

Agency or organization which sponsors the State Ombudsman Program: Ombudsman

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

**A. Cases Opened**

Provide the total number of cases opened during reporting period.

2,454

*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>KCF, etc.*</b>	<b>Other Settings</b>
1. Resident	142	50	13
2. Relative/friend of resident	748	164	16
3. Non-relative guardian, legal representative	11	5	0
4. Ombudsman/ombudsman volunteer	21	0	0
5. Facility administrator/staff or former staff	1,019	233	75
6. Other medical: physician/staff	49	12	0
7. Representative of other health or social service agency or program	42	20	5
8. Unknown/anonymous	50	21	5
9. Other: Bankers, Clergy, Law Enforcement, Public Officials, etc.	20	8	1

Total number of cases closed during the reporting period:

2,730
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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:

5,649

*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.

<b>Residents' Rights</b>	<b>Nursing Facility</b>	<b>B&amp;C, ALF, RCF, etc.</b>
<b>A. Abuse, Gross Neglect, Exploitation</b>		
1. Abuse, physical (including corporal punishment)	286	46
2. Abuse, sexual	44	5
3. Abuse, verbal/psychological (Including punishment, seclusion)	161	43
4. Financial exploitation (use categories in section E for less severe financial complaints)	47	12
5. Gross neglect (use categories under Care, Sections F & G for non-willful forms of neglect)	16	3
6. Resident-to-resident physical or sexual abuse	85	30
7. Not Used		
<b>B. Access to Information by Resident or Resident's Representative</b>		
8. Access to own records	15	0
9. Access by or to ombudsman/visitors	27	16
10. Access to facility survey/staffing reports/license	0	0
11. Information regarding advance directive	0	0
12. Information regarding medical condition, treatment and any changes	91	13
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		
<b>C. Admission, Transfer, Discharge, Eviction</b>		
16. Admission contract and/or procedure	9	5
17. Appeal process - absent, not followed	0	0
18. Bed hold - written notice, refusal to readmit	7	5
19. Discharge/eviction - planning, notice, procedure, implementation, inc. abandonment	222	72
20. Discrimination in admission due to condition, disability	0	0
21. Discrimination in admission due to Medicaid status	4	3
22. Room assignment/room change/intrafacility transfer	36	15
23. Not Used		
<b>D. Autonomy, Choice, Preference, Exercise of Rights, Privacy</b>		
24. Choose personal physician, pharmacy/hospice/other health care provider	3	0
25. Confinement in facility against will (illegally)	34	15
26. Dignity, respect - staff attitudes	108	19
27. Exercise preference/choice and/or civil/religious rights, individual's right to smoke	31	7
28. Exercise right to refuse care/treatment	28	3
29. Language barrier in daily routine	42	3
30. Participate in care planning by resident and/or designated surrogate	19	8
31. Privacy - telephone, visitors, couples, mail	19	2
32. Privacy in treatment, confidentiality	20	7
33. Response to complaints	19	1
34. Reprisal, retaliation	21	1
35. Not Used		

