

# Strengthening the Aging and Disability Networks: Use of Volunteers in Long-Term Care Ombudsman Programs

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Since the Long-Term Care Ombudsman program's inception, volunteers have played an integral role in fulfilling the program's mandate to advocate on behalf of residents of long-term care facilities. Making up over 85% of Ombudsman program staff in 2017, the program relies heavily on volunteers to maintain a regular presence in nursing homes and board and care homes and to respond to resident complaints. This research brief focuses on the characteristics and motivations of volunteers who visit long-term care facilities, their roles and responsibilities, the training and management they receive, and their satisfaction with the Ombudsman program. It also describes programmatic challenges in recruiting and retaining volunteers, and the strategies that programs use to address these challenges. Findings suggest that volunteers provide over \$14.6 million in additional labor assets to the program and when effectively mobilized and efficiently trained, are central to adding needed capacity to Ombudsman programs. Data used for this brief were collected as part of the *Process Evaluation and Special Studies Related to the Long-Term Care Ombudsman Program* conducted by NORC at the University of Chicago (NORC) on behalf of the Administration for Community Living (ACL).

## BACKGROUND

In 1978, the Older Americans Act (OAA) established the Long-Term Care Ombudsman program (LTCOP or Ombudsman program) to protect and promote the health, safety, welfare, and rights of residents living in long-term care facilities. To advance this goal, the OAA charges the program with responsibility for advocating on behalf of residents by identifying, investigating, and resolving individual complaints; making systemic improvements to the long-term care system; and providing outreach and education to residents and other stakeholders. These key functions are performed by a State Long-Term Care Ombudsman who heads an Office of the State Long-Term Care Ombudsman (Office or Office of the SLTCO) in coordination with the state or territorial unit on aging (SUA) in all 50 states, as well as the District of Columbia, Puerto Rico, and Guam. The State Ombudsman is responsible for statewide program administration and oversight of paid staff and volunteers.

## DATA COLLECTION

As part of the *Process Evaluation and Special Studies Related to the Long-Term Care Ombudsman Program*, NORC collected qualitative and quantitative data from program staff and stakeholders in two phases. Interview data were collected from federal staff, national stakeholders, and State Ombudsmen in 2017. Survey data were collected from State Ombudsmen and a sample of local Ombudsmen and volunteers in 2018. For local data collection, a multistage stratified sampling approach was used. The sampling began with stratifying programs by the 10 ACL regions. To ensure that the diversity of programs was captured, a sample of 27 states was identified, and in these states, all local Ombudsman entities were included. Within each local program, all local Ombudsmen were invited to participate, and half of volunteer Ombudsmen were randomly sampled and invited to participate. In centralized programs, staff who serve at the local level were included. More information on the study methods can be found in the Final Report that is available on ACL's website (<https://acl.gov>).

According to the National Ombudsman Reporting System (NORS; the program's administrative reporting system), Ombudsman programs were responsible for advocating on behalf of over three million residents in 16,376 nursing homes and 58,031 board and care homes in in federal fiscal year (FFY) 2017. During this period, Ombudsmen responded to 201,460 complaints from 128,091 individuals, and they provided information on rights, care, and related services to individuals and long-term care facility managers and staff on 529,098 occasions. Supporting the program in these responsibilities were 1,319 paid, full-time equivalent workers (FTEs) and 6,625 certified volunteer Ombudsmen<sup>1</sup> who donated 591,362 hours of their time.

The impetus for Ombudsman programs, as they are known today, originated with former U.S. Commissioner on Aging, Dr. Arthur S. Fleming. First created as Public Health Service demonstration projects in 1972, the Ombudsman program was part of President Nixon's initiative to address widely-reported problems involving abuse and poor quality of care in nursing homes. As federal law and regulations for standards of care were being enacted in the early 1970s, Dr. Fleming argued that to be effective, these legislative efforts needed to be supported with community-based resident advocacy. As Fleming stated, "Our nation has been conducting investigations, passing new laws and issuing new regulations relative to nursing homes at a rapid rate during the past few years. All of this activity will be of little avail unless our communities are organized in such a manner that new laws and new regulations are utilized to deal with the individual complaints of older persons who are living in nursing homes. The individual in the nursing home is powerless. If the laws and regulations are not being applied to her or to him, they might just as well not have been passed or issued" (AoA Technical Assistance Memorandum 76-24). Congress incorporated the Ombudsman program into the OAA in 1978.

Setting forth the initial guidance for the program, Dr. Fleming envisioned that volunteers would play a central role in providing advocacy services to nursing home residents. In maintaining a routine presence in long-term care facilities, volunteer Ombudsmen were viewed to be uniquely positioned to serve as the "eyes and ears" of

the community to help prevent and address problems related to residents' quality of care and quality of life. The 1987 amendments to the OAA strengthened the role of the Ombudsman program and affirmed that, as designated representative of the Office, volunteers have the same authority as paid Ombudsmen. Under these amendments, the OAA granted Ombudsmen the right to make unannounced visits, access relevant parties in relation to a complaint, investigate a complaint with permission from the resident or resident's legal representative when the resident is deemed medically incapacitated, and to communicate concerns about a facility to the regulatory agency prior to a survey inspection.

Given Ombudsmen's responsibilities and authority, the role is arguably one of the most challenging that a volunteer can assume. As advocates for long-term care facility residents, the skills, knowledge, and commitment that are required of Ombudsmen can be highly demanding. Similar to paid staff, volunteers must be familiar not only with resident rights and available resources on topics as diverse as eligibility for services and power of attorney, but have a working knowledge of a broad range of state and federal regulations that govern long-term care services and supports in various settings. To fully represent the interests of residents, moreover, volunteers must be able to problem-solve, and navigate delicate or challenging relationships with facility staff, other agencies that may be involved in a complaint, as well as work effectively with residents' family members. Facility visits also expose volunteers to a wide range of experiences, some of which can be upsetting, such as in cases of resident abuse or neglect.

The next section of the brief describes the characteristics and motivations of volunteers who support the Ombudsman program. It then describes their roles and responsibilities, the training and support they receive, perceptions of their effectiveness in facilities, and their satisfaction with the program. Next, the brief focuses on Ombudsman programs' challenges in attracting and supporting volunteers for these demanding roles and the strategies they use to address these challenges.

<sup>1</sup> In the OAA, "Ombudsman" refers to the State Ombudsman. All other staff that perform duties of the Office are "designated representatives of the Office" although many use the term "Ombudsman" in practice. For the purposes of this research, we refer to designated representatives of the Office, including volunteers, as Ombudsmen. It should also be noted that NORS uses the term "certified" rather than "designated".

