

Administration for Community Living/Administration on Aging- Office of Long-Term Care Ombudsman Programs

National Ombudsman Reporting System (NORS)
Table 2: Complaint codes and definitions

OMB Control Number 0985-XXXX
Expiration Date: XX/XX/XXXX

ACL response to 60 day Public Comment

- No complaint codes were removed. Two additional complaint codes were added: I05-“Housekeeping, laundry and pest abatement;” and L03-“Request to transition to community setting.”
- Complaint code numbering was reformatted to a 2 digit number, i.e. A01
- Complaint code labels were revised in accordance with comments. Most complaint code definitions and reporting tips were revised in response to comments.

Complaint: an expression of dissatisfaction or concern brought to, or initiated by, the Ombudsman program which requires Ombudsman program investigation and resolution on behalf of one or more residents of a long-term care facility.

Label	Code	Comments	ACL Response
Abuse, Gross Neglect, Exploitation	A		
		<p>Throughout Table 2, use language that is clear and does not contain negative labels. For example, change labels to read...</p> <p>We recommend ensuring that all definitions for each type of abuse include the federal elder abuse definitions and include a statement that allows for States to use their own definitions for abuse, such as, “and includes the state definition for this type of abuse.”</p>	<p>See comments below</p> <p>Code labels changed as requested.</p> <p>The abuse complaint codes are consistent with other federal definitions such as those found in National Adult Maltreatment Reporting System (NAMRS) ; the Center for Disease Control Elder Abuse Surveillance: Uniform Definitions and Recommended Core Data Elements; and the definitions found in the revised nursing home regulations 42 CFR §483.5 Definitions.</p>

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		All sections should state if they are directly related to the facility or not, i.e. A, K, L are not, B –D, I, J are related to the facility, E- is not clear, F-H does not state but should.	<p>A - Complaint codes require the selection of a perpetrator, which includes facility staff as one option.</p> <p>B-J complaint codes are for complaints against the facility.</p> <p>K complaint codes are for complaints about an Outside Agency (non-facility)</p> <p>L complaint codes are for “System/Others (non-facility)”</p> <p>Additional coding questions can be addressed in training and technical assistance provided by the Ombudsman Resource Center.</p>
Abuse, physical	A1	<p>Several commenters agreed with above comments.</p> <p>Code A1 and A3 – Abuse, physical and Abuse, Verbal/psychological</p> <p>Issue: Many residents are experiencing bullying both from staff and other residents.</p> <p>Recommendation: Add to Examples and Reporting Tips an addition of bullying to the descriptions provided.</p>	Agree. Revised “Examples and Reporting Tips.”
Abuse, Sexual	A2	<p>Issue: includes language in the Examples and Reporting Tips about “sexually explicit photographing.”</p> <p>Recommendation: In the Examples and Reporting Tips, add language based on the recent guidance from CMS on posting pictures to social media</p>	No change in definition made. Revised “Examples and Reporting Tips.”
	A2	From what I could tell, the proposed changes do not appear to address “resident-to-resident physical or sexual abuse” (complaint	State Ombudsman programs will be required to select a type of perpetrator for each abuse,

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		<p>code A.6) as well as in “resident conflict (including roommates) and inappropriate behaviors that impact other resident’s quality of life” (complaint code I.66).</p> <p>Recent studies have shown that distressing and harmful resident-to-resident interactions (DHRRI) in nursing homes are prevalent (Lachs et al. 2016) and injurious (Shinoda-Tagawa et al. 2004</p>	<p>neglect and exploitation complaint.</p> <p>See Table 1.</p>
	A2	<p>We recommend adding “verbal” to the definition and the examples. We also recommend changing the examples to more clearly define the three types of sexual abuse. Hands on offenses, hands off offenses (ex. taking naked photos of an elder and distributing them on social media, requiring a resident to watch another masturbate), and harmful genital practices (those offenses that can occur during peri-care)</p>	<p>Revised “Examples and Reporting Tips.”</p>
	A2	<p>Additional instruction and guidance is needed as to how to code complaints of sexual activity between individuals with cognitive impairment or involving an individual who is unable to consent</p>	<p>This issue lends itself to complaint investigation training.</p> <p>Concern noted and will be shared with the National Ombudsman Resource Center; they are developing training on the new NORS codes.</p>
Abuse, verbal/psychological	A3	<p>Abuse, verbal or psychological. Move “including punishment and seclusion” to Examples and Reporting Tips.</p> <p>Abuse, verbal/psychological (including punishment, seclusion)</p> <p>Issue: Code A3 – Examples and Reporting Tips includes oral, written or gestured language that willfully includes disparaging and derogatory terms used against residents but does not specifically</p>	<p>Revised “Examples and Reporting Tips.”</p>

