Policies and Procedures #A16



Subject: Patient Complaints and Grievances

Department: Administrative Approved/Amended On:

Approved By: Effective Date: 04-26-2017

This policy/procedure supersedes all other policies/procedures of the same subject.

Purpose

The purpose of this Policy is to assure all patients, including infants, children, adults and geriatrics, are provided one standard of medical care regardless of age, race, physical or mental disability, creed, sex, national origin, education, religion, or source of payment for care. Clinical decisions are based on the patient's identified health needs any other factor including financial compensation practices. All patients and patient representatives have the right to register complaints and grievances without fear of compromising the quality of care received or their access to care and services and without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care, treatment, and services.

Policy

EMSA's governing board is ultimately responsible for the effective operation of the patient grievance process. The governing board has approved the grievance resolution process set forth in this policy and has delegated the responsibility for implementing the requirements of this policy to the Compliance Committee established by EMSA.

It is the policy of EMSA to promptly evaluate every complaint or grievance and, when indicated, take appropriate action to resolve it. The patient or patient representative making a complaint or grievance shall receive an appropriate response addressing the complaint or grievance.

Every employee shall be an access point for customer complaints. Every employee is responsible for patient/family complaint management and is encouraged to be responsible for resolving complaints whenever possible and giving feedback to the patient or family on a timely basis. Grievances from patients and patient representatives shall be resolved as described in this policy.

Definition:

The Compliance Committee shall consist of more than one (1) person and shall have a sufficient number of qualified members to review and resolve grievances consistent with the requirements in this policy.

Scope

This Policy applies to EMSA, and the contractor.

Procedure

- A. Mechanisms For Immediate Resolution
 - a. Employees will report immediately to their supervisor any complaints.
 - b. Any complaints electronically or written format will be forwarded to the appropriate personnel.
 - c. Complaints should be investigated and immediately resolved, whenever possible, with appropriate and timely feedback provided to the patient, patient representative or complaintant.
- B. If the complaint cannot be immediately resolved, it is considered a grievance.
 - a. Investigation and resolution in any event will be handled within a reasonable time frame.
 - b. If the grievance cannot be investigated and resolved within ten (10) business days, the complaintant will be informed by EMSA, or the contractor on behalf of EMSA, that they are still working to resolve the grievance.
 - c. An update will be provided to the complaintant will be communicated. All written responses will be signed by the CEO/President of EMSA, the Chief Operating Officer of EMSA, the Chief Compliance Officer, or designee(s), or the contractor on behalf of EMSA, as applicable.
 - d. Complaints or grievances about situations that are perceived to endanger the patient will be addressed immediately.
- C. If an interdepartmental issue is involved in resolving a complaint or grievance, collaborative resolution of the issue will occur.
- D. Communications will be provided to the patient or complaintat regarding final closure of the grievance.

Grievenance Retention

The Compliance Committee has the responsibility to gather and maintain all grievance records. All documents prepared and maintained by the Compliance Committee, including any reports about grievance committee activities made to EMSA, to the governing body or to the Office of the Medical Control Board, are considered confidential and privileged documents protected by the Record/Quality Assurance Reviews-Continuous Quality Improvement Activity (63 O.S. § 1-2504.2).