



CALIFORNIA  
HEALTHCARE  
FOUNDATION



## **California's Long Term Care Ombudsman Program: Assessing the Volunteer Experience**

March 2007



# **California's Long Term Care Ombudsman Program: Assessing the Volunteer Experience**

*Prepared for*

CALIFORNIA HEALTHCARE FOUNDATION

*by*

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The survey instrument is available upon request. Please contact either Cheryl Wold from Wold and Associates at 626.798.8021 or Kate O'Malley at the California HealthCare Foundation at 510.238.1040.

## About the Foundation

The **California HealthCare Foundation**, based in Oakland, is an independent philanthropy committed to improving California's health care delivery and financing systems. Formed in 1996, our goal is to ensure that all Californians have access to affordable, quality health care. For more information about CHCF, visit us online at [www.chcf.org](http://www.chcf.org).

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# I. Introduction

THE RESEARCH DESCRIBED IN THIS REPORT EXAMINED aspects of California's Long Term Care Ombudsman Program, a project that trains and deploys volunteers to advocate for residents of long term care (LTC) facilities. The aim of the research was to provide information that could be used to improve the recruitment and retention of volunteers doing this important work.

## **Background on the Long Term Care Ombudsman Program**

The Long Term Care Ombudsman Program, initiated in 1975, exists in all 50 U.S. states. In California, it is authorized by the Older Americans Act and the Older Californians Act and is administered by the California Department on Aging. The state has a governor-appointed state long term care ombudsman who oversees the ombudsman staff and the 35 local programs, which are made up of nearly 1,200 state-certified ombudsmen.

Ombudsmen volunteer in skilled nursing facilities, residential care facilities for the elderly, and other licensed settings. These facilities provide care for people who have functional limitations or chronic health conditions and who need ongoing health care or assistance with activities of daily living, such as preparing meals, bathing, and taking medications.

In January 2004, California had almost 8,000 long term care facilities with about 285,000 residents. The number of residents is rising because the elder population is growing dramatically. The California Department of Finance projects that the number of people who are 60 and older will increase by more than 32 percent between 2000 and 2010, reaching 6.5 million people.

## **The Critical Role of the Ombudsman**

Residents in long term care facilities are often physically and mentally frail as well as dependent. They are vulnerable to challenges to their safety and quality of life, including problems with the administration of medications, financial exploitation, lack of quality care, and various forms of abuse. Elder abuse includes physical, sexual, verbal, or mental abuse, as well as financial exploitation, neglect, abandonment, self-neglect, and isolation.

The March 2002 U.S. General Accounting Office (GAO) report to Congress notes an unacceptable level of physical and sexual abuse in nursing homes and concludes that safeguards to protect residents from potentially abusive individuals are insufficient. In California, there is a documented record of poor performance in investigating complaints by the state authorities responsible for licensing and certifying health care facilities.<sup>1</sup>

The mission of the California Ombudsman Program is to advocate for the dignity, quality of life, and quality of care for residents in long term care facilities. It has six core functions:

1. Receive, investigate, and resolve complaints brought by residents, family, or friends;
2. Ensure a presence in long term care facilities;
3. Monitor poor and best practices;
4. Provide community awareness and involvement;
5. Influence public policy that benefits residents; and
6. Ensure effective program administration.

Ombudsmen must complete a 36-hour training program to become certified by the state. They also must receive an additional 12 hours of training annually to retain their certification.

In 2004, there were approximately 1,200 state-certified ombudsman volunteers. The program received and investigated nearly 45,000 complaints (more than 6,000 involving some form of abuse). Some 33,300 complaints were resolved to the

satisfaction of the residents. Importantly, long term care residents and volunteers perceive the program as valuable.

### **The Ombudsman Workforce**

Because nearly 90 percent of the ombudsman workforce is unpaid; recruitment, training, and retention of volunteers are crucial. Significant investments in recruitment have been made, including a 40 percent increase in staffing for the recently implemented volunteer recruitment initiative. While such measures have increased the number of newly certified volunteers, the annual net loss has been substantial. For example, in one fiscal year (2005–06), 324 volunteers entered and 384 volunteers left the program (a net loss of 60); in the two previous years the net losses were 66 and 99 volunteers. Statewide there has been a decline of nearly 300 ombudsman volunteers (or 20 percent of the volunteer workforce) over a five-year period, from approximately 1,265 in fiscal year 2000–01 to 970 in fiscal year 2005–06. At the same time, the number of beds in long term care facilities has increased—from 266,619 beds in January 2000 to more than 290,000 in 2006.

Typically, the annual turnover rate is 30 percent among LTC ombudsman volunteers. As prospective volunteers come to fully understand the responsibility entrusted to them, as many as 50 percent do not complete their certification training. Some find it very difficult to investigate painful situations such as physical and sexual abuse and gross neglect. Some become frustrated and disheartened in their attempts to systemically improve the LTC system. The resulting burnout causes large numbers

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1. Several problems with California's Department of Health Services (DHS) Licensing and Certification Division have been documented. For example, a February 2006 Legislative Analyst's Office (LAO) report noted that the system "suffers from some serious weaknesses," including a failure to detect deficiencies during inspections, poor follow-up when problems are discovered, a lack of enforcement of state standards, and a drop in staff productivity. In October 2006, an order by a Superior Court judge, stemming from an earlier lawsuit, ordered the DHS to investigate abuse and neglect complaints in a timely manner, and investigate a proportion of its backlog of cases immediately.

