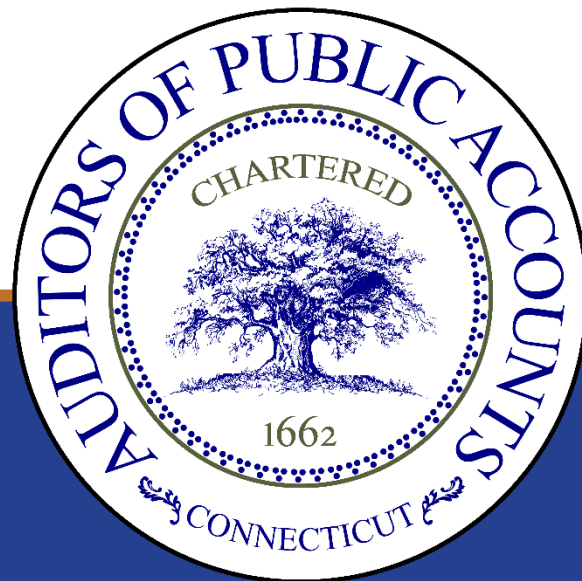


# AUDITORS' REPORT

---

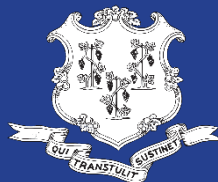
## PERFORMANCE AUDIT FOLLOW-UP REPORT

### **Oversight of Connecticut's Assisted Living Facilities As of September 2023**



**STATE OF CONNECTICUT**  
Auditors of Public Accounts

**JOHN C. GERAGOSIAN**  
State Auditor



**CRAIG A. MINER**  
State Auditor

# CONTENTS

---

INTRODUCTION .....	3
Background.....	3
Follow Up .....	3
Highlighted Agency Accomplishments.....	4
AGENCY UPDATES .....	5
Department of Public Health Facility Licensing and Investigations Section (FLIS) Findings and Recommendations .....	5
The State Long-Term Care Ombudsman Program (LTCOP) Findings and Recommendations.....	16
Department of Social Services Protective Services for the Elderly (PSE) Findings and Recommendations .....	20
Fire Marshals Findings and Recommendations.....	21
Licensure of Assisted Living Facilities Findings and Recommendations .....	23

# INTRODUCTION

## Background

Our office published the [Oversight of Connecticut's Assisted Living Facilities](#) performance audit on September 23, 2021. The purpose of this audit was to assess how state agencies provided oversight of Connecticut's assisted living facilities during calendar years 2017-2019. We focused on the efficiency and effectiveness of the Department of Public Health (DPH) Facility Licensing and Investigations Section (FLIS), Department of Aging and Disability Services Long-Term Care Ombudsman Program (LTCOP), and Department of Social Services (DSS) Protective Services for the Elderly Program (PSE). FLIS licenses the assisted living services component through assisted living services agencies (ALSA) but registers the facility as a managed residential community (MRC). We recommended improvements to the current oversight of assisted living facilities and consumer protections for this vulnerable population.

Connecticut has nearly 8,000 assisted living units or apartments within 142 managed residential communities. Except for publicly funded assisted living facilities, nearly all managed residential communities and assisted living services agencies are under the same ownership. Approximately 60% of Connecticut assisted living facilities are part of national or regional chains and 18% are independently owned. Connecticut is the only state that does not fully license assisted living facilities.

## Follow Up

On September 12, 2023, we requested updates from various state agencies on their efforts to address the report's recommendations. They include the Departments of Public Health and Social Services, the Office of the Long-Term Care Ombudsman Program, the Commission on Women, Children, Seniors, Equity and Opportunity (CWCSEO), and the State Fire Marshal in the Department of Administrative Services. The report identified 22 recommendations to improve oversight of Connecticut's assisted living facilities and increase consumer protections for this vulnerable population. In general, we recommended:

