

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.

2,718

*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.*

<b>Complainants:</b>	<b>Nursing Facility</b>	<b>B&amp;C, ALF, RCF, etc.*</b>	<b>Other Settings</b>
1. Resident	129	37	22
2. Relative/friend of resident	602	123	15
3. Non-relative guardian, legal representative	18	8	0
4. Ombudsman/ombudsman volunteer	46	0	0
5. Facility administrator/staff or former staff	1,324	297	38
6. Other medical: physician/staff	40	14	3
7. Representative of other health or social service agency or program	41	17	0
8. Unknown/anonymous	58	21	4
9. Other: Bankers, Clergy, Law Enforcement, Public Officials, etc.	37	27	0

Total number of cases closed during the reporting period:

2,921
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\* 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:

6,051

*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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**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**

- 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.
	391	47
	35	8
	167	22
	28	14
	7	0
	310	75

**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

	7	3
	50	16
	0	0
	0	0
	70	16
	2	0
	0	0

**C. Admission, Transfer, Discharge, Eviction**

- 16. Admission contract and/or procedure

	8	10
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17. Appeal process - absent, not followed	0	0
18. Bed hold - written notice, refusal to readmit	15	5
19. Discharge/eviction - planning, notice, procedure, implementation, inc. abandonment	151	64
20. Discrimination in admission due to condition, disability	0	0
21. Discrimination in admission due to Medicaid status	1	2
22. Room assignment/room change/intrafacility transfer	36	8
23. Not Used		
<b>D. Autonomy, Choice, Preference, Exercise of Rights, Privacy</b>		
24. Choose personal physician, pharmacy/hospice/other health care provider	2	1
25. Confinement in facility against will (illegally)	33	25
26. Dignity, respect - staff attitudes	93	7
27. Exercise preference/choice and/or civil/religious rights, individual's right to smoke	25	10
28. Exercise right to refuse care/treatment	21	4
29. Language barrier in dally routine	59	3
30. Participate in care planning by resident and/or designated surrogate	31	8
31. Privacy - telephone, visitors, couples, mail	24	3
32. Privacy in treatment, confidentiality	24	4
33. Response to complaints	31	3
34. Reprisal, retaliation	17	3
35. Not Used		
<b>E. Financial, Property (Except for Financial Exploitation)</b>		
36. Billing/charges - notice, approval, questionable, accounting wrong or denied (includes overcharge of private pay residents)	28	9
37. Personal funds - mismanaged, access/information denied, deposits and other money not returned (report criminal-level misuse of personal funds under A.4)	20	3
38. Personal property lost, stolen, used by others, destroyed, withheld from resident	76	37
39. Not Used		

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<b>Resident Care</b>		
<b>F. Care</b>		
40. Accidental or injury of unknown origin, falls, improper handling	288	19
41. Failure to respond to requests for assistance	115	8
42. Care plan/resident assessment - inadequate, failure to follow plan or physician orders (put lack of resident/surrogate involvement under D.30)	430	84
43. Contracture	3	0
44. Medications - administration, organization	90	30
45. Personal hygiene (includes nail care & oral hygiene) and adequacy of dressing & grooming	104	10
46. Physician services, including podiatrist	37	3
47. Pressure sores, not turned	102	9
48. Symptoms unattended, including pain, pain not managed, no notice to others of changes in condition	198	38
49. Toileting, incontinent care	123	6
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	65	26
52. Not Used		
<b>G. Rehabilitation or Maintenance of Function</b>		
53. Assistive devices or equipment	39	10
54. Bowel and bladder training	6	0
55. Dental services	25	3
56. Mental health, psychosocial services	6	1
57. Range of motion/ambulation	20	0
58. Therapies - physical, occupational, speech	38	3
59. Vision and hearing	20	0
60. Not Used		
<b>H. Restraints - Chemical and Physical</b>		
61. Physical restraint - assessment, use, monitoring	23	2
62. Psychoactive drugs - assessment, use, evaluation	28	9

