



## Office of the State Long-Term Care Ombudsman

### FFY 2024 Annual Report



December 30, 2025

The Honorable Kim Reynolds  
Members of the General Assembly

Dear Governor Reynolds and Members of the General Assembly,

Attached is the Federal Fiscal Year 2024 Annual Report for the Office of the State Long-Term Care Ombudsman (OSLTCO). This annual report fulfills all statutory and federal requirements as outlined in:

Older Americans Act (42 U.S.C. §3058g) and 45 CFR Part 1324, which require State Ombudsman Programs to report annually on:

- Program activities, including complaint resolution, facility visits, and systemic advocacy
- Services provided to protect residents' health, safety, welfare, and rights
- Analysis and recommendations for improving laws, regulations, and policies
- Data on complaints, cases, and program performance (National Ombudsman Reporting System)

Iowa Code §231.42, which requires the Ombudsman to report to the Governor and General Assembly on:

- The activities of the Office
- Recommendations for improving the health, safety, welfare, and rights of residents and tenants in long-term care facilities, assisted living programs, and elder group homes

This year's report highlights significant progress in advancing resident rights and strengthening advocacy across both facility-based and community-based settings. OSLTCO processed over 1,000 complaints, completed more than 1,500 facility visits, and expanded outreach significantly. We also engaged in legislative advocacy on issues such as personal needs allowances, electronic monitoring, and elder abuse while deepening collaboration with Iowa HHS, DIAL, and Medicaid to improve care quality and accountability.

Our mission remains clear: to amplify the voices of residents and managed care members to ensure that they can live with dignity, safety, and independence. Thank you for your continued partnership in this vital work.

Sincerely,



Angela Van Pelt  
State Long-Term Care Ombudsman

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# Executive Summary

Federal Fiscal Year (FFY) 2024 was a year of transformation and progress for the Office of the State Long-Term Care Ombudsman (OSLTCO or the Office). Our work centered on protecting the rights, safety, and dignity of Iowa's most vulnerable residents while responding to unprecedented challenges in the long-term care system. From addressing workforce shortages and facility closures to expanding outreach and modernizing volunteer engagement, the Office worked to ensure residents' voices were heard and their rights upheld.

## Key Highlights

- Resolved 1,086 complaints and closed 654 cases, protecting resident rights and to encourage improvements in care quality.
- Delivered 1,509 on-site visits across 415 facilities, providing rapid response and critical support during facility closures.
- Accelerated outreach by doubling engagement efforts that empower communities with advocacy and resources.
- Forged stronger partnerships with Iowa Department of Health and Human Services (HHS), the Department of Inspections Appeals, and Licensing (DIAL), and Medicaid, aligning strategies to amplify impact and enhance service delivery.
- Mobilized 27 Certified Volunteer Ombudsmen (VO) who contributed more than \$38,000 of in-kind support, expanding program reach and strengthening resident advocacy.
- Influenced legislation on personal needs allowance, electronic monitoring, staffing agency pricing, and elder abuse, shaping policies that elevate quality of life for residents and members.

A major milestone this year was the restructuring of the Office following its transition into Iowa HHS. This change allowed us to eliminate siloed programs and adopt a generalist ombudsman model, ensuring consistent advocacy for residents regardless of setting or payor source. All staff were cross-trained in serving both facility-based and community-based populations, with a goal of improving service delivery and data collection. We also modernized the Volunteer Ombudsman Program by implementing a Learning Management System (LMS) for streamlined certification and training, laying the foundation for a stronger, more sustainable volunteer network.

Despite these advancements, Iowa's long-term care system continues to face significant challenges such as workforce shortages, high turnover, and a surge in facility closures that create trauma for residents and strain resources. These realities underscore the need for strategic investment and collaboration to protect vulnerable Iowans and strengthen care quality.

In FFY 2025, the office will be exploring opportunities such as:

- Developing a centralized transfer and discharge portal to improve timely appeals and strengthen resident rights.
- Enhancing resident and family councils as a way to foster better communication and accountability.
- Expanding volunteer engagement strategies to increase oversight and help prevent abuse, particularly in rural areas.
- Researching the concept of a Long-Term Care Collaborative to promote coordination, reduce duplication, and spark policy innovation.

These initiatives represent cost-effective, high-impact strategies that will improve oversight, enhance quality of care, and ensure efficient use of taxpayer resources. By investing in these priorities, Iowa can build a safer, more sustainable long-term care system that honors the dignity and rights of every resident.

# Program Overview

## Purpose and Mission

The [Office of the State Long-Term Care Ombudsman](#) (OSLTCO or the Office), housed within the Iowa Department of Health and Human Services (HHS) is established under [Iowa Code §231.42](#) and authorized by the federal [Older Americans Act](#). The program is charged with protecting rights and promoting dignity through complaint resolution, education, and individual and systemic advocacy.

The OSLTCO also educates, empowers, and advocates for Medicaid managed care members living in long-term care facilities or enrolled in one or more of Iowa's Home and Community-Based Services (HCBS) waiver programs, including AIDS/HIV, Brain Injury, Children's Mental Health, Elderly, Health and Disability, Intellectual Disability, and Physical Disability.

Unlike regulatory agencies, the OSLTCO focuses on advocacy, education, and problem-solving rather than enforcement. The office listens to concerns, works to resolve complaints, and empowers individuals to make informed choices. By amplifying resident and member voices and fostering collaboration among families, providers, and policymakers, the Office works to create a system where every Iowan receiving long-term care—whether in a facility or in the community—can live with respect, safety, and independence.

## Program Mandates

**Handle complaints:** Listen to and investigate concerns from residents or others, and work to fix problems that affect residents' health, safety, rights, or well-being.

**Report serious issues:** As appropriate, send cases involving abuse or violations to the proper licensing or enforcement agencies so they can act.

**Support residents:** Help residents protect their health, safety, welfare, and rights.

**Provide information:** Explain how residents can get services from different providers or agencies.

**Ensure access and timely help:** Make sure residents and their representatives can easily reach the Office and receive prompt responses.

