Part I - Cases, Complainants and Complaints	
A. Cases Opened	
Provide the total number of cases opened during reporting period.	2,308
Case: Each inquiry brought to, or initiated by, the ombudsman on behalf of a group of residents involving one or more complaints which requires opening a includes ombudsman investigation, strategy to resolve, and follow-up.	

#### Part I - Cases, Complainants and Complaints

## 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	127	34	15
2. Relative/friend of resident	545	107	13
3. Non-relative guardian, legal representative	12	2	0
4. Ombudsman/ombudsman volunteer	36	1	0
5. Facility administrator/staff or former staff	1,023	226	29
6. Other medical: physician/staff	38	12	1
7. Representative of other health or social service agency or program	21	24	3
8. Unknown/anonymous	30	13	0
9. Other: Bankers, Clergy, Law Enforcement, Public Officials, etc.	46	13	. 1
		J	

Total number of cases closed during the reporting period:

2,372

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

Part I - Cases, Complainants and Complaints	
C. Complaints Received	
For cases which were closed during the reporting period (those counted in B above), provide the total number of complaints received:	4,987
Complaint: A concern brought to, or initiated by, the ombudsman for investigat by or on behalf of one or more residents of a long-term care facility relating to I welfare or rights of a resident. One or more complaints constitute a case.	

### Part I - Cases, Complainants and Complaints

#### 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	Nursing Facility	B&C, ALF, RCF, etc.
A. Abuse, Gross Regiect, Expiditation		
Abuse, physical (including corporal punishment)	277	38
2. Abuse, sexual	28	6
3. Abuse, verbal/psychological (including punishment, seclusion)	136	28
Financial exploitation (use categories in section E for less severe financial complaints)	23	34
5. Gross neglect (use categories under Care, Sections F & G for non-willful forms of neglect)	7	4
6. Resident-to-resident physical or sexual abuse	299	65
7. Not Used		
B. Access to Information by Resident or Resident's Representative	Section 1 (1) and 1 (1) an	American Control of the Control of t
8. Access to own records	8	1
9. Access by or to ombudsman/visitors	38	27
10. Access to facility survey/staffing reports/license	1	0
11. Information regarding advance directive	0	0
12. Information regarding medical condition, treatment and any changes	72	10
13. Information regarding rights, benefits, services, the resident's right to complain	4	0
14. Information communicated in understandable language	0	0
15. Not Used		
C. Admission, Transfer, Discharge, Eviction	and the state of t	The Control of the Co

16. Admission contract and/or procedure	12	3
17. Appeal process - absent, not followed	0	0
18. Bed hold - written notice, refusal to readmit	11	7
19. Discharge/eviction - planning, notice, procedure, implementation, inc. abandonment	126	58
20. Discrimination in admission due to condition, disability	0	0
21. Discrimination in admission due to Medicald status	0	3
22. Room assignment/room change/Intrafacility transfer	36	7
23. Not Used	And the second s	
D. Autonomy, Cholce, Preference, Exercise of Rights, Privacy	A TENCHOLIS CONTRACTOR OF A STATE	The second of th
24. Choose personal physician, pharmacy/hospice/other health care provider	5	0
25. Confinement in facility against will (illegally)	23	13
26. Dignity, respect - staff attitudes	85	8
27. Exercise preference/choice and/or civil/religious rights, individual's right to smoke	24	5
28. Exercise right to refuse care/treatment	27	6
29. Language barrier in daily routine	58	0
30. Participate in care planning by resident and/or designated surrogate	23	10
31. Privacy - telephone, visitors, couples, mail	9	2
32. Privacy in treatment, confidentiality	6	5
33. Response to complaints	8	3
34. Reprisal, retaliation	12	1
35. Not Used		
E. Financial, Property (Except for Financial Exploitation)	State the state of	
36. Billing/charges - notice, approval, questionable, accounting wrong or denied (includes overcharge of private pay residents)	21	3
37. Personal funds - mismanaged, access/information denied, deposits and other money not returned (report criminal-level misuse of personal funds under A.4)	16	4

