



# The National Long-Term Care Ombudsman Resource Center



## National Ombudsman Reporting System (NORS)

July 30, 2025

# Welcome

- ▶ This webinar is being **recorded**.
- ▶ Use the **chat feature or raise your hand** for questions for the speakers.
- ▶ Please complete the **evaluation** questionnaire when the webinar is over.
- ▶ Links to **resources** will be posted in the chat box and will be posted to the NORC website – [ltcombudsman.org](https://ltcombudsman.org).

# NORS Requirements vs Program Practices

## NORS Requirements

- ▶ Defines activities (e.g., case, complaint, complaint codes)
- ▶ Describes how to count activities (e.g., visits, I&A)
- ▶ Goal to standardize reporting across the country (e.g., how to report a complaint, how to count a visit – not conduct a visit)

## State Program Policies and Procedures

- ▶ Establishes state program practices (e.g., what is a “quality” visit)
- ▶ Sets program standards (e.g., requires frequency of visits, establishes timeframes for responding to complaints)

# NORS Tables Modifications

## ► Table 1

- Complaint Disposition. Revised Examples and Reporting Tips. **Use 2 for *no action needed* when the resident dies before a final outcome has been obtained and there is no resident representative to determine resolution.**

## ► Table 2

- F01 Accidents and Falls. Revised Examples and Reporting Tips. A resident **who uses a wheelchair independently** catches a finger in wheelchair spoke and fractures a finger; resident falls while getting out of bed; pinches hand in doorjamb and sustains a skin tear.
- I01 Environment. Revised Definition and Examples and Reporting Tips.
  - Definition: The building environment including **safety hazards**, room or water temperature is too hot or cold or ventilation is inadequate.
  - Examples and Reporting Tips: Use for cigarette smoke or **other odors**; noise; **hazards such as cleaning supplies improperly stored**, and similar problems.

# NORS Tables Modifications

## ► Table 3

- Part D: Staff and Volunteer Data Elements description revised. All staff counts are as of September 30 and **volunteer counts include volunteers who were program representatives at any time during the fiscal year.**
- Resident council participation (NFs and RCCs) definition revised. Total number of instances of attendance at resident councils, including meeting with council leadership and training of resident councils **or resident groups** at nursing facilities by representatives of the Office.
- Family council participation (NFs and RCCs) definition revised. Total number of instances of attendance at family councils, including meeting with council leadership and training of family councils **or family groups** at nursing facilities by representatives of the Office.
- Community Education. Examples and Reporting Tips revised. **Newsletters and other forms of media that impart information about long-term care or the Ombudsman program may be counted as community education.**

# NORS Training Overview

- ▶ The written and online NORS trainings have been reviewed for consistency and are up to-date (based on the modified ACL NORS Tables).
- ▶ The codes, definitions, examples and reporting tips, are from the NORS Tables.
- ▶ NORS and Certification trainings were both built in RISE and use the same Learning Management System (LMS), Talent LMS.
- ▶ The online course is available for free and may be accessed anytime.
- ▶ Thank you to our reviewers from the following states: Arizona, Colorado, Illinois, Iowa, South Dakota.

# NORS Materials

[https://ltcombudsman.org/omb\\_support/nors](https://ltcombudsman.org/omb_support/nors)

## UPDATED

- ✓ Modified ACL NORS Tables
- ✓ Revised Part 1 – 4 training materials
- ✓ Revised NORS FAQs

## NEW

- ✓ NORS Online Training Course
- ✓ Side by side chart highlighting ACL NORS Tables modifications
- ✓ Decision Trees
  - ✓ Is it a Visit?
  - ✓ I&A or Complaint?

# Locating the NORS Materials

<https://ltcombudsman.org>

The screenshot shows the homepage of the National Long-Term Care Ombudsman Resource Center. The top navigation bar includes links for 'National Consumer Voice', 'State Ombudsman Login', 'Shop Our Store', and a search bar. Below this is a secondary navigation bar with links for 'Home', 'News', 'About', 'New ombudsman?', 'Library', 'Events', 'Support', and 'Issues'. The main content area features a large banner for the 'New Online Training Curriculum' with a 'Visit to learn more about the training course' button. To the right, a dropdown menu titled 'Specialized Information for:' is open, showing options for 'Nursing Homes', 'Assisted Living/Board & Care', and 'Home and Community Based Services'. A red arrow points to the 'National Ombudsman Reporting System - (NORS)' link in the 'Support' dropdown menu. At the bottom, there is a map of the United States with a location pin and the text 'Locate an Ombudsman program, volunteer opportunities, and help near you' and a 'Visit our map' button.