- The Department of Public Health Facility Licensing and Investigations Section should send letters to managed residential communities within 30 days confirming their registration and establish deadlines for communicating assisted living services agency inspection and investigation results to the assisted living services agencies and managed residential communities.
- The Department of Public Health should require criminal background checks for managed residential community employees with direct access to residents and establish minimum staffing requirements for aides, therapeutic recreational staff, and other staff or specialists serving assisted living residents in memory care units.
- The General Assembly should define an assisted living facility in statute as a managed residential community that offers its residents nursing services and assistance with activities of daily living through an assisted living services agency.
- The Department of Aging and Disability Services Long-Term Care Ombudsman Program (LTCOP) should develop a minimum frequency standard of non-complaint visits to managed residential communities and consider assigning volunteer residents' advocates to meet that standard.

- A workgroup should develop a comprehensive assisted living facilities resource on the [My Place CT website](#) and LTCOP should develop a checklist or consumer guide with questions to ask when visiting assisted living facilities.
- DPH should require an annual fire marshal safety inspection report for managed residential communities to maintain their registrations.
- The Department of Administrative Services Codes and Standards Committee, responsible for adopting a state building code, should clarify whether local fire marshals should use residential or institutional fire code requirements when inspecting assisted living facilities.
- DPH should resume biennial inspections and complaint investigations concerning violations of certain statutory requirements for managed residential communities.
- A work group should explore the development of an assisted living licensure system that combines managed residential communities and assisted living services agencies.

## Highlighted Agency Accomplishments

Since the release of the performance audit, the Department of Public Health, and the Department of Social Services implemented some of the recommendations. They include:

- The Department of Public Health adheres to Section 19-13D-103(c)(2) of the Regulations of Connecticut State Agencies and sends managed residential community service coordinators letters within 30 days confirming their registration including when there is an ownership change. DPH is convening an internal working group to review the current regulatory framework for managed residential communities and assisted living services agencies and provide recommendations to the commissioner for statutory and regulatory changes.
- The Department of Social Services is modernizing its case management database and may begin to capture assisted living residency information.

Overall, the Department of Public Health, Department of Social Services, Office of the Long-Term Care Ombudsman Program, Commission on Women, Children, Seniors, Equity and Opportunity, and Department of Administrative Services Office of the State Fire Marshal did not implement most of our audit recommendations. The Department of Public Health Facility Licensing and investigations Section fully implemented one recommendation and partially implemented three other recommendations. The State Long-Term Care Ombudsman Program and Department of Social Services each partially implemented one of our audit recommendations. This information is solely based on the departments' responses to our update requests and may be verified during future audits.

# AGENCY UPDATES

## Department of Public Health Facility Licensing and Investigations Section (FLIS) Findings and Recommendations

### Finding 1

The Department of Public Health Facility Licensing and Investigations Section (FLIS) does not always send written confirmation to managed residential communities (MRC) upon receipt and acceptance of registration paperwork, leading to lack of formal documentation and proof of the MRC's registration.

### Recommendation 1

The Department of Public Health should adhere to Section 19-13-D105(c)(2) of the Regulations of Connecticut State Agencies and send managed residential community service coordinators letters within 30 days confirming their registration including when there is a change of ownership.

### Status

**IMPLEMENTED**

The Department of Public Health currently adheres to Section 19-13D-103(c)(2) of the Regulations of Connecticut State Agencies and sends managed residential community service coordinators letters within 30 days confirming their registration including when there is a change of ownership. DPH provided an example of its response letter and a copy of the policy and procedure. Additionally, each quarter, the section licensing supervisor audits the managed residential communities change of ownership process for compliance.

### DPH Update

"The Department of Public Health (DPH) corrected this finding in October 2023. DPH has established a process to ensure compliance with section 19-13-D105(c)(2) of the Regulations of the Connecticut State Agencies and trained relevant staff on implementation. "...the most recent Managed Residential Community (MRC) response letter ... and the Policy and Procedure ... [were provided]. The section

licensing supervisor will audit the MRC change of ownership process for compliance each quarter.”

