



# Filing Complaints RCFE / Assisted Living

## Who Investigates Complaints?

Community Care Licensing (CCL) of the Department of Social Services, has the regulatory responsibilities to: issue licenses; conduct periodic inspections to ensure that minimum standards are maintained; investigate complaints; and enforce the laws and regulations by issuing civil penalties and administrative sanctions when necessary. In situations where the health and safety of residents are in danger, the licensing agency also has the authority to revoke or place under probation a facility's license.

## Who Has a Right to File a Complaint?

Any person (not just residents or family members) or organization has the right to file a complaint with Community Care Licensing.

## What Can I File a Complaint About?

You have a right to file a complaint about abuse, neglect, inadequate staffing, poor food, mistreatment of residents, eviction issues, and other matters protected by law.

## When Should I File a Complaint?

It is usually helpful to try to resolve your concerns by first bringing them to the attention of the facility administration. (See CANHR's Fact Sheet on Self-Advocacy.) When efforts at informal problem solving have not worked, it might be necessary to file a formal complaint with either the Ombudsman Program and/or with Community Care Licensing.

File a complaint with licensing **when there are serious concerns**, (e.g., alleged violations of resident rights, elder abuse) or **when there are persistent problems**, (e.g., inadequate staff in terms of numbers, training and skill, poor quality food, etc.).

## How long will the investigation take?

CCL must begin the investigation within 10 working days from receipt of the complaint. However, that does not mean the investigation will be resolved in 10 days. Some investigations do take longer than others, depending on the severity of the case. If you do not hear back from CCL, you should make a follow-up phone call.

## Where Do I File a Complaint?

**Call, write or fax the nearest Community Care Licensing Senior Care Program Office.** If you call in the complaint, it is a good idea to follow up the call with a written statement of your concerns. CANHR's RCFE Complaint Form is one effective way to document your concerns.

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Also, send a copy of the complaint to CANHR and to the California State Legislators who represent your district (<http://www.leginfo.ca.gov/yourleg.html>). If the complaint involves serious neglect or abuse, contact the Bureau & Medi-Cal Fraud & Elder Abuse (BMFEA), a division of the California Attorney General's Office: 1-800-722-0432; <http://ag.ca.gov/bmfea/>; or mail BMFEA, P.O. Box 944255, Sacramento, CA 94244-2550.

## How Do I Make an Effective Complaint?

**Provide a clear statement of your concerns and as much documentation as possible.** Use the RCFE Complaint Form to help organize your thoughts and the facts, thoroughly documenting your concerns.

In completing the form or submitting your own written statement, consider the following points:

- Make sure that you clearly state your name, address, telephone, fax, pager, email etc.
- Identify the name(s) of the resident(s) affected.
- State the name and address of the care facility and the names and titles, if relevant, of the administrator, supervisor(s) and all direct care staff involved in the incident(s).
- Describe what happened. Avoid stating conclusions—that is the licensing agency's responsibility after investigating the facts.
- Be an objective reporter. Stick to the facts by stating what was said, what was done or not done, when, where and by whom.
- Organize events in a chronological order, i.e., what happened on a certain date and time, then what happened next, etc.
- Indicate the names and titles of any witnesses to the event(s).
- Provide names of other persons who might have knowledge of the resident.
- Suggest any other agencies, (e.g., home health) that need to be contacted or records, (e.g., hospital) that need to be examined.

## What Are My Rights as a Complainant?

Besides the right to file a complaint by phone, fax and/or in writing, **the complainant has a right to have his/her name held in confidence and not disclosed to the facility.** The complainant even has the right to remain anonymous to either the licensing agency or the Ombudsman Program although this is not helpful in conducting a thorough investigation. **The complainant has the right to be free from threats or retaliation by the facility.** Unfortunately, this fear of retaliation is a major barrier to timely reporting of care concerns and to filing complaints with either the licensing agency or the Ombudsman Program.

**Community Care Licensing is responsible to inform the complainant of licensing's proposed plan of action and to share with the complainant a written report of the findings of their investigation.**

If you are dissatisfied with the timing, thoroughness or results of the investigation, call or write the investigators supervisor or district manager at CCL.

*The most pertinent laws are found in California Health and Safety Code, Sections 1569.35, 1569.37.*

**RESIDENTIAL CARE FACILITIES FOR THE ELDERLY (RCFE) COMPLAINT FORM**

Name of Person Filing Complaint \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_ Evening Tel. # \_\_\_\_\_

Name of Facility \_\_\_\_\_ Tel.# \_\_\_\_\_

Address of Facility \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name(s) of Resident(s) on Whose Behalf the Complaint is Being Made: \_\_\_\_\_

Summary of the Complaint: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date(s) of Incident(s) \_\_\_\_\_

Shift(s) When Incident(s) Occurred:  Day  Afternoon  Night Time(s): \_\_\_\_\_

Witness(es): \_\_\_\_\_

Name of Staff Person(s) Involved: \_\_\_\_\_

\_\_\_\_\_

Records that Should be Examined: \_\_\_\_\_

Check ALL that apply:

- I have sent a copy of my complaint to **Community Care Licensing**. *(See back for listing.)*
- I have sent the **Ombudsman Program** a copy of this complaint.
- I am sending **CANHR** a copy of this complaint.
- I am sending my **California State Legislator** 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 starts the investigation.
- I want my **identity to remain confidential** (i.e. not revealed to care facility).
- I want a **copy of the final complaint report**.



