

**AGING AND LONG-TERM CARE COMMITTEE  
FROM THE STATE LONG-TERM CARE OMBUDSMAN  
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Representative Bob Bethell, Committee Chair and Members of the Committee, thank you for the opportunity to provide testimony.

The Long-Term Care Ombudsman program is in support of transferring Adult Protective Services. We would like to see a change for the positive to better serve the vulnerable elderly of the state of Kansas.

The Regional LTC Ombudsmen work with APS frequently. During our interactions with them we have encountered challenges.

First of all, multiple occasions of where the APS worker is not willing or unable to collaborate with us. Often the work is duplicated and does not end positively. They state that they can't share information, even though the resident and/ or family have given permission. This hinders our ability to follow up with the resident and/or family member.

Another example, the APS worker had been working with a consumer in her home for several years. The home was not safe to live in. Over time the consumer developed dementia. The consumer was badly injured due to the living conditions, was treated at the hospital and then discharged to a nursing home. The argument for APS not doing what was needed was self-determination vs. self-neglect. Shortly after the consumer entered the nursing home, the Regional LTC Ombudsman was able to get an emergency guardian in place and now she is getting the care she needs in a safe place.

On several occasions callers to the hotline have been given incorrect information. For example, a woman from the community had called and stated that she had a son that was mentally handicapped and was acting erratically. The hotline told her to call the Regional LTC Ombudsman. The son is at a homeless shelter. When the Regional called the APS worker she stated that she would not call the woman back.

There have been multiple occasions where LTC facility administration has called APS regarding abuse on the part of a community member coming into the facility and APS has failed to follow up. One example, a daughter who was allegedly abusing her mother moved her to four different facilities when the facility would intervene. The woman passed away approximately five months from the first allegation. APS was called by each facility with no follow up.

On the subject of financial exploitation, many administrators have shared frustration because they feel there is a lack of follow up on the part of APS. We often hear from APS that there is no immediate threat to the resident because they are being cared for by the facility. All the while, the family is financially exploiting them and the facility is not getting paid. A quote from a Regional LTC

Ombudsman, "I just don't think they are very interested in helping persons in a nursing home because they are not in danger of being physically abused by family. They do nothing about financial abuse except speak to the offending party, and if that doesn't work they don't pursue it any farther. There isn't a lot I can do if the resident isn't willing or able to file a formal complaint with the police. Then the resident gets tossed from home to home for non-payment because the family won't get the Medicaid information in."

Most of this information is a repeat from last year, but it remains to be a repeat from last year.