### Exhibit 1: Characteristics of Volunteer Ombudsmen

Characteristics	Mean	Median	Range	N
Age	70	77	27-90	633 <sup>a</sup>
Length of time volunteering	5.9 years	4 years	1 month – 32 years	701 <sup>b</sup>
Hours per month	14	10	1 – 160	670 <sup>c</sup>

<sup>a</sup> Missing=78 ; <sup>b</sup> Missing=10 ; <sup>c</sup> Missing=41

## CHARACTERISTICS AND MOTIVATIONS OF VOLUNTEERS

### Characteristics

Volunteers who support the Ombudsman program tend to be of similar age to the population they serve (Exhibit 1). Based on our sample, Ombudsman program volunteers had a mean age of 70 years, with a range of 27 to 90 years. Volunteers also appeared to be highly committed to the program, donating an average of 14 hours of their time each month. However, the extent of donated hours varied widely, ranging from one to 160 hours each month. It is worth noting that some volunteers reported donating hours that were equivalent to a full-time job. Volunteers reported serving the Ombudsman program for an average of about six years, with one volunteer reporting serving 32 years. As suggested by their age and tenure, volunteers often begin serving the program in their mid-sixties, the typical age of retirement in the U.S. In our sample, 76% of volunteers were 65 years of age or older. As shown in Exhibit 2, volunteers are predominately female, non-Hispanic white, and retired. LTCOP volunteers also tend to be highly educated, with nearly 70% reporting they have a bachelor’s or advanced degree. In addition, State Ombudsmen report that the program attracts volunteers who bring relevant professional experiences to their roles, including nurses, social workers, psychologists, doctors, allied health professionals, lawyers, and teachers.

### Motivations

For a majority of volunteers, personal fulfillment was the primary motivation for serving the program (Exhibit 3). More than half of the volunteers in our sample also cited the program’s mission as a factor in their desire to volunteer. Twenty-seven percent volunteered because family or friends received long-term services and supports. Among volunteers who were motivated to serve by other reasons, factors such as a desire to give back to the community, and sharing the skills and

knowledge that they had developed working in a related field (e.g. nursing), were reported. A small number of volunteers reported that they were looking for a volunteer or internship opportunity, or were interested in learning more about long-term care facilities.

### Exhibit 2: Characteristics of Volunteer Ombudsmen

Characteristics	N, %
<b>Gender</b>	<b>N=669<sup>a</sup></b>
Female	76%
<b>Ethnicity</b>	<b>N=653<sup>b</sup></b>
Hispanic	3%
<b>Race</b>	<b>N=647<sup>c</sup></b>
American Indian or Alaskan Native	1%
Asian	4%
Black or African American	4%
Native Hawaiian or Other Pacific Islander	<1%
White	88%
<b>Education</b>	<b>N=677<sup>d</sup></b>
Less than High School	0%
High School or GED	5%
Some College	17%
Associate’s Degree	9%
Bachelor’s Degree	20%
Some Graduate Work	9%
Master’s Degree	32%
Juris Doctorate	3%
Doctor of Philosophy	5%
Medical Degree	1%
<b>Employment Status</b>	<b>N=699<sup>e</sup></b>
Retired	77%
Employed full-time	9%
Employed part-time	11%
Out of work and looking for paid work	2%
A homemaker	7%
A student	2%

<sup>a</sup> Missing=42; <sup>b</sup> Missing=64; <sup>c</sup> Missing=58; <sup>d</sup> Missing=34; <sup>e</sup> Missing=12

### Exhibit 3: Motivations for Volunteering

What motivated you to become a volunteer for the LTCOP?	Volunteer Ombudsmen N=703 <sup>a</sup>
Personal fulfillment (e.g., enjoyment in helping others)	68%
Interest in the program's mission	55%
Family/friends receiving long-term services and supports	27%
Personal experience with the program	8%
Career development	6%
Other	16%

<sup>a</sup> Missing=8

## ROLES AND RESPONSIBILITIES

Ombudsman programs' use of volunteers differs by state law and policy, as well as programmatic need or ability to recruit volunteers.<sup>2</sup> States also differ in the number of volunteers that support their programs. According to NORS data, 49 of the 53 programs reported using volunteers in 2017.<sup>3</sup> The number of volunteers ranged from zero to 948 individuals across all programs, with an

average of 147 among programs that use volunteers. It should be noted that within a state or territory, volunteers are not necessarily evenly distributed, with the presence and number of volunteers varying considerably across local Ombudsman entities, some of which may have no volunteers.

In states and territories that use volunteers, volunteers are primarily responsible for making visits to long-term care facilities (other types of volunteers may perform clerical tasks). Within this group, however, there are important differences with respect to complaint handling. Some volunteers may make visits to residents in order to provide program access and refer complaints brought to their attention to paid Ombudsmen staff. Other volunteers may be trained and designated to serve as a representative of the Office, a role that involves complaint handling. This group can be further divided into volunteer Ombudsmen who handle only some types of complaints and those who are trained to handle all types of complaints. Programs may use their volunteers in any combination of these capacities.

### Exhibit 4: Activities Performed by Volunteer Ombudsmen

Activities Performed by Volunteer Ombudsmen	Volunteer Ombudsmen N=711
Make visits (not in response to a complaint) to residents of long-term care facilities	97%
Investigate and resolve complaints raised by, or on behalf of, residents	86%
Distribute program brochures, letters to introduce myself, ensure that program contact information is prominently posted	69%
Provide information, resources, and support to resident councils	68%
Provide information and consultation to consumers (residents, families, the general public)	65%
Collect, manage, and/or report data about my case work and/or activities	57%
Provide consultations to facility staff	39%
Participate as a resident advocate in facility licensure surveys	32%
Provide information, resources, and support to family councils	28%
Provide training to other volunteers	24%
Provide community education	22%
Monitor/work on laws, regulations, government policies and actions	13%
Provide training to facility staff	12%
Other (please specify)	8%
Work with media on issues impacting residents of long-term care facilities	3%

<sup>2</sup> Some state regulations have prohibited volunteers from conducting complaint investigations. The Long-Term Care Ombudsman Programs Final Rule clarified that designated representatives of the Office, both paid and volunteer, are to investigate complaints. ACL worked with states to address these types of compliance issue to ensure that all designated volunteers can carry out complaint investigation work.

<sup>3</sup> Four states (Mississippi, South Dakota, West Virginia, and Wyoming) reported no volunteers.

