



**California Department of Public Health**  
 Center for Health Care Quality  
 Licensing and Certification Program

**Field Operations**  
Long-Term Care Health Facility Complaints  
 Data as of **December 31, 2014 (through Quarter 2, SFY 2014-15)**

**VOLUME**

	A	B	C	D
Reporting Period	Complaints Received During Reporting Period	Complaints Completed During Reporting Period (Regardless of Receipt Date)	Growth/Reduction in Open Complaints by Reporting Period	Open Complaints Remaining by Reporting Period Received
<b>Current State Fiscal Year</b>				
2014-2015, Cumulative through Quarter 2	3,514	3,065	449	1,961
<b>Previous State Fiscal Years</b>				
2013-2014	6,508	6,676	-168	1,410
2012-2013	6,412	6,737	-325	605
2011-2012	6,161	5,986	+175	352
<b>Totals</b>	<b>22,595</b>	<b>22,464</b>	<b>131</b>	<b>4,502 *</b>

This table identifies the number and growth or reduction in open cases related to Skilled Nursing Facilities, Intermediate Care Facilities (including those serving the Developmentally Disabled), Congregate Living Health Facilities, and Pediatric Day Health and Respite Care Facilities. Licensing and Certification Program's Field Operations considers a case completed when it has fully completed the investigation and documented the case as completed in its database.

Table Notes:

- Column A shows the number of new complaints Field Operations received during the respective reporting period.
- Column B shows the number of complaints Field Operations completed during the respective reporting period, regardless of the reporting period in which the complaint was received.
- Column C shows the difference between complaints received and complaints completed during the respective reporting period (C=A-B). When the value of Column C is positive, the number of open complaints increased during that reporting period. When the value of Column C is negative, the number of open complaints decreased.
- Column D shows the number of complaints received in a given reporting period that Field Operations has not completed as of the current reporting period. This does include some cases where the investigation has been fully completed, however the case may not have been closed in the database.

\*There are 174 open complaints received prior to Fiscal Year 2011-2012, for 4,502 (4,328+174) open complaints as of January 1, 2015.



**California Department of Public Health**  
 Center for Health Care Quality  
 Licensing and Certification Program

**Field Operations**  
Long-Term Care Health Facility Complaints  
 Data as of **December 31, 2014 (through Quarter 2, SFY 2014-15)**

**TIMELINESS**

Reporting Period	A	B	C		D		E	F	G				J			
	Complaints Received During Reporting Period	Complaints Completed During Reporting Period (Regardless of Receipt Date)	Immediate Jeopardy (IJ)		Non-Immediate Jeopardy				Number of Complaints Completed During Reporting Period by Working Days from Receipt to Completion				Complaints Completed by Working Days from Receipt to Completion, as a Percentage of Total Completed			
			(24 hours)		(10 working days)				≤90	91-180	181-365	>365	≤90	91-180	181-365	>365
		Number Received	Percent Initiated Timely	Number Received	Percent Initiated Timely											
<b>Current State Fiscal Year</b>																
2014-2015, Cumulative through Quarter 2	3,514	3,065	287	96%	3,111	96%	2,141	372	258	294	70%	12%	8%	10%		
<b>Previous State Fiscal Years</b>																
2013-2014	6,508	6,676	347	96%	5,797	97%	4,012	844	690	1,130	60%	13%	10%	17%		
2012-2013	6,412	6,737	226	99%	5,671	98%	4,029	1,023	790	895	60%	15%	12%	13%		
2011-2012	6,161	5,986	237	97%	5,480	97%	3,399	1,030	647	910	57%	17%	11%	15%		

This table identifies how long it takes Licensing and Certification Program's Field Operations to initiate and complete complaint cases related to Skilled Nursing Facilities, Intermediate Care Facilities (including those serving the Developmentally Disabled), Congregate Living Health Facilities, and Pediatric Day Health and Respite Care Facilities. Licensing and Certification Program's Field Operations considers a case complete when it has fully completed the investigation and documented the complaint as completed in its database.

