

PATIENT GRIEVANCE POLICIES AND PROCEDURES

It is the organization's policy to establish a Grievance Process that may be utilized at any time by any patient, residential or non-residential, who believes his/her rights under federal, state, local, or program rules (or other relevant or applicable treatment regulations) have been violated. Grievances should be viewed as an appropriate way to express concerns or complaints about the program, and to resolve disputes. The procedure for resolution of grievances are as follows:

PROCEDURE

1. **Orientation to the Process:** Patients shall be educated and provided a copy of the Patient Grievance Process at time of registration by admissions staff.
 - a) The procedure shall be explained by staff in clear, simple terms that the patient understands, as documented in the record.
 - b) The patient is given the opportunity to ask questions or express concerns during the orientation group or with their primary counselor.
2. **Before Filing a Grievance:** Any and all issues should be addressed with your primary counselor and/or case manager for resolution and documented prior to submitting a grievance.
 - a) If the grievance is about your primary counselor/case-manager/provider, then this step may be omitted and begin filing a formal grievance.
3. **Filing a Grievance:** A copy of the Grievance Process Request form may be obtained in the front lobby or from any staff, where upon request, may obtain assistance in completing the form.
 - a) The completed grievance form shall describe in the patient's own words the nature, type, and substance of the grievance, complaint, and/or violation of rights.
 - b) Once the grievance has been completed and submitted to the suggestion box or front desk staff, it will be forwarded to management for review in the Thursday management meeting. The management team will decide whether a meeting is necessary to resolve the issue. If a meeting is not necessary, then a response from management will be written on the grievance form and returned to the patient in a sealed envelope within 10 business days.
 - i. A copy of the grievance will also be scanned into each patient file, as well as being filed with the management teams records.
 - c) If the response is unsatisfactory, an appeal can be made in writing using the grievance form and should be submitted using the steps above. If deemed necessary, the management team or member will schedule a meeting with the patient to address concerns. If a meeting is not necessary, a response will be written on the grievance form and returned to the patient
4. **Retaliation:** Grievances will be investigated and addressed in a confidential manner for consideration to patients. Patients shall be free of retaliation or humiliation and treated with the dignity and respect that is in line with UPC/RN Mission, Vision, and Values.
5. **Complaint to the State:** It is the organization's policy to inform all patients that if they do not achieve what they perceive to be a satisfactory resolution, they are entitled to file a complaint with:
 - a) Behavioral Health Administration (BHA) - (410) 402-8606
 - b) Office of Health Care Quality (OHCQ) – (410) 402-8000
 - c) Behavioral Health Systems Baltimore (BHSB) - (410) 637-1900
 - d) Accrediting Organization – CARF International – (520) 325-1044