LTCOP Complaint Response Timeline

*These standards are best practices that all local LTCOPs strive to meet. However, there may be some situations in which local LTCOPs are unable to meet these standards. The LTCOP is not a first responder. A caller with a complaint that is an emergency will be asked to provide information, as appropriate, for LTCOP follow-up and advised to call 9-1-1 for immediate assistance.*

<table>
<thead>
<tr>
<th>If incoming call is...</th>
<th>And the complaint involves...</th>
<th>Then the standard of promptness for local LTCOP response is...</th>
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<tbody>
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<td><strong>EMERGENCY</strong></td>
<td><em>Examples include but are not limited to:</em></td>
<td>Gather the following minimum information from the caller/complainant:</td>
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<td>The LTCO staff member or volunteer, based on the information provided, reasonably believes that the situation constitutes immediate danger to the health and safety of a resident of a long-term care facility and requires an immediate response.</td>
<td>• Physical or sexual abuse that is occurring or has just occurred&lt;br&gt;• Neglect that currently endangers the resident&lt;br&gt;• Illegal discharge, eviction, involuntary relocation or transfer from LTC facility occurring immediately&lt;br&gt;• Lack of critical care (i.e. not following doctor’s orders, not administering prescribed pain medicine or insulin, etc.) resulting in current pain or illness to the resident&lt;br&gt;• Lack of food, hydration or water that is causing the resident to be physically ill currently&lt;br&gt;• Excessively hot or cold temperature in the facility that is currently causing residents to feel sick</td>
<td>• Name of the caller or complainant&lt;br&gt;• Relationship to the resident, if caller or complainant is not the resident&lt;br&gt;• Phone number of the caller or complainant&lt;br&gt;• Name and phone number of the resident (if other than the caller)&lt;br&gt;• Name of the LTC facility&lt;br&gt;• Details of the complaint</td>
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**For INTAKE** ([INTAKE is when a LTCOP staff or volunteer receives a complaint made by or on behalf of a resident of a long-term care facility. Complaints can be received via direct call, fax, email, telephone message, or in-person.](#))

- **When a complaint is received via direct call,** gather the minimum information listed above, as appropriate, and advise the complainant to hang up and call 9-1-1 for emergency services.

- **For the FIRST ACTION** ([FIRST ACTION is contact, either by telephone or in-person, or documented attempts to contact, the complainant by a certified Ombudsman representative.](#))

  A certified Ombudsman representative will contact the complainant as soon as possible, during normal business hours, but no later than twenty-four (24) hours after complaint intake.
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| **URGENT**             | Examples include but are not limited to:  
  - A current threat of abuse or a threat that has just happened  
  - A threat of imminent illegal discharge or transfer from a long-term care facility  
  - Increasing level(s) of neglect that may cause harm to residents | **For INTAKE**  
  *When the complaint is received via direct call,* gather the minimum information listed under emergency calls.  
  **For the FIRST ACTION**  
  A certified Ombudsman representative will contact the complainant *as soon as possible,* during normal business hours, *but no later than twenty-four (24) hours after complaint intake.* |
| **NON-URGENT**         | Examples include but are not limited to complaints about:  
  - Activities that are not appropriate for each resident or where activity variety is limited  
  - Billing errors or overcharges  
  - Roommate conflict that does not constitute abuse  
  - Poor quality or limited variety in food | **For INTAKE**  
  *When the complaint is received via direct call,* gather the minimum information listed under emergency calls.  
  **For the FIRST ACTION**  
  A certified Ombudsman representative will contact the complainant *as soon as possible,* during normal business hours, *but no later than two (2) working days after complaint intake.* |