**Speak up for residents:** Represent residents' interests to government agencies and pursue solutions—legal or otherwise—to protect them.

**Train and support local ombudsmen:** Give training and assistance to local and volunteer ombudsmen so they can do their jobs well.

**Monitor laws and policies:** Review and track new and existing laws, regulations, and government actions that affect residents.

**Encourage involvement:** Help create and support groups like resident and family councils to advocate for resident rights and well-being.

**Maintain confidential records:** Keep a secure and private statewide system for reporting and tracking issues.

**Educate the public:** Provide information to residents, families, the public, and other agencies about long-term care issues.

**Take part in studies or meetings:** Join activities that look for ways to improve residents' health, safety, and rights.

**Work with volunteers:** Recruit, train, and supervise volunteers who represent the Ombudsman's Office

**Coordinate with related programs:** Work with legal assistance programs and elder abuse prevention efforts under the Older Americans Act and partner with law enforcement when appropriate.

**Protect privacy and avoid conflicts:** Ensure all work is confidential and free from conflicts of interest.

## **Structure and Vision**

In FFY 2023, the transition of the Office of the State Long-Term Care Ombudsman into the Iowa Department of Health and Human Services prompted a comprehensive review of the Office's work, staffing structure, and service delivery system. This included a close evaluation of the effectiveness of the Managed Care Ombudsman Program (MCOP) and the Certified Volunteer Ombudsman Program (VOP).

During this period, the Office focused on setting strategic priorities, strengthening its team, and supporting leadership development. This intentional focus on evaluation and planning laid the foundation for extensive discussions about restructuring the Office to ensure that resources would be used in the most effective and impactful way in FFY 2024 and beyond. As a result of this work, the OSLTCO successfully eliminated VOP and MCOP as standalone programs and transitioned to a generalist ombudsman model, which supports all the work of the office.

This transformation addressed several longstanding challenges: both programs were under-resourced, each staffed by only one individual; data collection was inconsistent, and handoffs between programs were unclear; facility-based managed care was not being adequately addressed; and the volunteer program struggled with inconsistent training, unclear role boundaries, and coordination issues.

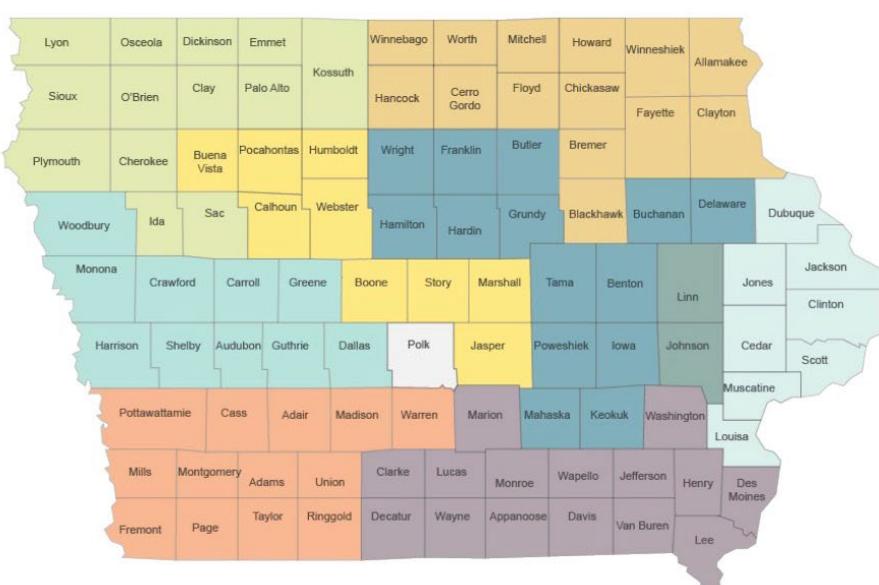
In response, all staff were cross-trained to serve both facility-based and community-based populations, resulting in consistent service delivery and unified data collection across all settings. Advocacy became a universal function, no longer defined by service location or payor source.

Additionally, the Volunteer Ombudsman Program was restructured to streamline intake, training, and placement. A Learning Management System (LMS) was implemented to standardize volunteer certification, and responsibility for volunteer development and oversight was transitioned to Long-Term Care Ombudsmen (LTCO), aligning volunteer efforts with the Office's broader advocacy goals.

Following the restructuring, the Office of the State Long-Term Care Ombudsman functions with a streamlined state team consisting of the State Long-Term Care Ombudsman (SLTCO), an Executive Officer overseeing program quality and policy, and an Administrative Assistant providing operational support. To fulfill statutory responsibilities, nine regional Long-Term Care Ombudsmen are assigned to serve specific areas across Iowa. These remotely based LTCOs conduct in-person visits to long-term care facilities within their assigned regions and perform other functions and responsibilities as assigned. Volunteers continue to support facility-based advocacy, with potential for expanded roles.

