

**Alaska Psychiatric Institute / Alaska Recovery Center
Grievance Policy and Procedure Implemented
October 31, 2007**

To be

Alaska Psychiatric Institute (API) Policy & Procedure (P&P) No:		PRE 030-30
Title: Patient Grievance Procedures		
Key Words: Complaints, Grievances, Patient Rights		
Primary: CFA	Effective Date: 10/31/07	Page 1 of 6

PURPOSE

To uphold each patient's right to file grievances in accordance with all federal, state, licensing, accreditation, and other legal standards.

To develop a process for capturing and utilizing patient feedback and concerns in order to enhance the provision of services at Alaska Psychiatric Institute/Alaska Recovery Center (API).

POLICY

- I. A patient has the right to bring grievances about the patient's treatment, care, or rights to an impartial body within API.
- II. API has a formal grievance procedure for patient grievances. At the time of admission or intake each patient shall be given a written summary of their right to file a grievance. Notices summarizing the patient's rights and filing a grievance, as well as forms for filing a grievance, are available within each program area. Each patient is informed by an employee of the hospital of their rights, the existence and contents of this grievance procedure, and how to contact external patient advocates.
 - A. Each program area shall have complete written copies of the grievance procedure/policy and associated rules and they shall be made available to the patient. Each patient shall be offered a written copy of these rules.
 - B. Each patient shall be informed by an employee of the hospital of their rights and of the existence and content of the grievance procedure in a manner that is best understood by the patient.
- III. The Consumer and Family Specialist (CFS) will serve as a patient advocate, upon a patient's request, to assist the patient in bringing grievances or pursuing other redress for complaints concerning care, treatment, and rights.
- IV. A patient will not be retaliated against or subjected to any adverse change of conditions or treatment because of assertion of their rights.
- V. Patients have a right to a written answer to their grievance/ complaint.

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- VI.** Once filed, all formal grievances must be completed to resolution. If a patient leaves the hospital before resolution is reached, the hospital will make reasonable attempts to reach the person by mail informing them of the reviewer's decision.
- A.** The additional P&P of HR-030-05, LD-020-11, HR-020-12, and HR-040-06 may be added by facility policy to the grievance resolution but in no case does it preempt the grievance procedure.
- B.** If the patient requests to file a grievance neither the grievance nor the process can be denied because of the availability of a separate complaint procedure.
- VII.** API invites suggestions as an important source of information useful in continuously improving service. API welcomes and affords every opportunity for informal resolution of concerns or formal resolution of grievances.

DEFINITIONS – See also P&P INT-5-3 Glossary

PROCEDURE

- I. Availability of Complaint/Grievance/Suggestion filing**
- A.** A locked "Complaint/Grievance/Suggestion" box will be placed on each treatment unit with forms readily available in the same area.
- B.** The patient may initiate a complaint/grievance/suggestion by completing the form and placing it in the box or handing it to any API employee to place in a box. Staff will help patients complete the form upon the patient's request.
- C.** Unit staff and the Consumer and Family Specialist (CFS) will inform patients of their rights, responsibilities, advocacy offices and grievance procedures during new patient orientation on units, at community meetings, and during individual sessions.
- D.** Copies of Patient Rights and Grievance Procedures are posted in each program area.

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- A. Due process will be the same on any subject filed in a grievance.
- B. Any allegation of physical abuse, sexual abuse or inappropriate touching, mental abuse, or harassment will be immediately reported according to API P&Ps, a UOR filed according to policy, and a Risk Management investigation initiated. The patient will be informed of the process, and protected and supported throughout the investigation. (Refer to API P&Ps HR-030-05 Conduct Involving Patients; LD-020-11 Sexual Assault of Adult, Sexual Assault/Abuse of a Minor; HR-020-12 Sexual Harassment and Other Discriminatory Harassment.)
- C. Any allegation of employee misconduct which may be illegal or unethical will be immediately reported according to API P&Ps, a UOR filed according to policy, and a Risk Management investigation initiated. The patient will be informed of the process as fully as possible without compromising the investigation, and protected and supported throughout. (Refer to API P&P HR-040-06 Standards of Conduct.)

III. Level I, First Response

- A. Each regular working day, the CFS will collect the forms from the locked boxes and
- B. Schedule a meeting with the patient to discuss the concerns raised; specifically to 1) enhance the CFS's understanding of the patient's area of concern and 2) enhance the CFS's understanding of the outcome sought by the patient.
- C. With the patient's permission, the form may be rewritten or added to by the CFS to assure a complete and clear statement of the issue. The patient will sign for any changes to the original form.
- D. It is possible that the issue may be resolved for the patient during the meeting with the CFS, particularly in instances of misunderstanding or miscommunication. If so, the patient and CFS may complete the form and sign off on the issue. Otherwise:
- E. The CFS will refer the Complaint/Grievance/Suggestion to the appropriate Level I reviewer, typically the manager of the area of concern.
- F. The Level I reviewer will meet with the patient to discuss the concern and look for resolution. By the fifth (5th) business day from the original date of the patient's filing, the Level I reviewer will write the proposed resolution on the form and discuss it with the patient.

