



<b>ADMINISTRATIVE POLICY AND PROCEDURES</b>	<b>Effective Date:</b> 05/16/2016	<b>Proposed By:</b> Director of Outpatient Mental Health, Director of Chemical Dependency, & Director of Compliance
<b>Subject:</b> Complaints & Grievances	<b>Reviewed Date:</b> 7/16, 10/16, 5/17, 2/18, 7/18, 1/19, 10/19, 1/20, 2/20, 7/20, 1/21, 1/22, 2/22, 4/22, 1/23, 2/23	<b>Approved By:</b> (Chief Executive Officer)  <b>Signature:</b> <i>Jessica Brandon</i> <small>Jessica Brandon (Feb 24, 2023 14:31 CST)</small> <b>Email:</b> jbrandon@cmmhc.com
<b>Policy #:</b> 29-14	<b>Revised Date:</b> 7/16, 10/16, 5/17, 2/18, 7/18, 1/19, 10/19, 2/20, 7/20, 2/22, 4/22, 1/23, 2/23	<b>Date Approved:</b> Feb 24, 2023
<b>Version:</b> 17	<b>Supersedes Policy #:</b> <b>Dated:</b>	<b>Page(s):</b> 1 of 7

**Policy:**

It is the policy of Central Minnesota Mental Health Center (CMMHC) a DHS licensed provider to ensure that people served by this program have the right to respectful and responsive services. We are committed to providing a simple complaint process for the people served in our programs and their authorized or legal representatives to bring grievances forward and have them resolved in a timely manner.

It is the policy of CMMHC that clients participate as fully as possible in their own rehabilitation program. To facilitate such client participation, it is our policy to review and respond to the manner which will preserve and foster the therapeutic aspects of conflict resolution and problem solving while assuring the protection of the rights of the client and former client.

Translators, Interpreters, and Readers who meet the communication needs of the client may be provided during the grievance process. Clients are permitted to have a legal representative of their choice to represent their interests during the grievance process.

All reports made by clients of a suspected violation concerning center policies, procedures, staff, services, violations of privacy, grievances of unethical, illegal, or grossly negligent acts will be investigated. CMMHC will investigate such reports in a timely and objective manner.

At CMMHC, we realize that effective communication between employees and management is essential to maintain a productive working relationship. This is especially true with employees' complaints or grievances. If there is a misunderstanding about your job or the company's policies, we ask that you talk it over with your supervisor or Human Resources so that we may effectively address your concerns. Please refer to section 719- Employee Concerns and Suggestions in the Employee Handbook for additional information.

Any intimidation of or retaliation against clients, families, friends, or other participants in the grievance process is prohibited. Employees who violate this policy are subject to disciplinary action, up to and including termination.

If the client's rights have been violated, employees who violated those rights are subject to disciplinary action, up to and including termination. CMMHC shall mitigate, to the extent possible, any known harmful effects of the violation.

**Scope:**

Clinical Managers, CMMHC Providers, Directors, Support Staff, Supervisors, Office Managers, Director of Human Resources, Director of Compliance, and Chief Executive Officer

**Responsibilities:**

The Director of Compliance is responsible for overseeing the documentation of the grievance process, and implementing corrective measures as needed with assistance of the Managers, Supervisors, Directors, Director of Human Resources, and the Chief Executive Officer.

**Definitions:**

**Complaint.** A verbal statement that a situation is unsatisfactory or unacceptable. Complaints are dealt with here and now and resolution occurs immediately in person or by phone. A written document that is not on the grievance form indicating that a situation is unsatisfactory or unacceptable will follow the complaint process.

**Grievance.** A written report on the grievance form by clients of alleged unethical, illegal, or grossly negligent acts, or serious violation regarding center policies, procedures, staff, or services. Grievances will involve initial written acknowledgement of the grievance within a reasonable amount of time (typically within 24 hours, Monday-Friday or the next business day in the event of a weekend or holiday) but no later than three (3) days of a staff member's receipt of the grievance, investigation of the grievance, and a formal written response to the client within 15 days. Exception: Clients in Detox or Focus XII will receive an initial written acknowledgement of the grievance within 24 hours regardless of a weekend or holiday.

