

## **Best Practices Personnel Management: Long-Term Care Ombudsmen**

**NOTE: The Illinois Department on Aging has not given final approval of this personnel handbook.**

## Foreword

The Department on Aging is pleased to present this ***Best Practices Personnel Handbook: Long-Term Care Ombudsmen*** for use by the Illinois Regional Long-Term Care Ombudsman Programs in supporting their volunteers. Training and keeping volunteers have been shown to greatly enhance a program's ability to ensure that residents in long-term care facilities have a meaningful access to ombudsman services.

The Institute of Medicine study, ***Real People, Real Problems: An Evaluation of the Long-Term Care Ombudsman Programs of the Older Americans Act***, commissioned by Congress, identifies exemplary practices for ombudsman programs. Two of these practices include having 1) a process for assessing an ombudsman's performance in complaint resolution, education and advocacy functions, and 2) procedures for terminating an ombudsman. In 1998, the I CARE-Project Advocate Long-Term Care Ombudsman Program, a program of the Illinois Retired Teachers Association Foundation, working cooperatively with the Department on Aging, received a grant from the Retirement Research Foundation of Chicago to develop exemplary practices for ombudsman programs. With these funds, two handbooks were developed, this one and a personnel handbook for the ombudsmen. You will note that Section 1 of this management handbook forms the body of the personnel handbook.

Appreciation is extended to the task force, chaired by Michael O'Donnell, that developed the best practice materials.

In keeping with the intent of the grant, all parts of the materials may be copied and used in ombudsman or other volunteer programs nationwide. Credit must be given to the Retirement Research Foundation for its generosity in funding this important work.

## Introduction

***Long-Term Care Ombudsmen work daily to uphold their commitment to protect and promote the rights and quality of life for 128,000 Illinois citizens residing in nursing facilities.***

Governor George Ryan, 1999

Under the auspices of the Illinois State Long-Term Care Ombudsman Office, I CARE-Project Advocate secured a grant from the Retirement Research Foundation of Chicago to produce materials promoting the use of volunteers in ombudsman programs

A personnel task force was convened which determined that instead of writing a position paper on personnel competencies, it would be more effective to develop a model "Best Practices" handbook for ombudsman programs. Task Force members judged that it would be more efficacious to give programs the tools to use so that recruiting and retaining volunteers might be an easier, more attainable goal.

The task force reviewed materials from Illinois' and other states' ombudsman programs, the American Association of Retired Persons, and the Institute of Medicine in making recommendations on what best practices should be included. The result is this ***Best Practices Personnel Management Long-Term Care Ombudsmen*** and ***Best Practices Personnel Handbook: Long-Term Care Ombudsmen***. Section 1 of the management handbook is identical to the main text of the personnel handbook and forms the basis for training on ombudsman ethics and the mission of the program.

In thinking about a personnel handbook for ombudsmen, the task force, from the beginning, committed itself to developing framework documents: a *Mission Statement*, *Statement of Values*, *Code of Ethics*, and *Code of Conduct*. Members believed that these materials were critically important in order for a program to set a tone and create an atmosphere for this important work with long-term care residents.

The following briefly describes the units of the personnel handbook:

### Section 1: Personnel

The *Mission Statement* and *Statement of Values* speak to how profoundly important it is to honor and respect the frail elderly. Ombudsmen are visiting with residents who are living through a stage of life they have yet to live and have much to learn from.

*Residents' Rights* restate the rights, protections, and privileges guaranteed to all persons residing in long-term care facilities.

The *Code of Ethics* speaks to the need to adopt a serious attitude when becoming an ombudsman and the *Code of Conduct* reflects the importance of developing a purposeful behavior in order to do this work.

The *Expectations of Ombudsmen* and *What the Program Guarantees the Ombudsman* should be helpful in creating a volunteer-friendly environment and their inclusion suggests how important it is that volunteers know what they can count on from the program and what the program expects from them.

## Section 2: Management

The management section, Section 2, begins with a unit entitled, *The Necessity for Volunteers*. This unit suggests why the Institute of Medicine's study found that the most effective ombudsman programs use volunteers. It also provides a framework and rationale for the recruitment of volunteers into an ombudsman program.

*Agency Hiring Practices* and *Volunteer Management Practices* are some of the effective ways developed by programs represented on the committee and suggested from the review of other volunteer practices. They are by no means meant to be all-inclusive.

Included with the hiring practices are sample materials, a job description and an application form, which can be adapted for individual programs. They demonstrate some of the effective procedures ombudsman programs have developed in order to obtain strong commitments from volunteer ombudsmen. Management practices include a sample visitation agreement, and two examples of recertification interviews, along with a companion piece on the recertification process. This material is included to reinforce the importance of encouraging volunteers to give feedback to the program. It also serves as a reminder of the basic components of the program. A model termination process concludes this section.

These "Best Practices," which have been successful in programs with a significant number of volunteers, are presented as guides to strengthen the Illinois programs. All components included in these handbooks are necessary for any program, especially those that wish to recruit and maintain a significant number of volunteers.

## **Mission Statement and Statement of Values**

The Long-Term Ombudsman Program exists to serve the needs of older persons residing in long-term care residential facilities. We seek to promote care for residents in a manner and in an environment that maintains and enhances each resident's dignity and respect in- full recognition of his individuality, self-esteem, and self-worth.

