

	A	B
1	Part I - Cases, Complainants and Complaints	
2	A. Cases Opened	
3		
4	Provide the total number of cases opened during reporting period.	3,484
5		
6	<i>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.</i>	

	A	B	C	D
1	Part I - Cases, Complainants and Complaints			
2	B. Cases Closed, by Type of Facility			
3				
4	Provide the number of cases closed, by type of facility/setting, which were received from the types of complainants listed below.			
5	<i>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.</i>			
6				
7	Complainants:	Nursing Facility	B&C, ALF, RCF, etc.*	Other Settings
8				
9	1. Resident	178	43	11
10	2. Relative/friend of resident	654	142	9
11	3. Non-relative guardian, legal representative	8	8	
12	4. Ombudsman/ombudsman volunteer	225	13	4
13	5. Facility administrator/staff or former staff	1,791	261	28
14	6. Other medical: physician/staff	59	19	2
15	7. Representative of other health or social service agency or program	28	20	3
16	8. Unknown/anonymous	47	11	1
17	9. Other: Bankers, Clergy, Law Enforcement, Public Officials, etc.	54	37	7
18				
19	Total number of cases closed during the reporting period:		3,663	
20				
21	* Board and care, assisted living, residential care and similar long-term care facilities, both regulated and unregulated			

	A	B
1	Part I - Cases, Complainants and Complaints	
2	C. Complaints Received	
3		
4	For cases which were closed during the reporting period (those counted in B above), provide the total number of complaints received:	6,587
5		
6		
7	<i>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.</i>	

A	B	C	D
1	Part I - Cases, Complainants and Complaints		
2	D. Types of Complaints, by Type of Facility		
3			
4	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.		
5		Nursing Facility	B&C, ALF, RCF, etc.
6	Residents' Rights		
7	A. Abuse, Gross Neglect, Exploitation		
8	1. Abuse, physical (including corporal punishment)	448	40
9	2. Abuse, sexual	51	7
10	3. Abuse, verbal/psychological (including punishment, seclusion)	198	32
11	4. Financial exploitation (use categories in section E for less severe financial complaints)	17	19
12	5. Gross neglect (use categories under Care, Sections F & G for non-willful forms of neglect)	8	2
13	6. Resident-to-resident physical or sexual abuse	364	56
14	7. Not Used		
15	B. Access to Information by Resident or Resident's Representative		
16	8. Access to own records	13	4
17	9. Access by or to ombudsman/visitors	32	19
18	10. Access to facility survey/staffing reports/license		
19	11. Information regarding advance directive		
20	12. Information regarding medical condition, treatment and any changes	62	11
21	13. Information regarding rights, benefits, services, the resident's right to complain	8	
22	14. Information communicated in understandable language	1	
23	15. Not Used		
24	C. Admission, Transfer, Discharge, Eviction		
25	16. Admission contract and/or procedure	4	8
26	17. Appeal process - absent, not followed		
27	18. Bed hold - written notice, refusal to readmit	15	11
28	19. Discharge/eviction - planning, notice, procedure, implementation, inc. abandonment	206	63
29	20. Discrimination in admission due to condition, disability		1
30	21. Discrimination in admission due to Medicaid status	1	8
31	22. Room assignment/room change/intrafacility transfer	32	7
32	23. Not Used		
33	D. Autonomy, Choice, Preference, Exercise of Rights, Privacy		
34	24. Choose personal physician, pharmacy/hospice/other health care provider	3	
35	25. Confinement in facility against will (illegally)	26	9
36	26. Dignity, respect - staff attitudes	184	14
37	27. Exercise preference/choice and/or civil/religious rights, individual's right to smoke	29	9
38	28. Exercise right to refuse care/treatment	33	8
39	29. Language barrier in daily routine	55	3
40	30. Participate in care planning by resident and/or designated surrogate	33	9
41	31. Privacy - telephone, visitors, couples, mail	20	6
42	32. Privacy in treatment, confidentiality	19	2
43	33. Response to complaints	22	5
44	34. Reprisal, retaliation	19	4
45	35. Not Used		
46	E. Financial, Property (Except for Financial Exploitation)		

