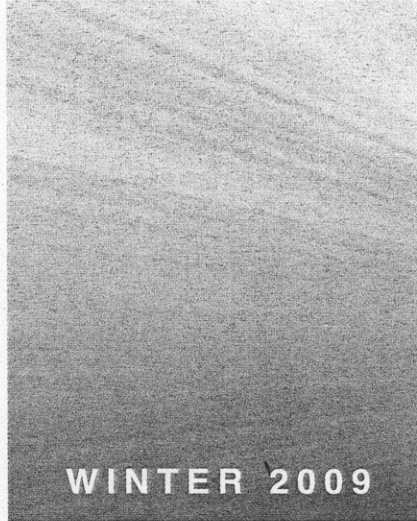


SPECIAL ISSUE

# brief



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## Mind the Facts: Looking Beyond Inspection Reports to Evaluate Assisted Living Residences

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## OVERVIEW

Now more than ever, elderly individuals and their families are considering assisted living centers as an alternative to nursing home or other care. State inspection reports can sometimes provide valuable insights in evaluating the quality of services in assisted living; however, caution should be used in exclusively relying on those reports to assess the performance of a residence. Many other factors exist that allow a prospective resident and his or her family to predict whether or not a residence will be a comfortable, supportive, and safe environment. In many cases, a qualitative evaluation, using some standard guideposts, can provide meaningful insights into the quality of care provided. This Special Issue Brief sheds light on important questions consumers need to ask themselves in making informed judgments in choosing an assisted living community.

## NEW MODEL, NEW CHALLENGES


The demand for assisted living has grown exponentially in recent years. To meet this demand, more organizations, large and small, public and private, for profit and non-profit, now offer a variety of assisted living services. As of 2007, there were nearly one million assisted living units in over 38,000 residences in the United States.<sup>1</sup> With so many options, consumers must carefully assess their needs and preferences to find the assisted living situation that best suits them.

Unlike nursing homes, which generally operate a standard institutional service model, assisted living providers offer a wide array of models and services. Some are stand-alone buildings; others are part of a campus providing a continuum of health services. Some are hotel-like in structure; others are set up as cottages with just a few individuals residing in each cottage, and some may be more institutional in style. Depending on the programs designed for residents, some communities may have specialized programs, such as dementia care, while others may provide relatively few services. Supportive care in some may be on a relatively high level, but only low acuity services may be provided in others. As the industry develops, some residences cater to special groups, such as particular ethnic groups or those with a particular disease.

One of the primary reasons for the wide variation in models of assisted living services lies in recognition of the fact that individual preference is a cornerstone of assisted living services. Individuals who choose assisted living for themselves frequently are looking for an alternative to a nursing home. They, and their family members, desire a setting where necessary supportive services are provided but that at the same time allows them to maintain their independence. Some assisted living residents may want to spend significant time with family or friends outside the residence.

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<sup>1</sup> "Residential Care and Assisted Living Compendium: 2007," U.S. Department of Health and Human Services, Mollica, R., Sims-Kastelin, K., and O'Keefe, J., Nov. 30, 2007, pp. 1-2.



Some may want to participate in only a few of the activities offered by the residence. Others may prefer to have their meals frequently in their own apartments rather than dining in congregate dining areas. One of the great appeals of assisted living is that it provides for staff monitoring of individuals' well-being and safety while at the same time allowing the residents to make independent choices about how to live their lives.

Accommodating the individual preferences of residents can be a challenge to operators of assisted living communities because few individuals are likely to make the same choices in expressing their desires. Those that choose assisted living recognize that in a communal setting certain rules must be observed in order to maintain a pleasant environment for all residents of the community. Balancing the need for systematic approaches to the care and services provided to assisted living residents on the one hand with recognition of the need to allow residents to express individual preferences on the other can sometimes produce tricky situations. But as a whole, the assisted living industry has become adept at performing this balancing act.

