SECTION VI

REPORTING SYSTEM
COMPLAINT REPORTING SYSTEM

A. INTRODUCTION

This section describes the quarterly reports that the community advisory committee members and chairpersons are required to submit to the regional long term care ombudsman.

These reports have been designed to comply with the requirements of the Administration on Aging and the North Carolina Division of Aging.

Receiving this information from the community advisory committee at the local level on individual cases is essential for identifying patterns of complaints made on behalf of residents as well as general information on the ombudsman program and its complaint resolution function. More specifically, it will help the Division of Aging to:

- Identify gaps in the existing standards and regulations so that appropriate action can be taken to facilitate change;
- Identify and analyze nursing home issues to be used for the development of proposed legislation;
- Determine if the ombudsman program is being implemented as planned;
- Measure quality of care in particular facilities.

B. REQUIRED REPORTS

1. Confidential Case Record Report should be filled out by the community advisory committee whenever a complaint is received. A “complaint” is defined as any issue/concern involving a resident in a nursing home or adult care home that the community advisory committee is asked to investigate and resolve. It is more than a friendly visit or an information and referral call.

   The Confidential Case Record Report requires documentation of information that starts from the time the complaint is received and continues through to the follow-up after the case has been closed.

2. Community Advisory Committee Quarterly/Annual Visit Worksheet is to be filled out by one of the community advisory committee members participating in the official quarterly visit to an adult care home and for the official annual visit to family care homes and DDA homes. One form
reflecting the consensus of the group should be completed for each home visited.

3. **Committee Members Activities Record.** Each community advisory committee member is encouraged to submit this information to the regional long term care ombudsman at the end of each quarter. This running log of activities will provide the ombudsman with information he/she needs in order to fill out his/her quarterly report to the Division of Aging as well as provide information regarding contributions by volunteers throughout the State.

4. **Consent Forms.** Permission shall be obtained to disclose the name(s) of any complainant and/or resident involved in a complaint prior to initiation of the complaint resolution process. The appropriate consent form(s), Resident Authorization Form (DHHS-DOA-9113), Complaint Authorization Form (DHHS-DOA-9114), Resident Oral Consent Form (DHHS-DOA-9115), the Third Party Authorization Form (DHHS-DOA-9116), Complaint Oral Consent Form (DHHS-DOA-9117), and/or Consent to Review Medical/Social Records (DHHS-DOA-9118) shall be completed and attached to the Case Record upon completion of the complaint resolution process. This information is forwarded to the regional long term care ombudsman for review and is placed in the regional long term care ombudsman’s confidential files.