**COMMUNITY CARE LICENSING DIVISION  
ADULT AND SENIOR CARE PROGRAM  
SENIOR CARE OFFICES**

**NORTHERN CALIFORNIA SENIOR CARE LICENSING OFFICE**

Donna Teutschel, Regional Manager  
Vacant, Licensing Program Manager  
101 Golf Course Drive, Suite A-230, MS 29-11  
Rohnert Park, CA 94928  
Telephone: (707) 588-5026; FAX: (707) 588-5080  
Counties: Humboldt, Del Norte, Lake, Marin, Mendocino, Napa, Solano, and Sonoma

**SACRAMENTO SENIOR CARE LOCAL UNIT**

Michael Smith, Licensing Program Manager  
George Mabanglo, Licensing Program Manager  
2525 Natomas Park Drive, Suite 270, MS 19-35  
Sacramento, CA 95833  
Telephone: (916) 263-4700; FAX: (916) 263-4744  
Counties: Amador, Calaveras, El Dorado, Nevada, Placer, Sacramento, San Joaquin, Stanislaus, Tuolumne and Yolo

**CHICO SENIOR CARE LOCAL UNIT**

Michael Smith, Licensing Program Manager  
520 Cohasset Road, Suite 170, MS 29-05  
Chico, California 95926  
Telephone: (530) 895-5033; FAX: (530) 895-5934  
Counties: Butte, Colusa, Glenn, Lassen, Modoc, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity and Yuba

**CENTRAL CALIFORNIA SENIOR CARE LICENSING OFFICE**

Carol Marcroft, Regional Manager  
Suzanne Roman-Clark, Licensing Program Manager  
Pam Gill, Licensing Program Manager  
Vacant, Licensing Program Manager  
851 Traeger Avenue, Suite 360, MS 29-16  
San Bruno, California 94066  
Telephone: (650) 266-8800; FAX: (650) 266-8841  
Counties: Alameda, Contra Costa, San Francisco, and San Mateo

**FRESNO SENIOR CARE LOCAL UNIT**

Shelley Evans, Licensing Program Manager  
770 East Shaw Avenue, Suite 330, MS 29-02  
Fresno, California 93710  
Telephone: (559) 243-8080; FAX: (559) 243-8088  
Counties: Alpine, Fresno, Inyo, Kern, Kings, Madera, Mariposa, Merced, Mono, and Tulare

**SAN JOSE SENIOR CARE LOCAL UNIT**

Susan Meyer, Licensing Program Manager  
2580 North First Street, Suite 350, MS 29-07  
San Jose, California 95131  
Telephone: (408) 324-2112; FAX: (408) 324-2133  
Counties: Monterey, San Benito, Santa Clara, and Santa Cruz

**GREATER LOS ANGELES SENIOR CARE LICENSING OFFICE**

Kit Chan, Regional Manager  
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Jeralyn Pfannenstiel, Licensing Program Manager  
Carol Levenson, Licensing Program Manager  
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Telephone: (818) 596-4334; FAX: (818) 596-4376  
Counties: Los Angeles, Santa Barbara, Ventura, and San Luis Obispo

**SANTA BARBARA SENIOR CARE LOCAL UNIT**

Vacant, Licensing Program Manager  
6500 Hollister Avenue, Suite 200, MS 29-09  
Goleta, CA 93117  
(805) 562-0400 FAX: (805) 685-1820  
Counties: Santa Barbara, Ventura, and San Luis Obispo

**SOUTHERN CALIFORNIA SENIOR CARE LICENSING OFFICE**

Myron Taylor, Regional Manager  
Gladys Figueroa, Licensing Program Manager  
Edna Musoke, Licensing Program Manager  
7575 Metropolitan Drive, Suite 109, MS 29-06  
San Diego, California 92108  
Telephone: (619) 767-2300; FAX: (619) 767-2252  
Counties: Imperial, Orange, San Diego, Riverside, and San Bernardino

**ORANGE SENIOR CARE LOCAL UNIT**

Richard Ealy, Licensing Program Manager  
Alysha Loumakis-Calderon, Licensing Program Manager  
770 The City Drive, Suite 7100, MS 29-28  
Orange, California 92868  
Telephone: (714) 703-2840; FAX: (714) 703-2868  
Counties: Orange

**RIVERSIDE SENIOR CARE LOCAL UNIT**

Sylvia Lucero, Licensing Program Manager  
Robert Manos, Licensing Program Manager  
3737 Main Street, Suite 600, MS 29-26  
Riverside, California 92501  
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Counties: Riverside and San Bernardino

**STATEWIDE ADULT & SENIOR CARE PROGRAM OFFICE**

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