Case 13-31098-KRH Doc 247 Filed 06/13/13 Entered 06/13/13 15:53:19 Desc Main Document Page 1 of 8

# IN THE UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA RICHMOND DIVISION

In re:	
	Case No. 13-31098-KRH
VIRGINIA UNITED METHODIST HOMES	
OF WILLIAMSBURG, INC.,	

Chapter 11

Debtor.

## NOTICE OF FILING OF REPORT OF OMBUDSMAN

Judy A. Robbins, U.S. Trustee for Region Four, (the "U.S. Trustee), by counsel, gives Notice that the Ombudsman appointed in this case, Joani Latimer, State Long-Term Care Ombudsman, hereby files her First and Final Report in this case. Due to a misunderstanding between Ms. Latimer and the Office of the U.S. Trustee, this Report is being filed outside of the 60 day period provided for in the Bankruptcy Code. The U.S. Trustee respectfully request the Court to accept this late-filed report as this error was unintentional and harmless in light of the conclusions of the report.

The report is attached as Exhibit "A" to this Notice.

Respectfully submitted,

JUDY A. ROBBINS United States Trustee Region Four

Date: June 13, 2013

By: /s/Robert B. Van Arsdale

Robert B. Van Arsdale

### **CERTIFICATION OF SERVICE**

I, the undersigned, do hereby certify that on June 13, 2013, a true copy of the foregoing was served via electronic delivery and/or first class mail, postage prepaid, to the following parties at the addresses below:

Robert S. Westermann Hirschler Fleischer, P.C. 2100 East Cary Street The Edgeworth Building Richmond, VA 23223

Virginia United Methodist Homes of Williamsburg, Inc. 7113 Three Chopt Road, Suite 300 Richmond, VA 23226

/s/Robert B. Van Arsdale
Robert B. Van Arsdale
Assistant U.S. Trustee
Office of the United States Trustee
701 East Broad Street - Suite 4304
Richmond, VA 23219
Telephone (804) 771-2310

### **EXHIBIT "A"**

# IN THE UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA RICHMOND DIVISION

In re:		Case No. 13-31098-KRH
VIRGINIA UNITED METHODIST HOMES OF WILLIAMSBURG, INC.,  Debtor.	Chapter 11	
	FIRST AND FINAL REPORT OF PATIENT HEALTH CARE OMBUDSMAN	

On March 28, the United State Bankruptcy Court for the Eastern District of Virginia, Richmond Division, entered an Order authorizing the U.S. Trustee for Region 4 to appoint a Patient Care Ombudsman in the above-styled case in accordance with the provisions of 11 U.S.C. § 333. The U.S. Trustee determined after inquiry that the State Long-Term Care Ombudsman, Joani F. Latimer of Richmond, Virginia is qualified to hold the position as provided for in 11 U.S..C. § 333 (a)(2)(B) and is a disinterested person as defined in 11 U.S.C. § 101 (14). The ombudsman is tasked with monitoring the quality of patient care, including interviewing patients and staff and reporting to the court. This report is being submitted as an initial report for the benefit of the Debtor, the Creditor, Consumers of the Debtor, and the Court. The report describes the preliminary findings based on the monitoring activities of the Office of the State Long-Term Care Ombudsman carried out by the designated local representative of the State Ombudsman assigned to the geographic area in which the Debtor is located.

#### I. ACTIVITIES

A. Facility visits/interviews /observations:

The Patient Care Ombudsman representative (PCO) made three separate monitoring visits to the facility:

### April 26, 2013:

- 1. Two (2) Facility staff interviewed:
  - a. Marilyn Gladding, Executive Director
  - b. Robin Page, Assistant Executive Director
- 2. Two (2) residents interviewed No complaints

Both of the residents interviewed appeared clean and well-groomed and comfortable in their surroundings. They voiced no complaints and indicated they were satisfied with care at the facility.

#### May 1, 2013:

- 1. Four (4) staff interviewed
- 2. Seven (7) residents contacted for interviews.

Four of the seven were successfully interviewed. One resident who appeared very neatly dressed in clean clothes and well-groomed said she would like to receive additional baths if possible. PCO advised the staff of the request and staff was receptive. No additional complaints were raised and all other

comments received from residents successfully interviewed indicated a high level of satisfaction with the care at the facility.

