

CANHR is a private, nonprofit 501(c)(3) organization dedicated to improving the quality of care and the quality of life for long term care consumers in California.

How To File a Nursing Home Complaint

Stage 1 - Filing the Complaint

Who Can File a Complaint?

Any person (not just residents or their family members) or organization can file a complaint about a nursing home with the Licensing and Certification Division of the California Department of Public Health (DPH). DPH is the state agency that enforces nursing home laws and regulations through regular inspections and complaint investigations. File a complaint with DPH when problems are serious and/or other steps to resolve your concerns have not been effective.

What Can I File a Complaint About?

You can file a complaint about abuse, neglect and any other matter protected by law. For example, you can file a complaint about violations of your rights, poor care, lack of staffing, unsafe conditions, mistreatment, improper charges, transfer and discharge concerns, and a failure to readmit you after a hospital stay.

In Addition to Filing a Complaint with DPH

Although you are not required to try other dispute remedies first, it is usually best to do so.

Start by communicating with staff of the facility or a [family council](#) if one exists. Another option is contacting the long term care ombudsman office in your county for assistance (<http://www.aging.ca.gov/Programs/LTCOP/Contacts>). The ombudsman program helps residents resolve concerns about their care and rights. The ombudsman does not have any powers or direct authority over the nursing home, however it can try to resolve the complaint with the nursing home, express concerns with outside officials and help you file a formal complaint with DPH.

If your concerns are not resolved, file a complaint with DPH.

Where Do I File a Complaint?

See the list of DPH Licensing and Certification district offices below to find the district office for your area.

How Do I File a Complaint?

Complaints may be made orally or in writing. If you phone in a complaint, follow up with a written complaint to ensure that there is a paper trail. Attached is a form you may use to file a complaint.

What Information Should I Include in My Complaint?

Taking notes or keeping a written log will enable you to retrieve specifics later. When writing a complaint, be brief, concise, and complete. No investigator wants to read a long letter to figure out what's going on. Stick with the facts ("the nurse hit my mother"), and avoid stating generalities or making legal conclusions such as "the facility is guilty of elder abuse."

Your complaint should include:

- Name and address of the facility
- Your name, address, phone number, and relation to the resident
- Name of the resident on whose behalf the complaint is made
- Date(s) and time(s) of incidents
- Specific complaints
- Names of witnesses (including other health care providers, such as hospital personnel or paramedics)
- Names of staff, if relevant to the complaint

- Records that should be examined

Stage 2 - Notifying Other Authorities of Your Complaint

Should I Notify Other Agencies or People About My Complaint?

Yes, other organizations may have authority to investigate your complaint or be able to give you advocacy support or information. Also, DPH may give your complaint better attention if it knows you have alerted other authorities. Send a copy of your complaint to CANHR, the local ombudsman office, and to:

- **Your California Assembly Member and Senator:** Your elected officials need to know what is happening in California's licensed facilities. They make the laws governing nursing homes and DPH. If DPH does not respond properly to your complaint, tell your legislators about your experience and urge them to take action. You can identify the Assembly Member and Senator for your district at: http://www.legislature.ca.gov/legislators_and_districts/legislators/your_legislator.html
- **The Bureau of Medi-Cal Fraud & Elder Abuse (BMFEA):** Send BMFEA a copy of your complaint if it involves serious neglect, abuse or Medi-Cal fraud. The BMFEA is a division of the California Attorney General's office and it investigates and prosecutes those who abuse and neglect elders and developmentally disabled residents in Medi-Cal funded facilities such as nursing homes and hospitals. Examples of abuse include a slap, multiple pressure ulcers, financial abuse (\$1000 or above), sexual abuse or verbal/mental abuse. There are three ways to file your complaint: (1) Call it in at 800-722-0432; (2) File your complaint on-line at <https://oag.ca.gov/bmfea/reporting>; or (3) Mail a copy of your complaint to the California Department of Justice, Office of the Attorney General, Bureau of Medi-Cal Fraud and Elder Abuse, P.O. Box 944255, Sacramento, CA, 94244-2550.

Stage 3 - Investigation

After You Have Made a Complaint - What Happens Next?

DPH must notify you of the name of the assigned investigator within two (2) working days of your complaint. It is a good idea to call the assigned investigator prior to the onsite investigation to ensure the investigator is familiar with the details of your complaint and to discuss the planned investigation.

Under California law, DPH must begin an onsite investigation of your complaint within ten (10) working days of receipt. If the complaint involves a threat of imminent danger of death or serious bodily harm, DPH must investigate onsite within 24 hours of receipt of the complaint.

As a result of a CANHR lawsuit, DPH is under court order to comply with the investigation timelines. CANHR is carefully monitoring its compliance with the court order. Please notify us if your complaint is not investigated within the above timelines.