In pursuit of this mission, we commit to the following values:

### Value of Older People

We believe that older persons, whether they are residents of long-term care facilities or live in their own homes, are to be valued. We believe that older people have a positive effect on society, We believe this about all people, no matter how severe the disability or the level of dementia.

We believe that society should value older people and provide protection of their rights as needed.

We believe that every person is unique and each has the right to participate in decisions that affect him.

We believe that no resident should ever be abused, neglected or exploited.

We believe that residents should have a meaningful access to the ombudsman program to protect their rights.

We believe that older people should have autonomy and choice, to the maximum extent possible, about how they wish to live their everyday lives.

### Values Regarding Long-Term Care Facilities

We believe that facilities should provide living environments for residents that allow them to live in the manner they lived in their own homes.

We believe that facilities should promote residents' rights, not just tolerate them.

We believe that facilities should provide individualized care that promotes the highest level of functioning and well being possible.

## Values of Ombudsmen

We treat all people with dignity, respect and compassion.

We are resident-centered, not facility-centered, and, as such, we place the welfare of the resident above all other concerns.

We believe that our ability to develop relationships with residents based on mutual trust is the foundation of our success in providing direct, individual advocacy services.

We believe that confidentiality and empowerment are the cornerstones of our advocacy services.

We believe that we should provide an easy, meaningful access to our ombudsman services so that residents know how to contact us and avail themselves of our services.

We believe that we should build awareness in the community of ombudsman services through family councils and public education.

We believe that we should understand and ensure the enforcement of laws, regulations, and policies that improve long-term facility care.

We believe that we must defend the resident's right to self-determination, even if the resident's decision runs counter to our own personal or moral beliefs, or is detrimental to the resident's health.

## Residents' Rights in a Long-term Care Facility

The State of Illinois publishes a booklet, *Residents' Rights for People in Long Term Care Facilities*, outlining the rights of citizens living in a long-term care facility. Because of the critical nature of this material, these rights are repeated here.

In 1818, the Illinois Constitution mandated all citizens the fundamental right to "**health, safety and welfare.**"

Just because someone resides in a long-term care facility does not mean he forfeits any rights.

The following are rights, protections and privileges guaranteed to long-term care facility residents mandated by Federal and Illinois law:

- The resident has the right to all state and federal guarantees.
- The resident has the right to choice and freedom to the maximum extent possible.
- The resident has the right to safety and good care to maintain health at the highest practical level of functioning and well being possible.
- The resident has the right to clear and complete information about his medical condition and treatment.
- The resident has the right to participate in his own care.
- The resident has the right to choose between medically indicated treatments. The resident has the right to refuse treatment.
- The resident has the right to be free from chemical and/or physical restraints unless it is medically indicated. The long-term care facility must try alternative approaches first.
- The resident has the right to be free of neglect and abuse by anyone. This includes verbal and mental abuse.
- The resident has the right to have his information kept in strictest confidence by the ombudsman. This includes verbal statements about himself, his medical facility records and any other private information.
- The resident has the right to privacy.
- The resident has the right to have, or refuse to have, visits by family/friends.
- The resident has the right to manage his own money.

- The resident has the right to keep and use his own personal property. If a resident's property is missing, the long-term care facility must try to find it.
- The resident has the right to be informed about paying for his own care and about getting Medicare and Medicaid.
- In most circumstances, the resident has the right to stay in a facility, and always has the right to appeal proposals to be transferred or discharged.
- The resident has the right to vote as a citizen of Illinois and the United States for the candidate of his choice.
- The resident has the right to practice the religion of his choice.
- The resident has the right to participate with other residents in the resident advisory council.
- The resident has the right to complain and present grievances to his facility and to get a prompt response without fear of reprisal, coercion or interference.
- The resident has the right to ask the long-term care ombudsman program or other advocacy groups for help in all areas.
- The resident has the right to present grievances to outside organizations and advocates, including, but not limited to, the following agencies:

**Illinois Department on Aging Senior Help Line**

(800) 252-8966 (Voice and TTY)

**Illinois Department of Public Health**

(800) 252-4343

(800) 526-0844 (TTY)

**Equip for Equality**

Assists residents with psychiatric disabilities and/or developmental disabilities

(800) 537-2632 (Voice and TTY)

## Code of Ethics

1. The ombudsman will act at all times to respect the dignity and individuality of clients.
2. The ombudsman will respect each client's right to self-determination, and right to live a life according to values adopted for herself, and will refrain from restricting services on the basis of the ombudsman's personal beliefs. The ombudsman will make every reasonable effort to ascertain and act in accordance with the client's wishes and beliefs.
3. The ombudsman will act in accordance with her role as advocate of the client, and report any potential conflict of interest with this role.,
4. The ombudsman will provide service to all clients who request it, without regard to age, gender, race, religion, social or economic status, national origin, personal characteristics, or lifestyle.
5. The ombudsman will at all times respect the privacy of every client, respecting client confidentiality both within and outside the facility.
6. The ombudsman will act to protect vulnerable individuals from abuse and neglect, and report any cases of this to the proper authorities.
7. The ombudsman will act in accordance with the standards and practices of the ombudsman program.