38. Personal property lost, stolen, used by others, destroyed, withheld from resident	65	26
39. Not Used		
Resident Care		
F. Care		
40. Accidental or injury of unknown origin, falls, improper handling	246	13
41. Failure to respond to requests for assistance	99	12
42. Care plan/resident assessment - Inadequate, failure to follow plan or physician orders (put lack of resident/surrogate involvement under D.30)	343	68
43. Contracture	5	0
44. Medications - administration, organization	74	32
45. Personal hygiene (includes nall care & oral hygiene) and adequacy of dressing & grooming	80	6
46. Physician services, including podlatrist	27	4
47. Pressure sores, not turned	84	5
48. Symptoms unattended, including pain, pain not managed, no notice to others of changes in condition	166	28
49. Tolleting, incontinent care	97	9
50. Tubes - neglect of catheter, gastric, NG tube (use D.28 for inappropriate/forced use)	26	0
51. Wandering, failure to accommodate/monitor exit seeking behavior	53	14
52. Not Used		
G. Rehabilitation or Maintenance of Function		general control of the control of th
53. Assistive devices or equipment	48	3
54. Bowel and bladder training	0	0
55. Dental services	20	3
56. Mental health, psychosocial services	0	3
57. Range of motion/ambulation	19	1
58. Theraples - physical, occupational, speech	28	1

59. Vision and hearing	15	2
60. Not Used	The second secon	
H. Restraints - Chemical and Physical	And the second s	
61. Physical restraint - assessment, use, monitoring	15	2
62. Psychoactive drugs - assessment, use, evaluation	23	5
63. Not Used		
	manufactured at 151 et distance of the control of 150 of the control of the contr	
Quality of Life		
I. Activities and Social Services		
64. Activities - choice and appropriateness	12	3
65. Community Interaction, transportation	7	2
66. Resident conflict, including roommates	42	9
67. Social services - availability/appropriateness/ (use G.56 for mental health,	25	0
psychosocial counseling/service)		
68. Not Used		
J. Dietary	A service of the serv	
69. Assistance in eating or assistive devices	25	0
69. Assistance In eating or assistive devices 70. Fluid availability/hydration	25 37	0
70. Fluid availability/hydration	37	1
70. Fluid availability/hydration	37	1
70. Fluid availability/hydration 71. Food service - quantity, quality, variation, choice, condiments, utensils, menu	37 24	9
70. Fluid availability/hydration  71. Food service - quantity, quality, variation, choice, condiments, utensils, menu  72. Snacks, time span between meals, late/missed meals	37 24 7	9
70. Fluid availability/hydration  71. Food service - quantity, quality, variation, choice, condiments, utensils, menu  72. Snacks, time span between meals, late/missed meals  73. Temperature	37 24 7	2
70. Fluid availability/hydration  71. Food service - quantity, quality, variation, choice, condiments, utensils, menu  72. Snacks, time span between meals, late/missed meals  73. Temperature  74. Therapeutic diet	7 7 21	2
70. Fluid availability/hydration  71. Food service - quantity, quality, variation, choice, condiments, utensils, menu  72. Snacks, time span between meals, late/missed meals  73. Temperature  74. Therapeutic diet  75. Weight loss due to inadequate nutrition	7 7 21	2
70. Fluid availability/hydration 71. Food service - quantity, quality, variation, choice, condiments, utensils, menu 72. Snacks, time span between meals, late/missed meals 73. Temperature 74. Therapeutic diet 75. Weight loss due to inadequate nutrition 76. Not Used	7 7 21	2
70. Fluid availability/hydration 71. Food service - quantity, quality, variation, choice, condiments, utensils, menu 72. Snacks, time span between meals, late/missed meals 73. Temperature 74. Therapeutic diet 75. Weight loss due to inadequate nutrition 76. Not Used  K. Environment 77. Air/environment: temperature and quality (heating, cooling, ventilation, water,	7 7 21 33	2 4
70. Fluid availability/hydration 71. Food service - quantity, quality, variation, choice, condiments, utensils, menu 72. Snacks, time span between meals, late/missed meals 73. Temperature 74. Therapeutic diet 75. Weight loss due to inadequate nutrition 76. Not Used  K. Environment 77. Air/environment: temperature and quality (heating, cooling, ventilation, water, noise	37 24 7 7 21 33	1 9 2 0 2 4