A	B	C	D
5		Nursing Facility	B&C, ALF, RCF, etc.
47	36. Billing/charges - notice, approval, questionable, accounting wrong or denied (includes overcharge of private pay residents)	45	13
48	37. Personal funds - mismanaged, access/information denied, deposits and other money not returned (report criminal-level misuse of personal funds under A.4)	52	3
49	38. Personal property lost, stolen, used by others, destroyed, withheld from resident	110	23
50	39. Not Used		
51			
52	Resident Care		
53	F. Care		
54	40. Accidental or injury of unknown origin, falls, improper handling	490	58
55	41. Failure to respond to requests for assistance	132	21
56	42. Care plan/resident assessment - inadequate, failure to follow plan or physician orders (put lack of resident/surrogate involvement under D.30)	469	84
57	43. Contracture	2	1
58	44. Medications - administration, organization	98	37
59	45. Personal hygiene (includes nail care & oral hygiene) and adequacy of dressing & grooming	111	9
60	46. Physician services, including podiatrist	37	6
61	47. Pressure sores, not turned	88	6
62	48. Symptoms unattended, including pain, pain not managed, no notice to others of changes in condition	170	29
63	49. Toileting, incontinent care	142	14
64	50. Tubes - neglect of catheter, gastric, NG tube (use D.28 for inappropriate/forced use)	27	1
65	51. Wandering, failure to accommodate/monitor exit seeking behavior	50	12
66	52. Not Used		
67	G. Rehabilitation or Maintenance of Function		
68	53. Assistive devices or equipment	52	3
69	54. Bowel and bladder training	1	
70	55. Dental services	26	3
71	56. Mental health, psychosocial services	9	1
72	57. Range of motion/ambulation	15	2
73	58. Therapies - physical, occupational, speech	53	1
74	59. Vision and hearing	19	4
75	60. Not Used		
76	H. Restraints - Chemical and Physical		
77	61. Physical restraint - assessment, use, monitoring	13	3
78	62. Psychoactive drugs - assessment, use, evaluation	24	4
79	63. Not Used		
80			
81	Quality of Life		
82	I. Activities and Social Services		
83	64. Activities - choice and appropriateness	31	12
84	65. Community interaction, transportation	7	4
85	66. Resident conflict, including roommates	69	7
86	67. Social services - availability/appropriateness/ (use G.56 for mental health, psychosocial counseling/service)	5	1
87	68. Not Used		
88	J. Dietary		
89	69. Assistance in eating or assistive devices	31	2
90	70. Fluid availability/hydration	37	5
91	71. Food service - quantity, quality, variation, choice, condiments, utensils, menu	65	15

A	B	C	D
5		Nursing Facility	B&C, ALF, RCF, etc.
92	72. Snacks, time span between meals, late/missed meals	21	10
93	73. Temperature	14	2
94	74. Therapeutic diet	23	2
95	75. Weight loss due to inadequate nutrition	37	5
96	76. Not Used		
97	K. Environment		
98	77. Air/environment: temperature and quality (heating, cooling, ventilation, water, noise	22	7
99	78. Cleanliness, pests, general housekeeping	36	17
100	79. Equipment/building - disrepair, hazard, poor lighting, fire safety, not secure	56	14
101	80. Furnishings, storage for residents	17	1
102	81. Infection control	22	2
103	82. Laundry - lost, condition	6	2
104	83. Odors	16	5
105	84. Space for activities, dining	3	
106	85. Supplies and linens	10	
107	86. Americans with Disabilities Act (ADA) accessibility		
108			
109	Administration		
110	L. Policies, Procedures, Attitudes, Resources (See other complaint headings, of above, for policies on advance directives, due process, billing, management residents' funds)		
111	87. Abuse investigation/reporting, including failure to report	65	20
112	88. Administrator(s) unresponsive, unavailable	7	3
113	89. Grievance procedure (use C for transfer, discharge appeals)		
114	90. Inappropriate or illegal policies, practices, record-keeping	86	35
115	91. Insufficient funds to operate	1	2
116	92. Operator inadequately trained		
117	93. Offering inappropriate level of care (for B&C/similar)		11
118	94. Resident or family council/committee interfered with, not supported	1	
119	95. Not Used		
120	M. Staffing		
121	96. Communication, language barrier (use D.29 if problem involves resident inability to communicate)	8	1
122	97. Shortage of staff	63	14
123	98. Staff training	13	5
124	99. Staff turn-over, over-use of nursing pools	5	2
125	100. Staff unresponsive, unavailable	21	7
126	101. Supervision	5	3
127	102. Eating Assistants		
128			
129	Not Against Facility		
130	N. Certification/Licensing Agency		
131	103. Access to information (including survey)		
132	104. Complaint, response to		
133	105. Decertification/closure		
134	106. Sanction, including Intermediate		
135	107. Survey process		
136	108. Survey process - Ombudsman participation		
137	109. Transfer or eviction hearing		
138	110. Not Used		