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		address the misuse of social media. Recommendation: Add language to Examples and Reporting Tips for A3 about postings to social media that includes disparaging and derogatory terms used against residents.	
	A3	Under examples and tips, recommend adding 'actions' to broaden the scope as psychological abuse may take many forms. Add at end "Actions that confuse, disrupt, ignore the resident.	Revised "Examples and Reporting Tips."
	A3	Abuse, verbal/psychological (including punishment, seclusion) A3 We recommend adding abduction to the Definition and including abduction in the examples and reporting tips. Helpful to add 'involuntary seclusion' is not considered abuse when it is medically directed for infection control.	Definition was not changed. Revised "Examples and Reporting Tips."
Financial Exploitation	A4	Delete 'trusting relationship to the resident.'" Abuse is abuse whether it is from a person in a 'trusted relationship' or not and one is left wondering how a 'trust relationship' is involved.	Agree – the definition was changed to be consistent with the National Adult Maltreatment Reporting System (NAMRS).
Gross Neglect	A5	Delete "in a trust relationship"	Agree
Access to Information/ Communication	B		
Access to information, including records	B1	Issue: The Definition and Examples and Reporting Tips need clarity and alignment with the Older Americans Act. Recommendation: Use language from §712(b) of the reauthorized OAA.	Revised "Examples and Reporting Tips."
	B1	There is a significant difference between access to a resident's own medical/personal records at a facility and records that are not	No additional definitions were added in this category. Past complaint history indicates that the numbers are too small. Total access

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		<p>specific to a particular resident, such as the licensing survey.</p> <p>We recommend creating a second category for this code to clarify the difference between complaints about resident access to their own records (medical), and access to other records such as survey, etc. that are not resident specific.</p>	<p>complaints are less than 3% with no current category rising above 1% of all complaints.</p>
Language/ communication barrier	B2	<p>Under Examples and Reporting Tips, add examples.</p>	<p>Revised “Examples and Reporting Tips.”</p>
Willful interference with Ombudsman duties	B3	<p>Issue: The definition for willful interference with ombudsman duties does not include examples that fully address an ombudsman’s immediate, private, and unimpeded access to facilities, residents, and records.</p> <p>Recommendation: Revise the Examples and Reporting Tips to state, “Includes when an employee or other representative of a facility interferes with the Ombudsman program having immediate access to the facility, access to records, or to meet with a resident in person, in private, or by phone.”</p>	<p>Agree. Revised “Examples and Reporting Tips.”</p>
	B3	<p>Willful interference is frequently a corporate decision or upper management decision as opposed to a decision made by an individual who works in a care facility. We recommend adding the term “entity” to the definition of who may be responsible for willful interference. “Willful interference means actions or inactions taken by an individual or entity in an attempt...”</p> <p>We also recommend including access to facility or resident records to the definition and the description to clarify that interference can include those items.</p> <p>Complaints regarding Interference with Ombudsman duties would generally be a complaint made by the Ombudsman as opposed a</p>	<p>No additional definitions were added to this category. The total number retaliation complaints are .35% (less than 700 annually) and while an important matter it does not need to be singled out in a separate complaint code.</p>

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		<p>complaint made by the resident.</p> <p>Recommendation: Create a separate complaint code section for ‘Interference with Ombudsman duties’ with sub-categories encompassing retaliation against the resident or the complainant, retaliation against staff cooperating with the investigation / resolution; interfering with the Ombudsman’s duties by refusing access to the building, refusing private space for interviewing or ease-dropping, refusing access to records, verbal threats to the ombudsman, other actions impeding the investigation and false accusations against the ombudsman etc.</p>	
		<p>Issue: The definition for willful interference with ombudsman duties does not include examples that fully address an ombudsman’s immediate, private, and unimpeded access to facilities, residents, and records.</p> <p>Recommendation: Revise the examples and reporting tips to state, <u>“Includes when an employee or other representative of a facility interferes with Inability to access the Ombudsman/representative having immediate access to the facility, access to electronic and paper records, or to meet with a resident in person, in private, or by phone.”</u></p>	See above comments.
		Add example for threats to residents after meeting with LTC ombudsman.	
Admission, Transfer, Discharge, Eviction	C		

