

Agency or organization which sponsors the State Ombudsman Program: Ombudsman, Institutionalized Elderly

Part I - Cases, Complainants and Complaints

A. Cases Opened

Provide the total number of cases opened during reporting period.

3,059

Case: Each inquiry brought to, or initiated by, the ombudsman on behalf of a resident or group of residents involving one or more complaints which requires opening a case and includes ombudsman investigation, strategy to resolve, and follow-up.

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B. Cases Closed, by Type of Facility

Provide the number of cases closed, by type of facility/setting, which were received from the types of complainants listed below.

Closed Case: A case where none of the complaints within the case require any further action on the part of the ombudsman and every complaint has been assigned the appropriate disposition code.

Complainants:	Nursing Facility	B&C, ALF, RCF, etc.*	Other Settings
1. Resident	135	32	11
2. Relative/friend of resident	811	183	29
3. Non-relative guardian, legal representative	15	7	0
4. Ombudsman/ombudsman volunteer	15	3	0
5. Facility administrator/staff or former staff	1,161	353	70
6. Other medical: physician/staff	62	12	3
7. Representative of other health or social service agency or program	38	26	15
8. Unknown/anonymous	72	42	13
9. Other: Bankers, Clergy, Law Enforcement, Public Officials, etc.	30	7	0

Total number of cases closed during the reporting period:

3,145

* Board and care, assisted living, residential care and similar long-term care facilities, both regulated and unregulated

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C. Complaints Received

For cases which were closed during the reporting period (those counted in B above), provide the total number of complaints received:

6,164

Complaint: A concern brought to, or initiated by, the ombudsman for investigation and action by or on behalf of one or more residents of a long-term care facility relating to health, safety, welfare or rights of a resident. One or more complaints constitute a case.

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D. Types of Complaints, by Type of Facility

Below and on the following pages provide the total number of complaints for each specific complaint category, for nursing facilities and board and care or similar type of adult care facility. The first four major headings are for complaints involving action or inaction by staff or management of the facility. The last major heading is for complaints against others outside the facility. See Instructions for additional clarification and definitions of types of facilities and selected complaint categories.

Residents' Rights

A. Abuse, Gross Neglect, Exploitation

- 1. Abuse, physical (including corporal punishment)
- 2. Abuse, sexual
- 3. Abuse, verbal/psychological (including punishment, seclusion)
- 4. Financial exploitation (use categories in section E for less severe financial complaints)
- 5. Gross neglect (use categories under Care, Sections F & G for non-willful forms of neglect)
- 6. Resident-to-resident physical or sexual abuse
- 7. Not Used

	Nursing Facility	B&C, ALF, RCF, etc.
	250	50
	40	9
	143	35
	32	32
	24	4
	85	29

B. Access to Information by Resident or Resident's Representative

- 8. Access to own records
- 9. Access by or to ombudsman/visitors
- 10. Access to facility survey/staffing reports/license
- 11. Information regarding advance directive
- 12. Information regarding medical condition, treatment and any changes
- 13. Information regarding rights, benefits, services, the resident's right to complain
- 14. Information communicated in understandable language
- 15. Not Used

