Entrance Conference Checklist
Complaint Investigation

Name of Legal Entity	Contract No.	Date	Dates of Review Period

Explain:

☐ Purpose of the visit.

Provide:

☐ Form 2151, Sample List.

Request as Applicable:

☐ Name of contact person who will be available during the investigation process: _____

☐ Individual service notes related to the review period.

☐ Documentation of background checks for unlicensed attendant(s)/employee(s) hired during the review period.

☐ Documentation to establish that all attendants meet requirements.

☐ Lists of vendors used for medical supplies and adaptive aids with the justification for the selection of those vendors.

☐ Specifications, bids, invoices and all other associated documentation for adaptive aids and minor home modifications.

☐ Copy of Form 3647, Assisted Living Disclosure Statement.

☐ Current facility floor plan.

☐ Complaint Log.

☐ Policy and procedure for conducting investigations.

☐ Other: _____

As the investigation is in progress, I may request additional documents. These documents will need to be provided within one hour from the time of the request.

_____ _____
Signature – Contract Staff/Investigator Date

_____ _____ _____
Signature – Contract Representative Title Date