DAUPHIN COUNTY MH/MR PROGRAM
POLICY AND PROCEDURE

Policy: The Dauphin County MH/MR Program will use a timely and consistent process to review and resolve complaints and grievances that are presented orally or in writing.

Definitions: The following definitions should be applied to the policy and procedure unless otherwise specified:

Complaint: A complaint is an issue from a consumer, family member or service provider, in written or oral form, which is subject to review and resolution at an informal level within three (3) business days. Failure to render a decision within this time frame automatically results in the upgrade of the complaint to a grievance.

Grievance: A grievance is a complaint which cannot be resolved to the consumer’s satisfaction by informal means or an issue presented by the consumer for formal grievance consideration. All grievances must be in written form for formal action prior to processing. If written on behalf of the consumer by a service provider or any other party, the grievance must be signed and dated by the consumer.

Individuals as Independent Contractors: An individual in private practice, not an agency or organization, that has a service contract with the Dauphin County MH/MR Program. This also includes individuals who are reimbursed by Dauphin County MH/MR Program for services to registered consumers. Individuals as independent contractors may choose to use the Dauphin County MH/MR Complaint and Grievance Policy and Procedure as their grievance policy.

Independent Advocate: An individual or organization selected by the consumer to assist in reviewing information, discussing options, and identifying resources with the consumer and supporting the consumers’ decisions and choices by participating in the grievance process.
Grievance and Appeals Committee: The Grievance and Appeals Committee is comprised of at least three (3) persons designated by the MH/MR Administrator who have no previous involvement in the complaint or grievance. One third (1/3) of the membership must be consumer/family representatives. Review and resolution by the Grievance and Appeals Committee is the final step at the MH/MR Program level.

**Procedure:** The Dauphin County MH/MR Program will use a multi-level procedure to review and resolve complaints and grievances.

**COMPLAINT PROCESS:**

1. Complaint is received by MH/MR Program staff and logged in the Complaint and Grievance (CG) Database within one (1) business day.

2. The Deputy MH or MR Administrator or their designee reviews the complaint through discussions with the consumer, Dauphin County MH/MR Case Management Unit (CMU) assigned case manager, and service provider or individual as an independent contractor within three (3) business days. A record of the information is made.

3. If the consumer has not used the service provider complaint and grievance policy and procedure, the consumer, in coordination with the CMU assigned case manager, will be provided with a copy of the service provider’s written policy and procedure and directed back to the service provider for informal resolution.

   At the discretion of the consumer, complaints concerning individuals as independent contractors may be handled as a grievance.

4. The Deputy MH or MR Administrator or their designee and/or the CMU assigned case manager will monitor the complaint resolution process at the service provider level by written or oral communication with the service provider.

5. At the discretion of the consumer, the complaint may be handled as a grievance.

6. Resolution of the complaint will be documented in the CG Database.
GRIEVANCE PROCESS:

1. Grievances received by any MH/MR staff will be logged into the CG Database within one (1) business day and the MH/MR Administrator will be notified.

2. The MH/MR Administrator reviews the grievance and assigns a lead staff person with responsibility for resolution within two (2) business days.

3. The consumer, CMU assigned case manager and service provider or individual as an independent contractor is notified in writing that the grievance is received and identifies the responsible staff person. A copy of the MH/MR Program policy and procedure is also provided.

4. The lead staff person reviews the information and makes a recommendation to the MH/MR Administrator within five (5) business days.

5. The MH/MR Administrator may accept the recommendation, and this information is put in writing by the lead staff person to the consumer, CMU assigned case manager and service provider and/or individual as an independent contractor within three (3) business days. Step 8 is the next step.

6. The MH/MR Administrator may not accept the recommendation, and this information is put in writing by the lead staff person to the consumer, CMU assigned case manager and service provider and/or individual as an independent contractor within three (3) business days. Step 9 is the next step.

7. The MH/MR Administrator may need further information and consults with the Lead staff person. Step 4 is the next step.

8. If the consumer agrees with the recommendation, the resolution is documented in the CG Database. The lead staff or, at the request of the lead staff, the CMU assigned case manager is responsible for monitoring any action related to the resolution.

9. If the consumer disagrees with the resolution, the grievance is handled at a second level within the MH/MR Program. The lead staff person refers the grievance and all documentation to the Grievance and Appeals Committee.
10. The Grievance and Appeals Committee is appointed by the MH/MR Administrator. The Grievance and Appeals Committee will establish bylaws to govern its operations. The Grievance and Appeals Committee reviews and resolves the grievance. This is the final step in the County MH/MR Program process. The decision of the Committee is binding and must be made in writing within ten (10) business days to the consumer, the assigned CMU case manager and the service provider.

11. The consumer may disagree and must be informed of their option to pursue the grievance to the Department of Public Welfare, Office of Mental Health and Substance Abuse Services or Office of Mental Retardation. A referral to the Department of Public Welfare is documented in the CG Database.

12. The lead staff person continues to act as a liaison in the State level process.

13. Resolution at the state level is documented in the CG Database.

ADMINISTRATIVE INFRASTRUCTURE:

The Dauphin County MH/MR Program will establish and maintain an administrative infrastructure to manage complaints and grievances from consumers or service providers as follows:

1. The MH/MR Administrator will designate a lead staff person to oversee the policy and procedure process. The lead staff person is responsible for monitoring the CG Database and reports to the Quality Assurance Committee of the MH/MR Program.

2. All MH/MR Program staff will be trained annually on the complaint and grievance policy and procedure.

4. The Complaint and Grievance Database information will be reviewed on an annual basis and reported to the State Program Offices as required.