	16	4
	35	7
	0	0
	1	0
	84	16
	9	1
	0	0

C. Admission, Transfer, Discharge, Eviction

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16. Admission contract and/or procedure	9	19
17. Appeal process - absent, not followed	0	0
18. Bed hold - written notice, refusal to readmit	12	10
19. Discharge/eviction - planning, notice, procedure, implementation, inc. abandonment	312	126
20. Discrimination in admission due to condition, disability	1	1
21. Discrimination in admission due to Medicaid status	3	13
22. Room assignment/room change/intrafacility transfer	39	12
23. Not Used		
D. Autonomy, Choice, Preference, Exercise of Rights, Privacy		
24. Choose personal physician, pharmacy/hospice/other health care provider	4	0
25. Confinement in facility against will (illegally)	36	2
26. Dignity, respect - staff attitudes	118	10
27. Exercise preference/choice and/or civil/religious rights, individual's right to smoke	37	8
28. Exercise right to refuse care/treatment	50	5
29. Language barrier in daily routine	23	0
30. Participate in care planning by resident and/or designated surrogate	14	9
31. Privacy - telephone, visitors, couples, mail	22	5
32. Privacy in treatment, confidentiality	8	6
33. Response to complaints	20	2
34. Reprisal, retaliation	12	2
35. Not Used		
E. Financial, Property (Except for Financial Exploitation)		
36. Billing/charges - notice, approval, questionable, accounting wrong or denied (includes overcharge of private pay residents)	50	21
37. Personal funds - mismanaged, access/information denied, deposits and other money not returned (report criminal-level misuse of personal funds under A.4)	23	5

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38. Personal property lost, stolen, used by others, destroyed, withheld from resident	63	31
39. Not Used		
Resident Care		
F. Care		
40. Accidental or injury of unknown origin, falls, improper handling	372	55
41. Failure to respond to requests for assistance	103	14
42. Care plan/resident assessment - inadequate, failure to follow plan or physician orders (put lack of resident/surrogate involvement under D.30)	574	123
43. Contracture	2	0
44. Medications - administration, organization	113	25
45. Personal hygiene (includes nail care & oral hygiene) and adequacy of dressing & grooming	105	13
46. Physician services, including podiatrist	42	0
47. Pressure sores, not turned	125	5
48. Symptoms unattended, including pain, pain not managed, no notice to others of changes in condition	162	44
49. Toileting, incontinent care	99	2
50. Tubes - neglect of catheter, gastric, NG tube (use D.28 for inappropriate/forced use)	27	0
51. Wandering, failure to accommodate/monitor exit seeking behavior	25	15
52. Not Used		
G. Rehabilitation or Maintenance of Function		
53. Assistive devices or equipment	45	4
54. Bowel and bladder training	0	0
55. Dental services	7	1
56. Mental health, psychosocial services	2	2
57. Range of motion/ambulation	9	0
58. Therapies - physical, occupational, speech	29	0

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59. Vision and hearing	7	1
60. Not Used		
H. Restraints - Chemical and Physical		
61. Physical restraint - assessment, use, monitoring	18	3
62. Psychoactive drugs - assessment, use, evaluation	18	6
63. Not Used		
Quality of Life		
I. Activities and Social Services		
64. Activities - choice and appropriateness	14	18
65. Community interaction, transportation	4	4
66. Resident conflict, including roommates	16	7
67. Social services - availability/appropriateness/ (use G.56 for mental health, psychosocial counseling/service)	17	1
68. Not Used		
J. Dietary		
69. Assistance in eating or assistive devices	32	2
70. Fluid availability/hydration	53	4
71. Food service - quantity, quality, variation, choice, condiments, utensils, menu	26	6
72. Snacks, time span between meals, late/missed meals	11	4
73. Temperature	8	1
74. Therapeutic diet	19	4
75. Weight loss due to inadequate nutrition	35	6
76. Not Used		
K. Environment		
77. Air/environment: temperature and quality (heating, cooling, ventilation, water, noise)	22	5
78. Cleanliness, pests, general housekeeping	51	27
79. Equipment/building - disrepair, hazard, poor lighting, fire safety, not secure	32	19