Label	Code	Comments	ACL Response
Admission	C1	<p>Issue: Examples in Definition do not address admission to facility without legal authority.</p> <p>Recommendation 1: Revise Definition to read: “Complaints related to admission to a facility.”</p> <p>Recommendation 2: Move examples to Examples and Report Tips and change to read: “Examples include: resident is admitted to a facility or section of a facility against their wishes <u>or without legal authority</u>, including admission to a secured or locked unit. Contract is missing or contains illegal provisions, such as requiring or requesting waivers of rights, or a violation of Medicaid rules other improper or illegal provisions including discrimination in admission determinations and similar problems.”</p>	<p>Did not accept recommendation to include the term “without legal authority.”</p> <p>Revised “Examples and Reporting Tips.”</p>
	C1	<p>Recommendation 2: Move examples to Examples and Report Tips and change to read: “Examples include: resident is admitted to a facility or section of a facility against their wishes, without legal authority, or to an overly restrictive setting, including admission to a secured or locked unit...”</p>	<p>“Overly restrictive” is too vague a term to include.</p> <p>Definition and “Examples and Reporting Tips” revised.</p>
Discharge appeal process - absent or not followed	C2	<p>Discharge appeal process - absent or not followed</p> <p>Issue 1: Definition is incomplete and includes examples.</p> <p>Recommendation 1: Revise Definition to read: Complaints related to the discharge appeal process or lack of appeal process.</p> <p>Recommendation 2: Move examples to Examples and Reporting Tips and change to read, Examples include: “the required number of days to appeal a discharge was not followed; the facility failed to follow appeal ruling; there was no appeal process in place; and similar problems.” Use this code when facility fails to inform</p>	<p>Definition revised.</p> <p>Revised “Examples and Reporting Tips.”</p>

Label	Code	Comments	ACL Response
		<p>resident of appeal rights.</p> <p>Issue 2: Examples and Reporting Tips section is incomplete.</p> <p>Recommendation: Under Tips section, include when the facility fails to inform residents of appeal rights under Medicaid, Medicare, managed care or other.</p>	
	C2	<p>Issue 1: Appeal process is too similar to C3, Discharge and Eviction. Appeal code may be confusing to the ombudsman reporting work and only fits if it is against the facility. Other parts of the appeal process could be a problem with the system, state agency, or managed care organization.</p> <p>Recommendation 1: Combine the two codes into one. In the combined C2 and 3, add discharge planning to the definition.</p> <p>Recommendation 2: Correct “behold” to “bed hold.”</p>	<p>Definition revised.</p> <p>“Examples and Reporting Tips” revised.</p> <p>Error corrected.</p>
		<p>Include a separate numeric for transfer to a different facility rather than one that is a community or less restrictive setting (some residents believe that a facility wants to retain them for payment or other reasons and therefore do not advocate for a resident to relocate to a different facility);</p>	<p>Did not accept this suggestion; it is too specific and would cause code confusion.</p>
Discharge/Eviction	C3	No comments	Label changed to “Discharge or Eviction”
Room assignment/room change/intra-facility transfer	C4	Move “Use for issues with room assignments, forced room changes or intra-facility transfers” under Examples and Reporting Tips.	Accepted suggestion.
Autonomy, Choice, Rights	D		

