

COMPLAINT/GRIEVANCE PROCESS

Policy No: HHA 1-009.1

PURPOSE

To set forth guidelines for the resolution of patient concerns, dissatisfaction, or complaints. A grievance is defined as any difference of opinion, dispute, or controversy between a patient/family/caregiver and his/her representative and "REACH Healthcare Services" concerning any aspect of services or the application of policies or procedures.

POLICY

"REACH Healthcare Services" has developed and implemented a process to provide timely and effective feedback for patients and families who express concern about any aspect of the care or services provided.

The grievance procedure will be included in the Patient Rights and Responsibilities, which will be given to each patient upon admission.

The agency will not retaliate against any person for filing a complaint, presenting a grievance, or providing in good faith information relating to home health services provided by the agency.

GUIDELINES

1. Transfer options include:
 - A. Transfer to the care of another agency
 - B. Transfer to a higher level of care (i.e., hospital, SNF)
 - C. Transfer to the care of the family/caregiver(s)
 - D. Remain on services
2. The agency personnel receiving the complaint will put the complaint in writing (Complaint / Feedback Report Form) and discuss with the appropriate clinical supervisor/director within twenty-four (24) hours of the receipt of the complaint. The clinical supervisor or director will investigate the complaint within forty-eight (48) hours of receipt of the complaint and will make every effort to resolve the grievance to the patient's satisfaction within ten (10) days. The resolution of the complaint will be documented in writing on the Complaint Report Form.
8. If the complaint cannot be resolved to the patient's satisfaction, the patient or his/her representative is to notify, in writing, the Director of Marketing and/or Administrator. The complaint must state the problem or action alleged and the date the clinical supervisor was

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notified. The Director of Marketing and/or Administrator will then investigate the complaint and contact the patient or their representative regarding the complaint in an attempt to resolve the differences. The actions taken and resolution will be documented on the Complaint Report Form within thirty days.

4. If the patient feels his/her complaint has not been resolved after working with "REACH Healthcare Services" personnel, he/she will be encouraged to notify the state via the State's Hotline number 1-800-458-9895.
5. Complaints and any action taken will be documented on a Complaint / Feedback Report Form.
6. Complaints received on Patient Satisfaction Surveys (mail) will be documented on a Complaint Report Form and addressed as outlined above.
7. All complaints will be filed in the performance improvement office.
8. The PI coordinator/designee will prepare a quarterly report summarizing all concerns received that quarter and report to the Performance Improvement Committee.
9. Reports may include:
 - A. Number of complaints received
 - B. Type of complaints received
 - C. Action and resolution of complaints
10. The Performance Improvement Committee will review patient complaint trends on a quarterly basis. Identified trends will be followed through the established performance improvement process.
11. All agency personnel (clinical and non-clinical) will be informed of this process during their formal orientation process.

GOVERNING BODY

Policy No: HHA 6-003.1

PURPOSE

To outline the roles and responsibilities of the governing body.

POLICY

The governing body assumes full legal authority and responsibility for the operation of "REACH Healthcare Services". The governing body of "REACH Healthcare Services" serves as the governing authority for the home care program, which will function according to "REACH Healthcare Services" by-laws.

PROCEDURE

1. The governing body will review "REACH Healthcare Services" by-laws at least annually.
2. The governing body will appoint a Professional Advisory Committee to review and develop the policies and procedures, prepare an annual evaluation of "REACH Healthcare Services", and assist in identifying goals and measuring accomplishments of the organization's operations.
3. The governing body will routinely review all fiscal affairs and the financial position of the "REACH Healthcare Services".
4. The governing body will appoint a qualified Administrator and establish procedures of systematic communication between the two. Performance of the Administrator will be monitored regularly through a procedure established by the governing body. Process and documentation reflect that:
 - A. Relevant findings of performance improvement activities are consistently provided to the governing body; and
 - B. Other information relevant to the quality of patient care (i.e., unusual occurrences in care delivered is also consistently provided through a defined process).
5. The governing body will authorize adequate resources and support to establish and maintain an organization-wide performance improvement program. Information related to the performance improvement program is provided to the governing body.
6. The governing body will implement a written conflict of interest policy that includes guidelines for the disclosure of any existing or potential conflict of interest.

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- A. In the event that a situation exists where a member of the governing body could use confidential or privileged organizational information for personal gain, he/she is obligated to report that potential to the governing body. The governing body will then render a decision of the member's eligibility to vote on any particular issue.
 - B. Disclosure of a potential conflict and the governing body's decision regarding the conflict will be noted in the minutes by the Secretary.
7. All new governing body members will participate in an orientation program that includes:
- A. Review of their responsibilities in improving organizational performance
 - B. Review of their responsibilities as defined by the agency by-laws/articles of incorporation
8. The governing body will elect the following officers:
- A. Chairperson of the Board
 - B. Administrator
 - C. Treasurer

A list of names and addresses of the governing body is found in Addendum HHA 6-003.A.