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<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)	42	21
37. Personal funds - mismanaged, access/information denied, deposits and other money not returned (report criminal-level misuse of personal funds under A.4)	29	6
38. Personal property lost, stolen, used by others, destroyed, withheld from resident	60	17
39. Not Used		
<b>Resident Care</b>		
<b>F. Care</b>		
40. Accidental or injury of unknown origin, falls, improper handling	262	23
41. Failure to respond to requests for assistance	115	17
42. Care plan/resident assessment - inadequate, failure to follow plan or physician orders (put lack of resident/surrogate involvement under D.30)	536	112
43. Contracture	5	1
44. Medications - administration, organization	87	48
45. Personal hygiene (includes nail care & oral hygiene) and adequacy of dressing & grooming	100	18
46. Physician services, including podiatrist	36	3
47. Pressure sores, not turned	131	4
48. Symptoms unattended, including pain, pain not managed, no notice to others of changes in condition	188	27
49. Tolerating, incontinent care	99	8
50. Tubes - neglect of catheter, gastric, NG tube (use D.28 for inappropriate/forced use)	31	0
51. Wandering, failure to accommodate/monitor exit seeking behavior	21	8
52. Not Used		
<b>G. Rehabilitation or Maintenance of Function</b>		
53. Assistive devices or equipment	57	7
54. Bowel and bladder training	2	0
55. Dental services	19	0
56. Mental health, psychosocial services	6	2
57. Range of motion/ambulation	19	1
58. Therapies - physical, occupational, speech	38	2
59. Vision and hearing	19	0
60. Not Used		
<b>H. Restraints - Chemical and Physical</b>		
61. Physical restraint - assessment, use, monitoring	21	1
62. Psychoactive drugs - assessment, use, evaluation	25	8
63. Not Used		
<b>Quality of Life</b>		
<b>I. Activities and Social Services</b>		
64. Activities - choice and appropriateness	14	2
65. Community interaction, transportation	7	2
66. Resident conflict, including roommates	20	5
67. Social services - availability/appropriateness/ (use G.56 for mental health, psychosocial counselling/service)	8	1
68. Not Used		
<b>J. Dietary</b>		
69. Assistance in eating or assistive devices	36	0
70. Fluid availability/hydration	39	2
71. Food service - quantity, quality, variation, choice, condiments, utensils, menu	16	9

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72. Snacks, time span between meals, late/missed meals	8	3
73. Temperature	10	0
74. Therapeutic diet	20	2
75. Weight loss due to inadequate nutrition	36	1
76. Not Used		
<b>K. Environment</b>		
77. Air/environment: temperature and quality (heating, cooling, ventilation, water, noise)	10	3
78. Cleanliness, pests, general housekeeping	37	9
79. Equipment/building - disrepair, hazard, poor lighting, fire safety, not secure	40	13
80. Furnishings, storage for residents	4	3
81. Infection control	25	4
82. Laundry - lost, condition	6	0
83. Odors	9	1
84. Space for activities, dining	2	0
85. Supplies and linens	15	0
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	45	18
88. Administrator(s) unresponsive, unavailable	15	3
89. Grievance procedure (use C for transfer, discharge appeals)	0	0
90. Inappropriate or illegal policies, practices, record-keeping	105	44
91. Insufficient funds to operate	0	0
92. Operator inadequately trained	0	0
93. Offering inappropriate level of care (for B&C/similar)	0	13
94. Resident or family council/committee interfered with, not supported	0	2
95. Not Used		
<b>M. Staffing</b>		
96. Communication, language barrier (use D.29 if problem involves resident inability to communicate)	6	2
97. Shortage of staff	22	3
98. Staff training	7	5
99. Staff turn-over, over-use of nursing pools	2	0
100. Staff unresponsive, unavailable	14	6
101. Supervision	12	4
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
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>		

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111. Access to information, application	1	0
112. Denial of eligibility	0	0
113. Non-covered services	0	0
114. Personal Needs Allowance	0	0
115. Services	1	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	84	39
118. Bed shortage - placement	0	0
119. Facilities operating without a license	0	0
120. Family conflict; interference	107	44
121. Financial exploitation or neglect by family or other not affiliated with facility	230	77
122. Legal - guardianship, conservatorship, power of attorney, wills	135	42
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	2	0
128. Request for less restrictive placement	3	0
<b>Total, categories A through P</b>	4,499	1,030
<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	0	
130. Hospital or hospice	86	
131. Public or other congregate housing not providing personal care	0	
132. Services from outside provider (see instructions)	34	
133. Not Used		
<b>Total, Heading Q.</b>	120	
<b>Total Complaints*</b>	5,649	
* (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.

