TOIYABE INDIAN HEALTH PROJECT	DOCUMENT TYPE: **Procedure**	TITLE: **Patient Complaint - Response Procedure**	CHAPTER: **Medical, Dental, Behavior Health, Optical Reception**
	EFFECTIVE DATE: **June 15, 2020**		Previous Policy Date December 12, 2019
		POLICY OWNER: **Chief Executive Officer** SIGNATURE:	PAGE: **1 of 2**

PURPOSE: To establish a process for addressing patient comment or complaint regarding their experience with Toiyabe Indian Health Project (TIHP). All comments and complaints are taken seriously and will be subject to the policy listed below.

GENERAL PRINCIPLE: TIHP facilities and staff must:

- Be courteous, truthful, and respectful when dealing with patients.
- Carry out their professional work in a competent and objective manner.
- Be in continuous compliance with TIHP policy and procedures including confidentiality.
- Comply at all times with all federal, state and local laws and regulations, including but not limited to laws relating to license, scope of practice, facility operations, and billing requirements.

1. **Complaints**: Persons concerned that any violation of the above principles has occurred can register a comment with the TIHP Quality Improvement Department or with the direct departmental supervisor (ex. Dental reception supervisor).
    a. Written complaint with any supporting evidence regarding the complaint must be submitted no later than 20 working days (working days does not include holidays and weekends) after the event to be considered timely. However, we may consider complaints outside of this time frame.
    b. Complaint can be sent to the facility address: Toiyabe Indian Health Project, Inc. Administration Building-Quality Improvement Department 250 N See Vee Ln, Bishop, CA 93514
    c. Complaints can also be entered at the following link https://app.smartsheet.com/b/form/ce433cea57b64bebb685eae0ec34848e
    d. All complaints will be responded to within 10 working days of being received by the Quality Improvement Department or designee. Responses will be made in person, phone, email, or certified mail. If there is a finding that is sensitive, other follow-up meetings may be appropriate.

2. **Comments**: Persons wishing to make a general comment regarding their experience with the facility may submit their comments to the facility comment drop boxes located throughout the lobbies.

3. **All satellite clinic sites/ facility responsibility:**
    a. Complaints must be sent via interoffice mail or secure email to the Quality Assurance/ Quality Improvement Department within 3 working days of being received. Cards in the main Bishop clinic are collected weekly.
    b. The Quality Assurance/ Quality Improvement Department will be responsible for working with the department supervisor to promptly investigate and responding to complaints. Responses of the results of the investigation back to the person making the claim will be given within 10 working days of receipt of complaint.
    c. If the person making the complaint is not satisfied with the response given, they may appeal it to the Chief Operation Officer (COO), or their designee. The results of this appeal will be given within 10 working days of being received.
    d. If the person making the complaint is not satisfied with the response given by the COO, they may appeal it to the Chief Executive Officer (CEO), or their designee. The results of this appeal will be given within 10 working days of being received.

e. If the person making the complaint is not satisfied with the response given by the CEO, they may appeal it to the Quality Assurance board. The board will have 20 working days to respond. (The Quality Assurance board may refer the complaint to the full TIHP board.)

f. The Quality Assurance/ Quality Improvement Department will keep a record of receipt and disposition of all complaints and report out to the TIHP board as appropriate.

g. The Quality Assurance/ Quality Improvement Department will be responsible for reporting any infraction of laws or guidelines that govern an employee's license and /or credentials to the proper governing authorities. (i.e., state medical board, OSHA, FDA).