

---

**Policy on Complaints and Grievances**

---

Policy Number: WCHHS-BH 011  
Responsible Team: Quality Assurance  
Origination Date: 05/05/2005  
Next Review Date: 12/31/2019  
Revision history: 8/11/08, 1/7/10, 12/7/10, 12/28/11, 1/28/14, 12/15/14, 06/15/18, 12/10/18

Related Documents: Regional Policy: HSRMH-130 Grievance System

Approved: \_\_\_\_\_  
Division Manager

**OBJECTIVES**

---

- Promote and protect the rights of Washington County Behavioral Health Program (WCBH) recipients regarding complaints/grievances relating to services available through the WCBH system of care.
- To ensure:
  - Recipients and their representatives are educated in the complaint and complaint resolution appeals process.
  - Complaints are investigated and resolved, and the complainant notified of the resolution, in a timely manner.
  - Complainants remain free from retaliation or negative consequences as a result of filing a complaint or appeal.

**SCOPE/APPLIES TO**

---

- Washington County Behavioral Health Program Staff (WCBH), Contracted and Subcontracted Providers, Contracted Employees, Interns and Volunteers
  - Clients on the Oregon Health Plan (OHP) or
  - Clients who have limited funding, indigent, uninsured, or underinsured and are receiving general fund dollars administered by the County.
-

## POLICY

### I. Definitions:

**Client:** An individual receiving behavioral health services in Washington County.

**Contracted Providers:** means an individual, facility, institution, corporate entity or other organization that supplies behavioral health services or items, or bills, obligates and receives reimbursement on behalf of a rendering provider OAR 410-120-0000 (204).

**Grievance:** means a client's expression of dissatisfaction to the Washington County Behavioral Health Program.

**Representative:** means an individual who acts on behalf of an individual at the individual's request with respect to a grievance including by not limited to a relative, friend, Division employee, attorney, or legal guardian OAR 309-019-0105 (99).

### II. Policy Statement

A complaint occurs when a WCBH client or client representative expresses dissatisfaction to Washington County about any matter regarding their behavioral health care and flexible funding, except when related to reduction, suspension or termination of a requested service (see Regional Policy HSRMH-130 Grievance System). Grievances may include, but are not limited to, the access to care or services, quality of care or services provided, aspects of interpersonal relationships such as rudeness of a provider or employee, or failure to respect the enrollee's rights regardless of whether remedial action is requested.

WCBH provides a complaints and grievances process for individuals to express concern about the services provided by WCBH and contracted providers, and allows the complaint to be received and investigated by Washington County.

A client who requests or receives service through WCBH (or the client's representative) has the right to file a complaint and to appeal the resolution if they are in disagreement with the outcome. In the event of the death of the client, client representative, or provider may participate in the appeals process.

All clients are informed of their rights to initiate a complaint and appeal upon enrollment in services with contracted provider agencies.

Clients may be educated about the complaint process through three primary sources: the Health Share of Oregon Member Handbook, newsletters and other informal notices, and by the provider upon entering services.

### III. **Procedure**

WCBH staff follows the regional policy and procedure outlined in the HSRMH-130 Grievance System. A client, client representative, or provider with the client's written permission, may file a complaint either verbally or in writing on behalf of the client by contacting any of the following:

- Provider agency clinical or administrative staff;
- Washington County Member Access Line;
- Washington County Complaints, Grievances and Abuse Hotline (503) 846-4515;
- Washington County Behavioral Health Program representative;

Resolution of the complaint may be provided orally or writing to the complainant as described in OAR 410-141-3261(3)(a).

#### **A. Complaints Submitted to Mental Health Provider Agencies**

Clients are encouraged to submit complaints directly to the contracted provider agency where they have requested services or are receiving services. If the client is not receiving services and has a complaint about access to services or other concerns about the services, the member may submit the complaint directly to Washington County. Providers who receive complaints from WCBH clients that are not enrolled in services with the provider are expected to provide necessary assistance to assist the member to submit the complaint to Washington County Quality Assurance. Providers are expected to respond to complaints from individuals as described below:

- a. All contracted providers are required to post their complaint policy in the waiting room or other public access areas.
- b. All contracted providers are required to educate clients receiving services on how to access the process at both the provider and the plan level, and will document in the client's record that the complaint process has been explained.
- c. A Washington County representative may be present when a complaint is being discussed, and may meet with the complainant and the provider to resolve the complaint.
- d. If a complaint cannot be resolved at the provider level to the complainant's satisfaction, the complaint will be submitted to WCBH for additional review and consideration.
- e. Decision makers involved in previous reviews or decisions pertaining to the complaint will not be involved in any requests for additional review or appeals of the complaint resolution complaint.