## State Long-Term Care Ombudsman Map

### State Long-Term Care Ombudsman's Regions Map



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Updated 09/09/24

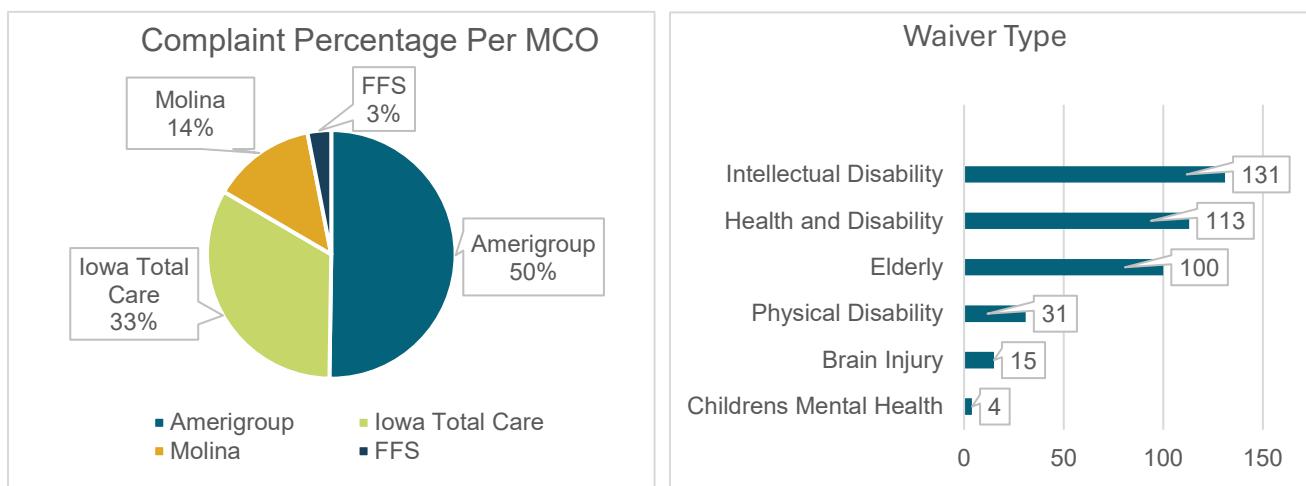
## Managed Care Ombudsman Services

Since the launch of Medicaid Managed Care in Iowa on April 1, 2016, the Office has provided ongoing advocacy for members enrolled in one of Medicaid's seven Home- and Community-Based Services (HCBS) waiver programs. These programs include Children's Mental Health, Elderly, Health and Disability, Intellectual Disability, Physical Disability, AIDS/HIV, and Brain Injury waivers.

In addition to direct advocacy, the Office supports members by offering education on managed care plans, available services, and operational processes. Staff also guide members through the formal grievance and appeals procedures and assist with resolving complaints for those who need help navigating their managed care organization or the broader managed care system.

In FFY 2024, the responsibility for working with managed care members shifted in April from a single staff person to the Long-Term Care Ombudsman team. This change was part of a broader structural improvement designed to ensure that members, whether living in facilities or in the community, receive consistent services and advocacy regardless of payor source.

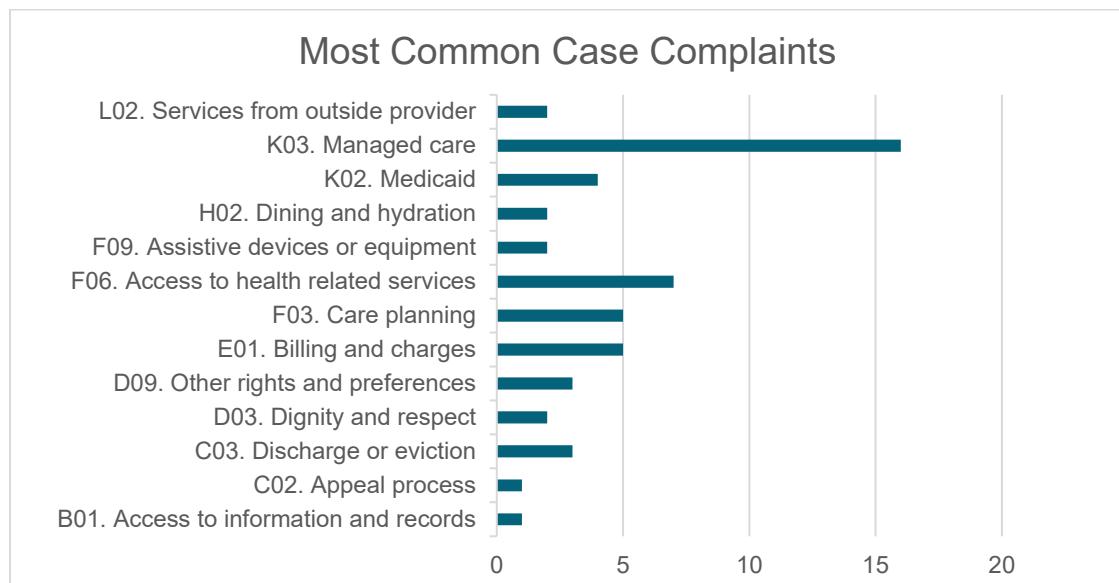
Because of this transition, two separate data sets were created for the year. The first set covers the period from October 1, 2023, through March 31, 2024. During this time, the Office received 422 complaints and provided services to approximately 35 unduplicated consumers each month. The most common issues reported involved services being reduced, denied, or terminated; difficulties accessing services or benefits; and concerns related to member rights.



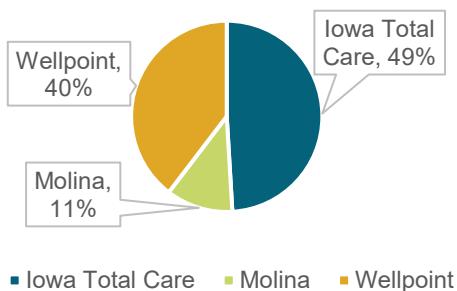
As part of the restructuring, significant work was completed to distinguish case work from broader program activity. The new data structure enables the Office to view activities more clearly and comprehensively by separating true case work from general program actions and by capturing more detailed complaint information.

Of the 64 cases worked between April 2024 through September 2024, cases:

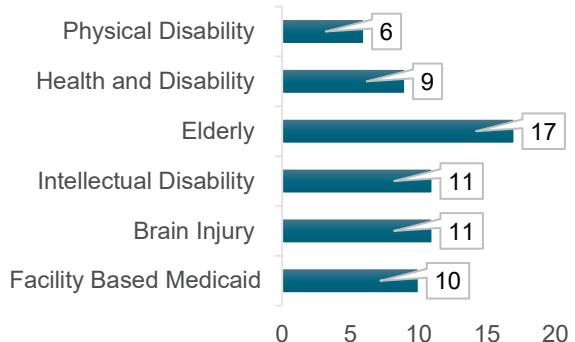
- Averaged 52 days to close
- 67.19 % were Partially/Fully Resolved
- 20.31% were Withdrawn
- 12.50% were Not Resolved



**Complaint Percentage Per MCO**



**Waiver Type**



With the changes implemented in FFY 24, the Office is better positioned to collect higher-quality data on managed care issues in both facility and community settings. This enhanced data capture supports the identification of trends and systemic challenges, strengthening the Office's ability to advocate more effectively for individual members and improve the overall managed care system.