**Violations of Standards.** The center shall have procedures for the reporting and investigating of alleged unethical, illegal, or grossly negligent acts, and of the serious violation of written policies and procedures. The center shall document that that reported behaviors have been reviewed and that responsible disciplinary or corrective action has been taken if the behavior was substantiated. The procedures shall address both client and staff reporting of complaints or grievances regarding center procedures, staff, and services. Clients and staff shall be informed they may file the complaint with the department if it was not resolved to mutual satisfaction.

**Service Initiation and Posting Procedure:**

- Service Initiation
  - A. At service initiation (day of admission), the license holder must explain the grievance procedure to the client or the client's representative.

- Posting and Availability Procedure
  - A. The grievance procedure must be posted in a place visible to clients and made available upon a client's or former client's request.

**Complaints Procedure:**

- I. Clients can make verbal complaints to any employee at any of our locations.
  - A. Staff will listen to the client's concerns and try to rectify the situation in the moment in person or by phone.
    1. If the client and staff come to a resolution in-person or by phone, no further action will be taken.
    2. If the client and staff cannot come to a resolution in person or by phone, the staff member will escalate the concern(s) to a Manager, Supervisor, or Director.
      - a. Manager, Supervisor, or Director will listen to the client's concerns and try to rectify the situation in the moment in person or by phone.
      - b. If the client and Manager, Supervisor, or Director come to a resolution in-person or by phone, no further action will be taken.
    3. If the client and Manager, Supervisor, or Director do not come to a resolution the Manager, Supervisor, Director will explain the formal grievance process to the client.
      - a. If the client does not want to bother with the formal grievance process, try to resolve the issue again as outlined above.
    4. If the client wants to proceed with the grievance process the Manager, Supervisor, or Director (staff member) will assist the client in developing and processing the grievance by completing the Grievance form.
      - a. All grievances must include:
        - i. Client Name
        - ii. Address
        - iii. Telephone Number
        - iv. Specific Complaint
        - v. Expected Outcome
        - vi. Client's signature
        - vii. Date the client signed the form
      - b. The completed Grievance form and summary of the client's concerns should be submitted immediately by email to the Director of Compliance for review and investigation.
      - c. For Detox and Focus XII clients, the completed Grievance form and summary of the client's concerns should be submitted immediately by email to the Program Manager and Director if the form is received on a weekend or holiday.
        1. The Program Manager or Director should also be notified immediately by phone to ensure they can comply with the 24-hour requirement.
- II. When a written document that is not on the grievance form is received indicating that a situation is unsatisfactory or unacceptable will follow the complaint process.
  - A. The document will be routed to the Supervisor, Manager, Director of the department for review.

- B. The Supervisor, Manager, or Director will contact the client about their concerns and try to rectify the situation in person or by phone.
2. If the client and Manager, Supervisor, or Director come to a resolution in-person or by phone, no further action will be taken.
  3. If the client and Manager, Supervisor, or Director do not come to a resolution the Manager, Supervisor, Director will explain the formal grievance process to the client.
    - a. If the client does not want to bother with the formal grievance process, try to resolve the issue again as outlined above.
  4. If the client wants to proceed with the grievance process the Manager, Supervisor, or Director (staff member) will assist the client in developing and processing the grievance by completing the Grievance form.
    - a. All grievances must include:
      - i. Client Name
      - ii. Address
      - iii. Telephone Number
      - iv. Specific Complaint
      - v. Expected Outcome
      - vi. Client's signature
      - vii. Date the client signed the form
  5. The completed Grievance form and summary of the client's concerns should be submitted immediately by email to the Director of Compliance for review and investigation (original should be sent by mail).
- III. If the complaint is about an employee the client is not obligated to discuss it with that person, the client has the option to take their concerns directly to the employees' Supervisor, Manager, or Director to seek resolution by following the process outlined above.

