  
long-term care facilities in Colorado.*

*We honor your lifetime of experience and the  
wonderful memories you share with us.*

The Colorado Long-Term Care Ombudsman Program is funded by federal and state funds through the Division of Aging and Adult Services, Colorado Department of Human Services. In addition to government funding it receives for the program, The Legal Center deeply appreciates contributions from the following private foundations:

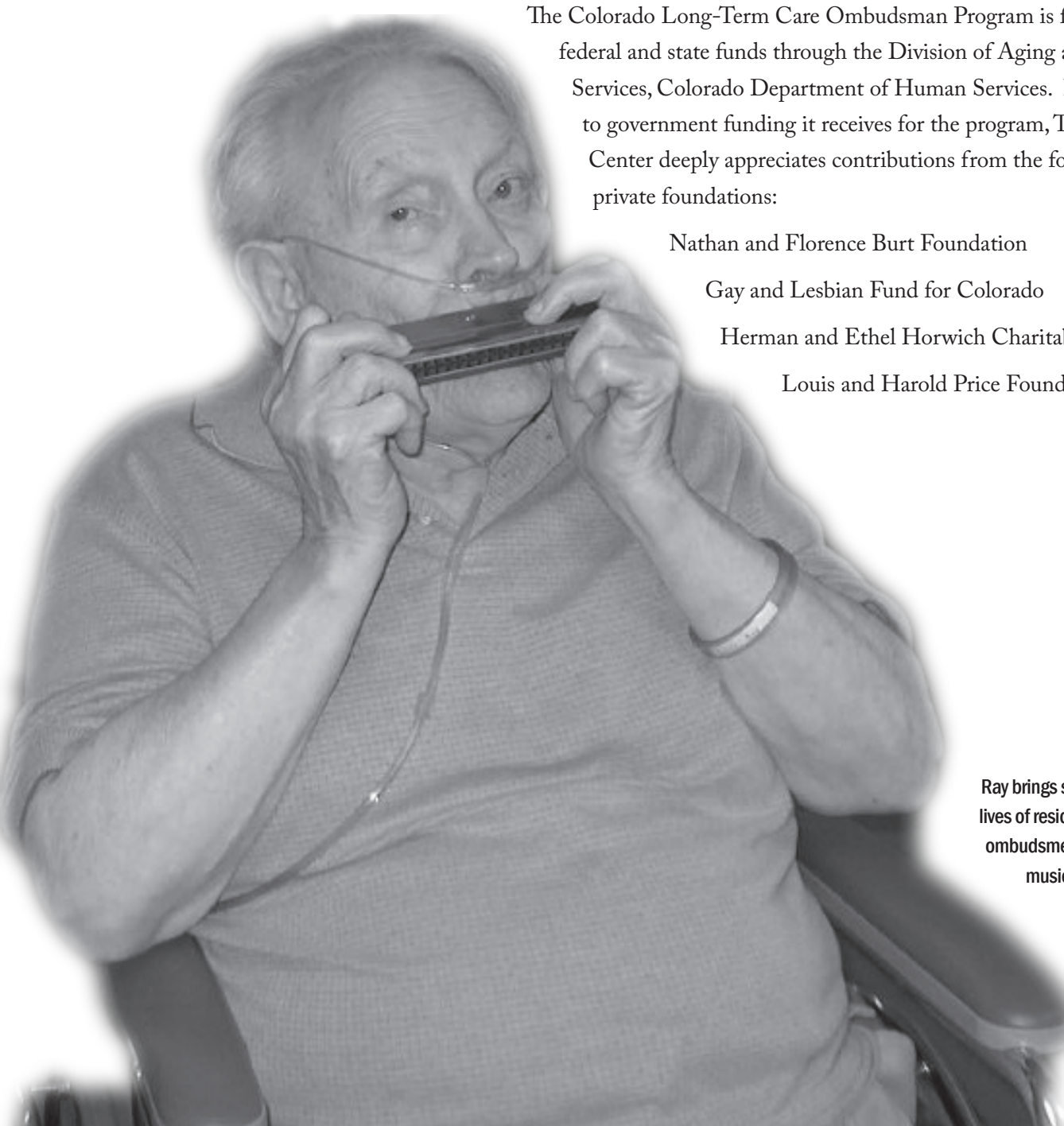
Nathan and Florence Burt Foundation

Gay and Lesbian Fund for Colorado

Herman and Ethel Horwich Charitable Trust

Louis and Harold Price Foundation

Ray brings sunshine into the lives of residents, staff and ombudsmen with his wonderful music.



# Table of Contents

Letter from Jeanette Hensley, Director of the Division of Aging and Adult Services.....	2
Letter from Patricia Tunnell, Colorado Long-Term Care Ombudsman.....	3
Colorado Long-Term Care Ombudsman Program Overview.....	4
Celebrating 30 Years of the Colorado Long-Term Care Ombudsman Program.....	6
Major Issues in Long-Term Care.....	10
Long-Term Care Resident Complaints.....	12
Colorado Long-Term Care Ombudsman Program Accomplishments.....	14
Stories from the Field.....	16
Area Agencies on Aging Long-Term Care Ombudsman Programs: Regional Reports.....	18
Colorado (Statewide) LTC Ombudsman Program Summary of Complaints.....	34
Who makes complaints?.....	35
What types of complaints are made?.....	36
Ombudsman action on complaints.....	37



The mission of the Colorado Long-Term Care Ombudsman Program is to:

- Prevent the abuse, neglect, and exploitation of residents in Colorado’s long-term care facilities;
- Protect the health, safety, welfare, and rights of those residents;
- Preserve residents’ independence, dignity, autonomy and freedom of choice;
- Promote an environment where residents, family members, staff and others can work creatively and cooperatively; and
- Produce significant improvements in the delivery of long-term care to all citizens of the state.

Colorado’s long-term care ombudsmen are committed to working closely and effectively with policy makers, regulatory agents, providers, consumers, and others interested in improving the quality of life and care for all residents living in long-term care facilities.

# STATE OF COLORADO



**Colorado Department of Human Services**  
*people who help people*

**OFFICE OF ADULT, DISABILITY, AND REHABILITATION SERVICES**  
John P. Daurio, Manager

**DIVISION OF AGING AND ADULT SERVICES**  
1575 Sherman, 10th Floor  
Denver, Colorado 80203  
Phone 303-866-2800  
TDD 303-866-2850  
FAX 303-866-2696  
[www.cdhs.state.co.us](http://www.cdhs.state.co.us)

Jeanette Hensley  
Director



Bill Owens  
Governor

Marva Livingston Hammons  
Executive Director

February 15, 2006

Dear Citizens:

The Colorado Long-Term Care (LTC) Ombudsman Program was created to provide advocacy for individuals who live in long-term care facilities and may feel powerless and vulnerable. Ombudsmen seek to empower long-term care residents, and the staff who serve them, in such a dynamic way as to create a loving, home-like environment.

The goal of the Colorado Long-Term Care Ombudsman Program is to continuously strive to improve the quality of life for long-term care residents. A LTC Ombudsman's primary duty is to protect the rights of individuals by investigating and resolving problems and grievances, providing information, and working with institutions, organizations, and agencies to increase their responsiveness to the people they serve. An Ombudsman acts on behalf of residents of long-term care facilities, who need or request assistance in advocating their own cause. These facilities include licensed nursing homes and assisted living residences. Residents of these facilities sometimes have little or no contact with the outside world and some may feel they lack control over their own lives.

During calendar year 2005, local ombudsmen visited each of Colorado's 237 licensed nursing homes about two times per month and the 518 assisted living residences about every other month, on average. Ombudsmen serve as resident advocates and assist in the resolution of issues and concerns while visiting residents. The work of the Ombudsman is sometimes difficult and complex, especially when the issues are regarding resident rights, such as autonomy, privacy, and choice or where there are concerns about the care or treatment provided in long-term care facilities. Additionally, the local ombudsmen regularly attend resident and family councils, to be easily available to residents and family.

As you will see from this report, the LTC Ombudsman is a valuable asset in our communities, as they work to ensure the health, safety and welfare of our long-term care residents. The LTC Ombudsman is diligently working with facilities on culture change. The LTC Ombudsman provides supportive care, personal touch to residents and facilities and look toward the future when all facilities are consumer friendly. Colorado's sixteen (16) regional Area Agencies on Aging, administer the local LTC Ombudsman program with the assistance of paid staff and numerous volunteers. There is a continuing need for local volunteer ombudsmen. I encourage everyone to consider volunteering with his or her local Area Agency on Aging LTC Ombudsman Program.

Readers are encouraged to offer comments and ideas regarding this report to the Colorado Long-Term Care Ombudsman at 303-722-0300 or to myself at 303-866-2800.

Sincerely,

Jeanette Hensley, Director  
Division of Aging and Adult Services

Our Mission is to Design and Deliver Quality Human Services that Improve the Safety and Independence of the People of Colorado

# The Legal Center for People with Disabilities and Older People



*Colorado's Protection & Advocacy System*

February 2006

Dear Citizens of Colorado:

The Legal Center is pleased to present the 2005 Annual Report of the Colorado Long-Term Care Ombudsman Program to the Department of Human Services, the General Assembly, the Governor, and the citizens of Colorado.

In celebration of the program's 30-year anniversary, this report is dedicated to the residents who live in long-term care facilities. Residents are members of their communities and have so much to share with us if only we take the time to listen.

Eighteen years ago, I had the good fortune to become an ombudsman. My mentor and friend Virginia (Ginny) Fraser hired me as her assistant to protect the civil and human rights of elderly persons in long-term care facilities. From the very beginning, I enjoyed talking with regional ombudsmen, residents, families, and staff about the challenges they faced. Often they had the answers in their minds and hearts; they simply needed someone to listen, validate their concerns, and help them come up with solutions.

Many seniors feel that they relinquish their rights and their ability to enjoy life when they enter a long-term care facility. A large part of the ombudsman's role is to help residents and their families understand that there are federal and state laws to support their rights. I believe one of the strengths of the Colorado Long-Term Care Ombudsman Program is working with other stakeholders to improve the quality of care and the quality of life for the residents we serve. Culture change has opened the door to person centered care, and with the support of the Centers for Medicaid and Medicare, the Colorado Foundation for Medical Care, the Colorado Department of Public Health and Environment, long-term care providers, and other partners we will change the institutional culture into an atmosphere more like home.

While this report documents numerous complaints about care in nursing homes and assisted living residences, if we collected stories and examples of outstanding service and dedication to residents, I have no doubt they would far exceed the complaints. Sadly, many long-term care staff are poorly paid, at times under trained, and the work is physically and emotionally demanding. Approximately 18 percent of the complaints we receive come from staff themselves, worried that the facilities they work in are not always providing the level of care the residents require and deserve.

Ombudsmen throughout Colorado, together with so many of the staff in long-term care facilities, are doing all they can to improve service delivery at the local level. However, the problems they face every day are endemic to a system in need of change. As you read this report, please consider the legislative, regulatory, and funding changes that could make a big difference in the lives of Colorado's seniors.

Sincerely,

Patricia L. Tunnell  
Colorado Long-Term Care Ombudsman



Patricia Tunnell, Colorado  
Long-Term Care Ombudsman

## Colorado Long-Term Care Ombudsman Program Overview

The Colorado Long-Term Care Ombudsman Program is a network of advocates for residents in nursing homes and assisted living residences. The program is headed by an independent Colorado Long-Term Care Ombudsman and provides a voice for the many older people who need someone to advocate on their behalf. Ombudsmen help many older people find their own voices and empower them to advocate for themselves.

The Colorado Long-Term Care Ombudsman Program has 165 dedicated ombudsmen. Included in this number are 16 full-time and 37 part-time paid ombudsmen and 112 volunteer ombudsmen. Sixty-eight percent of Colorado's ombudsmen are volunteers. Ombudsmen are not regulators or inspectors, although they are fully trained in state regulations governing long-term care facilities. They cooperate with Colorado Department of Public Health and Environment inspectors to survey and remedy facility deficiencies. Additionally, ombudsmen work closely with other health, long-term care, and aging organizations in the community.

There are approximately 34,000 Colorado residents in long-term care facilities, a number that has remained fairly constant over the past three years. In addition to being chronically ill, many long-term care residents suffer from dementia, poverty, or lack of family support. In order to meet their most basic needs for food, personal care, companionship, and safety these fragile citizens must rely on the staff of:

- 237 licensed nursing homes containing 20,789 beds; and

- 518 assisted living residences containing 13,847 beds.

The quality of life for many of these individuals is less than ideal and the residents are often without family or friends. They rely on others, including the local ombudsmen, to protect their dignity, advocate for their rights, and provide some measure of companionship.

The state's rules and regulations require that each nursing home be visited by an ombudsman at least once a month and each assisted living residence at least once a quarter. In practice, many ombudsmen go far beyond these minimum requirements, often using their own personal time to meet with residents and their families. It should be noted that without their many dedicated volunteers, some of the Area Agencies on Aging would have difficulty in meeting the minimum requirements for visits. Ideally, the Colorado Long-Term Care Ombudsman Program would like to use volunteers to provide additional visits and a more personal level of advocacy, rather than covering a staffing shortfall.

Although complaint resolution is a key part of the program, ombudsmen strive to create a culture of care where complaints are few and their time is devoted to making positive changes in the lives of residents.