Table Notes:

- Column A shows the number of new complaints Field Operations received during the respective reporting period.
- Column B shows the number of complaints Field Operations completed during the respective reporting period, regardless of the reporting period in which the complaint was received.
- Columns C and D show the number of Immediate Jeopardy (IJ) complaints received, and the percentage of those received that Field Operations initiated within 24 hours during the respective reporting period. (This includes all complaints prioritized as level A by federal requirements upon intake.)
- Columns E and F show the number of Non-IJ (this includes all complaints prioritized as levels B-E by federal requirements upon intake) complaints received that require an investigation, and the percentage of those received that Field Operations initiated within 10 working days during the respective reporting period.
- Columns G through J show the number of open complaint cases completed during the reporting period, by interval (G+H+I+J=B.)
- Columns K through N show the percentage of open complaint cases completed during the reporting period, by interval (K=G/B, L=H/B, M=I/B, N=J/B.) Numbers may not add to 100 due to rounding.

\*Health and Safety Code section 1420(a) (1) requires the onsite investigation of a complaint that involves imminent danger of death or serious bodily harm to be initiated within 24 hours of receipt; and requires investigation of a complaint that does not involve a threat of immediate danger of death or serious bodily harm to be initiated within 10 working days.



**California Department of Public Health**  
 Center for Health Care Quality  
 Licensing and Certification Program

**Field Operations**  
Long-Term Care Health Facility Complaints  
 Data as of **December 31, 2014 (through Quarter 2, SFY 2014-15)**

**DISPOSITION**

	A	B	C	D	E	F	G	H
Reporting Period	Complaints Received During Reporting Period	Complaints Completed During Reporting Period (Regardless of Receipt Date)	Unsubstantiated Complaints	Substantiated Complaints	Substantiated Complaints as a Percentage of Total Complaints Completed	Total Deficiencies for All Substantiated Complaints	Average Deficiencies per Substantiated Complaint	Number of Complaints Referred to Other Entities
<b>Current State Fiscal Year</b>								
2014-2015, Cumulative	3,514	3,065	1,700	1,220	40%	1,535	1.26	149
<b>Previous State Fiscal Years</b>								
2013-2014	6,508	6,676	3,437	2,788	42%	3,373	1.21	242
2012-2013	6,412	6,737	3,220	2,976	44%	3,183	1.07	188
2011-2012	6,161	5,986	2,951	2,583	43%	3,042	1.18	136
<b>Totals</b>	<b>22,595</b>	<b>22,464</b>	<b>11,308</b>	<b>9,567</b>	<b>43%</b>	<b>11,133</b>	<b>1.16</b>	<b>715</b>

This table identifies the disposition of completed complaint investigations related to Skilled Nursing Facilities, Intermediate Care Facilities (including those serving the Developmentally Disabled), Congregate Living Health Facilities, and Pediatric Day Health and Respite Care Facilities. Licensing and Certification Program's Field Operations may identify one or more deficiencies (violations of statutory or regulatory requirements) for a "substantiated" complaint.

