

# State data for NJ for FFY 2020

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## Case and Complaints Summary

Total number of cases closed:

3669

Totals Cases per Complainant by Facility Setting

Complainant	Nursing Facility	Residential Care Community	Other	Total per complainant
Resident	245	31	18	294
Resident representative, friend, family	836	154	16	1006
Ombudsman program	546	3	0	549
Facility staff	1244	218	37	1499
Representative of other agency or program	89	23	2	114
Concerned person	96	40	6	142
Resident or family council	3	0	0	3
Unknown	50	11	1	62
<b>Total per facility type</b>	<b>3109</b>	<b>480</b>	<b>80</b>	<b>3669</b>

7191

Total number of complaints:

Major Complaint Groups by Type of Facility

Complaint Category/Type	Nursing Facility	Residential Care Community	Other	Total by Complaint Type
A. Abuse, gross neglect, exploitation	1164	214	48	1426
B. Access to Information	236	24	6	266
C. Admission, transfer, discharge, eviction	381	94	8	483
D. Autonomy, choice, rights	466	109	18	593
E. Financial, property	186	21	1	208
F. Care	1904	232	25	2161
G. Activities and community integration and social services	128	12	3	143
H. Dietary	272	30	4	306
I. Environment	851	141	18	1010
J. Facility policies, procedures and practices	260	61	5	326
K. Complaints about an outside agency (non-facility)	17	1	0	18
L. System and others (non-facility)	198	48	5	251

Complaint Verifications

Verification Status	Nursing Facility	Residential Care Community	Other	Total
Verified	3728	653	87	4468
Not Verified	2335	334	54	2723

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**Complaint Dispositions**

<b>Disposition Status</b>	<b>Nursing Facility</b>	<b>Residential Care Community</b>	<b>Other</b>	<b>Total</b>
Partially or fully resolved to the satisfaction of the resident, resident representative or complainant	5774	909	126	6809
Withdrawn or no action needed by the resident, resident representative or complainant	143	34	5	182
Not resolved to the satisfaction of the resident, resident representative or complainant	146	44	10	200

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## Complaint Types by Type of Facility

Complaint Category/Type	Nursing Facility	Residential Care Community	Other	Total by Complaint Type
A. Abuse, gross neglect, exploitation	1164	214	48	1426
A01. Abuse: physical	608	80	30	718
A02. Abuse: sexual	67	10	2	79
A03. Abuse: psychological	195	34	7	236
A04. Financial exploitation	263	87	9	359
A05. Gross neglect	31	3	0	34
B. Access to Information	236	24	6	266
B01. Access to information and records	176	21	1	198
B02. Language and communication barrier	55	1	4	60
B03. Willful interference	5	2	1	8
C. Admission, transfer, discharge, eviction	381	94	8	483
C01. Admission	6	6	0	12
C02. Appeal process	2	0	0	2
C03. Discharge or eviction	218	78	7	303
C04. Room issues	155	10	1	166
D. Autonomy, choice, rights	466	109	18	593
D01. Choice in health care	22	1	0	23
D02. Live in less restrictive setting	27	5	3	35
D03. Dignity and respect	73	13	1	87
D04. Privacy	29	9	2	40
D05. Response to complaints	19	1	1	21
D06. Retaliation	29	14	2	45
D07. Visitors	160	48	7	215
D08. Resident or family council	4	0	0	4
D09. Other rights and preferences	103	18	2	123
E. Financial, property	186	21	1	208
E01. Billing and charges	32	8	0	40
E02. Personal property	154	13	1	168
F. Care	1904	232	25	2161
F01. Accidents and falls	424	77	7	508
F02. Response to requests for assistance	179	16	0	195
F03. Care planning	387	41	5	433
F04. Medications	115	20	0	135

<b>Complaint Category/Type</b>	<b>Nursing Facility</b>	<b>Residential Care Community</b>	<b>Other</b>	<b>Total by Complaint Type</b>
F05. Personal hygiene	148	12	2	162
F06. Access to health related services	94	19	4	117
F07. Symptoms unattended	237	24	3	264
F08. Incontinence care	145	7	1	153
F09. Assistive devices or equipment	68	8	0	76
F10. Rehabilitation services	79	2	3	84
F11. Physical restraint	9	2	0	11
F12. Chemical restraint	19	4	0	23
<b>G. Activities and community integration and social services</b>	<b>128</b>	<b>12</b>	<b>3</b>	<b>143</b>
G01. Activities	49	11	2	62
G02. Transportation	22	0	1	23
G03. Conflict resolution	37	1	0	38
G04. Social services	20	0	0	20
<b>H. Dietary</b>	<b>272</b>	<b>30</b>	<b>4</b>	<b>306</b>
H01. Food services	102	12	0	114
H02. Dining and hydration	126	12	1	139
H03. Therapeutic or special diet	44	6	3	53
<b>I. Environment</b>	<b>851</b>	<b>141</b>	<b>18</b>	<b>1010</b>
I01. Environment	624	104	14	742
I02. Building structure	49	12	1	62
I03. Supplies, storage and furnishings	84	12	0	96
I04. Accessibility	10	4	0	14
I05. Housekeeping, laundry and pest abatement	84	9	3	96
<b>J. Facility policies, procedures and practices</b>	<b>260</b>	<b>61</b>	<b>5</b>	<b>326</b>
J01. Administrative oversight	94	41	4	139
J02. Fiscal management	0	3	0	3
J03. Staffing	166	17	1	184
<b>K. Complaints about an outside agency (non-facility)</b>	<b>17</b>	<b>1</b>	<b>0</b>	<b>18</b>
K01. Regulatory system	5	0	0	5
K02. Medicaid	9	1	0	10
K03. Managed care	1	0	0	1
K04. Medicare	2	0	0	2
K05. Veterans Affairs	0	0	0	0
K06. Private Insurance	0	0	0	0
<b>L. System and others (non-facility)</b>	<b>198</b>	<b>48</b>	<b>5</b>	<b>251</b>
L01. Resident representative or family conflict	153	46	5	204

<b>Complaint Category/Type</b>	<b>Nursing Facility</b>	<b>Residential Care Community</b>	<b>Other</b>	<b>Total by Complaint Type</b>
L02. Services from outside provider	15	1	0	16
L03. Request to transition to community setting	30	1	0	31

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## Staff and Volunteers

### Office of State Ombudsman Staff

Total staff	30	
Total full-time equivalent (FTE)	27	
Total state volunteer representatives	196	
Total hours donated by state volunteers representatives	15,755	Hours
Total other volunteers (not representatives)	0	

### Local Ombudsman Entity Staff

Total staff		
Total full-time equivalent (FTE)		
Total local volunteer representatives		
Total hours donated by local volunteer representatives		Hours
Total local volunteers (not representatives)		

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## Funds Expended

### Funds Expended from OAA Sources

Federal - OAA Title VII, Chapter 2, Ombudsman	\$487,775
Federal - OAA Title VII, Chapter 3	\$0
OAA Title III - State level	\$0
OAA Title III - AAA level	\$0
<b>Other Federal Sources</b>	
There are no other Federal sources	
Total other Federal funds expended	\$693,805
<b>Other State Sources</b>	
There are no other State sources	
Total other State funds expended	\$1,883,867
<b>Other Local Sources</b>	
There are no other Local sources	
Total other Local funds expended	\$0

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### Facility - Number and Capacity

#### Licensed Nursing Facilities

Total number	386
Total resident capacity	51665

#### Residential Care Communities

Total number	526
Total resident capacity	27898