

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

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	Definition	Examples and Reporting Tips
Abuse, Gross Neglect, Exploitation	A	Use this section for serious complaints of willful mistreatment of residents by facility staff, resident representative/ family/friend, other residents or an outside individual. Indicate who is the cause of the abuse, neglect or exploitation: (1) Facility staff, (2) another resident (3) resident representative, family, friend or (4) other	
Abuse, physical	A1	The intentional use of physical force that results in acute or chronic illness, bodily injury, physical pain, functional impairment, distress, or death.	Includes hitting, slapping, pinching, kicking, etc. and/or controlling behavior through corporal punishment.
Abuse, sexual	A2	Forced and/or unwanted sexual interaction (touching and non-touching acts) of any kind	Includes, but not limited to unwanted or inappropriate touching, sexual coercion, sexually explicit photographing, and sexual harassment.
Abuse, verbal/psychological (including punishment, seclusion)	A3	Verbal or nonverbal behavior that results in the infliction of anguish, mental pain, fear, or distress, that is perpetrated by a caregiver or other person who stands in a trust relationship to the resident. Involuntary seclusion is the separation of a resident from other residents or from his/her room against the resident's will.	Includes, but is not limited to oral, written or gestured language that willfully includes disparaging and derogatory terms used against residents regardless of their ability to comprehend. Humiliation, harassment, threats of punishment or deprivation. Use D.3 for less severe forms of staff rudeness or insensitivity; use F2 if staff is

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			unavailable, unresponsive to residents.
Financial exploitation	A4	The illegal, unauthorized, or improper use of a resident's resources by a caregiver or other person in a trusting relationship, for the benefit of someone other than the resident.	Includes, but is not limited to, depriving a resident of rightful access to, information about, or use of personal benefits, resources, personal needs allowance, belongings, or assets.
Gross Neglect	A5	Failure by a caregiver or other person in a trust relationship to protect a resident from harm or the failure to meet needs for essential medical care, nutrition, hydration, hygiene, clothing, basic activities of daily living or shelter, which results in a serious risk of compromised health and/or safety, relative to age, health status, and cultural norms.	Use the appropriate categories under Resident Care, Quality of Life or, in some cases, Administration for less severe forms or manifestations of resident neglect.
Access to Information/Communication	B	Use this category for complaints against the facility regarding access to information made by or on behalf of the resident. Use for willful interference with ombudsman duties.	
Access to information, including records	B1	Access to information or access to resident records is denied or delayed.	Examples of records include medical, financial and similar documents. Access to information includes public benefits, survey/inspection or complaint investigation results, or any information regarding medical condition, advance directives or treatment.
Language/communication barrier	B2	Information (written, verbal or other formats) is not provided in a language or format that the resident	

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		can understand; facility does not provide an interpreter. Language barrier on the part of facility staff making it difficult for the resident to understand and communicate with a staff person, and similar complaints.	
Willful interference with Ombudsman duties	B3	Willful interference means actions or inactions taken by an individual in an attempt to intentionally prevent, interfere with, or attempt to impede a resident or complainant from accessing the Ombudsman program .	Inability to access the Ombudsman/ representative in person, in private, or by phone.
Admission, Transfer, Discharge, Eviction	C	Use this category for complaints against the facility involving issues regarding Admission, Transfer, Discharge and/or Eviction	
Admission	C1	Complaints related to admission to a facility. Resident is admitted to a facility or section of a facility against their wishes, including admission to a secured/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.	
Discharge appeal process - absent or not followed	C2	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.	
Discharge/eviction	C3	Complaints related to a discharge or eviction from a facility. Eviction or discharge notice issued which resident disputes; resident was transferred or	Facility failed to: provide a written discharge notice; notice lacks required documentation, is incomplete or incorrect; if the transfer or