**Grievances Procedure:**

- I. When a client grievance is received the following will occur:
  - A. CMMHC responds to the client's grievance within three (3) days of a staff member's receipt of the grievance, and the client may bring the grievance to the highest level of authority in the program if not resolved by another staff member.
    1. Exception: Clients in Detox or Focus XII will receive an initial response within 24 hours of receipt of the grievance from a designated employee in Detox or Focus XII.
      - a. A copy of the grievance should be scanned and emailed to the Detox or Focus XII Program Manager immediately.
  - B. The Director of Compliance will initiate the investigation.
  - C. The Director of Compliance (or designee) will send an initial letter to the client within three (3) days (typically within 24 hours, Monday-Friday or the next business day in the event of a weekend or holiday), of receipt of the grievance informing the client that the grievance was received, is under investigation, parties involved have been notified, and a formal written response will be sent from the Chief Executive Officer (highest level of authority in the agency) to the client within 15 days.

1. Exception: The Detox or Focus XII designated employee will send an initial letter to the Detox or Focus XII client within 24 hours of receipt of the grievance informing the client that the grievance was received, is under investigation, parties involved have been notified, and a formal written response will be sent from the Chief Executive Officer (highest level of authority in the agency) to the client within 15 days.
  2. A copy of the grievance and the initial letter should immediately be scanned to the Director of Compliance and Detox or Focus XII Program Manager or Director for further action.
- D. The Director of Compliance will notify staff involved in the grievance and next steps to take in the process.
1. If it is determined that a grievance about a staff person or puts client welfare in jeopardy the staff person may be placed on suspension pending outcome of the investigation.
  2. Generally, a staff suspension must be approved by the Chief Executive Officer or in his/her absence, by the Human Resource Director.
    - a. If neither are available, the program Director and/or the Director of Compliance may make the decision to ensure no clients are in jeopardy.
- E. The Director of Compliance will email a copy of the grievance to the employee's Manager, Supervisor, or Director.
1. If the grievance is in relation to an alleged employee incident, the grievance will also be referred to Human Resources.
  2. If the grievance is in relation to an alleged HIPAA incident, the grievance will also be referred to the Privacy Officer.
- F. The Manager, Supervisor, Director, and the employee mentioned must review the grievance and send a written statement of details specific to the grievance and recommendation(s) for resolution to the Director of Compliance.
- G. The processing of the grievance shall include:
1. Staff's response
  2. Manager, Supervisor, Director's response
  3. Appropriate authorities for final resolution including:
    - a. Chief Executive Officer
    - b. Director of Compliance
    - c. Director of Human Resources
- H. The processing of client grievances shall be pursued as expeditiously as possible.
1. A final written response to a grievance shall be provided to the client within 15 days from the date the client grievance was filed.
  2. We must document the grievance along with the investigation findings and resulting action taken by CMMHC.
  3. This information must be kept on file at the agency for 6 years.

- II. Current telephone numbers and addresses of the following agencies are provided to clients to be contacted at any point regarding grievances:

Name	Address	City, State, Zip	Phone #	Email Address
MN Dept of Health	625 Robert St N	St Paul, MN 55164	651.201-5000	
Dept of Human Services Licensing Division	444 Lafayette Rd- PO Box 64242	St Paul, MN 55164-0242	651.431.2000	
MN Board of Behavioral Health & Therapy	335 Randolph Ave, Suite 290	St. Paul, MN 55102	651.201.2756	bbht.board@state.mn.us.
MN Dept of Health Alcohol & Drug Counselor Licensing Program	335 Randolph Ave, Suite 290	St Paul, MN 55102	651.201.5756	
Dept of Office of Health Facilities Complaints (OHFC)	PO Box 64970	St Paul, MN 55164-0970	651.201.4200 or Toll Free: 1.800.369.7994	<a href="mailto:health.ohfc-complaints@state.mn.us">health.ohfc-complaints@state.mn.us</a>
Office of Ombudsman for Mental Health & Developmental Disabilities	332 Minnesota Street, Suite W1410 First National Bank Building	St Paul, MN 55101-2117	651.757.1800 or Toll Free: 1.800.657.3506 TTY/ Voice: MN Relay Service 1.800.627.3529	<a href="mailto:ombudsman.mhdd@state.mn.us">ombudsman.mhdd@state.mn.us</a>
Secretary of the Federal Dept of Health & Human Services	200 Independence Avenue SW	Washington, DC 20201	202.690.7000 or Toll Free: 1.877.696.6775	
MN Board of Psychology	335 Randolph Ave, Suite 270	St Paul, MN 55102	612.617.2230	<a href="mailto:psychology.board@state.mn.us">psychology.board@state.mn.us</a>
MN Board of Social Work	2829 University Ave, SE #340	Minneapolis, MN 55414	612.617.2100	<a href="mailto:social.work@state.mn.us">social.work@state.mn.us</a>
MN Board of Marriage & Family Therapy	335 Randolph Ave, Suite 260	St Paul, MN 55102	612.617.2220	<a href="mailto:mft.board@state.mn.us">mft.board@state.mn.us</a>