For more information:

[www.canhr.org/newsroom/canhrnewsarchive/2006/20061002\\_CANHR\\_v\\_DHS.html](http://www.canhr.org/newsroom/canhrnewsarchive/2006/20061002_CANHR_v_DHS.html)

[www.canhr.org/newsroom/releases/2006/20060313\\_DHS\\_Audit.htm](http://www.canhr.org/newsroom/releases/2006/20060313_DHS_Audit.htm)

[www.canhr.org/newsroom/releases/2006/resources/Audit\\_Testimony\\_CANHR\\_200603.pdf](http://www.canhr.org/newsroom/releases/2006/resources/Audit_Testimony_CANHR_200603.pdf)

of volunteers to leave the program. Because many of the volunteers are retired people, it is assumed that some resign due to changes in health or to relocation.

Apart from such assumptions, little is known about the reasons why volunteers resign and what might be done to encourage them to stay. No systematic analysis has been performed. As California's elder population increases, there is growing interest in strengthening the program and addressing problems such as unnecessary turnover.

In 2006 the California Ombudsman Program initiated a project to examine issues related to volunteer recruitment and retention. Its aim was to uncover insights that could lead to enhancing the size, effectiveness, and satisfaction of the volunteer corps over time. The project was funded by the California HealthCare Foundation (CHCF) and carried out by Wold and Associates. As part of the effort, CHCF will also fund a revision of the ombudsman training curriculum and marketing and recruitment materials, based on the survey findings.

### **About the Survey**

The California Volunteer Ombudsman Survey was a telephone interview with a sample of more than 250 current and former volunteer ombudsmen in the state. Its primary aim was to uncover factors that have an impact on volunteer recruitment and retention, especially by looking at differences in response between current and former volunteers. The survey also analyzed differences by region type (rural, small urban/suburban, and large urban) and by agency type (nonprofit versus county-administered).

The survey instrument was researched and designed in close consultation with program experts affiliated with the State Office of the Long Term Care Ombudsman, as well as the National Long Term Care Ombudsman Resource Center. The interviews were conducted between July 21 and August 10, 2006, by subcontract to the Field Research Corporation, based in San Francisco. Eligible for

inclusion were volunteers with five or fewer years of program experience (and at least two years for current volunteers) and those who were voluntarily decertified (among former volunteers). From sample lists of 990 current and former volunteers, 298 were randomly selected to be contacted, and 251 completed the 15-minute interview (47 refused), for a response rate of 84 percent. (See Appendix A for additional information about survey methods and Appendix B for the table showing counties by region type.)



# II. Survey Results: Quantitative Findings

THE PRINCIPAL SURVEY DATA ARE PRESENTED BELOW in four categories, and notable findings are briefly highlighted. Following the quantitative findings is a summary of the qualitative findings represented by the narrative comments that were offered by most of the survey respondents. The four categories are:

1. Who are the respondents?;
2. Intake, Training, and Early experiences with program;
3. Respondent Experience as Ombudsman; and
4. Respondent Perceptions of Program Effectiveness.

Both qualitative and quantitative findings and implications are analyzed in depth in the Discussion and Recommendations section.

## 1. Who Are the Respondents?

**Table 1. Sample Characteristics** (n = 251)

CHARACTERISTIC	N	SHARE	CHARACTERISTIC	N	SHARE
<b>Gender</b>			<b>Region*</b>		
Male	82	33%	Rural	54	22%
Female	169	67%	Small Urban/ Suburban	65	26%
<b>Age (in years)</b>			Large Urban	131	52%
18 to 29	2	1%	<b>Agency Type</b>		
30 to 39	4	2%	County	64	25%
40 to 49	25	10%	Nonprofit	187	75%
50 to 64	91	36%			
65+	130	52%			
<b>Ethnicity</b>					
American Indian	7	3%			
Asian/Pacific Islander	10	4%			
African American	12	5%			
Latino	17	7%			
White	210	84%			

\*See Appendix B for the program region classifications.

## Professional Backgrounds

Volunteers came from broad occupational backgrounds; 87 percent (n=214) had worked prior to becoming an ombudsman (Table 2).

Among those who had worked, about two-thirds were retired and about one-third were currently employed; they were employed in full- and part-time positions in roughly equal proportions.

The largest professional representation was from health and medical occupations (28 percent), followed by private business (18 percent), including small businesses, corporations of all sizes, and business administration and finance backgrounds.

**Table 2. Professional Backgrounds of Volunteers**

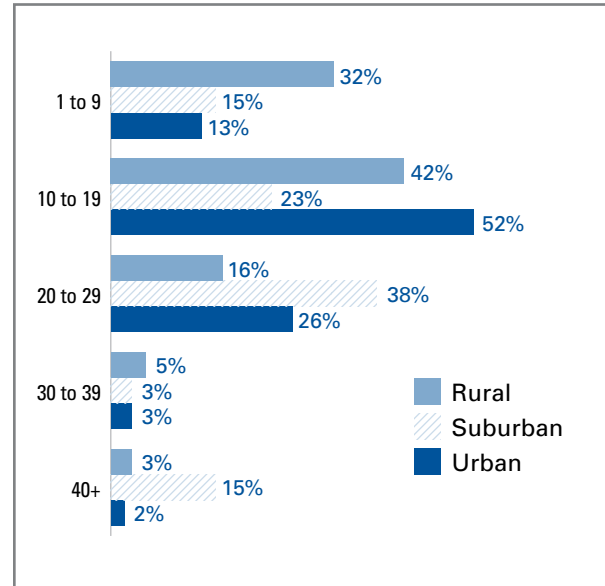
OCCUPATION	N	DISTRIBUTION
Health/Medical Services	71	28%
Private Business—Small/Corporation/ Administration/Finance	46	18%
Education	21	8%
Government	14	5%
Social/Human Services	12	5%
Technology	10	4%
Legal	9	4%
Law Enforcement	9	4%
PR/Communications/Publishing	6	3%
Engineering	5	2%
Military	2	1%
Nonprofit	2	1%
Religious	1	<1%
Other	6	3%

## Hours Volunteered

A majority of volunteers (nearly 70 percent) spent 10 to 30 hours per month performing their ombudsman duties (Figure 1).