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		discharged without notice or due process; resident was transferred to the hospital and not advised of behold policy, or resident was not readmitted post hospitalization and similar problems.	discharge is for inappropriate reasons; or to an inappropriate environment.
Room assignment/room change/intra-facility transfer	C4	Resident requests a room change and the request is denied or resident objects to planned room change; there is no notice or inadequate notice of change; complaints involving roommate choice; and similar problems.	
Autonomy, Choice, Rights	D	Use this category for complaints involving facility staff failure to honor and promote a resident's right or preferences.	
Exercise choice: care, treatment, schedule, health care provider	D1	Resident is denied the right to choose own physician/pharmacy/hospice or other outside health care provider. Use when the resident's preferred care or treatment schedule is not accommodated.	If it is a related problem, but not one specific to this heading, use a category under another heading. For example, if the resident is permitted to choose her personal physician but that physician is unavailable, use L2 (Services from outside provider)
Choice to live in less restrictive setting	D2	Resident is not offered discharge planning, request to return to community is denied; ignored; or inadequate; or the facility staff prevents the resident from leaving facility and similar problems.	Use for complaints about MDS Section Q (request for information to return to community)
Not being treated with dignity, respect	D3	Resident is treated with rudeness, indifference or insensitivity, if the facility staff posts signs relating to individual's care, posts on social media and similar problems.	
Privacy	D4	Failure to ensure privacy during provision of care or	Facility staff discloses confidential

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		treatment, or in other aspects of life.	information, opens mail; fails to knock before entering room, monitors phone calls or e-mails. Use for lack of privacy when meeting with visitors, if couples denied privacy and similar problems.
Response to complaints, grievance-process	D5	Facility staff ignores or trivialize a resident complaint. There is no facility grievance process thereby limiting the resident's ability to resolve a problem directly with the administration.	
Freedom from Retaliation	D6	Acts of retaliation/vengeance by facility staff in response to a complaint and similar problems.	Threat of discharge, lack of care, requests ignored, call lights unanswered, rough handling, monitoring resident's phone, mail or visits without resident's permission. May also add additional complaints if resident feels abused, or neglected due to retaliation.
Visitors	D7	Restrictions on a resident's ability to choose who to associate with either in the facility or in the community.	
Resident or Family Council	D8	Interference with or prevention of the formation of a resident or family council. Staff does not assist in the promotion of councils; do not respond or follow-up on council requests and similar problems.	
Exercise other rights and preferences	D9	The deprivation of any right, not defined in D1-D8, such as personal liberty/freedom of choice, assembly, speech, religious freedom, the right to vote.	Includes cohabitation, smoking/non-smoking, right to refuse care or treatment and other civil rights issues or preferences. Use D4 for complaints involving privacy.

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Financial, Property	E	Use this category for complaints involving mismanagement of residents' funds and property or billing problems.	
Billing/charges	E1	Incorrect or improper billing such as overcharging, raising rates without notice, deposits not refunded, and billing for services or supplies that were not provided, and similar complaints.	
Personal property lost, destroyed	E2	Resident property including resident money/trust fund mishandled, or lost by facility staff; lost personal items such as: laundry, prostheses, dentures, hearing aid, glasses, radio, watch, cigarettes or if the facility staff withholds or damages resident property and similar problems.	If improper use of resident funds or possessions for the benefit of others, use A4
Care	F	Use this category for any complaint involving, poor quality care, planning and delivery.	
Accidents, falls or injury of unknown origin	F1	Any unexpected or unintended incident, which may result in injury or illness to a resident.	A self-propelling resident catches a finger in her wheelchair spoke and fractures the finger; resident falls while getting out of bed; pinches hand in doorjamb and sustains a skin tear. Use A5 (gross neglect) if this is a repeated problem which facility staff fail to address.
Failure to respond to requests for assistance	F2	Staff failure to promptly respond to call lights/bells/requests for assistance or if requests for assistance go unanswered.	Such as, requests for going/returning to resident's room, transfers to chairs/bed, and similar problems.

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Failure to provide adequate care planning	F3	Care plan is inadequate, including resident or resident representative was not involved in the plan; plan is incomplete or not reflective of resident's condition which results in care not being delivered; staff has disregarded or is not informed of the plan; staff fails to respond, or responds slowly, to physician orders and similar problems.	Use if the resident's Specialized Services as indicated by a PASRR level II screen are not included in the care plan.
Medications-administration, organization	F4	Medication given in error, not given on time or not at all. Medication administration not documented or incorrectly documented.	Medications not secured, incorrect medications including expired; not filled in a timely manner; incorrectly labeled and similar problems.
Personal hygiene	F5	Failure to provide hygiene services such as: not bathed in a timely manner or at all, or is allowed to remain in soiled clothing or incontinent briefs; hands and face not washed; teeth/dentures not cleaned; including nail care & oral hygiene lacking; and general inadequacy of dressing & grooming and similar problems	
Access to health related services	F6	Facility fails to obtain or maintain healthcare services based upon a change in resident's condition, or at the residents' request, or if the service is not obtained in a timely manner and similar complaints.	Services such as podiatry, dental, vision, hearing, psychosocial, hospice.
Symptoms unattended	F7	Failure to accommodate, notice or provide services related to a change in resident's condition. Use if symptoms are not addressed and care is not provided.	Symptoms include pain not managed; no notice to nursing staff, physician, resident representative etc. of changes in resident condition; skin integrity, pressure sores, fever, and infection. Use for lack of monitoring and care for