# Code of Conduct

The Long-Term Care Ombudsman program only exists to ensure that persons residing in long-term residential facilities receive quality, appropriate, caring services and that their rights are respected. It is the expectation of the program that all people will be treated with dignity, respect, and compassion.

In order to provide appropriate, quality advocacy services, long-term care ombudsmen shall conduct themselves with integrity and responsibility and shall behave at all times in a manner consistent with this Code of Conduct. The ombudsman shall sign an agreement of participation in the program and make a commitment to the requirements of the program and to this Code of Conduct.

## Knowledge and Competencies of Ombudsmen

- The ombudsman shall act, at all times, in a knowledgeable manner reflective of the training she has received, and within the training guidelines and requirements of the program.
- The ombudsman shall demonstrate a knowledge and understanding of the principles of empowerment. Only if residents are unable to act on their own behalf will the ombudsman intervene.
- The ombudsman shall demonstrate a knowledge and understanding of her role as a mandated reporter of abuse and neglect.
- The ombudsman shall demonstrate a knowledge and understanding of the residents' rights, including their right to have all information about themselves kept in strictest confidence.
- The ombudsman shall demonstrate a knowledge and understanding of the various manifestations of racism that sometimes occur in facilities and be willing to address them.
- The ombudsman shall demonstrate a knowledge and understanding of, and comfort with, cultural diversity.
- The ombudsman shall demonstrate an ability to communicate among cultures and ethnic groups.
- The ombudsman shall demonstrate a knowledge and understanding of conflict resolution skills and alternatives to confrontation. She shall apply these skills in necessary situations.
- The ombudsman shall demonstrate a knowledge and understanding of the use and misuse of physical and chemical restraints.
- The ombudsman shall respect the personal boundaries of residents and not touch or hug them without permission.

## Allegiances and Duties

- The ombudsman shall display an attitude and demeanor respectful and supportive of the program.
- The ombudsman shall develop and maintain a professional relationship with the staff of the long-term care facility, always understanding that her allegiance lies with the resident and the mission of the ombudsman program.
- The ombudsman shall, at all times, present herself in a manner that reflects positively on the Long-Term Care Ombudsman Program. The ombudsman shall maintain an appearance of cleanliness and good hygiene, with body, hair, and clothes clean and odor-free.
- The ombudsman shall not use or distribute alcohol, tobacco, or any controlled substance, including any over-the-counter or prescription medicine, while performing her duties as an ombudsman.

## Conflict of Interest

- The ombudsman shall only perform her duties in a facility where no conflict of interest exists.
- The ombudsman's only interest in serving shall be to ensure residents' rights are respected. She shall have no other personal interest, such as a fiscal interest (e.g., selling things), a proselytizing interest (e.g., promoting a particular religion), a recruitment interest (e.g., union organizing), or a political interest (e.g., actively supporting a particular party or candidate).
- The ombudsman shall ordinarily only serve in a long-term care facility where no immediate family member resides. When the ombudsman serves in a facility where a family member resides, the ombudsman shall notify the regional ombudsman. In such circumstance where the ombudsman will continue to serve in the facility, the ombudsman shall demonstrate an understanding of her two different roles as a family caregiver and as an ombudsman, and act accordingly.
- The ombudsman shall not accept tips or gifts of any kind from residents, their families, or from anyone or any group affiliated with the facility. Neither shall she give such.
- The ombudsman shall pay for all meals, beverages, and food products in the facility unless she has asked for a taste in response to a complaint.

# Confidentiality

**Empowerment is impossible without confidentiality.**

To empower a resident, the ombudsman must first gain trust. The ombudsman needs to assure the resident that anything the resident says will be held in strictest confidence unless the resident decides otherwise. **The one exception to this is in the case of abuse or neglect.**

**If a resident has given an ombudsman information regarding abuse or neglect, the ombudsman, as a mandated reporter, must report this to the Department of Public Health. The ombudsman must inform the resident that if information divulged by the resident is in regard to abuse or neglect, the ombudsman must report the information in accordance with the "Abused and Neglected Long Term Care Facility Residents Reporting Act."**

Ombudsmen will come in contact and deal regularly with information or records of a personal nature. All information pertaining to residents is confidential and prohibited from disclosure. The ombudsman program has a strict policy concerning confidentiality of records, and ombudsmen should practice discretion and care in discussion of personal matters of any nature. Under no circumstances should matters of a confidential nature be discussed with unauthorized persons.

The confidentiality policy of the ombudsman program is as follows:

All information that is identifiable with any specific individual must be kept confidential unless the person concerned or his designated representative has given informed consent for the information to be released. This applies to both the resident's verbal information and financial or medical/facility records.

1. Right of Protection. The residents shall have a right to the protection of confidential information about themselves. This right may be superseded only in exceptional situations, e.g., in cases of **abuse or neglect**, or a court subpoena.
2. Informed Consent. No information about a resident, or information obtained from a resident, shall be disclosed by an ombudsman in a form that identifies the resident, without the informed consent of the resident, or his designated representative, unless the disclosure is required because of **abuse or neglect**, by court order, or for program monitoring by authorized federal, state, or local monitoring agencies. This consent must be in writing to obtain records, but can be verbal for discussing concerns with facility staff or someone else.
3. Third Party Information. An ombudsman receiving confidential information about a resident from, another agency or individual shall not divulge this information without securing the resident's or designated representative's informed consent.