The screenshot shows the 'National Ombudsman Reporting System (NORS)' page. The top navigation bar includes links for 'The National Long-Term Care Ombudsman Resource Center' and 'Specialized Information for:'. Below this is a secondary navigation bar with links for 'Nursing Homes', 'Assisted Living/Board & Care', and 'Home and Community Based Services'. The main content area features a large banner for the 'National Ombudsman Reporting System (NORS)' with a description of the system. To the left, a sidebar contains links for 'COVID-19 Prevention', 'NORC Webinars', 'NORC Notes', 'National Ombudsman Reporting System - (NORS)', 'Program Management', 'Ombudsman Program Examples', 'Training', and 'Volunteer Management'. The main content area also includes a section titled 'The Basics - What You Must Know' and a list of modified tables: 'Table 1: NORS Parts A, B and C - Case and complaint codes, values, and definitions', 'Table 2: Complaint codes and definitions', and 'Table 3: State Program Information'. A link to the 'NORS Tables Revisions Chart' is also provided. At the bottom, there is a section titled 'Complaint Codes' and a link to 'User Friendly NORS Complaint Codes and Definitions'.



# NORS Training Parts 1 – 4

## **Part 1 – Case, Complaint, Complainant AND Information and Assistance**

- [NORS Training Part 1: Basic Principles](#)
- [NORS Training Part 1: Quiz](#)
- [NORS Training Part 1: Quiz Answer Sheet](#)

## **Part 2 – Complaint Coding**

- [NORS Training Part 2: Complaint Coding Basic Principles](#)
- [NORS Training Part 2: Complaint Coding Quiz](#)
- [NORS Training Part 2: Complaint Coding Quiz Answer Sheet](#)
- [NORS Training Part 2: Complaint Coding Beyond the Basics Quiz](#)
- [NORS Training Part 2: Complaint Coding Beyond the Basics Quiz Answer Sheet](#)

## **Part 3 – Verification, Disposition, Referral, and Closing Cases**

- [NORS Training Part 3: Verification, Disposition, Referral, and Closing Cases Basic Principles](#)
- [NORS Training Part 3: Verification, Disposition, Referral, and Closing Cases Quiz](#)
- [NORS Training Part 3: Verification, Disposition, Referral, and Closing Cases Quiz Answer Sheet](#)

## **Part 4 – Ombudsman Program Activities**

- [NORS Training Part 4: Ombudsman Program Activities Basic Principles](#)
- [NORS Training Part 4: Ombudsman Program Activities Quiz](#)
- [NORS Training Part 4: Ombudsman Program Activities Quiz Answer Sheet](#)

## **Additional Training Materials**

- [Is it a Visit? Decision Tree](#)
- [Is it a Complaint or Information & Assistance \(I&A\)? Decision Tree](#)
- [Case Notes Checklist](#)

# Part 1 – 4 Quizzes: Fillable PDFs

## SCENARIOS FOR RESPONSE

1. A woman calls asking for information about how to select a nursing facility for her mother. You respond to her questions, share information during the call, and send links to information via email.  
Case? ☐ Information and Assistance? ☐ Number of complaints? \_\_\_ Complainant? \_\_\_
2. You visit Mrs. Jones, she tells you they are still bringing her pureed food, even though her doctor said she could start eating regular food. You notice her call bell is broken. She wants your assistance in resolving these problems. You speak to the Director of Nursing (DON) about the call bell, and she promptly fixes the bell. You attempt to talk to the dietician about the pureed food, but she is not available until the next morning. You leave Mrs. Jones but tell her that you will check back with the dietician and will follow up with her on the results and to ensure that the call bell is still functional.  
Case? ☐ Information and Assistance? ☐ Number of complaints? \_\_\_ Complainant? \_\_\_
3. A certified nurse assistant (CNA) approaches you about the new Director of Nursing (DON). She says that the DON does not listen to staff and is very patronizing when she gives instructions. The staff do not like working with her and several of them are looking for jobs somewhere else. She asks you to intervene with management on behalf of the staff.  
Case? ☐ Information and Assistance? ☐ Number of complaints? \_\_\_ Complainant? \_\_\_
4. You receive five notices of discharge from four different nursing facilities. The homes are complying with the federal requirement to send copies of these notices to the Ombudsman program.  
Case? ☐ Information and Assistance? ☐ Number of complaints? \_\_\_ Complainant? \_\_\_
5. Mrs. Oliver asks you to help her obtain the medical records for her mother, who lives in a nursing facility. Mrs. Oliver asked the facility for the records seven days ago and the facility has not responded. She is her mother's health care durable power of attorney and responsible party.  
Case? ☐ Information and Assistance? ☐ Number of complaints? \_\_\_ Complainant? \_\_\_
6. A facility staff member tells you that Mrs. Smith's son, who has power of attorney for his mother, is using her income for his own purposes instead of paying her bill for three months. The staff requests your involvement in resolving the non-payment issue.

