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|  | | Policy/Procedure Type: <input type="checkbox"/> Governance/Leadership <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Departmental: | Policy Number: ADM 10.024 |
| Subject: | Patient Complaints and Grievance Procedures | | |
| Section: | | | |
| Approval Date: 09/01/2015 | Effective Date: 09/01/2015 | Last Review Date: | |
| <input checked="" type="checkbox"/> New Policy | | <input type="checkbox"/> Supersedes Policy Dated: | |
| Issued by: Claudia Garcia MBA, BSN, RN - <i>COO</i> <i>Family Services / Program Director</i> | | Concurred with or Approved by: David Cummins, MD, Diplomate ABAM - <i>CMO</i> Rodrigo Garcia , MS, MBA, RN, CRNA - <i>CEO</i> | |

I. PURPOSE:

Parkdale Center places a high value on delivering excellent service that is responsive to individual needs. This policy provides a mechanism for initiation, review and, when possible, prompt resolution of patient complaints concerning the quality of care or service received.

II. DEFINITIONS:

- A. **“Complaint”** means an oral or written expression of displeasure or dissatisfaction with service received that can be immediately resolved by the staff present.
- B. **“Grievance”** means an oral or written complaint that is not immediately resolved at the time of the complaint by staff present. A grievance may be made by the patient or the patient’s representative regarding, but not limited to, the patient’s care, abuse or neglect, complaints related to not meeting needs based on disability, issues related to Parkdale Center’s compliance with the beneficiary billing and complaint related to rights and limitations provided by 42 CFR 489 (although other billing issues are not usually considered Grievances). A written complaint is always considered a grievance and may be submitted by fax, email or personal letter and mailed. Whenever the patient or the patient’s representative requests that the complaint be handled as a formal complaint or grievance, or when the patient requests a response from Parkdale, then the complaint is a grievance. A patient’s attorney is considered a patient representative. Except for any Notice of Malpractice Suit, all communications from a patient’s attorney that meet the definition of a grievance must be treated as a grievance under this policy.
- C. **“Staff Present”** means any Parkdale Center staff present at the time of a complaint or who can quickly be at the patient’s location (*i.e.*, nursing, administration, nursing supervisors, patient advocates, etc.) to resolve the patient’s complaint.

- D. **“Grievance Committee”** means a group of persons delegated (in writing) by the Parkdale Center Governing Board to review and resolve the grievances the center receives in a manner that complies with the grievance process requirements.
- E. **“Notice of Malpractice Suit”** means a letter from a patient or the patient’s representative that merely notifies Parkdale Center that the patient or patient’s representative will be filing a medical malpractice lawsuit against the center within a stated number of days and provides no additional information that would allow the Hospital to discern the nature of the patient’s complaint or grievance.

III. POLICY:

The patient shall have the ability to file a complaint or grievance as part of the patient rights process and in compliance with the Medicare CoP, even though Parkdale Center does not participate in Medicare nor receives any funds from CMS. Patients registering complaints and/or grievances shall not be subjected to retaliation and/or barriers to service. Parkdale Center’s process for managing complaints and grievances incorporates the following objectives:

- A. Provide patients with a mechanism for filing complaints and grievances without fear of retaliation and/or barriers to service.
- B. Provide patients with information about the mechanism and procedure to use to file a complaint or grievance with Parkdale Center, the Indiana State Professional Licensure Agency and the Indiana State Office of business Licenses or, in the case of billing fraud discharge concerns, the Indiana State Attorney Generals Office.
- C. Provide a planned, systematic mechanism for receiving and promptly acting upon issues expressed by patients and/or patient representatives.
- D. Provide an on-going system for monitoring and trending patient complaints and grievances.
- E. Clarify that billing issues are not considered a grievance unless the complaint also contains elements addressing patient service or care issues and concerns for fraudulent billing or billing abuse.

IV. PROCEDURE:

A. Patient Notification

Parkdale Center will inform patients, in writing, of their right to make complaints and grievances and the process to do so during the registration/admitting process.