4. Use of Information in Research and Training. The use of a case record or resident information for research or training purposes shall not be considered a breach of confidentiality, provided the identity of the resident and his family have been effectively disguised.

It is important for the ombudsman to remember that information about a situation must not be divulged, even if a specific resident's name is not used, if the facility staff or others can easily "figure out" whom the ombudsman is talking about.

In addition, an ombudsman must not give out any information regarding the time or place of a Department of Public Health survey, if she should have knowledge of it.

## Expectations of Ombudsmen

### **The ombudsman shall be an accountable representative of the Long-Term Care Ombudsman Program.**

1. The ombudsman shall ideally visit her assigned nursing home once a week. The time and day of the visits should vary from week to week.
2. The ombudsman shall report all cases of abuse or neglect to the Department of Public Health and to the regional ombudsman.
3. The ombudsman shall maintain confidentiality of all information she receives.
4. The ombudsman shall be sufficiently resident-oriented that she will readily identify resident complaints.
5. The ombudsman shall submit monthly reports to the Long-Term Care Ombudsman Program office each month on a day established by the program.
6. The ombudsman shall submit complaint forms to the Long-Term Care Ombudsman Program office within 72 hours (3 days) of observing/documenting the offense/violation/complaint, or in accord with the program's procedures.
7. The ombudsman shall adhere to all commitments made in the *Ombudsman Initial Visitation Agreement*
8. The ombudsman shall meet all training requirements of the program, including the initial training, site training, and yearly inservice training.
9. The ombudsman shall read all mailings, newsletters, informational packets, etc., sent to her by the Long-Term Care Ombudsman Program.
10. The ombudsman shall take every opportunity to inform the community of the necessity for and the work of the Long-Term Care Ombudsman Program, and record at least one inquiry a month.
11. The ombudsman shall expect to be assigned to another facility each year, if possible, in accordance with program policy.

## What the Program Guarantees the Ombudsman

1. The program will clearly delineate what the ombudsman will do and what the program will do.
2. The program will develop a job description for each ombudsman position and will update it if the responsibilities change.
3. The program will provide the required initial training and inservice training as required in the **Illinois Ombudsman Standard, Policy and Procedure Manual**, to all the ombudsmen. The program will provide paid staff to support volunteer ombudsmen in the areas of supervision, consultation, advice, and on-site support as needed.
4. The program will provide training in dealing With violent behavior of residents.
5. The program will provide training in dealing with difficult behavior of nursing home staff, residents and families.
6. The program will provide, in a timely manner, a) access to technical assistance, training, and help on documentation, and b) brochures and informational materials for the education of residents, family members, staff and the community.
7. The program will clearly communicate the documentation and reporting requirements and expectations.
8. The program will provide assistance to the ombudsman when it is requested, or when the program determines such intervention is necessary.
9. The program will inform the ombudsman of the Department on Aging's policies and standards, and any changes in these policies and standards that pertain to her duties and/or job description.
10. The program will conduct a recertification review of all ombudsmen, both paid and volunteer, and will recognize the ombudsman as a caring person at the time of this annual performance review. The program will also promote recognition of ombudsmen at the community level.
11. The program will have a policy on the reimbursement of ombudsmen, paid and volunteer, for travel expenses.

# Long-Term Care Ombudsman Program The Necessity for Volunteers

Volunteers offer an enormous opportunity to provide more services to more residents with greater frequency. A strong volunteer component enhances your program by giving it a greater community presence, a deeper level of service delivery, and a wider range of skills to tap into.

- ❑ **Stretching Funds.** From a review of some of the literature available on long-term care (LTC) ombudsman programs (AARP/LCE, 1994; IOM, 1995), it is clear that one of the most compelling reasons for recruiting volunteers is the overwhelming lack of funds available to do the work any other way.

The allocation of funds from both federal and state government is insufficient to accomplish the goals set out for the program in the Older Americans Act legislation. For this reason alone, it would appear essential to recruit and use volunteer resources to supplement the work of paid staff.

Although this lack of adequate funding suggests the need for volunteers, there are other compelling considerations. Indeed, even if funding for the LTC Ombudsman Program were greatly increased and many more paid staff could be hired, there remain some other, significant reasons for continuing to maintain a large volunteer component.

- ❑ **Increased Presence.** Certainly, a volunteer component increases the program's presence in the community or neighborhood. Volunteers are active members of their own communities; their presence in nursing homes is like having a community "eye" there. In addition, volunteers are more likely to be related or closely connected to others in the community or area. It is estimated that for every volunteer in a program, at least twenty other people will become aware of the program (AARP, 1994). Volunteers talk, have relatives, belong to churches, social, political and other types of organizations, work, go to school, etc. In short, through all the other contexts in which they operate, volunteers have opportunities to discuss, inform, educate, and just plain chat about the program where they volunteer.
- ❑ **Increased Quality.** An article in *Gerontologist* (July, 1991), "Agents of Nursing Home Quality of Care: Ombudsmen and Staff Ratios Revisited," by Ralph Cherry, Ph.D., points out that the presence of volunteer ombudsmen was found to be the *most important factor* associated with quality of care in intermediate care nursing homes. It is the volunteer ombudsman who increases the residents' knowledge of the program and how to use it.
- ❑ **Community Ownership.** All of this makes the program more public to the community. It builds ownership of the program. The community has a greater stake in the nursing home's services and the well being of its residents. Even the residents who may not have relatives or friends left in the community become important to the community at large. The volunteer component builds a broader-based constituency for each individual resident in the facility. Residents' well being becomes as much the community's responsibility as it is the facility's in which they live.