## **Finding 2**

There are statutory requirements for the operation of managed residential communities (MRC). However, there is no agency monitoring to determine if these requirements are being met, leading to potentially unsafe conditions for assisted living facility residents. While DPH monitors the care and services provided by assisted living services agencies (ALSA) during survey activities, it does not monitor the operation of residents living in MRC that do not receive ALSA services.

### **Recommendation 2**

The Department of Public Health should resume biennial inspections and complaint investigations concerning violations of certain statutory requirements for managed residential communities.

### **Status**

**NOT IMPLEMENTED**

The Department of Public Health maintains it does not have the statutory authority to resume biennial managed residential community inspections and complaint investigations. While DPH has not proposed related legislative changes, the department is convening an internal working group to review the current managed residential community and assisted living services regulatory framework and develop recommendations to the commissioner for statutory changes.

### **DPH Update**

“DPH does not have authority to implement this recommendation. This recommendation would require statutory changes and additional resources to conduct the inspection activities. Although DPH is not proposing any changes to the legislation related to MRCs or ALSAs in the 2024 legislative session, the department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs and develop recommendations for the commissioner for future statutory changes.”

### **Finding 3**

The Department of Public Health requires criminal background checks for certain assisted living services agency (ALSA) personnel but not for managed residential community personnel, potentially putting assisted living residents at risk for maltreatment.

#### **Recommendation 3**

The Department of Public Health should require criminal background checks for managed residential community employees with direct access to residents.

#### **Status**

**NOT IMPLEMENTED**

The Department of Public Health does not believe that it has the statutory authority to require criminal background checks for managed residential community employees with direct access to residents. While DPH has not proposed related legislative changes, the department is convening an internal working group to review the current managed residential community and assisted living services regulatory framework and develop recommendations to the commissioner for statutory changes.

#### **DPH Update**

"DPH does not have authority to implement this recommendation. This recommendation would require statutory changes and additional resources to expand the background check program. Although DPH is not proposing any changes to the legislation related to MRCs or ALSAs in the 2024 legislative session, the department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs, including requirements for background checks, and develop recommendations for the commissioner for future statutory changes."

## **Finding 4**

The Department of Public Health Facility Licensing and Investigations Section (FLIS) Assisted Living Services Agency Licensure Inspection Procedures were last revised on October 6, 1995, making them out-of-date. This could lead to an incomplete review of licensure requirements.

### **Recommendation 4**

The Department of Public Health Facility Licensing and Investigations Section should update its Assisted Living Services Agency Licensure Inspection Procedures.

### **Status**

**PARTIALLY IMPLEMENTED**

The Department of Public Health delayed updating its assisted living services agency licensure inspection procedures due in part to staffing shortages and the federal government suspension of survey activities due to the COVID-19 pandemic. In 2023, DPH hired a new branch and section chiefs for the unit, identifying areas for process improvements and statutory and regulatory changes to improve quality and safety outcomes. DPH continues to work on this finding and plans to update its Assisted Living Services and Licensure Inspection Procedures by September 1, 2024.

### **DPH Update**

"The department continues to work on this finding and plans to complete an update of the Assisted Living Services Licensure Inspection Procedures by September 1, 2024. Work on this finding has been delayed because of staffing issues. In 2022, the Branch Chief for the Healthcare Quality and Safety Branch (HQSB) and the Section Chief for the Facilities Licensure and Investigations Section (FLIS) retired, along with several seasoned facility surveyors. For much of 2022 and 2023, these units, which are responsible for regulating MRCs and ALSAs, were seriously short-staffed, with vacancy rates upwards of 40%. The department is also working through a significant backlog of federally required nursing home recertification surveys and a significant backlog of nursing home and hospital complaints. These backlogs were caused by the suspension of survey activity by the federal government during the height of the COVID pandemic and the lack of qualified surveyors. The department has been aggressively hiring and training new surveyors. In addition, in 2023, the department hired a new Branch Chief and Section Chief for the unit. The new leadership team is reviewing the compliance programs for each provider category, including MRCs and ALSAs, and identifying areas for process improvements and changes in statute and regulation to improve quality and safety outcomes."