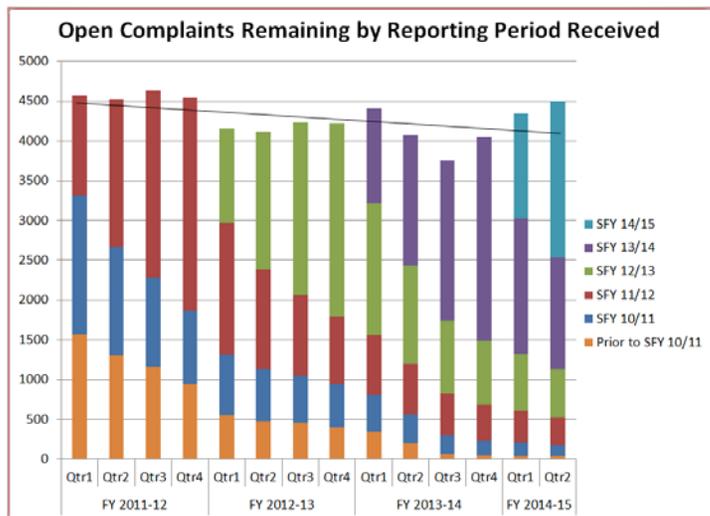
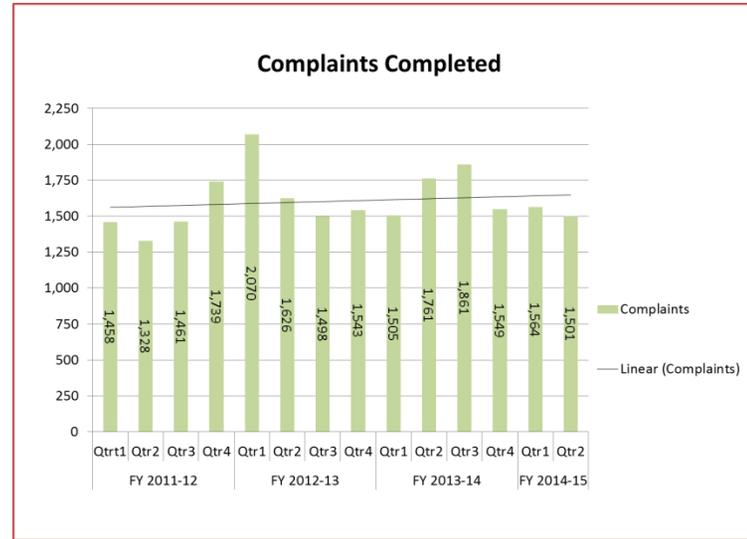
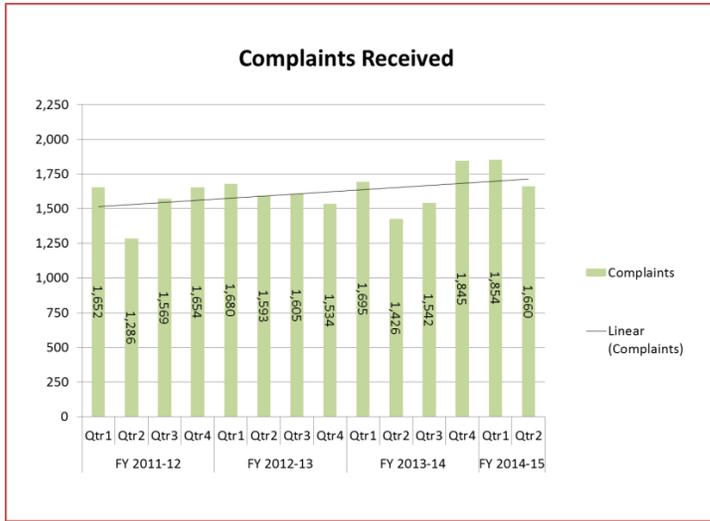
Table Notes:

- Column A shows the number of new complaints Field Operations received during the respective reporting period.
- Column B shows the number of complaints Field Operations completed during the respective reporting period, regardless of the reporting period in which field operations received the complaint.
- Columns C and D show the number of unsubstantiated and substantiated complaints completed in a given reporting period.
- Column E shows the number of substantiated complaints completed as percentage of all substantiated complaints completed in a given reporting period ( $E=D/B$ .)
- Column F shows the number of deficiencies Field Operations issued for all complaints completed in a given reporting period.
- Column G shows the average number of deficiencies for each substantiated complaint in a given reporting period ( $G=F/D$ .)
- Column H shows the number of complaints received in the given reporting period for which the electronic data file shows Field Operations referred the complaint to an outside entity. These figures are likely understated as a result of inconsistent data entry.