According to NORS, of the 8,810 volunteers who supported the program in 2017, 6,625 (75%) were certified volunteer Ombudsmen.<sup>4</sup> Importantly, the Long-Term Care Ombudsman Programs Final Rule clarifies that the State Ombudsman must prohibit any representative of the Office from carrying out the duties of the Office unless they have been trained and approved by the Ombudsman as qualified to carry out the activity on behalf of the Office. At the time this report was prepared, State Ombudsmen with programs that use volunteers that are not designated (sometimes referred to as “friendly visitors”) reported being in the process of transitioning these volunteers into designated representatives of the Office with the expectation of fulfilling those duties.

Although volunteers perform a range of activities across programs, a majority focuses on individual resident advocacy (Exhibit 4). Nearly all volunteers (97%) in our sample conduct routine facility visits, and 86% investigate and resolve complaints raised by, or on behalf of, residents. More than two-thirds also carry out education and outreach activities such as distributing program brochures and providing information and consultation to consumers. In addition, smaller numbers of volunteers reported performing systems advocacy work such as monitoring laws, regulations, and policies (13%), and working with the media (three percent).

## Facility Visits

Visits to facilities are typically unannounced and varied in their schedule. During these visits, volunteers interact with and listen to residents; observe the general conditions and daily activities of the facility; share information about Ombudsman program services with residents, family and staff; support resident and family councils; identify and address complaints; and empower residents to speak up on their own behalf or voice concerns for those who are unable to do so.

Volunteer Ombudsmen make routine visits to both nursing homes and board and care homes to which they are assigned, although their time is largely allocated to nursing home visits. Repeat visits to the same facilities allow volunteers to build relationships with residents, understand their preferences, and raise residents’ comfort level in expressing concerns. Additionally, volunteers may also visit both care settings as needed in response to facility problems and complaints.

Volunteers who visit nursing homes were assigned an average of two facilities, but the number of assigned facilities ranged from zero to 30 in our sample (Exhibit 5). Volunteers who visit board and care homes were assigned an average of five facilities, with a range of zero to 40. Because board and care homes tend to have fewer residents than nursing homes (half of all board and care homes have less than five beds<sup>5</sup>) and require less time to visit, programs often assign volunteers a larger number of these facilities than nursing homes. Volunteers may also be assigned a mix of nursing homes and board and care homes. In our sample, on average, they were assigned to four facilities of any type. In rare instances, volunteers are not assigned to any specific long-term care facility, but they may be asked to make visits in response to a complaint.

<sup>4</sup> Seven states (Alabama, Mississippi, Montana, Puerto Rico, South Dakota, West Virginia, and Wyoming) reported having no designated volunteer Ombudsmen. The Alabama, Montana, and Puerto Rico programs reported having “other volunteers.” It should also be noted that NORS uses the term “certified” rather than “designated”.

<sup>5</sup> Office of the Assistant Secretary for Planning and Evaluation. 2015. “Compendium of Residential Care and Assisted Living Regulations and Policy: 2015 Edition.”

### Exhibit 5: Assignments to Long-Term Care Facilities and Types of Visits

Long-Term Care Facility	Volunteer Ombudsmen
<b>Nursing Homes</b>	<b>N=711</b>
Visits nursing homes	80%
Type of visit conducted:	N=562 <sup>a</sup>
Visit on a routine basis (not complaint driven)	95%
Visit in response to facility problems and resident complaints	59%
Other	8%
# of facilities assigned:	N=546 <sup>b</sup>
Mean - # of facilities assigned	2
Range - # of facilities assigned	0-30
<b>Board and Care Homes</b>	<b>N=704<sup>c</sup></b>
Visits board and care homes	51%
Type of visit conducted:	N=350 <sup>d</sup>
Visit on a routine basis (not complaint driven)	93%
Visit in response to facility problems and resident complaints	52%
Other	4%
# of facilities assigned:	N=339 <sup>e</sup>
Mean - # of facilities assigned	5
Range - # of facilities assigned	0-40
<b>All facilities</b>	<b>N=664<sup>f</sup></b>
Mean - # of facilities assigned	4
Range - # of facilities assigned	0-60
Median - # of facilities assigned	2

<sup>a</sup> Missing=4, Not applicable=145; <sup>b</sup> Missing=20, Not applicable=145; <sup>c</sup> Missing=7; <sup>d</sup> Missing=15, Not applicable=346; <sup>e</sup> Missing=26, Not applicable=346; <sup>f</sup> Missing=23, Not applicable=24

Exhibit 6 shows that 93% of volunteers make at least quarterly visits to both nursing homes and board and care homes to which they are assigned. A majority of volunteer Ombudsmen make weekly visits to nursing homes and at least monthly visits to board and care homes.

### Exhibit 6: Frequency of Facility Visits

Frequency of Visits	Nursing Homes N=555 <sup>a</sup>	Board and Care Homes N=350 <sup>b</sup>
Weekly	53%	22%
Less than weekly but at least once a month	26%	40%
Less than monthly but at least once a quarter	14%	31%
Twice a year	1%	2%
Once a year	0%	1%
As needed	3%	3%
Other	3%	1%

<sup>a</sup> Missing=11, Not applicable=145; <sup>b</sup> Missing=15, Not applicable=346

The most common length of time volunteer Ombudsmen reported spending in both nursing homes and board and care homes is one to two hours (Exhibit 7). However, because of the higher numbers of residents, volunteers were more likely to report spending two hours or more during nursing home visits, compared to board and care homes.

### Exhibit 7: Average Amount of Time Spent in Facilities for Each Routine Visit

Amount of Time	Nursing Homes N=554 <sup>a</sup>	Board and Care Homes N=342 <sup>b</sup>
Less than an hour	9%	41%
Between 1 to 2 hours	56%	46%
Between 2 to 3 hours	28%	10%
More than 3 hours	7%	3%

<sup>a</sup> Missing=9, Not applicable=148; <sup>b</sup> Missing=23, Not applicable=346

In addition to making regular facility visits, a majority of volunteers reported investigating complaints and handling all types of complaints received by the program (Exhibit 8). Among the 20% of volunteers who reported only handling certain types of complaints, the most common complaints they addressed involved basic needs issues such as food and the quality of services and staff (83%).

When asked how they handle complaints, volunteers frequently reported consulting other program staff/volunteers, referring the complaint to the appropriate entity, or handling complaints on their own. Of the 29% of volunteers who did not report handling complaints on their own, many reported consulting with other program staff or volunteers as needed, and referring the complaint to the appropriate entity.