The assisted living industry also has recognized that maintaining the quality of its services is important to the overall well-being of members of the public who reside in assisted living residences. Best practices are promoted and dissemination of information about evolving standards is a priority of assisted living trade associations. Many organizations to which residential owners and staff belong promote excellence in the provision of assisted living services. One such organization, the National Assisted Living Nurses Association, has a recognition program for care teams that achieve deficiency-free inspections. Coalitions that include providers of assisted living services have formed to discuss and develop standards of care for the industry. Perhaps the best known coalition is the Center for Excellence in Assisted Living ("CEAL"). Formed in 2004, one of CEAL's primary goals is to promote high quality assisted living.

As the assisted living industry has evolved, many state regulatory agencies have also given increased attention to the means by which they oversee the services provided in assisted living residences under their jurisdiction. Using a process largely based on the system of inspections developed for nursing homes, state agencies evaluate the quality of care provided by individual residences. Consumers sometimes use inspection reports when evaluating assisted living residences in contemplation of choosing a residence for themselves or a family member or when monitoring the performance of a residence where they or a family member are currently living.

Inspection reports are a valuable tool in the industry but, as explained below, they should not be used exclusively to assess the performance of a residence.

## THE INSPECTION PROCESS

Typically, state regulatory agencies have a system of periodic on-site inspections of assisted living residences under their jurisdiction. Frequently, such inspections are required on an annual basis and usually are unannounced, unscheduled visits. Generally a team of inspectors makes these unannounced visits, spending anywhere from a few hours to a few days on-site. The number of individuals making up an inspection team varies. Sometimes team members have special expertise, for example in nursing, dietary, or engineering matters. The inspection process in most states is intended to determine whether deficiencies (i.e., violations of regulatory requirements) exist in the primary areas of a community's operations. Standard areas of review are:

- » Staffing standards
- » Medication administration
- » Residency agreements
- » Fire safety
- » Housekeeping services
- » Indoor equipment furnishings
- » Water temperature
- » Safety of outdoor area
- » Resident records and plans of care
- » Resident rights
- » Physical plant
- » Emergency/disaster plans
- » Lighting
- » Food services
- » Sanitation
- » Administration<sup>2</sup>

Notes are taken during the inspection and frequently the results are shared verbally with management of the community before the inspectors leave the residence.

After the inspection is completed, a written report is issued to the residence. The residence is obligated to correct any deficiencies noted on the report. Most states require that within a certain period of time the residence submit a written plan for correcting the problem identified by the inspectors. The process in many states requires that the plan of correction be accompanied by a statement of who is responsible for ensuring that the correction is made and a plan for monitoring activity related to the deficiency so that the problem does not reoccur. The inspection process allows a state agency to take a snapshot of a residence at a particular point in time, and holds the residence responsible for rectifying any shortfalls noted by the inspectors. In cases where a very serious deficiency is found or where deficiencies are repeat violations, financial penalties may be imposed on the residence. Severe problems may lead to loss of a residence's license to operate.

In addition to routine periodic inspections by regulatory agencies, these agencies investigate complaints they receive about assisted living residences. Usually a complaint is related to a particular incident or individual resident, but it could be general in nature. Anyone can make a complaint to a state agency: a resident, a family member, an employee, a member of the public, or even a competitor. While the identity of the person making the complaint may be known to the regulators, generally the identity of the person is not revealed to the residence that is the target of the complaint. In most cases, once a complaint is made the state agency is obligated to investigate it, even if the complaint appears to be frivolous. If it is determined that there is merit to the complaint, the residence is required to submit plan of correction, as described above.

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<sup>2</sup> Based on information drawn from Alabama, Arizona, California, Florida, Illinois, Massachusetts, New Jersey, New York, Oklahoma, Pennsylvania, Texas, and Washington, D.C.

## INSPECTION REPORTS ARE JUST PART OF THE STORY

While inspection reports give a view into an assisted living operation, the consumer must be aware that they do not provide the complete picture. The following points should be kept in mind when reviewing reports that reflect the results of inspection surveys.

### 1. Inspection Reports Record Only a Certain Point in Time

Inspections of assisted living communities by state agencies are performed for the purpose of ensuring that the communities adhere to the standards of operation set by these agencies. In addition, they act as an assurance to the public that the residences are running properly and that they are safe environments for the frail elderly to reside.

