

Date:

Subject: Request for Assistance Regarding Long-Term Care Resident Rights

Dear [Ombudsman Name or Office],

I am writing to request your assistance and advocacy regarding the care of my **[Relationship, e.g., mother/father]**, **[Resident Name]**, who is currently a resident at **[Facility Name]**.

We have encountered several concerns that we have been unable to resolve directly with the facility administration. Specifically, we are seeking guidance on:

- **[Primary Issue 1, e.g., unanswered call lights]**
- **[Primary Issue 2, e.g., hygiene concerns]**

I have compiled a detailed log of events, photographic evidence, and relevant care plan documents to help you review the situation.

We would appreciate the opportunity to discuss these concerns with an advocate to ensure the resident's rights and dignity are being respected. Please let me know a convenient time for a brief call, or if there is specific documentation you would like me to provide first.

Best regards,

[Your Name] [Your Phone Number]