80. Furnishings, storage for residents	8	3
81. Infection control	21	4
82. Laundry - lost, condition	6	3
83. Odors	12	4
84. Space for activities, dining	0	0
85. Supplies and linens	8	2
86. Americans with Disabilities Act (ADA) accessibility	0	0
		- CONSTRUCTION OF THE PROPERTY
Administration		
L. Policies, Procedures, Attitudes, Resources (See other complaint headings, o advance directives, due process, billing, management residents' funds)	f above, for pol	icies on
87. Abuse investigation/reporting, including failure to report	56	14
88. Administrator(s) unresponsive, unavailable	6	0
89. Grievance procedure (use C for transfer, discharge appeals)	0	0
90. Inappropriate or illegal policies, practices, record-keeping	96	29
91. Insufficient funds to operate	0	0
92. Operator inadequately trained	0	0
93. Offering inappropriate level of care (for B&C/similar)	0	12
94. Resident or family council/committee interfered with, not supported	0	1
95. Not Used		
	And the second s	
M. Staffing		
96. Communication, language barrier (use D.29 if problem involves resident inability to communicate)	6	0
97. Shortage of staff	40	11
98. Staff training	6	6
99. Staff turn-over, over-use of nursing pools	4	1
100. Staff unresponsive, unavailable	11	3
101. Supervision	3	1
102. Eating Assistants	0	0

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	and common and the second of t	
O. State Medicald Agency		
111. Access to Information, application	0	1
112. Denial of eligibility	2	0
113. Non-covered services	1	0
114. Personal Needs Allowance	0	0
115. Services	0	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	77	28
118. Bed shortage - placement	0	0
119. Facilities operating without a license	0	0
120. Family conflict; interference	119	52
121. Financial exploitation or neglect by family or other not affiliated with facility	165	64
122. Legal - guardianship, conservatorship, power of attorney, wills	77	34
123. Medicare	0	0
124. Mental health, developmental disabilities, including PASRR	0	0
125. Problems with resident's physician/assistant	0	0

126. Protective Service Agency	0	0
127. SSA, SSI, VA, Other Benefits/Agencies	0	0
128. Request for less restrictive placement	12	0
Total, categories A through P	3,995	929
	, , , , , , , , , , , , , , , , , , ,	
Q. Complaints About Services in Settings Other Than Long-Term Care Facilities in Long-Term Care Facilities (see instructions)	or By Outside	Provider
129. Home care	7	
130. Hospital or hospice	38	
131. Public or other congregate housing not providing personal care	0	
132. Services from outside provider (see instructions)	18	
133. Not Used		
Total, Heading Q.	63	
Total Complaints*	4,987	
* (Add total of nursing facility complaints; B&C, ALF, RCF, similar complaints and complain number in Part I, C on page 1.)	nts in Q, above.	Place this

Part I - Cases, Complainants and Complaints			
E. Action on Complaints			
Provide for cases closed during the reporting period the total number of complain each item listed below.	ts, by type of fa	cility or other se	tting, for
	Nursing Facility	B&C, ALF, RCF, etc.	Other Settings
1. Complaints which were verified:	2,011	564	25
Verified: It is determined after work [interviews, record inspection, observation, e complaint are generally accurate.	etc.] that the circ	cumstances desc	cribed in the
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)	1	0	0
b. Which were not resolved* to satisfaction of resident or complainant	69	24	1
c. Which were withdrawn by the resident or complainant or resident died before final outcome of complaint investigation	83	19	1
d. Which were referred to other agency for resolution and:	<u> </u>		
1) report of final disposition was not obtained	25	4	2
2) other agency falled to act on complaint	0	0	0
3) agency did not substantiate complaint	0	0	0
e. For which no action was needed or appropriate	52	14	2
f. Which were partially resolved* but some problem remained	350	131	7
g. Which were resolved* to the satisfaction of resident or complainant	3,415	737	50
Total, by type of facility or setting	3,995	929	63
Grand Total (Same number as that for total complaints on pages 1 and 7)			4,987

* Resolved: The complaint/problem was addressed to the satisfaction of the resident or complainant.	
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.	
Facility Type NF: a=0, b=0, c=0 and d=0 Facility Type BC: a=0, b=0, c=0 and d=0 Facility Type OT: a=0, b=0, c=0 and d=0	

Part I - Cases, Complainants and Complaints
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.

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.
The Office of the Ombudsman for Institutionalized Elderly (OOIE) continues to increase the number of volunteer
advocates located in facilities, recognizing that volunteers (who are required to visit at least weekly for four hours at a minimum) provide the kind of continual advocacy that full-time staff cannot provide. Recruiting and retaining volunteers is always a challenge but OOIE this past year trained more interested individuals than ever. Targeted advertising has proved effective in bringing more trainees to the program, particularly in the latter half of FFY 2015.
Transitioning individuals from nursing facilities back into the community, with the supports and services they need, continues to be a challenge for New Jersey, especially due to the high cost of housing. OOIE continues to partner with the NJ Department of Human Services, Money Follows the Person program, to educate consumers, families and facility staff about home and community based options. OOIE has also created a comprehensive housing guide for individuals seeking to identify affordable housing options. This guide walks individuals through the types of housing that may be available, the documentation they will need to obtain housing, the types of services they may require when they return to the community and a list of community resources.

