



521 4th Street Havre Montana 59501 • Phone: 406-395-4305 • Fax: 406-395-5643 • www.bullhook.com

POLICY AND PROCEDURE

PATIENT GRIEVANCE

2009

PURPOSE:

To assure that Bullhook Community Health Center patients have access to a fair and efficient process for resolving differences with our organization.

PROCEDURE:

Any staff member/employee of Bullhook Community Health Center can work with a patient or his/her family to resolve a dispute. However, the dispute should first be referred to the appropriate department to attempt resolution. Staff members should conform to the following:

1. Ask the patient to fully describe the complaint in writing, including the nature of the complaint, whether the complaint concerns an individual staff member or Bullhook Community Health Center in general. Ask them to include dates, times, the situation and any other pertinent details. This may be done on a Patient Complaint Form or in letter format.
2. If the staff member cannot quickly rectify the situation to the patient's satisfaction, the staff member should contact a Supervisor or the Chief Operations Officer. Contact information should be obtained from the patient. They should be informed that the Grievance is being referred to management team.
3. Immediately upon receipt of a Patient Complaint the Chief Operations Officer will mail the patient the letter below. This outreach effort will notify the patient that we have received their complaint, are conducting an investigation, and will follow up with them once the investigation is complete.
4. The Supervisor or Chief Operations Officer will investigate and discuss the complaint with the patient in an attempt to understand and rectify the grievance. At the conclusion of the investigation the Chief Operations Officer will make a written report and submit to the Chief Executive Officer.
5. In the event the Chief Operations Officer cannot rectify the situation to the patient's satisfaction, the patient can file a written complaint with the Bullhook Community Health Center Chief Executive Officer. The Chief Executive Officer will then decide whether the issue needs further follow-up and respond to the patient in writing.
6. In the event the Chief Executive Officer cannot rectify the situation to the patient's satisfaction, the patient can file a written complaint with the Bullhook Community Health Center Board of Directors. The Board of Directors will then decide whether the issue needs further follow-up and respond to the patient in writing.
7. Board members receiving complaints will ask the patient to provide the Chief Executive Officer with the above information or may refer the complaint directly to the Chief Executive Office. The Chief Executive Officer is the first responder and will personally respond to all complaints.
8. The Quality Improvement Committee will periodically review patient complaints. Trends will be reviewed and follow-up or corrective actions recommended as indicated.

[Handwritten Signature]

CHIEF EXECUTIVE OFFICER

Date: 9-14-2017

[Handwritten Signature]

CHAIR, BOARD OF DIRECTORS

Date: 9-11-17

Date first adopted	01/01/2008
Date Revised/QI Board approval	11/10/2010, 05/27/2015, 03/22/2016, 08/30/2017
New date adopted/Board of Directors approval	11/22/2010, 06/08/2015, 4/11/2016, 09/11/2017



BULLHOOK
Community Health Center

521 4th Street, Havre, Montana 59501-3649
Phone: (406) 395-4305 • Fax: (406) 395-5643

Date: mm/dd/yyyy

Patient Name
Patient Address

Dear **Patient Name**,

Thank you for submitting your written patient complaint. Bullhook Community Health Center aims to be a leader in community healthcare by improving access to care and providing the highest quality care to our patients.

We are in the process of investigating your complaint. I will personally be in contact with you upon completion of our investigation.

Best regards,

Name
Chief Operations Officer