

<b>Alaska Psychiatric Institute (API) Policy &amp; Procedure (P&amp;P) No:</b>		<b>PRE 030-03</b>
<b>Title: Patient Grievance Procedures</b>		
<b>Key Words: Complaints, Grievances, Patient Rights</b>		
<b>Primary: RSS</b>	<b>Effective Date: 08/15/2016</b>	<b>Page 1 of 9</b>
<b>CEO Signature: <i>Signature on File</i></b>		

**POLICY**

Alaska Psychiatric Institute (API) will comply with Alaska State Statute, Joint Commission standards, and CMS Conditions of Participation with regard to respecting, protecting, and promoting patient rights. Every API patient is entitled to humane care and treatment with specific rights secured by Alaska State Statutes. All API staff will safeguard the rights and welfare of patients receiving treatment at API.

Patients may voice complaints and recommend changes freely without being subjected to coercion, discrimination, reprisal, or unreasonable interruption of care. If any patient's rights are denied or restricted, such limitations will be fully explained or informed to the patient or guardian and documented in the patient's medical record.

API will inform all patients of their rights, help patients understand and exercise their rights, respect patients' values, beliefs and preferences and inform patients of their responsibilities regarding the care, treatment and services they receive at API.

**DEFINITIONS**

**Recovery Support Specialist: (RSS)** is a designated staff member trained in mental health consumer advocacy who serves as an advocate, upon a patient's request, to assist the patient in bringing grievances or pursuing other redress for complaints concerning care, treatment, and rights.

**Grievance:** A concern or complaint filed by a patient, or on behalf of a patient, about the patient's treatment, care, or rights.

**Patient rights:** Those rights as listed in AS 47.30.817 - 47.30.855 and AS18.20.095, rights related to mental health detention, evaluation and commitment, and rights identified through accrediting bodies.

**Resolution:** Confirmation by a patient, or individual acting on his or her behalf, of satisfaction with the actions taken in response to a grievance.

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<b>PROCEDURE</b>
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**I. PATIENT RIGHTS:**

- A.** All patients will be provided Notice of Rights and Responsibilities (API Form # 06-14023C), which outlines specific rights, available assistance, and the grievance procedure while a patient at API.
  - 1. Family, significant others, legal guardians, and designated representatives will be given the notice when requested.
  - 2. A summary of patient rights and responsibilities (API Form #06-14023D, Posted Summary of Patient Rights and Responsibilities) will be posted in a common area of each unit.
- B.** Staff responsible for orienting patients to the unit will inform patients of their rights as outlined in the Notice of Rights and Responsibilities, including the right of all patients to file a grievance with any advocacy agency or agencies, including the State of Alaska Health Facilities Licensing and Certification.
- C.** Any patient who does not understand English will have their patient rights explained to them in a language they understand.
- D.** All staff will be educated on patient rights and the grievance process.

**II. GRIEVANCES:**

- A.** At the time of admission, all patients, along with any accompanying family members, legal guardians and/or designated representatives, will be given a copy of API Form # 06-14023C, Notice of Rights and Responsibilities.
- B.** Unit staff orienting patients to the unit will provide patients information about their patient rights, responsibilities, and how to contact advocacy offices listed in the Notice of Rights and Responsibilities and on the Posted Summary of Rights and Responsibilities. Each patient will also be informed of the grievance procedure at API during the unit orientation and on an as-needed basis.
- C.** All patients will be encouraged to speak up about any questions, concerns, or comments about their experience and care at API. All API staff will listen carefully to concerns, answer questions, and attempt to resolve disagreements respectfully.

