



<b>Policy Name:</b> Patient Grievance Policy	
<b>Policy Category:</b> Patients	<b>Approved by:</b> _____ Board Secretary
<b>Date Approved:</b> May 17, 2017	
<b>Date Revised:</b> June 18, 2018	
<b>Responsible Party:</b> Executive Director	
<b>Approved by:</b> _____ Executive Director	

**Policy:** It is the policy of White Mountain Community Health Center to encourage feedback from patients about their experiences while at the health center. All patient grievances will be taken seriously and handled with respect and efficiency, with timely follow-up and resolution.

**Procedure:**

- When a patient has a concern or complaint in relation to care or services provided, the front desk will assess the urgency of the matter and write a brief note explaining and outlining the situation. If the person is present and issues a complaint, and the matter is deemed urgent, the Executive Director will discuss the situation with them or determine if a social worker is necessary to assist with de-escalation. In the absence of the Executive Director, the Director of Operations or a social worker will meet with the patient. If not urgent, the patient will be informed that someone will contact them by phone based on the following parameters.
- The Executive Director will determine who should contact the patient to discuss the situation. In the absence of the Executive Director, the Director of Operations will be notified to make this decision. At any time during the complaint process, the patient's provider should be notified if appropriate under the circumstances and should be given the opportunity to assist in resolving any complaints related to clinical care.
- The call will be returned within five working days in order to allow time to research the issue. If the issue is urgent, the call back will be made in the same day.
- All interactions with the patient will include listening, courtesy and apology. Regardless of the accuracy of the complaint, it should be acknowledged that the patient perceives the situation to be faulty or negative.
- No person shall be punished or retaliated against for submitting a complaint.
- The grievance will be evaluated by the QI committee. Should the issue seem to require a change in policy, procedure, or internal resolution, the situation will be researched and the needed change made. The patient will be contacted and appraised of this change and thanked for letting us know of the situation. An apology will be extended.
- WMCHC will provide the patient or their designee a response of the situation, and how it has been resolved, within 20 days. This response will be written, and will include relevant findings of the investigation.
- If the patient is not satisfied with the response from WMCHC, the patient may complain to NH's Department of Health and Human Services.
- A brief record outlining the situation from beginning to end will be kept in a grievance file in the Director of Operations office.



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Whole Person. Whole Family. Whole Valley.