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# Revised Frequently Asked Questions (FAQs)

- ▶ My program emails a monthly newsletter to our listserv which includes residents, family members, and our volunteers. Does this newsletter count as community education?
- ▶ How do I determine the disposition code if the resident dies during the investigation?
- ▶ How do I document when I provide training about Residents' Rights (or another topic) to a group of residents in a nursing facility that is not during an official Resident Council meeting?
- ▶ How do I document the receipt of notifications of facility closure?

## NORS FAQs



This page contains answers to frequently asked questions (FAQs) regarding the National Ombudsman Reporting System (NORS). The answers were developed with input from Ombudsmen and program representatives and in coordination with the Administration on Aging/Administration for Community Living (ACL).

If you have questions to suggest for additional FAQs, please email [ombudcenter@theconsumervoice.org](mailto:ombudcenter@theconsumervoice.org).

### Abuse, Neglect, and Exploitation

**Q – My state requires entities to send copies of alleged abuse or incident reports to my program. Upon receipt, do I automatically document those reports as complaints?**

**A – No. Receiving a copy of alleged abuse or incident report does not automatically count as a complaint.** Examples include, but are not limited to, a state requiring long-term care facilities to send copies of incident reports to the Ombudsman program and/or a state requiring Adult Protective Services (APS) to send copies of their reports or referrals to the Ombudsman program.

In these examples, the facilities and/or APS are complying with a state requirement to send copies of these reports to your program. They are not acting as a complainant and reporting a complaint on behalf of a resident seeking Ombudsman program assistance, rather they are sharing information with your program per state requirements.

As the head of the Office of the State Long-Term Care Ombudsman, the State Long-Term Care Ombudsman (Ombudsman) is responsible for developing policies and procedures for the statewide program.

The State Long-Term Care Ombudsman Programs Final Rule ([Final Rule](#)) contains provisions related to complaint processing responsibilities, including developing policies and procedures that establish "standards to assure prompt response to complaints by the Office and/or local Ombudsman entities which prioritize abuse, neglect, exploitation and time-sensitive complaints." The Final Rule states when establishing standards to consider the severity of the risk to the resident, the imminence of the threat of harm to the resident, and the opportunity for mitigating harm to the resident by providing services of the Ombudsman program in response to a complaint [§1324.11 (e)(1)(v)].

Therefore, the Ombudsman determines program priorities and how and when to respond to these reports.

If your program responds to facility incident reports or APS reports, to ensure your work is resident-directed, do not determine how to document your work related to the incident report unless and until you speak with the involved resident (or their representative, when appropriate).

For example:

- If you follow-up with the resident identified in the report and provide information about residents' rights and options, but the resident does not have a complaint or want further assistance, you would document that interaction as an instance of information and assistance.
- If you follow-up with the resident identified in the report and the resident wants your assistance with a complaint, you would open a case with a complaint (or complaints) and document your work related to that case accordingly.

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The National Long-Term Care  
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# Modified ACL Tables

## Table 1

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

National Ombudsman Reporting System (NORS)

OMB Control Number 0985-0005

Table 1: NORS Parts A, B and C - Case and complaint codes, values and definitions

### Table 1: Part A-Case Data Components

Each case must contain a complainant, complaint code (s), a setting, verification, resolution, and information regarding whether a complaint was referred to another agency or if no referral was made. Case and complaint data reported is only for those cases and complaints that were closed within the fiscal year.

Element Number	Data Element	Definition	Quantifier	Type	Codes and Values	Examples and Reporting Tips
CA-01	Case Number	The unique identifier used for each case.	Single	Alpha-numeric	Not Applicable (NA ) (not a coded element)	This is auto-created by the state software program.
CA-02	Date Case Opened	Month, day, and year that the case was opened.	Single	Date	NA (not a coded element)	Each case must have a minimum of one complaint.  Each case must have only one case open date.  The case opened date must be on or before the case closed date.
CA-03	Date Case Closed	Month, day, and year that the case was closed.	Single	Date	NA (not a coded element)	The year of case closure must be in the associated reporting period.  Each case must have only one case closed date.  The case closed date must be on or after the case open date.

