



**Policy and Procedure:** Patient Grievance Policy

**Policy:**

The Linton Regional Medical Center delegates responsibility for the effective operation of the patient complaint/grievance process to the Quality and Compliance Manager and the Chief Executive Officer (CEO).

Under the leadership of the Quality and Compliance Manager and CEO, this policy establishes a reporting mechanism to process and resolve patient complaints/grievances while maintaining a comprehensive record of complaints/grievances in accordance with applicable State and Federal law.

It is implied throughout this policy that any reference to patient may also be the patient's representative. It should also be understood that response to a patient's representative other than the patient will be in compliance with HIPAA regulations. Note that reference to "the Linton Regional Medical Center" in this policy also includes the following clinics: Linton Clinic, Campbell County Clinic, and Hazelton Clinic.

A complaint/grievance is any concern a patient has regarding his/her care, treatment, or experience at Linton Regional Medical Center and may be received verbally i.e., telephone or in-person, and/or in writing i.e., letter, fax, email or survey.

All patients have the right to know the Linton Regional Medical Center's Complaint/Grievance Process and the process for filing a complaint to the Linton Regional Medical Center and State, Federal, and Regulatory Agencies. An informational form describing this process is given to all patients upon admission to the hospital.

Concerns such as billing, housekeeping of a room, and serving of preferred foods may be addressed promptly by the appropriate staff present and/or department supervisor/manager receiving the complaint.

Concerns related to patient care and service will be forwarded to the Quality and Compliance Manager or CEO for investigation and for trend monitoring.

Complaints filed against the Linton Regional Medical Center, employees of the Linton Regional Medical Center or members of the medical staff that allege care or actions which may result in potential or actual injury, abuse, neglect, abandonment or death, will be forwarded immediately to the Quality and Compliance Manager or CEO for investigation.

**Scope:** All of Linton Regional Medical Center and satellite facilities.

**Goal:** Efficient and timely processing, tracking, and resolution of all patient complaints/grievances.



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**Procedure:**

Initial Response

The patient's expectation for resolution of the complaint/grievance will attempt to be identified during the initial communication with the patient. This can include but is not limited to expecting a full investigation or the patient may be satisfied with the fact that the complaint is being documented.

The Quality and Compliance Manager or CEO shall be notified of all complaints/grievances.

Any complaint/grievance received by a staff member or member of the medical staff should be addressed at the time of the complaint/grievance by the appropriate staff present (including supervisor/manager). If staff present cannot resolve the complaint/grievance, then the department manager will forward the complaint/grievance to the Quality and Compliance Manager or CEO.

Communication to Complainant

Complaints/grievances received by the Quality and Compliance Manager or CEO will be acknowledged as follows:

- From the time of acknowledgement, the Quality and Compliance Manager or CEO will notify the patient within 7 business days regarding the status and/or resolution of the investigation. The complaint/grievance may require an extended investigation due to the complexity of the issue. The patient will then be informed verbally at least every 14 days of the status until completion of the investigation.
- The patient will receive written communication upon completion of the investigation of their complaint/grievance.

Investigation

The investigation process will be initiated by the Quality and Compliance Manager or CEO and will include the following steps:

- Fact-gathering
- Creation of complaint file by submitting a report to the Quality and Compliance Manager or CEO.
- Notification to complainant (refer to Communication to Complainant)
- Notification of appropriate staff and administrators including but not limited to the Risk Management committee for potential Peer Review and to the Safety Committee for potential patient safety issues. The hospital's liability insurance carrier may be notified of any incident with potential for harm.

All information, communication and follow-up will be maintained in the complaint/grievance file by the Quality and Compliance Manager.

The Quality and Compliance Manager will report a summary of complaints/grievances quarterly to the QA committee and periodically to the Linton Regional Medical Center's Board of Directors and Risk Management Committee.



## Linton Regional Medical Center

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**Contact Information:** Elizabeth Hanson,  
Quality and Compliance Manager  
701-254-4511 ext. 135

Lukas Fischer  
CEO  
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### **You may also report concerns to the State Department of Health**

North Dakota

Department of Health

Health Facilities Division

600 East Boulevard

Bismarck, ND 58505-0220

(701) 328-2352

Website: <http://www.health.state.nd.us>

### **If you are covered by Medicare you may contact Medicare with:**

- Concerns regarding your care
- Grievances or complaints about the quality of patient care received while in the hospital
- A disagreement regarding a coverage decision
- An appeal of a premature discharge if you feel you are being sent home before you are ready

1-800-633-4227/TTY: 1-877-486-2048

### **State Quality Improvement Organization Contact Information**

North Dakota

KEPRO

5700 Lombardo Center Dr., Suite 100

Toll Free: (844) 430-9504

TTY: (855) 843-4776

Website: <http://www.keproqio.com>