



NJ OFFICE OF THE LONG-TERM CARE OMBUDSMAN VOLUNTEER ADVOCATE PROGRAM APPLICATION

DATE: _____

NAME: _____ PREFERRED GENDER PRONOUN: _____

ADDRESS: _____

COUNTY: _____

EMAIL ADDRESS: _____

PHONE# HOME: _____ WORK: _____ CELL: _____

ARE YOU VACCINATED FOR COVID-19? (SEE ATTACHED ACKNOWLEDGMENT) Yes No

WHY WOULD YOU LIKE TO BECOME A VOLUNTEER ADVOCATE?

HOW DID YOU LEARN ABOUT THE VOLUNTEER ADVOCACY PROGRAM?

HAVE YOU EVER VISITED A RELATIVE /FRIEND IN A NURSING HOME? Yes No

PLEASE DESCRIBE YOUR EXPERIENCES:

WHAT DAYS AND TIMES ARE MOST CONVENIENT FOR YOU TO VOLUNTEER?

DO YOU HAVE TRANSPORTATION TO TAKE YOU TO THE ASSIGNED FACILITY WEEKLY? Yes No

WILL YOU BE ABLE TO SPEND AN AVERAGE OF FOUR HOURS WEEKLY? Yes No

ARE YOU WILLING TO KEEP RECORDS AND COMPLETE REPORTS? Yes No

VOLUNTEER EXPERIENCE

HAVE YOU EVER BEEN A VOLUNTEER BEFORE? IF SO, PLEASE LIST PREVIOUS EXPERIENCES:

(IF MORE SPACE IS NEEDED, ATTACH SEPARATE SHEET.)

DATE FROM: _____ TO: _____

NAME OF ORGANIZATION: _____

TYPE OF ORGANIZATION: _____

DUTIES: _____

EMPLOYMENT HISTORY

PLEASE LIST PREVIOUS WORK EXPERIENCE IF APPLICABLE:

DATE FROM: _____ TO: _____

EMPLOYER: _____

TYPE OF BUSINESS: _____

JOB DUTIES: _____

DATE FROM: _____ TO: _____

EMPLOYER: _____

TYPE OF BUSINESS: _____

JOB DUTIES: _____

HAVE YOU EVER WORKED IN A LONG-TERM CARE FACILITY BEFORE? YES NO

WHERE?

IN WHAT CAPACITY?

EDUCATION

HIGH SCHOOL: COLLEGE: 1 2 3 4 (CHECK YEAR COMPLETED)

MAJOR AREA OF STUDY: DEGREE:

OTHER STUDIES:

ANY ADDITIONAL INFORMATION YOU FEEL MAY BE USEFUL:

PLEASE LIST THREE REFERENCES WE MAY CONTACT (NO RELATIVES)

REFERENCE #1

NAME:

ADDRESS:

PHONE#

RELATIONSHIP: PERSONAL or PROFESSIONAL

REFERENCE #2

NAME:

ADDRESS:

PHONE#

RELATIONSHIP: PERSONAL or PROFESSIONAL

REFERENCE #3

NAME:

ADDRESS:

PHONE#

RELATIONSHIP: PERSONAL or PROFESSIONAL

PLEASE RETURN THIS APPLICATION TO:

**NJ OFFICE OF THE LONG-TERM CARE OMBUDSMAN
VOLUNTEER ADVOCATE PROGRAM**

P.O. BOX 852

TRENTON, NJ 08625-0852

volunteer@ltco.nj.gov

OR FAX TO: 609-943-3479



VOLUNTEER ADVOCATE PROGRAM

Overview

The New Jersey Office of the Ombudsman for the Institutionalized Elderly was created by statute to preserve and protect the health, safety and welfare of seniors, 60 years of age or older, residing in long-term health care facilities.

The Volunteer Advocate Program adds a new dimension to that mandate by establishing a visible presence within the facilities to represent the need and concerns of residents. Volunteer Advocates are trained and certified by the Office of the Ombudsman to provide on-site advocacy to residents and their family members. Advocates complement the investigative function of the Ombudsman's Office by attempting to resolve issues at the lowest level in the long-term care facility and referring complaints of abuse, neglect and exploitation for investigation.