As of July 1, 2016, DPH is also subject to timelines for completing complaint investigations. The following timelines are being phased in over a three year period.

- Investigations of complaints filed from July 1, 2016 through June 30, 2018 involving a threat of imminent danger of death or serious bodily harm must be completed within 90 days of receipt. In extenuating circumstances, the deadline can be extended by up to 60 days upon written notification to the complainant and facility.
- Investigations of complaints filed from July 1, 2017, through June 30, 2018 that do not involve threats of imminent danger of death or serious bodily harm must be completed within 90 days of receipt. In extenuating circumstances, the deadline can be extended by up to 90 days upon written notification to the complainant and facility.
- Investigations of all types of complaints filed on or after July 1, 2018 must be completed within 60 days of receipt. In extenuating circumstances, the deadline can be extended by up to 60 days upon written notification to the complainant and facility.

For complaints subject to the new completion deadlines, DPH must issue any citations resulting from its investigative findings within 30 days of completion of the complaint investigation. Citations are state fines that DPH can impose for certain types of violations.

What Are My Rights as a Complainant?

- You must be notified of the name of the assigned investigator within two working days of your complaint. California Health & Safety Code §1420(a)(1).
- You have the right to be free from retaliation for a complaint. California law prohibits a facility from discriminating or retaliating against a resident or employee who cooperates in an investigation. Any type of discriminatory treatment within 180 days after a complaint is filed is presumed to be retaliatory and is punishable by a civil fine of up to \$10,000. California Health & Safety Code §1432.
- You have the right to remain anonymous. California Health & Safety Code §1432(h). California law requires that DPH keep your identity (and that of any other person named in the complaint) anonymous to the facility. California Health & Safety Code §1419(e). In your complaint, you can also specifically request to remain anonymous. Please note that anonymity can sometimes make it difficult to substantiate a complaint.
- You have the right to accompany the investigator to the facility. If you wish to do so, include this request in your complaint. DPH should give you up to one-half working day notice of their scheduled, unannounced visit to the facility. Requests to accompany the investigator may not be granted if DPH determines that doing so would violate residents' privacy. California Health & Safety Code §1420(a).
- You have the right to a response. At the completion of its investigation, DPH must notify you in writing of its findings and of your right to appeal. California Health & Safety Code §1420(a)&(b).

Stage 4 - The Appeals Process

What If I'm Dissatisfied with DPH's Findings?

If you are dissatisfied with DPH's findings, you have the right to an informal conference. To request the informal conference, write to the DPH district office manager within 5 business days of receipt of the findings. The conference should be scheduled within 30 days of your appeal; you will meet with the DPH district manager (or designee) and possibly the nursing home administrator. Within 10 working days after the informal conference, DPH should notify both you and the facility of its determinations. You have the right to have an attorney with you.

What If I'm Dissatisfied with the Results of the Informal Conference?

If you are dissatisfied with the results of the informal conference, you may appeal to the Deputy Director at: California Department of Public Health, Center for Healthcare Quality, P.O. Box 997377, Sacramento, CA 95899-7377. To file this appeal, you have 15 days from receipt of the findings of the informal conference. A representative from the Complainant Appeals Unit will review the findings from the initial investigation and the informal conference. You have the right to request an interview with this representative. Based on the Appeals Unit review, the Deputy Director must make a final determination and notify you and the facility within 30 days. No further appeals are available through DPH.

Despite your legal right to appeal, DPH often ignores complainant appeals. If it does not respond to your appeal in a timely manner, call CANHR for advice.

Stage 5 - Ensuring Proper Investigation

Help! DPH Hasn't Gotten Back to Me in a While - What Do I Do?

If DPH does not keep you notified as detailed above, contact it to check on the status of your complaint. Know your complaint number, as well as the name and direct phone number of the investigator. Keep a timeline of all correspondence and communications with DPH.

If the assigned investigator is not responsive, work the DPH chain of command. Contact the investigator's supervisor, then the district manager if necessary. Advise the legislators for your district and the ombudsman office if they do not take appropriate action to address your concerns.

Call CANHR at 800-474-1116 to discuss additional advocacy steps if your complaint is not addressed to your satisfaction.

You can find your complaint and appeal rights in the California Health & Safety Code, Sections 1419 and 1420. The California Health & Safety Codes are available online at:

<http://leginfo.legislature.ca.gov/faces/codes.xhtml>

District Licensing and Certification Offices

(find the county where the nursing home is and send the complaint to the address for the associated district)