The proactive work of Colorado's ombudsmen includes:

- Educating the public about long-term care before they need to make a decision for themselves or a family member;

- Meeting with families to help them choose the long-term care facility that best meets their needs;
- Working with residents, families, and staff of long-term care facilities to inform them about resident rights; and
- Advocating for improvements in legislation, policies, and funding affecting long-term care.

Local ombudsmen are trained to help residents form and operate resident councils where they can meet as a group to discuss concerns about the facility and address the concerns with management on behalf of all residents. Although the ombudsmen will address individual complaints on a resident's behalf, addressing issues as a group empowers residents. In 2005, local ombudsmen attended 1,592 resident council meetings.

Family councils provide an opportunity for family members to meet and discuss issues regarding the facility and its level of care without the presence of facility staff. In 2005, local ombudsmen attended 210 family council meetings. Ombudsmen continue to encourage all facilities to offer family councils but only a relative few do so.

The Colorado Long-Term Care Ombudsman Program was created in 1975 to address the need for independent, knowledgeable, and caring advocates for residents of nursing homes and assisted living residences statewide. Authorized under the federal Older Americans Act and Colorado statutes, the Colorado Long-Term Care Ombudsman Program is administered by The Legal Center for People with Disabilities and Older People (herein called The Legal Center) under a contractual agreement with the Colorado Department of Human Services, Divi-

sion of Aging and Adult Services. The Colorado Long-Term Care Ombudsman coordinates and provides technical support and training to a network of sixteen local programs that operate under the supervision of the regional Area Agencies on Aging. (See pages 18-33 for a detailed report from each region.)



**Visits by pets bring joy to both residents and ombudsmen.**



“When I became the Colorado Long-Term Care Ombudsman in 1980, there was a very limited role assigned to our office and minimal funding, and yet we had so much to do! At that time about 40 percent of residents were in restraints ‘for their own safety.’ Instead of providing a safe space for people with Alzheimer’s so they couldn’t wander off, they were simply strapped into their wheelchairs. There was no network of ombudsmen as we have now; in the beginning there was just me to worry about all these residents.

Despite the difficulties, Colorado was way ahead of the game. We were the first state to license assisted living facilities; we developed some innovative programs to promote best practices; we focused on bringing together all the different state agencies to work as a team; and we established a consumer group at the Colorado Department of Health to look at regulations and quality of care issues. There were no national materials available to us to train staff or to provide to consumers—we had to create our own. I’m proud to say that Colorado’s efforts were recognized in a report by the U.S. General Accounting Office.

Being Colorado’s Long-Term Care Ombudsman was a wonderful job because I got to work with individuals in nursing homes and at the same time I was working to change the systems on a state-wide and national level. I could really see the difference we were making in people’s lives.”

Ginny Fraser, Colorado Long-Term Care Ombudsman 1980 – 2000

## Celebrating 30 Years of the Colorado Long-Term Care Ombudsman Program

Colorado’s Long-Term Care Ombudsman Program has experienced significant changes during its 30 years of existence. The combined product of federal and state legislation, the program relies on a network of local agencies to implement its core mission of protecting the dignity, health, and welfare of residents in long-term care facilities. This report celebrates the positive changes the Colorado Long-Term Care Ombudsman Program has made in the lives of thousands of residents. The following timeline describes the evolution of the program. To provide personal perspective, comments are included in sidebars from several people who have made major contributions to the program’s growth and development.

### 1975

As stated in the Older Americans Act, the purpose of funding for state long-term care ombudsman programs was to “develop the capabilities of Area Agencies on Aging to promote, coordinate, monitor and assess nursing home ombudsman activities within their service areas.” Colorado applied for and received funding to create the Colorado Nursing Home Ombudsman Program. The Legal Aid Society of Metropolitan Denver and Colorado Rural Legal Services initially administered the program as a joint project.

### 1976

Arthur Flemming, Commissioner on Aging for the U. S. Department of Health, Education and Welfare, issued the first ombudsman program guidance, which said the program would be judged initially on the basis of the

number of community-based ombudsman programs launched and their effectiveness in resolving complaints. In explaining the goal, he stated:

*“Our nation has been conducting investigations, passing new laws and issuing new regulations relative to nursing homes at a rapid rate during the past few years. All of this activity will be of little avail, unless our communities are organized in such a manner that new laws and new regulations are utilized to deal with the individual complaints of older persons who are living in nursing homes. The individual in the nursing home is powerless. If the laws and regulations are not being applied to her or to him, they might just as well not have been passed or issued.”*

### 1977

The Administration on Aging funded the National Paralegal Institute to provide the first training program for state ombudsmen.

### 1978

The Ombudsman Program was incorporated into federal law through amendments to the Older Americans Act. All states were required to have an ombudsman program with a statewide reporting system. Ombudsman functions and responsibilities were specifically defined.

### 1979

Colorado’s State Office on Aging briefly took over the state’s ombudsman program. After legislative hearings, a footnote was added to the Long Bill suggesting the program be contracted to an independent nonprofit organization.



## 1980

Colorado Congress of Senior Organizations was awarded the contract to operate Colorado's statewide ombudsman program. Then, as now, the contract was with the Division of Aging and Adult Services, Colorado Department of Social Services (now Colorado Department of Human Services).

## 1981

The Older Americans Act was amended to provide ombudsman coverage for board and care homes, now termed assisted living residences, and the program name was changed from Nursing Home Ombudsman to Long-Term Care Ombudsman to reflect this change.

## 1987

The Nursing Home Reform Act created national minimum standards of care and rights for people living in certified nursing homes. The act recognized the unique and important role performed by ombudsmen and provided guidance and tools to help them serve resident interests. The new standards included:

- Emphasis on a resident's quality of life as well as the quality of care;
- A resident assessment process leading to an individualized care plan;
- The right to remain in the nursing home and return to it after a hospital stay or an overnight visit with family and friends;
- The right to choose a personal physician and to access medical records;
- The right to organize and participate in a resident or family council; and

- The right to be free of unnecessary and inappropriate physical and chemical restraints.

In addition, the federal legislation laid out a specific state and local structure that mandated each Area Agency on Aging to operate a local ombudsman program.

## 1988

The Legal Center for People with Disabilities and Older People (The Legal Center) was awarded the contract to administer and oversee the Colorado Long-Term Care Ombudsman Program and to provide training and support to the local ombudsman programs in the Area Agencies on Aging.

## 1990

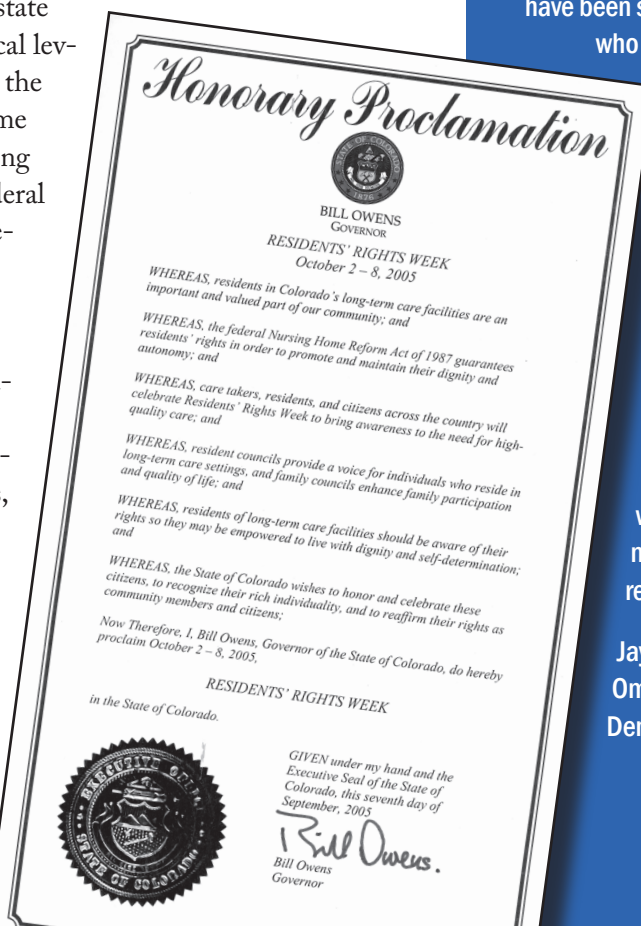
The Colorado Legislature, through the passage of the Colorado Long-Term Care Ombudsman Program (Section 26-11.5, C.R.S.), specifically defined the powers and duties of the program at the state and local levels, for the first time codifying the federal requirements, with some amendments and additions, into state law.

"It was July of 1987 and I was looking through the local paper for a part-time job. I saw the word Ombudsman and ignored it because I didn't know what an Ombudsman was. I re-read the ads and there it was again—*Ombudsman*—and for some reason I looked it up. The definition said advocate, mediator, problem solver, and I applied for the job.

The first complaint I handled was from a man named Floyd who was upset because he couldn't make private phone calls in the facility. We got that one resolved and several more over the years. One day he called and demanded that I come and see him. I didn't have the time to visit that day and tried to handle it over the phone but he angrily insisted. When I arrived, he told me how important it was to him that he could count on me and that knowing I was around made him feel safe. He died that night. There have been so many other residents who I have learned from and who have touched my life.

Interestingly the complaints have not changed over the years. They result when families think their loved ones are not getting the care they deserve, when staff feel overwhelmed and powerless to do their job, and when residents feel they are not treated with dignity and respect."

Jayla Sanchez Warren, Lead Ombudsman, Region 3A, Denver





"I've definitely seen a positive change over the years in the way residents view their ombudsman. When I was first involved with long-term care in my work with the Medicaid program, there were fewer ombudsmen and most residents knew nothing about the program. Those who did were often hesitant to complain in case it made their lives more difficult. Now residents and families are very comfortable with the ombudsmen's presence, they look forward to visits, and they are much more likely to get in touch if they have a concern.

I love the way ombudsmen are assisting with culture change. They are having a huge impact by encouraging facilities to do away with the white walls and sterile surroundings and create more of a neighborhood feel. The best example is probably the Pueblo Extended Care Center, but I've also been impressed with the changes at the Colorado State Veteran's Home at Fitzsimmons. It doesn't feel so much like an institution any more. They have rooms set up in quadrants rather than long corridors, there is an area where residents can prepare meals, and a space where families can get together in private.

As we look to the future, I'd still like to see more of a continuum of care. I'm looking forward to the day when people see nursing homes as a place where they will be well cared for and respected and supported in their choices. We are lucky that Colorado has so many dedicated ombudsmen working toward this goal."

Jeanette Hensley, Director of the Division of Aging and Adult Services

This same year, the "Residents' Rights Bingo" game was developed by Virginia Fraser and marketed nationally. The project was supported by a grant from the National Committee to Preserve Medicare and Social Security. Federal law requires that staff and residents be informed of their rights. The game provides an enjoyable way to educate and to meet that requirement.

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## 1992

*The Colorado Ombudsman Training Manual* was created by The Colorado Long-Term Care Ombudsman Program at The Legal Center. The manual utilized a comprehensive curriculum developed by The National Center for State Long-Term Care Ombudsman Resources, a program of the U.S. Administration on Aging. The curriculum provided information about the critical aspects of federal, state, and local laws and regulations addressing long-term care facilities. It included content on skills development in investigative techniques, communications and mediation, as well as concise overviews of the biological, psychological, and sociological aspects of aging, including a layman's description of common illnesses, conditions and medications.

Later that year, *The Colorado Ombudsman Program Policies and Procedures Manual* was published to ensure that federal and state laws and regulations governing the Colorado Long-Term Care Ombudsman Program were properly implemented.

These two essential tools (as revised) are the blueprint which guides Colorado's Long-Term Care Ombudsman Program. They are used at every level of program delivery and represent a vital mix of laws, regulations, and practical advice to guide ombudsmen in their mission to protect the welfare and dignity of residents.

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## 1993

A video, "Making it Home," was developed by The Legal Center and funded in part by Public Service Company of Colorado. The video, along with a study guide, was designed to increase provider and staff understanding of residents' rights in assisted living residences.

The National Citizens Coalition for Nursing Home Reform received an Administration on Aging grant to operate the national Long-Term Care Ombudsman Resource Center in conjunction with the National Association of State Units on Aging.

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## 1995

The National Ombudsman Reporting System (NORS) was launched by the Administration on Aging.

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## 1998

Freddy Lipton, resident council president at Cripple Creek Rehabilitation and Wellness Center, began a grass roots initiative to increase the personal needs allowance for residents from \$34 to \$50 per month. The Colorado Long-Term Care Ombudsman received petitions with thousands of signatures of nursing home residents from all over the state. The ombudsman program and nursing homes organized "town meetings" with interested legislators to hear from residents about what it is like to live on \$34 a month. House Bill 98-1166, sponsored by Representative Lois Tochtrop, was passed that spring guaranteeing residents a \$50 per month allowance.

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## 2000

The Older Americans Act was reauthorized by Congress with continued financial and regulatory support for the ombudsman programs. Two addi-

tions to the act included a provision to ensure that local ombudsmen have no conflict of interest that might interfere with duties to residents, and a directive that state programs coordinate their services with local law enforcement agencies.

### 2002

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The OmbudsManager data collection system was implemented in Colorado. The computer program collects data that are reported electronically in the National Ombudsman Reporting System (NORS) report to the Administration on Aging and provides local ombudsmen and programs with automated case/complaint management and reporting tools.