The number of hours volunteered was higher in suburban regions. For example, 15 percent of volunteers in suburban regions spent 40+ hours

**Figure 1. Hours Volunteered by Ombudsman per Month**



per month versus 2 percent in urban regions and 3 percent in rural regions.

## 2. Intake, Training, and Early Experiences with Program

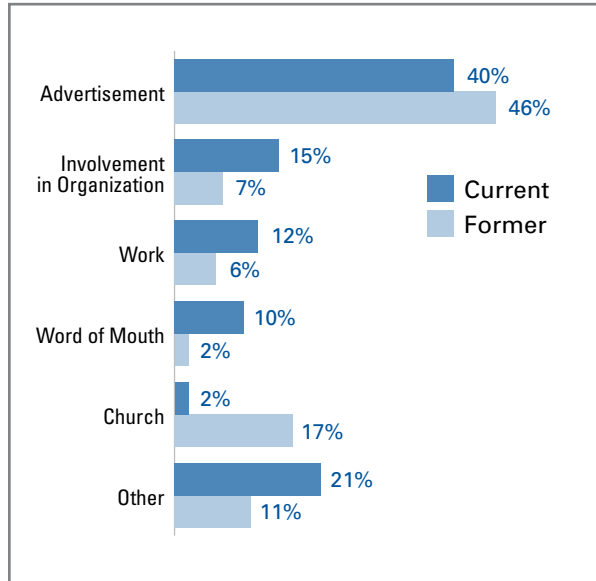
### How Volunteers Learned of Program

Most current and former volunteers heard about the program through an advertisement. Much less frequently cited were involvement in another organization, work, and word of mouth (Figure 2).

Current volunteers were slightly more likely to have heard about the program through their involvement in another organization or work, while former volunteers were more likely to have learned through church or school.

A sizable fraction (21 percent) of current volunteers (and 11 percent of former volunteers) learned about the volunteer opportunity in a way not captured by these categories, which may be of interest to the program for outreach purposes.

**Figure 2. How Volunteers Learned of Program**



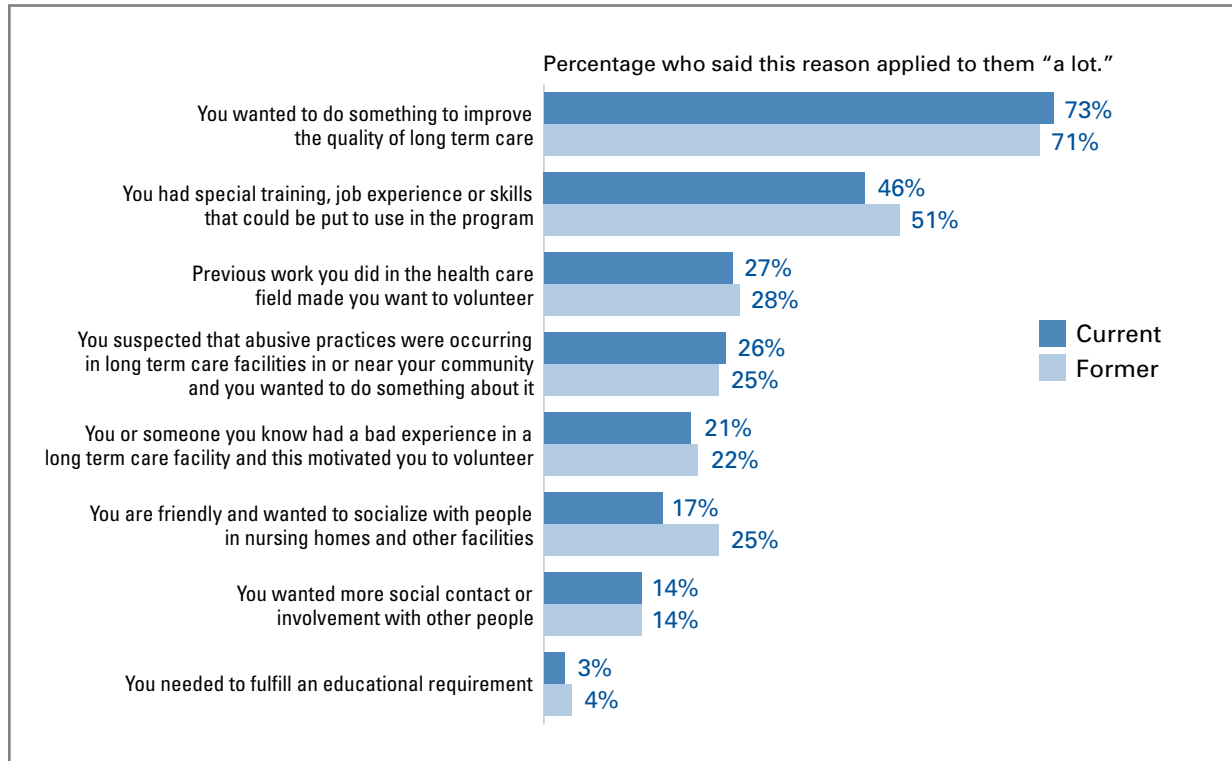
### Motivation

The leading reason for getting involved was the desire to do something to improve the quality of long term care; this received the strongest endorsement by nearly three-quarters of volunteers (Figure 3).

The second most-cited reason was volunteers’ desire to put their special training, job experience, or skills to good use.

Reasons for volunteering were nearly identical among current and former ombudsmen. However, former volunteers were a bit more likely to have suspected abuse in their communities, feel that they had skills to put to good use, and see themselves as friendly and willing to socialize with people in nursing homes.