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1. Acknowledge the concerns politely, without placing blame and consider thanking the patient for their feedback.
2. Emphasize and assure the patient that each complaint will be taken seriously.
3. Express concern for any dissatisfaction or unmet expectations the patient may have experienced regardless of fault. If the patient is not satisfied, offer assistance in completing the Complaint/Grievance/Comment/Suggestion/Compliment form (API Form # 06-15016, Grievance form).
4. API staff will take appropriate steps to address or resolve the patient's complaint as soon as reasonably possible. On duty staff initially will problem solve with the patient and immediately determine whether the patient's complaint has been resolved to his or her satisfaction.
5. If the patient indicates, their complaint has not been resolved to his or her satisfaction; staff will remind the patient of the Grievance forms available on the unit and encourages them to fill it out. If requested, staff will assist in writing the grievance. When the Grievance form is complete, the patient will be advised to put the form into the unit's locked Patient Rights' Box.
  - a. Patients can initiate a written complaint or grievance without first attempting informal resolution. Grievances may be filed either by a patient or on patient's behalf by any concerned person. Patients may initiate a grievance by placing a completed Grievance form in their unit's locked Patient Rights' Box, giving it to the RSS, or by giving it to any hospital staff member to place in the unit's locked Patient Rights' Box.
    - i. To protect patients from reprisal and encourage their right to file a grievance at any time:
      - Complaint and grievance records will be recorded and stored outside of the patient's medical record by the RSS.
      - Complaints and grievances should not be documented in the patient's medical record with the exception of threats to self, others, or public safety.

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- E. Grievance forms will be picked up from the Patient Rights' Box on each unit and reviewed daily by the RSS, Nursing Shift Supervisor (NSS), or designee. Grievance forms marked "urgent" will be handled according to Section IV of this policy.
- F. A RSS staff member or the NSS will meet with the patient, as appropriate, to discuss the complaint and work towards resolution.
  - 1. If a resolution is reached, the RSS staff member or NSS will request the patient sign the Grievance form to document the patient's satisfaction with the outcome.

**III. LEVELS OF RESPONSE TO GRIEVANCES****A. Level 1: Complaint**

- 1. Level 1 complaints are defined as "not life-threatening" and may be addressed promptly by the staff on duty. A complaint does not require the completion of the Patient Grievance Form unless the patient expressly requests that it be noted in writing.
  - a. Examples of Level 1 complaints may include, but are not limited to:
    - i. requests for bedding changes,
    - ii. housekeeping problems,
    - iii. food/environmental complaints, and
    - iv. issues that can be immediately resolved.
- 2. Level I: Complaint an RSS, NSS or designee will:
  - a. Listen to the patient's concern/complaint.
  - b. Engage the patient to clarify understanding of the area of concern.
    - i. Any changes to the original form will be made only with the patient's permission.
  - c. Immediately report to the Chief Executive Officer (CEO) or designee any grievance that alleges abuse, neglect, or serious staff misconduct.

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- d. Seek to resolve the concern with the patient, consulting with treatment team members or others as warranted. (immediately or within three business days)
- e. If the issue is resolved to the patient's satisfaction, the RSS will request the patient signs the form as "resolved."
- f. If the issue remains unresolved, the RSS will upgrade the Complaint to a Level II Grievance.

**B. Level II: Grievance**

1. Level II Grievance means "not life threatening," but is more serious in nature than a Level I complaint and cannot be immediately resolved. Level II grievances require the completion of the Patient Grievance Form.
  - a. Level 2 grievances include, but are not limited to,
    - i. complaints about medications,
    - ii. staff demeanor,
    - iii. lost items such as money, jewelry, etc.,
    - iv. delays in service, or
    - v. patient rights' issues that are not potentially serious in nature to the patient's health, well-being, or safety.

**C. For a Level II Grievance, the RSS, NSS or designee will:**

1. Listen to the patient's concern/complaint.
2. Engage the patient to clarify understanding of the area of concern. Any changes to the original form will be made only with the patient's permission.
3. Immediately report to the CEO or designee any grievance that alleges abuse, neglect, or serious staff misconduct.
4. Give patient information about external resources, including but not limited to, the Disability Law Center, the State of Alaska Ombudsmen, the State of Alaska

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Health Facilities Certification and Licensing, and/or The Joint Commission (TJC), where they can also submit a formal complaint.