## **Finding 5**

The Department of Public Health Facility Licensing and Investigations Section (FLIS) does not always report licensure inspection and complaint investigation results in a timely manner, making it difficult for assisted living services agencies (ALSA) to promptly correct deficiencies.

### **Recommendation 5**

The Department of Public Health should establish deadlines for notifying the assisted living services agency of inspection and complaint investigation results and inform the assisted living services agencies when it will communicate those results.

### **Status**

**PARTIALLY IMPLEMENTED**

The Department of Public Health informed us that it plans to include deadlines for notifying assisted living services agencies of inspection and complaint investigation results when it updates its Assisted Living Services Licensure Inspection Procedures. The department told us it intends to notify the provider industry of these changes.

### **DPH Update**

"The Department continues to work on this finding and plans to include deadlines for notifying assisted living services agencies of inspection and complaint investigation results in the update of the Assisted Living Services Licensure Inspection Procedures, which the Department is committed to complete by September 1, 2024. The Department will notify the provider industry of changes, including new investigation notification standards, through Blast Fax and will offer to present new information to ALSA providers at the ALSA association's annual meeting."

## **Finding 6**

The Department of Public Health Facility Licensing and Investigations Section does not notify the managed residential community (MRC) within which the assisted living services agency (ALSA) operates of ALSA noncompliance or a required corrective action plan report, potentially leading to lack of awareness of ALSA deficiencies in services provided to its residents.

### **Recommendation 6**

The Department of Public Health Facility Licensing and Investigations Section should inform the managed residential communities in which an assisted living services agency operates of results of inspections and complaint investigations.

### **Status**

**NOT IMPLEMENTED**

The Department of Public Health does not inform the managed residential communities in which an assisted living services agency operates of the results of inspections and complaint investigations. DPH informed us it does not have the statutory authority to implement this recommendation. DPH is convening an internal working group to review the current managed residential community and assisted living services regulatory framework and develop recommendations.

### **DPH Update**

"DPH does not have authority to implement this recommendation. This recommendation would require statutory changes. Although DPH is not proposing any changes to the legislation to MRCs or ALSAs in the 2024 legislative session, the department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs and develop recommendations for the commissioner for future statutory changes."

## Finding 7

There are minimal staffing requirements for memory care units in assisted living facilities, leading to potentially insufficient resources for this vulnerable population.

### Recommendation 7

The Department of Public Health should establish minimum staffing requirements for assisted living memory care units.

### Status

**NOT IMPLEMENTED**

The Department of Public Health has not established minimum staffing requirements for assisted living memory care units. DPH is convening an internal working group to review the current managed residential community and assisted living services regulatory framework including memory care staffing levels and training requirements.

### DPH Update

“Work on this finding is ongoing. The department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs, including staffing levels (and staff training requirements) for memory care. During 2022, DPH rebuilt its regulations program, which had been largely dormant for several years due to staffing shortages and leadership changes. As part of this rebuilding initiative, DPH has created a multi-year priority list for the update of regulations throughout the department. Updates to the regulations related to ALSAs are scheduled for 2024.”

## Finding 8

Connecticut assisted living regulations require the supervising registered nurse and designated on-call registered nurse to have experience working for a home health care agency or community health program, making it difficult to fill these positions.

### Recommendation 8

The Department of Public Health should amend its assisted living regulations to allow supervising registered nurses and designated on-call registered nurses to substitute case management experience in any health care setting or mentoring or training initiated within 90 days of hire, in place of the currently required one year of experience

working for a home health care agency or community health program.

## Status

### PARTIALLY IMPLEMENTED

The Department of Public Health is working to amend its assisted living regulations to allow supervising and on-call registered nurses to substitute case management experience in any health care setting or mentoring or training initiated within 90 days of hire, instead of the current one year of experience working for a home health care agency or community health program. DPH plans to update its assisted living services agency regulations in 2024.

Section 19-495 of the Connecticut General Statutes also provides the commissioner waiver authority “for any regulations that effect an institution or a clinical laboratory if the commissioner determines that such waiver would not endanger the health, safety or welfare of any patient or resident”. The department has approved such waivers.

