

SECTION - SUPPORTIVE SERVICES  
ADMINISTRATIVE DIRECTIVE NO. 606  
(Replaces A.D. No. 606 dated 7/13/06)

Effective Date: July 12, 2007

**SUBJECT: COMPLAINT PROCEDURE, INDIVIDUALS**

I. PURPOSE

- A. The Coalinga State Hospital provides it's Individuals with the means of obtaining prompt consideration of their complaints through a system of reviews at various levels (the internal complaint process), from unit staff through administration. This policy includes:
1. Individuals the right to file a complaint.
  2. A process for reviewing complaints within a reasonable period of time.
- B. Any person (Individual, staff, family, etc.) who believes a right of an Individual has been withheld or unreasonably denied may file a complaint with the Patients' Rights Office. It is a violation of hospital policy and state law to discriminate, retaliate or, in any way, obstruct a person who has initiated, provided information, or assisted in the process after investigation of any Patient's Right complaint.

II. AUTHORITY

California Code of Regulations, Title 9, Section 885; California Code of Regulations, Title 22, Sections 71507 (a) (8) and 73523; California Welfare and Institutions Code, Section 5325.9; and Department of Mental Health (DMH), Special Orders 231.02 and 722.01.

III. POLICY

The individual complaint process is a pro social method by which to engage Individuals in the resolution of complaints. Staff is expected to model pro social behaviors and attempt to resolve complaints at the lowest level possible.

IV. METHOD

- A. Individuals may file a complaint with the Patients' Rights Advocate in several ways:
1. In person.

2. Staff member, family member, or other interested party contacting the Patients' Rights Office on behalf of the Individual.
  3. Filing a Patient Complaint Form (CSH-087) - or a written letter with the Patients' Rights Office. Patient Complaint Forms can be obtained from the unit office, Patients' Library, or the Patients' Rights Office. Written complaints can be hand-delivered to the Patients' Rights Office or mailed to the Patients' Rights Office through inter-hospital mail (postage is not required).
- B. Upon receipt of the complaint, the Patients' Rights Advocate will determine if the complaint is a Patients' Rights Issue or a Non-Patients' Rights issue and the procedures to be utilized in the resolution of the complaint. The methods and procedures utilized may be one or more of the following:
1. The Individual may be notified that he should discuss his complaint with staff. Treatment issues will be referred back to the treatment team.
  2. The complaint may be returned to the Individual with specific instructions that he should follow in the resolution of his complaint.
  3. The complaint may be formally investigated by the Patients' Rights Advocate, who may include a referral to the Unit Supervisor or Department Head. Complaints alleging abuse shall be referred directly to the Hospital's Senior Special Investigator.
- C. The Individual shall be given a written response regarding the resolution of complaints from the reviewing body. The Individual will receive a copy of the completed complaint from the Patients' Right Office.

#### V. COMPLAINT APPEAL PROCESS

The Complaint Process has four levels.

- A. The first level is the filing of the complaint. If there is dissatisfaction with the action taken, then the complaint may be referred to the following levels. Every effort should be made to resolve the complaints at the lowest level possible.
- B. All documents that have been given and/or received during the complaint process must be included each time the complaint is referred to the next level for it to be accepted. A referral or an appeal may be filed directly, or the Patients' Rights Advocate may provide assistance upon request.

- C. The Second level of the complaint process is with the Executive Director of the State Hospital where the Individual resides. This appeal must be made within 10 working days from the resolution or close date of the complaint. All documents that have been given and/or received during the complaint process must be included in an appeal for it to be accepted. Appeals may be made directly, or the Patients' Rights Advocate may provide assistance upon request. A response to the appeal will be provided within 15 working days from the appeal request. Complaints that do not involve a Patient's Rights issue end at the end at the first level of appeal and the response and/or decision made by the Executive Director or designee shall be the final response. As a general rule, this will include any type of complaint that the advocate determined to be outside the scope of Patients' Rights and, upon receipt and review, referred to hospital staff for response. Therefore, any requests for an appeal made to the second level may be returned to the Individual by the Office of Patients' Rights with a response indicating that, based on the lack of an alleged Patients' Rights violation, the decision from the first level appeal is final.
- D. The Third level of the complaint process is with the Central Office of Patients' Rights. Only appeals of a rights violation will be accepted at this level. A Patients' Rights Specialist and/or the Director will review the appeal and provided a written recommendation for resolution.

California Office of Patients' Rights  
100 Howe Avenue Suite 240 North  
Sacramento, CA 95825

- E. The Fourth and final level of the complaint process is with DMH.
1. If there is dissatisfaction with the recommendation of Office of Patients' Rights, an appeal may be made to DMH, Office of Human Rights. All documents that have been given and/or received during the complaint process must be included in an appeal for it to be accepted. A final decision will be provided in writing to:  

Department of Mental Health  
Office of Human Rights  
1600 9<sup>th</sup> Street, Room 153  
Sacramento, CA 95814
  2. Upon exhaustion of the hospital's internal complaint and appeal process, Patients' Rights complaints may be further appealed through the California Office of Patients' Rights, Protection and Advocacy, Inc.
- F. The appeal may be made directly (by the Individual) or at the Individual's written request by the Hospital's Patients' Rights Advocate. The California Office of Patients' Rights shall then conduct an independent investigation into the complaint, and provide a recommendation for resolution. Before the California Office of Patients' Rights may consider an appeal, the following steps must have been taken:

1. A formal signed complaint must have been filed by the Individual. This complaint must identify the specific right(s) violated, by whom, giving dates and any other pertinent information regarding the complaint. The Individual may seek the assistance of the Hospital's Patients' Rights' Advocate in preparing his appeal.
2. The appeal must show that the complaint has been reviewed internally, and what action, if any, has been taken, as required, through the hospital's internal complaint review procedure. The Hospital's Patients' Rights Advocate and the Executive Director must have had an opportunity to review and respond in writing to the complaint, and the complaint must reflect that the internal process has been exhausted.
3. All pertinent documents such as letters, individual records, hospital policies, etc., applicable to the complaint, shall be forwarded to the California Office of Patients' Rights by the Hospital's patients' Rights Advocate.
4. The California Office of Patients' Rights shall acknowledge, in writing to the Individual, receipt of a complaint within five (5) working days. After completion of the investigation, the California Office of Patients' Rights shall respond to the complaint in writing. Copies of the final departmental decision shall be forwarded to the individual, the state hospital Patients' Rights Advocate, the Executive Director of the hospital, and the Deputy Director of Long Term Care Services, DMH.

#### VI. EMPLOYEE RESPONSIBILITY

- A. All staff members have the responsibility to report to the Patients' Rights Advocate any action or condition that might be reasonably interpreted to adversely affect an individual's rights.
- B. All staff members have the responsibility to assist individual in the filing of a complaint, when requested, and to provide an appropriate written response to a complaint.
- C. Supervisors have the responsibility to assure that individuals are encouraged to exercise their rights, and that staff are responsible and cooperative in the complaint resolution process.
- D. Program Directors and Department Heads have the additional responsibility to ensure compliance and support of the Patients' Rights Advocacy Program.

#### VII. VIOLATION OF RIGHTS

If after an investigation and the Executive Director determines that a right has been violated, a formal notice of violation shall be issued outlining the formal action(s) that may be taken.



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BEN MCLAIN  
Executive Director (Acting)

Cross Reference(s):  
A.D. No. 604 Patients' Rights Advocacy Program