### 2003

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The Colorado Long-Term Care Ombudsman and The Legal Center worked with the Division of Insurance and the Colorado Attorney General's Office to develop the *Colorado Long-Term Care Ombudsman Medicare and Medicaid Fraud and Abuse Training Manual*.

The Centers for Medicare and Medicaid (CMS) developed a web-based tool, titled *Nursing Home Compare*, which reports quality measures for all long-term care facilities and provides guidance to help consumers use the quality measures to make an appropriate choice for long-term care. The Colorado Long-Term Care Ombudsman and The Legal Center worked with CMS and other stakeholders to educate consumers about *Nursing Home Compare*, found on the internet at [www.medicare.gov](http://www.medicare.gov).

### 2004

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The Colorado Long-Term Care Ombudsman and The Legal Center

worked with the Division of Aging and Adult Services to develop *The Colorado Long Term Care Program Training and Certification Manual*. The manual, which replaced the one written in 1992, includes information on the aging process, long-term care facilities, long-term care residents, state and federal laws and regulations, finances, communication tools, the problem solving process, and other training tools to empower long-term care ombudsmen to carry out their duties.

The Colorado Long-Term Care Ombudsman worked with the Administration on Aging to provide training to address inconsistencies in the National Ombudsman Reporting System (NORS) reported by the Office of the Inspector General.

### 2005

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The Colorado Long-Term Care Ombudsman Program worked with the Division of Aging and Adult Services, State Unit on Aging and Adult Protective Services Unit to develop materials and provide training to local ombudsmen and county Adult Protective Services workers regarding understanding of roles and responsibilities of each entity, with a focus on improving cooperation and collaboration.

To continually improve training, data entry and record-keeping by ombudsmen, a collaborative effort between the Colorado Long-Term Care Ombudsman Program and the Division of Aging and Adult Services resulted in consolidation of regional OmbudsManager databases to a central server, which makes regional databases accessible via the internet to ombudsmen statewide.

"The 1970s and '80s were filled with challenges for the Ombudsman Program. I became director of the Colorado Congress of Senior Organizations in 1978, and one of the best decisions of my life was hiring Virginia (Ginny) Fraser as State Ombudsman in 1980. At the time, Ginny was, in essence, the program for the entire state. We knew she couldn't do it alone, and needed a network of local ombudsmen - paid and volunteer - to implement the program. We advocated for state regulations that required the Area Agencies on Aging to be responsible for operating the programs locally. Although this 'state mandate' was not popular at the time, I believe it has ultimately been incredibly positive and the local agencies are recognized as operating excellent programs.

I think the program's independence and autonomy are its key strengths, even though there have been challenges to that independence over the years. Its tie to The Legal Center as the Protection and Advocacy System has been an excellent fit, and has enabled the program to draw from the broad expertise of other staff at The Legal Center. What I would like to see as the next area of development is an ombudsman program for persons receiving in-home care. Because of the special vulnerability of persons who live in their own homes and rely on long-term care services to remain out of an institutional setting, I believe a home-based ombudsman program is needed. But it is a far more complex project to create a home-based program than one for persons living in a nursing home or assisted living center."

Bill Hanna, former Director of Aging Services and Legislative Liaison for the Colorado Department of Human Services

## Major Issues in Long-Term Care in 2005

The following issues are presented as major areas of concern by the Colorado Long-Term Care Ombudsman, after a careful analysis of the summary reports from the sixteen regional Area Agency on Aging Ombudsman Programs. There are many things to celebrate in Colorado's system of long-term care, in this its 30th anniversary year, but the following major issues urgently require attention.

### *Notification and Discharge Planning*

Receiving a notice that you have to leave your home in 30 days is one

of the most stressful things that can happen to a resident and his or her family. Thirty days barely constitutes sufficient time to find a suitable new facility, but up until 18 months ago, evictions from assisted living residences were often something ombudsmen learned about only at the last minute, and then only if residents or families

called for help. Frequently, ombudsmen learned of the discharge when they arrived to visit residents and found they had already been moved.

On May 30, 2004, revised assisted living regulations went into effect in Colorado. Written into these regulations is a new requirement for assisted living residences to send "a copy of the 30 day written notice . . . to the state or local ombudsman, within five calendar days of the date that it is provided to the resident or the resident's legal representative." This gives local om-

budsmen an opportunity to challenge any notices that are illegal or inappropriate. It also gives them the time to help residents and their families find another facility.

Local ombudsmen report that some facility managers try little or no problem solving before immediately jumping to eviction. In some instances residents have not even been told that their behavior has been a problem. Statewide, we face a serious shortage of beds for low-income seniors with multiple health care needs or difficult behaviors. In reality, they often have little or no "choice" in their long-term care facility—they must accept the ones willing to take them. Evictions are becoming a growing problem as more facilities seek to convert beds for Medicaid recipients into private slots for residents able to pay three or four times the amount allocated by the government program. A key example of this played out in Durango, as reported by the lead ombudsman from Region 9:

*"A major issue for us was that we almost lost 10 slots set aside for Medicaid recipients at a Durango assisted living residence. In September 2005, our office received a call from a resident of Sunshine Gardens requesting help because the Medicaid recipients had all received eviction notices and had 30 days to find another place to live. Within a day of the notice, the Durango Herald reported the story and there was an uproar in the community about the news. In 1997, Sunshine Gardens had entered into an agreement with the city to provide care for 10 Medicaid residents in return for offsets in utility fees. Now, the facility's owner stated that Medicaid staffing requirements were too strict and a financial burden. In No-*



"Who moved the fish tank?" Resident advocates for return of aquarium to main lobby.

*ember, after weeks of consultations with Sunshine residents and their families, the State Health Department, Senator John Salazar's office, The Legal Center, and the Colorado Long-Term Care Ombudsman, the Durango City Council held a public hearing. The council denied Sunshine Garden's request to convert Medicaid beds to private-pay beds and the eviction notices were rescinded. We thought the problem was solved, but on January 10, all residents of the facility received a notice from the management stating that due to onerous government regulations the facility would change from being an assisted living residence to an independent living facility. The 10 Medicaid recipients will be moved to another part of the facility where they will continue to receive assisted living services. The larger issue is that there will be tremendous upheaval for Sunshine Garden's residents as they are transitioned to a new type of care which may not be appropriate for them, and Durango's seniors now have reduced access and fewer choices for long-term care."*

Although San Juan Basin's Ombudsman Program (Region 9) won the battle, the system as a whole is in danger of losing the war. Facilities that can do so will inevitably choose to serve fewer, wealthier residents, preferably with minimal health problems and behavior issues. The problem is complex but in addition to enforcing regulations on evictions and discharges, the solution must include more realistic reimbursement rates through Medicaid.

### Care Plans

Nursing homes participating in the Centers for Medicare and Medicaid Services (CMS) Quality Improvement Initiative have reported significant advances since the program was launched in 2002. However, even

when residents are free from pain, pressure sores, and physical restraints (the CMS measures used to document improvement), their care may still fail to meet the spirit of the Nursing Home Reform Act (NHRA). The NHRA requires that any nursing home that accepts Medicare or Medicaid payments must provide services that enable each resident to "attain and maintain the highest practicable mental, physical, and psychosocial well being...in accordance with a written plan of care."

Ideally, a care plan uses a multi-disciplinary approach that addresses the medical needs, emotional concerns, and personal interests of the resident. The planning process should involve the resident, family members, and facility staff in creating a strategy for how the staff will interact with residents on a daily basis. Every effort should be made to protect the dignity of the residents as well as their desire for autonomy. This does not happen in every facility. Many local ombudsmen report that care plans are among the most difficult issues they have to handle. Ombudsmen can document individual infractions within a care plan, and they can encourage facilities to do better, but they have no resources with which to enforce proper care planning and implementation.



Laveta's beauty mirrors the majesty of the Colorado pass her father named her after.

*Staffing in Nursing Homes and Assisted Living Residences*

The issue of staffing levels and the quality of staff in long-term care facilities continues with no resolution in sight. It is one of the leading categories of complaints from residents and their families, and one of the greatest frustrations for ombudsmen and staff alike. Concerns fall into four categories: insufficient staff to carry out the work; high staff turnover; inadequate training; and poor supervision. Many local ombudsmen report that aides, and sometimes the nurses, do not

understand mental illness and are not trained to cope with difficult behaviors. The high staff turnover is driven primarily by low wages throughout the industry. Facilities with a culture of warmth, caring and respect for staff and residents are better able to attract and retain qualified personnel, but the system as a whole needs attention. The Colorado Long-Term Care Ombudsman and The Legal Center recommend ongoing mandatory training for all levels of staff, mandatory staffing ratios, and salaries that are commensurate with the job.

**Long-term Care Resident Complaints**

In 2005, ombudsmen responded to 9,757 complaints statewide, an increase of 332 (3.5 percent) over the previous year. In 2004, there was a significant

drop in complaints from the previous year, likely attributable to turnover among ombudsmen and continued learning of the automated reporting system.

Of major concern is the increase

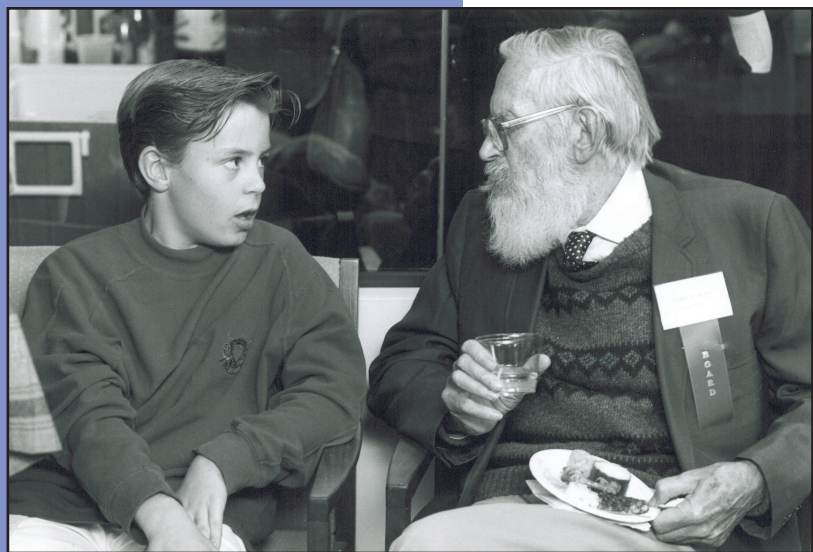
in serious complaints in the following categories: 1) Care; 2) Autonomy, Choice, and Privacy; 3) Abuse, Gross Neglect, and Exploitation; 4) Staffing; and 5) Admission, Transfer, Discharge, Eviction. This category experienced a small overall decrease, but the subcategory of discharges and evictions is a serious growing problem. (See Major Issues in Long-Term Care, page 10.)

*Care*

Poor quality of care was again the leading category of complaints in nursing homes totaling 1,655 complaints. Complaints about standards of care in assisted living residences numbered 431. These complaints include improper handling of accidents, failure to respond to call lights, inadequate individual care plans or follow through, improper medication administration, failure to ensure proper personal hygiene, and failure to attend to resident symptoms. Overall, the total number of complaints rose by 45 from 2,041 last year to 2,086 this year. Many of these complaints stem directly from staff shortages and high staff turnover, which is a long-term problem.

*Autonomy, Choice, Privacy*

In 2005, ombudsmen responded to 1,128 complaints in nursing homes and 544 complaints in assisted living residences charged to this complaint category. Again, this was the number one category of complaints in assisted living residences. In both types of facilities, the overwhelming number of



An ombudsman's son and a resident enjoy a spirited discussion.

complaints from residents in this category referred to lack of dignity and respect and the inability to exercise their rights. The fact that total complaints in this area increased by 214 over last year's numbers emphasizes the importance of the growing focus on culture change. Seniors want and expect to retain the ability to make choices and control their own lives.

### *Abuse, Gross Neglect, and Exploitation*

This complaint category includes physical, sexual, verbal and mental abuse (including involuntary seclusion), gross neglect, resident-to-resident physical or sexual abuse and severe financial exploitation. These are the most serious complaints of a potentially criminal nature and generally represent the cumulative effect of a series of operational or administrative breakdowns within the facility.

In 2005, ombudsmen responded to 535 complaints in nursing homes and 203 complaints in assisted living residences in this category. Overall, complaints in this category increased 11.6 percent in 2005. Stories from local ombudsmen, featured in this report, demonstrate that the elimination of this type of serious abuse requires a concerted effort on the part of ombudsmen, families, facilities, Adult Protective Services, and law enforcement.

### *Staffing*

In 2005, complaints in this category numbered 470 in nursing homes and 184 in assisted living residences, an overall increase of 103 (16 percent) from last year. By far the largest number of complaints were for staff being unavailable, shortage of staff, lack of staff training and poor supervision; all of which are key contributing factors to

abuse, poor care, and lack of autonomy for residents. Many of the complaints come from facility staff members themselves, who are concerned that there is insufficient staffing to meet the needs of the residents. Federal and state regulations mandate minimum staffing levels, but without an improvement in pay, working conditions and training, it is difficult for facilities to attract and retain sufficient qualified and committed staff.

### *Admission, Transfer, Discharge, and Eviction*

In 2005, complaints in this category numbered 426 in nursing homes and 224 in assisted living residences, showing a decrease of 21 (3.3 percent) from last year. Of these, 392 complaints came from inappropriate discharges, inadequate notice and insufficient planning for the transition. A substantial number reflect dissatisfaction with room changes and transfers within the facility. These 392 complaints regarding discharges took significant hours of ombudsman time and caused distress for residents and their families. New regulations governing evictions from assisted living residences took effect this year and this is expected to improve transfer processes because ombudsmen are now notified. (See Major Issues in Long-Term Care on page 10.)