### Exhibit 8: Complaints Handled by Volunteer Ombudsmen

Complaint Handling	Volunteer Ombudsmen N=710 <sup>a</sup>
Investigates or assists other ombudsmen with complaints	87%
<b>Of those who handle complaints...</b>	<b>N=609<sup>b</sup></b>
I handle all types of complaints	80%
I handle only some types of complaints	20%
<b>How complaints are handled:</b>	<b>N=615<sup>c</sup></b>
I handle complaints on my own	71%
I support other program staff/volunteers as they handle complaints	32%
I consult with other program staff or volunteers, as needed	77%
I refer the complaint to other program staff or volunteers	32%
I refer the complaint to the appropriate entity when I have resident consent	72%
Other	6%

<sup>a</sup> Missing=1; <sup>b</sup> Missing=8, Not applicable=94; <sup>c</sup> Missing=2, Not applicable=94

Note: The number of respondents considered “Not applicable” in the missing data refers to volunteers who reported that they do not handle complaints

When asked about their effectiveness, more than three-fourths of volunteers reported that a majority of their relationships were effective in both nursing homes and board and care homes (Exhibit 9). Volunteers described several factors that contributed to the effectiveness of their relationships with the facilities they visit. The most common of these factors was having good communication and responsive facility staff (40%). Thirteen percent of volunteers also reported that the facility staff’s level of trust in the Ombudsman program and volunteers (i.e. their intentions and their work) determined the effectiveness of the relationship. Other factors that were reported to contribute to the effectiveness of relationships included working with facility staff as a team (10%), low staff turnover (six percent), and experience with the facility (five percent).

### Exhibit 9: Perceived Effectiveness in Nursing Homes and Board and Care Homes

Overall, how would you describe the effectiveness of your relationship with the following types of facilities?	Nursing Homes N=513 <sup>a</sup>	Board and Care Homes N=357 <sup>b</sup>
A majority of the relationships are effective	78%	78%
Some of the relationships are effective	18%	17%
A few of the relationships are effective	3%	4%
None of the relationships are effective	<1%	0%

<sup>a</sup> Missing=55; Not applicable=143; <sup>b</sup> Missing= 28, Not applicable=326

## TRAINING, RESOURCES, AND AREAS FOR FURTHER SUPPORT

### Orientation, Training, and Support

Although there are a number of different approaches to training volunteer Ombudsmen when they are on-boarded to the program, nearly all volunteers (96%) reported receiving in-person training/in-services (Exhibit 10). Other forms of training and support included mentoring/shadowing with experienced staff, being observed by more experienced staff, attending a resident or family council meeting, and self-study.

### Exhibit 10: Orientation, Training, and Support Provided to Volunteer Ombudsmen

What type of orientation, training, or support did you receive when you first joined the LTCOP as a volunteer?	Volunteer Ombudsmen N=706
In-person training/In-services	96%
Mentoring/shadowing with experienced staff	74%
A more experienced staff member or volunteer observed me	36%
Attending a resident or family council meeting	32%
Self-study (on-line training or reviewing materials provided by state program)	29%
Training in a long-term care facility	21%
Self-study (on-line training or reviewing materials provided by the National Ombudsman Resource Center)	15%
Training by legal counsel	10%
Introduction to key stakeholders in my state	5%
Other	7%
None	<1%

Missing=5

### Exhibit 11: Perceived Helpfulness of National, State, and Local Resources

How helpful are the following resources to you?	Very helpful	Somewhat helpful	Not helpful	Not familiar with resource or N/A	N
Area agency on aging (AAA)	28%	20%	4%	47%	597
Local Ombudsman entity	61%	20%	1%	17%	610
Office of the SLTCO	32%	35%	6%	27%	591
National Association of Local Long-Term Care Ombudsmen (NALLTCO)	8%	14%	5%	72%	542
National Ombudsman Resource Center	12%	18%	5%	65%	555
National Ombudsman Resource Center website (ltombudsman.org)	11%	18%	6%	66%	536

As a result of their training, most volunteers reported that both their initial and ongoing trainings prepared them for their role.

- 98% reported that they had a staff person that they could go to as needed.
- 95% reported that their orientation training was very, or somewhat, effective in preparing them for their roles as a volunteer.
- 88% reported that their training, ongoing support, and professional interactions have fully prepared them to carry out their roles as a volunteer.
- 84% reported having the support of supervisory and managerial staff to carry out their work.

#### Resources

Volunteer Ombudsmen receive ongoing support from a number of entities at the local, state, and national levels that help them carry out their work. As shown in Exhibit 11, 61% of volunteers reported their local Ombudsman entities were very helpful in terms of providing support. Notably, volunteers were not familiar with the National Association of Local Long-Term Care Ombudsmen or the National Ombudsman Resource Center. Although these entities are intended to provide training and technical support to Ombudsmen, volunteers in our sample had little knowledge of their existence, and among those who did, reported that these resources were not applicable to their work. When asked whether the resources provided by the National Ombudsman Resource Center were sufficient for carrying out individual advocacy work, 61% of volunteers reported “Don’t know” (data not shown in exhibits).

#### Areas for Further Support

Additional supports that volunteer Ombudsmen reported they would like from the program are shown in Exhibit

12. Volunteers most often reported wanting to have more opportunities to discuss challenges with other Ombudsmen (32%). Others were interested in having more opportunities to discuss challenges with their supervisor (19%), obtaining more feedback on their performance and effectiveness (18%), and receiving more formal training (18%). Thirty-seven percent of volunteer Ombudsmen did not indicate an interest in any of the training and support resources listed in Exhibit 12, and many in the latter group also noted that no additional resources were needed.

### Exhibit 12: Interest in Additional Types of Training and Support

What additional support would you like from program staff?	Volunteer Ombudsmen N=711
More opportunities to discuss challenges with other Ombudsmen	32%
More opportunities to discuss challenges with supervisor	19%
More feedback on my performance and effectiveness	18%
More formal training	18%
More information from State Ombudsman/program staff	14%

## SATISFACTION WITH PROGRAM

### Satisfaction

Almost all (92%) of the volunteers reported being “very satisfied” or “somewhat satisfied” with their role as Ombudsmen (Exhibit 13). In open-ended responses, nearly every volunteer Ombudsman in our sample (97%) also reported that their experience was most rewarding because of their strong relationships with residents (built through frequent interactions), the advocacy that they



provide on residents' behalf, and their ability to successfully resolve resident complaints. Some volunteers also noted that collaboration with facility staff, being able to impact changes at the facility, and educating others about issues facing older adults were also rewarding. Eighty-eight percent of volunteer Ombudsmen reported that they feel they are positively influencing other people's lives through their work (data not shown in exhibits).