## DPH Update

“Work on this finding is ongoing. The department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs, including staffing levels (and staff training requirements) for memory care. During 2022, DPH rebuilt its regulations program, which had been largely dormant for several years due to staffing shortages and leadership changes. As part of this rebuilding initiative, DPH has created a multi-year priority list for the update of regulations throughout the department. Updates to the regulations related to ALSAs are scheduled for 2024. Meanwhile, Section 19-495 of the Connecticut General Statutes provides waiver authority to the commissioner “for any regulations that effect an institution or a clinical laboratory if the commissioner determines that such waiver would not endanger the health, safety or welfare of any patient or resident”. The department has approved waivers to satisfy this requirement for individuals who have nursing home experience to meet the requirement that include care of the sick at home.”

## Finding 9

Assisted living facilities must store medication in the residents' rooms, causing a potentially unsafe situation for some residents.

### Recommendation 9

Section 19-13-D105 of the Regulations of State Agencies should be amended to permit storage of medication in a centralized, secure place for residents requiring medication administration assistance.

### Status

**NOT IMPLEMENTED**

The Department of Public Health has not updated Section 19-D-105 of the Regulations of State Agencies to permit storage of medication in a centralized, secure place for residents requiring medication administration assistance. DPH is working on this finding and plans to update its assisted living services agency regulations in 2024.

### DPH Update

"Work on this finding is ongoing. The Department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs, including the centralized storage of medications. Updates to the regulations related to ALSAs are scheduled for 2024."

## Finding 10

Connecticut currently limits medication administration in assisted living facilities to licensed assisted living services agency (ALSA) personnel, contributing to residents' high assisted living costs.

### Recommendation 10

Section 19-13-D105 of the Regulations of State Agencies should be amended to permit unlicensed assisted living services agency personnel to be trained and certified to administer certain medication.

### Status

**NOT IMPLEMENTED**

The Department of Public Health has not updated Section 19-13-D105 of the Regulations of State Agencies to permit unlicensed assisted living services agency personnel to be trained and certified to administer certain medication. DPH is working on this finding and

plans to update its assisted living services agency regulations in 2024.

**DPH Update**

“Work on this finding is ongoing. The department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs, including requirements related to medication administration. Updates to the regulations related to ALSAs are scheduled for 2024.”

**Finding 11**

Falls are a common occurrence at assisted living facilities, but many of residents’ personal emergency alert necklace pendants or bracelets do not contain fall detection technology.

**Recommendation 11**

Assisted living facilities should consider upgrading their medical alert systems to offer fall detection technology to residents.

**Status**

**NOT IMPLEMENTED**

The Department of Public Health has not proposed legislation to require assisted living facilities to upgrade their medical alert systems to offer fall detection technology. The department is convening an internal working group that intends to consider this recommendation.

**DPH Update**

“MRCs are not a medical model of care. The department believes that this issue is largely a business decision for MRCs and ALSAs. Through individual assessment, an ALSA may identify that an individual is at risk for falls and should develop a treatment plan that will mitigate risk. Such plans are developed with the residents and their families and may include technology to detect falls. Consumers may request from the MRC or ALSA such technology or procure it on their own. Mandating that MRCs or ALSAs offer fall detection systems to residents would require legislation. DPH is not proposing any such legislation in the 2024 legislative session. The department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs and develop recommendations for the commissioner for future statutory changes. The internal working group will consider this recommendation during its review.”

## Finding 12

The term assisted living facility is referenced in statute, but not defined, creating possible confusion.

### Recommendation 12

The General Statutes should be amended to define assisted living facility as a managed residential community that offers its residents nursing services and assistance with activities of daily living through an assisted living services agency.

### Status

**NOT IMPLEMENTED**

The Connecticut General Statutes do not define assisted living facility. The Department of Public Health is convening an internal working group to review the current managed residential community and assisted living services regulatory framework which intends to consider this recommendation.

### DPH Update

"The department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs and develop recommendations for the commissioner for future statutory changes. The internal working group will consider this recommendation during its review."