Many ombudsmen go far beyond minimum requirements, often using their own personal time to meet with residents and their families.

# Colorado Long-Term Care Ombudsman Program Accomplishments

*Achievements of the Colorado Long-Term Care Ombudsman in 2005*

## Annual Statewide Training Conference, June 2-3, 2005

Local ombudsmen must receive at least 15 hours of certification training annually. The Colorado Long-Term Care Ombudsman Annual Training is their major recertification opportunity and it assures participants of the most up-to-date information on long-term care facilities and systems. This year's conference, "30 Years of Advocacy, Education and Empowerment," was held at the El Pomar Foundation in Colorado Springs and featured keynote speaker Cheryl Siefert, founder of the Alzheimer's Learning Institute and a national speaker on quality of life issues for mentally frail seniors. She focused on how ombudsmen can influence and instill positive changes in facilities.

Additional training sessions included:

- Advocacy and Advanced Nursing Home Regulations
- Assisted Living Regulations
- Culture Change
- Exploitation
- The Grievance Process
- Identifying Persons with Developmental Disabilities and Mental Illness Who Want to Live in the Community
- Negotiation and Mediation
- Physical and Chemical Restraints
- Resident Intimacy and Sexuality.

## Regional Training Events

Training sessions entitled "The Role of the Ombudsman and the Role of

Adult Protection" were presented in: Glenwood Springs, November 17, 2004; Greeley, March 4, 2005; and La Junta, September 12, 2005.

## Local Long-Term Care Ombudsman Program Evaluations

Local Area Agency on Aging Ombudsman Programs are evaluated periodically to ensure that residents have regular and timely access to ombudsmen, receive timely responses to complaints, and are represented appropriately. During fiscal year 2005, the Colorado Long-Term Care Ombudsman conducted on-site assessments for the following regions: (10), League for Economic Assistance and Planning; (2A), Larimer County Office on Aging; (6), Lower Arkansas Valley Area Agency on Aging; and (11), Associated Governments of Northwest Colorado. All were found to be in compliance with the standards set forth in the Colorado Long-Term Care Ombudsman Policies and Procedures Manual, state statutes, and rules.

## National Forums

- The Colorado Long-Term Care Ombudsman participated in the Denver Regional Council of Government's White House Conference on Aging and attended the Colorado Governor's White House Conference on Aging.
- The Colorado Long-Term Care Ombudsman represented Colorado at the "Saint Louis Accord," a national conference to promote the widespread adoption of resi-



Ginny Fraser was the Colorado Long-Term Care Ombudsman from 1980 through 2000. She instituted so many of the activities and achievements that we celebrate today.



dent directed care in nursing homes throughout the country. Scholarship money was set aside for the Colorado State Ombudsman to participate as part of our state's implementation team. Stakeholders represented the interests of residents, families and nursing homes, as they worked on practical approaches to implement the CMS Nursing Home Quality Improvement Initiative.

- The Colorado Long-Term Care Ombudsman represented the National Association of State Ombudsmen on The American Health Quality Association Public Advisory Council. The council provides a forum to develop implementation plans for the Centers for Medicare and Medicaid Services (CMS) Nursing Home Quality Improvement Initiative. As a representative to the council, the Colorado Long-Term Care Ombudsman advocated for funding for ombudsmen to participate in the "Saint Louis Accord."
- The Colorado Long-Term Care Ombudsman participated in the National Dialogues forum on "Ombudsman Program Advocacy in Guardianship." The National Dialogues teleconferences bring together state ombudsmen,

state aging directors, centers for independent living, area agencies on aging, representatives from the Centers for Medicare and Medicaid Services and other state and national groups to address challenging issues and identify ways to more effectively serve long-term care consumers.

- The Colorado Long-Term Care Ombudsman was appointed to serve on the Long-Term Care Advisory Committee authorized by Senate Bill 05-173. The committee's charge is to "explore and recommend to the State Department of Health Care Policy and Financing, public policy that will enable the state's Medicaid program to act strategically as a client advocate and be an efficient and effective purchaser of services and service delivery." Committee members are appointed according to statute and represent a variety of perspectives on long-term care.
- In May 2005, The Legal Center submitted the 2004 Colorado Long-Term Care Ombudsman Program Annual Report to the legislature, the Division of Aging and Adult Services, Colorado Department of Human Services, and the aging network.



"Those of us who are ombudsmen are honored by the residents and families who put their trust in us. They give our life purpose and meaning."

Jayla Sanchez Warren, Lead Ombudsman, Region 3A, Denver

### *Achievements of Local Ombudsmen in 2005*

- Ombudsmen responded to 9,757 complaints. Ombudsmen received 9,425 during 2004.
- Ombudsmen made 6,029 visits to the 237 nursing homes and 4403 visits to the 518 assisted living residences. In 2004, ombudsmen made 5,157 visits to nursing homes and 1,901 visits to assisted living residences.
- Ombudsmen provided 207 training sessions for facility staff. In 2004, ombudsmen provided 219 training sessions for facility staff.
- Ombudsmen provided 2,387 consultations to facilities, compared to 2,089 during 2004.
- Ombudsmen provided 8,494 individual consultations. In 2004, ombudsmen provided 9,832 individual consultations.
- Ombudsmen participated in 554 facility surveys. Ombudsmen participated in 407 facility surveys in 2004.
- Ombudsmen participated in 1,592 resident council meetings and 210 family council meetings. During 2004, ombudsmen participated in 1,453 resident council meetings and 144 family council meetings.
- Ombudsmen provided 458 community education seminars. In 2004, ombudsmen provided 516 community education seminars.
- Ombudsmen were active in providing information through the media by participating in 33 interviews and issuing 31 press releases. In 2004, there were 31 interviews with the media and 54 press releases.

# Stories from the Field

These personal accounts from ombudsmen illustrate the dedication and commitment of Colorado's local ombudsmen in assuring the best possible quality of life for residents of long-term care. Two of the stories focus on the ombudsmen's vital role in protecting residents from crimes of financial and sexual exploitation. There are also wonderful examples of seniors enlisting the support of their ombudsmen in a bid for freedom and independence.

## A Team Comprehensive Approach to Addressing Concerns

"In our program, volunteer ombudsmen are often the first to identify significant issues in facilities. This was the case for two facilities in our region. Volunteers were inundated with complaints from residents and families about care issues including medication errors, care plans that were not followed and baths missed. Since both facilities were a part of the same corporation, we looked at all of the facilities in this corporation and identified trends and patterns in the type of complaints our office investigated and in health department survey results. Equipped with this information ombudsmen developed what we call a "team comprehensive approach." Several ombudsmen visited the affected facilities together with the goal of talking to every resident possible. We were able to identify trends of complaints that were consistent in all of the buildings.

Ombudsmen worked with the staff at each facility to address the concerns the residents had identified. We offered to participate in care plans and quality improvement meetings, and we provided training to those facilities that wanted it. In addition, we met with corporate officers to discuss our concerns and their plans to improve the quality of care and life for the residents in their facilities. We believe this approach has been beneficial to all involved. For ombudsmen it allows us to take a more comprehensive approach to effecting change. Most staff members seem to appreciate the fact that we are willing to roll up our sleeves and help them find solutions. The volunteer ombudsmen have had the opportunity to work closely with staff and see the benefits unfold for the residents they care about. Families have seen quicker resolution to their problems and are comforted by the fact that someone else cares and is watching out for their loved ones. The residents' lives have improved in a variety of ways. They have more choice in their daily lives, activities and meals have improved, their caregivers are becoming more consistent, and complaints of missed baths and medications have been reduced. We can't take all the credit for these positive changes but we proudly accept some."

Jayla Sanchez Warren, Lead Ombudsman for Region 3A, Denver

## Balancing Independence with Safety

"Staff from a small assisted living residence called us because they were concerned about a resident with a severe, progressively debilitating neurological condition. She was staying out after midnight and was sometimes brought home by police, neighbors or even strangers when the battery on her electric scooter ran out. We met with the resident who said she had moved from a nursing home because she wanted more independence. With her permission we involved her son who lived in another part of Colorado. He had begun the process to request guardianship from the court. After a lot of discussion, she made the decision to move back to the nursing home where she had lived previously. We soon learned from a staff member there, after her return, that her son and the administrator had made an agreement that her electric scooter would be taken away from her to keep her safe, so that she would not leave the facility at all hours.

She became depressed. Her mobility was severely limited and she didn't have enough strength in her arms to propel her manual wheelchair. She was now totally dependent on others to move her from place to place. She has a small dog that would accompany her everywhere, riding on the platform of the scooter. Now he had no place to ride, and he couldn't walk alongside her because of old leg injuries. We talked with the son. We told him that her wishes must be heard and honored although we could see he was trying to do what he thought was right. We talked with the administrator, discussing that withholding the scooter was a violation of the resident's rights. We also talked with the resident about her responsibility to keep herself safe, particularly with her son pursuing guardianship. The son and the administrator agreed to return her scooter to the resident, and she agreed to some limitations on its use (not going further than a block or so and not going out late at night). This compromise resulted in greatly improved quality of life for her. She was beyond happy with the help she received in getting her scooter back, and she has chosen to abide by the agreement made."

Janet Ibanez, Lead Ombudsman for Region 3B, Boulder

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## Sexual Assault on an At-Risk Adult

*“Our ombudsmen have been involved in a very sad case of sexual assault on a nursing home resident diagnosed with Pick’s disease (a severe form of dementia affecting speech and behavior). The resident, who was unable to speak, was sexually assaulted on two separate occasions by a 27-year-old male certified nurse assistant who worked the evening shift. He admitted to the assaults, accepted a plea agreement, and was sentenced to 16 years to life on January 4, 2006. Ombudsmen attended all of the hearings in support of the resident and her family, and we worked with the facility to train staff on signs and symptoms of abuse. The resident has been relocated to another facility and has adjusted well.”*

Raegan Maldonado, Lead Ombudsman for Region 2B, Greeley

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### Helping an Elderly Couple Stay Together

“A 90-year-old man was discharged from the hospital after suffering a stroke. The hospital staff directed the man to be placed in a nursing home. The patient and his wife informed hospital staff that moving to a nursing home was not their desire, but their wishes were ignored. The wife called the Pueblo Area Agency on Aging Ombudsman Program (Region 7) and requested assistance. The couple had been married for 63 years and lived independently in their own home until the husband’s illness. Because we knew that they had expressed a strong preference to stay together, we worked quickly with community agencies to help the couple move into an assisted living residence apartment unit within three days. The wife is able to provide most of her husband’s personal care, while the facility provides meals and supervision. They are together and living the quality of life every senior deserves.”

Patrick Craig, Lead Ombudsman for Region 7

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### Relentless Pursuit of Criminals Who Defrauded an Elderly Resident

In the 2004 report, ‘Stories from the Field,’ we were unable to include a very important story. Below is an excerpt from a letter of commendation from the First Assistant Attorney General Mark J. Zammuto of the Medicaid Fraud Control Unit, Office of the Attorney General, dated August 1, 2005 regarding the work of Joe Cisneros, Lead Ombudsman, South-Central Colorado Seniors, Inc. Area Agency on Aging (Region 8):

The Medicaid Fraud Control Unit (MFCU) recently prosecuted two defendants in Alamosa for stealing property from an elderly nursing home resident by getting her to sell the property for many times less than it was worth. One of the defendants was the social services director at the nursing home. The successful prosecution of the defendants resulted in restitution to the victim and felony convictions that will keep the defendants from working with the elderly in the future.

I am writing to commend Joe Cisneros, the Ombudsman for Alamosa County. When the case came to light, it was reported to the local police department. The local police declined to pursue the case believing it was a civil matter. Mr. Cisneros was not satisfied with the decision of the police department. He reported the matter to ElderWatch and they passed the case onto the MFCU.

Without action by Mr. Cisneros, the case would have been closed and the defendants would have reaped the benefit of their crime and been able to prey on other elderly people in the future. This is especially true because the defendants had relocated to New Mexico and one of them was working as a nursing home administrator.

Mr. Cisneros’ interest in the welfare of the victim and his actions in pursuing the case should be recognized and praised. You are lucky to have him representing the elderly residents of Alamosa County.

