

## **Human Rights Activity**

**By Savannah Grignon**

### **Human Rights/Social and economic issues seen presented in Field based on the UN Declaration of Human Rights:**

Article 5: “No one shall be subjected to torture or to cruel, inhuman, or degrading punishment.”

Article 12: “No one shall be subjected to arbitrary interference with his privacy, family, home, or correspondence...”

Article 27 (1): “Everyone has the right freely to participate in the cultural life of the community, to enjoy the arts and to share in scientific advancement and its benefits.”

### **Ways that I have advocated in response to human rights issues presented above:**

In response to article 5, I have advocated against degrading treatments of residents in facilities by hearing resident and family complaints and assisting the Ombudsman in handling them. I have witnessed and assisted in cases of abuse in nursing homes that include the verbal and physical mistreatment of residents. One such case consisted of a CNA pinching the nose of a resident and saying, “You think you’re meaner than me?”.

In response to article 12, one case that we have dealt with includes a resident who had a video of the direct personal care of another resident in the facility. This is a violation HIPPA and a breach of privacy within the facility. This, combined with other action on the part of the resident that were deemed unsafe for others, led us to be able to advocate for the 3-day emergency discharge of the resident to protect the other individuals inside the facility.

In response to article 27, I have advocated for residents’ rights to participation in social and cultural life. One such case consisted of the family of a resident forbidding the resident from attending the facility’s “solar eclipse party” even though he wanted to attend. The resident went to the party, but later the wife tried to cause problems by saying that as Durable Healthcare Power of Attorney she had the right to dictate everything is can and cannot do. After looking over the Power of Attorney document, I found a provision that stated that the resident, as a competent individual, had the right to refuse or consent to any treatments imposed by the POA.

### **Anticipated Funding Changes:**

No budget changes are expected for the Tennessee Ombudsman program. The Ombudsman program does not get state funding, only federal funding. Some states match the federal funding for their Ombudsman programs, but Tennessee does not. How much funding each Tennessee district receives is based off how many nursing home beds each district has. More beds mean more money. United Way used to contribute funds to this district’s Ombudsman program, as they do in other districts such as Nashville. Ashley plans on considering the cause of their funds withdrawal that occurred several years ago and brainstorm ways to gain additional funding to grow this district’s program.

## **Major Federal Policy that Impacts Service:**

The Older Americans Act, 1978 Amendments, elevated the Ombudsman program to a mandatory level and required every state to have an Ombudsman program and specifically defined Ombudsman roles and responsibilities. These roles and responsibilities include:

- Investigating and resolving long-term care facility residents' complaints
- Promoting the development of citizen's organization and training volunteers
- Identifying significant problems by establishing a statewide reporting system for complaints, and working to resolve these problems by bringing them to the attention of appropriate public agencies
- Monitoring the development and implantation of federal, state, and local long-term care laws and policies
- Gaining access to long-term care facilities and to residents' records
- Protecting the confidentiality of residents' records, complainants' identities and Ombudsman files

This act is where the Ombudsman program funding comes from. This Act is important because of all the political issues surrounding our nation's budget. For example, should President Trump decide to cut back funding for the Older Americans Act, it would directly affect the Ombudsman program budget.

**How the policy affects individuals at the micro level:** Any resident case that the Ombudsman receives affects individuals at the micro level, because the policy gave the Ombudsmen the ability to advocate for residents' rights. For example, Resident A has incurred a large bruise of "unknown origin." The facility has no documentation of the nature or discovery of the bruise. The Ombudsman is advocating for Resident A's rights by doing a further investigation, as the investigation done by the facility was deemed inadequate by the Ombudsman. The Ombudsman will also be filing a complaint with the Department of Health, due to the lack of documentation and reporting done on the part of the facility.

**How the policy affects groups at the mezzo level:** This act has affected individuals on the mezzo level by creating an Ombudsman role that enables the Ombudsman to build a volunteer program. The Volunteer Ombudsman Representative (VOR) program in each district enlists willing and capable volunteers to form a group of individuals enabled to advocate for residents' rights. The VOR program in the district that I am studying in currently has a group of 12 volunteers.

**How the policy affects communities at the macro level:** The Older Americans Act outlines the responsibility of Ombudsmen to research trends in nursing facilities across the state and consequently advocate with policy legislatures about how these trends need to impact new policies. My field supervisor, the district 3 Ombudsman, is a part of an advocacy group called the National Consumer Voice for Quality Long-Term

Care that enables her to sign petitions, get notified of political changes that affect long-term care, and receive letters, or templates of letters, to send to senators.

**Plans to deal with Impacts:**

Each quarter, district Ombudsmen hold quarterly trainings for the volunteers in their program. These trainings keep volunteers up-to-date on policy changes that affect long-term care facilities and educate volunteers on current societal trends relevant to service.

**Documentation of Probable Impacts:**

Every year, the state Ombudsman does a report that looks at client data such as cases opened, cases closed, number of reported abuse allegations, and what kind of abuse is reported. This information is sent to the federal government to be compared to other Ombudsman programs. The final report is used to determine if, and or what, changes are necessary to maintain the functionality of the ombudsman program.

**Involvement of staff on information of funding and policy changes:**

If there is a funding or policy change, the State Ombudsman will discuss the issue with district Ombudsmen on the monthly conference call. If the issue cannot wait until the conference call, the State Ombudsman will email the district Ombudsmen, informing them of occurring changes and what they need to do to be ready for them.

**Involvement of constituents on information of funding and policy changes:**

Ombudsmen frequently speak at statewide conferences and events involving community members, interdisciplinary teams, and staff at long-term care facilities. The Ombudsmen are able to educate community members and professionals on the upcoming changes, and assist facility administrators in understanding and preparing for any upcoming changes in regulations.

**My recommendations:**

In response to the possibility of funding cuts at a federal level, I would recommend that the district 3 Ombudsman move forward with her plans to find sources of additional funding. This includes inquiring as to the reason why the United Way no longer provides funding to the district 3 Ombudsman program and seeking to resolve those issues. Even if federal funding is not cut back, the additional funds can still be used to grow the district 3 Ombudsman and volunteer program.