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?	381
2. How many beds are there in these facilities?	51,173
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?	524
b) How many beds are there in these facilities?	25,488

Part III - Program Information and Activities		
B. Program Coverage		
Statewide Coverage means that residents of both nursing homes and board and care home	c (and cimilar adult care	
facilities) and their friends and families throughout the state have access to knowledge of the how to contact it, complaints received from any part of the State are investigated and docuto resolve problems in a timely manner, in accordance with federal and state requirements.	he ombudsman program,	
B.1. Designated Local Entities		
Provide for each type of host organization the number of local or regional ombudsman entit the State Ombudsman to participate in the statewide ombudsman program that are geogra 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.		

# NJ State Annual Ombudsman Report for Federal FY2015 (State) - Ombudsman, Institutionalized Elderly 5/11/16 7:04 PM - Part III.B

Type of Staff	Measure	State Office	Local Programs
	FTEs	23.50	0.0
Pald program staff	Number people working full-time on ombudsman program	21	
Paid clerical staff	FTEs	4.00	0.0
Volunteer ombudsmen certified to address complaints at close of reporting period	Number volunteers	236	,
Number of Volunteer hours donated	Total number of hours donated by certified volunteer Ombudsmen	41,536	
Certified Volunteer: An individual who has completed a training approved by the State Ombudsman to participate in the states			man and is
Other volunteers (i.e., not certified) at close of reporting period	Number of volunteers	0	

Part III - Program Information and Activities	
C. Program Funding	
Provide the amount of funds expended during the fiscal year from each source for your program:	r statewide
Federal - Older Americans Act (OAA) Title VII, Chapter 2, Ombudsman	\$358,736
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:	\$480,447
federal Money Follow the Person / I Choose Home New Jersey programs	10000
State funds	\$1,783,009
Local; specify:	\$0
	TO WOOD PROBLEM AND ASSAULT OF THE PROBLEM ASSAUL
Total Program Funding	\$2,622,192

## 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
	Number sessions	48	0
	Number hours	624	0
1. Training for ombudsman staff	Total number of trainees that attended any of the training sessions above (duplicated count)	542	Ó
and volunteers		residents' rights	
	3 most frequent topics for training	dealing with residents with Alzheimer's/dementia legal issues	
		25	0
2. Technical assistance to local ombudsmen and/or volunteers	Estimated percentage of total staff time		
	Number sessions	213	0
		what to report	
3. Training for facility staff	3 most frequent topics for training	advance care planning	
		HCBS options	

T			
	involuntary discharge	A THE PROPERTY OF THE PARTY OF	
3 most frequent areas of consultation	family issues		
Number of consultations		3,284	
	residents' rights		
3 most frequent requests/needs	involuntary discharge abuse, neglect, exploitation		
Number of consultations	-	3,814	
Number Nursing Facilities visited (unduplicated)		280	
Number Board and Care (or similar) facilities visited (unduplicated)		0	
	111111111111111111111111111111111111111	156	
Number of surveys			
Number of meetings attended		666	11190
Number of meetings attended		20	
Number of sessions		120	
	home and community based services		
	Number of consultations  3 most frequent requests/needs  Number of consultations  Number Nursing Facilities visited (unduplicated)  Number Board and Care (or similar) facilities visited (unduplicated)  Number of surveys  Number of meetings attended	3 most frequent areas of consultation end of life  Number of consultations  residents' rights  Involuntary discharge  Involuntary discharge  abuse, neglect, exploitation  Number of consultations  Number Nursing Facilities visited (unduplicated)  Number Board and Care (or similar) facilities visited (unduplicated)  Number of surveys  Number of meetings attended  Number of meetings attended  Number of sessions  home and community based	3 most frequent areas of consultation  end of life  Number of consultations  residents' rights  involuntary discharge  abuse, neglect, exploitation  Number of consultations  Number Nursing Facilities visited (unduplicated)  Number Board and Care (or similar) facilities visited (unduplicated)  Number of surveys  Number of meetings attended  Number of meetings attended  Number of sessions  home and community based

	1		A
Turkeye san	3 most frequent topics	volunteer advocate program	
11. Work with media		abuse, neglect, exploitation	
	Number of interviews/ discussions	20	0
	Number of press releases	25	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%.)	20	0
* The work is for f			

<sup>\*</sup> 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."