

# ELDERCARE MEDIATOR QUESTIONNAIRE

## A. BASIC INFORMATION:

**LOCATION(S):**

**"I WILL MEDIATE IN THE FOLLOWING LOCATION(S)":  
LIST AT LEAST ONE STATE, THE STATE WHERE YOUR OFFICE IS LOCATED,  
AND ANY ADDITIONAL STATES OR METROPOLITAN AREAS OUTSIDE OF  
THE FIRST STATE LISTED. NOTE YOUR TRAVEL COSTS.**

My office is located in New York and I will mediate in new York and Pennsylvania

**YOUR NAME:** Timothy Gorman

**BUSINESS NAME:**

**ADDRESS:** 174 Talmadge Hill Road W.  
NY

**PHONES:** (607) 565-7063

**FAX:** (607) 738-6758

**EMAIL:** [Tgorman174@aol.com](mailto:Tgorman174@aol.com)

**WEBSITE:**

**LANGUAGES SPOKEN FLUENTLY:** English

**FEES PER HOUR & OTHER FEES (EG. TRAVEL):**

\$80 + mileage reimbursement at the IRS rate

**DO YOU HAVE MEDIATOR MALPRACTICE INSURANCE?** No

## B. BACKGROUND:

**OVERVIEW OF BACKGROUND**

**(PRIMARY PROFESSION, ETC. MAXIMUM 50 WORDS):**

Mediator - Arbitrator

**GENERAL MEDIATION EXPERIENCE (MAX 30 WORDS):**

Mediator of labor and employment disputes 11 years experience, have mediated over 150 disputes.

**NUMBER OF MEDIATED DISPUTES (ANY KIND--MINIMUM 5 TO BE LISTED):**

over 100

**NUMBER OF MEDIATED DISPUTES INVOLVING HIGH-CONFLICT FAMILY MEDIATION:**

More 3

**ELDERCARE MEDIATION EXPERIENCE: NUMBER OF EM DISPUTES MEDIATED:**

Less 5

**NUMBER OF YEARS YOU HAVE MEDIATED:**

11

**GERIATRIC EXPERIENCE (MAX 30 WORDS):**

**OTHER:**

dealt with doctors and hospitals over care of father and mother, familiar with nursing homes and adminstraive personnel

**C.**

**EDUCATION, ASSOCIATIONS, AND LICENSES/MEDIATOR REGISTRIES:**

**EDUCATIONAL DEGREE(S), MAJOR(S), & INSTITUTION(S):**

B.S - Business Administration - Alfred University  
M.A. - Dispute Resolution - State University of New York  
Other coursework, Cornell University

**PROFESSIONAL ASSOCIATIONS:**

ACR, LERA

**MEDIATOR REGISTRIES/CERTIFICATION/LICENSES:**

**CERTIFICATION AND TRAINING:**

**D.**

**TYPES OF ELDERCARE MEDIATION DISPUTES THAT YOU WILL**

**MEDIATE:**

**CHECK ALL THAT APPLY & CHECK TYPES OF EM DISPUTES THAT YOU HAVE ALREADY MEDIATED:**

<b>WILL</b>	<b>HAVE</b>
Quality of Life	Quality of Life
Housing	
Car Keys, Driving & Transportation (limitations on driving, testing, transportation to medical appointments, friends, social events & church)	Car Keys, Driving & Transportation (limitations on driving, testing, transportation to medical appointments, friends, social events & church)
Caregiving (division of duties, relief for caregivers, level of care needed, planning vacations for parents & caregivers)	
Financial Decisions	
Geriatric Assessment	
Working through Family Fights (improving sibling relationships, learning communication skills, & working as a team)	Working through Family Fights (improving sibling relationships, learning communication skills, & working as a team)
Wills, Trusts & Estates (planning, distribution of assets, & resolution of family disputes)	
Division or Sale of Farms, Businesses & Property	
Powers of Attorney & Avoiding Guardianship	
Health Care Decisions	
Emergency Decisions	
Planning Ahead for End of Life Decisions (funeral planning & Advanced Directives (Living Wills/Life Prolongation, organ donation preference, appointment of health care representatives)	Planning Ahead for End of Life Decisions (funeral planning & Advanced Directives (Living Wills/Life Prolongation, organ donation preference, appointment of health care representatives)
Resident Injury; level of care; Wrongful Death	

**WILL\_MEDIATE\_OTHER:**

My office is located in New York and I will mediate in new York and Pennsylvania

**HAVE\_MEDIATED\_OTHER:**

**MEDIATION TRAINING:**

**TRAINING IN BASIC MEDIATION  
(MINIMUM 40 HOURS OF GENERAL MEDIATION TRAINING):  
NOTE TYPE (FAMILY, CIVIL, COMMUNITY MEDIATION OR OTHER,  
TITLE(S), TOTAL NUMBER OF HOURS, TRAINERS)**

Master degree in dispute resolution (40 hours) plus other courses through the American Arbitration Association

**TRAINING RECEIVED IN ELDERCARE MEDIATION:  
NOTE TITLES, TOTAL NUMBER OF HOURS & TRAINERS (MAX 30 WORDS):**

**TRAINING IN DOMESTIC VIOLENCE: NOTE TITLE(S), TOTAL NUMBER OF HOURS & TRAINERS (MAX 30 WORDS):**

**SUMMARY OF OTHER ADVANCED MEDIATION TRAINING:  
NOTE TITLE(S), TOTAL NUMBER OF HOURS & TRAINERS (MAX 30 WORDS):**

see above

**WERE YOU A TRAINER FOR ANY NOTED ABOVE?  
IF SO, LIST HOURS:**

**F.  
MODELS AND PROCEDURES USED AS A MEDIATOR:**

**MODEL(S) OF MEDIATION USED PRIMARILY:  
FACILITATIVE DIRECTIVE**

**TYPE(S) OF MEDIATION SESSION USED (NOTE ALL YOU USE, THEN FOR EACH CATEGORY, LIST YOUR LEVEL OF EXPERIENCE: LOW, MEDIUM, HIGH):**

<b>EXPERIENCE</b>	
<b>HIGH</b>	<b>IN-PERSON ONLY</b>
<b>MEDIUM</b>	<b>WITH SOME PARTICIPATION BY CONFERENCE CALL</b>
<b>NONE</b>	<b>MEDIATION BY CONFERENCE CALL</b>
<b>NONE</b>	<b>ONLINE DISPUTE RESOLUTION (MEDIATION WITH VIDEO COMPONENT)</b>