#### **B. Complaints Submitted to Washington County Member Access Line**

- a. Clients may initiate a complaint directly to the Member Access Line.
- b. The Member Access Line employee who is initially contacted with a concern will forward calls to a WCBH Quality Improvement (QI) staff for resolution.

### **C. Complaints Submitted to Washington County Behavioral Health**

The QI staff or other designated staff member receiving a complaint from a client or a client's legal representative determines the nature and circumstance of the complaint and the resolution the individual is seeking to the complaint. Complaint forms are located on the Washington County website: <https://www.co.washington.or.us/HHS/MentalHealth/quality-improvement.cfm> or upon request.

The QI staff will give clients any reasonable assistance in completing forms or complaint services including, but not limited to providing Certified or Qualified Health Care Interpreter services and toll-free numbers that have adequate TTY/TTD and Certified or Qualified Health Care Interpreter capability.

The QI or other designated staff reviews the complaint and any supplementary documentation received. The complainant is notified within 5 working days of the resolution. If additional information or time is needed to complete the investigation, the complainant is notified in writing within the 5 working days. The notification will communicate why additional information or time is needed, and that the grievance decision may be delayed up to 30 days. Additional information must be furnished to Washington County within 14 calendar days or another mutually agreed upon time, or the complaint or grievance may be resolved without this information.

WCBH notifies providers of a complaint through a request for input and related documentation. WCBH determines if the complaint should be referred to the provider for resolution or to pursue resolution of the complaint directly.

WCBH QI staff will notify the client or client's legal representative of the resolution of or decision on complaints or grievances either orally if an oral grievance was received or by submitting a complaint resolution letter if a written complaint was received. When the decision is adverse to the client the complainant will be notified of their right and the process to appeal the complaint resolution. If the decision relates to denial or reduction of services, a Notice of Action will be issued along with a statement of Appeal and Hearing Rights.

### **D. Documentation of Complaints**

WCBH maintains a complaint log of all complaints received. The log of Health Share member related complaints is submitted to Health Share of Oregon within 20 days after the end of each calendar quarter in the format specified in the Health Share of Oregon contract. WCBH also

maintains an auditing and monitoring plan outlining frequency, scope, and compliance elements that include:

- Review of completeness, accuracy and timeliness of documentation,
- Compliance with written procedures for receipt, disposition, and documentation,
- Compliance with applicable OHP rules; and
- Forwarding analysis to Quality Improvement Committee as necessary

All contracted providers are required to have a process for recording and reporting complaints, which will be made available to Washington County Mental Health Program upon request.

The provider agency will be informed in writing of the results of any investigation and any corrective action requirements or recommendations. Washington County may institute corrective actions for a provider or impose other sanctions as deemed appropriate by WCBH to respond to significant complaint patterns and/or serious incidents. If WCBH's analysis of complaint data indicates that a provider has a disproportionately high volume of complaints or serious complaints relating to ethical or safety concerns, Washington County may initiate further investigation of the provider's activities relating to client complaints.

WCBH does not discourage a member from using any aspect of the grievance system or take punitive action against a provider who requests an expedited resolution or supports a member's resolution

For grievance resolutions not in favor of the member, appeal rights and information to access Health Share of Oregon 503-416-8090 pr 1-888-519-3845 or tTY/TDD 711, OHP Client Services Unit (CSU) toll free at 800-273--0557 and Oregon Health Authorities (OHA)s Ombudsman at 503-947-2346 or toll free at 877-642-0450 for appeal are included in the resolution letter.

Documentation regarding complaints and complaints investigations will be maintained for a minimum of 10 years from the date of resolution of the complaint. Documentation provided to clients or client representatives, such as Notice of Receipt Letter or Complaint Resolution Letter will be written in a language sufficiently clear that a layperson could understand according to readability standards in OAR 410-141-3300. The document information, as applicable, will include but is not limited to:

- Written complaint or written summary of a verbal complaint
- Hand written notes
- Complaints Notification of Receipt letter (re: additional information or time needed)
- Request for Documentation letter

- Any submitted documentation from the provider, member or other party related to the complaint investigation
- Complaint Resolution Letter
- Complaint Report
- Required Action follow-up letter
- Complaint Conclusion Letter