



GREETINGS FROM THE

Executive Director



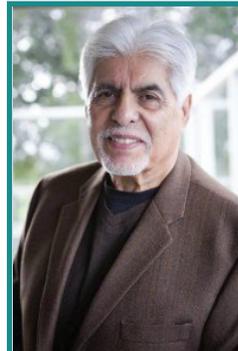
We are closing out on a very successful year. We have worked hard alongside the California Long-Term Care Ombudsman Association over the past seven years to get the funding that was stripped from the program in 2008 reinstated.

It is thanks to our generous private donors and the strong support of San Mateo County that we have been able to continue providing the strong slate of services we provide to our clients, the residents in the long-term care facilities.

Finally ... after years of struggle ... we have been awarded \$2.4M by the state to be paid out to the 34 local ombudsman programs. It is not the full amount we requested, but it is a start. It is not clear yet what portion of that will devolve upon OSSMC. However, in addition to that welcome outcome to our hard work with the legislature, we have also been awarded a sizeable grant from Measure A funding. Together this funding enables us to bring on two more staff members, a Volunteer Coordinator and a Program Manager. Both individuals will take on a portion of the facility coverage, increasing our reach into the facilities, giving residents more access to their ombudsmen, and increasing our overall facility coverage. It will be the first time since the inception of the program, 37 years ago, that we will be fully staffed. It is worth celebrating.

This report gives you some sense of the work accomplished in the field and our impact on bringing changes for better care and a more vibrant quality of life for our residents.

President



Ombudsman Services of San Mateo County continues as a work in progress in maintaining a vigilance in the quality of service in Long Term Care facilities in San Mateo County. The growth of OSSMC has been remarkable since its inception under Catholic Charities. Thanks to the work of our volunteers and staff the level of services remains well above the quality of Long Term Care monitoring afforded in adjoining counties. The current and past Board of Directors and the Executive Director are to be commended for their tireless efforts and guidance .

The Board will strengthen service delivery and broaden operational planning, utilizing a strategic plan adopted by the Board, with the assistance of recognized non-profit consultants. Establishing goals with set milestones, regular review and evaluation will assure continued quality of care services.

The Development Director has assumed a needed leadership role in maintaining and increasing our revenue level and growth in related supportive services. Long Term Care demands a diverse array of services to persons with chronic conditions and functional limitations. The mandate for Long Term Care for the elderly by government is not currently matched by funding for the services and relies on the work of unpaid volunteers.

We welcome the dialogue and the focus on the ever increasing resources needed to provide services for an ever increasing elderly population.

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OUR IMPACT FY 2014-2015

Facility Monitoring

Goal: Meet 80% of Recommended Minimum Number of Visits to Facilities.

Total Number of Visits to Facilities in FY 2014/15: 4,500

Accomplished:

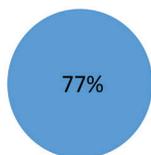
of Facility Visits

4,497



Volunteers

| Annual Goal | # of Certified Ombudsmen |
|---------------------------------------|--------------------------|
| Volunteer Ombudsmen | 33 |
| Volunteer Hours Donated in FY 2015-16 | 6,035 |



Facility Coverage Plan Achieved

Complaint Investigation

Goal: Investigate 1,450 Complaints with a resolution rate of 80%

Accomplished:

Complaints Investigated

1,624



Complaints Resolved to Satisfaction of Residents

95%

Most Common Complaints

1. Care Issues
2. Activities & Social Services
3. Abuse, Gross Neglect, Exploitation

Facility and Community Education

| Annual Goal | Achieved FY 2014-15 |
|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| Provide 20 in-service trainings to facility staff. | 41 Topics: Dementia Care, Ombudsman Roles & Responsibilities, Elder Abuse, Case Review, Investigative Techniques |
| Conduct 15 community education events. | 61 Alzheimer's Association Updates on Dementia Conference, Placement, Role of the ombudsman |
| Conduct 250 consultations with individuals. | 344 Topics: Care issues, Residents' Rights, Community resources |



Systems Advocacy

Collaborative Partnerships
Maintain supportive partnerships in San Mateo County with:

- Aging & Adult Services
- Adult Abuse Prevention Collaborative
- Adult Protective Services
- Office of the Public Guardian
- Departments of Public Health and Social Services
- Legal Aid Society
- Golden Gate Regional Center
- Local law enforcement
- San Mateo County Dental Coalition
- California Culture Change Coalition - working to reduce use of psychotropic drugs in nursing homes.
- Hospital Consortium - working on reducing hospital readmits.
- Health Plan San Mateo, Institute on Aging, & Aging and Adult Services to transition long-term care residents who wish to move to a lower level of care.



