The length of the visits can vary. For example, if the Commissioner goes to the survey report meeting or has been invited to attend a resident or family council meeting, they may spend a few hours at the facility.

Commissioners will only enter a resident’s room if invited by the resident or his/her authorized representative.

At the end of the visit, the Commissioner may ask to meet with the administrator or other person in charge to share information gathered during the visit. This might include examples of good care or opportunities for improvement. If a Commissioner sees something that might be an issue affecting the health/safety of residents, this will also be reported to the administrator or other person in charge.

What happens to the information that a Commissioner gathers during a visit to a long term care or assisted living facility?

The results of a visit may be reported at a Commission meeting. No facilities, staff, families or residents are identified during the report.

If residents or family members wish to share information that they do not want reported to the administrator, they will be given the phone number of the Division of Health Care Quality (DHCQ) toll-free complaint line (1-877-453-0012), so that they may report their concern to the appropriate authority.

If a Commissioner or Executive Director has reasonable cause to believe that there is abuse, neglect, mistreatment, or financial exploitation of a resident, it will be reported to DHCQ.

Current Members of the Delaware Nursing Home Residents Quality Assurance Commission

Lisa Furber, Chairman
Lorraine Phillips, Ph.D, RN
Karen E. Gallagher
Hooshang Shanehsaz, RPh
Lt Gov Bethany Hall-Long
Representative Kim Williams
Cheryl Heiks
Amy Milligan
Jennifer McLaughlin
Ed Black, Esquire
Kyle Hodges
Tonya Burton
Norma Jones
The Delaware Nursing Home Residents Quality Assurance Commission was established by legislation passed and signed by the Governor in 1999. The primary purpose of this Commission is to monitor Delaware’s quality assurance system for nursing home residents in both privately operated and state operated facilities, to ensure that complaints of abuse, neglect, mistreatment, and financial exploitation are responded to in an effective and timely manner. The Commission also reviews policy issues related to the quality of life and quality of care of residents of other long term care and assisted living facilities.

The main duties of the Commission include:

1. Examining policies and procedures and evaluating the effectiveness of the quality assurance system for nursing home residents, including the respective roles of the Department of Health and Social Services, the Attorney General’s Office, law enforcement agencies, health care professionals, and nursing home providers.


3. Reviewing and making recommendations to the Governor, the Secretary of the Department of Health and Social Services, and the General Assembly concerning the quality assurance system and improvements to the overall quality of life and quality of care of nursing home residents.

4. Protecting the privacy of nursing home residents, including following the guidelines for the confidentiality of records established by the Division of Health Care Quality, in Delaware Health and Social Services (DHSS).

5. Specific responsibilities as designated by the General Assembly, such as making recommendations as to the required minimum nursing staffing levels in nursing homes and reviewing requests by the facilities to waive the requirements on a time-limited basis.

Commonly Asked Questions:

**Who are the Commissioners?**

The Commissioners include one appointed by the Speaker of the House and one appointed by the President Pro-Tem of the Senate. Seven are appointed by the Governor and represent consumers of nursing home services, nursing home providers, health care professionals, and advocates for the elderly and disabled. Four serve by virtue of position or designee as follows: The Attorney General, Community Legal Aid Society, Delaware Health Care Facilities Association and Delaware Healthcare Association.

**What is the purpose of the Commission’s visits to long term care and assisted living facilities?**

The purpose of the visits is to promote an atmosphere of information sharing so that Commissioners and staff may fulfill their responsibility to monitor the effectiveness of the quality assurance system in the State of Delaware. Commissioners and staff are interested in open communications with facility administrators, staff, residents and families and in promoting a cooperative atmosphere. Information will be gathered to help the Commission make its required recommendations to the Governor, DHSS Secretary and General Assembly, concerning improvements to the overall quality of care and quality of life of nursing home and assisted living residents.

**What determines which facilities are visited and which Commissioner(s) will visit?**

Before a visit, DNHRQAC will check with DHCQ staff to determine which facilities have been visited recently (the Division maintains a log of visits), so that duplicate visits of the same nature may be avoided. Commissioners and staff may also attend meetings held at the facilities by DHCQ that give the results of the annual licensing/certification surveys. Commissioners or staff may be invited to resident and/or family council meetings. Commissioners will avoid visiting facilities with which they have a conflict of interest.

**What can be expected during a Commissioner’s visit to a long term care or assisted living facility?**

Generally, visits will be made by one or two Commissioners at a time. If Commissioners or staff are visiting a facility after normal visiting hours, they will call prior to visiting, so facility staff will be available to open the door. Commissioners or staff will usually be identified by a photo ID badge. Commissioners will sign the visitors’ log and give the administrator or other person in charge a copy of this brochure and a Commission business card. Commissioners will gladly explain the purpose of the visit to anyone who asks.