A	B	C	D
5		Nursing Facility	B&C, ALF, RCF, etc.
139	O. State Medicaid Agency		
140	111. Access to information, application	4	
141	112. Denial of eligibility	2	1
142	113. Non-covered services		
143	114. Personal Needs Allowance		
144	115. Services		1
145	116. Not Used		
146	P. System/Others		
147	117. Abuse/neglect/abandonment by family member/friend/guardian or, while on visit out of facility, any other person	85	26
148	118. Bed shortage - placement		
149	119. Facilities operating without a license		
150	120. Family conflict; interference	112	45
151	121. Financial exploitation or neglect by family or other not affiliated with facility	175	90
152	122. Legal - guardianship, conservatorship, power of attorney, wills	83	36
153	123. Medicare		
154	124. Mental health, developmental disabilities, including PASRR		
155	125. Problems with resident's physician/assistant		
156	126. Protective Service Agency		
157	127. SSA, SSI, VA, Other Benefits/Agencies	2	1
158	128. Request for less restrictive placement	5	
159	Total, categories A through P	5,409	1,111
160			
161	Q. Complaints About Services in Settings Other Than Long-Term Care Facilities or By Outside Provider in Long-Term Care Facilities (see instructions)		
162	129. Home care	14	
163	130. Hospital or hospice	40	
164	131. Public or other congregate housing not providing personal care		
165	132. Services from outside provider (see instructions)	13	
166	133. Not Used		
167	Total, Heading Q.	67	
168			
169	Total Complaints*	6,587	
170			
171	* (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.)		

	A	B	C	D	E	F
1	Part I - Cases, Complainants and Complaints					
2	E. Action on Complaints					
3						
4	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.					
5				Nursing Facility	B&C, ALF, RCF, etc.	Other Settings
6	1. Complaints which were verified:			2,511	649	27
7						
8	<i>Verified: It is determined after work [interviews, record inspection, observation, etc.] that the circumstances described in the complaint are generally accurate.</i>					
9						
10	2. Disposition: Provide for all complaints reported in C and D, whether verified or not, the number:					
11	a. For which government policy or regulatory change or legislative action is required to resolve (this may be addressed in the issues section)					
12	b. Which were not resolved* to satisfaction of resident or complainant			71	34	1
13	c. Which were withdrawn by the resident or complainant or resident died before final outcome of complaint investigation			70	15	3
14	d. Which were referred to other agency for resolution and:					
15	1) report of final disposition was not obtained			33	4	4
16	2) other agency failed to act on complaint					
17	3) agency did not substantiate complaint			1		
18	e. For which no action was needed or appropriate			38	9	2
19	f. Which were partially resolved* but some problem remained			455	101	8
20	g. Which were resolved* to the satisfaction of resident or complainant			4,741	948	49
21						
22	Total, by type of facility or setting			5,409	1,111	67
23						
24	Grand Total (Same number as that for total complaints on pages 1 and 7)					6,587
25						
26	<i>* Resolved: The complaint/problem was addressed to the satisfaction of the resident or complainant.</i>					
27						
28	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.					
29						
30	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					

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

2 **F. Complaint Description (Optional):**

3

4 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.

5

6

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1	Part II - Major Long-Term Care Issues
2	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.
3	<p>In Federal Fiscal Year 2019, the NJ Office of the Long-Term Care Ombudsman (LTCO) began to more closely analyze the outcome of referrals made to the state survey agency over a five-year period. The LTCO has met with survey agency staff to ensure smoother hand-offs to the state regulatory authority and to identify ways to streamline the referral and follow-up process. While the LTCO has increased the number of referrals that it has made to the state survey agency, the verification rate by the state survey agency has maintained flat at an average of less than 40 percent.</p> <p>The NJ Medical Aid in Dying Act (MAID) was signed into law and implemented in 2019. The Act allows certain terminally ill New Jerseyans to request, obtain and self-administer medication to end their lives. The LTCO is in the process of training its staff and members of the Regional Ethics Committees overseen by the LTCO on the provisions of the Act. The NJ Department of Health, the state survey agency, is currently developing regulations to complement the new MAID Act. Because the Act allows any and all health care providers, including long-term care (LTC) facilities, to opt out of offering their patients/residents access to the provisions of this Act, the LTCO is advocating that all LTC facilities provide full disclosure to residents upon admission, and at regular intervals thereafter, about whether that facility will be opting out.</p> <p>In 2019, the LTCO convened a group of LGBTQ senior advocates to provide comment on pending legislation that would ensure much-needed training and enforcement in LTC facilities concerning the rights of LGBTQ individuals residing there. The LTCO has found that LGBTQ elders are reluctant to report abuse, neglect or exploitation. In addition, it has been widely reported that many older adults conceal their LGBTQ status when entering LTC facilities, fearful that staff and other residents will not accept or treat them with dignity. The LTCO and LGBTQ senior advocates have pushed for achievable timelines for the training of LTC staff and have recommended that specific elements be included in any training that is provided.</p>
4	