## Certified Volunteer Ombudsman

Volunteers remain essential to advancing the mission of the Long-Term Care Ombudsman Program. [Certified Volunteer Ombudsman](#) extend the Office's reach by maintaining a consistent presence in long-term care facilities where they serve as an independent, trusted advocate for residents. Through regular, unannounced visits, they help ensure residents can voice concerns freely and that issues are identified and addressed promptly.

In FFY 2024, 27 Certified Volunteer Ombudsmen contributed their time and expertise. Based on the Independent Sector's estimated value of volunteer time (\$34.79 per hour), their service generated more than \$38,000 of in-kind support. Beyond this significant economic impact, volunteers provide familiarity and trust, becoming reliable faces within facilities, reducing resident isolation, enhancing engagement, and offering an extra set of eyes and ears to support advocacy. Their presence strengthens accountability and promotes dignity and quality of life across long-term care settings.

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*Volunteers contributed an estimated  
\$38,000 of in-kind support in FFY 24.*

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Since the COVID-19 pandemic, volunteer participation has declined—a trend seen nationally. This prompted the OSLTCO to review the program's operational structure, identify barriers, and explore strategies to make volunteer participation more accessible, efficient, and rewarding.

In November 2023, the OSLTCO initiated discussions with Volunteer Iowa and the Service Enterprise initiative to explore opportunities to strengthen and modernize the Volunteer Ombudsman Program. The goal of this collaboration was to help shape a program structure that would attract new volunteers while keeping existing volunteers engaged, supported, and energized.

In January, OSLTCO staff joined the Service Enterprise cohort and participated in a nine-month process to refine the program's vision and establish clear direction for the future of the volunteer program. The OSLTCO recognized that strengthening the vision and direction of the Volunteer Ombudsman Program was only one component of needed improvement. Equally important was creating a more streamlined and convenient onboarding process that would allow volunteers to complete certification independently and at their own pace.

While work on the Service Enterprise project progressed, the OSLTCO collaborated with HHS to pilot the Articulate learning management system (LMS), designed to house certification materials in clear, user-friendly modules. Development of the LMS began in January, and by August the full set of training modules had been completed, allowing

the OSLTCO Certification Platform to go live. This modernization marked a major step forward in supporting volunteers and staff with flexible, self-paced training.

These efforts mark a significant step toward rebuilding and enhancing the Volunteer Ombudsman Program, ensuring it remains strong, sustainable, and better equipped to support residents throughout Iowa's long-term care system. The Office looks forward to implementing these volunteer program improvements in FFY 2025.

# Activities of the Office

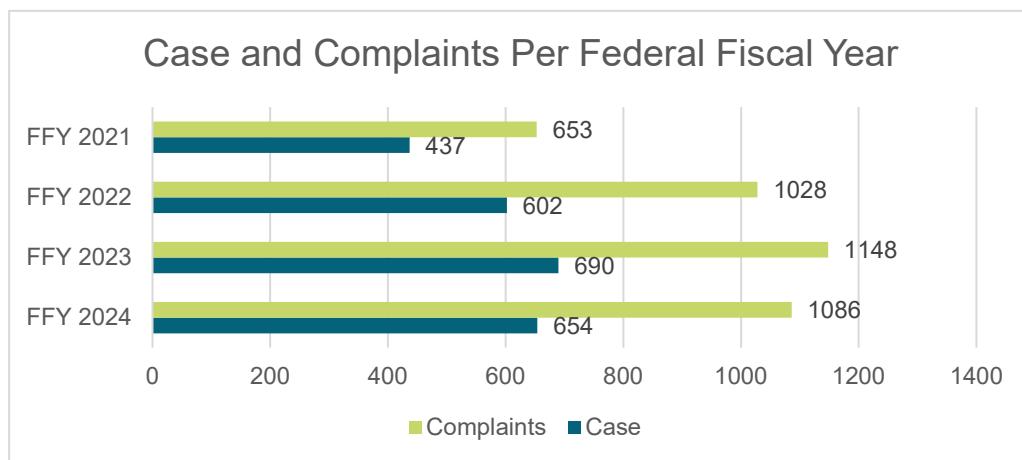
## Individual Advocacy

The primary role of the Long-Term Care Ombudsman Program is advocacy – or serving as the voice for residents and tenants residing in long-term care settings and managed care members receiving LTSS services. In FFY 24, due to irregular staffing levels, closures and restructuring of duties some activity levels saw a slight decrease but the historical trendline continues upward as the office expands its service offerings to meet consumer need.

### Cases and Complaints

The Office is responsible for identifying, investigating, and resolving complaints made by or on behalf of residents or tenants in long-term care facilities. These complaints relate to issues that negatively impact their health, safety, welfare, or rights. A complaint is defined as a concern raised to or initiated by the Long-Term Care Ombudsman for investigation and action on behalf of one or more residents or tenants.