**Exhibit 13: Satisfaction with Program**

How satisfied are you with your volunteer work at the LTCOP?	Volunteer Ombudsmen N=694
Very satisfied	66%
Somewhat satisfied	26%
Neutral	4%
Somewhat dissatisfied	3%
Very dissatisfied	1%

Missing=17

## PROGRAM BENEFITS AND CHALLENGES OF USE OF VOLUNTEERS

For many Ombudsman programs, volunteers are essential for ensuring advocacy services are accessible to residents. Without them, programs would struggle to maintain an ongoing presence in long-term care facilities. This is especially true for programs with insufficient funds or staffing. The same resource constraints, however, also present challenges for programs in recruiting and supporting volunteers to optimize their contributions. Exhibit 14 shows the challenges that State Ombudsmen reported with respect to funding and program staff. Difficulty recruiting and supporting volunteers was the second most common challenge they reported, and this problem was reported almost as often as issues with funding (73% vs. 75%). Similar levels of concern with respect to funding and volunteers underscore the importance of volunteers to basic program functions.

**Exhibit 14: Program Challenges**

What challenges does your statewide program face?	State Ombudsmen N=52
Insufficient funding	75%
Difficulty recruiting and supporting volunteers	73%
Difficulty hiring paid staff	27%
High turnover of volunteers	31%
High turnover of paid staff	17%

**Challenges Related to Resources Needed to Support Use of Volunteers**

State Ombudsmen have long recognized the value of volunteer contributions, but they also emphasize the need for adequate resources to ensure that this segment of their program's workforce is well-trained, supervised, and effective. Without these resources, the cost of training and managing volunteers can outweigh their benefits, particularly when programs lack staff or sufficient funds for volunteer administration. In 2017, only 16 State Ombudsmen reported having a full, or part-time volunteer coordinator at the state or local level.<sup>6</sup> More than two-thirds of programs lacked dedicated staff to recruit, oversee, and provide training and support to volunteers. State Ombudsmen frequently expressed an urgent need for a coordinator to not only help grow their volunteer programs, but also to free up staff time to conduct facility visits. Absent staff dedicated to volunteer management, programs must rely on paid Ombudsman staff to recruit and supervise volunteers, tasks that are added to their other responsibilities. Given competing priorities as well as time and resource constraints, programs often struggle with identifying and retaining volunteers who are a good fit for the Ombudsman role. One Ombudsman reported conducting exit interviews in which volunteers cited that the reason for their departure was rooted in their not being adequately supported by staff.

Insufficient funds also prevent State Ombudsmen from further developing their volunteer program. For example, lack of financial resources limits programs' ability to advertise volunteer opportunities. To help offset advertising expenses, State Ombudsmen described pooling resources across local Ombudsman entities to develop public service announcements (PSAs) aimed at volunteer recruitment. Another State Ombudsman reported that volunteers do not have access to the

<sup>6</sup> Source: LTCOP Management Highlights 2017

program's complaint management system. This operational challenge was linked to the cost of data licenses, ultimately requiring paid staff to enter volunteer reporting data. One outcome of this cost-driven arrangement is the need for staff to spend time entering data rather than visiting long-term care facilities. At the same time, staff with managerial responsibilities often includes administrative functions, such as data entry and analysis, while volunteers focus on facility visits, in order to address resource needs.

Resource constraints also mean programs are unable to provide travel reimbursement to volunteers, even though visits to some facilities involve long travel times, especially in states with large rural areas. Given that many volunteers are older and retired, the need to cover their own travel expenses can be burdensome, and may contribute to volunteer attrition. Lack of funds also means that some programs have been forced to reduce or forgo volunteer training or recognition events. Some State Ombudsmen also reported paying for volunteer recognition events, such as luncheons or other tokens of appreciation, with their own money.

### Challenges Related to Ombudsman Role and Demographic Changes

In addition to resource-related barriers that hinder volunteer recruitment and retention, other challenges concern the Ombudsman role as well as the demographic composition of the program's volunteer workforce.

A key recruitment challenge for programs concerns the scope of the Ombudsman role itself. The high level of responsibility entrusted to Ombudsmen can deter volunteers from serving in this capacity. Because the nature of Ombudsmen's work is fundamentally hard, the program needs volunteers who are willing to take on the intense commitment it requires. State Ombudsmen highlighted the appeal of other programs to volunteers because their services are both gratifying and time-limited, such as delivering meals to older adults' homes, serving food in soup kitchens, or participating in activities at senior centers. By contrast, although the work of volunteer Ombudsmen can bring immense personal rewards, it requires volunteers to address conflict and observe resident conditions that may be upsetting or otherwise unsettling. The cumulative impact of these experiences may not end at the conclusion of a facility visit.

Moreover, unlike most volunteer jobs, volunteer Ombudsmen must take a certification training course, undergo a criminal background check, and be screened for potential conflicts of interest. From a resource utilization perspective, volunteer selection is a lengthy and costly investment, with each step narrowing the pool of possible candidates. Further, State Ombudsmen reported that among volunteers who are still employed part- or full-time, meeting the required number of Ombudsman training hours can be especially difficult. For volunteers with competing work demands, some programs have conducted individual training sessions to address scheduling constraints. State Ombudsmen reported that these volunteers are less likely to remain in the program and attributed their attrition partly to the solitary nature of their training. By contrast, retirees tend to have more availability to meet training requirements, and these are often conducted in groups. State Ombudsmen reported that group-based training helps build relationships among volunteers as well as a sense of responsibility to one another, both of which can favorably impact the operational aspects of their volunteer duties.

Difficulties in recruiting volunteers under these circumstances are especially challenging among programs that cover rural regions. Not only do these areas have smaller pools of potential volunteers, but even when volunteers express interest, it can be challenging to incentivize them to travel long distances to remote areas of the state. One State Ombudsman noted the difficulty in recruiting volunteers if program staff do not reside in the community and are viewed as outsiders, particularly in smaller communities. Onboarding volunteers can be time consuming and inefficient for all programs, but these challenges are especially pronounced if only one volunteer is joining the program at a given time, requiring both staff and the prospective volunteer to travel long distances for training. Moreover, in small communities, many residents know one another. This can add challenges to identify volunteers who are free of conflicts of interest that arise through personal relationships with family members who reside or work at facilities to which the volunteer would be assigned.

The program's volunteer workforce also presents challenges for retention. Given that many volunteers are older adults, the program loses these individuals over time to medical issues, caregiving responsibilities for family members, or declining health that prevents older

volunteers from conducting facility visits. Even with these age-related considerations, however, older volunteers tended to be more committed to the program than their younger counterparts, remaining with the program for many years. In our sample, volunteers aged 65 or older donated more time to the program on average each month than those aged 64 and younger (14.2 vs. 12.0 hours) and were characterized by longer tenures (6.3 vs. 3.5 years).