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			individuals with NG tubes and similar. Use A5 (Gross Neglect) if the care situation is so poor that the resident is in a condition of overall neglect which is threatening to health and/or life.
Toileting, incontinent care, catheter care	F8	Resident is not toileted or provided catheter care in a timely manner as requested, or as directed by the care plan. Not providing necessary bowel and bladder training. Use of incontinence briefs or catheters rather than toileting for purposes of staff convenience.	
Assistive devices, equipment, other supports	F9	Failure to provide access to assistive devices and similar supports. Failure to maintain adaptive equipment. Use if the facility creates barriers in accessing or keeping a service animal.	Equipment/devices can include but are not limited to: Hoyer lifts, handrails/grab bars, raised toilet seat, elevators, ambulation aids, wheelchairs; hearing or visual aids communication devices, and other assistive devices or equipment.
Rehabilitation Services to maintain function	F10	Rehabilitation therapies/services are not provided for or arranged. The resident is not assisted or encouraged to improve or maintain their function; not assisted or encouraged in ambulation as appropriate; no appropriate exercise available.	Services such as physical, occupational and speech therapy; range of motion and exercise programs and similar.
Physical restraint - assessment, use, monitoring	F 11	Any device, material or equipment attached to or near the resident's body, which cannot be controlled or easily removed by the resident. Such restraints deliberately prevent or are deliberately intended to prevent free body movement to a position of choice and/or a normal access to their body	Physical restraints include, but are not limited to, leg restraints, arm restraints, hand mitts, soft ties or vests, lap cushions, and lap trays the resident cannot remove easily.

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Chemical Restraint	F 12	Any drug that is used for discipline or convenience and not required to treat medical symptoms.	Including the inappropriate use of antipsychotics, anti-anxiety or hypnotic medication.
Activities/Community Integration and Social Services	G	Use this category for any complaint involving activities, community integration or social services	
Activities -choice and appropriateness	G1	Lack of appropriate activities for each resident; facility fails to consider individualized preferences; variety of activities is limited or not offered; posted activities not conducted; the facility does not support community interaction.	
Transportation	G2	Resident is not assisted in obtaining transportation to participate in community, attend health care appointments, and similar complaints.	Use L3 if complaint is about a transportation service.
Conflict resolution	G3	A complaint involving a disagreement between residents where the assistance of the Ombudsman is requested by the residents or facility staff to achieve a resolution.	
Social Services	G4	Social services are not available or appropriate; facility staff fail to provide social services to help a resident achieve their goals; access supports, etc.	
Dietary	H	Use this category for complains regarding food service, assistance.	
Food services	HI	Use this code for food service related complaints including but not limited to quantity, quality, variation, choice, temperature and timing of meals and snacks. Examples include: the posted menu is not served; alternate selections not offered; servings too small; no variety; quality is poor; food has little	

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		nutritional value, presentation, utensils not provided and similar complaints.	
Assistance with dining and hydration	H2	Failure to assist with dining or ensuring adequate hydration and similar complaints.	Includes the facility staff has not provided adaptive equipment for resident to maintain independence in eating, meal set-up, i.e., opening milk cartons, tray not within reach or staff not provide direct assistance; including providing fluid and reminders or assistance to stay hydrated. Use A1 (abuse) or A5 (gross neglect) for willful instance of food deprivation.
Therapeutic/ special diet	H3	Therapeutic diet is not served as indicated in the care plan or a special request diet or food preferences are not accommodated and similar complaints.	
Environment	I	Use this category for complaints involving the physical environment of the facility, including the resident's space.	
Environment- temperature ventilation	I1	Complaints about the building environment, room or water temperature too hot or cold; ventilation inadequate; cigarette smoke or other unpleasant odors; noise; and similar problems.	
Equipment/Buildings	I2	Building interior/exterior not maintained, lacks cleanliness, or building hazards including, poor lighting, building not secure, and similar complaints.	Pests; elevator problems; fire safety inadequate/non-functioning/expired fire extinguishers, fire alarms, smoke detectors, and other emergency equipment not present; malfunctioning automatic doors and any other building maintenance