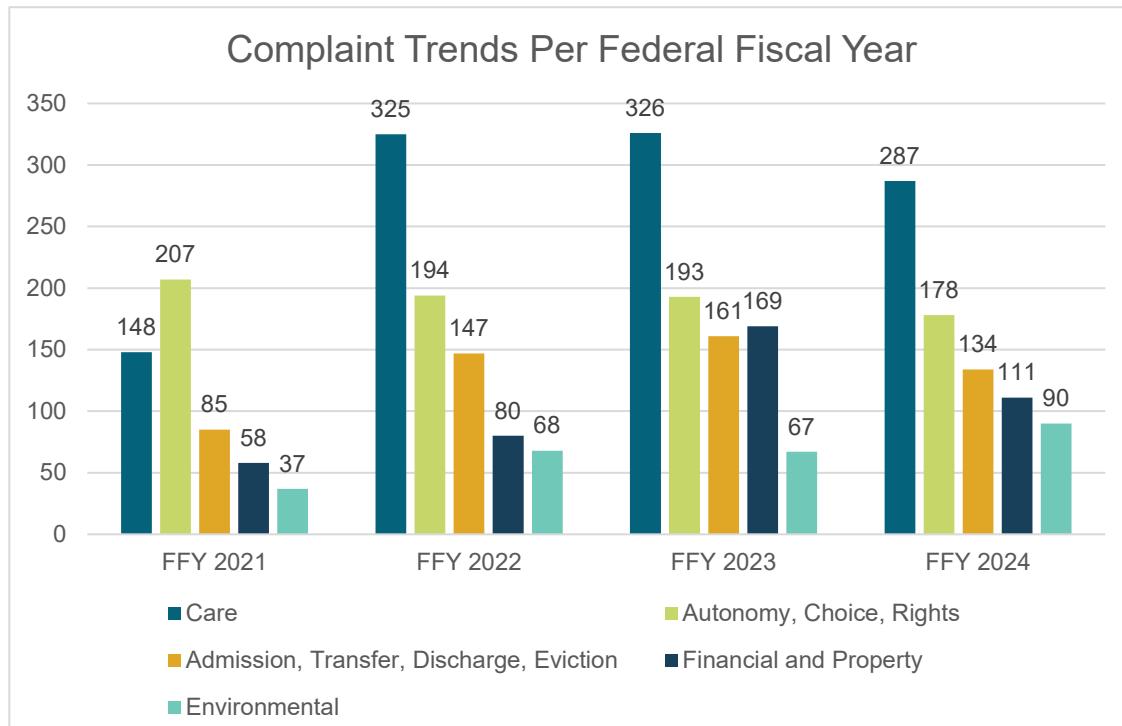
With the resident's or tenant's permission, Long-Term Care Ombudsmen are required to investigate and try to resolve complaints made by or on behalf of residents or tenants in long-term care facilities. Each inquiry brought to, or initiated by, the Long-Term Care Ombudsman on behalf of a resident or a group of residents that involves one or more complaints requiring investigation, resolution strategies, and follow-up is considered a case. In FFY 24, the Office worked 1086 complaints and 654 cases.



Between FFY 2021 and FFY 2024, the Office of the State Long-Term Care Ombudsman tracked and analyzed complaints across a range of categories to better understand the concerns of residents in long-term care settings. Over this four-year period, five key trends consistently emerged, highlighting areas where residents, families, and advocates raised the most concern.

The most frequently reported issues were:

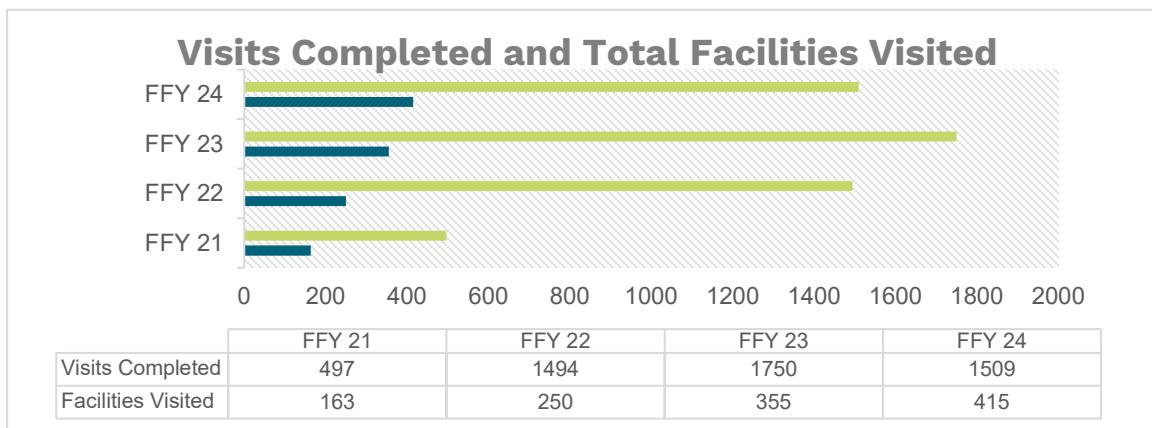
1. **Care** complaints remained the top complaint category each year, reflecting ongoing concerns about quality, staffing, and service delivery.
2. **Autonomy, choice, and rights** complaints followed closely, particularly in nursing facilities, where residents often face limitations in decision-making.
3. **Admission, transfer, discharge, and eviction** issues remained a steady concern, pointing to persistent challenges with transitions and placement.
4. **Financial and property** complaints suggesting increased awareness of billing practices and potential exploitation.
5. **Environmental** complaints more than doubled over the four-year period, signaling a growing focus on facility conditions such as cleanliness, safety, and comfort.



These trends provide valuable insight into the evolving needs and challenges within Iowa's long-term care system. Together, they underscore the importance of continued advocacy, oversight, and system-level improvements in long-term care.

## Facility Visits

The Long-Term Care Ombudsman's Office may respond to inquiries, calls, emails, and reported concerns by conducting visits with residents and tenants. These visits may be complaint-related (non-routine) or routine (non-complaint-related). Facility visits allow local and volunteer ombudsmen to assess situations, provide education and information, empower residents or tenants to act, and gather additional details to determine whether a concern should be pursued as a complaint or case. In FFY 2024, the Office completed 1,509 facility visits across 415 facilities.



Several urgent facility closures required additional visits to support resident transfers and offer on-site assistance during these challenging periods. The Office remains committed to increasing the number of facilities visited each year, and this year continued to meet that goal.