**Figure 3. Motivations for Volunteering**



### Preparation for Role

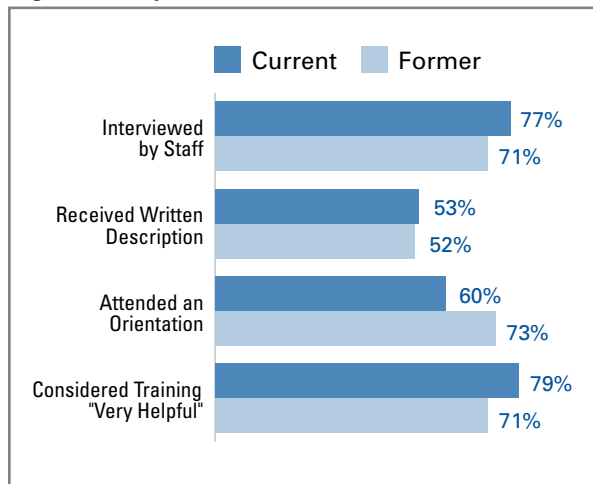
The survey obtained basic descriptive information about volunteers' initial contact with the program and overall impression of the training (Figure 4).

Approximately three-quarters of volunteers were interviewed by local program staff. Volunteers in the suburban programs were less likely to be interviewed by staff (not shown).

Over half of volunteers had the duties of the job described to them in writing; almost two-thirds attended an orientation before the training.

More than three in four volunteers perceived the certification training to have been very helpful; this was slightly lower among former volunteers.

**Figure 4. Preparation for Ombudsman Role**

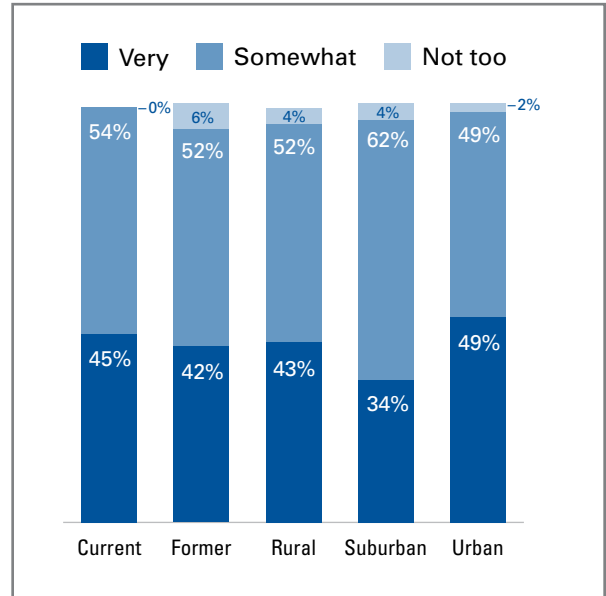


### Preparedness to Function

Overall, 43 percent of volunteers said they were "very" prepared to function as a volunteer as a result of the training and mentoring they received; 54 percent said they were "somewhat" prepared. Very few said they were "not too" prepared (Figure 5).

Suburban region volunteers were less likely to report feeling "very" prepared.

**Figure 5. Preparedness to Function as Ombudsman**

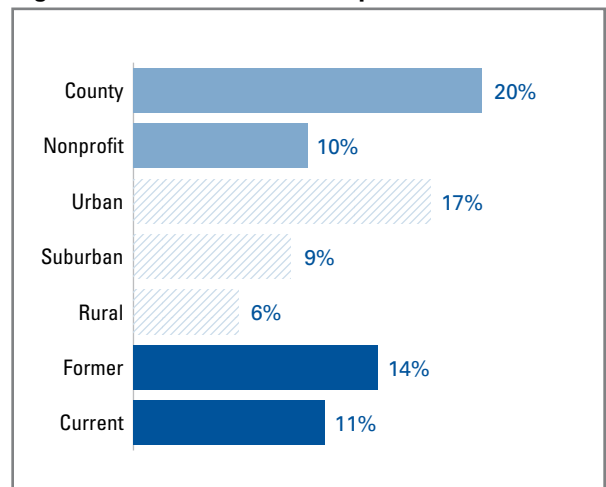


### Accompanied by Staff on First Visit

While most volunteers were accompanied by staff on their first visit to LTC facilities, that proportion was highest (89 percent) among current ombudsmen (Figure 6).

A sizable proportion of former volunteers (14 percent), volunteers from county-run agencies (20 percent), and urban region volunteers (17 percent) went on their first visits alone.

**Figure 6. Volunteers Unaccompanied on First Visit**



## Training Approaches

Several certification training approaches were presented to survey respondents, who were asked which ones they thought should be “used more” (Table 3).

**Table 3. Training Approaches\* That Volunteers Would Like “Used More”**

More role-playing	42%
More case examples to work on and discuss	39%
Facility visits with another ombudsman (as a part of training)	38%

\*Received the strongest volunteer endorsement.

All three of these approaches were more frequently endorsed by former volunteers and by suburban region volunteers—by six to nine points higher each (not shown).

In addition, approximately one-quarter of volunteers would like more presentations by guest speakers (30 percent among former and suburban region volunteers), use of videos and other visual presentations, and group exercises and discussions.