## Finding 13

The current assisted living services agency (ALSA) regulations have out-of-date references and omissions, making them inaccurate.

### Recommendation 13

Section 19-13-D105 of the Regulations of State Agencies needs to be updated to include statutory and other changes since 2001.

### Status

**NOT IMPLEMENTED**

Section 19-13-D105 of the Regulations of State Agencies has not been updated to include statutory and other changes. The Department of Public Health plans to update its assisted living services agency regulations in 2024.

## DPH Update

“Work on this finding is ongoing. The department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs, including revisions that reflect statutory changes since 2001. During 2022, DPH rebuilt its regulations program, which had been largely dormant for several years due to staffing shortages and leadership changes. As part of this rebuilding initiative, DPH has created a multi-year priority list for the update of regulations throughout the department. Updates to the regulations related to ALSAs are scheduled for 2024.”

# The State Long-Term Care Ombudsman Program (LTCOP) Findings and Recommendations

## Finding 14

The Long-Term Care Ombudsman Program does not specify the frequency of non-complaint visits to managed residential communities, making expectations unclear and accountability difficult for consumers, providers, and other stakeholders.

## Recommendation 14

The State Long-Term Care Ombudsman should develop a minimum standard of frequency of non-complaint visits to managed residential communities and amend Section 17a-408 of the General Statutes to reflect that standard. Section 17a-417 of the General Statutes should be amended to require the State Long-Term Care Ombudsman’s annual report to include outcomes of meeting the visitation standard and each facility’s visitation frequency.

## Status

**PARTIALLY IMPLEMENTED**

The Department of Aging and Disability Services Long-Term Care Ombudsman Program informed us that it encourages its employees to follow the same quarterly non-complaint routine visit standards as nursing facilities. However, due to budgetary restraints, they complete assisted living service agency visits within available resources.

## LTCOP Update

“Although we encourage Ombudsman staff to also follow the same structured quarterly non-complaint routine visit standards as the nursing facilities, due to the budgetary constraints we prioritize nursing facilities and complete RCH (Residential Care Homes)/ALSA visit within available appropriations.”



## Finding 15

There are no volunteer residents' advocates assigned to assisted living facilities, leading to a lack of oversight and advocacy for residents.

### Recommendation 15

The State Long-Term Care Ombudsman should consider recruiting and assigning volunteer residents' advocates to assisted living facilities.

### Status

**NOT IMPLEMENTED**

The Department of Aging and Disability Services Long-Term Care Ombudsman Program submitted a request for additional regional ombudsman to recruit additional volunteers for assisted living facilities. However, the office did not receive the additional staffing, and does not have the resources to implement this recommendation.

### LTCOP Update

"The Ombudsman's office submitted a request for additional Regional Ombudsman to be able to further develop the program in Assisted Living, however the office only received a manager and one Community Ombudsman for all Home Care. These positions include Home Care, Residential Care Homes, and Assisted Living Communities. For this reason, the program does not have the resources to do this currently."

## Finding 16

There is no comprehensive assisted living resource available on a single, government-sponsored website, leading to a lack of readily accessible, independent consumer information.

### Recommendation 16

The General Assembly should establish a workgroup to develop a comprehensive assisted living facilities resource on the My Place CT website. Members of this workgroup should include representatives from the departments of Social Services and Public Health, the Long-Term Care Ombudsman, Connecticut Commission on Women, Children, Seniors, Equity & Opportunity, the Connecticut Assisted Living Association, LeadingAge Connecticut, and 2-1-1 Info-Line. The guide should have a searchable listing of all assisted living facilities, pricing, fees, Department of Public Health assisted living

services agency inspection reports, and administrator contact information.

**Status**

**NOT IMPLEMENTED**

The Connecticut General Assembly has not established a workgroup to develop a comprehensive assisted living facilities resource on the My Place CT website.

**DSS Update**

"This would appear to be a recommendation directed to the General Assembly. Given the wide scope of proposed stakeholders the Department of Social Services would not necessarily be the lead entity. DSS is not aware of proposed legislation to establish the workgroup."

