

LONG TERM CARE COMMUNITY COALITION

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Assisted Living Fact Sheet: Public Information on Surveys & Complaint Investigations

State survey agencies inspect assisted living facilities (ALFs) and are responsible for overseeing initial licensure, periodic inspections, and complaint investigations. Generally speaking, inspections are the primary means by which ALFs are held accountable for resident health, safety, and well-being.

This accountability is extremely important, as more and more seniors and their families turn to ALFs as an alternative to nursing home care. As a result, ALFs are increasingly providing services to individuals with significant care, monitoring, and dementia-related needs. Unfortunately, a 2018 [report](#) by the Government Accountability Office (GAO) found that there are tens of thousands of “critical incidents” in ALFs every year, including resident abuse, neglect, and even death. This report indicates that states all too often fail to ensure that vulnerable ALF residents are protected. In fact, the GAO found that many states don’t even keep track of “critical incidents,” no matter if they hold providers accountable when residents are put at risk, are harmed, or die.

To help address this problem, LTCCC conducted a nationwide analysis of best practices in assisted living. Following are some key recommendations for providing information to the public and other stakeholders on the results of assisted living survey and complaint investigations. They are derived from our report, [*Assisted Living: Promising Policies and Practices for Improving Resident Health, Quality of Life, and Safety*](#).

While there is no substitute for meaningful quality standards (and vigorous enforcement of those standards), access to information about an ALF’s compliance record is important. The transparency it provides can help stakeholders, especially current and prospective residents, gain insights into care or other issues identified in the ALFs in their community.

Recommendations

- Survey reports should include information on the survey type, survey date, details of substantiated deficiencies, plan of correction (where applicable), date of correction, fines and other penalties imposed, and number of complaints in the previous year.
- Both summaries and electronic versions of survey reports should be posted on the state’s website, including in any directory of ALF providers and, for summary data, in a public database.
- An electronic copy of the survey report should be sent to the state and local Long Term Care Ombudsman Programs, the local adult protective services agency, the U.S.

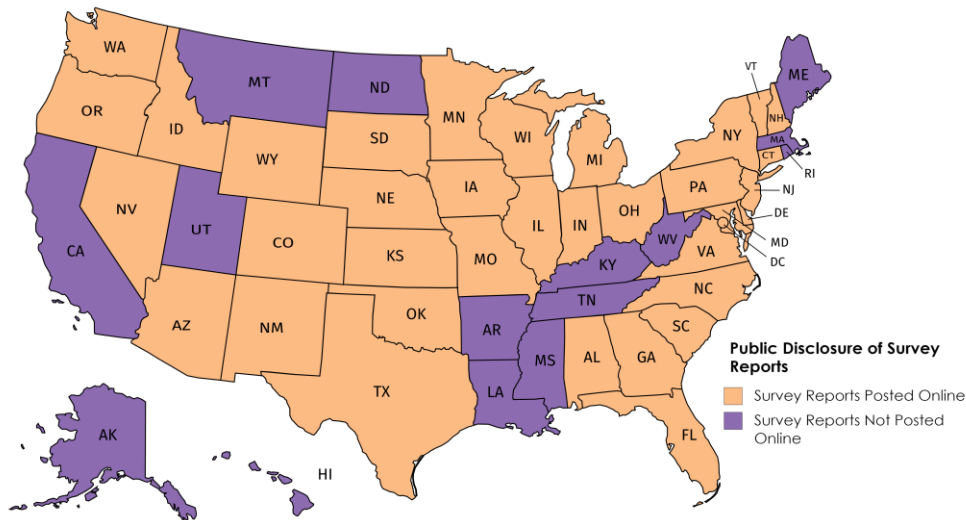
Attorney's office for the district in which the facility is situated, the local Area Agency on Aging, and the district offices of the state and federal legislators.

- Copies of survey reports should be made available to residents and visitors for a minimum of five years.

NOTE: This is a partial list. To see all of our recommendations, please see the [report](#).

Map of State Requirements

- 35 states and the District of Columbia post survey results online.
- 16 of those 35 states specify whether the inspection was the result of a complaint.
- 15 states do not disclose survey results or complaint investigations online.



Further Reading

1. LTCCC's report provides a comprehensive review of state policies, recommendations, and example language for use in future policymaking. See <https://nursinghome411.org/lccc-report-assisted-living-promising-policies-and-practices/>.
2. LTCCC's Assisted Living State Requirements Chart offers a comparative look at state requirements, including survey and complaint investigation standards. See <https://nursinghome411.org/assisted-living-state-requirements-chart/>.
3. Specific survey and complaint investigation requirements for each state can be found in the *Compendium of Residential Care and Assisted Living Regulations and Policy: 2015 Edition*. See <https://aspe.hhs.gov/basic-report/compendium-residential-care-and-assisted-living-regulations-and-policy-2015-edition#overview>.

Note: This document is the work of LTCCC. It does not necessarily reflect the views of the Department of Health, nor has the Department verified the accuracy of its content.

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