B. Patient Complaints

1. Staff shall encourage patients to express any complaints or concerns to the individual involved. These may be resolved by the individual involved or by an appropriate nearby staff member. Complaints that have not been immediately resolved will be directed by staff addressing the patient concern to the Program Director, who also acts as the CEO or designee for investigation and resolution as a grievance under subsection V.C. below.
2. If the patient calls persons other than the direct care staff involved and has not tried to resolve the issue with the involved staff at the center, the

contacted individual should immediately call the program director. If the staff present is able to resolve the patient complaint at that time, it is not a grievance.

3. Parkdale Center's administrative team shall incorporate patient complaints into the complaint/grievance data set for aggregation, analysis, and reporting quarterly to the staff.

C. Patient Grievance

1. Whether a patient/family grievance is received by Parkdale Center staff in person, by telephone or in writing, a Patient and Family complaint/grievance report shall be originated by staff receiving the grievance. The staff shall forward the Patient and Family Complaint/Grievance report to the program director for investigation and resolution.
2. If the Grievance is determined by the program director to be a patient rights violation or standard of care breach, the program director shall forward a copy of the Patient and Family Complaint/Grievance report to the COO and CMO, for action. The COO and CMO shall enact the bill hold process and complete an event report.
3. The program director will complete the investigation and confer with the COO and CMO concerning the results and the planned response. If the resolution of the grievance is determined to take longer than seven days, the COO or the CMO will send a response to the patient informing him/her that Parkdale Center is still working to resolve the grievance and that the center will follow-up with a written response within a stated number of days (a "Deferral Letter"). No more than seven days shall elapse before a response is sent to the patient. The final response letter shall be approved by the COO and CMO when possible (a "Final Letter"). If a Grievance is made by a patient's attorney, hospital legal counsel must be consulted before any written response to the grievance, including a Deferral Letter or Final Letter, is given. As stated above, a Notice of Malpractice Suit is not considered a Grievance.
4. Each issue defined, as a grievance will be followed up with a written notice of decision from the program director. The written response will contain the following elements:
 - Date of receipt of Grievance
 - Name of the Hospital contact person for patient follow up if needed
 - Steps taken to investigate and dates completed
 - Results of investigation and dates completed
 - Completion date
5. A grievance is considered resolved when the patient is satisfied with the actions taken on his/her behalf. When there are situations where Parkdale

Center has taken appropriate and responsible actions to resolve the grievance and the patient remains unsatisfied, then Parkdale Center considers the grievance closed. Parkdale Center Administrative team will maintain all documentation of patient communication.

6. Parkdale Center Administrative team will maintain a log that provides response to the patient (see Attachment A). The Program Director will incorporate grievances into the complaint/grievance data set, which will be aggregated, analyzed and reported quarterly to the staff.

D. Complaints/Grievances Post-Discharge

Patient grievances may also include situations where a patient or patient representative calls or writes to Parkdale Center expressing concerns related to care or services which were not resolved during the patient's stay or where the patient/representative did not wish to address the issue during the stay. The process of registering these grievances once the patient has been discharged is identical to the inpatient grievance process.

E. Responsible Person

The Program Director is responsible for ensuring that all individuals adhere to the requirements of this policy, that these procedures are implemented and followed at Parkdale Center and that instances of non-compliance with this policy are reported to the COO and CMO.

F. Auditing and Monitoring

The Program Director will audit compliance of this policy as part of the focused internal review audit process. An independent Audit Service also will audit compliance with this policy as part of the full scope audits at least once in a 12 month period.

G. Enforcement

All employees whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management pursuant to all applicable policies and procedures, up to and including termination. Such performance management may also include modification of compensation, including any merit or discretionary compensation awards, as allowed by applicable law.

VI. ATTACHMENTS:

- Attachment A: Suggested Minimum Elements on the Grievance Log.

Attachment A

Suggested Minimum Elements on the Grievance Log

- Date of the Grievance
- Tracking number or identification
- Type of Grievance
- Location/Department
- Person assigned to investigate
- Date response letter sent
- Comments