**DPH Update**

"This recommendation requires multi-agency support and coordination as well financial and staffing resources. The Department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs and develop recommendations for the commissioner for future statutory changes. The working group will consider this recommendation as part of that work."

**LTCOP Update**

"The My Place CT website is outside the scope of the LTCOP and although the program supports the development and would be happy to participate in the continued development of the site, the program does not feel it is the programs scope to propose legislation regarding this."

**CWCSEO Update**

"As you know we serve as policy staff to the Legislature and, as such, do not have any formal procedures to submit legislation to the Connecticut General Assembly. We do, however, collaborate with the Long-Term Care Ombudsman Program, Department of Public Health, Department of Social Services and other state agencies and may administer workgroups or task forces as required by statute. In this instance, the [2-1-1 Info-Line](#) and the Department of Housing provide a searchable listing of assisted living facilities and other housing opportunities, accessible through the My Place CT website. We are happy to continue to promote the vitality of this website with the Executive Branch and advocacy champions."

## **Finding 17**

There is no checklist or guide for consumers to use when visiting assisted living facilities, leading to less than optimal decision making for older adults and their families.

### **Recommendation 17**

The State Long-Term Care Ombudsman should develop a checklist or guide with questions for consumers to ask when visiting assisted living facilities.

### **Status**

**NOT IMPLEMENTED**

The Department of Aging and Disability Services Long-Term Care Ombudsman Program indicated it does not currently have the resources to develop a checklist or guide.

### **LTCOP Update**

"The Ombudsman's office submitted a request for additional Regional Ombudsman to be able to further develop the program in Assisted Living, however the Office only received a manager and one Community Ombudsman for all Home Care. These positions include Home Care, Residential Care Homes, and Assisted Living Communities. For this reason, the program does not have the resources to do this currently."

# Department of Social Services Protective Services for the Elderly (PSE) Findings and Recommendations

## Finding 18

Assisted living facilities are not required to post Protective Services for the Elderly Program (PSE) contact information, creating a barrier to reports of suspected elder maltreatment at assisted living facilities.

### Recommendation 18

Section 19a-697(b) of the General Statutes should be amended to require managed residential communities to post Department of Social Services Protective Services for Elderly Program's contact information.

### Status

**NOT IMPLEMENTED**

The Department of Social Services informed us it has not amended Section 19a-697(b) of the General Statutes but will consider submitting updated language during the upcoming legislative session.

### DSS Update

"DSS is open to considering this for an upcoming session."

## Finding 19

The Department of Social Services Protective Services for the Elderly Program (PSE) does not categorize assisted living allegations, potentially overlooking significant differences between the assisted living and other community-based clients.

### Recommendation 19

The Department of Social Services Protective Services for the Elderly Program database should include assisted living residency.

**Status**

**PARTIALLY IMPLEMENTED**

The Department of Social Services is modernizing its case management database, and it may include assisted living residency as it develops the database.

**DSS Update**

"The case management database for the PSE Program is being modernized and this change can be incorporated as the database is developed."

**Office of the State Fire Marshal Findings and Recommendations**

**Finding 20**

Local fire marshals are statutorily required to conduct annual inspections of managed residential communities. Due to limited resources and lack of prioritization, these inspections may not be occurring every year in certain communities.

**Recommendation 20**

The Department of Public Health should require an annual fire marshal safety inspection report for managed residential communities to maintain their registration.

**Status**

**NOT IMPLEMENTED**

The Department of Public Health is convening an internal working group to review the current managed residential community and assisted living services regulatory framework which intends to consider this recommendation.

**DPH Update**

The department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs and develop recommendations for the commissioner for future statutory changes. The working group will consider this recommendation as part of that work."

**Office of the State Fire Marshal Update**

"The Department of Administrative Services respectfully recommends that the Department of Public Health is the

appropriate authority to provide an updated response to this item. DAS is not aware of any updates to this recommendation and does not have the authority to act on the recommendation. DAS and its Office of the State Fire Marshal also do not have statutory authority over the local fire marshals in how they conduct business. The local fire marshals report to their local appointing authority. The owner or management of any managed residential facility that has not received an annual inspection should call the local fire marshal and request an inspection and report.”