Label	Code	Comments	ACL Response
Exercise choice: care, treatment, schedule, health care provider	D1	Issue: Clarify definition and move examples to the correct section. Recommendation: Change the definition to read “Resident is denied the right to choose or schedule their care, treatment or healthcare provider.” Under Examples and Reporting Tips add the examples listed in the definition.	Definition modified with part moved to “Examples and Reporting Tips.”
Choice to live in less restrictive setting	D2	Issue: Definition references “discharge planning”, which is confusing with Code C2 and 3 about discharge. Recommendation: Delete reference to “discharge planning” in the definition. Replace the beginning of the definition with, “Resident is not offered choice of where they live, request to return to community...”	Definition revised. “Examples and Reporting Tips” revised.
	D2	Issue: Examples and Reporting Tips section needs additional examples to clarify. Recommendation: Clarify Examples and Reporting Tips for those not familiar with MDS Section Q. Add examples to clarify when to use this code	Definition revised. “Examples and Reporting Tips” revised.
	D2	Change verbiage to “Resident is not offered discharge planning, request to return to community is denied; ignored; or inadequately addressed; corrected or the facility staff prevents the resident from leaving facility and similar problems.	Definition revised. “Examples and Reporting Tips” revised.
Not being treated with dignity, respect	D3	Move “Use when resident is not treated with dignity or respect.” under Examples and Reporting Tips. Issue: Examples and Reporting Tips section is incomplete. Recommendation: Clarify under Examples and Reporting Tips section that posts on social media are related to abuse code under A2 or A3.	Definition modified with part moved to “Examples and Reporting Tips.” Additional coding tips added with regards to social media.

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Privacy	D4	Issue: Examples and Reporting Tips section is incomplete. Recommendation: Clarify under Examples and Reporting Tips section that if related to Ombudsman visits, the complaint should be coded under B3 – Willful interference with Ombudsman duties.	“Examples and Reporting Tips” revised.
	D4	Add, “Social media posts that are made without a resident’s permission and do not meet criteria for abuse.”	Did not include, this can be addressed in a training example.
		We recommend expanding the Examples and Reporting Tips to include failure to close doors/privacy curtains when giving personal care.	“Examples and Reporting Tips” revised.
Response to complaints, grievance-process	D5	The Definition is unclear and removes helpful definitions for current NORS complaint code L88 and L89. Recommendation: End the Definition after the words, “...grievance process.” Add to the definition, “Use if the grievance procedure is not followed or made known to residents.”	No change in definition. “Examples and Reporting Tips” added to include “Use if the grievance procedure is not followed or made known to residents.”
Freedom from Retaliation	D6	Issue: The title, Definition, and Examples need clarification. Recommendation 1: Change the title to “Retaliation.” Recommendation 2: In the Definition, strike “and similar problems” and add “to the facility, ombudsman, or state survey agency. Includes retaliation in response to actions taken by a resident, family, or another person acting on behalf of a resident.” Recommendation 3: Revise the last sentence in Examples and Reporting Tips to more clearly direct when the ombudsman should report retaliation as abuse or neglect.	Title changed to “Retaliation.” Definition revised as suggested. “Examples and Reporting Tips” revised.

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		Include removal of cigarettes as an example of retaliation rather than in the list of possessions in E2.	Do not include specific example, this can be included in a training example.
Visitors	D7	Issue: The definition does not address the resident's right to have visitors at the time of their choosing. Recommendation: Revise the definition to say, "Restrictions on a resident's ability to choose who to associate with, and when to visit, either in the facility or in the community."	Revised definition based on suggested language.
Resident or Family Council	D8	D8: include "staff dominance over rather than support of" resident or family council.	Definition modified.
Exercise other rights and preferences	D9	No comments	Accepted suggested label change to "Other rights and preferences."
Financial, Property	E		
Billing/charges	E1	Issue: The Definition needs clarity and contains examples. Recommendation: Move examples to Examples and Reporting Tips, and add "Billing for items or services which should be covered by Medicaid."	Accepted. "Examples and Reporting Tips" revised.
Personal property lost, destroyed	E2	Issue: Clarifying language is needed in Definition and in Examples and Reporting Tips. Recommendation: Revise the definition to read, "Resident property lost or destroyed including resident money or trust fund mismanaged. Move all the examples listed in the definition to the Examples and Reporting Tips section and <u>add failing to reimburse resident for lost or damaged items.</u>	Accepted. Definition modified with part moved to "Examples and Reporting Tips."
	E2	Move all the examples listed in the definition to the Examples and Reporting Tips section and add failing to reimburse resident for lost or damaged items. Remove laundry from this section and include in	Accepted – See I05- Housekeeping, laundry and pest abatement

