Patient Complaint, Grievance, Feedback

This Policy is Applicable to the following sites:

Big Rapids, Gerber, Ludington, Outpatient/Physician Practices, Pennock, Reed City, SH GR Hospitals, SHMG, United/Kelsey, Zeeland

Applicability Limited to:	N/A
Reference #:	3195
Version #:	5
Effective Date:	10/29/2018
Functional Area:	Administrative Operations, Patient Rights
Department Area:	Administrative

Purpose

To outline the process for informing patients or patient representatives of the process for filing a complaint or grievance about care and services.

To outline the process to be followed for prompt resolution of complaints or grievances. To outline the process for documentation of positive and negative feedback from patients, families and 3rd party sources.

Responsibilities

All Spectrum Health staff are responsible for coordinating and responding to complaints/grievances. Patient Relations will coordinate with leadership from that area to respond.

Definitions

Complaint: A complaint is a concern expressed by the patient or the patient's representative involving any aspect of care that can be resolved promptly by any staff member present, or who can quickly be at the patient's location (i.e. member of management or Patient Relations) to resolve the patient's complaint.

Resolved complaint: The patient and/or patient representative is satisfied with the actions taken on their behalf.

Grievance: A patient grievance is a formal or informal written or verbal complaint about any aspect of care that is made to Spectrum Health by a patient or the patient's representative when:

- An issue cannot be resolved promptly by staff present, or who can quickly be at the patient's location (i.e. member of management or Patient Relations) to resolve the patient's complaint.
- An issue is referred for later resolution to management or to the Patient Relations department
- Patients or the patient's representative call or write to Spectrum Health following discharge or after an outpatient service or visit with concerns related to care or an allegation of abuse
- Patients or the patient's representative requests their complaint be handled as a formal complaint or grievance. A patient or the patient's representative has the right to file a grievance or complaint. There will not be any negative repercussions or retaliation of any form to the patient or representative. Spectrum Health strongly desires the opportunity to learn and grow and views these as opportunities to be embraced.
- The patient requests a response from the organization.

Information received from Patient Experience surveys is solicited feedback and does not constitute definition of Grievance or Complaint. Exceptions to this would be an attached letter or document with a request for resolution from the organization.

Billing Issue: Billing issues are not considered grievances unless the complaint also contains elements addressing patient services or care issues.

*Source: CMS (Center for Medicare and Medicaid Services) State Operations Manual, Appendix A, dated April 2004

Confidentiality: Complaints received on behalf of a patient, (family, friend, or other person) will be addressed with the patient and permission obtained prior to any further discussion with complainant. All patient contacts are maintained in a strictly confidential database accessed only through the Patient Relations department. Complaint investigations, recommendations and/or actions taken by the organization are for the purpose of quality improvement and peer review pursuant to MCL (Michigan Compiled Laws) 333.20175, 333.21513, 333.21515, 333.531, 331.533.

Patient Relations: Per entity, this role may be carried out by Patient Relations, Improvement Specialists, and Patient Experience Specialists.

Policy

A. General Statements:

Spectrum Health recognizes that patients should expect quality care at every encounter and feedback from patients, families, staff, physicians and all others we interact with is an important part of continuous improvement and continuous learning.

The role of the Patient Relations Department in the complaint/grievance process is to:

- Provide access to a centrally coordinated positive patient feedback and complaint/grievance process.
- Receive and review complaints and grievances from the patient, or the patient's representative, and/or referred from staff/physicians.
- Work with the appropriate staff and/or physicians providing care to follow up and resolve issues to the patient's satisfaction.
- Identify educational opportunities for all levels of staff
- Identify process and system improvement opportunities through complaint/grievance tracking and trending.
- Ensure that the complainant feels their concerns are acknowledged and that the concern is resolved to their satisfaction.