In much the same way that schools are seen to be community centers, so too nursing homes must be seen to belong to everyone in the community, be that a small town or a city neighborhood. It is

this ownership, coupled with state oversight, which will improve the quality of care and quality of life for the residents. The family and friends of individuals in the homes are not always powerful or empowered enough to effect change alone. However, when they are a part of a larger, community-based group, they become much stronger and much more able to advocate for necessary changes.

- ❑ **Increased Proximity and Timeliness.** There are 17 regional ombudsman programs in Illinois. The office for each program in rural areas may be located 2-3 counties away from a particular nursing facility. Volunteer advocates living in a particular town or city can often travel to a facility faster than someone from the ombudsman office farther away. Even in a large city, this proximity can be a great advantage. Further, the presence of local volunteers brings the LTC Ombudsman Program home to the residents of that facility and the community in which it is located. This is yet another way that the volunteer component creates more concern for and involvement in the long-term care facilities of the community.
- ❑ **Expanded Skill Bank.** Volunteer ombudsmen contribute a whole host of skills and resources to the program. These may include the knowledge of foreign languages or American Sign Language, office or financial skills, medical knowledge, counseling skills, management abilities, etc.
- ❑ **Increased Authenticity and Personalization.** Finally, volunteers are authentic. Often people who don't trust professional "do-gooders" will listen and/or talk to a volunteer. They believe in someone who is doing something out of the goodness of their heart and for no other reason.

Volunteers make an enormous contribution to an ombudsman program, one that cannot be measured in dollars and cents alone. Without the presence of a strong volunteer component, it is unlikely that ombudsman work will be done to the extent necessary to insure the safety and well-being of the most vulnerable of citizens.

# Agency Hiring Practices

## Paid Staff

1. The program should hire paid ombudsmen with a bachelor's degree.
2. The program should not involve volunteers in the process of hiring paid staff. This can create difficulty when corrective action is required with paid staff.

## Volunteer Staff

1. The program should recruit volunteer ombudsmen with a high school diploma or GED.\*
2. The program should check at least three references for each applicant, if the applicant is unknown to the program or to other ombudsmen. Work references are preferable, but if there are none, check personal references.
3. The program should check at least one volunteer reference, even if the prospective ombudsman has work references.

## Paid and Volunteer Staff

1. The program should conduct a criminal background investigation if necessary.
2. The program should not allow anyone who has been found guilty of an offense that prevents a Certified Nursing Assistant from employment in a long-term care facility to be an ombudsman.

\* The only state requirement regarding volunteer ombudsmen is that they be at least 18 years of age.

## **SAMPLE**

### **Job Description: Community Ombudsman (Volunteer Advocate)**

#### **Overall Responsibilities:**

In cooperation with the Lead Community Ombudsman, execute the service components of the ombudsman program in the area of investigative services, maintain a regular presence in long-term care facilities, foster public information/community education and promote advocacy for a specific area of

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- Comply with **Mission Statement, Statement of Values, Code of Ethics, Code of Conduct, and Ombudsman Expectations.**
- Honor **Residents' Rights** and work to ensure that they are honored in the assigned long-term care facility.

#### **Specific Responsibilities:**

- Establish and commit to a plan for providing a regular presence in long term care facilities as assigned. Any facility on a "frequent visit" status must be visited monthly.
- Resolve complaints in cooperation with the Lead Volunteer Advocate and the I CARE Office.
- Complete the **I CARE Monthly Report** and monthly activity forms, required by the Department on Aging, in a timely manner and in accordance with the Local Plan.
- Attend I CARE-Project Advocate meetings and complete six hours of inservice training per year, as required by the Department on Aging and the Regional Ombudsman Program.
- Participate in community meetings and programs to promote quality care and residents' rights, including securing funds for program continuation, and the enactment of legislative/regulatory reforms.
- Assume other duties in cooperation with the Lead Volunteer Advocate and I CARE-Project Advocate, such as attending the Department of Public Health resident group interviews.
- Attend the Resident Council meetings of your assigned facility quarterly, or visit with a member of the Resident Council quarterly.

- Visit a member of the administrative staff of your assigned facility quarterly.

**Sample**  
**Volunteer Advocate Application**

Name \_\_\_\_\_

Address \_\_\_\_\_

City

State

Zip Code

Social Security # \_\_\_\_\_

Telephone (day) \_\_\_\_\_ Telephone (night) \_\_\_\_\_

List highest grade level  
or degree attained \_\_\_\_\_

(GED, H.S., B.S./B.A., M.S./M.A., RN, LPN, ETC.)

