Revision: HCFA-PM-92-3 (HSQB)

APRIL 1992

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Nebraska

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Process for Investigations of Complaints and Monitoring

The State has in effect the following process for investigating complaints of violations of requirements by nursing facilities and monitors onsite on a regular, as needed basis, a nursing facility's compliance with the requirements of subsection (b), (c), and (d) for the following reasons:

- (i) the facility has been found not to be in compliance with such requirements and is in the process of correcting deficiencies to achieve such compliance;
- (ii) the facility was previously found not to be in compliance with such requirements and has corrected deficiencies to achieve such compliance and verification of continued compliance is indicated; or
- (iii) the State has reason to question the compliance of the facility with such requirements.

The Nebraska Department of Health and Human Services (DHHS) conducts complaint investigations of nursing facilities licensed and/or certified by the DHHS as mandated by state law, using the following process:

- 1. Intake of Complaints: Complaints may be submitted in writing, by telephone, or in person. They may come from individuals receiving services, their responsible parties or other interested persons, or may be referred from the Regional Office, other State agencies, Federal agencies, or private organizations.
- 2. A central log is maintained by Health Facilities Investigations listing all complaints received by the Division of Public Health. Complaints are logged by support staff and allegations are written by the Complaint Intake staff or Office Administrators. These are assigned to the surveyors. The surveyors schedule the date of the complaint investigation based on the complaint prioritization.

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- 3. The investigation proceeds as follows:
 - a. The investigation is NOT pre-announced to the facility.
 - b. Surveyors identify themselves to the person in charge of the facility and announce the purpose of the visit before beginning the visit.
 - c. The identity of the complainant is not revealed unless the complainant has given specific consent.
 - d. The surveyors conduct a partial survey focusing on the specific licensure and/or certification requirements(s) related to the allegation. This includes reviewing appropriate samples of residents, rooms, records, etc., to adequately assess compliance with applicable requirements (See SOM 3281).
- 4. A written report of the visit is submitted on each complaint investigated. If deficiencies are written, surveyors may schedule a follow-up visit after receipt of an acceptable plan of correction.

TN #. <u>MS-08-08</u> Supersedes TN #. <u>MS-92-23</u>

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