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80. Furnishings, storage for residents	5	0
81. Infection control	31	3
82. Laundry - lost, condition	8	1
83. Odors	16	1
84. Space for activities, dining	0	0
85. Supplies and linens	4	2
86. Americans with Disabilities Act (ADA) accessibility	0	0
Administration		
L. Policies, Procedures, Attitudes, Resources (See other complaint headings, of above, for policies on advance directives, due process, billing, management residents' funds)		
87. Abuse investigation/reporting, including failure to report	70	32
88. Administrator(s) unresponsive, unavailable	14	5
89. Grievance procedure (use C for transfer, discharge appeals)	0	0
90. Inappropriate or illegal policies, practices, record-keeping	174	60
91. Insufficient funds to operate	1	0
92. Operator inadequately trained	1	0
93. Offering inappropriate level of care (for B&C/similar)	4	10
94. Resident or family council/committee interfered with, not supported	0	0
95. Not Used		
M. Staffing		
96. Communication, language barrier (use D.29 if problem involves resident inability to communicate)	8	1
97. Shortage of staff	24	9
98. Staff training	11	3
99. Staff turn-over, over-use of nursing pools	1	1
100. Staff unresponsive, unavailable	18	5
101. Supervision	4	1
102. Eating Assistants	1	0

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Not Against Facility

N. Certification/Licensing Agency

103. Access to information (including survey)	0	0
104. Complaint, response to	0	0
105. Decertification/closure	0	0
106. Sanction, including Intermediate	0	0
107. Survey process	0	0
108. Survey process - Ombudsman participation	0	0
109. Transfer or eviction hearing	0	0
110. Not Used		

O. State Medicaid Agency

111. Access to information, application	2	3
112. Denial of eligibility	3	0
113. Non-covered services	0	0
114. Personal Needs Allowance	0	0
115. Services	1	0
116. Not Used		

P. System/Others

117. Abuse/neglect/abandonment by family member/friend/guardian or, while on visit out of facility, any other person	107	33
118. Bed shortage - placement	0	0
119. Facilities operating without a license	0	0
120. Family conflict; interference	107	25
121. Financial exploitation or neglect by family or other not affiliated with facility	241	93
122. Legal - guardianship, conservatorship, power of attorney, wills	120	39
123. Medicare	3	0
124. Mental health, developmental disabilities, including PASRR	0	0
125. Problems with resident's physician/assistant	0	0

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126. Protective Service Agency	0	0
127. SSA, SSI, VA, Other Benefits/Agencies	0	0
128. Request for less restrictive placement	4	0
Total, categories A through P	4,782	1,222
Q. Complaints About Services in Settings Other Than Long-Term Care Facilities or By Outside Provider in Long-Term Care Facilities (see instructions)		
129. Home care	0	
130. Hospital or hospice	115	
131. Public or other congregate housing not providing personal care	0	
132. Services from outside provider (see instructions)	45	
133. Not Used		
Total, Heading Q.	160	
Total Complaints*	6,164	
* (Add total of nursing facility complaints; B&C, ALF, RCF, similar complaints and complaints in Q, above. Place this number in Part I, C on page 1.)		

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E. Action on Complaints

Provide for cases closed during the reporting period the total number of complaints, by type of facility or other setting, for each item listed below.

	Nursing Facility	B&C, ALF, RCF, etc.	Other Settings
1. Complaints which were verified:	1,880	603	112

Verified: It is determined after work [interviews, record inspection, observation, etc.] that the circumstances described in the complaint are generally accurate.

2. Disposition: Provide for all complaints reported in C and D, whether verified or not, the number:

a. For which government policy or regulatory change or legislative action is required to resolve (this may be addressed in the issues section)

0	0	0
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b. Which were not resolved* to satisfaction of resident or complainant

211	77	0
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c. Which were withdrawn by the resident or complainant or resident died before final outcome of complaint investigation

188	51	0
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d. Which were referred to other agency for resolution and:

1) report of final disposition was not obtained

11	4	9
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2) other agency failed to act on complaint

0	0	0
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3) agency did not substantiate complaint

0	0	0
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e. For which no action was needed or appropriate

81	28	0
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f. Which were partially resolved* but some problem remained

576	168	16
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g. Which were resolved* to the satisfaction of resident or complainant

3,715	894	135
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Total, by type of facility or setting

4,782	1,222	160
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Grand Total (Same number as that for total complaints on pages 1 and 7)

6,164

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<i>* Resolved: The complaint/problem was addressed to the satisfaction of the resident or complainant.</i>
3. Legal Assistance/Remedies (Optional) - For each type of facility, list the number of legal assistance remedies for each of the following categories that were used in helping to resolve a complaint: a) legal consultation was needed and/or used; b) regulatory endorsement action was needed and/or used; c) an administrative appeal or adjudication was needed and/or used; and d) civil legal action was needed and/or used.