The Volunteer Advocate Program (VAP) started in 1993 as a pilot project in Essex, Hudson, Morris and Union Counties. Due to the success of the pilot, the Volunteer Advocate Program was expanded in 1995 to include all 21 counties in New Jersey. Today, there are approximately 150 Volunteer Advocates assigned to nursing homes throughout the state. The goal of the program is to recruit volunteers to be placed in all skilled nursing facilities. The second phase of the program is to recruit and train volunteers to be assigned to assisted living facilities to advocate for the rights of residents.

Mission Statement

The mission of the Volunteer Advocate Program is to provide the best on-site advocacy service to assist long-term care residents, their family members, and facility staff in proactively resolving quality of care and quality of life issues as close to the bedside as possible.

By utilizing teams of volunteers, professional staff and the local agency resources, the Office of the Long-Term Care Ombudsman Volunteer Advocate Program initiative shall strive to improve levels of care received, to enhance the quality of life experienced and through consistent presence and advocacy may prevent abuse, neglect and exploitation of New Jersey's residents who reside in long-term care facilities.

Major Functions of Volunteer Advocates:

- Maintain presence in long-term care facilities.
- Respond to concerns and complaints to resolve through communication and resolution techniques.
- Educate and inform residents, family members, and staff about residents' rights and Ombudsman services.
- Empower residents to advocate on their own behalf by exercising their rights.

Volunteer Advocate Job Description

Volunteer Advocate Program Mission: To promote the well-being and quality of life for residents who reside in long-term care facilities in New Jersey.

Volunteer Advocate Reports To: Regional Coordinator and Manager, Volunteer Advocate Program, NJ Office of the Long-Term Care Ombudsman

DUTIES AND RESPONSIBILITIES

- ✓ Volunteer Advocates will make regular weekly visits to assigned long-term care facility to meet with residents;
- ✓ Educate residents and their family members about Ombudsman's programs and residents' rights;
- ✓ Empower residents to advocate for themselves by exercising their rights;
- ✓ Proactively resolve quality of care and quality of life issues within the long-term care facility through the facility's assigned contact person;
- ✓ Collaborate with Ombudsman Field Investigators in resolving issues that are referred for investigation by the Volunteer Advocate;
- ✓ When invited, make collaborative site visits with Ombudsman Field Investigators to review complaints or concerns;
- ✓ Follow LTCO's reporting and documentation procedures in instances of possible abuse, neglect and or exploitation;
- ✓ Maintain accurate records of problems/concerns reported; complete and submit monthly activity reports to Regional Coordinator; attend Resident and Family Council Meetings when invited;

- ✓ Attend the annual survey conducted by the Department of Health and discuss with survey team representatives any concerns or issues the Volunteer Advocate may have with the quality of care or the quality of life of the long-term care facility's residents; Report these findings to the Regional Coordinator; and
- ✓ Attend quarterly in-service/educational meetings held by Regional Coordinator;

QUALIFICATIONS

Applicants must meet the following requirements for participation in the Volunteer Advocate Program:

- Twenty-one (21) years of age or older and possess a valid New Jersey driver's license or have access to public transportation.
- Interested in promoting and protecting the rights of long-term care residents.
- Dependable, possess good verbal skills, including active listening skills.
- Free from conflict of interest. (See Mission Statement/Conflict of Interest Form).
- Not a habitual user of controlled dangerous substances. Has never been convicted of a felony or pleaded guilty to an indictment, information or complaint alleging violation of a federal or state law.

TIME COMMITMENT

Attend a thirty-six (36) hour virtual training class, pass certification exam with a grade of 70% or higher; shadow an experienced Volunteer Advocate; attend quarterly regional meetings; and visit an assigned long-term care facility for a minimum of four (4) hours per week.

SUPERVISION

Volunteer Advocates are directly supervised by the Regional Coordinator in conjunction with the Program Manager who is responsible for providing overall supervision for the Volunteer Advocate Program.

NOTE:

- Volunteer Advocates are advised not to administer food or liquids including, but not limited to, water, alcohol, hot or cold beverages to residents.
- Volunteer Advocates are not permitted to dispense medications, including over-the-counter drugs.