Some would argue that in addition to a state agency's oversight function, the agency can perform a valuable service to a residence and to the industry as a whole by being a collaborator in developing best practices for care of the elderly in a residential setting. Rather than simply being punitive in nature, inspections allow managers of a residence to gain the insights of third parties who are not involved in the community's day-to-day operation. Together, inspectors and managers can work in partnership to identify any areas where improvement would better serve the residents of the community. Viewed in this way, the inspection process can be regarded as a mutual effort between a regulatory agency and a residence to ensure that regulatory standards are met, rather than treating it as a process that is purely adversarial and penal in nature.

An inspection report is not a reflection of a static situation. Rather, it is a snap shot of issues that state inspectors find at a particular point in time. Because the dynamic between a state agency and an assisted living residence is interactive, the process calls for post-inspection activity on the part of both the agency and the residence. Ultimately, conditions cited in an inspection report typically are corrected to the satisfaction of the agency. While the report may have been an accurate description of a certain condition in a residence at one time, once the correction has been made the report ceases to have particular relevance to current conditions. Similar to inspections of restaurants that are conducted routinely, non-compliance is noted, corrective action is taken, lessons are learned, and residents are well-served by the process.

Inspection reports should not necessarily be viewed simply as being reflective of an assisted living residence's adherence to a state agency's performance standards. In most circumstances, the state's findings are accepted by a community's management, the problem is remedied, and a system is put in place to ensure that the violation does not reoccur. The inspection process has served the desired purpose of making the residence a better place for its elderly residents. In order to obtain an understanding of a residence's compliance history, review of the residence's inspection reports over a period of time is required.

## 2. Inspection Reports Do Not Show Level of Compliance with Standards

While the inspection process serves a valuable purpose in identifying problems in delivery of services in assisted living communities, inspection reports do not reveal how well a community is doing in meeting an agency's stated standards. As noted above, state agencies survey for issues in numerous categories, including personal care services, food services, medication administration, and condition of the physical plant. Within these categories are many additional subcategories, often very detailed in nature. As a result, there is often the possibility of being cited for hundreds, perhaps thousands, of deficiencies on survey.<sup>3</sup> In a state with 1,500 possible deficiencies, an inspection report that shows 10 deficiencies may give a negative impression on its face. When one considers that the residence is meeting 1,490 standards, the perspective changes considerably. For these reasons, looking only to raw numbers of deficiencies means that other chapters of the story are neglected on an inspection report.

## 3. Not All Deficiencies Are Alike

Looking only at the number of deficiencies cited in an inspection report, rather than the nature of the deficiencies themselves, may be misleading in evaluating the performance of a residence. With so many opportunities for a deficiency finding, it is uncommon for surveyors to complete an inspection and find no deficiency whatsoever. While there apparently is no study reflecting the percentage of deficiency-free assisted living inspections, the U.S. Department of Health and Human Services Office of Inspector General ("OIG") recently published a report that examined this point in connection with nursing home inspections. The study found that between 2005 and 2007, more than 91 percent of nursing homes nationally received at least one deficiency.<sup>4</sup> Similar findings were reported by the OIG in 2003.<sup>5</sup>


What is behind the numbers? More important than noting the number of deficiencies cited in a report is understanding the circumstances that gave rise to a citation. In a report reflecting ten deficiencies, are the deficiencies for instances involving direct care of residents? Or are there ten deficiencies relating to recordkeeping requirements? Most people would be more concerned about the direct care issues.

Does the report reflect isolated occurrences, or is there indication of a widespread problem that points to systemic issues? If the latter, obviously they are of more concern than a few incidents that reflect inevitable occasional human lapses.

<sup>3</sup> The Federal nursing home survey tool allows for 522 possible deficiencies. See, CMS State Operations Manual for Long Term Care Facilities, Appendix PP.

<sup>4</sup> "Trends in Nursing Home Deficiencies and Complaints," OEI-02-08-00140, September 2008, p. 1.

<sup>5</sup> "Nursing Home Deficiency Trends and Survey and Certification Process Consistency," OEI-02-01-00600, March 2003, p. 7.