## Information and Assistance

The Office offers information and assistance to individuals, facilities, and service providers. This information and assistance often cover topics such as residents' rights, issues related to abuse, neglect, or financial exploitation of residents or tenants, the role of long-term care ombudsmen and their intervention abilities, as well as concerns related to nursing facilities and assisted living services, and involvement of family and friends. It's important to note that providing this information and assistance does not involve investigating or resolving complaints. In FFY 24, the Office provided 1,842 instances of information and assistance to individuals and 1,001 instances of information and assistance to facility staff.

*Provided Information and Assistance  
to 1,842 individuals and 1,001 staff.*

## Resident and Family Council Engagement

The OSLTCO assists [resident and family councils](#) by attending meetings, upon request, and by providing technical assistance in the development and continuation of these councils. Resident and family councils are separate meetings that give residents and their families opportunities to reach out to similarly situated individuals to discuss issues, care needs, frustrations, and personal experiences, as well as to receive support and encouragement. Representatives had 71 instances of participation in resident or family councils. FFY 24 laid the groundwork for the launch of a resident / family council online presence across the state to be rolled out in FFY 25.

## Participation in Facility Surveys

The Long-Term Care Ombudsman's Office participates in surveys conducted by the Department of Inspections, Appeals & Licensing (DIAL), which serves as the regulatory entity for long-term care facilities in Iowa to ensure their compliance with federal and state laws. The role of the Office is to provide comments; share concerns on behalf of residents, tenants, family members, and volunteers; and ensure residents' and tenants' voices are heard. Participation by the Office may include pre-survey briefing or attending the resident group interview or exit interview. In FFY 2024, Representatives of the Office participated in 192 facility surveys throughout Iowa, again reflecting a significant increase in participation.

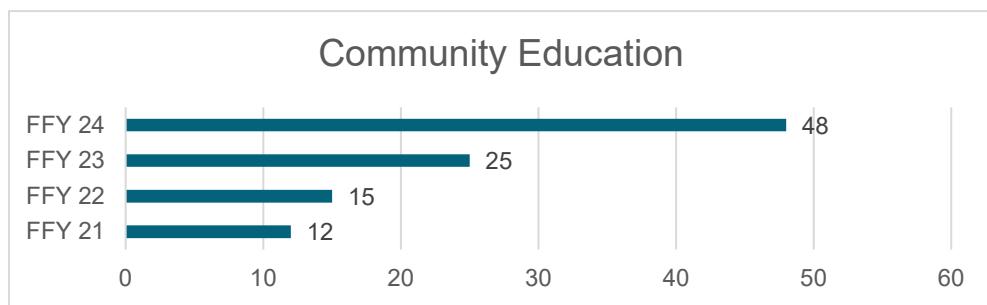
## Systemic Advocacy

In FFY 2024, the Iowa Office of the State Long-Term Care Ombudsman advanced systemic advocacy through two primary channels: regulatory oversight and public education. The Office collaborated with state agencies and stakeholders to address systemic issues such as workforce shortages, facility closures, and managed care challenges, while providing education through [town halls](#), social media campaigns, and community outreach to empower residents and families. These efforts reflect a strategic commitment to shaping laws, policies, and practices that protect the rights, safety, and dignity of Iowa's long-term care residents.

## Community Education and Outreach

The Office of the State Long-Term Care Ombudsman (OSLTCO) continued its mission to protect and promote the rights of individuals in Iowa's long-term care settings. The office amplified resident voices through statewide initiatives, stakeholder collaborations, and policy discussions, while expanding outreach via social media and launching town halls in October 2024.

Community education and outreach efforts nearly doubled compared to the previous year with the OSLTCO actively participating in workgroups addressing care quality, facility closures, and the trauma of resident transfers and worked to examine systemic issues such as staffing and private equity ownership. These efforts aimed to improve care quality and safeguard the health, safety, and dignity of Iowa's long-term care population.



Collaboration remained central to OSLTCO's approach. The office worked with Iowa HHS divisions, Adult Protective Services, Area Agencies on Aging, the Office of Public Guardian, and the Legal Assistance Developer to strengthen service coordination. Engagement with Iowa Medicaid and Managed Care Organizations focused on improving conditions for Medicaid members.

Building on lessons from FFY 2023's unprecedented facility closures, OSLTCO began conversations to prioritize crisis preparedness in 2024. Following a major evacuation, the office partnered with the Department of Inspection, Appeals and Licensing (DIAL) and Iowa HHS to provide immediate support and began updating the Crisis and Closure Manual for FFY 2025. This initiative will ensure clear protocols, timely communication, and person-centered planning during emergencies, preserving residents' autonomy and dignity.

Through advocacy, collaboration, and systemic improvement, OSLTCO remains committed to ensuring Iowa's long-term care residents receive respect, protection, and quality of life.

#### Legislative, Regulatory and Policy

In FFY 2024, the Office of the State Long-Term Care Ombudsman (OSLTCO) advanced systemic advocacy on legislation, regulations, and policies affecting the health, safety, and rights of long-term care residents. The Office monitored and commented on bills addressing issues such as personal needs allowances, electronic monitoring, dependent adult abuse, dementia services, and training for health care professionals, including:

- SF 2303 – Personal Needs Allowance
- HF 2585 – Joint Training on Common Citations
- HF 2391 / HF 2199 – Health Care Employment Agencies Maximum Charges
- HF 2317 / SF 2073 – Electronic Monitoring in Nursing Facilities
- SF 2063 – Nursing Home Administrator Training
- SF 2390 – Records Confidentiality/Dependent Adult Abuse
- SF 2008 – Dementia Services Specialists
- SF 373 – Medicaid Adult Day Care Services
- SF 92 – False Reporting of Dependent Adult Abuse
- SF 107 – Elder Abuse

Again, in FFY 24, a major focus was a grassroots campaign to increase the Medicaid Personal Needs Allowance (PNA), which remains at \$50 per month—a figure unchanged for over 20 years. Efforts included petitions, resident testimonies, social media outreach, media interviews, and educational materials. The Office also engaged residents, facilities, legislators, and stakeholders to build support. Although the increase was not achieved, the Office plans renewed advocacy in the next session through Resident Council engagement, early legislative involvement, and Town Hall meetings to expand public input. These efforts underscore the Office's commitment to ensuring Iowa's long-term care residents have a voice in policymaking.