## Table 2

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

National Ombudsman Reporting System (NORS)

OMB Control Number 0985-0005

Table 2: Complaint codes and definitions

**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.

### Abuse, Gross Neglect, Exploitation (Code 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 appears to be the cause of the abuse, neglect or exploitation: (1) Facility staff, (2) another resident (3) resident representative, family, friend or (99) other.

Label	Code	Definition	Examples and Reporting Tips
Abuse: physical	A01	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, and pinching, kicking, etc. and/or controlling behavior through corporal punishment.
Abuse: sexual	A02	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. Sexual harassment includes any form of unwanted sexual attention (e.g., sexual advances, suggestions, requests or threats) that is deemed inappropriate, offensive, intimidating or humiliating. Harassment includes contact and non-contact acts.

## Table 3

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

National Ombudsman Reporting System (NORS)

OMB Control Number 0985-0005

Table 3: State Program Information

### State Program Data Elements

States will submit a wide range of elements describing their statewide Ombudsman program grouped into a range of categories. Each of these sets of elements is presented in the subsections below.

### Part A-Complaint Example

States will submit complaint example data that provide narrative description and disposition information regarding two to three closed complaints during the reporting period.

Composite Data Element	Element Description	Quantifier	Type	Codes and Values	Examples and Reporting Tips
Complaint Example	Provides information regarding two to three complaints during the reporting period.	Multiple	Composite data element subsuming element numbers S01-S06	Not Applicable (NA) (not a coded element)	Selection of complaint examples is at the State Ombudsman's discretion.

Elements included for each case example:

Element Number	Data Element	Element Definition	Quantifier	Type	Codes and Values	Examples and Reporting Tips
S-01	Facility or Setting	Type of Facility or setting for the complaint.	Single per complaint example	Alphanumeric	See Table 1, CA-04	Select one example from a nursing facility, and one from a residential care community facility. A third example is optional.
S-02	Description	Narrative of the problem.	Single per complaint example	Alphanumeric	NA (not a coded element)	Maximum length of 3,400 characters (about 500 words).
S-03	Complaint code	See Table 1, CD 03 for complaint definition.	Single per complaint example	Alphanumeric	See Table 1, CD 04 and Table 2	Select the complaint code associated with each complaint example.

# NEW – NORS Tables Revisions Chart

## NORS Tables Revisions



This chart provides an overview of the revisions from the previous National Ombudsman Reporting Systems (NORS) tables (expired October 31, 2024) and the new tables. Bold font added to emphasize the new language.

Table 1			
Element Number/Data Element	Summary	Expired Table	New Table
CD-08 Complaint Disposition	Revised "Examples and Reporting Tips" to include how to code disposition when a resident dies.	Each complaint can have only one disposition code.	Each complaint can have only one disposition code.  <b>Use 2 for no action needed when the resident dies before a final outcome has been obtained and there is no resident representative to determine resolution.</b>
Table 2			
Element Number/Data Element	Summary	Expired Table	New Table
F01 Accidents and Falls	Revised language in "Examples and Reporting Tips" from "resident who self-propels" to "resident who uses a wheelchair independently."	Example: A resident who self-propels catches a finger in wheelchair spoke and fractures a finger; resident falls while getting out of bed; pinches hand in doorjamb and sustains a skin tear. Use A05 (Gross neglect) if this is a repeated problem which facility staff fail to address.	Example: A resident who <b>uses a wheelchair independently</b> catches a finger in wheelchair spoke and fractures a finger; resident falls while getting out of bed; pinches hand in doorjamb and sustains a skin tear.