Logan, Morgan,  
Phillips, Sedgwick,  
Washington, and  
Yuma Counties

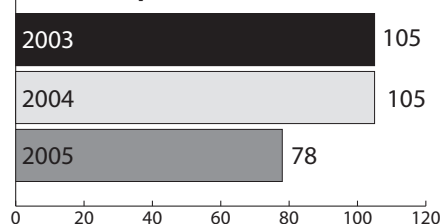
Sandy Baker, Director  
231 Main Street  
Fort Morgan, CO 80701  
970-867-9407  
Lead Ombudsman: Sandy Baker  
Local Ombudsmen: Deanna Carter,  
Barb Griggs, Marlene Miller, Karen  
Ness, Bonnie Smith-Moore, and  
Linda Schilling

## Region 1 Northeastern Colorado Association of Local Governments

Ombudsman Complaint Categories	2005	2005
	NH	ALR
RESIDENT RIGHTS		
A. Abuse Gross Neglect, Exploitation	4	0
B. Access to Information	1	1
C. Admission, Transfer, Discharge, Eviction	1	2
D. Autonomy, Choice, Exercise of Rights, Privacy	4	4
E. Financial, Property (except for financial exploitation)	4	3
F. Care	11	4
G. Rehabilitation of Maintenance of Function	3	1
H. Restraints (chemical and physical)	2	0
I. Activities	2	3
J. Dietary	5	5
K. Environment	6	3
L. Policies, Procedures, Attitudes, Resources	1	3
M. Staffing	1	3
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	0	0
P. System/Others	0	0
<b>Total:</b>	<b>45</b>	<b>32</b>
Q. Complaints Other Settings		1
<b>Total:</b>		<b>78</b>

Number of Facilities and Beds	2005
Number of Nursing Homes	12
Number of Beds	799
Number of PCBH/Assisted Living Residences	16
Number of Beds	338
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	8
Number of Facility Consultations	157
Number of Individual Consultations	64
Number of Nursing Homes Visited Monthly	12
Number of PCBH/Assisted Living Residences Visited Quarterly	16
Survey Participation	24
Resident Council Meetings Attended	212
Family Council Meetings Attended	12
Community Education	22

### Total Complaints



# Region 2A Larimer County Office on Aging

## Larimer County

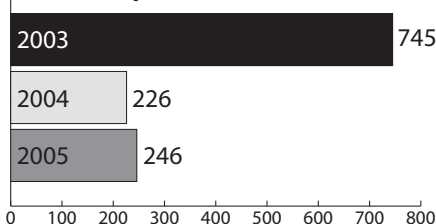
Margaret A. Long, Director  
 1501 Blue Spruce Drive  
 Fort Collins, CO 80524  
 970-498-6809

Lead Ombudsman: Christina Barker  
 Local Ombudsmen: Linda Rumney and Diane Pelletier  
 Volunteer Ombudsmen: Linda Biles, Betty Caikowski, Ruth French, Gerry Hinks, and John Reid

Ombudsman Complaint Categories	2005 NH	2005 ALR
<b>RESIDENT RIGHTS</b>		
A. Abuse Gross Neglect, Exploitation	23	16
B. Access to Information	2	3
C. Admission, Transfer, Discharge, Eviction	25	8
D. Autonomy, Choice, Exercise of Rights, Privacy	21	23
E. Financial, Property (except for financial exploitation)	6	7
F. Care	42	9
G. Rehabilitation of Maintenance of Function	2	2
H. Restraints (chemical and physical)	1	0
I. Activities	3	2
J. Dietary	7	5
K. Environment	7	6
L. Policies, Procedures, Attitudes, Resources	3	3
M. Staffing	14	2
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	0	0
P. System/Others	2	1
<b>Total:</b>	<b>158</b>	<b>87</b>
Q. Complaints Other Settings		1
<b>Total:</b>		<b>246</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	14
Number of Beds	1318
Number of PCBH/Assisted Living Residences	22
Number of Beds	851
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	12
Number of Facility Consultations	79
Number of Individual Consultations	121
Number of Nursing Facilities Visited Monthly	14
Number of PCBH/Assisted Living Residences Visited Quarterly	22
Survey Participation	24
Resident Council Meetings Attended	94
Family Council Meetings Attended	22
Community Education	9

### Total Complaints



ALR - Assisted Living Residences  
 NH - Nursing Homes  
 LTC - Long-Term Care  
 PCBH - Personal Care Boarding Homes (*Personal Care Boarding Homes is the name formerly used for Assisted Living Residences*)

## Weld County

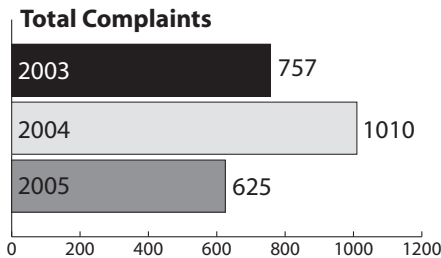
Eva Jewell, Director  
 1551 N. 17th Avenue, P.O. Box 1805  
 Greeley, CO 80632  
 970-353-3800

Lead Ombudsman: Raegan Maldonado  
 Local Ombudsmen: Kathleen Alvarado  
 and Marcia Jorgensen  
 Volunteer Ombudsman: Rita Pat Jordan  
 and Jim Whiting

# Region 2B Weld County Area Agency on Aging

Ombudsman Complaint Categories	2005	2005
	NH	ALR
RESIDENTS' RIGHTS		
A. Abuse Gross Neglect, Exploitation	56	4
B. Access to Information	4	0
C. Admission, Transfer, Discharge, Eviction	44	14
D. Autonomy, Choice, Exercise of Rights, Privacy	54	27
E. Financial, Property (except for financial exploitation)	15	6
F. Care	101	19
G. Rehabilitation of Maintenance of Function	20	4
H. Restraints (chemical and physical)	9	0
I. Activities	28	11
J. Dietary	49	11
K. Environment	32	8
L. Policies, Procedures, Attitudes, Resources	10	4
M. Staffing	8	12
N. Certification/Licensing Agency	3	2
O. State Medicaid Agency	4	4
P. System/Others	54	8
<b>Total:</b>	<b>491</b>	<b>134</b>
Q. Complaints Other Settings		0
<b>Total:</b>		<b>625</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	7
Number of Beds	889
Number of PCBH/Assisted Living Residences	24
Number of Beds	470
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	8
Number of Facility Consultations	118
Number of Individual Consultations	207
Number of Nursing Facilities Visited Monthly	7
Number of PCBH/Assisted Living Residences Visited Quarterly	24
Survey Participation	26
Resident Council Meetings Attended	128
Family Council Meetings Attended	19
Community Education	58

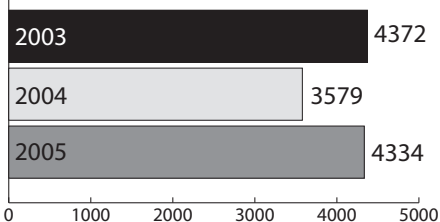


## Region 3A Denver Regional Council of Governments, Aging Services Division

Ombudsman Complaint Categories	2005	2005
RESIDENTS' RIGHTS	NH	ALR
A. Abuse Gross Neglect, Exploitation	93	75
B. Access to Information	55	60
C. Admission, Transfer, Discharge, Eviction	208	129
D. Autonomy, Choice, Exercise of Rights, Privacy	387	245
E. Financial, Property (except for financial exploitation)	146	92
F. Care	807	166
G. Rehabilitation of Maintenance of Function	186	34
H. Restraints (chemical and physical)	27	8
I. Activities	173	75
J. Dietary	231	108
K. Environment	280	95
L. Policies, Procedures, Attitudes, Resources	59	76
M. Staffing	162	62
N. Certification/Licensing Agency	3	6
O. State Medicaid Agency	24	24
P. System/Others	148	77
<b>Total:</b>	<b>2989</b>	<b>1329</b>
Q. Complaints Other Settings		16
<b>Total:</b>		<b>4334</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	102
Number of Beds	9507
Number of PCBH/Assisted Living Residences	252
Number of Beds	7192
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	81
Number of Facility Consultations	457
Number of Individual Consultations	3942
Number of Nursing Facilities Visited Monthly	102
Number of PCBH/Assisted Living Residences Visited Quarterly	252
Survey Participation	218
Resident Council Meetings Attended	381
Family Council Meetings Attended	81
Community Education	91

### Total Complaints



ALR - Assisted Living Residences  
 NH - Nursing Homes  
 LTC - Long-Term Care  
 PCBH - Personal Care Boarding Homes (*Personal Care Boarding Homes is the name formerly used for Assisted Living Residences*)

## Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson Counties

Sue Bozinovski, Director  
 Cherry Creek Corporate Center  
 4500 Cherry Creek Drive South,  
 8th Floor  
 Denver, CO 80246  
 303-455-1000

Lead Ombudsman: Jayla Sanchez Warren

Local Ombudsmen: Julie Christiansen, Penny Cook, Lori Damel, Shannon Gimbel, Chandra Matthews, Donna Singer, Jodi Patsiner, Sharon Thorson and Cindy Webb.

### Volunteer Ombudsmen:

Karen Archer, Barbara Axelson, Janet Badgett, Dustina Becker, Karen Beier, Sue Bozinovski, Rosemary Colby, Geraldine Cook, Richard Cozza, Janet Dampier, Pamela Darwin, Don Drommond, Mattie Edwards, Barbara Femmer, Virginia Fontaine, Lew Forester, JoAnne Gardner, Robert Georgeson, Amy Gilfillan, Darlene Grandy, Holly-Hays-Cristofano, Patricia Hodges, Perry Hubert, Fred Jacobus, Charles Jacoby, Marian Johnson, Sandra Joines, David Jones, Debby Kirkpatrick, Mary Beth Leitzmann, Rita Levine, Raymond Lovato, Dick Levarsky, DeAnna Lowery, Tom Lowrey, Bill Lyle, Paul Markin, Debbie Marshall, Antonia Martinez, Stephanie Mielnick, Bridget Monahan, Susan Muir, Sarah Newcomer, Linn Redding, Elizabeth Reppond, Ginny Rogliano, Roxie Ronsen, Marilyn Sandau, Mark C. Schaefer, Jerrie Semmel, Laveda Semple, Jo Smith, Kay Soens, Meg Steinborn, Frances Stern, Amy Theodore, Richard Watt, Robert Warren, Laura Welch, Beth Whittemore and Beverly Wold.

## Boulder County

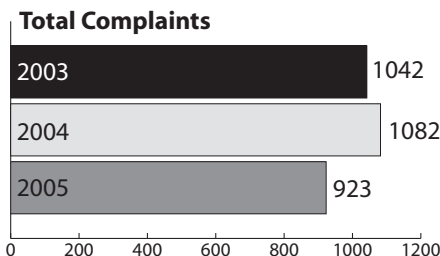
Rosemary Williams, Director  
 3482 N. Broadway, P.O. Box 471  
 Boulder, CO 80306  
 303-441-1170

Lead Ombudsman: Janet Ibanez,  
 Local Ombudsmen: Maureen Cassulo,  
 Tom Doyle  
 Volunteer Ombudsmen: Joanne Bowen,  
 Susan Damon, Kristin Durso, Sandra  
 Edmondson, Suzanne Faulkner,  
 Christina King, Bill McDermott, Tom  
 Myers, Lynn Osterkamp, Kay Ryan and  
 Becky Thomas

# Region 3B Boulder County Aging Services Division

Ombudsman Complaint Categories	2005 NH	2005 ALR
RESIDENTS' RIGHTS		
A. Abuse Gross Neglect, Exploitation	27	13
B. Access to Information	40	6
C. Admission, Transfer, Discharge, Eviction	43	18
D. Autonomy, Choice, Exercise of Rights, Privacy	86	25
E. Financial, Property (except for financial exploitation)	24	10
F. Care	146	36
G. Rehabilitation of Maintenance of Function	36	8
H. Restraints (chemical and physical)	7	1
I. Activities	34	20
J. Dietary	32	16
K. Environment	30	18
L. Policies, Procedures, Attitudes, Resources	37	13
M. Staffing	77	18
N. Certification/Licensing Agency	3	0
O. State Medicaid Agency	12	5
P. System/Others	49	24
<b>Total:</b>	<b>683</b>	<b>231</b>
Q. Complaints Other Settings		9
<b>Total:</b>		<b>923</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	10
Number of Beds	1126
Number of PCBH/Assisted Living Residences	24
Number of Beds	788
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	23
Number of Facility Consultations	64
Number of Individual Consultations	329
Number of Nursing Facilities Visited Monthly	10
Number of PCBH/Assisted Living Residences Visited Quarterly	24
Survey Participation	23
Resident Council Meetings Attended	146
Family Council Meetings Attended	48
Community Education	4





# Region 4 Pikes Peak Area Agency on Aging

## Park, El Paso and Teller Counties

Mike Decker, Director  
 15 South 7th Street  
 Colorado Springs, CO 80905  
 719-471-7080

Lead Ombudsman: Darlene Grippio-Sowa

Local Ombudsmen: Scott Bartlett

Volunteer Ombudsmen: Timothy J.