# Challenges and Opportunities

## 1. Quality of Care/Workforce

**Systems Issue / Barrier:** Iowa faces significant challenges attracting and retaining qualified staff in long-term care facilities and continues to see high turnover among administrators and increased reliance on provisional administrators who often lack the training and experience needed to manage facility operations. This instability contributes to declining quality of care, including inconsistent use of care plans, greater risk of medication errors and falls, and staff who may not recognize changes in residents' health.

Compounding this problem is the growing dependence on agency staff. While they help fill gaps, agency staff often lack connection to the facility and its residents, resulting in less personalized care and weakened continuity of care. Their higher pay and limited accountability can also strain relationships with permanent staff, creating operational and financial pressures that are not sustainable for facilities or conducive to high-quality resident care.

**Activity by the Office:** The OSLTCO has taken a proactive role in addressing staffing-related barriers by raising awareness, educating stakeholders, and engaging in discussion to encourage meaningful reforms. The Office has participated in media interviews on staffing shortages, agency staffing impacts, and facility closures, and has provided input on proposed legislation aimed at regulating staffing agency pricing.

The Office began hosting town halls with family councils, and plans to strengthen these groups in FFY 2025. The Office encourages families and community members to stay engaged and report observed staffing issues, while also promoting culture change within facilities to ensure staff feel valued and supported.

**Proposed Solutions:** Addressing workforce challenges in Iowa's long-term care facilities requires a comprehensive approach that strengthens recruitment, retention, and workplace culture. Solutions should focus on improving wages and benefits to remain competitive, reducing chronic understaffing and excessive workloads, and ensuring strong, stable leadership within facilities. Facilities should be investing in training and professional development, especially for new and provisional administrators—to help build a more skilled and confident workforce.

Facilities must also foster supportive, person-centered work environments where staff feel valued, engaged, and empowered to provide high-quality care. Reducing overreliance on agency staff, strengthening community and family involvement, and promoting collaboration among state agencies, providers, and advocacy groups can help stabilize the workforce and improve continuity of care for residents.

## 2. Facility Ownership Accountability During Closures

Systems Issue/Barrier Long-term care (LTC) facilities serve highly vulnerable residents who depend on stable, high-quality care. Yet Iowa has faced a surge in facility closures—more than 20 in FFY 2023 and another 13 in FFY 2024.

Name	City	Facility Type	Beds	Date
Danville Care Center	Danville	SNF/NF	40	10-09-2023
Shirlee's Retirement Home	Indianola	RCF	14	11-6-2023
Accura Healthcare of Manning	Manning	SNF/NF	46	11-11-2023
Community Care of Knoxville	Knoxville	RCF	29	01-31-2024
Monroe Care Center	Albia	SNF/NF	60	05-03-2024
Vita Health Services	Des Moines	RCF	15	05-08-2024
EPIC House	Waterloo	RCF	12	05-10-2024
Goldenrod Manor	Clarinda	SNF/NF	40	05-23-2024
Courtyard Estates at Cedar point	Pleasant Hill	ALP/D	60	06-07-2024
Prairie View	Fayette	RCF	13	06-11-2024
Morning Sun Care Center	Morning Sun	SNF/NF	65	09-09-2024
Aspire of Donnellson	Donnellson	SNF/NF	46	09-09-2024
Oakhill Assisted Living	Hawarden	AL	18	09-30-2024

Poorly managed closures often create traumatic and unsafe conditions: residents are evacuated without essential belongings, funds and personal property go unreturned, and facility owners frequently disengage from the process entirely. Missing assessments and legal documents delay timely placement, while residents' rights to choose their next home are sometimes ignored in favor of transfers to affiliated facilities.

Systemic challenges intensify when corporate leaders become unresponsive, receiverships lack familiarity with facilities, and unpaid bills lead to staffing shortages and operational instability. These failures result in resident trauma, staff burden, erosion of rights, and significant logistical and financial strain on the state.

**Activity by the Office:** The OSLTCO continues to educate stakeholders, including the public, media, and legislators—about the impacts of closures, consistently emphasizing owner accountability. We highlight recurring issues and share guidance on residents' rights, staff needs, and the operational failures that worsen transitions.

The Office has developed [educational brochures and videos](#) to support families during closures and has collaborated in FFY 2024 to update Iowa's Closure and Crisis Manual, ensuring clearer communication and defined roles for all agencies involved. Additionally, the OSLTCO actively participates in efforts to strengthen the CHOW process, including examining risks associated with real estate investment trust ownership, which often fails to improve resident care.

**Proposed Solutions:** To protect residents and uphold ethical and legal standards, Iowa should consider enhanced regulatory enforcement around closures, including stricter

requirements for owner accountability, timely documentation, and safeguarding resident funds and property. The state should establish stronger oversight mechanisms to ensure owners cannot abandon responsibilities during or after closure.

Additional supports—such as transition teams, staff stabilization strategies, and clear communication protocols—can reduce trauma and ensure resident choice is honored. Coordinated action among regulators, facility owners, healthcare professionals, and community advocates is essential to ensure closures are handled responsibly and that vulnerable residents remain protected.

## Recommendations for Optimization of Long-Term Care Program Operations

### **1. Implement a Shared Involuntary Transfer and Discharge Portal**

To improve efficiency, transparency, and resident protections, Iowa should implement a centralized electronic portal for submitting facility-initiated (involuntary) transfer and discharge notices. The Office receives a large number of notices in multiple formats—certified mail, email, and regular mail—creating delays and administrative burdens. A discharge portal would ensure:

- Regulatory Compliance: Federal and state regulations require facilities to submit copies of all involuntary transfer or discharge notices to the Ombudsman Program. A portal ensures consistent and accurate submission.
- Timely Response: Appeal timeframes are short; delays in receiving notices can result in residents being discharged without exercising their right to appeal.
- Transparency and Accountability: A centralized system provides clear documentation and audit trails for all parties involved.
- Resident Rights are Protected: Streamlining the process helps protect residents' rights and supports their ability to make informed choices about where they live.