Label	Code	Comments	ACL Response
		new I5 section on “Housekeeping and Pest Abatement”. Add tip that laundry should be coded under this new section.	
	E2	Remove cigarettes from this list of items that are for resident wellbeing.	See revised “Examples and Reporting Tips.”
	E2	<p>The proposed E2 has combined the current E37 Personal funds – mismanaged, access/information denied, deposits and other money not returned with the current E38 Personal property lost, stolen, used by others, destroyed, withheld from resident; however the concepts and issues encompassed in the current E37 and E38 are not fully evident in the proposed E2.</p> <p>Correct the title of E2 as ‘Personal Property Lost, Destroyed’ does not convey funds mismanaged, withheld etc.. For example: E2 Personal property including resident funds mismanaged, lost, stolen, used by others, destroyed, withheld from resident</p>	The definition was revised but we did not add “funds mismanaged code” as a separate code Funds mismanaged is 1.3% of all complaints and can be adequately identified within personal property.
Care	F		
Accidents, falls	F1	<p>Issue: In the Examples and Reporting Tips, the use of “A self-propelling resident” should be changed to use more person-centered language.</p> <p>Recommendation: Under Examples and Reporting Tips change “A self-propelling resident” to A resident using a wheelchair.</p>	No change. “Self-propelling “ is a more active description than “A resident using a wheelchair.”
		<p>The definition does not match the ‘title’ of the code. The definition needs to include ‘injury of unknown origin’ and not simply unexpected or unintended incidents.</p> <p>Recommendation: Include ‘injury of unknown origin’ in the</p>	Label changed to “Accidents and Falls.” Definition modified to include “injury of unknown origin.”

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		definition of F1 and not simply 'unexpected or unintended incidents'.	
Failure to respond to requests for assistance	F2	Issue: Differentiate from D6-retaliation Recommendation: Add in Examples and Reporting Tips, "If lack of response to request for assistance is in response to a resident complaint or actions taken by the resident, family, or other person involved in the resident's care, use D6, (Retaliation)."	"Examples and Reporting Tips" revised.
Failure to provide adequate care planning	F3	Issue: Does not include person-centered planning. Recommendation: Add to Definition, "Facility does not create or follow a person-centered care plan."	Definition revised to be inclusive of "person - centered care plan." "Examples and Reporting Tips" revised.
Medications	F4	No comment	
Personal hygiene	F5	Issue: Need examples to be expanded. Think it is clear enough Recommendation: Add Example to include infection control issues when related to poor hygiene.	Added "Examples and Reporting Tips." Did not get as specific as suggested recommendation.
Access to health-related services	F6	Issue: The Examples and Reporting Tips section needs to be expanded. I think it's clear enough Recommendation: Under Examples and Reporting Tips add including mental health services after psychosocial. Also add Use D1 if denied choice of medical provider.	Definition revised. "Examples and Reporting Tips" revised.
Symptoms unattended	F7	Issue: Nothing addressing wandering behaviors Recommendation: Under Examples and Reporting Tips under area about lack of monitoring add "failure to redirect residents who display wandering tendencies."	Definition revised. "Examples and Reporting Tips" revised.

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Toileting, incontinent care, catheter care	F8	Issue: In the description section the use of “toileted” should be changed to use more person-centered language. Recommendation: Under Definition change “toileted” to assisted in going to the bathroom. Assisted to going to the bathroom has a different connotation.	Definition revised as suggested. “Examples and Reporting Tips” revised.
Assistive devices, equipment, other supports	F9	No comments	Label revised to “Assistive devices or equipment.”
Rehabilitation Services	F10	Issue: Add a reference to A5 to clarify when to use F10 or A5. Recommendation: Under Examples and Reporting Tips, add Use A5 for contractures due to gross neglect. Contracture is a possible outcome of neglect or lack of care.	Definition revised. Revised “Examples and Reporting Tips.” The contracture complaint code has received less than 100 complaints each year for the past 5 years. Prefer to address this detailed level of coding in training.
		Issue 1: The title is inconsistent with the definition because it only reflects rehabilitation services to maintain function, instead of also including services to improve function. Recommendation: Change the title to “Rehabilitation Service” to make it consistent with the definition that includes rehabilitation services to improve and maintain a resident’s function.	Label revised to “Rehabilitation Services.” Definition revised. “Examples and Reporting Tips” revised.
Physical restraint-assessment, use, monitoring	F 11	The definition is unclear. Recommendation: Under Examples and Reporting Tips, add or any other devices a resident is unable to get out of without assistance including reclining chairs and bed rails. Also add Use this code for issues involving the assessment, use and monitoring of physical restraints.	Definition revised. “Examples and Reporting Tips” revised.
		Recommendation: Under definition add “Use this code for issues	“Examples and Reporting Tips” revised.