	A	B	C	D
1	Part III - Program Information and Activities			
2	A. Facilities and Beds:			
3	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.			
4	1. How many nursing facilities are licensed in your State?			386
5	2. How many beds are there in these facilities?			51,579
6	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.			
7	no change			
8				
9	a) How many of the board and care and similar adult care facilities described above are regulated in your State?			522
10	b) How many beds are there in these facilities?			27,015

A	B	C	D	E
1	Part III - Program Information and Activities			
2	B. Program Coverage			
3				
4	<i>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.</i>			
5				
6	B.1. Designated Local Entities			
7				
8	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:			
9				
10	Local entities hosted by:			
11	Area agency on aging		0	
12	Other local government entity		0	
13	Legal services provider		0	
14	Social services non-profit agency		0	
15	Free-standing ombudsman program		0	
16	Regional office of State ombudsman program		0	
17	Other; specify:		0	
18				
19				
20	Total Designated Local Ombudsman Entities		0	
21				
22	B.2. Staff and Volunteers			
23				
24	Provide numbers of staff and volunteers, as requested, at state and local levels.			
25	Type of Staff	Measure	State Office	Local Programs
26	Paid program staff	FTEs	23.00	0.00
27		Number people working full-time on ombudsman program	19	0
28	Paid clerical staff	FTEs	4.00	0.00
29	Volunteer ombudsmen certified to address complaints at close of reporting period	Number volunteers	214	0
30	Number of Volunteer hours donated	Total number of hours donated by certified volunteer Ombudsmen	37,600	0
31	<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>			
32	Other volunteers (i.e., not certified) at close of reporting period	Number of volunteers	1	0
33				
34	B.3. Organizational Conflict of Interest			
35				

A	B	C	D	E
36	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.			
37				
38	Location of Conflict Identified at:	State		
39				
40	none identified			
41				
42	For subsequent reporting years:			
43	Yes	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		

A	B	C	D
1	Part III - Program Information and Activities		
2	C. Program Funding		
3			
4	Provide the amount of funds expended during the fiscal year from each source for your statewide program:		
5			
6	Federal - Older Americans Act (OAA) Title VII, Chapter 2, Ombudsman		\$529,877
7	Federal - Older Americans Act (OAA) Title VII, Chapter 3, Elder Abuse Prevention		
8	Federal - OAA Title III provided at State level		
9	Federal - OAA Title III provided at AAA level		
10	Other Federal; specify:		\$769,024
11	MFP		
12	State funds		\$1,738,227
13	Local; specify:		
14			
15			
16	Total Program Funding		\$3,037,128

	A	B	C	D
1	Part III - Program Information and Activities			
2	D. Other Ombudsman Activities			
3				
4	Provide below and on the next page information on ombudsman program activities other than work on complaints.			
5				
6	Activity	Measure	State	Local
7		Number sessions	59	0
8		Number hours	644	0
9		Total number of trainees that attended any of the training sessions above (duplicated count)	591	0
10	1. Training for ombudsman staff and volunteers		complaints/investigations	
11		3 most frequent topics for training	involuntary discharges	
12			end of life	
13	2. Technical assistance to local ombudsmen and/or volunteers	Estimated percentage of total staff time	25	0
14		Number sessions	228	0
15			mandatory reporting	
16	3. Training for facility staff	3 most frequent topics for training	HCBS/MFP	
17			resident rights	
18			involuntary discharges	
19	4. Consultation to facilities (Consultation: providing information and technical assistance, often by telephone)	3 most frequent areas of consultation	Medicare cut	
20			financial exploitation	
21		Number of consultations	6,317	0

	A	B	C	D
6	Activity	Measure	State	Local
22			involuntary discharges	
23	5. Information and consultation to individuals (usually by telephone)	3 most frequent requests/needs	Medicare cut	
24			family disputes	
25		Number of consultations	6,479	0
26	6. Facility Coverage (other than in response to complaint) *	Number Nursing Facilities visited (unduplicated)	239	0
27		Number Board and Care (or similar) facilities visited (unduplicated)	4	0
28	7. Participation in Facility Surveys	Number of surveys	108	0
29	8. Work with resident councils	Number of meetings attended	562	0
30	9. Work with family councils	Number of meetings attended	2	0
31	10. Community Education	Number of sessions	103	0
32			abuse cases	
33		3 most frequent topics	World Elder Abuse Awareness Day	
34	11. Work with media		unsafe staffing	
35		Number of interviews/discussions	10	0
36		Number of press releases	25	0
37	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%.)	25	0
38	* 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."			