LONG TERM CARE FACILITY
COMPLAINT PROCEDURE

1. Any person with personal knowledge or substantial specific information who believes
State or Federal regulations have been violated may file a complaint.

2. A complaint may be made in writing, by telephone, e-mail or in person.

3. The name of the complainant shall remain confidential unless otherwise indicated by the
complainant.

4. If a regulatory concern is alleged to have been violated, the department shall schedule
an unannounced investigation, and shall make written findings available.

5. A written report shall be provided to the complainant and the facility after the findings
are made. The investigative report may be sent to one other person at the request of the
complainant.

6. The investigative report shall include the following:
   (a) Nature of the allegation(s).
   (b) Written findings.
   (c) Deficiencies, if any, related to the complaint investigation.
   (d) Other relevant information.

7. Information in #5 above shall be available to the public.

Complaint contact information: Long Term Care
                        Intake and Incident Division
Mailing address: Oklahoma State Department of Health
              Protective Health Services - 0501
                1000 NE 10th Street
                Oklahoma City, OK 73117-1299
E-mail address: LTCComplaints@health.ok.gov

Telephone: 1-800-747-8419 or (405) 271-6868
          Fax: 1-866-239-7553 or (405) 271-4172

Authorized by: Terry Cline, Ph.D.
               Commissioner
               Secretary of Health and Human Services

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