QUALITY OF CARE/QUALITY OF LIFE STORIES

Food/Nutrition

A case worker called to advise that a 93-year old had been placed in a nursing home for post-operative rehabilitation. Each evening he removed his dentures and placed them in a tray provided by the facility for safe keeping. One morning he awoke to find his dentures gone. Lack of dentures obviously affected the resident's ability to chew and he was severely hampered in what he could eat, contributing to weight loss. The facility denied all responsibility and refused to reimburse the resident, stating that the resident must have misplaced them. Our ombudsman was able to have the facility understand that as the dentures were on the inventory of personal belongings submitted by the resident, the facility was fully responsible for their safe-keeping and their replacement in the event of loss. They did agree to pay, but only if the resident went to a dentist of their choosing. Again going to bat for the resident, we insisted that he could attend his own dentist and the facility must pay for all dental visits and replacement dentures. They finally did so, though grudgingly.

Medication

OSSMC was called by a resident who advised that the staff had failed to administer medications. As staff were not available, the residents (many of them younger clients) had climbed in through the window of the medications room, unlocked the door, and administered their own medications. OSSMC worked closely with the licensing body, and the administrator has been dismissed, staffing levels have increased, and residents are now getting correct medications in a timely manner. We continue to work with the new administrator at this troublesome facility to monitor a situation that could have proven lethal to the residents in question.

Developmental Disabilities

We were contacted by a social worker from a day program who advised that a client attending a day care program had given pills to another client with whom he was trying to build a romantic relationship. The pills were identified as his blood pressure pills. As the pills are kept in a locked cabinet in his facility to which he had no access, our ombudsman has concluded that the only possibility is that he was not taking his medications, but was hoarding them. The staff at the facility have undergone re-training to ensure that they monitor the clients at all times, especially to ensure that they take their medications. The ramifications of this type of behavior could be extremely serious – we believe that the situation has been caught early and that future potential medical emergencies may have been averted.

Financial Abuse

A resident in a nursing home for post operative rehabilitation was fully expecting to return to her own home with her husband once she had completed rehab. Then she discovered the home had been sold. Her stepson had pressured his father to sell the home, with the intent that he would receive a payout from the proceeds. The wife called the ombudsman. The home, of which she was a co-owner, had been sold without her knowledge or her signature. We referred the client to Legal Aid Services who were able to force the cancellation of the sale. The wife was able to return to her own home.

Abuse

A family member called, incensed that the facility had informed her that they did not provide care after 8 pm. Her husband, resident in this small 6-bed facility, was unable to get out of bed without assistance. When he needed to go to the bathroom in the middle of the night they failed to provide the assistance, and ignored his calls. The gentleman, had managed to get himself out of bed, and on his way to the bathroom had fallen to the floor. Unable to pick himself up, he called and called for help but got no response. He lay on the floor for six hours till the staff came into his room in the morning and found him, bruised, soiled and very agitated. We turned this complaint in to the licensing body and the facility was cited for physical abuse and neglect.

Residents' Rights

Mr. Jones, aged 91, lives in an assisted living facility. His wife passed away about six months ago, and Mr. Jones, fully engaged in life and on Viagra, has found himself a new girlfriend in the facility. The daughters are appalled and have tried very hard to put a stop to this relationship, accusing "Janice" (aged 87) of being generally inappropriate with their Dad. The other residents call her a slut because the two of them have been fondling one another at the dining room table. Mr. Jones's children, all of them professionals in the medical field, are furious with him. After all, Mom has only been gone six months. Mr. Jones finally had had enough and put his foot down, telling his grown children that this is his life and he will live it as he pleases. The administrator called on us for help. With a little help from our ombudsman, the children have backed off, understanding they were violating their Dad's personal rights. Dad continues his escapades with the help of Viagra and the ombudsman. He is loving life!



