

PATIENT COMPLAINT PROCESS

This procedure is instituted as part of the patient rights, Performance Improvement, and Risk Management approach to improving patient care by providing the patient, guardian or family members with appropriate channels for communicating about Brook Lane's services and by providing feedback to those involved.

Any complaint by a patient, family member or guardian can be filed without fear of retaliation or interference in the patient's care.

A complaint can be filed any time but must be filed within three (3) years after incident occurred. No information regarding a patient complaint will be discussed with anyone other than the patient or staff without written authorization from the patient or his/her designee.

All complaints regarding inpatient services should be presented to the Director of Inpatient Services. The Director of Inpatient Services will work on behalf of the patient to resolve complaints at the lowest administrative level possible. All complaints regarding outpatient services should be addressed to the patient's therapist. The therapist will work on behalf of the patient to resolve complaints at the lowest administrative level possible. All complaints regarding Partial Hospitalization Services should be addressed to the Director of Partial Hospitalization Program. The Director will work on behalf of the patient to resolve complaints at the lowest administrative level possible. Such action will assure a more prompt and personal approach to the complainant's concern. Deliberate action toward problem resolution is essential and time of resolution is critical. Problem resolution activity will begin immediately upon hearing the patient and/or family member complaint.

If the complainant is unhappy with the resolution at the level noted above, the complainant should direct his or her query to the Patient Advocate, 301-733-0331 X1140, or the Privacy Officer, 301-733-0331 X1227. The complaint should be presented in person, by telephone or in writing.

The Patient Advocate will investigate the complaint and document the results of the investigation within ten (10) working days of receiving the complaint. This may include meeting with the patient, staff and any others involved in the



complaint. A follow-up report will be given to the complainant either by phone, letter, or in person.

If the complaint is still not resolved to the patient's satisfaction, complainant will be advised that he/she may request that the complaint be reviewed by the Ethics Committee. When the Chair of the Ethics Committee receives the request, a meeting will be scheduled to review the complaint within 10 working days of receiving the request. If necessary, the patient or representative may be asked to attend the review in person. A final report by the Ethics Committee including recommended action and results will be sent to the CEO with copies to the Medical Director, the Risk Manager and the patient.

The complainant may also request the address and phone number for the Department of Health and Human Services to file a complaint regarding violation of patient rights.