Present employment or  
employment prior to retirement: \_\_\_\_\_

Agency

Position

Describe your most significant volunteer work. \_\_\_\_\_

State why you are interested in volunteering to assist residents and their families in long-term care facilities for I CARE. List other projects in which you have been involved or skills you have that could be important in promoting or improving this project.

List two references from current or previous volunteer work. If this is your first volunteer effort, list two personal references.

1) \_\_\_\_\_  
Name City/Town Telephone # / FAX # Email

2) \_\_\_\_\_  
Name City/Town Telephone # / FAX # Email

**Ombudsman Standards. Section 902 - Conflict of Interest.  
Identifying a Conflict of Interest**

- A. A "conflict of interest shall occur when an individual subject has:
1. An ownership, property, economic or pecuniary interest in a long term care facility; or
  2. A business, partnership, or corporation which owns, invests in, controls or derives economic benefits from one or more long term care facilities; or
  3. A spouse, parent, minor child, or related adult living in the same residence with an economic or business interest as listed above.
- B. Each individual employed by, participating in, directing, establishing policy, or with a responsibility for the selection or designation of a Sub-State Program shall be subject to this Chapter.
- C. The residence of a member of an individual's family in a long-term care facility shall not, in and of itself, be construed as a conflict of interest.

**I certify I do not have a conflict of interest as described in Chapter 900 of the Ombudsman Standards.**

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Signature

**Have you ever been convicted of a criminal offense? If yes, please explain.**

(A conviction will not necessarily disqualify an applicant, depending on the type and date of conviction.)

\_\_\_\_\_ No \_\_\_\_\_ Yes \_\_\_\_\_

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I authorize Project Advocate to contact listed references, previous and current employers, and, if necessary, law enforcement for a criminal background investigation.

I understand that I must be **officially** accepted before beginning my volunteer position. I understand that misrepresentation or omission of facts requested in this application is cause for rejection as a Project Advocate volunteer. I agree to fulfill the responsibilities of this volunteer position to the best of my ability if appointed. I understand that failure to comply with the information as provided in the Illinois Department on Aging Standards and this agency may lead to decertification.

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Signature

Date

## Volunteer Management Practices

1. The program should designate and train volunteer ombudsmen who will act as leaders for a designated area. They will share the responsibility of orientation, recruitment, retention, and recognition. The lead volunteer ombudsmen help to keep other ombudsmen in the program by team building, acting as a sounding board, promoting community awareness of the need for volunteers, and advising the program on the need for training and other support. This also helps to keep the program local.
2. The program should conduct a needs and satisfaction review of the ombudsmen yearly. The recertification process for individual ombudsmen may be sufficient to provide this information.
3. The program should provide regional trainings and regional recognition and promote local recognition of volunteers.
4. Recognition should take many forms. Birthday cards, telephone calls, notes, etc., all serve to let volunteers know they are thought of and appreciated.
5. The program should immediately discuss with the ombudsman involved, any negative information or gossip about her or the program.
6. Corrective action needs to take place immediately when needed. It should not wait for the recertification interview.

## Ombudsman Initial Visitation Agreement

Volunteer agreement between \_\_\_\_\_  
and the **I CARE Long-Term Care Ombudsman Program**.

Unless there are health considerations for myself or my family, or I move away from the community,

I make a commitment to:

1. **Visit an assigned facility for four months, at least once a month, with a certified ombudsman.**
2. **Call the lead ombudsman immediately, if I am unable to go at the established time and state the reason why.**

Thereafter, I make an ongoing commitment to:

1. **Visit an assigned facility at least once a month, but preferably each week at different times and on different days.**
2. **Request to visit with another ombudsman if I wish.**
3. **If I cannot visit for a month, call the lead ombudsman by the 15<sup>th</sup> of the month.**
4. **Notify the lead ombudsman or the I CARE office immediately if I have a medical emergency or other reason for wanting to take a leave or for not continuing as an ombudsman.**
5. **Complete six hours of inservice training per year.**
6. **Call the Lead Ombudsman or I CARE office immediately on any suspected abuse or neglect cases.**
7. **Call the I CARE office immediately if I experience any problems and as needed for technical assistance.**

At all times I commit to complying with **I CARE's Mission and Values Statements, Codes of Ethics and Conduct** and to **Protecting Residents' Rights**.

\_\_\_\_\_  
Signature of Volunteer Ombudsman

\_\_\_\_\_  
Date

## Volunteer Recertification Interview

The recertification interview may take some time, but the investment is worth the effort to keep valuable volunteers in the program. Volunteers are the backbone of a good program. They need and deserve the time and energy it takes to conduct an effective recertification that will motivate them. The effort will pay off, too. Giving volunteer ombudsmen this time and energy tells them how important they are to the program. It will definitely enhance their sense of pride in their performance.

It is extremely important that this be an interactive process. The volunteer should have gone over the form and completed it before you meet. The supervisor should have in mind the points that she wishes to emphasize. The ombudsman needs this in order to feel a sense of the importance of the job that he is doing. The supervisor needs to assess the ombudsman's effectiveness and how the program can enhance the volunteer's ability to function. The program is only as strong as the people who work in it.

The Regional Ombudsman can learn a lot about her program by listening to the staff. For their part, the ombudsmen need to feel that they can openly dialogue with their supervisor any time, that they will be listened to, and that there is an opportunity to be heard and their ideas taken seriously.