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		involving the inappropriate assessment, use and monitoring of physical restraints.” Under Examples and Reporting Tips, after “easily” add “or any other devices a resident is unable to get out of without assistance including reclining chairs and bed rails”.	
Chemical Restraint	F-12	Issue: Clarify under the definition that is code is to be used for inappropriate assessment, use, monitoring and reduction of chemical restraints. Recommendation: Under definition add “Use this code for issues involving the inappropriate assessment, use, monitoring and reduction of chemical restraints.”	Definition revised. “Examples and Reporting Tips revised.”
Activities/Community Integration and Social Services	G		
Activities -choice and appropriateness	G1	Issue: Include choice and appropriateness in the definition of this code. Recommendation: Under definition, after “Lack of” add “choice and”	Definition revised. “Examples and Reporting Tips revised.”
		Include individual use of e-readers, personal music devices, and computers as essential components of activities that residents must be able to access if desired.	These are examples that can be used in training.
Transportation	G2	Issue: Alternate code option is mislabeled. Recommendation: Revise Examples and Reporting Tips to read, “Use L2 L3 if complaint is about a transportation service.”	Corrected
		Tip refers to L3 if complaint is about a service. Presumably L2 was intended. However, while there are outside transportation providers, there is also Medicaid Brokered transportation provision which should be coded as a complaint against Medicaid services. Some specificity in usage and differentiations is helpful with using	This complaint is about the failure of the facility to assist the resident in obtaining transportation, not about the payment source or the transportation service. Agree that if the complaint was about a Medicaid service it

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		complaint codes to inform the 'picture' of long term care in locales, and state. Specificity is also helpful to Programs in addressing systems issues.	could be coded as K2 Medicaid. The NORS codes and reporting tips do not cover every potential complaint variable.
Conflict resolution	G3	<p>This complaint and the accompanying description do not seem appropriate for Activities, Community Integration and Social Services. It would be more appropriate as a new section L3 under System/Others (non-facility). This section replaces "resident conflict, including roommates" from the current complaint codes.</p> <p>Recommendation: Move to System/Others (non-facility). Create a new code L3 and add examples to clarify. Include a Definition to read, "A complaint involving a disagreement between residents or resident and another party where the assistance of the Ombudsman is requested by the residents to achieve a resolution." Add Examples and Tips such as roommate disagreement over the volume of the TV or visitors in the room.</p>	<p>Definition revised.</p> <p>"Examples and Reporting Tips" revised.</p> <p>The code remains G03 within the "Activities, Community Integration and Social Services" category. The facility staff has a responsibility to assist residents to resolve conflicts.</p>
	G3	Add examples such as, "roommate disagreement over the volume of the TV, visitors in the room, and conflict between residents about a resident council."	"Examples and Reporting Tips" revised.
		<p>If the disagreement is between resident / or their legal decision maker where appropriate and the facility staff and the ombudsman is requested by either entity to assisted with conflict resolution / mediation, where would one code this? The above definition only applies G3 to an issue between residents.</p> <p>Recommendation: Broaden the definition to include requests for conflict resolution for issues between residents, resident and family or resident and staff etc.</p>	Conflict between a resident and their family or legal decision maker is code L01 "Resident representative or family conflict."

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Social Services	G4	: Need to define what is meant by social services and add examples in the appropriate section. Recommendation: Under Examples and Reporting Tips add, For example, discharge planning, family support, and grief counseling.	“Examples and Reporting Tips” revised.
	G4	The term “social services” means different things in various settings. Provide a description of social services in the Definition section. Add examples in the appropriate section. Recommendation: Under the Definition add “Social Services means services typically provided by a social worker, counselor or discharge planner.” Under Examples and Reporting Tips add, “Examples include but are not limited to: admission process, discharge planning, making medical appointments, arranging for escorts to appointments, family support, and grief counseling.”	The definition did not change. This definition is intended to apply to both nursing facilities who have staff such as social workers and to residential care communities who may not have dedicated social work staff.
Dietary	H		
Food Services	H1	Issue: Need to add examples related to weight loss Recommendation: Add an example that addresses weight loss related to food issues.	If a resident is losing weight because the food is not palatable it is still a problem with the food service. Weight loss for other reasons is more closely related to care.
	H1	Move examples to the appropriate section. Recommendation: Move “Examples include: the posted menu....and similar complaints” from the Definition section to the Examples and Reporting Tips section.	Definition revised. “Examples and Reporting Tips revised.”