Expected Impact: A streamlined portal would ensure timely communication, support residents' rights, and help facilities comply with federal and state regulations.

### **2. Strengthen Long-Term Care Volunteer Programming**

Volunteers are an integral part of a more responsive, proactive, and effective ombudsman program that ensures higher standards of care and greater advocacy for Iowa's aging population.

While the Office has engaged in several significant changes to programming, without additional funding, the efforts to make a notable impact and increase in volunteer recruitment will remain stagnant. The existing pool of volunteers do not receive any type of reimbursement for travel, recognition events and they have few opportunities to build out local volunteer peer groups or support systems. Strengthening the programming could:

- Protect Vulnerable Residents: Many rural long-term care residents have little or no family involvement, making the Ombudsman Program their only independent advocate. Strengthening the program ensures equitable protection for older Iowans regardless of location or resources.
- Expand Rural Oversight: A volunteer framework increases coverage in rural counties without adding full-time staff. Local volunteers bring community knowledge, improving oversight effectiveness and cultural relevance.

- Prevent Abuse and Costly Interventions: Timely engagement by trained volunteers helps prevent abuse, neglect, and rights violations. Early resolution reduces emergency transfers, hospitalizations, and investigations, improving outcomes and lowering costs.
- Provide a High Return on Investment: Program investments are amplified through volunteer contributions. Volunteers resolve issues at the facility level, easing demand on regulatory agencies and law enforcement, making this a cost-effective oversight model.

**Expected Impact:** By increasing support and resources for volunteers and volunteer engagement, the state can enhance its capacity to monitor care facilities, address complaints, and protect the rights of long-term care residents, all while empowering volunteers and strengthening the connection between residents, families, and the broader community.

### **3. Develop and Engage Resident and Family Councils in Iowa**

In Iowa, many long-term care facilities are located in rural communities where resources, staffing support, and access to external advocacy are often limited. Resident and family councils offer a structured, reliable mechanism for ensuring that residents and their loved ones can meaningfully participate in decisions that shape daily life within these settings. By promoting self-advocacy, communication, and collaboration, these councils help strengthen accountability and enhance the overall quality of life—particularly in underserved rural regions. Resident and Family councils can:

- Empower Residents and Families: Resident and family councils give residents a formal voice to share concerns, suggest improvements, and influence decisions that affect daily life. They also keep families engaged in care planning, reduce stress during transitions, and strengthen confidence in the quality of care.
- Improve Communication and Accountability: Councils create consistent channels for dialogue between residents, families, and staff, leading to faster resolution of issues. This transparency builds trust and accountability, motivating facilities to maintain high standards of care.
- Enhance Care Quality and Well-Being: By providing direct feedback on care and activities, councils help facilities deliver resident-centered services and identify problems early. Participation fosters social engagement, reduces isolation, and promotes a stronger sense of community.

**Expected Impact:** Expanding support for councils statewide, especially in rural and underserved areas, could help to ensure that residents' needs remain central, families are empowered, and facilities operate with greater accountability, collaboration, and quality.

#### **4. Iowa Long-Term Care Collaborative**

It is recommended that Iowa consider a Long-Term Care Collaborative to strengthen the quality, coordination, and accountability of the state's long-term care system. Serving as a unified, central forum, the Collaborative could bring together residents, families, providers, advocates, and state agencies to improve communication, oversight, and responsiveness across care settings. A collaborative could:

- Strengthen Communication and Shared Problem-Solving: The Collaborative would create a consistent space for residents, families, providers, advocacy groups, and policymakers to discuss challenges, share information, and develop coordinated solutions.
- Improve Coordination Across State Agencies: Regular collaboration among the Department of Inspections, Appeals and Licensing (DIAL), the Department of Human Services (DHS), and other stakeholders would reduce silos, streamline oversight processes, and make it easier for residents and families to navigate complaints and services.
- Strengthen Advocacy and Public Confidence: A unified forum helps identify priority policy issues—such as workforce shortages, reimbursement rates, and resident protections—and supports coordinated advocacy for legislative change.

**Expected Impact:** A Long-Term Care Collaborative could be a practical, high-impact effort that could strengthen the quality, coordination, and efficiency of long-term care across the state. By improving communication and fostering inter-agency cooperation, the Collaborative would work to enhance protections for vulnerable residents and promote innovative, cost-saving care models to move Iowa's long-term care landscape forward.

## Looking Ahead

We are grateful for the collaboration of residents, families, facility staff, volunteers, advocates, and our partners across Iowa. Building on the progress outlined here, the Office will pursue the priorities identified—modernizing discharge notification processes, expanding volunteer capacity, supporting robust resident and family councils, and exploring a statewide Long-Term Care Collaborative—to ensure consistent, person-centered advocacy in every care setting. We remain committed to amplifying the voices of Iowans receiving long-term services and supports, strengthening accountability, and delivering solutions that protect health, safety, dignity, and rights across our long-term care system.

## Staff Listing

### Office of the State Long-Term Care Ombudsman

**(9/30/2024)**

**Angela Van Pelt**

State Long-Term Care Ombudsman

**Melanie Kempf**

Executive Officer

**Chasity Jones**

Administrative Team

**Beth Burke**

Long-Term Care Ombudsman

**Kim Cooper**

Long-Term Care Ombudsman

**Tiffani Crow**

Long-Term Care Ombudsman

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**Angie O'Brien**

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**Pam Railsback**

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Please use this [online form](#) to submit your inquiry or concern to the Iowa Office of the State Long-Term Care Ombudsman (OSLTCO).