# NEW – Complaint or I&A?

## Is It a Complaint or Information & Assistance (I&A)?



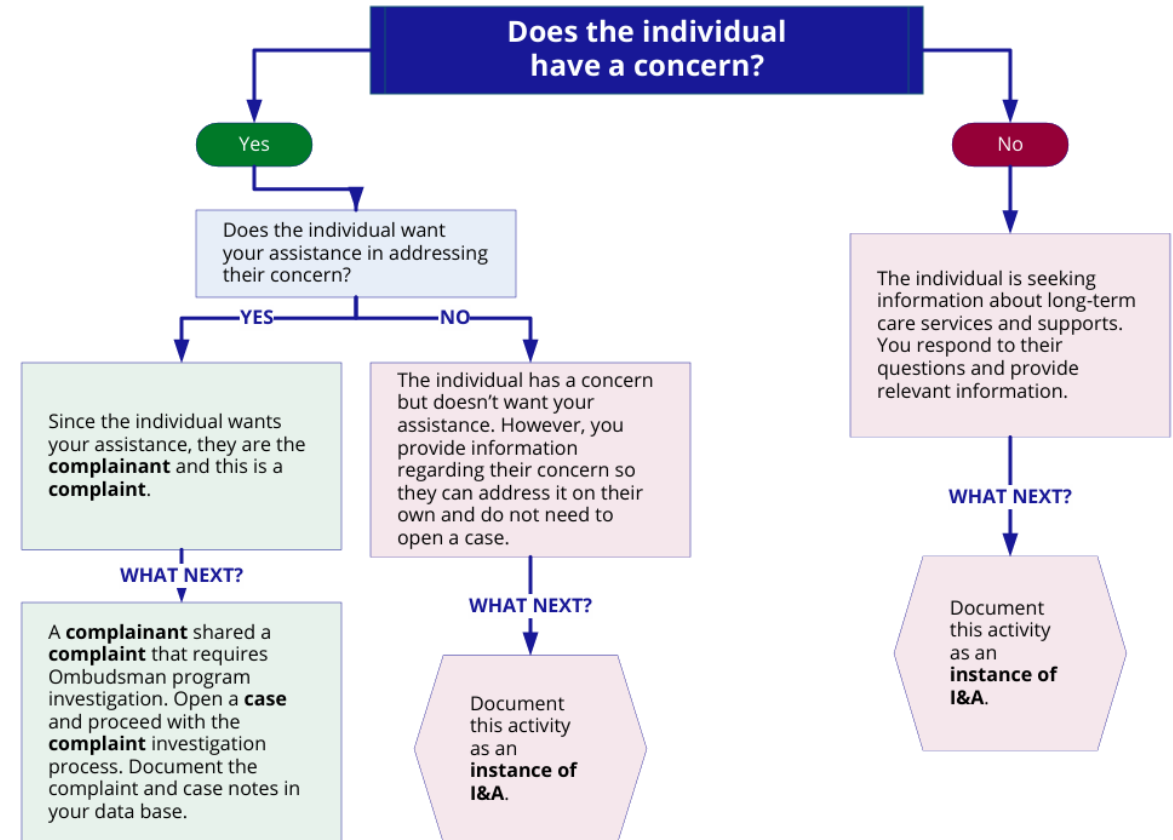
Use this decision tree to help you determine if your work counts as a complaint or information & assistance. This is based on [National Ombudsman Reporting System \(NORS\) definitions](#). Follow your state policies and procedures for additional guidance.

### NORS Definitions and Reminders

- A **complaint** is an expression of dissatisfaction or concern brought to, or initiated by, the Long-Term Care Ombudsman program (LTCOP) which requires Ombudsman program investigation and resolution on behalf of one or more residents of a long-term care facility.
- An instance of **information & assistance (I&A)** is providing information to an individual or facility staff about issues impacting residents and/or sharing information about accessing services without opening a case and working to resolve a complaint.
- A **complainant** is an individual who requests Ombudsman program complaint investigation services regarding one or more complaints made by, or on behalf of, residents.
- A **case** is comprised of a complainant, complaint code(s), a perpetrator for A-Abuse/Neglect and Exploitation codes, a setting, verification, resolution, and information regarding whether a complaint was referred to another agency.
- **Information & assistance** may be provided in a variety of ways, including by **phone, email, or in-person**.

This project was supported by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$516,407 with 100 percent funding by ACL/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by ACL/HHS or the U.S. Government.

