


THREE RIVERS HEALTH CENTER Policy and Procedure Manual	
Title: Patient Complaints and Grievances	
Department: Compliance - 2006	
Last Reviewed: June 1, 2024	
Board Approval: [Date] <input type="checkbox"/> N/A	

PATIENT COMPLAINTS AND GRIEVANCES POLICY

I. STANDARD OF CARE

1. Federal Law:
 - a. Section 330(k)(3)(C) of PHS Act; and 42 CFR 51c.110, 42 CFR 51c.303(b), 42 CFR 51c.303(c), 42 CFR 51.c304(d)(3)(iv-vi), 42 CFR 56.111, 42 CFR 56.303(b), 42 CFR 56.303(c), and 42 CFR 56.304(d)(4)(v-vii)
2. Federal Guidance:
 1. Health Resources and Services Administration (HRSA) Health Center Compliance Manual Chapters 10. (August, 2018)

II. PURPOSE

To ensure Three Rivers Health Center is abiding all Federal, State, and local statutes and regulations governing the patient complaints and grievance process. To provide patients with a formal system to voice concerns, complaints, and grievances.

III. POLICY

1. Three Rivers Health Center shall maintain a system that receives, investigates, and resolves patient complaints and grievances.
2. Information regarding the grievance and complaints process will be provided to all new patients and made available upon request at any time, will be posted in a visible location in all clinics at all time, and if it is unfeasible to post, it shall be made available in pamphlet form and will be posted to the TRHC external website.
3. Complaints and Grievances may be accepted by mail, email, phone, and in-person from any TRHC clinic.
4. Complaints and Grievances can be submitted directly to TRHC risk management designee or TRHC leadership.
5. TRHC shall respond to filed complaints and grievances in writing within thirty (30) days of the issuance. If the grievance is not resolved within thirty days, TRHC will send an additional notice of pending resolution.

6. TRHC will document, analyze, and address clinically-related complaints and “near misses” reported by clinic employees, patients, and other individuals.
7. TRHC leadership within risk management will provide summaries with trend data and information for complaints and grievances to designated committees and stakeholders, composed of but limited to Health Board Entity, Operational Directors, and Clinical Directors. The summary will consist of the following:
 - i. Monthly or quarterly complaints and/or grievances by category, location, and provider as needed.
 - ii. A description of the complaint or grievance
 - iii. Resolution or action taken to resolve the complaint.
8. Patient complaints and grievances records will be kept in accordance with the TRHC record retention policy.
9. All TRHC staff who interact with patients will be informed of the patient complaints and grievances policy and procedure.

IV. SCOPE

This policy applies to the Tribal Council, Board Committees, and all TRHC Staff responsible for developing, updating and/or enforcing TRHC policies and procedures.

V. ADMINISTRATION AND INTERPRETATIONS

For assistance in administering this policy or for answers to questions and clarifications, please contact Administration Department.

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VI. AMENDMENTS OR TERMINATION OF THIS POLICY

TRHC reserves the right to modify, amend, or terminate this policy at any time.

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Sources: Indian Health Services (IHS)
Accreditation Association for Ambulatory Health Care (AAHC)

VII. RESPONSIBILITY

All TRHC Leadership