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F. Complaint Description (Optional):

Provide in the space indicated a concise description of the most interesting and/or significant individual complaint your program handled during the reporting period. State the problem, how the problem was resolved and the outcome.

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Part II - Major Long-Term Care Issues

A. Describe the priority long-term care issues which your program identified and/or worked on during the reporting period. For each issue, briefly state: a) the problem and barriers to resolution, and b) recommendations for system-wide changes needed to resolve the issue, or how the issue was resolved in your State. Examples of major long-term care issues may include facility closures, planning for alternatives to institutional care, transition of residents to less restrictive settings, etc.

In an effort to better meet the advocacy needs of nursing home residents throughout the state, the Office of the Ombudsman for the Institutionalized Elderly (OOIE) has increased its focus on recruiting and retaining volunteer ombudspersons. OOIE has operated a successful volunteer program since the mid 1990s. Since its inception, the program was outsourced to a non-profit agency. However, in recent years the program under this system was stagnating, maintaining a level of about 150-160 [active] volunteers. The decision was made in late calendar year 2010 to bring the volunteer program in-house and to make a concerted effort to recruit volunteers in the southern portion of the state. In addition, Ombudsman McCracken has personally advocated for the volunteer program through a series of speaking engagements and recruitment events. A marketing campaign was launched during the summer of 2011 that has resulted in a 12% increase in volunteers in fiscal year 2011. The Ombudsman has set a goal of having an active volunteer in 80% of the state's nearly 400 nursing homes by the end of calendar year 2013.

OOIE is working with the NJ Department of Human Services (NJ DHS) and the NJ Department of Health and Senior Services to assist the state's rebalancing effort through the federal Money Follows the Person Demonstration Project (MFP). NJ DHS (the lead agency for MFP) is seeking additional supplemental funding to increase nursing facility and state institution transitions to community-based settings. It is envisioned that the Ombudsman MFP staff will help educate nursing facility residents, facility staff, family members and the larger community on community-based care options and will advocate for residents who express a desire to return to the community to ensure that their rights are being recognized and upheld.

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Part III - Program Information and Activities

A. Facilities and Beds:

ALERT: AoA recommends that your program regularly enter into your data collection system all licensed facilities and beds in your state covered by your program and keep this information updated. In the event this is not being done in your program, the totals for Part III.A should be obtained from an outside source, such as the state licensing agency, and entered into the ORT manually.

1. How many nursing facilities are licensed in your State?

394
54,620

2. How many beds are there in these facilities?

3. Provide the type-name(s) and definition(s) of the types of board and care, assisted living, residential care facilities and any other similar adult care home for which your ombudsman program provides services, as authorized under Section 102(18) and (32), 711(6) and 712(a) (3)(A)(i) of the Older Americans Act. If no change from previous year, type "no change" at space indicated.

no change

a) How many of the board and care and similar adult care facilities described above are regulated in your State?

556
24,485

b) How many beds are there in these facilities?

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Part III - Program Information and Activities

B. Program Coverage

Statewide Coverage means that residents of both nursing homes and board and care homes (and similar adult care facilities) and their friends and families throughout the state have access to knowledge of the ombudsman program, how to contact it, complaints received from any part of the State are investigated and documented, and steps are taken to resolve problems in a timely manner, in accordance with federal and state requirements.