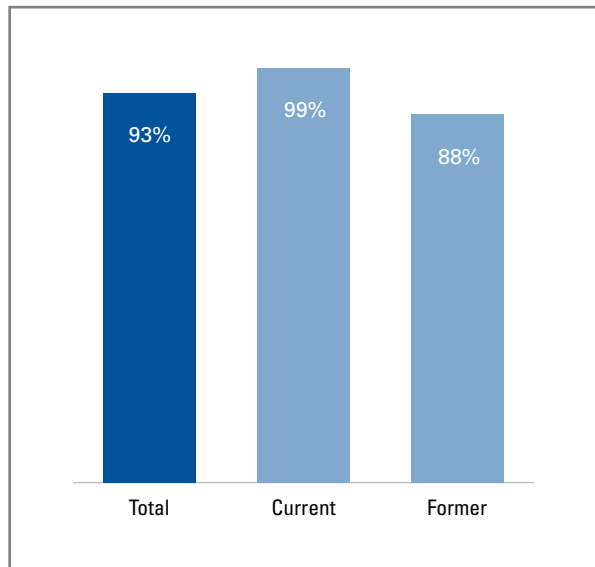
Smaller percentages wanted to see more written exercises (21 percent) and home study (18 percent) approaches.

## 3. Respondent Experience as Ombudsman

### Recommend Program

Overwhelmingly, respondents said that they would recommend the program to others looking to volunteer. This is an important indicator of overall volunteer experience, but it also has implications for word-of-mouth recruitment (Figure 7).

**Figure 7. Respondents Who Would Recommend Program to Others**



Among current volunteers, 99 percent said that they would recommend the program, as did 88 percent of former volunteers.

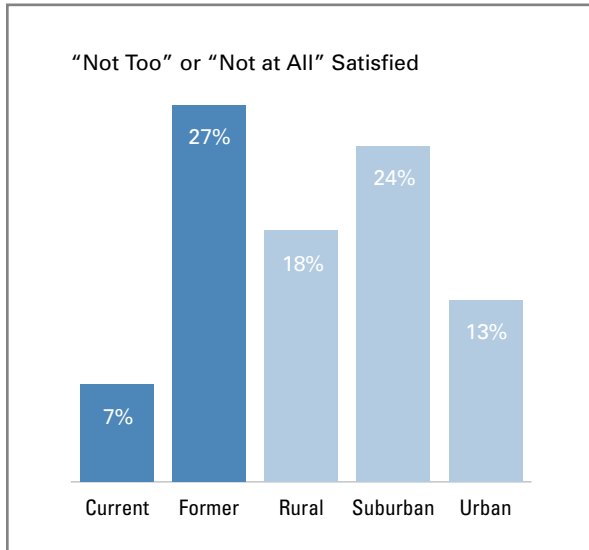
Former volunteers from suburban regions were the least enthusiastic; one-quarter that they would not recommend the program (not shown).

When asked how their work in the ombudsman program compared with their expectations, 11 percent said that it was “easier,” 47 percent said that it was “about the same,” and 39 percent said that it was “more difficult” than they had expected.

## Volunteer Satisfaction

Overall, volunteer satisfaction was fairly high, with about half of volunteers saying that they were “very satisfied” with their program experience. However, sizable proportions of volunteers said that they were “not too” or “not at all” satisfied with their program experience (Figure 8).

**Figure 8. Overall Volunteer Satisfaction**

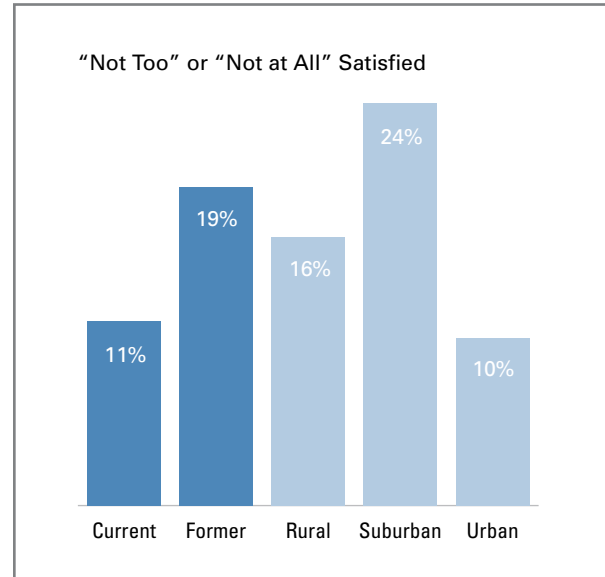


The proportion of dissatisfied volunteers was higher among former volunteers (27 percent) and among volunteers from suburban regions (24 percent). This is reflective of an overall pattern in the survey findings.

The percentage dissatisfied was also slightly higher among women, significant because the majority of volunteers are women (not shown).

The percent of volunteers who were dissatisfied with the amount of contact with program staff was highest among former volunteers and volunteers from suburban regions (Figure 9).

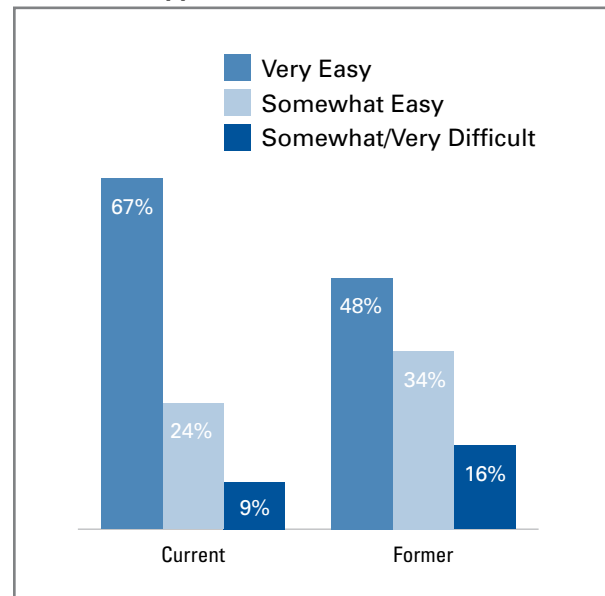
**Figure 9. Volunteer Satisfaction with Amount of Contact with Program Staff**



## Getting Information/Support

Over half of volunteers reported that it was “very easy” to get assistance and information from local program staff when needed. However, there were large discrepancies between current (67 percent) and former (48 percent) volunteers (Figure 10).