- Volunteer Advocates are not permitted to give direct care to the residents of the long-term care, including, but not limited to, change a resident's clothes, perform body checks, lift or turn (re-position) a resident, push a wheelchair, or assist with feeding or toileting a resident.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE JOB DESCRIPTION AND AM CAPABLE OF PERFORMING ALL OF THE STATED REQUIREMENTS.

Volunteer Advocate _____ Date _____
[Signature]

Regional Coordinator _____ Date _____
[Signature]

Note: Do Not Sign This Document! Signature only required upon granting of an interview.



VOLUNTEER ADVOCATE PROGRAM

OMBUDSMAN MISSION STATEMENT

The mission of the NJ Office of the Long-Term Care Ombudsman is to secure and protect the rights, and to promote the dignity, of citizens residing in long-term health care facilities. The Office of the Long-Term Care Ombudsman seeks to enhance the quality of life and improve the level of care provided to New Jersey's long-term care residents.

INDIVIDUAL CONFLICT OF INTEREST

An individual may not serve as a Volunteer Advocate in the NJ Office of the Long-Term Care Ombudsman when the following conditions exist:

- A person or a member of the person's immediate family* has
 - (i) Direct involvement in the licensing or certification of a long-term care facility;
 - (ii) Ownership, operational, or investment interest (represented by equity, debt, or other financial relationship) in an existing or proposed long-term care facility;
 - (iii) Employment of an individual by, or participation in the management of, a long-term care facility in the service area or by the owner or operator of any long-term care facility in the service area;
 - (iv) Receipt of, or right to receive, directly or indirectly, remuneration (in cash or in kind) under a compensation arrangement with an owner or operator of a long-term care facility;
 - (v) Accepting gifts or gratuities of significant value from a long-term care facility or its management, a resident or a resident representative of a long-term care facility in which the Ombudsman or representative of the Office provides services (except where there is a personal relationship with a resident or resident

representative which is separate from the individual's role as Ombudsman or representative of the Office);

- (vi) Accepting money or any other consideration from anyone other than the Office, or an entity approved by the Ombudsman, for the performance of an act in the regular course of the duties of the Ombudsman or the representatives of the Office without Ombudsman approval;
- (vii) Serving as guardian, conservator or in another fiduciary or surrogate decision-making capacity for a resident of a long-term care facility in which the Ombudsman or representative of the Office provides services;
- (viii) Serving residents of a facility in which an immediate family member resides.

**Immediate family*, means a member of the household or relative with whom there is a close personal or significant financial relationship.

✚ A person has been terminated from employment by a long-term care facility within the last five (5) years.

✚ A person has been convicted of a crime or other offense which has not been expunged by the Court, either in New Jersey or in any other jurisdiction.

Applicants must be interviewed and successfully complete training and certification prior to placement in a long-term care facility. Volunteer Advocates will be required to attend regional quarterly meetings.

Print Name

Date

Signature



VOLUNTEER ADVOCATE PROGRAM

Consent to Criminal Background Check

Due to the nature of this Volunteer Advocate position, a criminal background check will assist the State Long-Term Care Ombudsman's designee in making an informed decision about an applicant's qualifications for the Volunteer Advocate Program.

In assessing the pertinence of a criminal record or a conviction record, the State Long-Term Care Ombudsman or the designee will consider all relevant factors including, but not limited to, the nature of the crime. The State Long-Term Care Ombudsman may exercise discretion and provide you an opportunity to review and challenge the information obtained.

After the initial screening to become a Volunteer Advocate, you will receive a consent form asking for the information needed to conduct a criminal background check. The background check will be completed before you are placed in a long-term care facility.

Please note that this Consent to Criminal Background Check is confidential and will be placed in your volunteer application file. The information obtained will remain confidential. Upon requests from law enforcement agencies, the State Long-Term Care Ombudsman shall disclose this information. In addition, the State Long-Term Care Ombudsman shall disclose this information to third parties when federal and state laws mandate.

I have read and understand this consent form. I authorize the State Long-Term Care Ombudsman or the designee to conduct a criminal background check. I agree to provide the NJ Office of the Long-Term Care Ombudsman with the information necessary to complete a criminal background check. I understand if I falsify, withhold, or misrepresent any information or facts deemed necessary to complete a criminal background check the remedy may be immediate termination from the Volunteer Advocate Program.

Print Name

Signature

Date