

Complaint Investigation

STAFF'S NAME	DATE OF HIRE	PEER COACH'S NAME	DISTRICT
ON-SITE VISIT DATE(S) (MM/DD/YYYY)		ASSISTED LIVING FACILITY NAME	

Expectation:

It is expected that the new staff member would have participated in the RCS Orientation and be performing at an independent level at the re-inspection process.

Key Elements:

- Peer Coach (PC)

Place appropriate observed code next to each critical element. When appropriate, the Peer Coach should describe in the “notes sections” the event that led to the coding within the section and identify and add specific opportunities for growth in needed areas.

Progress Level Key:

PROGRESS LEVEL	CODE	DESCRIPTION
Observation Only	O	Observed survey; did not perform any tasks or elements.
Demonstrated with Coaching	DC	Required the availability of the PC to provide <u>directed</u> assistance and <u>identify</u> areas for improvement.
Demonstrated with Minimal Coaching	D	Required the availability of the PC to answer questions and give minimal direction.
Performed Independently	I	Performed the survey tasks and elements independently.
No applicable	NA	Element has previously been performed at the independent level or was not attempted.

1: Off-site Preparation

The purpose of the offsite preparation is to obtain as much information about the complaint before beginning to plan the investigation.

Staff Member Preparation:

- Review Management Bulletin 03-122.

Objectives / Critical Elements:

O DC D I NA

- Reviewed the complaint and identified the priority classification of the complaint.
- Reviewed and identified the issues within the complaint.
- Determined if and what further information needed to be obtained about the resident and/or staff involved.
- Contacted the complainant and verified the issues in the written complaint. Obtained and documented further information regarding the complaint.
- Developed a written plan of data gathering including information needed to make determinations about the issues within the complaint. The Peer Coach and/or the Field Manager reviewed the written plan. Identified the sequence of the information need to be obtained and practical methods of obtaining that information, i.e. interviews with specific individuals, specific logs, etc.
- Called the ombudsman to discuss other or on-going issues within the home as needed. Contacted the complaint investigator and/or licensor for previous issues and concerns.
- Reviewed the previous six months of complaints and inspection statement of deficiencies to identify possible trends or repeat issues.

NOTES

2. Introduction

Objectives / Critical Elements:

O DC D I NA

- On-site investigation was unannounced. Provider was not notified by phone of the upcoming on-site investigation.
- Introduced self and other team member(s) and gave business cards to the administrator or staff person present.
- Discussed in a general manner the purpose and expectations of the investigation inspection.
- Confidentiality of the complaint was kept and information was kept confidential. (CRU form was not brought into the home.)
- Requested current resident list and needed facility records appropriate to the issues.
- Built a working rapport with the provider and care-giving staff.
- Obtained a room for the team to work.

NOTES

3. Adult Living Facility Tour and Inspection

The purpose of this task is to determine what information is needed, and what sequence it should be obtained in to verify and/or substantiate the alleged issues within the complaint.

Objectives / Critical Elements:

O DC D I NA

- Conducted a focused physical environmental and resident tour. Focused on the complaint while looking at the general cleanliness, safety and comfort of the residents.
- Prioritized information gathering, obtained the most critical information first. Collected data to substantiate the licensors/complaint investigators conclusions.
- Identified the residents involved in the complaint. Identified from tour residents who may have the same issues and concerns.
- Performed appropriate observations, interviews and record reviews of resident, staff and home. Focused on the issue/issues in order to verify the allegation(s) within the complaint.
- Performed observations and interviewed the resident identified within the complaint.
- Documented questions and answers given in all interviews.
- Determined if the issues identified within the complaint happened or were substantiated.
- Determined if facility practices resulted in the issues outlined in the complaint. Determined if those practices were non-compliant according to the WACs.
- Conducted focused information gathering and/or closed record reviews for other residents at risk for the issue(s) as appropriate depending on the type of complaint.
- Made every effort to maintain confidentiality of the complainant throughout the investigation.
- Correctly determined the severity and scope of the non-compliance.
- Recorded information at the level needed for evidence for determination to be clear as to the home's compliance or non-compliance.