5. Explain the grievance procedure by informing the patient:
  - a. The Level II grievance will be forwarded to the appropriate Department Head for follow up.
  - b. A written response from the Chief Executive Officer (CEO) can be expected within seven (7) calendar days of the receipt of the grievance.
6. Upon receipt of the grievance, the Department Head will:
  - a. Conduct a review of the grievance form and offered Level I resolution.
  - b. Consult, as needed, with anyone directly involved and/or seek consultation with clinical professionals.
  - c. Within 7 (seven) calendar days, provide the RSS staff with a written response to include:
    - i. The steps taken on behalf of the patient to investigate the complaint.
    - ii. The results of the grievance process (any corrective actions taken by API, as appropriate).
    - iii. The date of completion of the investigation process
  - d. If attempted resolution takes longer than seven (7) days, the patient, or individual acting on patient's behalf, will be informed of the need for additional time. The written response is due no later than fourteen (14) business days post receipt of grievance.
- D. The RSS staff member will write a letter summarizing the information from the Department Head.
- E. The CEO will sign each letter.
- F. The RSS staff member will provide the patient a closure letter regardless of where the patient resides (including hospital, jail, home, etc.). The letter will contain:
  1. The steps taken on behalf of the patient to investigate the complaint.

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2. The results of the grievance process (any corrective actions taken by API, as appropriate).
3. The date of completion of the investigation process. And,
4. Inform the patient of his or her right to seek assistance from any advocacy agency if they disagree with the disposition of the grievance. The letter will contain the phone numbers of the Disability Law Center, the State of Alaska Health Facilities Licensing and Certification, Adult Protective Services, the Office of Children's Services, and the State of Alaska Ombudsman's Office.

#### **IV. GRIEVANCE FORMS ASSESSED "URGENT"**

##### **A. RSS, Nursing Shift Supervisor or designee will:**

1. Immediately discuss the concern with the patient on the day received to assess the urgent nature of the concern.
2. Immediately notify the CEO or designee if the urgent concern alleges abuse, neglect, or serious staff misconduct. Refer to API P&P LD-020-13, Conduct Involving Patients. Any grievance including reasonable suspicion of abuse, neglect, or serious staff misconduct requires an Unusual Occurrence Report (UOR).
3. API's Safety Officer (SO) will initiate an Investigation for all grievances that include a reasonable suspicion of abuse, neglect or serious misconduct.
4. Attempt to resolve the urgent matter as a Level I or II grievance.
5. If, after consultation, the patient decides the issue is non-urgent, the Level I process will be initiated.

#### **V. DISCHARGED PATIENTS**

- ##### **A. If a patient has been discharged prior to resolution of a grievance, effort will be made to contact the patient to determine if the grievance has been resolved to the patient's satisfaction. If no further action is requested, the matter will be considered resolved and closed.**
1. If the patient desires further action, API will continue with opportunities for resolution and appeal per this policy.

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## **VI. QUALITY IMPROVEMENT**

### **A. The RSS or designee will:**

1. Inspect Patient Rights' Boxes on each unit regularly to ensure the integrity of each box and the availability of Grievance forms.
2. Resupply each unit with Grievance forms, as needed.
3. Verify API Form # 06-14023C Notice of Rights and Responsibilities and API Form # 06-14023D Posted Summary of Patient Rights and Responsibilities twice annually to ensure all phone numbers to external advocacy and complaint organizations are current and the notices contain all required regulatory information. These reviews and verifications will be included in the RSS's Report to Governance.
4. Provide information on patient rights, responsibilities, how to contact advocacy offices, and the grievance procedure when conducting community meetings and during individual sessions.
5. Consolidate forms by issue when multiple forms are submitted on the same issue by the same patient, assign a number to the form or forms, and keep numbers consistent with subsequent forms.
6. Maintain a file of completed Grievance forms and closure letters and assure that patients have received a copy of closure letters or that the letters have been mailed to the patient.
7. Collect and report data twice monthly to API's Senior Management Team on the number of grievances received, the general issue raised in each grievance, and the resolution at each grievance level.
8. Prepare quarterly summary reports to API's Governance and other stakeholder groups as assigned.

- ### **B. API Senior Management will use the data reported by the RSS on the Grievance process to inform quality improvement efforts and to identify opportunities for performance improvement.**

<b>HISTORY OF REVISIONS</b>
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New: 05/29/85 (30-24).



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Revised and Renumbered: from P&P 30-24 to 30-3, 02/25/87.

Revised: 02/21/91; 10/16/97; 03/07/06; 10/31/07; 04/02/12; 07/xx/2014

Reviewed: 09/9/93; 09/15/94; 08/03/00; 09/01/03

Renumbered: from P&P 30-3 to PRE-30-3 on 08/03/00.

