



Policy and Procedure

Section: Continuous Quality Improvement (CQI)
Subject: Complaints and Grievances
Policy Number: QI002
Effective Date: March 13, 2013
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Purpose: To delineate the process for receiving, managing and reporting complaints and grievances.

Policy: Carisk Partners (CBH) shall set up a system to receive, manage and report complaints and grievance.

Procedures:

I. Complaints from clients, subcontracted providers and stakeholders

1. The complaint must be filed verbally or in writing within one (1) year of the situation or incident occurrence to any ME or CBH staff.
 - Complaints not filed within the established timeframe, may be accepted if the CBH or ME, determines there is an acceptable reason for not filing complaint in a timely fashion or the ME approves the exception.
2. Complaints can be submitted to any staff or department within the ME or CBH.
3. All ME or CBH staff who receive a complaint has the duty to initiate the complaint process by filling out the compliant/grievance form.
4. Once a complaint is received it will be directed to the CBH Quality Department, specifically to the CBH Quality Director and QI Coordinator.
5. Complaints will be acknowledged in writing within the following 5 business days of receipt by the CBH Quality Department.
6. The complaints will be logged for tracking and analysis purposes.
7. The complaint is reviewed by the Quality Department.
 - i. A fact finding inquiry will be conducted that may include:
 - a. Request and review of documents that support the review of the complaint.
 - b. Interviews of individuals with relevant information related to the complaint.
 - c. Review of contracts, all relevant federal and state regulations as well as adopted policies.

- d. Any other action deemed appropriate and/or necessary by the Quality Department with the purpose of verifying the complaint.
 - e. A summary report of the process will be generated.
 - ii. Quality Department will analyze and evaluate the information and will recommend a resolution for the complaint within a timeframe of thirty (30) business days.
- 8. The entire process is documented.
- 9. Once the complaint is resolved, the official resolution will be sent via mail (or email) to the complainant within thirty (30) days of receipt of the complaint.
- 10. If a resolution cannot be achieved, the complainant will be informed of their right to submit a grievance.
- 11. The resolution letter to the complainant details their right to place a grievance and how to do so.
- 12. A quarterly log and summary report will be included in the quarterly Carisk QI Report submitted to BBHC.

II. Grievance Procedure

If a resolution cannot be achieved to the complainant's satisfaction, a grievance may be filed, as follows:

1. Grievances generated from a complaint against the ME:
 - a. The grievance must be filed in writing and directed to the System of Care/QI Committee.
 - b. The System of Care/QI Committee will be provided with the summary report generated by the CBH Quality Department.
 - c. The Grievance will be reviewed within fifteen (15) business day of receipt.
 - d. The System of Care/QI Committee will render a final determination in regards to the grievance.
 - e. This determination will be communicated to the complainant within fifteen (15) business days.
2. All other grievances:
 - a. The grievance must be filed in writing and directed to the Managing Entity Chief Executive Officer and QI Coordinator.
 - b. The Chief Executive Officer will be provided with the summary report generated by the CBH Quality Department.
 - c. The Grievance will be reviewed within fifteen (15) business day of receipt.
 - d. The Chief Executive Officer will render a final determination in regards to the grievance.
 - e. This determination will be communicated to the complainant within fifteen (15) business days.
3. If the complainant is not satisfied with the decision rendered, the complainant can indicate that in writing to the Chief Executive Officer, within five (5) business days, in which case, it will be forwarded, along with a summary of the case, to the BBHC Board of Directors for consideration.
4. The Board of Directors will review the materials provided and provide a formal response by the next Board of Director's meeting or within thirty (30) days, whichever comes first.

5. This information will be sent by a certified letter to the complainant and a copy of the final determination will be placed in the Complainant's file along with the complaint and a final report.

III. Critical Incidents

Any received complaints that indicated potential immediate and/or imminent danger, harm, abuse, neglect, media involvement or any potential high-risk incident with by reported immediately to the QI Coordinator and BBHC QI Coordinator. If the QI Coordinator is not available, the BBHC Director of Administration and the CEO shall be duly notified. As indicated based on the nature and information obtained, CBH will notify appropriate authorities which may include calling in a report to the Florida Abuse Hotline, notifying local law enforcement, deploying 911 emergency services and notifying the ME and DCF SAMH Program Office.

IV. Record Retention

A record of all complaints and grievances shall be maintained for at least five years by Carisk. The record shall include the initial complaint, the written reports of the review/investigation, and the correspondence reporting the decision.

V. Complainant Rights

No reprisals of any kind shall be taken by any party against any aggrieved person, any representative of an aggrieved person, or any other participant in the grievance process. If it is determined that some reprisal has been attempted or implemented it warrants immediate and severe response.