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- a. If, in the course of the review, it becomes apparent that more time is needed to gather information, a five (5) business day extension can be requested in writing, informing the patient that more time is needed. No more than three (3), five (5) business day extensions may be made.
- G. The patient will review the form with the Level I reviewer and mark the response: Agree; Do Not Agree; or Do Not Agree, Submit to Level II.
- H. The Level I reviewer will give the patient a copy of the Level I response with the reviewer's and the patient's signature.
- I. Complaints and grievances not resolved at Level I and submitted to Level II will be referred directly to the CEO. The CEO may conduct the review or designate an impartial party to conduct the review.

IV. Forms Marked Urgent

- A. The CFS will respond immediately to any forms marked "Urgent."
- B. Forms marked Urgent will be considered Level II until reviewed by the CFS with the patient. The review will occur on the first day the CFS receives the form.
- C. On weekends or holidays, patients filing an "urgent" complaint/grievance will hand the form to a staff member for delivery to the Nursing Shift Supervisor for review within 24 hours. In those cases, the Nursing Shift Supervisor will act in the place of the CFS as described in this section (IV) of the procedure.
- D. With the patient's written agreement, a form may be amended to non-urgent following the reviewer's meeting with the patient.
- E. After the interview with the patient, the CFS will refer urgent cases directly to the CEO or Medical Director or their designee as appropriate.
- F. Urgent cases must be completed by the 3rd actual day after the filing of the form following the procedure noted above.

V. Level II, CEO Review

- A. The CEO or Senior Management designee will review the form and offered solutions from the Level I review.
- B. Depending on the issue, the CEO/designee may or may not interview the patient. The reviewer may consult with those directly involved with the patient or other specialists regarding the case.

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- C. Within five (5) business days, the Level II written response indicating the name of the reviewer, the steps taken on behalf of the patient to investigate the grievance, the results of the grievance process and the date of completion and offered solution will be presented to the patient.
- D. The patient may choose Agree or Do Not Agree and signs the form with the staff who reviews the response with the patient.

VI. Additional Provisions

- A. Once all levels of administrative redress have been exhausted, the grievant may appeal civil issues to the Alaska Court System under current rules of civil procedure; file a grievance with the Disability Law Center of Alaska; or file a complaint with the Joint Commission on Accreditation of Healthcare Organizations (The Joint Commission).
- B. Multiple Complaint/Grievance/Suggestions Forms filed on the same issue by (or about) the same patient will be consolidated and considered as one filing.
- C. The Consumer and Family Specialist will: 1) assign numbers to all forms filed, keeping the same number through multiple levels of review; 2) file copies of all complaints/grievances/suggestions when complete and assure that the patient has received a copy; 3) keep files of on-going issues and remind reviewers of deadlines; 4) compile reports and data for reporting as required and requested; and 5) prepare an annual summary report for Senior Management Team, Risk Management Team and Governing Body.
- D. All Complaint/Grievance/Suggestions filed will be reviewed by the Patient Rights and Ethics Team (PRE) at regular intervals for tracking, trending and continuous performance improvement.

HISTORY OF REVISIONS

New: 5/29/85 (30-24).

Revised and Renumbered: from P&P 30-24 to 30-3, 2/25/87.

Revised: 2/21/91; 10/16/97; 3/7/06

Reviewed: 9/9/93; 09/15/94; 8/3/00; 09/01/03

Renumbered: from P&P 30-3 to PRE-30-3 on 8/3/00.

Renamed: Patients' Rights Complaints to Patients' Complaint and Grievance Procedure, 3/7/06.

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Revised and Renamed: Patients' Complaint and Grievance Procedure to Patient Grievance Procedures, 10/31/07

ATTACHMENTS

Concern/Grievance/Suggestion Form #06-15016

NO. _____

**Alaska Psychiatric Institute/Alaska Recovery Center
Concern/Grievance/Suggestion Form**

Name

Date

Time

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Grievance Form: Non-urgent Urgent (Level II until reviewed)

(On weekends or holidays, give to staff
for delivery to the Nursing Shift Supervisor)

Please consider this a concern/suggestion, not a grievance

.....

Concern/Grievance/Suggestion:

(Continue on back if needed)

Desired Outcome:

Signature _____

Date/time _____

CFS signature _____

Date/time _____

Offered Solution:

Agree Do not agree Do not agree, Submit to Level II Procedure

Patient Signature _____ Date _____

Level I Reviewer signature _____ Date _____

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Level II:

Respondent(s):

Investigative steps taken:

Response and Offered Solution:

Agree Do Not Agree

Patient Signature _____ Date _____

Respondent(s) Signature _____ Date _____