Fact Sheet:
RCS Complaint Investigations: A Public Service

What is the Complaint Resolution Unit?
The law requires Residential Care Services (RCS) to investigate reports of abuse, abandonment, neglect, and misappropriation of resident funds. The RCS Complaint Resolution Unit (CRU) hotline accepts calls about nursing homes, assisted living facilities, adult family homes, institutions for persons with intellectual disabilities, and certified supported living settings. However, there is “no wrong door” in RCS. The CRU has the capability of referring calls about other settings to the appropriate agencies.

Depending on the nature and severity of your reported issues, calls may also be referred to local law enforcement, licensing boards, Medicaid Fraud, county prosecutors and sheriffs, and the RCS Resident Client Protection Program.

By law, RCS investigative visits to the home or facility are never announced. The name of the person that reported the issue is never shared with the home or facility.

Hotline callers (i.e. “complainants”) are our partners in helping to protect residents in residential long-term care settings.

Investigation Process
The complainant’s concerns are typed onto an intake form and assigned a complaint number. The intake form is sent by the Complaint Resolution Unit (CRU) to the district field office responsible for investigating the home or facility identified by the complainant.

The investigator will interview, observe and review the records of several vulnerable adults. This allows the investigator to conceal the alleged victim’s identity, protect the identity of the person reporting the concern, and to determine if other vulnerable adults are at risk.

The investigator analyzes the information gathered and determines if the home or facility is in compliance with regulations. There may be times when things have happened or will happen that are not covered by these regulations. If this is the case, it may mean that the complainant needs to continue to directly communicate with the facility about the issues that are of concern.

The investigator will write a report summarizing the investigation findings and conclusions. A copy of the investigative report will be mailed to the complainant, if requested.
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RCS Investigative Authority
Long-term care licensing regulations provide guidance to licensees who provide care and services for vulnerable adults. The regulations address many important areas, but not all issues that impact a resident are potential regulatory violations. The regulations establish standards and provide details about what residents should expect from the provider. When RCS conducts a complaint investigation, we are checking to see if the home or facility was in compliance with specific requirements that are part of the regulations, and that govern licensed residential settings.

What Happens if a Violation is Found?
If the investigator identifies a violation of the regulations, a deficiency report is written and sent to the licensee. By law, the licensee is required to correct the problems that are identified in the deficiency report. Depending on the severity of the deficiency, and the number of residents impacted by the deficiency, RCS may also take additional enforcement action. There are a number of enforcement actions that the law authorizes RCS to use, ranging from requiring the licensee to pay a civil fine, to permanent removal of a license. As part of this process, facilities are provided the opportunity to appeal deficiencies.

Investigation Reports
After each investigation, the investigator writes a report that summarizes the investigation findings and conclusions. If requested, the complainant will receive a copy of this report. It will reflect if regulations were met or not met, based upon the concerns raised in the call to the hotline. If the facility or home received a deficiency report, the complainant will also receive a copy of that report, called the “Statement of Deficiencies”.

Common Questions
Q: I am a complainant; what if I have a question about the investigation of the concerns I reported?
A: Please call the Field Manager listed in your letter and reference your intake ID #.

Q: What days and hours can I expect to reach the Complaint Hotline?
A: The hotline is accessible 24 hours a day, seven days a week for reporting purposes. Hotline staff process calls Monday through Friday between the hours of 8 am and 4:30 pm.

Q: What if I have an emergency or need to report life-threatening issues?
A: Please call 911 for local law enforcement and emergency service help.

Additional Resources
Long-Term Care Ombudsmen advocate for the rights of vulnerable adults in long-term care facilities. Ombudsmen help residents and their families to address concerns with facility owners and administrators.

Call 1-800-562-6028 for assistance in reaching an ombudsman in your area.

Call 911 for crimes, physical or sexual abuse or a life threatening emergency.

Visit us online at www.adsa.dshs.wa.gov for information about licensed long-term care settings and recognizing and reporting abuse and neglect.