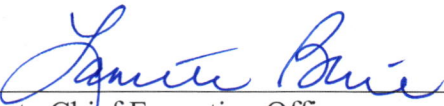


**LOUISIANA STATE UNIVERSITY HEALTH CARE SERVICES DIVISION  
BATON ROUGE, LOUISIANA**

POLICY NUMBER: 6508-17  
CATEGORY: Other Hospital / Patient-Related Activity  
CONTENT: Policy on Patient Complaints and Grievances  
EFFECTIVE DATE: Issued: February 11, 1999  
Revised: February 17, 2006  
Reviewed: May 30, 2008  
Reviewed: December 12, 2011  
Reviewed: November 8, 2012  
Reviewed: May 12, 2015  
Reviewed: January 23, 2017  
Reviewed: June 8, 2017

INQUIRIES TO: Dr. John Couk, Chief Medical Officer  
LSU Health Care Services Division  
Medical Services  
Post Office Box 91308  
Baton Rouge, Louisiana 70821-1308  
Phone: 504-568-2259 Fax 504-568-2090

  
\_\_\_\_\_  
Deputy Chief Executive Officer  
LSU Health Care Services Division

6/12/17  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Chief Medical Officer  
LSU Health Care Services Division

6-12-17  
\_\_\_\_\_  
Date

LSU HEALTH CARE SERVICES DIVISION  
PATIENT AND FAMILY GRIEVANCES

I. POLICY

It is the policy of LSU Health Care Services Division (LSU- HCSD) to protect patient health, safety and ensure that high-quality care is afforded to all patients. As a part of accomplishing this, all patients and/or the patient's designated representative shall have a right to file a grievance in order to resolve problems that directly involve the LSU-HCSD facility, Lallie Kemp Regional Medical Center and/or staff members at this hospital.

The patient shall be informed of this right during in-patient admission and via postings in general waiting areas used by patients and visitors. The notice shall inform each patient of the right to file a grievance and shall specify to whom and how to contact the person responsible for handling the complaint or grievance. The notice shall also notify the patient he or she has a right to file a grievance directly with LSU HCSD, the State of Louisiana Department of Health and Hospitals (DHH) and/or the Joint Commission. Phone numbers, addresses, email address and web sites shall be made available to the patient.

The act of filing a grievance, suggestion or comment will not compromise patient care nor affect the access to care in the future. It is the responsibility of each HCSD Hospital Administrator to inform all staff of this policy and to ensure full compliance. Each health care facility will have in place a policy that conforms to CMS Conditions of Participation, the Joint Commission and the HCSD Policy "Patient and Family Grievances".

This policy will be in compliance with Executive Order MJF 97-39, *State Customer Service Standard*. Complaints contain information that is privileged, confidential or otherwise protected from use and disclosure.

II DEFINITIONS

Grievance –A formal, informal, written or verbal request/complaint by a patient, his/her designated representative to have the facility formally review a concern or objection about the quality or appropriateness of patient care. This also includes complaints regarding violation of the rights of a patient as defined under CMS Conditions of Participation and the Joint Commission, employee misconduct, or a complaint that has not been resolved by informal means at the point of care or while the patient was hospitalized. Email and faxed correspondence are recognized forms of communication.

It is expected that the facility will have a process to comply with a minor request (such as room change, dietary request) in a more timely manner than a written response. Written responses are not required for a relatively minor grievance that can be resolved quickly

### III PURPOSE

The review and resolution of patient/client complaints, suggestions or comments will result in improved quality of care; effective, efficient and responsive customer service; enhancement of public image; and contribute to the Quality Improvement/Risk Management program, as well as compliance with regulatory agencies' rules and guidelines

### IV APPLICABILITY

This policy will apply to Lallie Kemp Regional Medical Center, office and employees of the LSU Health Care Services Division.

### V IMPLEMENTATION

This policy and any subsequent revisions will become effective upon signature of the LSU HCSD Deputy Chief Executive Officer or his/her designee.

### VI GENERAL GUIDELINES

#### A. HOSPITALS

1. Lallie Kemp Regional Medical Center will have at least one person identified as a "Patient Advocate" who will be responsible for receiving and investigating issues that have not been resolved by the unit management. This person will work as a facilitator/mediator to resolve the issues in the best interest of the patient and the facility, and identify underlying problems that should be corrected. These underlying problems will be brought to the attention of the unit director and others in hospital management, as appropriate, for corrective action.
2. It is expected care givers and supervisory chain of command staff will address complaints, grievances or concerns presented by the patient or family member in a timely manner. It is strongly advised supervisors and managers attempt to resolve issues within their areas before consulting the Advocate and only refer problems to the Patient Advocate when the supervisor or manager is unable to resolve the problem, issue or complaint. Patients or family members may also issue a complaint directly to the Patient Advocate.

3. Patient and family members will be advised of their rights to present complaints, suggestions or comments via any of the following mechanisms:
  - In a direct manner to any employee while hospitalized or visiting an out-patient area
  - Via phone, fax or mail after discharge
  - Through patient satisfaction survey process
  - By contacting HCSD, DHH or the Joint Commission
4. Grievances must be acknowledged in writing within 10 days and resolved within 40 days. Written documentation must be kept on each grievance received. This written documentation is to be kept along with a log of incoming grievances. The log should contain the date the grievance was received, type of grievance, area of hospital involved and outcome/resolution including a closure date. The log serves as a reference point for monthly statistics as well as an “at a glance” reference point for open and closed grievances.

PLEASE NOTE:

Patient complaints or grievances reporting potentially harmful and /or dangerous situations, such as abuse or neglect, must be investigated immediately and acted upon in an appropriate manner.

5. Inpatients with Medicare who submit a grievance must be notified of their right to have their grievance also submitted to the hospital’s Peer Review Organization if the grievance is related to the quality of their care or premature discharge. The date of notification must be recorded in the written documentation of the grievance.
6. Lallie Kemp Regional Medical Center will have an ad-hoc consultant group designated to review and investigate any formal grievance requiring more than one department’s participation for resolution.
7. Lallie Kemp Regional Medical Center must also address patient complaints relating to theft of personal property according to State Risk Management Guidelines.
8. The Patient Advocate will compile a monthly report regarding the numbers of complaints and grievances received. This report will be shared with appropriate persons/committees at the hospital level as determined by each Hospital Administrator. The information will also be shared with HCSD at quarterly Operational Review Meetings.

9. It is expected grievances of a serious nature that become sentinel events or could potentially result in a negative outcome for a patient will be reported to LSU HCSD Administration as soon as they become known to hospital personnel.

HCSD recognizes that many patients and citizens of Louisiana do not understand the public private partnerships and/or the transition management structure of the former LSU Hospitals. All efforts will be made by the HCSD Director of Patient Relations to forward all inquiries, comments, complaints to appropriate personnel at the partner hospitals so inquiries can be addressed in a timely manner. An electronic log will be kept of calls, emails, inquiries received and their disposition.