B.1. Designated Local Entities

Provide for each type of host organization the number of local or regional ombudsman entities (programs) designated by the State Ombudsman to participate in the statewide ombudsman program that are geographically located outside of the State Office:

Local entities hosted by:

Area agency on aging	0
Other local government entity	0
Legal services provider	0
Social services non-profit agency	0
Free-standing ombudsman program	0
Regional office of State ombudsman program	0
Other; specify:	0

Total Designated Local Ombudsman Entities 0

B.2. Staff and Volunteers

Provide numbers of staff and volunteers, as requested, at state and local levels.

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Type of Staff	Measure	State Office	Local Programs
Paid program staff	FTEs	21.50	0.00
	Number people working full-time on ombudsman program	18	0
Paid clerical staff	FTEs	5.00	0.00
Volunteer ombudsmen certified to address complaints at close of reporting period	Number volunteers	185	0
Number of Volunteer hours donated	Total number of hours donated by certified volunteer Ombudsmen	32,375	0
<p><i>Certified Volunteer: An individual who has completed a training course prescribed by the State Ombudsman and is approved by the State Ombudsman to participate in the statewide Ombudsman Program.</i></p>			
Other volunteers (i.e., not certified) at close of reporting period	Number of volunteers	0	0

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Part III - Program Information and Activities

C. Program Funding

Provide the amount of funds expended during the fiscal year from each source for your statewide program:

Federal - Older Americans Act (OAA) Title VII, Chapter 2, Ombudsman	\$527,585
Federal - Older Americans Act (OAA) Title VII, Chapter 3, Elder Abuse Prevention	\$0
Federal - OAA Title III provided at State level	\$0
Federal - OAA Title III provided at AAA level	\$0
Other Federal; specify:	\$0
<input type="text"/>	
State funds	\$1,837,135
Local; specify:	\$0
<input type="text"/>	
Total Program Funding	\$2,364,720

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Part III - Program Information and Activities

D. Other Ombudsman Activities

Provide below and on the next page information on ombudsman program activities other than work on complaints.

Activity	Measure	State	Local	
1. Training for ombudsman staff and volunteers	Number sessions	63	0	
	Number hours	194	0	
	Total number of trainees that attended any of the training sessions above (duplicated count)	700	0	
	3 most frequent topics for training	volunteer program overview		
		residents' rights		
		advocacy issues		
2. Technical assistance to local ombudsmen and/or volunteers	Estimated percentage of total staff time	25	0	
3. Training for facility staff	Number sessions	100	0	
	3 most frequent topics for training	residents' rights		
		mandatory reporting		
		end of life/ethics committees		

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4. Consultation to facilities (Consultation: providing information and technical assistance, often by telephone)	3 most frequent areas of consultation	abuse and neglect	
		residents' rights, involuntary discharge	
		end of life/ethics committees	
	Number of consultations	2,160	0
5. Information and consultation to individuals (usually by telephone)	3 most frequent requests/needs	care issues	
		residents' rights, involuntary discharge	
		information/advance directives	
	Number of consultations	2,256	0
6. Facility Coverage (other than in response to complaint) *	Number Nursing Facilities visited (unduplicated)	250	0
	Number Board and Care (or similar) facilities visited (unduplicated)	10	0
7. Participation in Facility Surveys	Number of surveys	68	0
8. Work with resident councils	Number of meetings attended	276	0
9. Work with family councils	Number of meetings attended	6	0
10. Community Education	Number of sessions	72	0
		volunteer program overview	

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11. Work with media	3 most frequent topics	residents' rights		
		mandatory reporting law		
	Number of interviews/discussions		10	0
	Number of press releases		35	0
12. Monitoring/work on laws, regulations, government policies and actions	Estimated percentage of total paid staff time (Note: the total of the percentage at each level in this item and item 2 should not add to more than 100%.)		10	0
<p>* The number is for facilities receiving at least one visit per quarter, not in response to a complaint. It is not for the number of visits. States which do not have a regular visitation program should enter "0" in lieu of "NA," as this numeric field cannot accept "NA."</p>				