## STRATEGIES FOR DISSEMINATION AND VOLUNTEER RECRUITMENT AND RETENTION

### Strategies for Dissemination

To help grow their volunteer programs, State Ombudsmen described pursuing multiple avenues to disseminate information about volunteer opportunities. Importantly, strategies to recruit volunteers serve a dual purpose in educating the public who might need or benefit from the program's services. Strategies to disseminate volunteer opportunities are presented in this section.

It should be noted that local entities are afforded broad discretion in how to best grow volunteer programs in their areas. For this reason, volunteer recruitment strategies are varied (including subcontracting the recruitment service rather than promoting volunteer opportunities directly) and local agencies may also elect to not recruit volunteers at all.

**Word of mouth.** Existing volunteers are among the program's most important recruiting tools. Volunteers' friends, neighbors, and community members learn about the Ombudsman program through word of mouth. One State Ombudsman noted that volunteers' direct experience as Ombudsmen helps them assess who will be good candidates for the role. Paid Ombudsmen staff and others who have had positive experiences with the program were also reported to be key referral sources. In addition to these referrals, State Ombudsmen reported that professional staff from organizations that formerly worked with Ombudsmen have also been known to join the program as volunteers once they retire. Examples of these volunteers include retired medical professionals and facility surveyors.

**Media outlets (radio, television, newspapers, websites, social media).** State Ombudsmen reported advertising volunteer opportunities through a wide variety of electronic and print media outlets. These included newspapers (e.g., ads, letters to the editor, feature articles), television (e.g., PSAs, television specials), radio, senior newsletters or resource guides, local magazines, state employee retirement booklets, press releases, free publications, social media, and websites. The latter includes websites operated by the Ombudsman program, its host agency at the local or state levels, Legal Aid, professional networking websites such as LinkedIn, as well as volunteer-centric websites such as VolunteerMatch, JustServe, and United Way.

Specific types of media were reported to be particularly effective in recruiting volunteers. One example is human interest stories highlighting how Ombudsmen have made a difference in residents' lives. Others media profiled populations potentially in need of advocacy services, and volunteer Ombudsmen and the personal rewards they derived from their work. Although newspapers with large circulations were reported to generate interest, State Ombudsmen also noted that having stories featured in local community newspapers have been particularly successful in attracting volunteers.

**Community settings and events.** Ombudsman programs develop and circulate posters, brochures, flyers, and business cards in various locations throughout the community, including libraries, churches, post offices, grocery stores, senior centers, Kiwanis clubs, community centers, laundromats, Goodwill stores, YMCAs, and long-term care facilities. They also distribute these materials at larger outlets such as health and volunteer fairs and exhibitions at shows, conventions, and senior expos.

Ombudsmen staff also make presentations at many of the same venues and events to raise awareness about Ombudsman program services or issues facing older adults, such as financial exploitation. These community education events are also used to promote opportunities for volunteering. In addition to going out into the community, one State Ombudsman described hosting an open house to orient potential volunteers about the different programs that they can support.

**Partnering with other organizations.** State Ombudsmen reported collaborating with organizations such as AARP, Retired and Senior Volunteer Program (RSVP), Councils on Aging, and State Health Insurance

Programs (SHIP), to help with volunteer recruitment. For example, based on zip codes that the program provides, AARP will send out notifications to its members about volunteer Ombudsman opportunities. However, although several State Ombudsmen reported working successfully with AARP on advertising the Ombudsman program, others noted that AARP in their state no longer assisted with volunteer recruitment.

For some Ombudsman programs, responsibility for volunteer recruitment falls on the local agency that houses the local Ombudsman entity, such as area agencies on aging (AAAs). Under this arrangement, recruitment is part of the local agency's larger outreach efforts for all the aging services programs that it hosts, such as Meals on Wheels. This coordinated approach enables the Ombudsman program to reach potentially more volunteers because of the wider net that is cast by the local host agency.

**Targeting specific groups.** Collaborating with other organizations enables the program to target specific groups for volunteer recruitment, and individuals who are retired or about to retire. State agencies typically hold informational meetings about available benefits for people who are preparing to retire. One State Ombudsman reported ensuring that the Ombudsman program is included on the agenda of these meetings as a way to recruit state workers who are preparing to exit the labor force. Retired teachers are another group that State Ombudsmen reported targeting for volunteer recruitment. These efforts were implemented through the Retired Teachers Association and teachers' conventions.

More broadly, State Ombudsmen viewed the retirement of baby boomers as an opportunity for volunteer recruitment. One State Ombudsman observed that baby boomers in the state were less likely to move to warmer climates as they got older. Their preference to retire where they grew up has resulted in an increased pool of potential volunteers for the program. In other states, however, retirement was not viewed as a direct line to new volunteers. One State Ombudsman reported that as people live longer and remain active, they tended to travel into their 90s and are less likely to remain home where they can volunteer for the program.

Others reported that baby boomers have high expectations and a desire to do work that makes a difference. Overall, given their motivations as well as their accumulated skills and experience, baby boomers

were viewed as a potentially good fit for the Ombudsman role.

Another approach to targeted recruitment involved enlisting volunteers who are friends. One State Ombudsman reported that by recruiting in pairs, volunteers are more likely to have a source of support in visiting facilities, particularly those in rural areas.

**Working with educational institutions.** State Ombudsmen reported working with local universities and colleges that require students to engage in community service. For example, students who are concentrating in social work or similar fields may be interested in volunteering with the Ombudsman program to meet volunteer hour requirements or as an internship opportunity.

**Expanding beyond traditional outlets and communities.** Advertising in less traditional venues, such as on diner placemats and one-page news briefs found in coffee shops, was reported to be an effective recruiting tool. These strategies took advantage of the time that people spend in these spaces to draw attention to the program. Magazines produced by energy cooperatives offered another program the opportunity to spread the word about their work. One State Ombudsman described placing an article in the cooperative's magazine to reach members who may be interested in volunteering, particularly those who live in very rural areas.

Partnering with organizations outside of the traditional senior services community also helps to expand the program's network. One State Ombudsman reported that projects focused on special interests such as voting or specific groups such as lesbian, gay, bisexual, and transgender (LGBT) elders, have widened the base from which volunteers are recruited. Ombudsmen reported that as the organizations became more familiar with each other and demonstrated mutual support, their members have signed up to serve as volunteers.

Moreover, as the Ombudsman program's staff diversifies, there are new opportunities for the program to reach out to previously untapped populations to raise awareness of the program as well as to recruit potential volunteers. One State Ombudsman reported that the Office of Minority Health invited a staff colleague to exhibit at arts festivals and family events focusing on the African American community. The State Ombudsman added that having communities reflected in program staff

helps communicate the program’s advocacy services to groups that may not have known about them previously.