**Figure 10. Ease or Difficulty of Getting Information/Support from Staff When Needed**



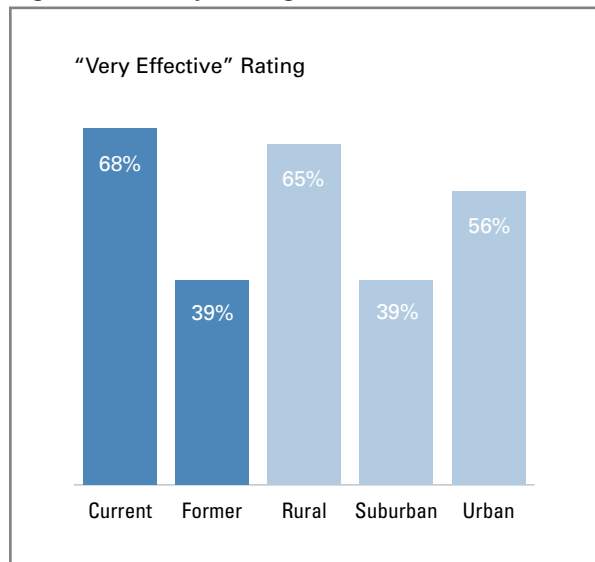
## 4. Respondent Perceptions of Program Effectiveness

### Mission Fulfillment

The core motivations and deeper satisfaction issues of volunteers are addressed in this section of the report, including volunteer satisfaction with specific elements of the program, the perceived effectiveness of the program, and factors that influence the decision to stay with or leave the program.

Similar to overall satisfaction shown in Figure 8, many respondents thought the program was effective in fulfilling its mission overall (Figure 11).

**Figure 11. Ability of Program to Fulfill Its Mission**



There was a large discrepancy in perceived program effectiveness between current and former volunteers, and among region types, as suburban region volunteers perceived lower levels of program effectiveness.

**Table 4. Satisfaction with Specific Program Elements**

Survey respondents were asked a series of questions about their level of satisfaction with specific program elements. The greatest difference between current and former volunteers was the extent of dissatisfaction with:

1. **Ability to impact quality of life among residents of LTC facilities.** Some 37 percent of former volunteers and 7 percent of current volunteers said they were “not too” or “not at all” satisfied.
2. **Skills and experience put to good use.** Of former volunteers, 32 percent were dissatisfied, versus 5 percent of current volunteers.

Small percentages of both current and former volunteers were dissatisfied with the recognition they received. However, while 76 percent of current volunteers said that they were “very satisfied” with the recognition they received, only 56 percent of former volunteers did—a 20-point gap.

### “Big Influence” Factors

To analyze satisfaction in a different way, the survey inquired about factors that influenced current and former volunteers’ interest in staying with the program (Table 5) or deciding to leave it (Table 6). Volunteers answered whether each factor had a “big influence” or a “small influence” or whether it was “not a factor” in their decision.

**Table 5. Factors That Had a “Big Influence” on Current Volunteers’ Decision to Stay with the Program**

1. Impacting quality of life of LTC residents	78%
2. Program effectiveness	68%
3. Personal effectiveness	64%
4. Hard realities faced by LTC residents	57%
5. Skills and experience put to good use	55%
6. How LTC facility staff respond to you	52%

**Table 6. Factors That Had a “Big Influence” on Former Volunteers’ Decision to Leave the Program**

1. Impacting the quality of life of LTC residents	30%
2. Personal effectiveness	29%
3. Amount of time to volunteer	22%
4. Skills and experience put to good use	19%
5. Program effectiveness	17%

**Table 7. Respondents’ Recommendations for Improving Retention**

Respondents were provided a series of recommendations and asked how much each would improve volunteers’ length of stay with the program. Shown are the percentages of volunteers who thought the following recommendations would improve the retention of volunteers “a lot.”

• More volunteers	50%
• Less paperwork	44% *
• More support from staff	40%
• Mileage reimbursement	40%
• Specialized roles for volunteers	37% *
• Legal consultation	34%
• More local program staff	34%

\*Overall percentage, higher among former volunteers.



# III. Survey Results: Qualitative Findings

THE SURVEY INCLUDED THREE OPEN-ENDED QUESTIONS inviting respondents' recommendations for improving recruitment and retention of volunteers.

There was an extremely high response rate; of the 251 individuals who completed the survey, 237 (94 percent) responded to an open-ended question. Further, of those who answered the question, almost all (218) gave a substantive response. These numbers suggest that current and former volunteers are genuinely interested in the success of the program and contributed their suggestions accordingly.

In addition to the substantive comments, 32 volunteers took the opportunity to make a positive comment about the program, and 22 said that they had left the program (or thought that other volunteers had left the program) for reasons that were unrelated to satisfaction.

Responses to the open-ended questions fall into two groups of themes based on the total number of comments. Group 1 received the highest number of comments (25 to 38 for each theme); Group 2 received fewer comments for each theme, but still a substantial number.

The key themes from the narrative responses and the number of comments follow.

## Group 1 Themes

- **Mentoring** (pairing new volunteers with experienced volunteers/staff): (n=38)
- **Staff support/communication:** (n=36)  
Ten additional comments cited specific staff weakness (6) or lack of recognition from staff (4).
- **Less paperwork:** (n=28)
- **Progressive responsibilities/specialized roles/better use of skills:** (n=27)  
Nine additional comments addressed the need for more say in decisions (7) and more clarity in the volunteer role (2).

- **Frustration with lack of action by authorities** (state CCL, DHS, LTCO, or facilities): (n=25)  
Five additional comments mentioned more generally that volunteers want to see/know the results of their efforts.