Each entity's Board has approved and delegated the responsibility of patient complaints/feedback to the Patient Relations department and to the Grievance Committee. When the grievance is not able to be resolved to the satisfaction of the patient or patient's representative, Patient Relations leadership, or designated entity representative, will review and refer the case as appropriate to the Grievance Committee for their review.

B. Complaint Process

- 1. Patients and families are notified in writing how to file a complaint or grievance and give positive feedback in the following ways:
 - A description of the complaint process is contained in the materials provided on admission for an inpatient stay.
 - Patient Comment Cards are available throughout the organization for inpatient, outpatient, and provider offices providing a mechanism to share feedback regarding care.
 - The phone number for the entity specific Patient Relations department is available through InSite, in the materials provided on admission, on the Spectrum Health external web site, as well as on the Patient Comment Cards.
 - Feedback may also be sent by email to patient.relations@spectrumhealth.org.

- The patient, family, staff or the physician may contact the Patient Relations department regarding a dissatisfied patient by telephone, e-mail, verbally, through the electronic reporting tool, or in writing.
- 2. When an issue is raised by a patient or patient's representative, all staff and providers at the point of care, or who can quickly be at the patient's location (i.e. member of management or Patient Relations), should acknowledge and attempt to resolve all patient complaints as soon as possible
- 3. Any complaint that cannot be resolved in the moment by staff present or who can quickly be at the patient's location (i.e. member of leadership team or Patient Relations), is postponed for later resolution, is referred to other staff for later resolution, requires investigation, and/or requires further actions for resolution is considered a grievance.
- 4. If not resolved, the issue will be forwarded to the Patient Relations department, who will record, triage, evaluate and prioritize the issue as a grievance.
- 5. The patient or his/her representative will be contacted by the Patient Relations department acknowledging the grievance and outlining the plan for investigation defined in a timely manner.
- 6. Patient Relations will send the grievance to the appropriate team within the organization for follow-up response. Examples:
 - Privacy complaints will be documented and reported to Organizational Privacy, who participates in the investigation and disposition under HIPAA regulations.
 - Complaints/grievances involving the medical staff at the hospital, including quality of care and behavior issues, will be evaluated by Patient Relations department and discussed with the physician involved and/or referred to Medical Staff office, Medical Staff Performance Committee and/or the SHMG leadership as appropriate.
 - Complaints/grievances with Spectrum Health Medical Group providers will be handled by Patient Relations Corporate office, with follow up to provider and Spectrum Health Leadership.
 - Patient Relations will refer grievances involving safety, quality of care issues, or premature discharge to Utilization Review, Quality Management, Medical Staff Quality Improvement, or Safety & Reliability, as indicated.
 - Any complaint/grievance that is not resolved to the satisfaction of the patient by the Patient Relations department will be reviewed for potential referral to the Grievance Committee.
- 7. Patient Relations will inform the patient or his/her representative of the right to file a complaint/grievance with the State of Michigan following the instructions in the brochure "Patient Rights & Responsibilities (X17460; Ludington: X18943). This brochure is found in public areas of the organization or through the Patient Relations department.
- 8. Patient Relations will notify the patient in writing of the resolution of all grievances. Email and faxes are considered written responses. Documentation will include:
 - Re-statement of complaint.
 - Steps followed to investigate complaint.
 - Results of the grievance process.
 - Date of completion.
 - Name of contact in Patient Relations Department if resolution has not brought satisfaction to patient or their representative.
 - When organization/entity is notified from 3rd party source such as a payer or other source, Patient Relations will make contact directly with patient for follow up and address issue per policy.
 - Correspondence will be sent to 3rd party thanking them for forwarding concern/complaint/grievance/ compliment
- 9. Spectrum Health Ludington follows this policy in addition to other requirements by the State of Michigan and other regulatory bodies.
- 10. Inpatient Psychiatric Services (current or past) follows this policy in addition to other requirements established by the State of Michigan Mental Health Code and other regulatory

agencies. Michigan Mental Health Code P.A. 258 of 1974, as amended MDCH; Section 776, Chapter 7A

C. Positive Feedback Process

Patient Relations will acknowledge positive feedback received to the patient or patient representative in writing, as appropriate. Information is sent to appropriate department leadership for acknowledgement and celebration with departmental staff. If individual staff members and/or physicians are acknowledged, written recognition is forwarded to the appropriate leadership for distribution to the staff members named by the patient. Physician compliments are routed to the Medical Staff Office and to the individual physician.