COMMUNITY AND FACILITY EDUCATION

Alzheimer's Association Conferences

OSSMC partners annually with the Alzheimer's Association to co-sponsor their two annual conferences. Each conference had over 300 participants in attendance. The Circle of Care Conference was held on November 8 and largely targeted caregivers, including staff from our facilities, as well as family members.

The "Updates on Dementia Care Conference" was held on May 13. This conference serves professionals from the broader aging arena, including physicians, social workers, public and private guardians who deal with our clients, and others who provide services to our target population. Executive Director Tippy Irwin served as a faculty member during the conference and led a well-received session on the "Ombudsman Perspective".



Music and Memory

OSSMC, in partnership with the Veterans Memorial Senior Center, the City of Redwood City, and Sequoia Healthcare District, screened the documentary film, "Alive Inside" on January 29 at the Veterans Memorial Senior Center with 80 people in attendance. This film highlights the fight against Alzheimer's and demonstrates music's ability to temporarily mitigate memory loss and restore a deep sense of self to those suffering from it. Working with both Fox Theater and the Music and Memory Program, OSSMC was able to enroll seven nursing homes and dementia care facilities into the training. These facilities are now at the implementation period. Prior to our involvement, there were currently only 16 facilities throughout the State of California who had taken the training. That number is now at 23. Alive Inside's Executive Producer Dan Cohen has asked us OSSMC to draw up guidelines for selecting facilities across California to receive similar grants to take the training and begin implementing this remarkable work.

OSSMC at Community Events

Among the community events that OSSMC participated in to provide information about our work were:

- Alzheimer's Association Conferences
- Professional Fiduciary Association Conference
- Soul Stroll for Health Resource Fair
- Seniors on the Move, San Mateo County
- Senior Health and Resource Fairs in Cities of San Mateo, San Carlos, and Daly City

Seniors On The Square

In observance of World Elder Abuse Day, in partnership with the City of Redwood City and the San Mateo Daily Journal, OSSMC offered its second Annual "Seniors on The Square" event on June 12. In addition to providing community information from local businesses and nonprofits that serve the senior population, a panel discussion on the topic of "Preventing Elder Abuse" was presented by Chris Rodriguez, Deputy Director, Aging & Adult Services, Candace Heisler, Former Elder Abuse and Domestic Violence Prosecutor for the San Francisco DA's Office, and Lieutenant Sean Hart, Redwood City Police Department.



Consultations in the Community

Ombudsmen provided 146 consultations with individuals seeking information on problems concerning themselves or an elderly disabled loved one. The most frequent assistance sought is how to find the right home to place a loved one. Other topics included: Care issues, community resources, advanced health care directives, and elder abuse issues.

Facility Training

During the Fiscal Year, OSSMC conducted 41 in-service trainings for facility staff. The number for in-service trainings is considerably higher than usual as we were training facility staff on the new laws pertaining to abuse reporting. These trainings included sessions on the following topics:

- Resident's Rights
- Elder & Dependent Abuse
- Mandated Reporting Responsibilities
- Role of Ombudsmen

In addition, we provided 146 consultations to facility staff.

VOLUNTEERS

Volunteers Are The Heart of OSSMC

Volunteer Recruitment and Training



Volunteer Field Ombudsmen



Because of the time commitment involved and the difficult nature of the work in the facilities, OSSMC continues to struggle with the recruitment of new volunteers to replace those who leave the program through attrition. OSSMC currently has 34 active certified field

ombudsmen. Most of OSSMC's certified volunteer field ombudsmen are over the age of 60. The average age is 70. 74% are women and 26% are men. They are typically retired and came from nursing, social work, and teaching professions. This year, five new field ombudsmen were trained and became certified.

MSW Internship Program

During the academic year, OSSMC contracted with San Francisco State University's School of Social Work to provide internship opportunities for their students. We were fortunate to have been assigned one student who has worked with us through the current school year, taking up a supervised caseload. We are very encouraged by the success of the project and hope to expand this program to other local universities with MSW programs.

