

Policy and Procedure for Complaints and Grievances

Independence Inc. will address all complaints and grievances received. It is federally mandated that complaints and grievances can be filed with Independence Inc. without fear of retribution.

COMPLAINT

Definition: A complaint is defined as a written, verbal, or electronic request for assistance initiated by or on behalf of a therapy patient(s) regarding concerns about therapy issues including but not limited to care, treatment, or providers.

Complainant: An individual who expresses a concern by filing a grievance. It may be a patient, family member, personal representative, guardian, friend, facility employee, physician, federal or State agency, patient advocates, or concerned individual.

GRIEVANCE

Definition: A request for a formal investigation of a complaint, or a serious complaint involving a therapist, physician, or other provider.

Grievant: An individual who expresses a concern through a formal process by filing a grievance. The grievant's name may be kept anonymous to the facility and permission from the grievant must be obtained before using his/her name in the investigation. However, more information usually can be gathered when the grievant is identified; confidentiality is strictly maintained.

Complaint Process

Complaints may be made by phone, mail, or electronically. The complaint may be made anonymously or the complainant may give permission to use his/her name in investigating the complaint. Confidentiality is strictly maintained.

Independence Inc.'s impartial; interdisciplinary staff provides an abundance of resources to assist in the resolution of complaints.

The complainant is verbally given the outcome of the inquiry of the complaint and is given the process for filing a grievance if he/she determines that additional steps are necessary.

All written complaints are acknowledged within 5 days of receipt. An informal complaint does not require a formal written report to the complainant at its resolution.

GRIEVANCE PROCESS

This process always incorporates a multi-disciplinary approach to its investigation to encourage fair, accurate and unbiased examinations of problem situations in a timely manner, with well researched recommendations for solutions.

If the complaint or grievance meets any of the criteria of the Unusual Events of the Department of Health or Abuse and Neglect policies of the Department of Mental Retardation Services then those policies and procedures will be followed.

Grievants are encouraged to put their complaints in writing in order to maintain consistency in presenting the grievance to the Administrator and to aid in understanding the exact nature of the concern(s). If the grievant is unable to submit a grievance in writing, Independence Inc. staff will complete a grievance form and send it to the grievant for review. If the grievant agrees that the information on the form is a correct version of his or her complaints, the grievant signs the form and returns it to the Independence Inc. office.

Although grievants may elect to remain anonymous to the facility in the grievance process, their identity is very important to Independence Inc. in order to communicate to them and to gather additional information as needed. Independence Inc. does not release the grievant's name without his/her permission to do so. If the nature of the grievance will not allow an adequate investigation without reviewing the patient's records or gathering information that might identify the grievant, the investigation will be limited. In addition, in some facilities, identity of the grievant may occur by the facility even when confidentiality is maintained. The grievant also is informed that it is in violation of federal law to be discriminated against for filing a grievance.

In routine investigations, the first method of resolving the grievance will be through review of the grievance itself and the facility response. At the initial hearing the Administrator may decide that: the grievance is

not valid; the grievance is valid and may determine that corrective actions are necessary; or the Administrator may request more information in order to make a determination.

If the complaints are substantiated by the initial review and are too pervasive to examine off-site, the Administrator may recommend that a site visit be conducted at the facility. If a site visitation is deemed appropriate, a team will be assembled to visit the facility. Team members may include a physician, nurse, social worker, dietitian, administrator and a patient. The Executive Director and other Independence Inc. staff may accompany the team, as well, to provide staff support. Members of the team will not be representatives of or have a financial interest in the facility being visited.

Once the review of the grievance is completed, the Administrator is required to advise an involved practitioner/provider of the results of the investigation and solicit their comments before releasing information to the grievant.

Information that explicitly or implicitly identifies a practitioner is confidential and cannot be disclosed without the practitioner's consent and none of the confidential information in the grievance response letter can be used in litigation

If the patient, facility or practitioner is dissatisfied with the grievance process or outcome, Independence Inc. can be contacted and a written rebuttal of the outcome can be sent to the Independence Inc.. At that time, the grievance may be re-reviewed and/or the person may be provided with the contact information for the State Agency.

GRIEVANCE TIMELINES

When a grievance is received, Independence Inc. will provide written acknowledgement to the grievant within 5 business days. If Independence Inc. can determine, based on the content of a grievance, it does not involve issues involving care, treatment, or providers and it is not an Independence Inc. issue, it will refer the grievant to the appropriate agency or organization.

If the grievance is a valid Independence issue, the administrator of the facility is notified and is required to provide requested information to assist in the investigation. The facility has up to 21 calendar days in which to provide a written response to Independence Inc. regarding the

complaint and to supply specific documentation as needed to investigate the grievance.

The Administrator then reviews the grievance and all documentation provided and makes an initial determination of its findings and recommendations.

An involved physician/practitioner will have an opportunity to submit additional information or comments relating to the findings. Comments must be submitted within 15 days after findings are received, if he/she wants their response to be included in the final report to the grievant.

A letter containing the grievance report is sent to all involved parties – the grievant or patient representative, practitioner and facility. The confidentiality of the grievant and practitioner will be protected unless each has agreed to the release of his/her name.

Most grievances will be concluded within 90 calendar days of receipt of the grievance.

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