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Assistance with Dining and Hydration	H2	No comments.	Code renamed "Dining and Hydration."
Therapeutic/ special diet	H3	No comments.	"Examples and Reporting Tips added."
Environment	I		
		General comment: Proposed complaint code revisions in section 'I' have omitted Infection Control. Infection Control (current 81 complaint code) is a critical issue and needs to be added to the proposed codes.	Infection control has not reached 1% of all complaints over the past 5 years. A new code I05 was added to address housekeeping complaints.
Environment-temperature ventilation	I1	No comments.	"Examples and Reporting Tips added." Code renamed "Environment."
Equipment/Buildings	I2	This code combines the current 78 'Cleanliness, pests, general housekeeping' with 79 'Equipment/Buildings – disrepair, hazard, poor lighting, fire safety, not secure'. These are two different categories of issues that are difficult to combine. A building in disrepair with an elevator malfunctioning is very different from housekeeping and/or pests. A state or local program needs some specificity in complaint codes in order to differentiate issues to apply data to systems change efforts. Some code combinations proposed would end up requiring state and local ombudsmen to have to read through numerous cases documentation to ascertain the scope of a 'pest' problem or the scope of physical plant disrepair in a particular chain provider that may for example have declared bankruptcy. Recommendation: Re-examine the proposed complaint codes that have combined current complaints codes with attention to the top complaint codes	Agree. A new code I05, "Housekeeping, laundry and pest abatement," was added to address housekeeping complaints.

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		utilized and need for specificity / meaningful data to inform systems advocacy efforts.	
Inadequate Supplies and furnishings	13	<p>The definition seems unrelated to the code title. The current definition would seem more appropriate under the previous code, I – 2, Buildings/Equipment, which deals with maintenance and environment. The definition does not mention supplies.</p> <p>Recommendation: Change label to Supplies, Storage and Furnishings. Revise the definition to include lack of supplies such as bed linen, towels, toilet paper; lack of furnishings in resident rooms or common areas; and inadequate dining supplies.</p> <p>Laundry issues (lost or damaged items, frequency, and process) remain a common complaint for many programs. There does not appear to be an appropriate code (or related definition) to report these types of complaints.</p> <p>Recommendation: Create a label code I – 5, Housekeeping and Pests, and create a definition to include laundry issues, pests, and cleanliness.</p>	<p>Agree.</p> <p>Code label changed to “Supplies, Storage and Furnishings.”</p> <p>“Examples and Reporting Tips” added.</p> <p>Laundry complaints are now in I05.</p>
	13	<p>I3 title indicates the complaint would be about supplies and/or furnishings; however, the definition only addresses furnishings.</p> <p>Current code has 85 Supplies and Linens – not available, in poor condition, shortage of supplies (soap, gloves, toilet paper, incontinence products, nursing supplies which is a significant complaint category.</p> <p>Recommendation: Include supplies and linens issues in the definition of the proposed code or have separate codes for supplies and furnishings/ storage.</p>	<p>Definition now addresses shortage of supplies.</p> <p>“Examples and Reporting Tips” added.</p>