NOTES

4. Exit Preparation / Meeting

To assist the licensor to gather, organize and determine where the inconsistencies are and to resolve them with further data collection in order to determine if there are non-compliant facility practices and to prepare information to present at the exit. To inform the home of the observations and preliminary findings and deficiencies.

Objectives / Critical Elements:

O DC D I NA

- Reviewed recorded information for completeness of data related to the complaint issue and gathered further evidence if needed.
- Determined if the issue was verified to have or have not happened.
- Determined the compliance of the facility practice.
- Correctly determined severity and scope if non-compliance was verified.
- Appropriately identified and investigated any imminent danger that was found according to the principles and procedure in the enforcement Management Bulletin 02-017. Consulted with the Peer Coach and/or the Field Manager appropriately.
- Licenser and/or complaint investigator did not leave the home if immediate correction was warranted.
- Summarized findings clearly for licensee / provider and communicated timeframes clearly if the licensee was going to be cited. Identified the specific WAC / RCW references.
- Notified the licensee if the complaint was unsubstantiated and that there was no indication of deficient practice.
- Discussed the need for possible further data collection off-site. Discussed plan for further communication with provider.
- Answered questions the licensee had without revealing the specifics of the complaint or complainant or other resident(s) named within the complaint.

NOTES

5. Report Writing / Post Investigation Activities

The purpose of the statement of deficiencies is to provide written verification and documentation using the prescribed methods in principles of documentation, for the public, the facility and the residents and as a permanent record for the state enforcement agency.

Objectives / Critical Elements:

O DC D I NA

- If the home was found to have deficient practice, the SOD and cover letter were written following the Principles of Documentation and was clear, concise and within the timeframes for community programs. Editing was performed with the review tool.
- SOD was written using the correct WACs and RCWs.
- After the SOD review was completed by the Field Manager and/or Enforcement Officer, as appropriate, the SOD and the appropriate cover letter were forwarded to the Field Manager for Signature.
- Inspection, deficiencies were entered into the ALF Tracking System correctly and per timelines for data entry.
- The Investigation Summary was written within the guidelines for complaint summaries.
- The Complaint was entered into the Complaint Tracking System.
- Ensured that proper records of findings, events, process and agreements were maintained under guidelines established for retention of records. Working papers were completed, compiled and forwarded to administrative assistant.
- The complaint investigation, statement of deficiencies, complaint summary and the working paperwork required were completed within the required time requirements.
- The Statement of Deficiency and letters were sent to the Field Manager for review and signature.
- Follow-up visit was scheduled on licenser's schedule
- The Complaint Closure Face Sheet was completed.
- The complainant was contacted with the results of the investigation.

NOTES

6. Professional Manner

Check all that apply. Peer Coach may add other descriptors in the "other" box.

- | | |
|--|--|
| <input type="checkbox"/> Projects and promotes a positive image / attitude / working relationship | <input type="checkbox"/> Punctual |
| <input type="checkbox"/> Identifies areas of improvement and responds favorably to suggested actions for improvement | <input type="checkbox"/> Focuses on relevant and essential issues |
| <input type="checkbox"/> Stern | <input type="checkbox"/> Unsure / hesitant / indecisive |
| <input type="checkbox"/> Challenging | <input type="checkbox"/> Applies new concepts and techniques effectively |
| <input type="checkbox"/> Communicates effectively | <input type="checkbox"/> Strident |
| <input type="checkbox"/> Forceful / argumentative | <input type="checkbox"/> Condescending |
| <input type="checkbox"/> Tactful | <input type="checkbox"/> Assertive |
| <input type="checkbox"/> Other: | |

NOTES

- Staff Member brought the appropriate state statutes and regulations on inspection.
- Staff used the appropriate RCS approved forms.
- Goals for improvement:

PEER COACH'S SIGNATURE

DATE

STAFF MEMBER'S SIGNATURE

DATE

FIELD MANAGER'S SIGNATURE

DATE