

## **Patient Complaint and Grievance Resolution**

### **Policy**

The patient shall have the ability to file a Complaint or Grievance as part of the patient rights process. Patients registering Complaints and/or Grievances shall not be subjected to retaliation and/or barriers to service. PSV's process for managing Complaints and Grievances incorporates the following objectives:

1. Provide patients with a mechanism for filing Complaints and Grievances without fear of retaliation and/or barriers to service.
2. Provide patients with information about the mechanism and procedure to use to file a Complaint or Grievance with the organization.
3. Provide a planned, systematic mechanism for receiving and promptly acting upon issues expressed by patients and/or patient representatives.
4. Provide an on-going system for monitoring and trending patient Complaints and Grievances.
5. Clarify that billing issues are not considered a Grievance unless the Complaint also contains elements addressing patient service or care issues.

Pediatric Specialists of Virginia (PSV) has established a grievance procedure for documenting the existence, submission, investigation, and disposition of a patient's written or verbal grievance to the ASC. The following procedures will be met for each grievance:

1. All alleged violations/grievances relating, but not limited to, mistreatment, neglect, verbal, mental, sexual, or physical abuse, will be fully documented.
2. All allegations will be immediately reported to the Clinic Manager/ASC Administrator.
3. Only substantiated allegations will be reported to the state authority or the local authority, or both.
4. The grievance process will have timeframes for review of the grievance and the provision of a response.
5. In responding to the grievance, PSV will investigate all grievances made by a patient or the patient's representative, or the patient's surrogate, regarding treatment or care that is (or fails to be) furnished.
6. PSV will document how the grievance was addressed, as well as provide the patient, the patient's representative, or the patient's surrogate with written notice of its decision. The decision will contain the name of the clinic manager or ASC administrator, the steps taken to investigate the grievance, the results of the grievance process, and the date the grievance process was completed.

### **Purpose**

PSV 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.

### **Definitions**

1. Complaints - means an oral or written expression of displeasure or dissatisfaction with service received that can be immediately resolved by the staff present.
2. Grievances - 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, and complaints related to not meeting needs based on disability and discrimination. A written complaint is always considered a grievance and may be submitted by fax or email or the patient or the patient's representative requests that the complaint be handled as a formal Complaint or Grievance

3. "Staff Present" means any staff present at the time of a Complaint or who can quickly be at the patient's location (i.e., clinic staff, providers, managers, nursing, administration, nursing supervisors, etc.) to resolve the patient's Complaint.
4. "Notice of Malpractice Suit" means a letter from a patient or the patient's representative that merely notifies PSV that the patient or patient's representative will be filing a medical malpractice lawsuit within a stated number of days and provides no additional information that would allow PSV to discern the nature of the patient's Complaint or Grievance.

## Procedure

### 1. Patient Notification

Patients will be informed of the process for addressing complaints/grievances through printed materials and verbal communication from PSV staff.

- a. Patient Rights signs are posted in each clinic. These signs provide information about who to contact if a patient or their representative wishes to file a complaint or grievance.
- b. PSV employees are expected to respond to complaints expressed by a patient or their representative. If the employee is unable to resolve the patient complaint, he/she should take initiative to escalate the issue to the appropriate manager.

### 2. Patient Complaints

- a. Complaints should be immediately resolved by the individual directly involved with the patient's care. If the complaint is not able to be resolved by the direct care staff, the complaint should be directed to the clinic manager or ASC administrator to address and resolve. If the patient is still dissatisfied with the resolution, the complaint should be forwarded to the Practice Manager for clinics and Director of Operations for ASC for investigation and resolution. The following chain of command for resolution of complaints will be followed:

1. Direct Care Staff (Providers, Clinic Staff)
2. Clinic Manager or ASC Administrator
3. Practice Manager
4. Director of Operations

- b. All complaints related to an adverse event or error that resulted in patient harm should be immediately forwarded to the Director of Quality and/or Risk Manager.
- c. A RL Solution report should be generated by the staff receiving the complaint. The report should include steps taken to resolve the complaint and result of the investigation.

### 3. Patient Grievances

- a. All complaints related to patient discrimination on the basis of race, color, national origin, sex, age, or disability are considered grievances and should be forwarded to PSV's Section 1557 Coordinators: (*Refer to PSV Policy PAS – 016 Grievance Policy for Discrimination Complaints*).
  1. Practice Manager of the Clinic
  2. ASC Administrator
- b. A patient's attorney is considered a patient representative. Notice of Malpractice Suit and all communications from a patient's attorney must be forwarded to the Risk Manager.

- c. Whether a patient/family Grievance is received by staff in person, by telephone or in writing, a RL Solution report shall be originated by staff receiving the grievance. The staff shall also report to the clinic manager of the affected department or ASC administrator for investigation and resolution.
- d. The manager or ASC administrator will complete the investigation and confer with the Leadership Team concerning the results and the planned response. If the resolution of the Grievance is determined to take longer than seven days, the clinic manager or ASC administrator will send a response to the patient informing him/her that PSV is still working to resolve the Grievance and that the PSV will follow-up with a final written response within 21 days from receipt of the complaint/grievance.
- e. Each issue defined as a Grievance will be followed up with a written notice of decision from the clinic manager or ASC administrator. The written response will contain the following elements:
  - Date of receipt of Grievance
  - Name of the contact person for patient follow up if needed
  - Steps taken to investigate and dates completed
  - Results of investigation and dates completed
  - Completion date
- f. If the Grievance is determined by the manager or ASC Administrator to be a standard of care breach, adverse event or error that resulted in patient harm, the manager/ASC administrator shall notify the Director of Operations, Director of Quality and the Risk Manager. The Director of Quality/Risk Manager will investigate and will make recommendations on the grievance response. The RM shall enact the bill hold and disclosure process.
- g. The final written grievance letter will be reviewed by the Risk Manager and Director of Quality prior to sending to patient or the patient's representative, or the patient's surrogate. The final letter will be mailed via regular and certified mail.
- h. A Grievance is considered resolved when the patient is satisfied with the actions taken on his/her behalf. When there are situations where the PSV has taken appropriate and responsible actions to resolve the Grievance and the patient remains unsatisfied, PSV considers the Grievance closed.

#### 4. Auditing and Monitoring

- a. A grievance log will be maintained to track and trend the complaints/grievances and defined response times. Information for the log may be retrieved from PSV's patient safety reporting system (RL Solutions). The log will have the following elements:
  1. Date of receipt of Grievance
  2. Type of Grievance/Complaint
  3. Details of Grievance/Complaint
  4. Location/Department
  5. Steps taken to investigate and dates completed
  6. Results of investigation and dates completed
  7. Completion date
- b. The Director of Quality will incorporate the log into the Complaint/Grievance data set, which will be aggregated, analyzed and reported quarterly to the appropriate leaders and/or committee (s).