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63. Not Used		
<b>Quality of Life</b>		
<b>I. Activities and Social Services</b>		
64. Activities - choice and appropriateness	16	6
65. Community interaction, transportation	3	1
66. Resident conflict, including roommates	66	10
67. Social services - availability/appropriateness/ (use G.56 for mental health, psychosocial counseling/service)	9	1
68. Not Used		
<b>J. Dietary</b>		
69. Assistance in eating or assistive devices	30	0
70. Fluid availability/hydration	42	4
71. Food service - quantity, quality, variation, choice, condiments, utensils, menu	34	9
72. Snacks, time span between meals, late/missed meals	15	1
73. Temperature	9	0
74. Therapeutic diet	26	2
75. Weight loss due to inadequate nutrition	40	5
76. Not Used		
<b>K. Environment</b>		
77. Air/environment: temperature and quality (heating, cooling, ventilation, water, noise	21	3
78. Cleanliness, pests, general housekeeping	60	15
79. Equipment/building - disrepair, hazard, poor lighting, fire safety, not secure	38	15
80. Furnishings, storage for residents	9	0
81. Infection control	31	5
82. Laundry - lost, condition	6	3
83. Odors	23	3
84. Space for activities, dining	1	0
85. Supplies and linens	6	2

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86. Americans with Disabilities Act (ADA) accessibility	0	0
<b>Administration</b>		
<b>L. Policies, Procedures, Attitudes, Resources (See other complaint headings, of above, for policies on advance directives, due process, billing, management residents' funds)</b>		
87. Abuse investigation/reporting, including failure to report	48	25
88. Administrator(s) unresponsive, unavailable	7	3
89. Grievance procedure (use C for transfer, discharge appeals)	0	0
90. Inappropriate or illegal policies, practices, record-keeping	86	38
91. Insufficient funds to operate	0	5
92. Operator inadequately trained	0	11
93. Offering inappropriate level of care (for B&C/similar)	0	17
94. Resident or family council/committee interfered with, not supported	1	1
95. Not Used		
<b>M. Staffing</b>		
96. Communication, language barrier (use D.29 if problem involves resident inability to communicate)	2	1
97. Shortage of staff	36	15
98. Staff training	6	1
99. Staff turn-over, over-use of nursing pools	9	2
100. Staff unresponsive, unavailable	23	7
101. Supervision	3	2
102. Eating Assistants	0	0
<b>Not Against Facility</b>		
<b>N. Certification/Licensing Agency</b>		
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



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107. Survey process	0	0
108. Survey process - Ombudsman participation	0	0
109. Transfer or eviction hearing	0	0
110. Not Used		
<b>O. State Medicaid Agency</b>		
111. Access to information, application	1	0
112. Denial of eligibility	0	0
113. Non-covered services	1	0
114. Personal Needs Allowance	0	0
115. Services	0	0
116. Not Used		
<b>P. System/Others</b>		
117. Abuse/neglect/abandonment by family member/friend/guardian or, while on visit out of facility, any other person	113	45
118. Bed shortage - placement	0	0
119. Facilities operating without a license	0	0
120. Family conflict; interference	141	45
121. Financial exploitation or neglect by family or other not affiliated with facility	181	93
122. Legal - guardianship, conservatorship, power of attorney, wills	130	68
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	7	2
<b>Total, categories A through P</b>	<b>4,829</b>	<b>1,137</b>
<b>Q. Complaints About Services in Settings Other Than Long-Term Care Facilities or By Outside Provider in Long-Term Care Facilities (see instructions)</b>		
129. Home care	7	

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130. Hospital or hospice	61
131. Public or other congregate housing not providing personal care	0
132. Services from outside provider (see instructions)	17
133. Not Used	
<b>Total, Heading Q.</b>	85
<b>Total Complaints*</b>	6,051

\* (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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**Part I - Cases, Complainants and Complaints**

**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:	2,455	734	47

*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
b. Which were not resolved* to satisfaction of resident or complainant	53	24	5
c. Which were withdrawn by the resident or complainant or resident died before final outcome of complaint investigation	85	20	2
d. Which were referred to other agency for resolution and:			
1) report of final disposition was not obtained	34	0	3
2) other agency failed to act on complaint	1	0	0
3) agency did not substantiate complaint	0	0	0
e. For which no action was needed or appropriate	24	10	0
f. Which were partially resolved* but some problem remained	374	180	5
g. Which were resolved* to the satisfaction of resident or complainant	4,258	903	70

<b>Total, by type of facility or setting</b>	<b>4,829</b>	<b>1,137</b>	<b>85</b>
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<b>Grand Total (Same number as that for total complaints on pages 1 and 7)</b>			<b>6,051</b>
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*\* Resolved: The complaint/problem was addressed to the satisfaction of the resident or complainant.*

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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

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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.

[Empty space for complaint description]

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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.