Response Timelines

Complaints or grievances are managed within a reasonable time frame, depending on the seriousness of the allegations. For example, grievances about situations that endanger the patient, such as neglect or abuse will be reviewed immediately. In general, most grievances should be resolved within 7 days. If the grievance will not be resolved or the investigation will not be completed within 7 days, the patient and/or patient's representative will be updated with progress to date and an approximate timeframe for a final response.

The following are approximate response time frames:

	Point of Care	After Discharge	Positive Feedback
Acknowledgement	Within 2 hours	Within 1 business day	As appropriate
Departmental Review	Within 2 hours	Within 2 business days	Monthly
Departmental Response	Variable, (issue dependent)	Within 7 business days	As appropriate
Resolution	Variable, (issue dependent)	Within 2 weeks (issue dependent)	NA

SH Ludington Response Timelines:

The Patient Relations department will contact the patient or his/her representative in writing within one (1) business day to acknowledge the grievance, and outline the plan for investigation defined in a timely manner. Department leaders may make verbal contact with the patient or his/her representative to acknowledge the grievance and obtain any additional information needed to conduct an investigation.

Every attempt will be made to bring resolution to each grievance within seven (7) business days of the date the grievance has been received. 482.13(a)(2) 10-17-08 A written response must be sent by Patient Relations as soon as possible, but not more than seven (7) business days. Department Leadership will provide Patient Relations with results of investigation and response before business day seven (7) to ensure Patient Relations timeliness of written response to the patient or patient's representative. If the grievance will not be resolved or the investigation will not be completed within seven (7) business days, the patient and/or patient's representative will be updated in writing with progress to date and an approximate timeframe for a final response.

Grievance Committees

- A. **Purpose:** To provide oversight of the grievance process at each facility and to act as a final level review for patients with an unresolved grievance. The Grievance Committee reports quarterly to the Executive Quality Committee and/or a quality oversight committee.
- B. **Function:** To provide final level review for patients or their representative with unresolved complaint/grievances by objectively reviewing the case to ensure that no other actions are indicated.
- C. **Membership:** The committee includes the following members or similar roles at each entity. Each entity will determine their membership:
 - Chairperson Sr. Director, Patient Experience
 - Chief Nursing Officer
 - Quality Director
 - Chief Medical Officer
 - Chief Risk Officer
 - Chief Medical Officer, SHMG (as needed)
 - Chief Compliance Officer, SHMG (as needed)
 - Compliance representative
 - Patient Relations Improvement Specialists

Ad-hoc members will be called in for grievances as needed.

SH Ludington Patient Relations (Grievance) Committee:

The Patient Relations Committee reports quarterly to the Board Safety and Quality Committee. A final determination letter from the Patient Relations Committee will be sent to the patient or patient's representative.

Reporting

- **A.** All patient complaint and grievances are documented, trended and reported by the Patient Relations Department for purposes of:
 - Identifying improvement opportunities
 - Identifying trends
 - Identifying education opportunities

B. Quality Monitoring

Indicators of an effective complaint/grievance process will be monitored on a quarterly basis by the Patient Relations Department, including, but not limited to:

- Service volume
- Classification of complaints by category
- Resolution rates
- Summary of all cases not able to be solved to the patient's satisfaction

C. Document Retention

All documentation will be retained for seven (7) years from the date of creation

Revisions

Spectrum Health reserves the right to alter, amend, modify or eliminate this policy at any time without prior written notice.