Two recertification forms are provided. The first is complete as presented. The second form contains "best practice" items and allows you to choose those which reflect your program's requirements. In the second form, there are three divisions for the items in the "Meeting Program Requirements" and "Performance Factors" sections. Within each section, the basic measures refer to areas that pertain to all program participants. The lead measures are for the Lead Ombudsman, a volunteer who provides technical assistance and support but not supervision. All problems with complaints and volunteer performance must be handled by paid staff responsible for supervision. The advanced measures are for paid staff only, some of whom may serve in a supervisory role.

Remember that volunteers are the essence of an exemplary program. If they are not as effective as they could be, this should tell the program what training and technical assistance it should provide.

# Annual Recertification of Volunteer Advocate

Date \_\_\_\_\_

The purpose of the annual recertification is to give the volunteer advocate an opportunity to provide information to the program that will better assist the volunteers in protecting residents' rights and improve the program. Further, the recertification process affords an opportunity for the volunteer advocate and the lead advocate to plan for the coming year. In an effort to give the program feedback, the volunteer is to complete items one through six. Use additional pages as necessary.

Advocate name \_\_\_\_\_ Assigned facility \_\_\_\_\_

<p>1. The Volunteer Advocate visited residents during the months of: [check appropriate response(s)]</p> <p>? Jan.   ? Feb.   ? Mar.   ? Apr.          ? May   ? June   ? July   ? Aug.          ? Sept.   ? Oct.   ? Nov.   ? Dec.</p>	<p>1. Does the Volunteer Advocate need any special accommodations? If yes, specify.</p> <p>_____</p> <p>_____</p>
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The Volunteer Advocate attended the following training sessions:		
Date	Session Topic	# of Hrs./Modules
/   /		
/   /		
/   /		

<p>4. The Volunteer Advocate executes the service components of a community ombudsman including quarterly visits to administrative staff and resident council (or member of resident council) and:</p> <p>Returns monthly reports:   ? Yes ? No</p> <p>Identifies and documents complaints and inquiries:   ? Yes ? No</p>	<p>4. The Volunteer has been informed of and understands:</p> <p>? Job Description   ? Code of Ethics          ? Mission Statement   ? Code of Conduct          ? Statement of Values   ? Residents' Rights</p> <p>Comments: _____</p> <p>_____</p>
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6. Volunteer Advocate's remarks:

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7. Lead Volunteer Advocate's remarks:

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8. Regional Ombudsman's remarks:

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## Signatures

Volunteer Advocate \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Lead Volunteer Advocate \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Regional Ombudsman \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## Procedures for Termination

Even with the best screening process, a quality training curriculum, excellent communication, etc., sometimes some volunteers just do not work out. It is therefore important to have a good recertification process in place. It is also important to have a procedure for termination, given the fact that sometimes even the best interventions do not bring the volunteer up to the standards required by the program.

The following is an example of a structured, sequential process that could be used either to bring the volunteer up to an acceptable level of work, or, if necessary, to decertify her.

1. **DOCUMENT!** Although it is easy to let paperwork slip, it is not wise to do so. It is important that you have written documentation of areas of concern, incident reports, etc. This makes it much easier to talk with the volunteer about her performance. As soon as an inappropriate or problematic behavior is observed or reported, write it down on an Incident Report form, or whatever your program uses. Get it into the volunteer's file and schedule an appointment with the volunteer.
2. Meet with the volunteer and discuss the specific problem. Consider this session a counseling session in which you give the volunteer an opportunity to talk about what's going on for her. However, do not allow the specific problem to be ignored. The issue must be resolved.
3. If the volunteer doesn't seem to grasp what the problem is, it may be appropriate to decertify. If the volunteer does understand, you can talk about how the volunteer needs to handle the situation in the future. Make plans to meet with the volunteer at a time in the not-too-distant future to assess how her work is going.
4. If you must decertify, do so in a kind, but firm way. Let her know that you appreciate her generosity in offering to volunteer but that it is not a good fit. Put this in writing. Thank her, but be sure she knows why you are terminating her.
5. Notify the Department on Aging of this decertification in a timely manner.
6. Notify the facility in writing.

THERE ARE SOME BEHAVIORS THAT MAY RESULT IN IMMEDIATE DISMISSAL. YOU MAY HAVE TO BYPASS THIS SEQUENTIAL PROCESS AND TERMINATE IMMEDIATELY.

These may include but are not limited to:

- Breach of confidentiality
- Use of physical force
- Showing up for service under the influence of alcohol or other drugs
- Any kind of threatening, intimidating, or other harmful behavior

It is important that the program have an appeals process in place and that the volunteers know what it is and how to access it. The appeals process should include the use of a neutral, third-party hearing officer. This officer will hear the grievance within a reasonable, allotted length of time.