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			problem.
Inadequate Supplies and furnishings	I3	Furnishings in disrepair or for a lack of furnishings; inadequate storage space for resident belongings, no or inaccessible locked storage for valuables	
Accessibility	I4	Complaints regarding building and grounds accessibility.	Inappropriate door handles; electronic door openers not available; sinks and toilets are wrong height, lack grab bars, etc. inaccessible entrances/exits or hallways and similar complaints.
Facility Policies, Procedures and Practices	J	Use this category for acts of commission or omission by facility leadership/owners including: administrators, resident managers, etc.	
Administrative Oversight/leadership	J1	Mismanagement including but not limited to: Administrator absent or inadequately trained; not supervising staff; incomplete, missing or falsified record keeping, background screening not performed; illegal policies/practices and similar complaints.	Use for failure of facility to report or investigate suspected resident abuse/neglect or exploitation to the specified authority.
Fiscal Management	J2	Facility lacks fiscal resources that result in: staff shortages, staff alerts of not being paid, lack of food, or supplies, utilities cut off, etc.	Includes problems related to bankruptcy and general insufficient funds to operate. Includes complaints about health care fraud, waste, and abuse.
Staffing – inadequate	J3	Complaint regarding staffing: staff shortage, turnover, over-use of temporary agencies, etc. Use for complaints about the skills or training of staff and similar complaints	

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Complaints about an Outside Agency (non-facility)	K	Use this category for complaints involving decisions, policies, actions or inactions by the programs and agencies listed below; including private and public benefits	
Certification/Licensing agency and regulatory system	K1	Complaint regarding access to information, response to complaint, survey process, and failure to enforce and or sanction facility; closure process, and similar.	
Medicaid	K2	Complaints regarding Medicaid eligibility, coverage or other issues related to the Medicaid program.	Use for problems involving implementation of the Pre-Admission Screening and Resident Review (PASRR) requirements of the Nursing Home Reform Act related to individuals with a mental illness, intellectual, or a developmental disability seeking admission to a Medicaid-certified nursing home. Use for denials of Medicaid services.
Managed care	K3	Complaints regarding eligibility, coverage or other issues related to the managed care plan.	
Medicare	K4	Complaints regarding Medicare eligibility, coverage or other issues related to the Medicare program.	
Veteran's Administration	K5	Complaints about eligibility, coverage or other issues related to the Veteran's Administration	
Private Insurance	K6	Complaints regarding any private insurance company, covered services, denial of payment, etc.	Includes Long-Term Care insurance, Medicare supplemental and similar types of private insurance
Request to transition to community setting	K7	Complaints about barriers to transition to community, inadequate assistance with accessing	Use when the resident requests assistance to remove organizational barriers, such as a lack of housing, unresponsive local contact

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		housing, services and supports.	agency, lack of personal care services, etc. that prevent or delay a move. Use D2 if the facility is not providing assistance or discharge planning.
System/Others (non-facility)	L	Use appropriate categories in this section to document the range of resident complaints against or involving individuals who are not associated with the facility.	
Resident Representative/Family conflict; interference	L1	Complaints regarding the resident representative, or family member who interferes with the resident's health, welfare, safety, or rights but does not rise to the level of abuse, gross neglect or exploitation.	Use codes A1-A5 for any form of abuse, gross neglect or exploitation. Includes complaints that involve issues regarding resident or supported decision making such as guardianship, conservatorship, durable power of attorney/power of attorney, wills and similar complaints
Services from outside provider	L2	Complaints regarding services provided to a resident from an outside provider that are not included in other categories.	These complaints are typically ones that resident or family arranges; such as, personal and homemaking services in an assisted living facility, hospice, therapies, transportation services and similar complaints.