

# Gila River Health Care Patient Complaint and Grievance Process



## Purpose

- **To inform patients about the necessary steps for responding to patient complaints and to assist with understanding the grievance process.**
- **This report should serve as a guide to understanding and navigating the patient complaint and grievance process.**
- **Patients have a right to report a complaint**  
The Joint Commission: Gila River Health Care (GRHC), a Critical Access Hospital, is accredited by The Joint Commission. We pride ourselves in providing the highest quality of care in the safest environment we can achieve. GRHC leadership values patient observations, concerns and suggestions about what we can do to improve safety and quality. We encourage patients or (family members) to report any concerns related to quality and safety. GRHC will not take retaliatory disciplinary action against any person for reporting a safety or quality concern.
- Per Gila River Health Care Patient Complaint Policy (ADM.100.19.)
- **Who can file a complaint?**  
Any patient, employee or member of the public who has a suggestion, concern or complaint regarding patient safety or quality of care at GRHC is encouraged to contact the Cultural Customer Service Department or the Risk/Quality Manager.

## Patients may also contact any of the below with concerns about patient safety or quality of care:

- GRHC's CEO
- The Joint Commission
- The Arizona Department of Health Services

## Common Questions:

### Who are the Patient Complaint and Grievance Process for?

Gila River Health Care patients.

### Who can report a complaint?

A patient or individual acting on behalf of the patient, Cultural Customer Service Department (CCSD) staff, hospital Management/Administrative Leader, or any other Gila River Health Care employee.

### Where do you submit your complaint?

You may enter a complaint in the electronic data entry system, MIDAS RDE on GRHC's Intranet or notify a CCSD member.

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## Investigative Process Steps

1. The patient or individual acting on behalf of the patient may report the complaint verbally or in writing to the Cultural Customer Service Department (CCSD) staff, or any hospital Management or Administrative Team Leader who will then communicate this concern to a CCSD staff member.

The following information will be collected:

- Date/Time of Complaint
  - Name
  - Medical Chart Number or DOB
  - Phone Number
  - Place/Facility of Incident
  - Date of Service
  - Name of Employee(s) Involved
2. Verbal reports (all pertinent information) will be recorded in the electronic data entry system (RDE) by the CCSD employee receiving the information. To protect the confidentiality of the Occurrence Reporting process, patients will not be asked to complete an Occurrence Report. If a patient wishes to document their concern they are free to do so on plain paper. Asking a complainant to document their concern generally tends to further inflate the level of frustration and is not recommended.
  3. Once the complaint is received, it will be sent to the Director or designee of the department involved for investigation.
  4. Patient Timeframe: The supervisor will review the staff responses and any other pertinent information and submit a written response in regards to causes, recommended solutions and any actions taken to prevent recurrence, to the CCSD Department. The response is expected within 14 working days from the date of the supervisor/department received notification of a patient concern from CCSD, unless the patient complaint is urgent and needs immediate attention. Failure to adequately respond within the time frame will result in having the patient complaint move up the chain of command.
  5. If the complaint involves an employee the report will not be shared with the employee.
  6. Adequate discussion regarding the complaint is expected with the employee.
  7. The Director will then review the staff response and any other information.
  8. The Director will submit a written response in regards to causes, solutions, and any actions taken to prevent recurrence, to the CCSD Department (Patient Advocate.)

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9. For service recovery a follow-up telephone call by the director or designee will be made to the patient regarding the complaint.
10. If there is no response from the Department Director, the patient complaint will move up in the chain of command.
11. If the patient complaint cannot be solved to the patients' satisfaction, they may elect to formalize the complaint as a written grievance.
13. When the issue cannot be solved to the patient/family's satisfaction, they may elect to formalize the complaint as a written grievance. The grievance will be acknowledged either verbally or in writing within two business days of receipt by CCSD. Following a full investigation of the grievance, a written report will be provided to the complainant. This final response will not exceed 45 calendar days. If the patient is dissatisfied with the final response, he/she will be advised by the Patient Advocate or designee, of the right to file a complaint to the Joint Commission or the Arizona Department of Health Services. The patient will be provided with the phone numbers and e-mail addresses of those agencies.

## **GRHC Employee - Resource Information**

- Cultural Customer Service Refresh Course
- Service Excellence Refresh Focusing on:
  - Introducing yourself
  - Patient Name Usage
  - Wayfinding: Offer Help and Escort Patients
  - Smile

## **GRHC Policy References**

- GRHC Open Door/Problem Resolution (HR 104.52)
- GRHC Patient Complaint policy (ADM.100.19.)

## **For more information contact:**

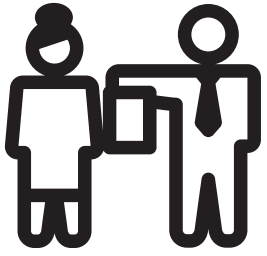
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1 The complaint is received and assigned to the GRHC Director or his/her designee for investigation.



2 The Director will then review the GRHC employee response and any other pertinent information.



3 The Director will submit a written response to the CCSD Patient Advocate. This response will include complaint details relative to: causes, solutions and any other action taken to prevent recurrence.



4 For service recovery, a follow-up telephone call by the Director or designee will be made to the patient regarding the complaint.



5 The Director's response is expected within 14 days. If there is no response from the Director, the patient complaint will continue up the chain of command.



6 If the patient feels the issue was not resolved, they may elect to formalize the complaint as a written grievance.