## Group 2 Themes

- **Flexibility in hours** to accommodate working volunteers; flexibility in scope of responsibility (e.g., limiting number of facilities); and flexibility in other administrative policies: (n=16)
- Regular, substantive **case discussions**: (n=16)
- **Continuing education** on substantive topics (based on “real-life” situations): (n=13)
- Too much **time/burden** on volunteers: (n=8)
- **Limit duties** to one or two facilities: (n=5)
- **Mileage reimbursement**: (n=7)
- **Financial incentives/pay** for volunteers: (n=7)

## Discussion and Recommendations

The survey findings provide comprehensive information about the ombudsman volunteer experience, including extensive descriptive data and numerous specific suggestions. The results strongly validate the importance of the program and also point to potential levers for enhancing the volunteer experience and improving program effectiveness, both of which are likely to impact recruitment and retention.

## Program Strengths

The findings show that, on the whole, the ombudsman experience was overwhelmingly positive, indicating a valuable strength of the program given the need to continually bring in new volunteers. Both current and former volunteers viewed the program, staff, their fellow volunteers, and the importance of the work very favorably. Fully 93 percent would recommend the program to others looking to volunteer. In addition, nearly half of volunteers were “very satisfied” with their experience. Comments in the narrative suggested

that most volunteers held the program and its staff in high esteem. One of many positive comments by respondents:

“I don’t know what our staff can do more to encourage us. We have excellent staff, beautiful people. I’ve never worked with people I’ve enjoyed more. I love the program. I really appreciate the people I work with in the program.”

However, in spite of the willingness to recommend the program to other volunteers and the fairly high level of satisfaction overall, a number of findings revealed areas where dissatisfaction among volunteers would be important to address to improve volunteer retention. First, there were important discrepancies between current and former volunteers on several items, especially those addressing satisfaction with their volunteer experience and perceptions of program effectiveness. For example, 27 percent of former volunteers were “not too” or “not at all” satisfied with the program, as compared to only 7 percent of current volunteers. In addition, 5 percent of volunteers currently with the program felt that their skills and experience were not being put to good use, while 32 percent of former volunteers felt this way.

There were some important differences in volunteer perceptions by region type as well. For example, 24 percent of suburban region volunteers were “not too” or “not at all” satisfied with the program, as compared to 18 percent of rural region volunteers and 13 percent of urban region volunteers. Ombudsmen in the suburban regions consistently expressed lower levels of satisfaction and had less favorable program views than volunteers in other regions. It is unclear why the regional disparity exists. The ombudsman program will need to investigate the sources of these gaps.

## Core Motivation

The survey identified core motivation and satisfaction factors that may impact recruitment and retention. Overall, volunteers want to have an

impact and to use their skills and experience. These findings were strongly affirmed in the quantitative data and validated in the qualitative results.

For example, the leading motivation for volunteering (endorsed by nearly three-quarters of all respondents) was the desire to improve the quality of life for residents. Consistent with that theme, 78 percent of current volunteers cited the ability to impact quality of life as a “big influence” on their decision to stay, while 30 percent of former volunteers said that this issue was a “big influence” on their decision to leave the program. Both current and former volunteers frequently said that they wanted to see the results of their work and voiced frustration over instances in which those with the authority to act on behalf of clients did not. Volunteers often said that the oversight agencies failed to follow up on complaints, or, alternatively, that feedback was poor about the outcomes associated with their casework. Many felt that facilities got away with too much and that the ombudsmen were, in effect, “toothless tigers.”

The second motivation for volunteering (cited by about half of all volunteers) was that they wanted to put their special training, job experience, or skills to good use in the program. Although many volunteers felt that their skills were valued and put to good use, nearly one in five former volunteers said that this was a major reason for leaving the program. Even among those still with the program, many said that their skills and experience were not being well used.

In addition, many volunteers strongly endorsed specialization in roles and the concept of progressive responsibilities (based on experience) among volunteers. Several mentioned the need to play to volunteer interests and strengths. As one volunteer put it:

“...we have retired physicians, we have lawyers, and we have people who had experience in other professional fields like social work, and in my case I'd been a health services administrator. So we bring to the program different gifts. There hopefully should be opportunities for us with

these different gifts to give to the program so the program can benefit and expand.”

Another volunteer had this to say:

“I think there ought to be a discernable progression of responsibility—as you get more experience you get more responsibilities. And in our local program... you can see differences in the level of responsibility in the paid staff based on their particular talents and experience. I'd like to see that in volunteer staff as well. It's just that in most anything you do you want to feel like you are growing and you are more than you were last year. And since this isn't a paid position you can't look at your paycheck to see if you are more than you were last year. So you could start as volunteer third class and move up to first class....”

### **Preparation for Volunteering**

The need for greater preparation came out clearly in the findings. Only 44 percent of volunteers felt “very prepared” to function in their role as a result of the training and mentoring they received. Both quantitative and qualitative responses clearly pointed to the need for earlier mentoring and support from more experienced volunteers and staff. Frequent comments related to the desire to feel more “comfortable” in the ombudsman role, wanting a longer mentoring period, and having newer volunteers paired with more experienced volunteers and staff. Many respondents discussed the value of more role-playing in training, as well as more substantive case discussions in regular meetings.

Also related to these findings, 11 percent of current volunteers reported going on their first visit unaccompanied; this was true among 14 percent of former volunteers and 20 percent of volunteers affiliated with county-run agencies (versus 10 percent of volunteers from nonprofit agencies). It would seem important to investigate the practices among different agencies and regions to see whether unaccompanied visits were avoidable. If due to a shortage of experienced volunteers who could

accompany new volunteers, perhaps paid staff could provide this support in the short term, given the predominant concern about mentoring observed in the qualitative analysis.