### III. Documentation

- A. All grievances received must be documented.
- B. All grievance dispositions must be documented.
- C. A copy of the final resolution of the grievance will be filed with the Director of Compliance.
- D. The documentation of the grievance must be retained for 6 years.

#### **Reviewed By:**

- Leadership

#### **Applicable Standards/ Regulations:**

- 9520.0790, Subdivision 4
- 9520.0800 Subdivision 6
- 9530.6540, A-D
- 245A.04, Subdivision 1, d
- 245G.15, Subdivision 2
- HIPAA: 164.530(d)(1)
- HIPAA: 164.520(b)(6)

**Attachments:**

- Grievance Form
- Grievance Form Review and Investigation
- Grievance Response Initial Letter Template
- Grievance Response Final Letter Template

**Review/Revision History:**

Version(s):	Review date:	Description of Changes:
1	5/16/16	New policy
2	7/19/16	Merged OPMH, Focus12, OPCD, ACT, TCM, & HIPAA Grievance Policy & Procedure into one document
3	10/12/16	Updated Additional Contacts
4	5/24/17	Added Human Resources throughout policy, removed grievances going to the BOD. Differentiated between complaints and grievances. Added the complaint procedure. Updated the Grievance Notice, Updated the Grievance Form, and created Grievance Form Review & Investigation.
5	2/6/18	New logo, updated header, formatting
6	7/17/18	Policy formatting, changed who completes the Grievance form, added appeal contacts and violation of standards, added the section on complaints not on the grievance form and complaints about employees
7	1/19	Annual review, updated statute language
8	10/19	Updated the phone #'s for the Ombudsman & Secretary of Federal Health & Human Services
9	1/20	Annual review, formatting
10	2/20	Updated grievance definition for Detox clients, updated grievance procedure for Detox clients
11	7/20	Updated grievance definition for Focus XII clients, updated grievance procedure for Focus XII clients. Updated grievance form definitions. Clarified when to contact external agencies.
12	1/21	Annual review
13	1/22	Annual review
14	2/22	Updated agency telephone numbers and addresses
15	5/22	Changed response time from 30 days to 15 days, clarified procedures, retired grievance procedure notice
16	1/23	Annual review & title changes
17	2/23	Updated Ombudsman Address

**Review/Revision History:**

Previous Policy #'s:	Review date:	Description of Changes:
4.07.03.00	05/16/16	Original policy







# 29-14 Complaints and Grievances V17

Final Audit Report

2023-02-24

Created:	2023-02-21
By:	Joy Shamla (jshamla@cmmhc.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAPtsXKznt-i-IDPjM1_EhPtPkxv45i4Xr

## "29-14 Complaints and Grievances V17" History

-  Document created by Joy Shamla (jshamla@cmmhc.com)  
2023-02-21 - 7:37:23 PM GMT
-  Document emailed to jbrandon@cmmhc.com for signature  
2023-02-21 - 7:37:36 PM GMT
-  Email viewed by jbrandon@cmmhc.com  
2023-02-24 - 8:30:55 PM GMT
-  Signer jbrandon@cmmhc.com entered name at signing as Jessica Brandon  
2023-02-24 - 8:31:11 PM GMT
-  Document e-signed by Jessica Brandon (jbrandon@cmmhc.com)  
Signature Date: 2023-02-24 - 8:31:13 PM GMT - Time Source: server
-  Agreement completed.  
2023-02-24 - 8:31:13 PM GMT