If the deficiencies noted are direct care issues, what are the problems? Are residents being neglected? Are their medication orders not being followed? Are residents with dementia allowed to wander out of the building, unsupervised? Or are there less consequential issues, such as an isolated instance of failure to record a resident's activity preference on a questionnaire.

It should also be noted that in some cases a single instance of non-compliance may result in multiple deficiency findings if the deficiency falls into more than one quality category. One instance of flawed medication administration may result in deficiency findings under standards for physician orders, medication records, and storage of medications. Accordingly, on paper one failure may look more egregious than it actually is.

Finally, if a residence challenges inspection findings through a state agency's appeal process, the number of citations may be reduced, sometimes by a significant amount. A revised inspection report that reflects the lower number of deficiencies may never be issued.

In short, the prudent person will look behind the numbers to evaluate an inspection report, recognizing that all deficiencies are not alike.

#### **4. Inspection Deficiencies May Reflect the Norm in the Community**

Inspection reports do not necessarily show how a particular community compares to other residences in the immediate area. While there may be a temptation to compare inspections of communities based on the number of deficiencies alone, there are situations where residences are cited by the same regulatory agency for virtually the same type of deficiency. When this happens, a consumer who is comparing inspection reports in an effort to determine which of a number of facilities is "best" may be faced with a situation where the difference is minimal. In reality, especially if the consumer is looking at numbers alone and not substance, the inspection report may reflect that the residences may be performing at the norm in the community.



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## OTHER FACTORS TO CONSIDER IN ASSESSING QUALITY IN ASSISTED LIVING RESIDENCES

Reliance solely on inspection reports to assess quality of services in a particular assisted living residence is a narrow approach and can lead to misleading judgments about overall quality. Many sources of guidance to consumers advocate reliance on factors other than inspection reports. In an article on assisted living, Consumer Reports recommended that consumers, in evaluating their options, take the following steps in considering assisted living residences:

- » tour the residence;
- » review residence documents (residency agreement, discharge information, cost information, staff training, staffing levels, who administers medications);
- » talk to current residents;
- » observe what residents are doing (up and about or passively watching TV?);
- » meet with executive director/administrator;
- » learn about staff (number of employees in building day/night; staff training meets needs of prospective resident?);
- » visit unannounced;
- » stay for a meal and try an activity.<sup>6</sup>

Factors like those above also are cited throughout a publication designed specifically to educate consumers in choosing assisted living, "Choosing an Assisted Living Facility: Considerations for Making the Right Decision," published by the Consumer Consortium on Assisted Living, a national organization dedicated to advocating for the needs, rights, and protections of consumers in assisted living facilities and educating consumers, professionals, and the general public about assisted living issues.<sup>7</sup> In a similar publication by MetLife, consumers are urged to consider the physical layout of the residence; find out about the residence's approach to caring for those with dementia, caregiver training, on-going staff education, and staff-to-resident ratios; discuss how family members are integrated into a care plan; and use the senses to help evaluate the residence.<sup>8</sup> As some familiar with assisted living have said, "one can see quality on the smiles of residents."

Publications that guide consumers in choosing nursing homes provide advice that can readily be applied to the assisted living context. The New York State Department of Health, in guidance written for consumers, has specifically suggested that survey deficiencies are not the only criteria on which one should judge a nursing home:

Deficiencies are not necessarily the only indication of the quality of care and administration of the home. Ask to look at the results of a few surveys so you can see if there is a pattern of deficiencies in certain areas... Ask questions about deficiencies, if any, and how they were corrected. If you have additional questions after leaving the nursing home, call back with follow-up questions.<sup>9</sup>

<sup>6</sup> "Assisted Living: How Much Assistance Can You Really Count On?", Consumer Reports, July 2005.

<sup>7</sup> "Choosing an Assisted Living Facility: Considerations for Making the Right Decision," 2nd Edition, published by the Consumer Consortium on Assisted Living.

<sup>8</sup> "Choosing an Assisted Living Facility," *Since You Care* (A Series of Guides from MetLife in Cooperation with the National Alliance for Caregiving), 2003.

<sup>9</sup> "Selecting a Nursing Home in New York State," New York State Department of Health, Division of Quality Surveillance for Nursing Homes and ICFs/MR, December 2006, p. 19.



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