OSSMC Launches Ombuddy Program

OSSMC's External Affairs Committee acknowledges that becoming a long-term care field ombudsman who advocates for adults in care facilities is a big commitment. For those who have the interest, time, and commitment to this important work, serving as an ombudsman can be very rewarding and meaningful. In addition to its volunteer ombudsman opportunities, OSSMC created the Ombuddy program this year as its volunteer auxiliary. Ombuddy volunteers are currently being recruited for the following roles:

- Flower delivery to senior care facilities.
- Event Planning
- Speaker's Bureau
- Tabling at Community Events
- Social Media Posting
- Marketing
- Serving on the External Affairs Committee

DEVELOPMENT HIGHLIGHTS

New Director of Development



OSSMC received funding from the Bernard A. Newcomb Foundation, which enabled us to hire our first Director of Development, Mitch Reitman, a seasoned nonprofit fundraiser with over 30 years of experience. Since Mitch began in September of 2014, we have vastly expanded our grant pipeline, enhanced cultivation and stewardship of individual donors, and involved board members and staff in sphere-of-influence fundraising. Mitch created a development and marketing plan and is working with a newly-expanded External Affairs Committee to implement the plan. We also updated our website, included a weekly blog and increased the frequency of our social media postings.

Fundraising Initiatives

Silicon Valley Gives:



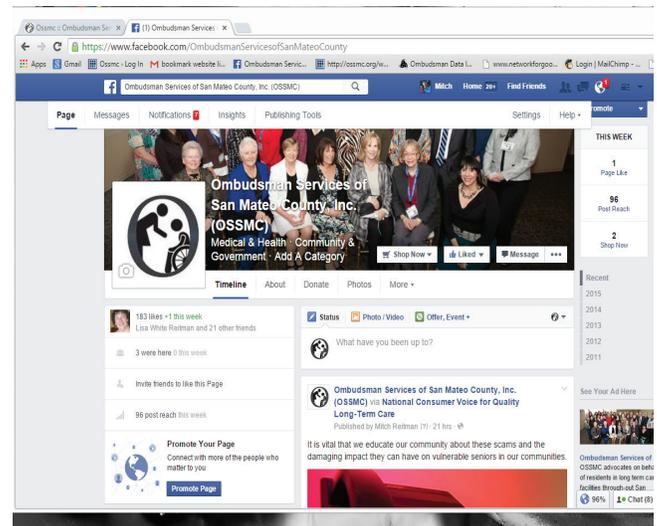
On May 5, OSSMC joined more than 800 other nonprofits in the Silicon Valley to participate in Silicon Valley Gives, a day to raise money through one single online donation platform, providing a simple way to connect donors to the charitable causes they care about most and encourage them to take action. Overall,

SV Gives raised \$7.8 million through 23,000 donations from 17,000 donors. Ombudsman Services raised over \$7,100 through SV Gives plus an additional \$1,200 from donations through our Spring Mail Appeal, which we ran concurrently with the SV Gives effort. To cap off our day of giving, OSSMC hosted a Cinco de Mayo Fiesta at the Foster City Recreation Center to thank our donors, encourage continued giving, and to perpetuate our mission.

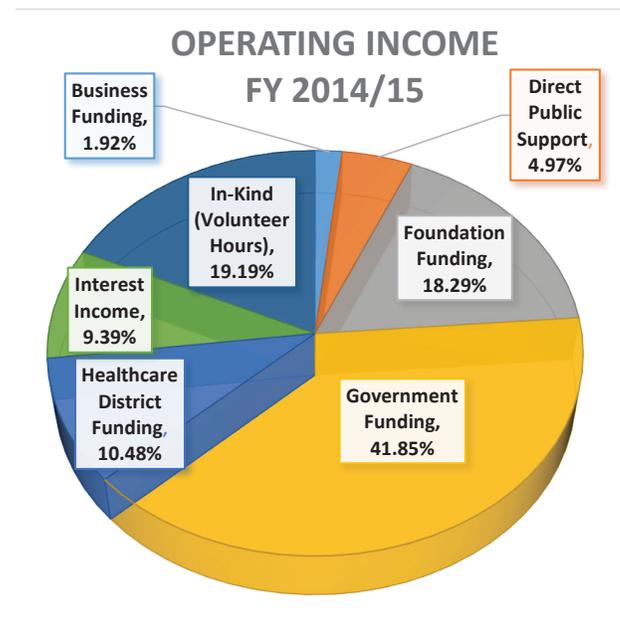
Increasing the Grant Pipeline:

The newly created Development Department is focused on dramatically increasing our reach to foundations and corporations. During the fiscal year, proposals totaling more than \$1 million dollars were sent to secure new funding sources.