## May 3. 2013:

Ombudsman met with Robin Page, Assistant Executive Director and provided information and observations from previous facility visits and interviews with residents. Ms. Page and PCO discussed whether any changes in services/staffing had taken place since the initiation of the legal proceedings and whether any such changes were anticipated. When POC asked about food preparation in particular, Assistant Director indicated that to this point all meals served to the residents in the nursing facility section are prepared in the main kitchen for the extended care facility so that unless nursing facility level residents are on special diets of some kind, they are served the same menu as is served in the dining room. Per interviews with staff and residents, no changes have been noted in the quality or quantity of the food since the facility opened. The administration's plan is to eventually have a self-contained kitchen and dietary staff within the nursing facility portion so that nursing facility residents' food will be prepared on-site within the unit.

#### 3. Complaint Handling::

On all monitoring visits, the Patient Care Ombudsman (PCO) communicated to the facility's residents and staff her availability to receive and respond to complaints regarding resident care at the facility. No complaints were received

over the course of the monitoring visits, but one resident expressed a preference to have additional baths if possible and the ombudsman communicated this request to the staff.

#### CONCLUSION/FINDINGS

Monitoring visits were conducted by the local ombudsman, who is the duly authorized and designated representative of the State Long-Term Care Ombudsman, who is responsible for the statewide Ombudsman Program and, for purposes of these proceedings, assigned responsibility as Patient Care Ombudsman. The local Ombudsman is employed by "Bay Aging", a private non-profit agency that operates the local Long-Term Care Ombudsman Office under its contract with the Virginia Department for Aging and Rehabilitative Services, which operates the Office of the State Long-Term Care Ombudsman. The Debtor falls within the assigned geographical jurisdiction of the Bay Aging's local ombudsman office.

The Debtor, Virginia United Methodist Homes of Williamsburg,, Virginia, also known as "Windsor-Meade of Williamsburg," is a 12-bed facility certified for Medicare and operated under private non-profit, church-related ownership. At the time of the Court's assignment of the Patient Care Ombudsman, there were nine (9) individuals in residence in the licensed nursing facility.

The Ombudsman made three separate patient care monitoring visits to the facility at varying times of day on April 26, 2013, May 1, 2013, and May 3, 2013. At the time of the Ombudsman's initial visit, the Ombudsman was informed by the facility's administrative staff that correspondence advising residents/family members of the facility's bankruptcy filing had already been distributed to residents or their legal representatives. All residents/representatives were invited to a staff-

orchestrated meeting to provide information about the facility's status and respond to questions/concerns. On April 26 and on subsequent visits, the Ombudsman conducted interviews with residents and staff of the facility as noted. At the time of the Ombudsman's initial visit, she discussed with facility staff her role as Patient Care Ombudsman (PCO) and the activities s that the facility could anticipate as she carried out the duties of the PCO. The administrative staff communicated an understanding of the PCO's role and extended full cooperation to the PCO representative in carrying out that role.

Based on visits to the facility, interviews with staff, and observation of, and interviews with, residents, the Patient Care Ombudsman sees no evidence of conditions that are negatively impacting residents of the facility. In terms of interviews with residents, sampling was based on a fairly limited pool because (1) there were only nine residents of the facility during the monitoring period and (2) a number of those residents were able to effectively be interviewed because of limitations in their ability to communicate extensively, secondary to sensory impairments and/or some degree of dementia that limited understanding and verbalization. The residents who were successfully interviewed by the Ombudsman consistently communicated a high degree of satisfaction with services at the facility and appeared during all visits to be clean, well-groomed, reasonably comfortable and well treated by staff. Interviews and observation suggest that the facility has been able to maintain a stable and adequate level of staff, inclusive of licensed clinical staff, unlicensed direct care staff and ancillary professionals such as activities and social work staff.

The physical environment appeared on all visits to be well maintained, clean, and orderly, both in common areas and in individual resident rooms. There was no indication of declines or interruptions of regular services and supplies. None of the residents or staff interviewed gave indication of a discontinuity or degradation of services.

In conclusion, the Patient Care Ombudsman and her representative wish to thank the Assistant U.S.

Trustee, Mr. Van Arsdale, and Virginia United Methodist Home in Williamsburg, consumers, and
others who have generously contributed their time to assist the PCO in her duties.

Respectfully submitted,

/s/ Joani Latimer

Joani Latimer

State Long-Term Care Ombudsman'

Virginia Department for Aging and

Rehabilitative Services