Davis, Charlotte Draeger, Rose Falgien,

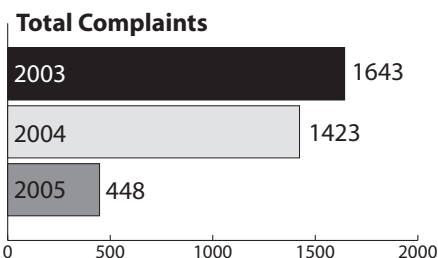
Adabelle Ashley Foster, Donna Gibson,

John Gibson, John Luellen, Virginia

O'Conner and James Singletary

Ombudsman Complaint Categories	2005	2005
	NH	ALR
RESIDENTS' RIGHTS		
A. Abuse Gross Neglect, Exploitation	72	18
B. Access to Information	15	6
C. Admission, Transfer, Discharge, Eviction	30	13
D. Autonomy, Choice, Exercise of Rights, Privacy	40	25
E. Financial, Property (except for financial exploitation)	14	9
F. Care	20	20
G. Rehabilitation of Maintenance of Function	7	2
H. Restraints (chemical and physical)	2	0
I. Activities	5	0
J. Dietary	10	5
K. Environment	7	6
L. Policies, Procedures, Attitudes, Resources	6	11
M. Staffing	11	6
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	9	6
P. System/Others	44	16
<b>Total:</b>	<b>292</b>	<b>143</b>
Q. Complaints Other Settings		13
<b>Total:</b>		<b>448</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	21
Number of Beds	1923
Number of PCBH/Assisted Living Residences	58
Number of Beds	1375
Other LTC Ombudsman Activities:	
Number of Facility Staff Training Sessions	7
Number of Facility Consultations	927
Number of Individual Consultations	704
Number of Nursing Facilities Visited Monthly	21
Number of PCBH/Assisted Living Residences Visited Quarterly	58
Survey Participation	106
Resident Council Meetings Attended	35
Family Council Meetings Attended	2
Community Education	101



ALR - Assisted Living Residences

NH - Nursing Homes

LTC - Long-Term Care

PCBH - Personal Care Boarding Homes (*Personal Care Boarding Homes is the name formerly used for Assisted Living Residences*)

**Cheyenne, Elbert, Kit Carson and Lincoln Counties**

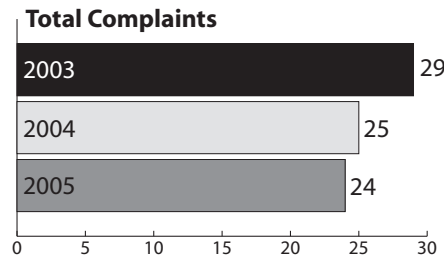
Terry Baylie, Director  
 P.O. Box 28-128 Colorado Avenue  
 Stratton, CO 80836  
 719-348-5562

Lead Ombudsman: Debby Conrads  
 Local Ombudsmen: Louise Mills and  
 Lois Henry

**Region 5 East Central Council of Governments Area Agency on Aging**

Ombudsman Complaint Categories	2005 NH	2005 ALR
<b>RESIDENTS' RIGHTS</b>		
A. Abuse Gross Neglect, Exploitation	1	0
B. Access to Information	0	0
C. Admission, Transfer, Discharge, Eviction	1	0
D. Autonomy, Choice, Exercise of Rights, Privacy	4	1
E. Financial, Property (except for financial exploitation)	3	4
F. Care	2	2
G. Rehabilitation of Maintenance of Function	0	0
H. Restraints (chemical and physical)	0	0
I. Activities	0	0
J. Dietary	1	0
K. Environment	2	1
L. Policies, Procedures, Attitudes, Resources	0	0
M. Staffing	1	0
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	0	0
P. System/Others	0	1
<b>Total:</b>	<b>15</b>	<b>9</b>
Q. Complaints Other Settings		0
<b>Total:</b>		<b>24</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	5
Number of Beds	182
Number of PCBH/Assisted Living Residences	9
Number of Beds	136
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	1
Number of Facility Consultations	10
Number of Individual Consultations	12
Number of Nursing Facilities Visited Monthly	5
Number of PCBH/Assisted Living Residences Visited Quarterly	9
Survey Participation	7
Resident Council Meetings Attended	80
Family Council Meetings Attended	0
Community Education	10



## Region 6 Lower Arkansas Valley Area Agency on Aging

Baca, Bent, Crowley,  
Kiowa, Otero and  
Prowers Counties

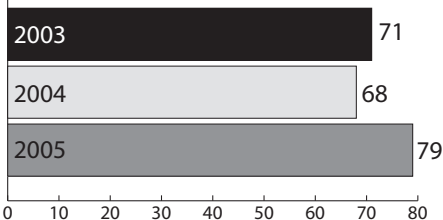
Donna Rohde, Director  
P.O. Box 494, 13 West 3rd Street,  
Room 110  
La Junta, CO 81050  
719-383-3167

Lead Ombudsman: Donna Rohde  
Local Ombudsmen: Delaine Dunning,  
Gene Sena, Nadine Teneff, Jeff  
Vondersmith, Tammy Newman, Kathy  
Medina and Linda Casebolt

Ombudsman Complaint Categories	2005 NH	2005 ALR
RESIDENTS' RIGHTS		
A. Abuse Gross Neglect, Exploitation	8	2
B. Access to Information	1	0
C. Admission, Transfer, Discharge, Eviction	4	0
D. Autonomy, Choice, Exercise of Rights, Privacy	6	1
E. Financial, Property (except for financial exploitation)	1	2
F. Care	25	0
G. Rehabilitation of Maintenance of Function	3	0
H. Restraints (chemical and physical)	0	0
I. Activities	3	1
J. Dietary	7	6
K. Environment	5	2
L. Policies, Procedures, Attitudes, Resources	1	0
M. Staffing	1	0
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	0	0
P. System/Others	0	0
<b>Total:</b>	<b>64</b>	<b>15</b>
Q. Complaints Other Settings		0
<b>Total:</b>		<b>79</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	10
Number of Beds	645
Number of PCBH/Assisted Living Residences	10
Number of Beds	178
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	6
Number of Facility Consultations	18
Number of Individual Consultations	6
Number of Nursing Facilities Visited Monthly	10
Number of PCBH/Assisted Living Residences Visited Quarterly	10
Survey Participation	14
Resident Council Meetings Attended	69
Family Council Meetings Attended	2
Community Education	1

### Total Complaints



ALR - Assisted Living Residences  
NH - Nursing Homes  
LTC - Long-Term Care  
PCBH - Personal Care Boarding Homes (*Personal Care Boarding Homes is the name formerly used for Assisted Living Residences*)

**Pueblo County**

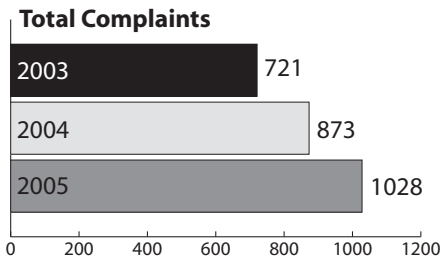
Virginia Jimenez, Director  
 2631 East 4th Street  
 Pueblo, CO 81001  
 719-583-6123

Lead Ombudsman: Patrick Craig  
 Local Ombudsman: Rebecca Espinoza,  
 Barbara Smith  
 Volunteer Ombudsmen: Sharon  
 Neumayr, Carol Nunn, Roberta Poole,  
 Patricia Nielson, Ted Schmidt

**Region 7 Pueblo Area Agency on Aging**

Ombudsman Complaint Categories	2005 NH	2005 ALR
RESIDENTS' RIGHTS		
A. Abuse Gross Neglect, Exploitation	105	16
B. Access to Information	21	6
C. Admission, Transfer, Discharge, Eviction	21	6
D. Autonomy, Choice, Exercise of Rights, Privacy	240	28
E. Financial, Property (except for financial exploitation)	19	1
F. Care	191	24
G. Rehabilitation of Maintenance of Function	35	2
H. Restraints (chemical and physical)	1	2
I. Activities	19	2
J. Dietary	22	8
K. Environment	37	12
L. Policies, Procedures, Attitudes, Resources	37	8
M. Staffing	70	2
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	25	0
P. System/Others	55	13
<b>Total:</b>	<b>898</b>	<b>130</b>
Q. Complaints Other Settings		0
<b>Total:</b>		<b>1028</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	11
Number of Beds	1035
Number of PCBH/Assisted Living Residences	25
Number of Beds	614
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	46
Number of Facility Consultations	383
Number of Individual Consultations	1042
Number of Nursing Facilities Visited Monthly	11
Number of PCBH/Assisted Living Residences Visited Quarterly	25
Survey Participation	51
Resident Council Meetings Attended	200
Family Council Meetings Attended	19
Community Education	74



# Region 8 South Central Colorado Seniors, Inc.

## Alamosa, Conejos, Costilla, Mineral, Rio Grande and Saguache Counties

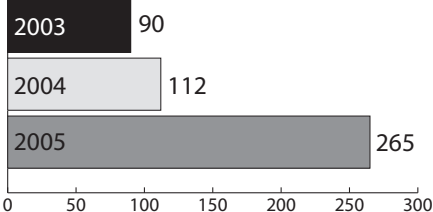
Dan Gutierrez, Director  
 South Central Colorado Seniors, Inc.  
 P.O. Box 420-1116 3rd Street  
 Alamosa, CO 81101  
 719-754-2488

Lead Ombudsman: Joe Cisneros  
 Volunteer Ombudsman: Billie Ann Washburn

Ombudsman Complaint Categories	2005	2005
RESIDENTS' RIGHTS	NH	ALR
A. Abuse Gross Neglect, Exploitation	38	3
B. Access to Information	6	0
C. Admission, Transfer, Discharge, Eviction	11	0
D. Autonomy, Choice, Exercise of Rights, Privacy	68	7
E. Financial, Property (except for financial exploitation)	8	1
F. Care	42	1
G. Rehabilitation of Maintenance of Function	2	0
H. Restraints (chemical and physical)	1	0
I. Activities	2	1
J. Dietary	10	0
K. Environment	13	1
L. Policies, Procedures, Attitudes, Resources	27	0
M. Staffing	7	0
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	0	0
P. System/Others	4	0
<b>Total:</b>	<b>239</b>	<b>14</b>
Q. Complaints Other Settings		12
<b>Total:</b>		<b>265</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	6
Number of Beds	311
Number of PCBH/Assisted Living Residences	3
Number of Beds	62
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	1
Number of Facility Consultations	1
Number of Individual Consultations	5
Number of Nursing Facilities Visited Monthly	6
Number of PCBH/Assisted Living Residences Visited Quarterly	3
Resident Council Meetings Attended	86
Family Council Meetings Attended	0
Community Education	3

### Total Complaints



ALR - Assisted Living Residences  
 NH - Nursing Homes  
 LTC - Long-Term Care  
 PCBH - Personal Care Boarding Homes (*Personal Care Boarding Homes is the name formerly used for Assisted Living Residences*)

Archuleta, Dolores, La Plata, Montezuma and San Juan Counties

V.A. Sally Johnson, Director  
701 Camino Del Rio, #208  
Durango, CO. 81301  
970-259-1967

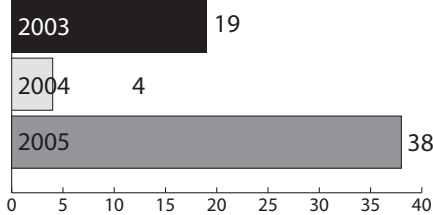
Lead Ombudsman: Barbara Scoville

## Region 9 San Juan Basin Area Agency on Aging

Ombudsman Complaint Categories		2005	2005
		NH	ALR
RESIDENTS' RIGHTS			
A. Abuse Gross Neglect, Exploitation		6	2
B. Access to Information		0	0
C. Admission, Transfer, Discharge, Eviction		4	4
D. Autonomy, Choice, Exercise of Rights, Privacy		2	1
E. Financial, Property (except for financial exploitation)		3	0
F. Care		5	3
G. Rehabilitation of Maintenance of Function		1	0
H. Restraints (chemical and physical)		1	0
I. Activities		1	0
J. Dietary		1	1
K. Environment		2	0
L. Policies, Procedures, Attitudes, Resources		0	0
M. Staffing		1	0
N. Certification/Licensing Agency		0	0
O. State Medicaid Agency		0	0
P. System/Others		0	0
<b>Total:</b>		<b>27</b>	<b>11</b>
Q. Complaints Other Settings			0
<b>Total:</b>			<b>38</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	5
Number of Beds	362
Number of PCBH/Assisted Living Residences	11
Number of Beds	267
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	0
Number of Facility Consultations	5
Number of Individual Consultations	13
Number of Nursing Facilities Visited Monthly	5
Number of PCBH/Assisted Living Residences Visited Quarterly	11
Survey Participation	13
Resident Council Meetings Attended	10
Family Council Meetings Attended	1
Community Education	0

### Total Complaints



# Region 10 League for Economic Assistance and Planning

Delta, Gunnison,  
Hinsdale, Montrose,  
Ouray and San Miguel  
Counties

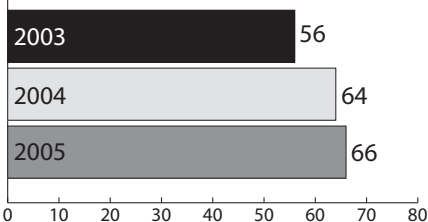
Leslie Jones, Director  
Drawer 849  
Montrose, CO. 81402  
970-240-3349

Lead Ombudsmen: Mary Jane Poulos

Ombudsman Complaint Categories	2005 NH	2005 ALR
<b>RESIDENTS' RIGHTS</b>		
A. Abuse Gross Neglect, Exploitation	12	1
B. Access to Information	0	0
C. Admission, Transfer, Discharge, Eviction	4	2
D. Autonomy, Choice, Exercise of Rights, Privacy	1	1
E. Financial, Property (except for financial exploitation)	1	0
F. Care	23	0
G. Rehabilitation of Maintenance of Function	1	0
H. Restraints (chemical and physical)	1	0
I. Activities	1	0
J. Dietary	1	1
K. Environment	1	0
L. Policies, Procedures, Attitudes, Resources	2	1
M. Staffing	2	0
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	0	0
P. System/Others	1	1
<b>Total:</b>	<b>52</b>	<b>6</b>
Q. Complaints Other Settings		8
<b>Total:</b>		<b>66</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	7
Number of Beds	555
Number of PCBH/Assisted Living Residences	11
Number of Beds	251
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	0
Number of Facility Consultations	37
Number of Individual Consultations	34
Number of Nursing Facilities Visited Monthly	7
Number of PCBH/Assisted Living Residences Visited Quarterly	11
Survey Participation	15
Resident Council Meetings Attended	28
Family Council Meetings Attended	2
Community Education	15

