Grievance Procedure

For all patients, their families, and parents and/or guardians of minor patients.

PURPOSE:
- To ensure that patients and their families and/or guardians have a means to communicate complaints and grievances.
- To ensure that a timely and meaningful response is provided to the person(s) making the complaint and/or grievance.

The submission of a complaint or grievance does not affect or compromise the patient’s current treatment or the patient’s future access to care.

DEFINITIONS:
Complaint: A complaint is an oral/verbal expression of displeasure or dissatisfaction voiced by a patient or patient’s representative about service, care, or treatment that can be resolved quickly by staff present. Staff present includes any Brattleboro Retreat staff present at the time the complaint was expressed or who can quickly be at the patient’s location to resolve the complaint.

Grievance: A “grievance” is a written or oral concern (when the concern about patient care is not resolved at the time of the complaint by staff present) by a patient, or the patient’s representative, regarding the patient’s care, abuse, or neglect.

PROCEDURE:
- Upon admission, each patient is provided with a copy of the Brattleboro Retreat’s Patient Bill of Rights and Grievance Procedure where the complaint, grievance, and appeal process is described.
- Patients are encouraged to discuss concerns directly with unit staff. Many concerns can be resolved in this manner.
- If staff present cannot resolve the complaint to the patient’s satisfaction, or if the patient chooses not to pursue a complaint with staff, the patient may initiate a formal grievance.
- A patient or the patient’s representative may initiate a grievance at any time by providing a statement that explains the problem and any relief requested to any Brattleboro Retreat employee. A patient may receive assistance in transcribing an oral grievance from anyone, including Brattleboro Retreat staff.
- The Brattleboro Retreat makes Grievance Forms readily available to patients in community areas and to a patient’s representative upon request, although a grievance may be submitted in any written form or format.
- When a Brattleboro Retreat employee receives a patient grievance, the employee shall provide the patient or patient’s representative with a copy of their grievance, and will immediately inform the Director of Patient Advocacy and Consumer Affairs (or designee) by telephone or email, providing the name of the patient initiating the grievance. The Brattleboro Retreat employee will then forward the original copy of the written grievance to the Director of Patient Advocacy and Consumer Affairs (or designee). The Patient Advocate can be reached at 802-258-6118.
- If the grievance includes any allegation of abuse or neglect, staff will also follow the Brattleboro Retreat’s mandated reporting policy.

Revised May 15, 2017
● All grievances will be investigated and responded to in writing within a reasonable timeframe.

● The patient or patient’s representative may appeal to the Brattleboro Retreat’s Grievance Committee if they are dissatisfied with the response to their grievance.

● The Brattleboro Retreat makes available Grievance Appeal forms to any patient or patient’s representative upon request, although a grievance appeal may be submitted in any form or format, including orally through contact with the Brattleboro Retreat’s Director of Patient Advocacy and Consumer Affairs (or designee).

● Upon conclusion of the investigation into a grievance, the Director of Patient Advocacy and Consumer Affairs (or designee) shall ensure that a written response to the grievance is provided to the patient or patient’s representative.

● The Patient Advocate can be reached at 802-258-6118

APPEAL PROCESS:
Upon receipt of a grievance appeal, the Brattleboro Retreat’s Director of Patient Advocacy and Consumer Affairs (or designee) shall document the receipt of the appeal and immediately forward the appeal to the Brattleboro Retreat’s Grievance Committee.

Within a reasonable timeframe, the Grievance Committee shall:

1. Review the grievance decision and take such other action to investigate the matter as the Committee deems appropriate.

2. Provide the patient or the patient’s representative with a written notice of decision, including the steps taken to investigate the appeal and the reason for the decision.

The Grievance Committee’s decision will be final.

EXTERNAL RESOURCES FOR COMPLAINTS AND GRIEVANCES:

● Vermont Department of Health
  108 Cherry Street, Burlington, VT 05402
  1-800-464-4343 (toll free in Vermont)
  802-863-7200

● Green Mountain Care Board
  89 Main Street, Third Floor, City Center
  Montpelier, Vermont 05620
  802-828-2177

● Vermont Board of Medical Practice
  P.O. Box 70, Burlington, VT 05402-0070
  1-800-745-7371 (toll free in Vermont)
  802-657-4220

● Disability Rights Vermont
  141 Main St., Suite 7, Montpelier, VT 05602
  802-229-1355

● The Joint Commission
  One Renaissance Blvd., Oakbrook Terrace, IL 60181
  630-792-5000

● Department of Financial Regulation
  89 Main Street, Montpelier, VT 05620
  802-828-3301

● Vermont Department of Health
  280 State Drive NOB 2 North
  Waterbury, VT 05671-2010
  802-241-0090

● Vermont Department of Disabilities, Aging & Independent Living, Division of Licensing and Protection
  HC 2 South, 280 State Drive
  Waterbury, VT 05671-2060
  802-241-0480 Fax: 802-241-0343

● Vermont Board of Medical Practice
  P.O. Box 70, Burlington, VT 05402-0070
  1-800-745-7371 (toll free in Vermont)
  802-657-4220

● Department for Children and Families, Family Services Division
  Consumer Concerns Team
  280 State Drive HC 1 North
  Waterbury, VT 05671-1080
  802-241-0925

Survey and Certification Intake/Complaint:

● Email: ahs.dailscintake@vermont.gov
● Phone: 1-888-700-5330; Fax: 1-802-241-0383

A patient and/or the patient’s representative may make a complaint or grievance about a physician to:

Vermont Board of Medical Practice
P.O. Box 70, Burlington, VT 05402-0070
1-800-745-7371 (toll free in VT) 802-657-4220

A patient and/or the patient’s representative may make a complaint or grievance about a Social Worker, Mental Health Counselor, Substance Abuse Clinician, Psychologist or Marriage/Family Therapist to: Vermont Secretary of State, Office of Professional Regulation: 800-439-8683.

Patient concerns regarding quality of care or premature discharge may also be sent to the Quality Improvement Organization (QIO). Livanta (866-815-5440) is the organization charged with reviewing the appropriateness and quality of care rendered to Medicare beneficiaries in hospital settings.