## Is It a Complaint or Information & Assistance (I&A)?





# NORS Part 1 Basic Principles

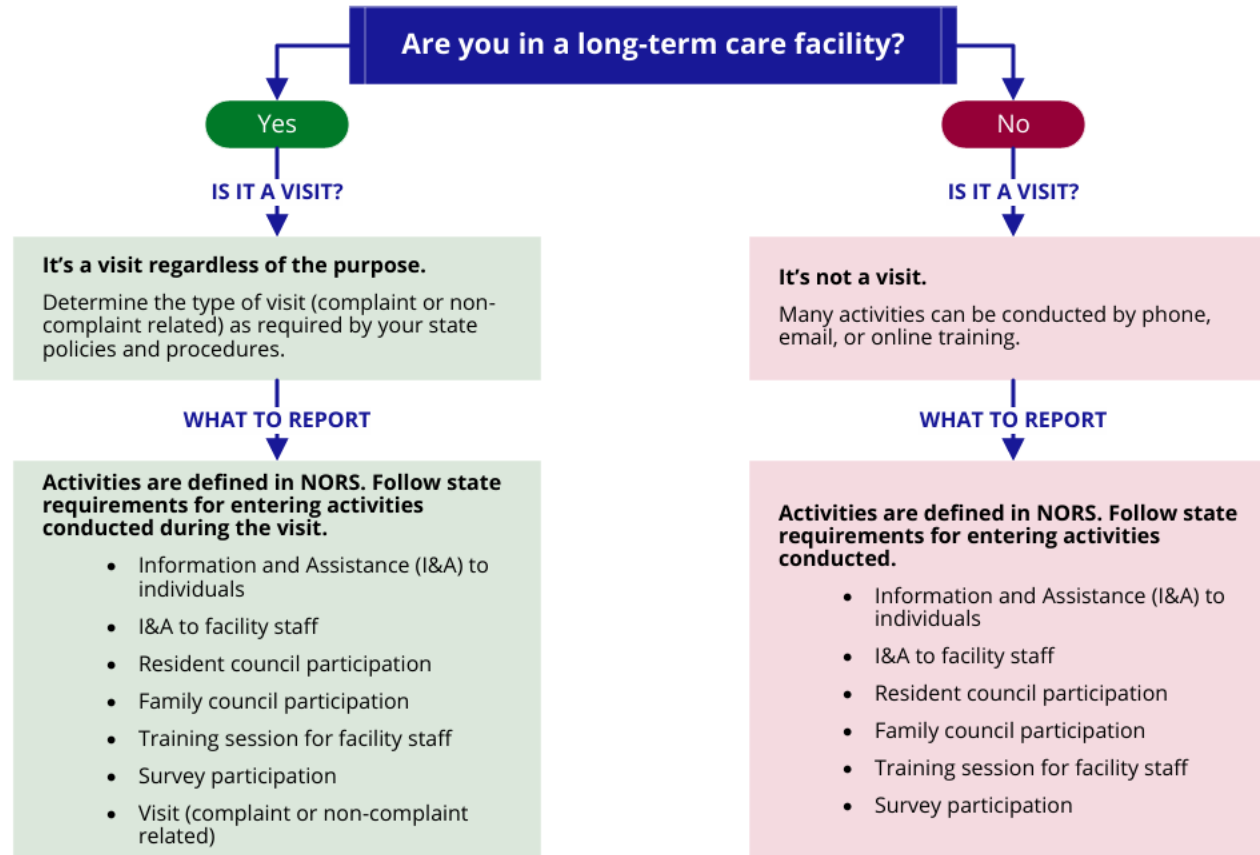
## Case and Complaint Versus Information and Assistance

NORS Definition- Case/Complaint	Versus	NORS Definition – Information and Assistance
<p>A <b>case</b> is comprised of a complainant, complaint code(s), a setting, verification, resolution, and information regarding whether a complaint was referred to another agency. Each case must have a minimum of one complaint.</p> <p>A <b>complaint</b> is an expression of dissatisfaction or concern brought to, or initiated by, the Ombudsman program which requires Ombudsman program <u>investigation and resolution</u> on behalf of one or more residents of a long-term care facility.</p>	<p><u>Definition</u></p>	<p><b>Information and assistance</b> is providing information about issues impacting residents (e.g. resident rights, care issues, services) and/or sharing information about accessing services <u>without opening a case</u> and working to resolve a complaint.</p> <p>Information and assistance may be provided through various means including but not limited to telephone, by written correspondence such as e-mail, or in person.</p>
LTCOP Rule §1324.19 (b) Complaint Processing	Versus	Information and Assistance Practice
<p>(1) With respect to identifying, investigating and resolving complaints, and regardless of the source of the complaint (i.e. complainant), the Ombudsman and the representatives of the Office serve the resident of a long-term care facility. The Ombudsman or representative of the Office shall investigate a complaint, including but not limited to a complaint related to abuse, neglect, or exploitation, <u>for the purposes of resolving the complaint to the resident's satisfaction</u> and of protecting the health, welfare, and rights of the resident. The Ombudsman or representative of the Office may identify,</p>	<p><u>Purpose</u></p>	<p>The purpose of providing information and assistance is to inform the public, residents, facility staff, family of residents, and others. The Ombudsman program provides an answer, resources, and/or suggests other agencies or programs to contact.</p>

# NEW – Is it a Visit?

## Is it a Visit?

Use this decision tree to help you determine if your work counts as a visit and how to document your activities. This is based on National Ombudsman Reporting System (NORS) definitions. Follow your state policies and procedures for additional guidance for conducting and reporting visits.



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# Revised – Quality Visit Guide

Downloadable: [NORC Guide: Making the Most of Your Facility Visits](#)

For purchase: [Making the Most of Your Facility Visits Pocket Guide \(Set of 50\) - The Consumer Voice](#)

## Visits are critical to ensuring regular and timely resident access to Long-Term Care Ombudsman program (LTCOP) services.