Staying Informed



OSSMC has increased its presence on social media sites. Weekly blog articles are published on our website to keep the community informed about issues affecting the elder community.



DONOR ACKNOWLEDGEMENTS

Ombudsman Services of San Mateo County, Inc wishes to thank the following donors who contributed from July 1, 2014-June 30, 2015. If there are any omissions or errors, we sincerely apologize and ask that you contact us.

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ADVOCACY HIGHLIGHTS

Reduction of Use of Psychotropic Drugs

Nationwide, the alarm was sounded when 25% of all residents in nursing homes across the nation were on one or more psychotropic drugs. In San Mateo County, rates have been reduced to below 10%, though there are a couple of nursing homes with much higher rates. We are in dialogue with our two highest users. We find that facilities are very aware of the dangers associated with these drugs, and that they are engaging in attempts to wean their residents off these medications, utilizing other means of controlling the behaviors that are presenting the problem. The response from our facilities has been very encouraging.

Reduction in Use of Physical Restraints

When the ombudsman program was first formulated, it was common to enter a nursing home and find all the residents tied up and drugged, unable to participate in a meaningful way in life. Abuse and neglect were rampant. We have a long way to go to eradicate all the poor care and abuse, but the situation has vastly improved when compared to how it was 30 years ago. The generally accepted treatment then was “tie them up and drug them up.” A few years ago, this program focused on the fact that with 17% of its residents tied up, California had the highest use of physical restraints in the nation. We led the charge in California and embarked on a campaign of education and advocacy and within 2 years brought restraint usage in our county down to 2% -- below the national average, where it still stands today. The rest of the state followed suit some years later.

Reduction in Occurrence of Abuse

Over an 8-year period, as our unscheduled monitoring visits has increased, the number of complaints received has dropped by 34%, and complaints involving abuse allegations have fallen by 52%. While many factors have contributed to this success, we believe that our presence in the facilities has been the foremost cause. We must continue, therefore, to maintain a frequent and vigilant presence in the facilities, building working relationships with facility administrators and their staff, and building relationships of trust with the residents.

Reduction in Hospital Readmits

OSSMC feels that many readmits to local hospitals from Residential Care Facilities for the Elderly and Skilled Nursing Facilities are driven by poor discharge planning, much of which relates to poor or inadequate communication between hospital staff and facility staff. The Hospital Consortium is leading the multi faceted charge in San Mateo County to reduce the readmission rates to local hospitals. We are very pleased to be participating in the discussions and the efforts that are being brought to bear to improve upon the situation.

Transitioning Long-Term Care Residents who wish to Return Home

Aging and Adult Services asked OSSMC to partner with Health Plan San Mateo, The Institute on Aging and Adult Protective Services in the Coordinated Care Initiative, identifying clients in long-term care who wish to either return to their own homes or who would like to live at a lower level of care.

OSSMC strongly believes that residents of San Mateo County’s long-term care facilities must have the option to direct their care whenever possible, including the right to transition. However, this is a complicated process that requires identifying the appropriate candidates, developing transition plans and counseling options, completing home assessments, identifying and implementing in-home services/supports/evaluation, while collaborating with other community-based agencies in a way that provides for the safety and well-being of clients.

During the past year, partners in this project have identified over 200 individuals interested and capable of either returning to their homes or moving to a lower level of care. We have been at the table as resident advocates, ensuring that resident’s rights are protected and that when the transition finally occurs that each resident is comfortable with the process and confident that they will be able to manage with the supports put in place.



About Ombudsman Services of San Mateo County

Our mission is to challenge long-term care facilities to deliver the highest standards of individualized care for their residents. We advocate for the health, safety and dignity of these residents and for broader changes in the system.

Our highly trained, skilled ombudsmen monitor the facilities for quality of care and quality of life. They receive complaints made by or on behalf of the residents, investigate, and work to bring resolution to those complaints, which range the gamut from simple issues such as cold food through egregious abuse, fraud and neglect.