## **I CARE-Project Advocate Ombudsman Personnel Task Force**

### **Chair**

Mr. Michael O'Donnell, Executive Director  
East Central Illinois Area Agency on Aging  
Bloomington

Ms. Edyth Cole, Personnel Director (Retired)  
Illinois State Board of Education  
Springfield

Mr. John Eckert, Executive Director  
Statewide Independent Living Council of Illinois  
Springfield

Dr. Tom May, Director  
Clinical Ethics Center  
Memorial Medical Center  
Springfield

Ms. Tarry Plattner, RSVP of McLean County  
YWCA Senior Services  
Bloomington

Ms. Kathleen Quinn, Chief  
Bureau of Elder Rights  
Illinois Department on Aging  
Springfield

### **Staff**

Dr. Margaret Niederer  
Regional Ombudsman, I CARE Ombudsman Program

Ms. Susan Michele Frain  
Consultant to I CARE

Editorial Note: In an attempt to be consistent and gender neutral throughout the text, masculine pronouns were used for references to residents and feminine pronouns for references to ombudsmen.

**REGIONAL OMBUDSMAN PROGRAM  
OMBUDSMAN RE-CERTIFICATION INTERVIEW**

DATE: \_\_\_\_\_  
 OMBUDSMAN NAME: \_\_\_\_\_ OMBUDSMAN TITLE: \_\_\_\_\_  
 RE-CERTIFICATION PERIOD: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
 RE-CERTIFICATION CONDUCTED BY: \_\_\_\_\_

**A. MEETING PROGRAM REQUIREMENTS** - Primary responsibilities of the position as listed in the job description.  
 Place an X in the column that best describes the performance observed.

PRIMARY RESPONSIBILITIES OF THE POSITION	MEETS EXPECTATIONS	NEEDS MORE TRAINING	OMBUDSMAN COMMENTS	MANAGEMENT COMMENTS
Assists in the investigation and resolution of b or on behalf of LTC facility residents.				
Provides information, referral, and education regarding the long term care system, and the rights, concerns of residents to individuals, community families, residents, and LTC facility staff.				
Assists in conducting publicity directed to LTC residents, families and staff, as well as, groups and general public about the role of the Ombudsman Program and the long term care				
Provides assistance and advocacy for residents the structure of the LTC facility resident council meetings in the assigned service area.				
Assists in monitoring the development and implementation of Federal, State, and local regulations, and policies that relate to LTC to ensure residents' rights and benefits are expanded, and protected.				

OMBUDSMAN NAME: \_\_\_\_\_

**A. MEETING PROGRAM REQUIREMENTS - continued**

PRIMARY RESPONSIBILITIES OF THE POSITION	MEETS EXPECTATIONS	NEEDS MORE TRAINING	OMBUDSMAN COMMENTS	MANAGEMENT COMMENTS
Provides regular presence in LTC facilities assigned service area.				
Completes reports and maintains records procedures established by the Regional Program.				
Maintains confidentiality in handling personnel records.				
Complies with policies and procedures of the Ombudsman Program.				
Completes required in-service training's.				

**B. PERFORMANCE FACTORS - Place an X in the column that best describes the degree to which the ombudsman exhibited each factor in meeting the job description requirements indicated in Section A.**

PERFORMANCE FACTOR	MEETS EXPECTATIONS	NEEDS MORE TRAINING	OMBUDSMAN COMMENTS	MANAGEMENT COMMENTS
<b>MISSION, VALUES, ETHICS, CONDUCT.</b> (Understands and adheres to these.)				
<b>QUALITY OF WORK</b> (Speed, accuracy, and suitability of work performed)				
<b>COMMUNICATION</b> (Ability to listen effectively empathy and organize/express ideas and clearly and fully in oral and written form)				
<b>INITIATIVE</b> (Ability to function as "self starter" take responsibility)				
<b>JUDGMENT &amp; DECISION-MAKING</b> (Ability to think logically and to reason from facts to reach conclusions. Ability/willingness to initiate action)				

**B. MEETING PROGRAM REQUIREMENTS - continued**

PERFORMANCE FACTOR	MEETS EXPECT- ATIONS	NEEDS MORE TRAINING	OMBUDSMAN COMMENTS	MANAGEMENT COMMENTS
DEPENDABILITY (Reliability and thoroughness in doing the job)				
<b>HUMAN RELATIONS, COOPERATION, LEADERSHIP</b> (Conduct, demeanor, courtesy, etc. Ability to understand and deal with others effectively and elicit trust. Ability and willingness to work in harmony with other people.)				
FOLLOW-UP (Checking to ensure action is being taken currently)				

**C. ACCOMPLISHMENTS - List ombudsman strengths and accomplishments during the evaluation period.**

**D. PERFORMANCE NEEDING IMPROVEMENT.** List performance problems that prevented the ombudsman from meeting requirements of the job description as reflected by the ratings in Sections A and then, indicate remedial action to be undertaken by the ombudsman and the ombudsman's supervisor.

**AREAS NEEDING IMPROVEMENT**

**REMEDIAL ACTION BY OMBUDSMAN** (A completion date must be included for each action step)

**REMEDIAL ACTION BY SUPERVISOR** (A completion date must be included for each action step)

**E. NEW PERFORMANCE GOALS/OBJECTIVES.** The following are the goals/objectives jointly worked out and agreed upon by the ombudsman and supervisor for achievement by the target dates indicated. Progress will be evaluated at the ombudsman's next performance appraisal.

**GOAL/OBJECTIVE**

**METHOD OF ACCOMPLISHMENT**

**PERFORMANCE WILL BE DEEMED SATISFACTORY (GOOD) WHEN:**

**TARGET DATE(S)**