The Office of the Ombudsman for the Institutionalized Elderly (OOIE) continues to add to its number of highly trained volunteer advocates placed in nursing homes throughout New Jersey. After scrubbing the list of volunteer advocates of advocates who were not active, the actual number of volunteers in the program in 2010 was 145. Since that time, the OOIE has focused heavily on improving its training program and recruiting and retaining volunteer advocates. As a result, the number of volunteer advocates has increased more than 40 percent to approximately 250 today. In addition, in FFY 2016, the OOIE hosted a large statewide training for its volunteer advocates that featured presentations by nationally recognized speakers.

The OOIE partnership with the NJ Department of Human Services to implement and market New Jersey's Money Follows the Person - known as I Choose Home NJ - continues to thrive. Having identified housing as a major barrier to moving individuals from nursing homes into the community, MFP/ICHNJ staff have been actively engaged in working with sister state agencies, housing advocates and Medicaid managed care organizations to create more housing options for the population we serve.

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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? 380

2. How many beds are there in these facilities? 51,023

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? 529

b) How many beds are there in these facilities? 25,814

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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	24.00	0.00
	Number people working full-time on ombudsman program	21	0
Paid clerical staff	FTEs	4.00	0.00
Volunteer ombudsmen certified to address complaints at close of reporting period	Number volunteers	250	0
Number of Volunteer hours donated	Total number of hours donated by certified volunteer Ombudsmen	44,000	0
<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>			
Other volunteers (i.e., not certified) at close of reporting period	Number of volunteers	0	0

**B.3. Organizational Conflict of Interest**

Provide a description of any organizational conflicts of interest identified and steps taken by the State agency and the Ombudsman to remedy or remove identified conflicts; indicate (a) the type of conflict as described in 45 CFR §1324.21 and Section 712 (f)(2) of the Older Americans Act; or a brief description of other conflicts of interest that may impact the effectiveness and credibility of the work of the Office (b) indicate if the conflict was at the State Office or at a local Ombudsman entity or both (c) provide a description of steps taken to remedy or remove each conflict of interest. If no conflicts were identified among the state Office or local Ombudsman entities, where applicable, write that none were identified.

Location of Conflict Identified at:

State Office  Local Entity  Both

none identified

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For subsequent reporting years:

I certify that I have reviewed the organization conflicts of interest in my state Ombudsman program and report no changes in organization conflicts or the remedies previously implemented

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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	\$408,357
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:	\$651,119
federal Money Follows the Person (I Choose Home New Jersey programs)	
State funds	\$1,662,046
Local; specify:	\$0
[Empty box for local funding details]	
<b>Total Program Funding</b>	<b>\$2,721,522</b>

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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	
<b>1. Training for ombudsman staff and volunteers</b>	Number sessions	56	0	
	Number hours	652	0	
	Total number of trainees that attended any of the training sessions above (duplicated count)	686	0	
	3 most frequent topics for training	residents' rights		
		dealing with Alzheimer's and dementia residents		
		legal issues		
<b>2. Technical assistance to local ombudsmen and/or volunteers</b>	Estimated percentage of total staff time	25	0	
<b>3. Training for facility staff</b>	Number sessions	228	0	
	3 most frequent topics for training	what to report and when to report		
		Ombudsman overview, signs of abuse		
		home and community based services/options		

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<b>4. Consultation to facilities (Consultation: providing information and technical assistance, often by telephone)</b>	3 most frequent areas of consultation	involuntary discharge		
		family issues		
		end of life		
	Number of consultations		3,659	0
<b>5. Information and consultation to individuals (usually by telephone)</b>	3 most frequent requests/needs	residents' rights		
		involuntary discharge		
		abuse, neglect, exploitation		
	Number of consultations		4,056	0
<b>6. Facility Coverage (other than in response to complaint) *</b>	Number Nursing Facilities visited (unduplicated)		304	0
	Number Board and Care (or similar) facilities visited (unduplicated)		0	0
<b>7. Participation in Facility Surveys</b>	Number of surveys		140	0
<b>8. Work with resident councils</b>	Number of meetings attended		658	0
<b>9. Work with family councils</b>	Number of meetings attended		7	0
<b>10. Community Education</b>	Number of sessions		134	0
		volunteer advocate program		

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<b>11. Work with media</b>	3 most frequent topics	role of Ombudsman	
		home and community based services	
	Number of Interviews/discussions	15	0
	Number of press releases	25	0
<b>12. Monitoring/work on laws, regulations, government policies and actions</b>	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
<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>			