**Volunteers’ Experiences with Dissemination Strategies**

Consistent with the primary dissemination strategies programs employ, many current volunteers learned about the Ombudsman program through media outlets, community presentations, and word of mouth (Exhibit 15). More than one-third of volunteers in our sample heard about the Ombudsman program through an article or advertisement. Another quarter learned about volunteer opportunities through interactions with program staff or from other volunteers. Social media was the least frequently reported source of information that led volunteers to learn about the program.

Almost one quarter of volunteers learned about the program through other outlets. These sources included friends, coworkers, and relatives as well as print and online media, such as postings on volunteer-centric websites, AARP materials, newspapers, and pamphlets.

**Exhibit 15: How Volunteers Learned of Program**

How did you learn about the LTCOP?	Volunteer Ombudsmen N=711
LTCOP website	7%
LTCOP program materials (for example, poster, brochure)	8%
In-person conversation with program staff or volunteers	26%
LTCOP article or advertisement in a newspaper or other publication or on television	34%
Social media (for example, Facebook, Twitter)	2%
Family/friends received long-term services and supports	8%
Presentation by program staff or volunteers	10%
Other	23%

**Strategies for Volunteer Recruitment and Retention**

Although the dissemination strategies for recruitment described above can generate strong interest in the Ombudsman program, not every candidate is well-suited for the Ombudsman role, and attrition from the volunteer pool is an ongoing challenge. If volunteers are not a good fit for the Ombudsman role, programs risk high turnover as well as lost time spent investing in their training. For these reasons, State Ombudsmen reported trying to be selective in recruiting well-matched volunteers, despite their programs’ ongoing need for

more volunteers overall. Otherwise, State Ombudsmen perceived that volunteer contributions would be limited to their numbers rather than advancing true advocacy. State Ombudsmen reported various strategies to address volunteer screening and onboarding, as well as ways to retain existing volunteers.

**Clear understanding of role.** State Ombudsmen underscored the importance of properly vetting candidates in order to support long-term commitment to the program. Many reported losing volunteers who did not have a clear understanding of the nature of Ombudsmen work, despite strong initial interest. To help interested candidates understand the Ombudsman role from the outset, a few programs have new volunteers shadow another volunteer or paid Ombudsman on a facility visit. Early exposure to the typical activities involved in facility visits, the administrative reporting that follows, and residents’ need for long-term services and supports allow prospective volunteers to better assess whether the Ombudsman role is appropriate for them. Providing prospective volunteers with an opportunity to withdraw before too much time or resources are invested in completing their training was viewed by some programs as an effective strategy to optimize volunteer training efforts.

One program revised its recruitment process to include more difficult questions and role playing at the beginning of volunteer training sessions. Candidates are asked to consider their comfort level with a range of potential issues to which they may be exposed. Prior to processing volunteers’ certificates, the program also has candidates conduct some of their training online and in-person to ensure that this investment does not result in premature departures. As a result of these revisions, the State Ombudsman reported that the program on-boarded fewer volunteers, but the ones who did begin with the program were more dedicated in the long-term compared to historical volunteer pools.

**Supervision.** Ombudsman programs with resources that permit investing in volunteer management, such as a dedicated volunteer coordinator, were more likely to report benefits from volunteer contributions. These benefits included larger numbers of volunteers, greater ability to provide ongoing support, and higher volunteer retention. State Ombudsmen reported that many volunteers seek supervision, feedback, and accountability, and to be treated as professionals. The sustained attention that dedicated staff offers not only

helps cultivate volunteer programs from recruitment to retention, but it also frees up staff time to carry out basic Ombudsman duties such as complaint resolution.

**Regular communication and support.** To help volunteers feel connected to, and remain with the program, State Ombudsmen reported establishing various forums to keep volunteers apprised of program activities and to provide feedback and support. These include regularly scheduled meetings or conference calls, newsletters, and having regional Ombudsmen touch base with volunteers on a monthly basis.

More informal opportunities for engagement were also reported to support retention, including ensuring frequent contact between Ombudsman staff and volunteers to discuss concerns and holding meetings in casual settings, such as coffee shops that offer privacy. One State Ombudsman found these informal gatherings to be conducive to sparking conversations among volunteers about common observations during facility visits and for developing strategies that volunteers could use to support one another.

**Ongoing training and professional development.** State Ombudsmen reported providing continuing education, including trainings in which both paid staff and volunteers participate, to support not only skill building, but a sense of belonging. Volunteers also attend meetings to hear guest speakers share their expertise on key topics such as dementia. Another described providing opportunities for volunteers to attend conferences, such as those hosted by The National Consumer Voice for Quality Long-Term Care. One State Ombudsman also noted that the training course itself is attractive to some volunteers. This benefit, however, likely applies to younger volunteers who may perceive the role as a stepping-stone in their careers.

State Ombudsmen also reported making a concerted effort to use data to enhance their training curricula in a manner that supports volunteer recruitment and retention. After identifying areas in need of greatest technical assistance, one program made several changes to its training. These include increasing the number of training hours and delivering the training through a mix of formats, including independent study, mentoring/shadowing, classroom instruction, and in-person training. Other changes included sending more reminders and reinforcements to volunteers about the value they bring to the program. To better accommodate the schedule of retired volunteers, the program also

moved to extend the training over a longer period of time.

One State Ombudsman hired a consultant and retired state employee to modernize their program's recruitment methods and training materials, including enhancing the program's website and offering more web-based instruction. Some of these changes were informed by feedback from current volunteers about the training and support that they received.

Another State Ombudsman recently instituted a process of administering surveys to prospective volunteers who undergo initial training, regardless of whether they ultimately join the program. The feedback offers an opportunity for the program to obtain insights on how to improve training delivery as well as the changing landscape of volunteerism.

**Involvement in task forces and newsletters.** State Ombudsmen reported developing volunteer task forces to help support retention. In these efforts, participating volunteers are responsible for drafting newsletters that showcase their contributions. In another approach to volunteer task forces, the local volunteer coordinator and local Ombudsman coordinators throughout the state work together to identify and share successful practices. The intent of these collaborations is to build on the successes of local programs so that Ombudsmen are not continually developing solutions on their own.

**Flexibility in facility assignments and volunteer periods, locations, and roles.** Whenever possible, State Ombudsmen reported making an effort to assign volunteers to facilities close to their homes to reduce travel distances, thereby promoting volunteer retention. Accommodating to volunteers' travel schedules has also proven to be a successful retention strategy. After identifying seasonal patterns in volunteer attrition, one program addressed the needs of "snow birds" in their volunteer workforce. Allowing these volunteers to return to their Ombudsman duties during winter months without losing their certification has aided retention. Another State Ombudsman allows volunteers to serve more than one local entity if their time is routinely split between two residences during the year.