District Numbers, By County

Alameda	01	Kings	05	Placer	10	Shasta	03
Alpine	10	Lake	07	Plumas	03	Sierra	03
Amador	10	Lassen	03	Riverside	09	Siskiyou	03
Butte	03	Los Angeles	06	Sacramento	10	Solano	07
Calaveras	10	Madera	05	San Benito	14	Sonoma	07
Colusa	03	Marin	07	San Bernardino	11	Stanislaus	10
Contra Costa	01	Mariposa	05	San Diego	12/13	Sutter	03
Del Norte	07	Mendocino	07	San Francisco	04	Tehama	03
El Dorado	10	Merced	05	San Joaquin	10	Trinity	03
Fresno	05	Modoc	03	San Luis Obispo	15	Tulare	02
Glenn	03	Mono	11	San Mateo	04	Tuolumne	10
Humboldt	07	Monterey	14	Santa Barbara	15	Ventura	15
Imperial	12	Napa	07	No. Santa Clara	14	Yolo	10
Inyo	11	Nevada	03	So. Santa Clara	14	Yuba	03
Kern	02	Orange	08	Santa Cruz	14		

District Offices, By District Number

01 East Bay District Office

850 Marina Bay Parkway, Bldg. P, 1st Fl, Richmond, CA
94804-6403
(510) 620-3900 Toll Free (866) 247-9100
Fax: (510) 620-3924, (510) 620-5820

02 Bakersfield Office

4540 California Avenue, Suite 200 Bakersfield, CA 93309
(661) 336-0543 Toll Free (866) 222-1903
Fax: (661) 336-0529

03 Chico Office

126 Mission Ranch Blvd., Chico, CA 95926
(530) 895-6711 / (800) 554-0350 Fax: (530) 895-6723

04 San Francisco Office

150 North Hill Drive, Suite 22, Brisbane, CA 94005
(415) 330-6353 / (800) 554-0353 Fax: (415) 330-6350

05 Fresno Office

285 W. Bullard, Suite 101, Fresno, CA 93704
(559) 437-1500 / (800) 554-0351 Fax: (559) 437-1555

06 Los Angeles Office

12440 E. Imperial Highway, Room 522
Norwalk, CA 90650 (562) 345-6884 / (800) 228-1019
Fax: (562) 409-5096

07 Santa Rosa Redwood Coast District Office

2170 Northpoint Parkway, Santa Rosa, CA 95407
(707) 576-6775 / Toll Free: (866) 784-0703 Fax: (707) 576-2037

08 Orange County Office

681 S. Parker Street, Ste. 200, Orange, CA 92868
(714) 567-2906 / (800) 228-5234 Fax: (714) 567-2815

09 Riverside Office

625 East Carnegie Dr., Ste. 280
San Bernardino, CA 92408
(909) 388-7170 Toll Free: (888) 354-9203 Fax: (909) 388-7174

10 Sacramento Office

3901 Lennane Dr., Ste. 210, Sacramento, CA 95834
(916) 263-5800 / (800) 554-0354 Fax: (916) 263-5840

11 San Bernardino Office

464 West Fourth St., Ste. 529,
San Bernardino, CA, 92401
(909) 383-4777 / (800) 344-2896 Fax: (909) 888-2315

12 No. San Diego Office

7575 Metropolitan Dr., Ste 104, San Diego, CA 92108
(619) 278-3700 / (800) 824-0613 Fax: (619) 278-3725

13 So. San Diego Office

7575 Metropolitan Dr., Ste. 211, San Diego, CA 92108
(619) 688-6190 / Toll Free (866) 706-0759 Fax: (619) 688-6444

14 San Jose Office

100 Paseo de San Antonio, Ste. 235,
San Jose, CA 95113
(408) 277-1784 / (800) 554-0348 Fax: (408) 277-1032

15 Ventura Office

1889 N. Rice Avenue, Ste. 200, Oxnard, CA 93030
(805) 604-2926 / (800) 547-8267 Fax: (805) 604-2997

Nursing Home Complaint Form

Date Completed _____

Name of Complainant _____

Address _____ City _____ State _____ Zip _____

Phone 1 _____ Phone 2 _____ Email _____

Name of Facility _____

Facility Address _____ City _____

Name of resident on whose behalf the complaint is made: _____

Complaint (attach additional pages if necessary): _____

Date(s) of Incident(s) _____

Shift(s) when incident(s) occurred, if known:

Witnesses (including health care professionals): _____

Name(s) of Staff Person(s) (if incident involves action or lack of action by staff person(s)) _____

Records that should be examined _____

Mark all that apply:

- I have sent a copy of my complaint to the appropriate Licensing and Certification District Office of the Department of Public Health (see back of this form for a listing of these offices).
- I am sending CANHR a copy of this complaint.
- I am sending my California State Legislator a copy of this complaint.
- I have sent the Ombudsman Program a copy of this complaint.
- I am sending a copy to the Attorney General.
- I want to know the name of the investigator assigned to this complaint.
- I want to talk with the investigator before s/he visits the facility.
- I want to accompany the investigator during the complaint investigation.
- I want to remain anonymous. I do not want my name or identity known to the nursing facility.
- I want a copy of the complaint findings, and notice of my rights if I am not satisfied with the results.