	<b>Nursing Facility</b>	<b>B&amp;C, ALF, RCF, etc.</b>	<b>Other Settings</b>
1. Complaints which were verified:	1,779	511	60

*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	91	25	3
c. Which were withdrawn by the resident or complainant or resident died before final outcome of complaint investigation	102	33	1
d. Which were referred to other agency for resolution and:			
1) report of final disposition was not obtained	15	4	1
2) other agency failed 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	57	14	1
f. Which were partially resolved* but some problem remained	647	190	16
g. Which were resolved* to the satisfaction of resident or complainant	3,587	764	98

<b>Total, by type of facility or setting</b>	<b>4,499</b>	<b>1,030</b>	<b>120</b>
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<b>Grand Total (Same number as that for total complaints on pages 1 and 7)</b>			<b>5,649</b>
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*\* 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



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**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.

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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 Institutionalized Elderly (OOIE) has identified the need to increase the number of volunteer advocates placed in nursing homes. Over the last two years, the number of "active" volunteers has increased from 150 in the beginning of calendar year 2011 to 208 as of the end of calendar year 2012. Ombudsman McCracken has focused on improving volunteer advocate recruitment in the southern part of the state by recruiting a strong regional volunteer coordinator for that area. In addition, the Volunteer Advocate Program in the last year implemented a criminal history background check and fingerprinting program that has proven highly successful. The OOIE is currently working in conjunction with other state Ombudsman programs and the National Ombudsman Resource Center to implement a partial on-line training program.

The OOIE and other state agencies had identified the slow pace of nursing home transitions under the state's existing Money Follows the Person (MFP) program as an issue. In an effort to provide greater public awareness about home and community based services, the OOIE is assisting the NJ Department of Human Services with marketing the MFP program. OOIE is currently hiring staff under a 100 percent federal grant to outreach residents in nursing homes, work with families and to educate nursing facility staff and the general public that "a nursing home may not be...the only option."

Studies have shown that New Jersey lags behind other states in the number of individuals who have advance care

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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?	387
2. How many beds are there in these facilities?	51,967

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
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a) How many of the board and care and similar adult care facilities described above are regulated in your State?	519
b) How many beds are there in these facilities?	25,250

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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.

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	208	0
Number of Volunteer hours donated	Total number of hours donated by certified volunteer	36,400	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

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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	\$714,944
Federal - Older Americans Act (OAA) Title VII, Chapter 3, Elder Abuse Preventior	\$0
Federal - OAA Title III provided at State level	\$0
Federal - OAA Title III provided at AAA level	\$0
Other Federal; specify:	\$0
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State funds	\$1,918,463
Local; specify:	\$0
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<b>Total Program Funding</b>	<b>\$2,633,407</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	58	0	
	Number hours	147	0	
	Total number of trainees that attended any of the training sessions above (duplicated count)	398	0	
	3 most frequent topics for training	State and Federal trends in advocacy		
		new OOIE initiatives (MFP, OOIE, MDS3.0, S-COPE)		
		handling complaints, residents' rights, obtaining consent		
<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	96	0	
	3 most frequent topics for training	overview of program, role of the volunteer		
		reporting concerns, mandatory reports		
		residents and end of life, advance care planning		
<b>4. Consultation to facilities (Consultation: providing information and technical assistance, often by telephone)</b>	3 most frequent areas of consultation	resident council meetings, residents' rights		
		involuntary discharge		
		end of life		
	Number of consultations	2,309	0	
		Department of Health surveys, care issues, residents' rights		

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<b>5. Information and consultation to individuals (usually by telephone)</b>	3 most frequent requests/needs	Involuntary discharge	
		advance directives	
	Number of consultations	2,686	0
<b>6. Facility Coverage (other than in response to complaint) *</b>	Number Nursing Facilities visited (unduplicated)	208	0
	Number Board and Care (or similar) facilities visited (unduplicated)	0	0
<b>7. Participation in Facility Surveys</b>	Number of surveys	54	0
<b>8. Work with resident councils</b>	Number of meetings attended	358	0
<b>9. Work with family councils</b>	Number of meetings attended	27	0
<b>10. Community Education</b>	Number of sessions	125	0
<b>11. Work with media</b>	3 most frequent topics	volunteer program overview	
		volunteer recruitment	
		mandatory reporting law	
	Number of interviews/discussions	10	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>			