## Total Complaints



ALR - Assisted Living Residences  
NH - Nursing Homes  
LTC - Long-Term Care  
PCBH - Personal Care Boarding Homes (*Personal Care Boarding Homes is the name formerly used for Assisted Living Residences*)

**Garfield, Mesa, Moffat,  
Rio Blanco and Routt  
Counties**

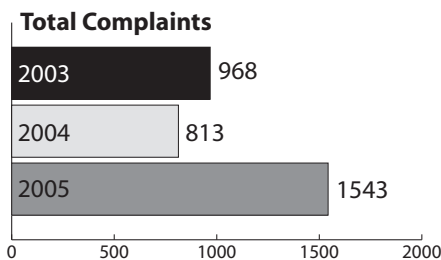
Dave Norman, Director  
P.O. Box 20000-5035,  
Grand Junction, CO 81502  
970-248-2717

Lead Ombudsman: Dave Norman  
Local Ombudsmen: Sherry Bray,  
Shelly Orrell, Jennie Quevedo, Marilyn  
Richardson  
Volunteer Ombudsman: Heather Hall

**Region 11 Associated Governments of  
the Northwest Colorado**

<b>Ombudsman Complaint Categories</b>	<b>2005</b>	<b>2005</b>
RESIDENTS' RIGHTS	NH	ALR
A. Abuse Gross Neglect, Exploitation	86	53
B. Access to Information	13	8
C. Admission, Transfer, Discharge, Eviction	25	27
D. Autonomy, Choice, Exercise of Rights, Privacy	208	154
E. Financial, Property (except for financial exploitation)	13	30
F. Care	227	145
G. Rehabilitation of Maintenance of Function	33	5
H. Restraints (chemical and physical)	5	10
I. Activities	20	13
J. Dietary	19	19
K. Environment	19	13
L. Policies, Procedures, Attitudes, Resources	44	42
M. Staffing	114	79
N. Certification/Licensing Agency	1	0
O. State Medicaid Agency	1	2
P. System/Others	65	41
<b>Total:</b>	<b>893</b>	<b>641</b>
Q. Complaints Other Settings		9
<b>Total:</b>		<b>1543</b>

<b>Number of Facilities and Beds</b>	<b>2005</b>
Number of Nursing Facilities	15
Number of Beds	1167
Number of PCBH/Assisted Living Residences	41
Number of Beds	1149
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	5
Number of Facility Consultations	61
Number of Individual Consultations	461
Number of Nursing Facilities Visited Monthly	15
Number of PCBH/Assisted Living Residences Visited Quarterly	41
Survey Participation	19
Resident Council Meetings Attended	40
Family Council Meetings Attended	0
Community Education	46





# Region 12 Alpine Agency on Aging

Eagle, Grand, Jackson,  
Pitkin and Summit  
Counties

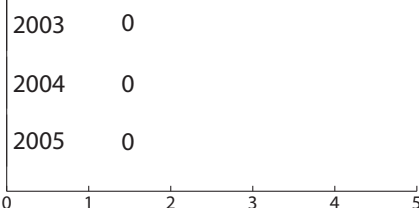
Jean Hammes, Director  
P.O. Box 2308,  
Silverthorne, CO 80498  
970-468-0295

Lead Ombudsman: Jean Hammes  
Local Ombudsmen: Diane Temple,  
Brunhilde Schloffer and Jennifer  
Hollander

Ombudsman Complaint Categories	2005 NH	2005 ALR
<b>RESIDENTS' RIGHTS</b>		
A. Abuse Gross Neglect, Exploitation	0	0
B. Access to Information	0	0
C. Admission, Transfer, Discharge, Eviction	0	0
D. Autonomy, Choice, Exercise of Rights, Privacy	0	0
E. Financial, Property (except for financial exploitation)	0	0
F. Care	0	0
G. Rehabilitation of Maintenance of Function	0	0
H. Restraints (chemical and physical)	0	0
I. Activities	0	0
J. Dietary	0	0
K. Environment	0	0
L. Policies, Procedures, Attitudes, Resources	0	0
M. Staffing	0	0
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	0	0
P. System/Others	0	0
<b>Total:</b>	<b>0</b>	<b>0</b>
Q. Complaints Other Settings		0
<b>Total:</b>		<b>0</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	1
Number of Beds	4
Number of PCBH/Assisted Living Residences	2
Number of Beds	42
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	1
Number of Facility Consultations	4
Number of Individual Consultations	6
Number of Nursing Facilities Visited Monthly	1
Number of PCBH/Assisted Living Residences Visited Quarterly	2
Survey Participation	0
Resident Council Meetings Attended	1
Family Council Meetings Attended	0
Community Education	9

### Total Complaints



ALR - Assisted Living Residences  
NH - Nursing Homes  
LTC - Long-Term Care  
PCBH - Personal Care Boarding Homes (*Personal Care Boarding Homes is the name formerly used for Assisted Living Residences*)

**Chaffee, Custer,  
Fremont and Lake  
Counties**

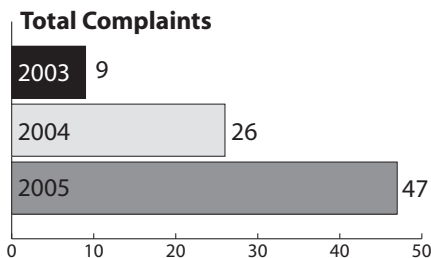
Stephen Holland, Director  
139 West 3rd Street,  
Salida, CO 81082  
719-539-3341

Lead Ombudsman: Stephen Holland  
Local Ombudsmen: Carol McCormick  
Volunteer Ombudsmen: JoAnne Palmer,  
Bill Kafka, Harriet O. Lewallen, Karol K.  
Moore, Herman Derbort, Mary Derbort,  
Debbie Hammel and Bill Fergeson

**Region 13 Upper Arkansas Area Agency  
on Aging**

<b>Ombudsman Complaint Categories</b>	<b>2005</b>	<b>2005</b>
<b>RESIDENTS' RIGHTS</b>	<b>NH</b>	<b>ALR</b>
A. Abuse Gross Neglect, Exploitation	3	0
B. Access to Information	2	0
C. Admission, Transfer, Discharge, Eviction	2	0
D. Autonomy, Choice, Exercise of Rights, Privacy	4	2
E. Financial, Property (except for financial exploitation)	2	0
F. Care	13	1
G. Rehabilitation of Maintenance of Function	2	0
H. Restraints (chemical and physical)	0	0
I. Activities	4	0
J. Dietary	5	0
K. Environment	2	0
L. Policies, Procedures, Attitudes, Resources	0	0
M. Staffing	2	0
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	0	0
P. System/Others	1	0
<b>Total:</b>	<b>42</b>	<b>3</b>
Q. Complaints Other Settings		2
<b>Total:</b>		<b>47</b>

<b>Number of Facilities and Beds</b>	<b>2005</b>
Number of Nursing Facilities	8
Number of Beds	646
Number of PCBH/Assisted Living Residences	8
Number of Beds	106
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	8
Number of Facility Consultations	5
Number of Individual Consultations	241
Number of Nursing Facilities Visited Monthly	8
Number of PCBH/Assisted Living Residences Visited Quarterly	8
Survey Participation	7
Resident Council Meetings Attended	52
Family Council Meetings Attended	0
Community Education	12



# Region 14 South Central Council of Governments

## Huerfano and Las Animas Counties

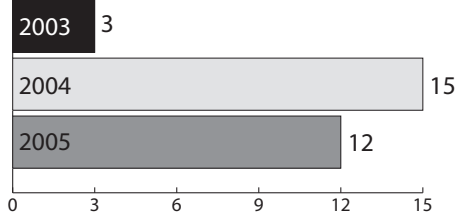
Mike Espinosa, Director  
300 Bonaventure Avenue  
Trinidad, CO 81082  
719-845-1133

Lead Ombudsman: Carol Reynolds

Ombudsman Complaint Categories	2005 NH	2005 ALR
<b>RESIDENTS' RIGHTS</b>		
A. Abuse Gross Neglect, Exploitation	1	0
B. Access to Information	0	0
C. Admission, Transfer, Discharge, Eviction	3	1
D. Autonomy, Choice, Exercise of Rights, Privacy	3	0
E. Financial, Property (except for financial exploitation)	0	0
F. Care	0	0
G. Rehabilitation of Maintenance of Function	0	0
H. Restraints (chemical and physical)	0	0
I. Activities	1	0
J. Dietary	0	0
K. Environment	0	0
L. Policies, Procedures, Attitudes, Resources	0	0
M. Staffing	0	0
N. Certification/Licensing Agency	0	0
O. State Medicaid Agency	0	0
P. System/Others	2	1
<b>Total:</b>	<b>10</b>	<b>2</b>
Q. Complaints Other Settings		0
<b>Total:</b>		<b>12</b>

Number of Facilities and Beds	2005
Number of Nursing Facilities	3
Number of Beds	320
Number of PCBH/Assisted Living Residences	2
Number of Beds	28
<b>Other LTC Ombudsman Activities:</b>	
Number of Facility Staff Training Sessions	0
Number of Facility Consultations	10
Number of Individual Consultations	1
Number of Nursing Facilities Visited Monthly	3
Number of PCBH/Assisted Living Residences Visited Quarterly	2
Survey Participation	4
Resident Council Meetings Attended	27
Family Council Meetings Attended	0
Community Education	1

### Total Complaints

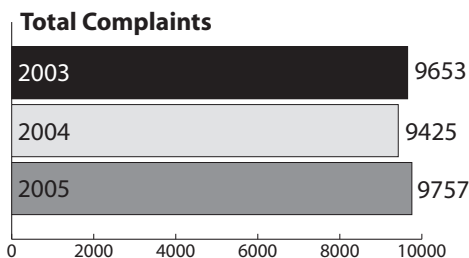


ALR - Assisted Living Residences  
NH - Nursing Homes  
LTC - Long-Term Care  
PCBH - Personal Care Boarding Homes (*Personal Care Boarding Homes is the name formerly used for Assisted Living Residences*)

## Colorado (Statewide) LTC Ombudsman Program Summary of Complaints

Ombudsman Complaint Categories		2005	2005
		NH	ALR
RESIDENT RIGHTS			
A. Abuse Gross Neglect, Exploitation		535	203
B. Access to Information		160	90
C. Admission, Transfer, Discharge, Eviction		426	224
D. Autonomy, Choice, Exercise of Rights, Privacy		1128	544
E. Financial, Property (except for financial exploitation)		259	165
F. Care		1655	431
G. Rehabilitation of Maintenance of Function		331	55
H. Restraints (chemical and physical)		59	21
I. Activities		295	128
J. Dietary		400	184
K. Environment		443	165
L. Policies, Procedures, Attitudes, Resources		227	161
M. Staffing		470	184
N. Certification/Licensing Agency		10	8
O. State Medicaid Agency		75	41
P. System/Others		425	183
<b>Total:</b>		<b>6898</b>	<b>2787</b>
Q. Complaints Other Settings			72
<b>Total:</b>			<b>9757</b>

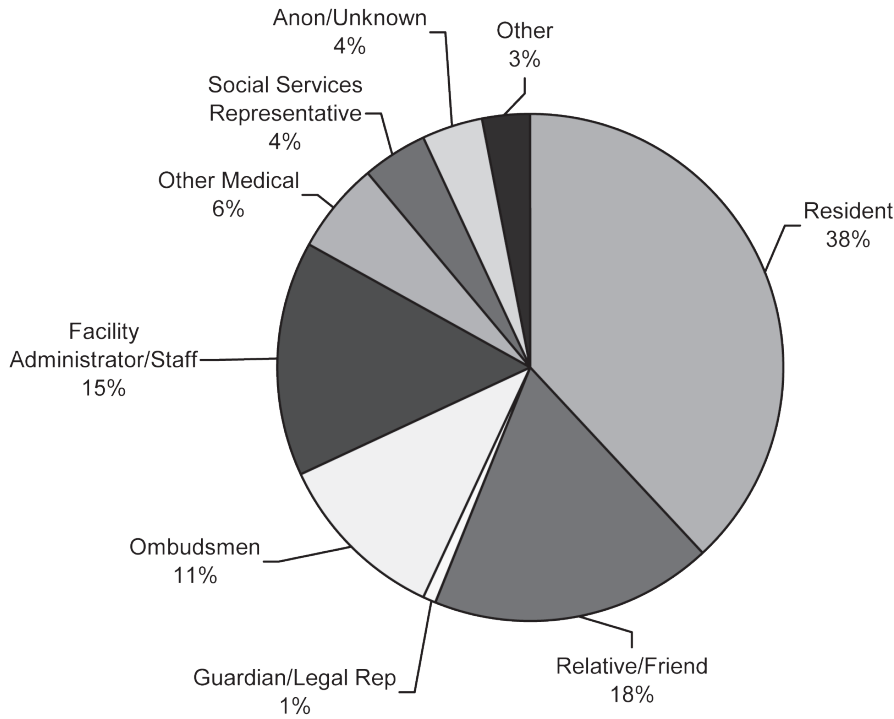
Number of Facilities and Beds		2005
Number of Nursing Homes		237
Number of Beds		20789
Number of Assisted Living Residences		518
Number of Beds		13847
Other LTC Ombudsman Activities:		
Number of Facility Staff Training Sessions		207
Number of Facility Consultations		2387
Number of Individual Consultations		8494
Number of Nursing Homes Visited Monthly		237
Number of Assisted Living Residences Visited Quarterly		518
Survey Participation		554
Resident Council Meetings Attended		1592
Family Council Meetings Attended		210
Community Education		458