Resources/References

Social Media Grievance Process/Response

Patient Rights and Responsibilities

CMS Operations Manual and Interpretive Guidelines 42CFR 482.13 downloaded 8/10/04 and 8/18/05

HIPAA Regulations 45 CFR §§ 160.300 through 160.306, 160.310, 160.312 and 164.530

Spectrum Health Patient Rights & Responsibilities - X17460

Spectrum Health Patient Rights & Responsibilities - X18943

CMS Operations Manual and Interpretive Guidelines 42CFR 482.13 10-17-08 and 10-09-15

National Integrated Accreditation for Healthcare Organizations (NIAHO) – Interpretive Guidelines and Surveyor Guidance – Version 11, PR.5

Michigan Mental Health Code P.A. 258 of 1974, as amended MDCH; Section 776, Chapter 7A

To contact the state licensing agency:

Licensing and Regulatory Affairs Bureau of Community and Health Systems Health Facilities Division P.O. Box 30664 Lansing, MI 48909 State of Michigan Complaint Hotline: 1.800.882.6006 **To contact the office of civil rights**: Michigan Department of Civil Rights 350 Ottawa Ave NE Grand Rapids, MI 49503 1.800.482.3604

To contact the organization that accredits the hospital (excluding Ludington):

The Joint Commission Office of Quality and Patient Safety One Renaissance Boulevard Oakbrook Terrace, IL 60181 On the web: www.jointcommission.org (Use the "Report a Patient Safety Event" link in the "Action Center" on the home page of the website) By fax: 630-792-5636

To contact the organization that accredits the Rural Health Clinic (RHC) Physician Practices:

(see Appendix A for the appropriate agency) The Compliance Team, Inc. Via their website: <u>www.thecomplianceteam.org</u> Or via phone: 1-800-291-5353

Policy Development and Approval

Document Owner:

Lisa White (Administrative Assistant)

Writer(s) (formerly Author):

James Bonner (Dir Sr, Patient Experience)

Reviewer(s):

FAPC PATIENT RIGHTS, Amanda Knuth (Dir, Patient Outcomes - Br/Rc), Angela Rewa (Dir, Compliance Officer), Barbara Cote (Mgr, Risk & Safety), Carol Nowak (VP, Enterprise Operations), Cindy Rollenhagen (Dir, Quality & Risk), James Bonner (Dir Sr, Patient Experience), Kristen Farmer (Dir, Quality, Risk/Compliance), Leslie Hazle (Dir, Clinical Ops & Perf Impr), Molly Nolan (Mgr, Sys Org Risk Mgmt), Sharon Boczkaja (Spec, Patient Experience Sr), Sharon Sarnicola (Mgr, Patient Relations), Susan Kolanowski (Spec, Patient Experience), Theresa Simpson (Mgr, Quality)

Approver:

Leslie Jurecko (Vp, Ds Quality/Safety/Experience)

