



HCHB Entering Client Complaints

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Policy:

Number: 4.06.02 Complaints <https://aveanna.ellucid.com/documents/view/491>

Purpose:

Guide on how a clinician/office staff to properly report a complaint (grievance) using HCHB Point Care/ HCHB R2.

Regulation: G448 §484.50(c)(11)

CHAP Manual: PCC.7.I

Video:

Measurement:

1. Client satisfaction survey

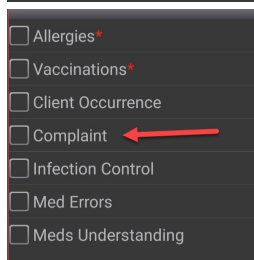
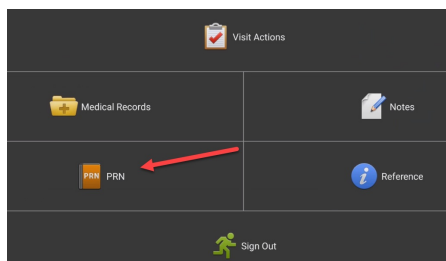
Education:

1. The agency must investigate complaints made by patients, representatives, caregivers, and families including, but not limited to:
 1. Treatment or care that was (or failed to be) furnished, or was furnished inconsistently or inappropriately.
 2. Allegations of mistreatment, neglect, or verbal, mental, psychosocial, sexual, and physical abuse, including injuries of unknown source, and misappropriation of patient property by anyone furnishing services on behalf of the HHA.
 3. Grievance Reports are not retained in the medical record as they both are operational practices and are not related to the client's plan of care.
 4. If the complaint is about a clinical event, the clinical information is documented in the chart with appropriate follow-up, ex: call to physician and subsequent orders.
2. It is encouraged that clients register grievances immediately and preferably within seven days from onset. All grievances will be addressed.
 1. Wherever possible, grievances shall be responded to immediately. Under no circumstances shall a response to a grievance be longer than seven days.

Process

1. Complete the complaint section located in the PRN part of visit actions or in features under medical records in Point Care.

NOTE: If grievance is reported directly to the branch it will be entered via medical records, Choose QI Reporting and select Client Complaint log. Add in the complaint.
2. Clinician will be able to add grievance in the visit by going to the PRN section or it can be added through medical records by selecting Features and then select complaint.
3. Adding to Point care within a visit, first select PRN.





4. After selecting the complaint option click the Add button to create a new complaint
5. Select the complainant-the individual reporting the grievance
6. Add in the name/relationship
7. Type a description of the complaint that is being made: (See examples below)
 1. Caregiver always late and no communication
 2. Unsatisfied with caregiver, requesting different staffing
 3. Unhappy with therapy and process
 4. Client dissatisfied with HHA for delay in getting wound care supplies timely.
 5. ALF director upset with poor communication with patients care status



6. If applicable add interventions/resolutions. This is not a required field so add if applicable.

NOTE: all occurrences will be forwarded to the clinical manager to review and provide any additional follow up if applicable.

7. There is an ability to add in any prevention- not a required field but can be selected if appropriate.

Office process :

1. Branch Director will have workflow [REVIEW CLIENT COMPLAINT REPORT](#) that will drop to to follow up on complaints.
 1. Patient/Caregivers will be called and follow up must occur.
 1. Follow up comments can be added to the complaint.
 2. DO NOT mark workflow as completed until all follow up has been done and documented in the follow up notes.
 2. Document what the resolution/plan that was decided with the patient/caregiver/person reporting complaint.
2. Branch Director will run report QI Events Report for complaint's monthly/Quarterly for review and oversight of resolution and that process is being implemented by staff.
 1. If note that report is lacking known complaints, follow up and reinforce education on how and when to report a complaint with staff.

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