

**GRIEVANCE
POLICY AND PROCEDURE
388-877-0240(18)**

POLICY

The possibility exists that an individual requesting or receiving services or an individual's representative may have a grievance/complaint against a staff person or program operated by the Agency. It is the policy of the Agency that each person requesting or receiving services has a right to have his or her grievance addressed and may do so by following the grievance procedure.

PROCEDURE

1. Individuals shall be provided notification of the grievance process upon or prior to admit and upon request.
2. A grievance regarding services provided by the agency can be initiated in person, by mail or by phone.
 - (a) When the grievance is filed in person or by phone, the specific issues of the grievance and a description of concerns shall be documented in writing on the agency grievance form by the staff receiving the grievance.
 - i) The staff member will document date and time the grievance is received on the form.
 - (b) When a grievance is provided in writing, the grievance must be signed by the individual or the individual's authorized representative.
 - (c) A grievance form is available upon request or readily available for printing on the agency website.
3. A person is encouraged to attempt to resolve his/her grievance with the staff person involved.
4. Upon receipt of a grievance the agency will:
 - (a) Acknowledge receipt by sending a notification letter to the individual within 5 business days;
 - (b) Fully investigate the complaint;
 - (c) Attempt to resolve grievances quickly and at the lowest level possible to the individual's satisfaction;
 - (d) Directors will inform the CEO and Chief Clinical Officer of the recommended outcome then notify the individual who initiated the grievance; and
 - (e) Written notification of the outcome will be provided to the individual within 90 days of receipt of the grievance.
5. Grievances will not be kept in the clinical record but will be kept on file in the agency for 10 years.
6. If an individual would like assistance in making a grievance, they may:
 - (a) Contact us by calling (360) 397-8246 or toll free at (800) 604-0025 or

- (b) Contact Ombuds services at 360-397-8470 or 866-666-5070.
 - i) Ombuds services are provided free of charge and are confidential.
- 7. If the individual is not satisfied with the resolution or did not receive notification of the resolution within 90 calendar days, the grievance may also be initiated with the following entities:
 - (a) Department of Social and Health Services (DSHS)
 - (b) Their Managed Care Organization, Behavioral Health Organization or Beacon Health Options
 - (c) Department of Health (DOH) or their local Behavioral Health Organization (BHO) regarding residential services.
- 8. The Agency will ensure the following:
 - (a) That other persons, if the individual chooses, are allowed to participate in the grievance process;
 - (b) The individual will be provided any reasonable assistance in completing forms and taking other procedural. This includes, but is not limited to, auxiliary aids and services, upon request, such as providing interpreter services and toll-free numbers that have adequate TTY/TTD and interpreter capability.
 - (c) The individual's right to have currently authorized behavioral health services continued pending resolution of the grievance;
 - (d) That a grievance is resolved even if the individual is no longer receiving behavioral health services;
 - (e) That the individual will be free from retaliation; and
 - (f) That the persons who make decisions on a grievance:
 - i) Were not involved in any previous level of review or decision making; and
 - ii) Are Mental Health Professionals (MHP) or Chemical Dependency Professionals (CDP) who have appropriate clinical expertise if the grievance involves clinical issues.
- 9. The Quality Assurance Coordinator is the primary contact and reporting person for grievances.