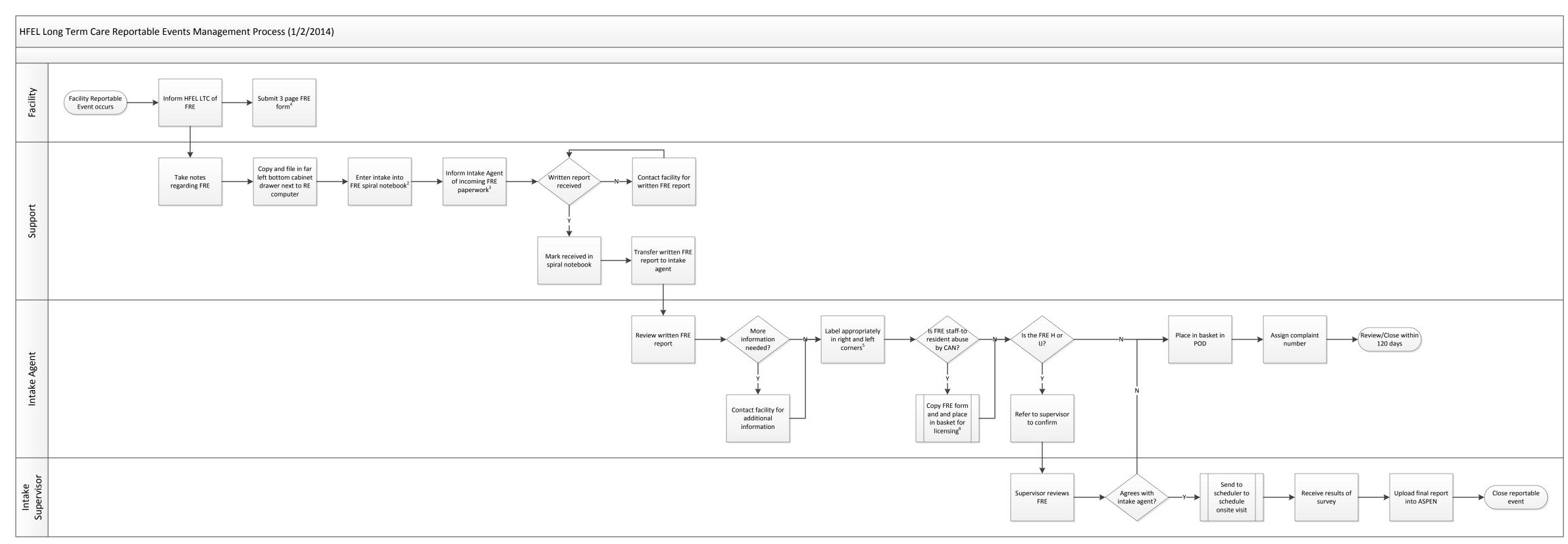


Comments

- 1. Origin of complaint could come from a surveyor, referral, phone, e-mail, fax, letter, Facility, Resident, Family, commissioner referral, etc.
- 2. Paper file or electronic file can be used. Paper used prior to sufficient information available to open an ACTS file. It will
- also be filed in the file cabinet for 5 years.
- 3. May occur at the same time as requesting more information regarding the complaint
- 4. Required information: facility resident name, address, room#, complaint details
- 5. Common complaint issue that is out of scope relates to patient billing. Direct to DCA.6. If permission not granted, Survey will speak in general terms to protect the patient's privacy
- 7. Paper forms are marked in the upper right and left corners. Right corner for issue identifiers, and left corner for the
- outcomes of triage: Harm (H), Immediate Jeopardy (IJ), Medium (med), low (low), Handle By Phone (HBP)
- 8. Scheduling is coordinated with the routine long term care facility scheduling. CMS guidelines provide 2 days to address IJ,
- 10 days for Harm, and state guidelines allow 120 days to address medium.



Comments

Hotline may also receive acute care complaints/reportable events. In those cases, e-mails sent to acute care notifying them of the complaint/RE.

- 1. Facility Reportable Event (FRE) can be submitted by e-mail or by phone. Intake agent will check the FRE e-mail address,
- hotline, and live calls.
- 2. Spiralbound notebook keeps track of all occurring FRE
- 3. Notification is usually done verbally as support and intake sit in the same POD area.
- 4. Written report must be submitted within 72 hours of FRE
- 5. Left corner for issue identifiers, and right corner for triage outcome (IJ, H, Med, Low)
- 6. Send copy to Licensing for their investigation

