

SUBJECT: Client Complaints/Grievances	PAGE: 1 OF: 2
DEPARTMENT: Cedar County Public Health	EFFECTIVE: May 2017
APPROVED BY: Cedar County Board of Health	REVISED: REVIEWED: May 2017

Purpose: To provide a standard process for addressing clients' issues and/or concerns with the aim to arrive at a mutually acceptable resolution.

Definitions:

Appeal: Any of the procedures that deal with the review of adverse organization determinations on the health care services of a client.

Complaint: Any expression of dissatisfaction of a client made verbally or in writing which is successfully addressed by the staff present.

Grievance: A formal or informal written or verbal grievance that is made by a client or the client's representative, when a client issue cannot be resolved promptly by staff present. Any complaint or dispute either verbal or written expressing dissatisfaction with the care provided which is unable to result in an amicable resolution.

Policies:

1. A client and/or representative should have reasonable expectations of care and services and the organization should address those expectations in a timely, reasonable, and consistent manner.
2. Every client and/or representative will be informed of the client complaint/grievance internal policy and procedure and the applicable external policies. (See Client Appeal Policy)
3. All clients and/or representative will be informed of internal and external contact information including name, telephone number, and address.
4. A written complaint is always considered a grievance, whether from current or past client regarding the client's care, abuse or neglect, or the organization's compliance with legal mandates or accreditation standards.
5. Information received from a client satisfaction survey usually does not meet the definition of a grievance. If an identified client writes or attaches a written complaint on the survey and requests resolution, then the director will contact the client to discuss the incident.
6. All complaints and grievances are documented on the Client Complaint/Grievance Log by the Director.

Procedure:

- A. If a verbal client care complaint cannot be resolved at the time of the complaint by staff present, is postponed for later resolution, is referred to other staff for later resolution, requires investigation, and/or requires further actions for resolution, then the complaint is considered a grievance. A complaint is considered resolved when the client is satisfied with the actions taken on their behalf. Complaints are documented on the Client Complaint Form and the form is submitted to the Director.
- B. The staff person receiving a grievance shall immediately explain that the grievance will be investigated and will complete a Client Complaint Form and submit it to the Director within 24 hours of hearing the complaint. If the complaint is received in written form it will be given to the Director who will complete the Client Complaint Form.

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C. The Director will respond to the client either verbally or in writing within 2 business days of receiving the grievance to explain the complaint was received and will investigate the grievance within the following 5 business days.

D. If the grievance is unable to be completely investigated in 5 business days, the Director will inform the client of such and provide an estimated length of time for the next response. Every attempt shall be made to resolve grievances within 20 business days.

E. Upon completion of the investigation the Director will inform the client in writing of the decision. The written decision will include steps of the investigation, results of the grievance process, date of completion, and next step in the process if the client remains unsatisfied.

F. All grievances shall be reported to the Cedar County Board of Health either immediately or at the next meeting depending upon the nature of the grievance.

G. All documentation of the complaint, grievance, investigation, follow up actions, and response to the client will be permanently retained in the department.