## **Finding 21**

Some local fire marshals believe they cannot apply the more stringent institutional inspection criteria when conducting fire safety inspections of assisted living facilities, leading to concern about potential significant loss of life.

### **Recommendation 21**

The state fire marshal should work with the Codes and Standards Committee to clarify whether local fire marshals should use residential or institutional fire code requirements when inspecting assisted living facilities.

### **Status**

**NOT IMPLEMENTED**

The Office of the State Fire Marshal did not work with the Department of Administrative Services Codes and Standards Committee to clarify whether local fire marshals should use residential or institutional fire code requirements when inspecting assisted living facilities. The Office of the State Fire Marshal suggests the current use classifications remain in place until it can conduct a broader review of the two-code system.

### **Office of the State Fire Marshal Update**

“The 2022 Connecticut State Fire Safety Code (CSFSC) has two parts relevant to this topic. Part III pertains to buildings or uses issued a building permit on or after January 1, 2006, and Part IV pertains to those for which a permit was issued prior to January 1, 2006.

The CSFSC Part III is based on International Code Council (ICC) documents, which define assisted living facilities as institutional, and Part IV is based on National Fire Protection Association (NFPA) documents, which define assisted living facilities as residential. The results are consistent in terms of what is required to be provided to achieve compliance with the codes and the requirement for an annual inspection of the facilities. This two-part system is understood by municipal fire marshals and is the basis for all education for the certification of new fire marshals and the continuing education of

existing fire marshals. To change the two-part model for just one use group would add confusion to the fire marshal community. Therefore, we respectfully suggest the current use classifications remain in place until a broader review of the two-code system for all situations can be undertaken.”

## Licensure of Assisted Living Facilities Findings and Recommendations

### Finding 22

The Department of Public Health Facility Licensing and Investigations Section (FLIS) registers rather than licenses managed residential communities. This may provide inadequate oversight and lead to insufficient consumer protections for assisted living residents.

### Recommendation 22

The General Assembly should consider establishing a work group to explore the development of an assisted living licensure system that combines managed residential communities and assisted living services agencies. The workgroup should include the chairpersons and ranking members, or their designees, of the joint standing committees of the General Assembly having cognizance of matters relating to aging, public health, and human services, representatives from the Departments of Public Health and Social Services, the Long-Term Care Ombudsman, the Connecticut Assisted Living Association, LeadingAge Connecticut, AARP Connecticut, and the Connecticut Chapter of the Alzheimer’s Association.

The workgroup, prior to the start of the next legislative session, should report its findings and recommendations on possible legislation requiring licensure to the joint standing committees of the General Assembly having cognizance of matters relating to aging, public health, and human services

### Status

**NOT IMPLEMENTED**

The Department of Social Services informed us it is not aware of proposed legislation to establish the workgroup and would not be the lead entity. The Long-Term Care Ombudsman informed us it does not have the resources to develop the program in assisted living. The Department of Public Health is convening an internal working group to review the current managed residential

community and assisted living services regulatory framework which intends to consider this recommendation.

**DSS Update**

“This would appear to be a recommendation directed to the General Assembly. Given the wide scope of proposed stakeholders the Department of Social Services would not necessarily be the lead entity. DSS is not aware of proposed legislation to establish the workgroup.”

**DPH Update**

“The Department is convening an internal working group to review the current regulatory framework for MRCs and ALSAs and develop recommendations for the commissioner for future statutory changes. The working group will consider this recommendation as part of that work.”

**LTCOP Update**

“The Ombudsman’s office submitted a request for additional Regional Ombudsman to be able to further develop the program in Assisted Living, however the office only received a manager and one Community Ombudsman for all Home Care. These positions include Home Care, Residential Care Homes, and Assisted Living Communities. For this reason, the program does not have the resources to do this currently.”