Visiting on a regular basis helps residents and Ombudsman program representatives get to know each other and build resident trust so they feel comfortable sharing their concerns.



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## Making the Most of Your Facility Visits

Tips for providing quality visits



### Before Your Visit

Familiarize yourself with the facility by reviewing:

- Previous LTCOP activities (e.g., in-service training, attending a Resident Council meeting)
- Notes from the last visit
- Current and/or recent LTCOP cases
- The Ombudsman program's experience with the facility during conversations with your supervisor
- The most recent annual survey report and regulatory agency complaint report

Upon arrival, announce your visit by signing the visit log. If it is your first visit, introduce yourself to facility leadership.

Ask for a list of resident names and room numbers (may be called a resident census or room roster). Obtaining this list helps you find residents quicker than reading names on residents' doors and can assist you in keeping track of which residents you have visited.

Determine which residents are new since your last visit so you can introduce yourself and share information about the Ombudsman program.

Visit with residents on different halls and floors.

Introduce yourself to family, friends, and other visitors and explain the role of the Ombudsman program.

Check for placement of Ombudsman program posters.

Speak with the Resident Council President and/or Leadership.

Share your business card and/or program outreach materials with residents, family members, and others.

### During Your Visit

In addition to following your state program policies and procedures for visit requirements, you can utilize this checklist to ensure quality visits.

State program policies and procedures establish program practices (e.g., what is a quality visit and program standards (e.g., frequency of visits, how to document visits in the data system, timeframes for responding to complaints).

For reporting consistency the National Ombudsman Reporting System (NORS) provides definitions for activities (e.g., case, complaint, complaint codes) and describes how to count activities (e.g., visits, training).

## Observation

Observation involves using all senses to understand, evaluate, and obtain information during facility visits and complaint intake, investigation, and resolution. During your visit, use your senses to observe the following.

### Sight

#### Environment

- Does the facility look like an institution or a home?
- Are call lights blinking or on for extended periods of time?
- Are staff talking or texting on their phones while on duty?
- Is equipment broken? Are there hazardous areas accessible to residents?
- Are Ombudsman program posters displayed in areas and positions easily accessible to residents?
- Do residents have access to outside space?
- Do staff smile at residents?
- Do staff wear name badges?
- Can residents easily navigate through hallways and common areas?
- Does the food look appetizing?

#### Resident Rooms

- Are residents' rooms furnished with their own belongings?
- Do residents have access to their water pitcher and cup?
- Are food trays left out with uneaten or spoiled products?
- Is trash overflowing?

#### Resident Appearance

- Are residents groomed?
- Do residents have clean hair, faces, hands, and fingernails?
- Are residents dressed as they want to be for the time of day, temperature, and season?
- Are they in clothes that fit?
- Are their clothes stained or do they have food particles on them?
- Are residents wearing hospital gowns?
- Are residents covered for privacy?

#### Resident Activities

- Is the activities calendar posted and followed?
- Is the menu posted and followed?
- Are residents participating in group activities?
- Are any residents doing independent activities?
- Are all or many residents in bed?
- Are several residents sleeping in their wheelchairs?
- Are many residents "parked" near the nurses' station?

### Sound

- Is music throughout the building too loud or too soft?
- Is the music selection based on residents' or staff preference?
- Does the intercom system disturb residents?
- Is personal information being shared broadly (e.g., you hear "Mrs. Smith needs help in the bathroom" over the intercom)?
- Are residents yelling out without staff response?
- Do staff knock on residents' doors and get permission to enter their room?
- Do staff call residents by their name?
- Do staff talk pleasantly and respectfully with residents?
- Are staff speaking to residents in a loud, demanding voice or in a dismissive manner?
- Are staff talking to each other, but ignoring residents?
- Are staff discussing or complaining about residents in front of others?

### Smell

- Is there a strong urine, feces, disinfectant, or chemical odor?
- Do residents smell unclear?
- Does the food smell appetizing?
- Are air fresheners or other scents used to mask unpleasant odors?

### Feel

- Is the building or are the rooms too hot or too cold for residents?
- Are the floors slippery or sticky?
- Are the chairs or tables sticky or gritty?

## Warning Signs and Red Flags of Potential Abuse, Neglect, and/or Exploitation

It is important to be aware of warning signs and red flags of potential abuse, neglect, and/or exploitation. If you observe any warning signs or red flags, follow your program's policies and procedures and the Ombudsman program complaint-handling process, including whether and how to report. Always remember that consent is needed.