Other adaptations aimed at promoting retention relate to volunteers' health needs or comfort with handling complaints. Given the large number of older adult volunteers in the program, one State Ombudsman reported identifying ways to support volunteers' interest

in serving despite declining health. These volunteers may be paired with another volunteer who accompanies them on facility visits who also serves as a resource for questions or brainstorming.

Creating tiers for various volunteer Ombudsman roles was also reported to help with retention. As described earlier, some programs have volunteers who handle a limited number of complaints or all types of complaints. According to one State Ombudsman, offering volunteers a choice among these two roles or allowing them to transition into more demanding roles once they have gained confidence and feel empowered have been important strategies for limiting turnover.

**Compensation.** One State Ombudsman reported that offering a stipend to volunteers has been attractive for recruitment and retention, particularly in tough economic times. A small number of states are also able to offer mileage reimbursement, a factor that is especially important for volunteers who cover rural areas and can drive 50 to 100 miles to visit a facility. These options, however, are often unavailable to resource-constrained programs. One State Ombudsman reported attempting to address this issue with creating a 501(c)(3) nonprofit organization so that donations could be used for mileage reimbursement.

**Recognition and appreciation.** A clear priority for Ombudsman programs is to recognize volunteer contributions so that volunteers feel their efforts are appreciated. These feelings of appreciation translate into volunteers who continue to have fulfilling experiences with the program. Hosting recognition events honoring volunteers, such as luncheons and banquets, offers a formal occasion to acknowledge their individual and collective contributions and to publicly reflect of the value that they bring to the Ombudsman program. State Ombudsmen reported that these gatherings also help foster a sense of community and comradery where success stories are shared and volunteers can connect with other advocates.

Volunteer recognition events may take place annually, and sometimes more frequently, depending on the program. In recognition of their service, Ombudsman programs bestow awards, plaques, pins, certificates, or other tokens of appreciation on volunteers. They also celebrate volunteers' anniversaries and key milestones, such as number of donated volunteer hours. Some programs also bring in speakers or involve public officials in these events, including the governor,

lieutenant governor, commissioner of health and human services, mayor, legislators and states' congressional delegations, some of whom will draft letters or present awards to volunteers. One State Ombudsman noted that volunteer recognition events also serve to raise the general assembly's awareness of the program in the state. Given that the program assists legislators and addresses their constituent concerns, the recognition events help improve the program's relationship with the general assembly.

State Ombudsmen also reported that when volunteers consented, their achievements were highlighted through Facebook, newsletters, and articles. Whenever possible, State Ombudsmen reported identifying opportunities to nominate volunteers for awards that are available through state or local host agencies or the governor's office, and ensuring that outstanding performance by volunteers is praised and shared with their agency leadership and in some instances, the governor.

State Ombudsmen also stressed the importance of ongoing, informal validation. Small, everyday gestures expressing gratitude for volunteers' commitment helps them know that the program values and needs them. State Ombudsmen or other paid staff often reach out to volunteers by phone or text to ask how they are doing or send out birthday cards, get well cards, condolence cards, and thank you notes on anniversaries to thank them for their service. Together, the large and small personal gestures help volunteers remain committed to the Ombudsman program.

## SUMMARY

Since the Ombudsman program's inception, volunteers have played a critical role in strengthening the program's ability to advocate on behalf of long-term care residents. Without volunteers, many State Ombudsmen reported that programs would struggle to ensure an ongoing presence in long-term care facilities and to make advocacy services accessible to residents. In 2017, volunteers contributed 591,362 hours of service to Ombudsman programs. For that year, the Independent Sector estimated the value of volunteer time at

\$24.69/hour, suggesting that volunteers provide over \$14.6 million in additional labor assets to the program.<sup>7</sup>

In our sample, volunteers tended to be highly educated older adults who often bring relevant professional experiences to their volunteer roles. They also tend to donate a significant number of hours to the program and they often have long tenures as volunteers.

In their primary role, 93% of volunteers in our sample reported making at least quarterly visits to nursing homes and board and care homes and 87% investigated or assisted other Ombudsmen with handling resident complaints. Regular visitation to the same facilities offers the opportunity for volunteers to build relationships with residents and raise residents' comfort level in expressing concerns.

Some programs have also involved a smaller number of volunteers in responsibilities that expand beyond facility visitation to include systems advocacy work. Given volunteers' relatively high education levels and their desire for challenging work, there may be additional opportunities to leverage volunteers' interests, skills, and knowledge to further support the program's systems advocacy efforts to improve the long-term care system.

Volunteers were overwhelmingly positive about, and satisfied with their experiences with the Ombudsman program. A majority of volunteers reported that their work was rewarding and that they were positively influencing other people's lives. The Ombudsman program's mission and the desire for personal fulfillment are key motivators for new volunteers, as well as reasons for staying committed to the program.

Although a majority of volunteers reported that the training and support they received had prepared them for their roles as Ombudsmen, these data reflect the perspective of volunteers who continued with the program. When asked about areas where additional support would be useful, volunteers reported wanting to have more opportunities to discuss challenges with other

Ombudsmen. Our data, however, also showed that volunteers are not fully utilizing available resources to support their work. A majority was not familiar with key resources, including the National Association of Local Long-Term Care Ombudsmen and the National Ombudsman Resource Center.

For many Ombudsman programs, volunteers are essential for meeting program mandates, particularly when programs have insufficient staff and funding. The same resource constraints, however, also present challenges for programs that wish to build volunteer management capacity to optimize volunteers' contributions. State Ombudsmen reported using a wide variety of strategies to recruit and retain volunteers. These included ensuring that prospective volunteers have a clear understanding of the Ombudsman role, hiring a dedicated volunteer coordinator to grow volunteer programs when resources permit; providing opportunities for regular communication, training and support; offering flexibility in assignments as well as volunteer periods, locations, and roles; providing compensation, including stipends and mileage reimbursement; and formally and informally recognizing volunteers' contributions.

Although the Ombudsman program has evolved in scope and implementation over the last four decades, the program's reliance on volunteers has endured. Moving forward, programs will need more support to strengthen this critical resource. Findings suggest that volunteers, when effectively mobilized and efficiently trained and coordinated, are central to adding needed capacity to Ombudsman programs. Given the responsibility entrusted to volunteers to advocate on behalf of as well as empower long-term care residents, the Ombudsman role is arguably among the most challenging roles that a volunteer can assume. Indeed, volunteer Ombudsmen's authority to represent the interest of residents is a notable feature of the program and one that is linked to the program's ability to carry out its basic legislative mandate to advocate on their behalf.

<sup>7</sup> <https://independentsector.org/news-post/value-of-volunteer-time-release/>



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