Respondents frequently suggested that more staff support and more regular communication with staff would help volunteers feel more supported and more connected to their work. They also wanted more continuity in their duties and a say in their assignments. Many respondents cited the need for more flexibility, both in terms of allowing volunteers to specialize (or be on a volunteer career ladder) and allowing volunteers who are employed to reduce their commitment.

### Recommendations for Program Improvements

Respondents pointed to a number of possible enhancements to the program:

- Customer service improvements, such as response time to calls;
- Contact with staff;
- Support on legal issues;
- Accompanied first visits;
- Less paperwork (streamlined and updated reporting system);
- Mileage reimbursement;
- Flexible administrative policies;
- Varied scheduling of regular meetings;
- Feedback about impact of their activities—strengthening connectedness to outcomes; and
- Follow-through and follow-up with volunteers by staff.

The narrative portion of the survey mirrored the fixed-response questions closely. The three most frequently cited recommendations for improving volunteer longevity related to:

1. Early mentoring experiences and desire for more staff support;
2. The desire to progressively take on more responsibilities and advance into more highly specialized and skilled services; and
3. Administrative improvements that could significantly improve the process of carrying out volunteer duties (including reducing and streamlining paperwork, particularly in the context of a heavy caseload).

Based on the quantitative and qualitative responses, the following are suggested strategies that may lead to program improvements that address the main motivations for volunteering:

- Build on positive program views;
- Share and celebrate success stories;
- Provide regular substantive discussion of cases;
- Allow for specialization of volunteers based on skills and experience;
- Allow volunteers to use professional and personal experience;
- Enable continuing education for volunteers;
- Provide a career ladder or mechanism for a progressive increase in responsibility based on skills and performance;
- Promote volunteer connectedness to outcomes;
- Promote accountability among agencies with authority; and
- Allow for a more limited scope of activities for certain volunteers.

The results strongly suggest that the reasons for volunteering must be central to the actual experience of ombudsmen in their day-to-day work. Volunteers want to improve the quality of life of the residents, and they want to use their own skills and experience to do so. Program enhancements that advance these two priorities and reduce roadblocks are most likely to improve both recruitment and retention.

## Appendix A: Methods

Telephone interviews containing approximately 35 questions lasting on average of 15 minutes were conducted with program volunteers who were randomly selected from sample lists of 615 current and 375 former volunteers (990 total). Most items were standardized (fixed choice), but the survey also included three open-ended items to which telephone interviewers typed in the responses of the survey respondents verbatim; they were then postcoded for the analysis.

The survey sample was based on the most recent volunteer lists as compiled by the State Long Term Care Ombudsman Program. Current and former volunteers who had been certified within the past five years were eligible for inclusion. Current volunteers were preferentially selected among those having at least two years' but no more than five years' experience with the program; this was intended to capture the perspective of volunteers who had made it past what many considered a critical one- to two-year "threshold" of program experience. Former volunteers were selected from lists of those who were voluntarily decertified, and as recently as possible, but all within the past three years. Volunteers were randomly selected from lists according to region type, to assure a representative statewide sample.

Trained interviewers at Field Research Corporation conducted the telephone interviews between July 21 and August 10, 2006, at its San Francisco facility. Up to six call-back attempts were allowed.

The response rate was unusually high: 84 percent overall, and nearly identical among current and former volunteers. The following is a breakdown of the response rate (calculated as a cooperation rate in accordance with National Association of Public Opinion Research standards):

**Total ombudsman volunteers reached and screened: 298**

Completed survey: 251 (84.2 percent)

Refused survey: 47 (15.8 percent)

**Current ombudsman volunteers reached and screened: 151**

Completed survey: 125 (82.8 percent)

Refused survey: 26 (16.7 percent)

**Former ombudsman volunteers reached and screened: 147**

Completed survey: 126 (85.7 percent)

Refused survey: 21 (13.7 percent)

## Appendix B: Classification of Regions

AGENCY TYPE	PROGRAM OFFICE	COUNTIES
<b>Rural</b>		
Nonprofit	Eureka	Del Norte, Humboldt
Nonprofit	Redding	Lassen, Modoc, Shasta, Siskiyou, Trinity
Nonprofit	Chico	Butte, Colusa, Glenn, Plumas, Tehama
Nonprofit	Sonora	Alpine, Amador, Calaveras, Mariposa, Tuolumne
Nonprofit	Santa Cruz	Santa Cruz, San Benito
Nonprofit	Hanford	Kings, Tulare
Nonprofit	Bishop	Inyo-Mono
Nonprofit	Ukiah	Lake, Mendocino
Nonprofit	Santa Rosa	Sonoma
Nonprofit	Napa	Napa
Nonprofit	Modesto	Stanislaus
Nonprofit	Merced	Merced
Nonprofit	Monterey	Monterey
Nonprofit	Kern	Bakersfield
County	El Centro	Imperial
County	Placerville	El Dorado
<b>Small Urban/Suburban</b>		
Nonprofit	Sacramento	Nevada, Placer, Sacramento, Sierra, Sutter, Yolo, Yuba
Nonprofit	Fresno	Fresno, Madera
Nonprofit	San Luis Obispo	San Luis Obispo
Nonprofit	Goleta	Santa Barbara
County	Stockton	San Joaquin
County	San Bernardino	San Bernardino
County	Riverside	Riverside
County	Vallejo	Solano
<b>Large Urban</b>		
Nonprofit	San Francisco	San Francisco
Nonprofit	Concord	Contra Costa
Nonprofit	San Mateo	San Mateo
Nonprofit	Oakland	Alameda
Nonprofit	San Jose	Santa Clara
Nonprofit	Ventura	Ventura
Nonprofit	Santa Monica	Los Angeles
Nonprofit	L.A. County	Los Angeles
Nonprofit	Santa Ana	Orange
County	San Rafael	Marin
County	San Diego	San Diego



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