Label	Code	Comments	ACL Response
Accessibility	I4	No comment	
Facility Policies, Procedures and Practices	J		
Administrative Oversight/leadership	J1	Current codes have a category for administrator being unresponsive which is a frequent issue. Tip section should include failure to report incidents to the regulatory entity. Recommend: Revise definition to include ‘unresponsive’:	Agree. Definition and “Examples and Reporting Tips” amended.
Fiscal Management	J2	No comments	“Examples and Reporting Tips” revised.
Staffing – inadequate	J3	No comments	Code name revised to J03: “Staffing.” “Examples and Reporting Tips” added.
Complaints about an Outside Agency (non-facility)	K		
Certification/Licensing agency and regulatory system	K1	One commenter provided extensive comments regarding the reduction of K topic codes. •This proposed code section appears to replace the current N, O & P sections without adequately covering the complaint categories currently covered. Essentially, the proposed code goes into specificity with various types of insurances but omits programs and agencies (though the definition indicates it is for “...complaints involving decisions, policies, actions or inactions by the programs and agencies”). •This proposed arrangement loses the specificity of common Medicaid complaints of access to information, denial of eligibility, non-covered services, Personal Needs Allowance and the quality or	These codes are not frequently used, for example, all complaints related to “State Medicaid agency “is less than 1%. If a state wishes to have a more granular code related to Medicaid they can add these codes in their software system and crosswalk it to the NORS Medicaid code. ACL and their contractor have developed crosswalks to assist states in determining how old codes are mapped to new codes. We believe that reducing and combining complaint codes and removing codes that are

Label	Code	Comments	ACL Response
		<p>quantity of services or difficulty in obtaining services. Coding with the proposed code of K2 Medicaid will only provide reporting information that there were X number of complaints regarding Medicaid with no indication of what the issue may be such of denial of eligibility issues versus PNA. To have data to address any systems issue regarding Medicaid, will require the Ombudsman to read through each case with a K2 complaint to determine what the issue with Medicaid may be.</p> <ul style="list-style-type: none"> •Current complaint code categories that appear to be omitted from the proposed complaint codes include: bed shortage – placement; facilities operating without an license; legal issues of guardianship, conservatorship, powers of attorney; problems with resident’s physician/assistant; Adult Protective Services; SSA, SSI or other benefits (an example of ‘other benefits’ would be a state specific program.). •There appears to be an emphasis on insurance types in this section at the loss of ‘programs’ and ‘agencies’ complaint codes. <p>Recommendation:</p> <p>Reassess the purpose and use of ombudsman program data at local, state and national levels and the degree of specificity of complaint codes needed to address issues. While there is value in combining some complaint code categories, there is loss and increased burden of ‘research’ in omitting some current complaint categories.</p>	rarely used will reduce states’ reporting burden.
Medicaid	K2	No comments.	“Examples and Reporting Tips” added.
Managed care	K3	The definition is vague and refers to eligibility that is not a function of managed care. Problems with eligibility are likely to relate to Medicaid or Medicare.	Agree. Definition and “Examples and Reporting Tips” amended.

Label	Code	Comments	ACL Response
		Recommendation: Revise the definition to read, Problems with managed care services, coverage areas, enrollment and disenrollment, and the grievance and appeals process.	
Medicare	K4	No comments.	“Examples and Reporting Tips” added.
Veteran’s Administration	K5	No comments.	
Private Insurance	K6	No comments.	
Request to transition to community setting	K7	<p>It is unclear whether this category should be used when the problem is not with the facility.</p> <p>Recommendation: Amend definition to add at the end, “... , not related to facility action or inaction.”</p> <p>Code does not seem to be appropriate under the “Complaints about an Outside Agency (non-facility)” category.</p> <p>Recommendation: Consider moving to general category L, “Systems/Others (non-facility)”.</p>	<p>Agree K7 moved to L03 “Request to transition to community setting” under “System: Other (non-facility) category.</p> <p>Definition and “Examples and Reporting Tips” amended.</p>
System/Others (non-facility)	L		
Resident Representative/Family conflict; interference	L1	No comments.	Code name revised: “Resident Representative or Family Conflict”
Services from outside provider	L2	<p>The title may be misleading.</p> <p>Recommendation: Rename category to Non-facility persons, representatives or providers.</p>	Category K is for complaints involving decisions, policies, actions or inactions by the programs and agencies listed in K01-K06, i.e. Medicaid and Medicare and other private and

Label	Code	Comments	ACL Response
		<p>Issue 2: Code does not seem to be appropriate under the “Systems” category.</p> <p>Recommendation: Consider moving to general category K, “Complaints about an Outside Agency (non-facility).”</p>	<p>public benefits.</p> <p>L-System: Others (non-facility) is intended to capture those resident complaints that are not about the facility or a public or private benefits agency.</p> <p>The definition and “Examples and Reporting Tips” were amended.</p>