### Warning Signs

- Facility appears understaffed (e.g., call lights not answered promptly or turned off without care being provided).
- Residents' rights are not respected (e.g., no choices in daily routine).
- Quality of food declines (e.g., fewer meal options, less food served).
- High staff turnover, staff not familiar with residents.
- Residents appear bored, less active, not engaged with others or activities.
- Residents and/or family members say concerns have not been resolved.
- Facility is uncomfortable (e.g., not clean, has an odor, too cold/hot, too noisy).
- Medication errors.
- Frequent lack of supplies and broken equipment.

### Red Flags

- Significant, sudden change in resident behavior (e.g., withdrawn, fearful, lack of appetite).
- Dramatic physical changes (e.g., weight loss, decline in mobility).
- Unexplained injuries (e.g., bruising).
- Residents are physically restrained and/or appear to be overmedicated (e.g., slumped in wheelchairs).
- Severe lack of staff (e.g., long delays or no response to call lights, frequent falls, lack of assistance to use the restroom).
- Residents appear unclean, have odors.
- Staff disregard residents and their rights.
- Complaints are ignored.
- Missing personal items or funds.

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# Need More Information about the NORS Course?

- ▶ Watch the [launch webinar](#) recording and review the slides
- ▶ Visit the [training center](#).
- ▶ Read the [training center FAQs](#) and then create an account.
- ▶ Contact us for help at [ombudcenter@theconsumervoice.org](mailto:ombudcenter@theconsumervoice.org).



# Questions

- ▶ **Q:** Can you define investigation? If a Representative has a complaint and permission to proceed but does not or has no investigation, is this a case?
- ▶ **A:** Investigation doesn't have a definition in NORS. An investigation is part of Ombudsman program practice. A complaint is defined as "satisfaction 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" and a **case** must have **at least one complaint**.
- ▶ You received a complaint and have permission to proceed (from the resident or resident representative), **it is a case with one complaint**. The disposition code would be "**Withdrawn or no action needed** by the resident, resident representative or complainant."
- ▶ The amount of time spent on a case/complaint does not affect whether it is a case/complaint. A complaint **requires Ombudsman program action** towards resolution, which is different from just providing information and assistance.

# Questions

- ▶ **Q:** When an involuntary discharge is entered into NORS as an intake/case by the State, what is the process by which we process those, step by step?
- ▶ **A:** How Ombudsman programs respond to notices of discharges is state specific. **Please consult your supervisor and/or State Ombudsman.**
  - ▶ Review the first question under Complaint Coding in our [NORS FAQs](#) for a more detailed response to the question of whether you should automatically document discharge notices you receive as complaints.
  - ▶ In short, **receiving copies of discharge notices (or notices of transfer) do not automatically count as a complaint.** The nursing facilities are complying with the federal requirement to send copies of these notices to the Ombudsman program. The nursing facilities are not acting as a complainant and reporting a complaint on behalf of a resident seeking Ombudsman program assistance, rather they are passing along a copy of a notice to your program per federal requirements.

# Questions

- ▶ **Q:** Will the trainees have to complete one lesson before moving to the next lesson in the NORS online course?
- ▶ **A:** No. Trainees can take the full four-part training course or individual modules in whichever order they prefer.

# Questions

- ▶ **Q:** If you are participating in a virtual care plan meeting, is this considered a visit?
- ▶ **A:** No, you must be in the building physically to count a visit.



# ► For Your Consideration...

- Now that we have the NORS online course, will you use the NORS training materials? If so,
  - Fillable PDFs for the Quizzes? ☒
  - PPTs?
- If we made more decision trees, what topic would you like addressed?



**Questions?**



# Contact Information



- ▶ Questions about how to use the platform:
  - ▶ Katie O'Hearn | [kohearn@theconsumervoice.org](mailto:kohearn@theconsumervoice.org)
- ▶ Questions about NORS documentation and requests for training:
  - ▶ Amity Overall-Laib | [aoverallaib@theconsumervoice.org](mailto:aoverallaib@theconsumervoice.org)
  - ▶ Maria Greene | [mgreene@theconsumervoice.org](mailto:mgreene@theconsumervoice.org)







**The National Long-Term Care  
Ombudsman Resource Center**

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# Connect with us!

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-  [ltcombudsman.org](https://ltcombudsman.org)
-  [ombudcenter@theconsumervoice.org](mailto:ombudcenter@theconsumervoice.org)
-  The National LTC Ombudsman Resource Center
-  @LTCombudcenter

*This project was supported by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$516,407 with 100 percent funding by ACL/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by ACL/HHS or the U.S. Government.*