

GRIEVANCE PROCEDURE

Informal - Whenever possible a patient or representative shall attempt to resolve grievances informally with the person or persons causing or involved in the area of complaint. Patients may also utilize a Recovery Specialist or Consumer and Family Services to assist them in resolving grievances before using the more formal grievance process.

How do the Levels work? Patients MUST complete Level 1 before requesting a Level 2 (except when no Level 1 response has been received within 20 days, then a Level 2 may be requested). Level 2 grievances must be completed before requesting a Level 3 and Level 3 must be completed before requesting a Level 4.

Level 1 (Treatment Team) – Patients are invited to meet with members of their treatment team to discuss the grievance. Patients will receive a written response within 20 days of receipt of the grievance.

Level 2 (Grievance Committee) - If dissatisfied with the Level 1 written response, or if response is not received within 20 days, patients may then complete a “Request for Review of Grievance” form checking the Level 2 review box. State the reason for dissatisfaction with resolution of grievance. *A copy of the Level 1 grievance and response must be attached.*

Within 21 days of receipt of the request for Level 2 Grievance Review, the Grievance Committee will schedule and notify the patient in writing of the hearing date, time and location. Within 21 days after the hearing a written response will be provided with findings of fact and resolution.

Level 3 (Superintendent) - If dissatisfied with Level 2 written response, complete a “Request for Review of Grievance” form checking the Level 3 review box. State the reason for dissatisfaction with the Grievance Committee’s resolution. *Copies of the Level 1 and Level 2 grievances and their responses must be attached.*

Superintendent will review the information provided and provide the patient with a written response within 30 days of the receipt of request. This is a document review only. Patients do not meet with the Superintendent.

Level 4 (Administrator) - If dissatisfied with Level 3 written response, complete a “Request for Review of Grievance” form checking the Level 4 review box. State the reason for dissatisfaction with the Superintendent’s resolution. *Copies of the Level 1, Level 2 and Level 3 grievances and their responses must be attached.*

Administrator will provide written resolution within 30 days of receipt of request. This is a document review only. Patients do not meet with the Administrator. **Review by the Administrator is final and not subject to appeal.**

Additional Information

Emergency Grievance - Emergency exceptions will be determined by Chair of Grievance Committee. If the patient believes the grievance is an emergency they should write “Emergency” on the Level 1 grievance form and submit the form directly to the Grievance Committee Chairperson (Consumer and Family Services). If it is determined not to be an emergency, it will be sent to the treatment team to be processed as a Level 1. If it appears to be an emergency then the Grievance Committee Chair will respond to the grievance.

Abuse - Allegations of abuse will be screened by the Office of Adult Abuse Prevention and Investigation (OAAPI) prior to being address by the Grievance Process.

Civil Rights – Title VI; Section 504; ADA. Patient is to write “Title VI” or “Section 504” or “ADA” on the Level 1 grievance form and specify protected class and violation. Submit form directly to the Superintendent within 30 days of alleged discrimination. Chair of Grievance Committee will investigate complaint and issue written decision within 30 days of receipt.

If you have questions regarding the grievance procedures please contact Consumer and Family Services at 503-947-8109.