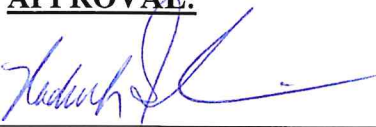




Policy and Procedures

<u>DEPARTMENT NAME:</u> Administration		
<u>SUBJECT:</u> Consumer Complaint Grievance Procedure		<u>POLICY NUMBER:</u> AD-001
<u>APPROVAL:</u> 	<u>EFFECTIVE DATE:</u> 8/20/2020	<u>REPLACES :</u> AD-001, dated March 9, 2017

- I. **PURPOSE:** To support the dignity and rights of all children, families, community partners and community stakeholders, the Children's Network of Southwest Florida has a formal complaint/grievance process. The process shall allow for timely, efficient, and satisfactory resolution of the complaint and/or grievance.

- II. **REVIEW HISTORY:** Reviewed and updated on 5/6/05; 4/27/09; 10/4/13; 2/4/16; and 3/9/17.

- III. **CONTACT:** Quality Management Administrative Assistant. For complaints concerning enrollees of the sunshine State Specialty Plan, contact the Nurse Care Coordinator Supervisor

- IV. **PERSONS AFFECTED:** All people served by the Children's Network of Southwest Florida and/or their subcontracted providers as well as community partners and community stakeholders.

- V. **POLICY:** The Children's Network of Southwest Florida encourages children, families, community partners and community stakeholders to resolve complaints by utilizing the Children's Network of Southwest Florida complaint process when other resolution options have been unsuccessful. However, should the complaint process not resolve a concern to the satisfaction of the complainant the grievance procedure shall be implemented.

All individuals submitting complaints and grievances will be treated with respect and dignity.

- VI. **RATIONALE:** Persons being served by the Children's Network of Southwest Florida deserve to have their concerns addressed quickly and efficiently. This policy assures that complaints/grievances are resolved quickly and at the lowest level possible.

- VII. **CROSS REFERENCES:** Contract with Community Based Care Integrated Health; CFOP 60-10

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VIII. DEFINITIONS:

A. Complaint: A written report of dissatisfaction with a program, service delivered or personnel of the Children's Network of Southwest Florida or any of its subcontracted providers.

B. Grievance: A written report of dissatisfaction with a complaint resolution or a decision made by the Children's Network of Southwest Florida as a result of following the complaint procedure.

C. Grievance System – The system for reviewing and resolving grievances or appeals. Components include a grievance process, an appeal process, and for Sunshine State Specialty Plan enrollees, access to the Medicaid fair hearing

XI. PROCEDURES:

A. Complaint: The procedure for filing a complaint is as follows:

1. Complaint concerning any subcontracted provider of the Children's Network of Southwest Florida

The affected individual or organization shall contact the subcontracted provider, communicate the complaint, and follow the provider's complaint policy/procedure. If the complainant feels that the matter is not resolved to their satisfaction, he/she shall then follow the Children's Network of Southwest Florida complaint procedure as outlined in A.2 below.

2. Complaint concerning the Children's Network of Southwest Florida's services or personnel:

a. The affected individual or organization shall contact the Quality Management Administrative Assistant. A complaint shall be submitted in writing. The complainant may use the Complaint form (Exhibit A) to submit the complaint.

b. Once the Quality Management Administrative Assistant receives the complaint, the individual filing the complaint shall be contacted in writing or documented phone call acknowledging the receipt of the complaint within 5 business days.

c. The complaint will be routed to the appropriate Children's Network of Southwest Florida unit Director for resolution if necessary. The person receiving the complaint will seek to resolve the issue quickly and efficiently. The individual who submitted the complaint will be contacted in writing or by documented phone call, within 15 working days with findings and/or resolution to their complaint.

d. If the initial complaint is not resolved to the satisfaction of the complainant, he or she will be referred to the grievance procedure.

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3. Complaint concerning any enrollee of the Sunshine Child Welfare Specialty Plan

- a. The initial complaint will be handled as detailed in XI, A. 1. a.
- b.. When additional information related to a filed complaint, grievance, appeal or provider dispute is requested by Sunshine staff, the Nurse Care Coordinator Supervisor will provide it to Sunshine within two (2) business days unless the caregiver for the enrolled child filed for an expedited appeal. The Lead Agency will work with CBCIH and Sunshine as needed to resolve the issues reported. For complaints involving behavioral health, the Behavioral Health Coordinator will handle these responsibilities.
- c. In the case of an expedited appeal the Children's Network of Southwest Florida will provide the requested information within 24 hours.
- d.. If the Children's Network of Southwest Florida staff receives information that the enrolled child has a complaint, grievance, or appeal or they identify that a provider has a dispute, the CBCIH regional coordinator will be immediately notified.

B. Grievance:

1. If a complaint is not resolved to the satisfaction of the complainant, the complainant shall communicate this in writing to the Quality Management Administrative Assistant who will then refer the grievance to the Quality Management Director, Chief Operating Officer, or the CEO of the Children's Network of Southwest Florida. The Quality Management Director, Chief Operating Officer, or the CEO will review the original complaint and written response and issue a final resolution in writing to the complainant within 10 working days.
2. For grievances specific to the Sunshine Child Welfare Specialty Plan enrollees, the Nurse Care Coordinator Supervisor for medical and dental issues or the Behavioral Health Coordinator for behavioral health issues will report the information to CBCIH within 2 business days; and within 1 business day for an expedited appeal.
3. Upon learning of a potential issue, The Children's Network will contact CBCHI if needed, to request that staff will be available for consultation, review and/or participation in the MDT process, as well as other case staffings for enrollees who may be impacted or involved.

C. Any person who believes they have been discriminated against can file a complaint with the DCF Office of Civil Rights or the US Department of Health and Human Services if there is no resolution through Children's Network of Southwest Florida's grievance policy.

D. Complaints/Grievances will be tracked and assessed periodically for quality purposes.

XII. **EXHIBITS:** Exhibit A-Complaint Form

Exhibit A

CHILDREN'S NETWORK OF SOUTHWEST FLORIDA, LLC

CONSUMER COMPLAINT/GRIEVANCE FORM

Name: _____ Today's Date: _____

Please describe in detail the incident(s) or event(s) that led you to write this grievance including the applicable date(s).

Please describe the steps taken to resolve the incident, including dates of contacts and with whom the contacts were made prior to submitting to the executive Assistance to the Children's Network of Southwest Florida's CEO.

Referred to: _____

Complaint/Grievance Received by: ____ Date Received: _____ **Written Response:**

Response Date: _____

Return to Quality Management Administrative Assistant, 2232 Altamont Avenue, Fort Myers, Florida 33901.