1. Keywords

Not Set

Appendix A - Rural Health Clinic (RHC) Survey Process			
Appendix A - Narai nearth clinic (Nife) Survey Process	,		
			Survey Process State Vs
Reed City Hospital RHC's Tax ID 38-2770076 Spectrum Health Reed City Hospital Multi-Specialty Clinic-Reed City	Address 300 N Patterson Rd Reed City MI 49677	phone 231-832-7170	Deeming Agency State
Spectrum Health Reed City Hospital Multi-Specialty Clinic-Need City - Spectrum Health Reed City Hospital Evart Family Practice	5991 S 95th ave Evart MI 49631	231-832-8700	State
Spectrum Health Reed City Hospital Tustin Family Practice	111 Church St Tustin MI 49688	231-832-8560	State
Big Rapids Hospital RHC's Tax ID 38-1368744			
Spectrum Health Big Rapids Hospital Family Medicine	650 Linden St Suite 1 Big Rapids MI 49307	231-796-3200	State
Spectrum Health Big Rapids Hospital Family Medicine Canadian Lake	8354 100th ave Suite 1 Stanwood MI 49346	231-796-6000	The Compliance Team
Spectrum Health Big Rapids Hospital Obstetrics and Gynecology	722 Locust St Big Rapids MI 49307	231-592-4200	The Compliance Team
United Hospital RHC's tax ID 38-1358412 Speatrum Health United Herpital Belding Eamily Medicine	1227 Chate Ch Dalding Mill 40000	616-794-0940	The Compliance Team
Spectrum Health United Hospital Belding Family Medicine Spectrum Health United Hospital Lakeview Family Medicine	1227 State St Belding MI 48809 418 Washington St Lakeview MI 48850	989-352-6474	The Compliance Team The Compliance Team
Spectrum Health United Hospital Family Medicine and Obstetrics & Gr		616-754-4686	State
Spectrum Health United Hospital Internal Medicine and Pediatrics - Gri			The Compliance Team
Gerber Hospital RHC's tax ID 38-1359517			
Spectrum Health Gerber Memorial Family Medicine - Grant	230 S Maple St Grant MI 49327	231-834-5995	State
Spectrum Health Gerber Memorial Family Medicine - Hesperia	78 N Division Hesperia MI 49421	231-854-7235	State
Spectrum Health Gerber Memorial Family Medicine - Fremont	204 W Main St Fremont MI 49412	231-924-1800	State
Spectrum Health Gerber Memorial Obstetrics and Gynecology Spectrum Health Gerber Memorial Family Medicine Newaygo	212 S Sullivan Fremont MI 49412 211 W Pine Lake Dr Newaugo MI 49337	231-924-1212 231-652-1631	State The Compliance Team
Spectrum Health Gerber Memorial Multispecialty Clinic Fremont	230 W Oak St Fremont MI 49412	231-942-4200	The Compliance Team
			int compliance reall
Ludington Hospital RHC's Tax ID 38-1359266			
Spectrum Health Ludington Hospital Family and Internal Medicine-Luc		231-845-7380	The Compliance Team
Spectrum Health Ludington Hospital Family Medicine - Pentwater Spectrum Health Ludington Hospital Family Medicine - Hart	500 N Hancock St Pentwater MI 49449	231-869-7051	The Compliance Team The Compliance Team
	2481N 72nd ave Hart MI 49420	231-873-2163	
	N Atkinson Dr Suite 113 Ludington MI 494: N Atkinson Dr Suite 111 Ludington MI 4947		The Compliance Team
Spectrum Health Ludington Hospital Internal Medicine – Ludington	N Atkinson Dr Suite 111 Ludington MI 4940		The Compliance Team
Spectrum Health Ludington Hospital Pediatrics – Ludington Spectrum Health Ludington Hospital Obstetrics & Gynecology	907 E Tinkham Ave Ludington MI 49431 250 N Nelson Rd, Ludington MI 49431	231-843-3477 231-843-6767	The Compliance Team The Compliance Team
Spectrum Health Eduligton Hospital Obstetrics & Ognecology	200 Na Nelson Hu, Eddington Mil 40401	231-043-0101	The Compliance Team
Pennock Hospital RHC's tax ID 38-1360562			
Spectrum Health Pennock Family Medicine - Lake Odessa	4294 Laurel Dr Lake Odessa MI 48849	616-374-7660	The Compliance Team
Spectrum Health Pennock Family Medicine - Ionia	2776 South State RD , Ionia MI 48846	616-775-7500	The Compliance Team
	2851 West M-179 Highway Wayland MI 4934		The Compliance Team
Spectrum Health Pennock Family, Internal & Pediatric Medicine - Has		269-945-0922	The Compliance Team
	005 W Green St Suite 301 Hastings MI 4905		The Compliance Team
Spectrum Health Pennock Family Medicine - Middleville	490 Edward St Middleville MI 49333	269-795-4434	The Compliance Team
** State of Michigan survey completed			
*** The Compliance Team - deeming agency hired			
to complete RHC Accreditation			