Renamed: Patients' Rights Complaints to Patients' Complaint and Grievance Procedure, 03/07/06.

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

Revised: 08/07/14, 08/15/14, 08/15/16,

**ATTACHMENTS**

Grievance form, 06-15016

Notice of Rights and Responsibilities 08-07-14, 06-14023C

Posted Summary of Patient Rights and Responsibilities 06-14023D

**REFERENCED SOURCES/API P&Ps AND NDPs**

LD-020-13, Conduct Involving Patients, 08-15-2016

**Sec.47.30.847. Patients' grievance procedures.** (a) A patient has the right to bring grievances about the patient's treatment, care, or rights to an impartial body within an evaluation facility or designated treatment facility.

(b) An evaluation facility and a designated treatment facility shall have a formal grievance procedure for patient grievances brought under (a) of this section. The facility shall inform each patient of the existence and contents of the grievance procedure.

(c) An evaluation facility and a designated treatment facility shall have a designated staff member who is trained in mental health consumer advocacy who will serve as an advocate , upon a patient's request, to assist the patient in bringing grievances or pursuing other redress for complaints concerning care, treatment, and rights.

( 10 ch 109 SLA 1992)

Providence Alaska Medical Center will treat all persons with respect, compassion, justice, excellence, and stewardship. All patients and visitors receiving care here or in our affiliated clinics and services will be treated with equality. Each interaction should be free from discrimination based on age, race, color, creed, ethnicity, religion, national origin, marital status, sex, sexual orientation, gender identity or expression, disability, veteran or military status, source of payment or ability to pay, or any other basis prohibited by federal, state, or local law.

**Patients have the right to receive or restrict visitors.**

**Patients will:**

- Be asked if you wish to designate or restrict visitors
- Have your wishes noted and communicated
- Be able to withdraw your consent for visitors at any time
- Be informed about any limitations on visitors that are needed to assure your care and safety (or the care and safety of others)

**As a patient at Providence Alaska Medical Center you have the right to:**

- Kind and respectful care which recognizes your personal values and beliefs
- Be treated with comfort and dignity
- Make decisions about your care and to include, or exclude, family members or others when making decisions
- Be fully informed about your health and any procedures suggested for your care
- Refuse any care offered to you and still receive other care that you agree to
- The support of social services and spiritual care to aid your recovery
- Helpful information and answers to your questions
- Access to protective/advocacy services
- Receive translation or other communication assistance to help you understand your disease and treatment
- The names of all physicians and staff helping with your care or to change physicians
- Treatment, as you need it, for pain

- Respect for your Advance Directives
- Information about the outcome of your care, including unexpected outcomes
- Freedom from mental, physical, sexual and verbal abuse
- Freedom from neglect and exploitation
- Be free from restraints other than those medically indicated for your safety
- Respect for your personal privacy
- Consent to, or refuse, recordings/filming/ images
- Consent to, or refuse, participation in research or clinical trials.
- Ask questions about charges on your bill (Please call Patient Accounts at 1-866-397-9269)
- Confidential and secure medical records (See Providence Health & Services Alaska Notice of Privacy Practices)

**You have the right to voice concerns or grievances about your care, either verbally or in writing. You also have the right to prompt follow-up. Assistance is available by contacting:**

- The leadership of the unit where you are being treated, or
- The Care Line to report patient care concerns by dialing **2-6111** from a hospital phone, or
- Customer Service Line at **212-3615** or **1-800-510-3375**, or
- Alaska State Division of Certification and Licensing at **1-888-387-9387**, or
- The Joint Commission Office of Quality Monitoring at **1-800-994-6610** or by emailing [complaint@jointcommission.org](mailto:complaint@jointcommission.org)

**As a patient you and your family, when appropriate, have the responsibility to:**

- Be an active participant in your care and to speak up if you have questions or concerns
- Provide a truthful and complete medical history
- Tell the health care team about all changes in your condition
- Notify your nurse if you have any concerns about your safety
- Meet your financial obligations and ask questions about your charges when you do not understand
- Leave your valuables at home and be respectful of the property of others
- Treat all hospital staff, others patients, and visitors with courtesy and respect
- Cooperate with caregivers toward a positive outcome
- Abide by all hospital rules and safety regulations
- Be attentive to noise levels, privacy, and number of visitors