## Who makes complaints in Assisted Living Residences?

Complaints in assisted living residences made up 29% of total complaints in 2005. In Colorado there are 518 assisted living residences with 13,847 residents. <sup>1</sup>

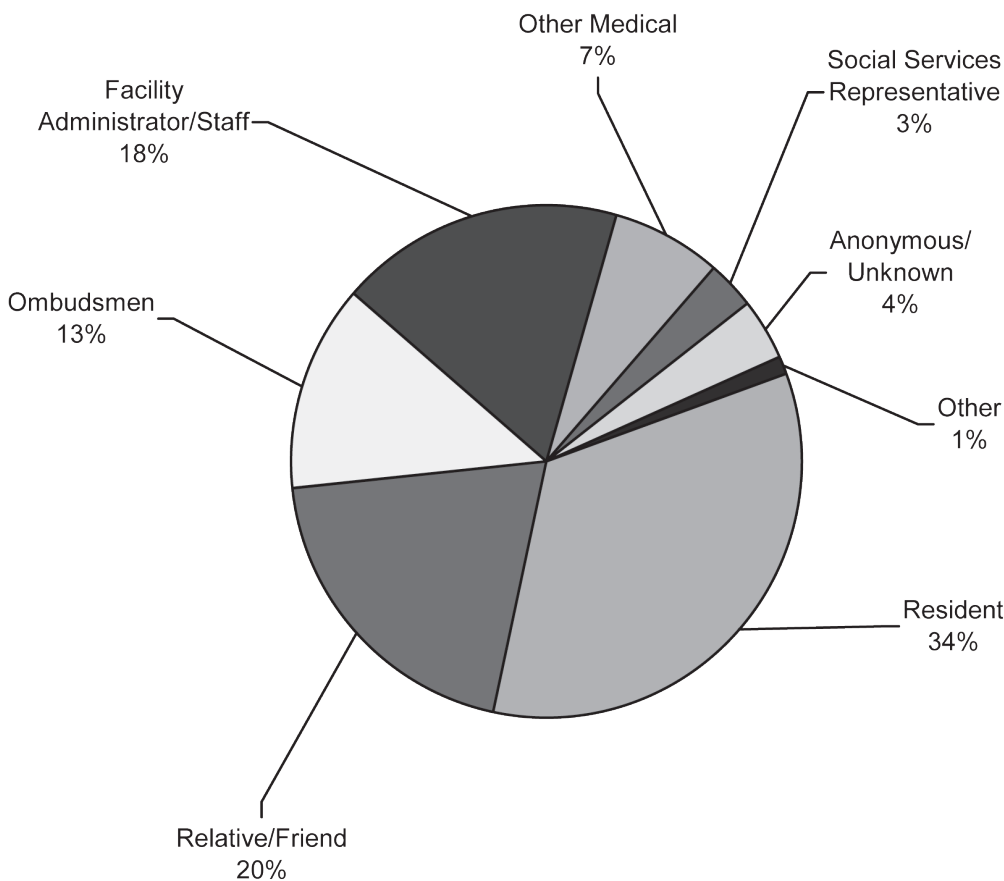
<sup>1</sup> Complaints in Other Settings resulted in a total of 72 or 1% of total complaints to the Colorado Long-Term Care Ombudsman program in 2005.



## Who makes complaints in Nursing Homes?

Complaints in nursing homes made up 71% of total complaints in 2005. In Colorado there are 237 nursing homes with 20,789 residents. <sup>2</sup>

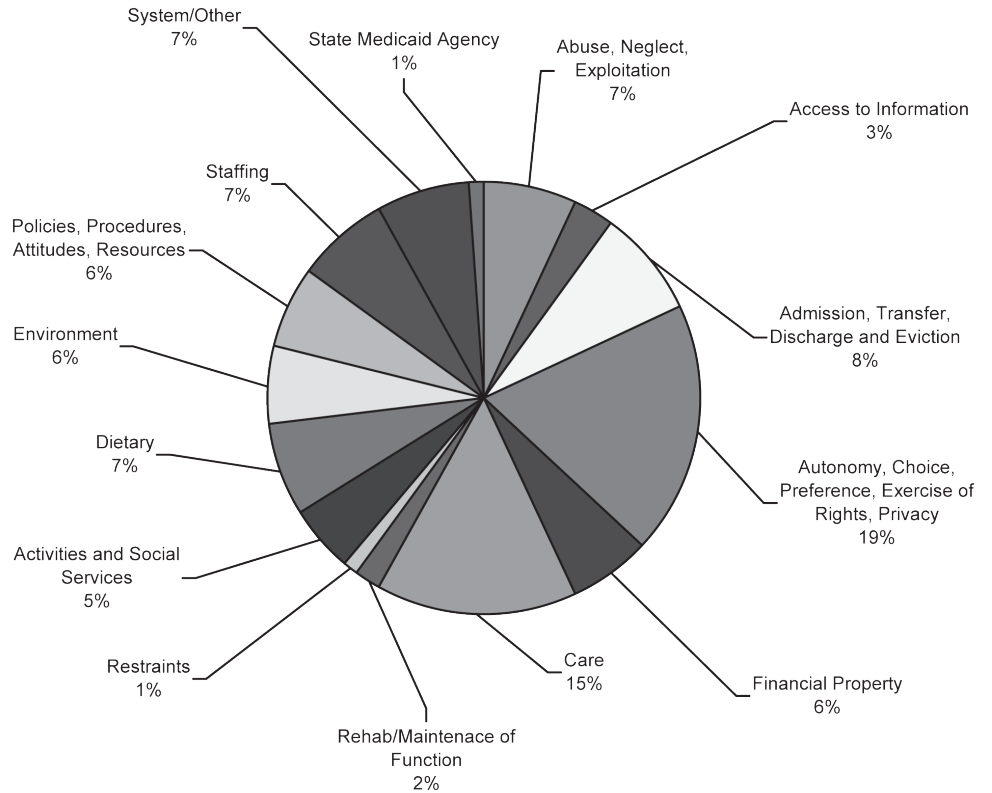
<sup>2</sup> Complaints in Other Settings resulted in a total of 72 or 1% of total complaints to the Colorado Long-Term Care Ombudsman program in 2005.



## What types of complaints are made in Assisted Living Residences?

### Top Three Complaints in Assisted Living Residences:

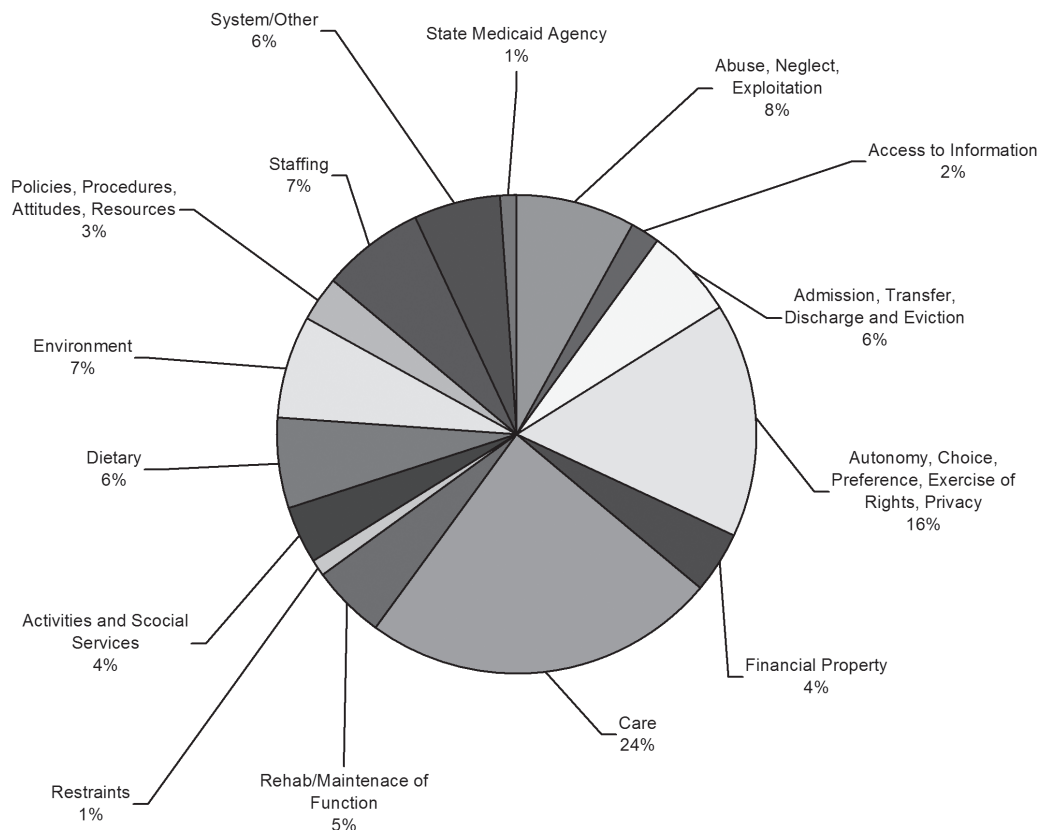
1. Autonomy, Choice, Exercise of Rights, Privacy
2. Care
3. Admission, Transfer, Discharge and Eviction



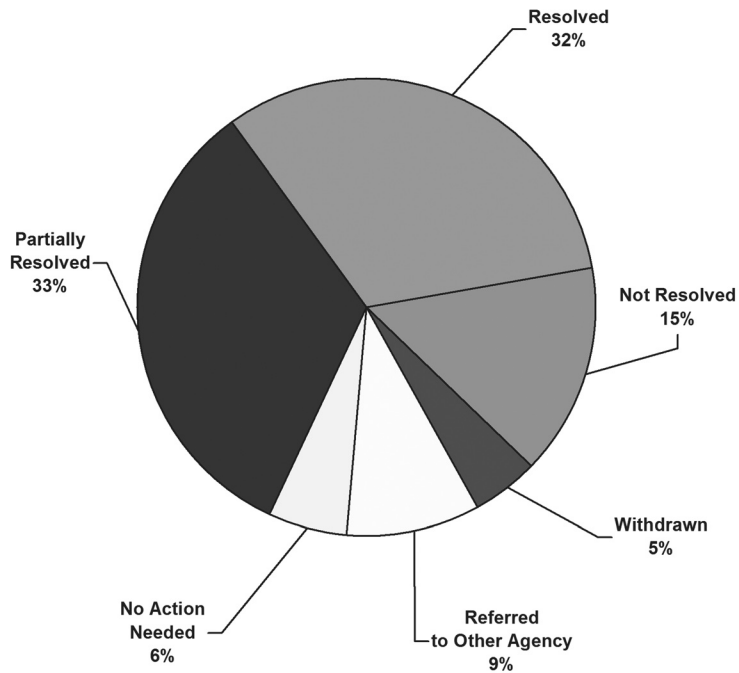
## What types of complaints are made in Nursing Homes?

### Top Three Complaints in Nursing Homes:

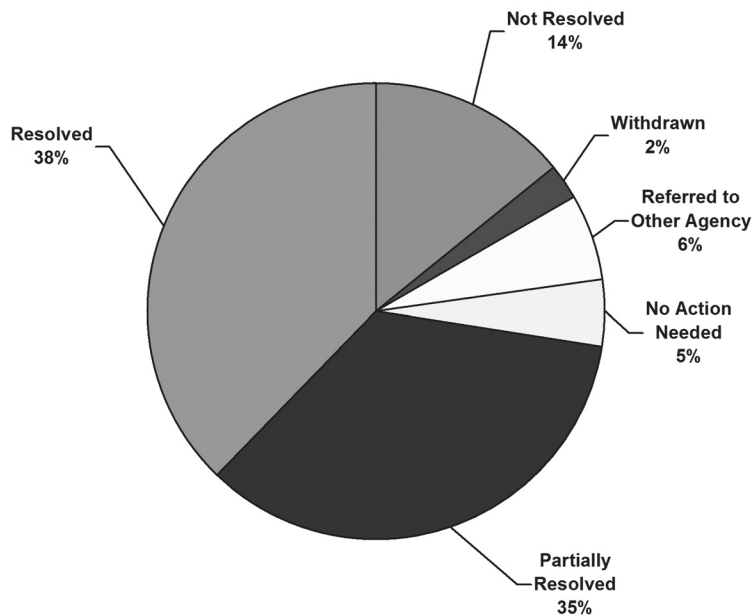
1. Care
2. Autonomy, Choice, Exercise of Rights, Privacy
3. Abuse/Neglect and System Others



## Ombudsman Action on Complaints Made in Assisted Living Residences in 2005



## Ombudsman Action on Complaints Made in Nursing Homes in 2005



The Legal Center for People  
with Disabilities and Older People



*Colorado's Protection & Advocacy System*

455 Sherman Street, Suite 130 ~ Denver, Colorado 80203-4403

Toll Free (800) 288-1376 ~ (303) 722.0300 ~ (303) 722.3619 TTY ~ (303) 722.0720 Fax

tlcmail@thelegalcenter.org ~ www.thelegalcenter.org