**California Department of Public Health**  
 Center for Health Care Quality  
 Licensing and Certification Program

**Field Operations**  
Long-Term Care Health Facility Complaints  
 Data as of **December 31, 2014 (through Quarter 2, SFY 2014-15)**

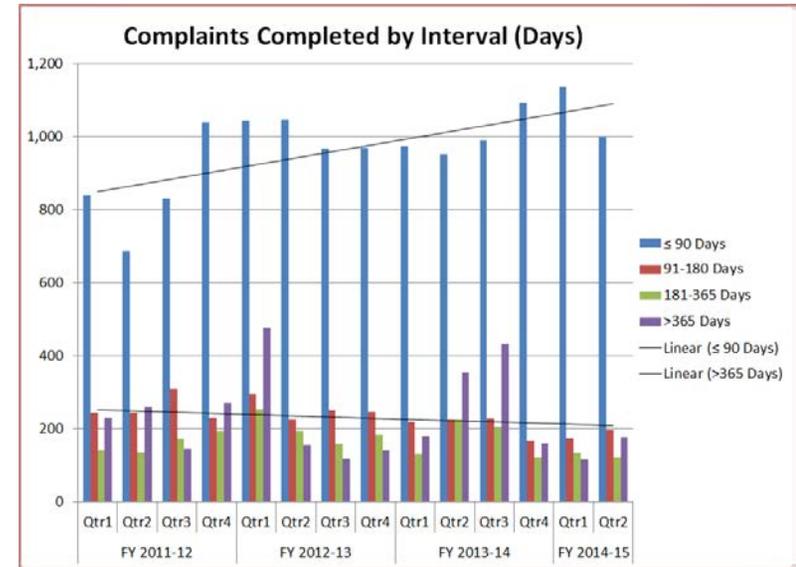
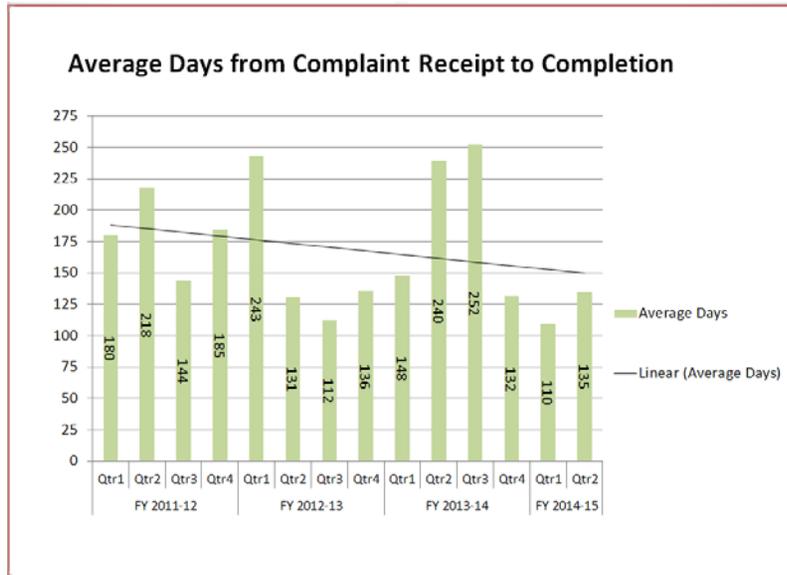


**Summary:** The trend in the number of complaints received and the trend in the number of complaints completed is increasing. Although the number of complaints open at the end of each reporting period is increasing, the overall trend in open cases is decreasing.



**California Department of Public Health**  
 Center for Health Care Quality  
 Licensing and Certification Program

**Field Operations**  
Long-Term Care Health Facility Complaints  
 Data as of **December 31, 2014 (through Quarter 2, SFY 2014-15)**



**Summary:** There is a downward trend in the average number of business days to complete a complaint investigation.

The “Complaints Completed by Interval (Days)” chart shows the number of cases completed, by “days to complete” intervals (≤90 days, 91-180 days, 181-365 days, >365 days.) There is an increasing trend in the number of cases completed in 90 days or less. In the last reporting period, Field Operations focused on completing complaint cases received less than 180 days and more than 365 days.