

# Tool- Grievance Policy and Procedure Checklist

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## TOOL: GRIEVANCE POLICY AND PROCEDURE

### § 483.10(j) Grievances

The resident has the right to voice grievances to the facility or other agency or entity that hears grievances without discrimination or reprisal and without fear of discrimination or reprisal. Such grievances include those with respect to care and treatment which has been furnished as well as that which has not been furnished, the behavior of staff and of other residents; and other concerns regarding their LTC facility stay.

### Purpose and Intent of 483.10

The purpose of the grievance policy and procedure is to develop guidelines and a comprehensive Grievance Program, encompassing individual residents, facility resident population, resident representatives, facility staff, vendors and/or contractors as well as the facility environment.

To assure that the individual facility has followed all the required steps for the development and implementation of a comprehensive grievance policy in accordance to the new Requirements of Participation (RoP), the following checklist captures specific action items for successful completion. The far left column represents the actual Requirements of Participation (RoP) language and the right column indicates specific leadership strategies for successful completion and implementation of the revised RoP. When preparing updated policies and procedures, it is recommended to include actual RoP language as applicable. Please note that CMS has not issued its interpretative guidance for the new Requirements of Participation (RoP), therefore additional updates may be necessary once the guidance is released.

### Suggested Checklist: Comprehensive Grievance Reporting Program and Policy and Procedure

Regulation	Recommended Actions
<p>483.10 (j) <i>Grievances</i>. (1) The resident has the right to voice grievances to the facility or other agency or entity that hears grievances without discrimination or reprisal and without fear of discrimination or reprisal. Such grievances include those with respect to care and treatment which has been furnished as well as that which has not been furnished, the behavior of</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Update grievance policy and procedure with new regulatory language. See Template Policy and Procedure. Update language to include the new resident representative definition and terminology.</li>   <li><input type="checkbox"/> Update grievance postings throughout the organization including the name and contact information of the Grievance Official</li> </ul>

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Regulation	Recommended Actions
<p>staff and of other residents; and other concerns regarding their LTC facility stay. (2) The resident has the right to and the facility must make prompt efforts by the facility to resolve grievances the resident may have, in accordance with this paragraph.</p>	<p><input type="checkbox"/> Update resident rights postings throughout the organization relative to the new grievance process and including the name and contact information of the Grievance Official</p>
<p>(3) The facility must:</p> <p>Make information on how to file a grievance or complaint available to the resident.</p> <p>The facility must establish a grievance policy to ensure the prompt resolution of all grievances regarding the residents' rights contained in this paragraph. Upon request, the provider must give a copy of the grievance policy to the resident. The grievance policy must include:</p> <p>(I) Notifying the resident individually or through postings in prominent locations throughout the facility of the right to file grievances orally (meaning spoken) or in writing; the right to file grievances anonymously; the contact information of the grievance official with whom a grievance can be filed, that is his or her name, business address (mailing and email) and business phone number; a reasonable expected time frame for completing the review of the grievance; the right to obtain a written decision regarding his or her grievance; and the contact</p>	<p><input type="checkbox"/> Review, revise and institute a Grievance Policy and Procedure in accordance to the new RoP. See regulatory requirements as well as template policy and procedure.</p> <p><input type="checkbox"/> Notify resident individually or through postings in prominent locations throughout the facility of the right to file grievances orally or in writing</p> <p><input type="checkbox"/> Update Grievance/Complaint Log to incorporate required components</p> <p><input type="checkbox"/> Update grievance investigation forms to reflect changes</p> <p><input type="checkbox"/> Review and revise grievance process in the Resident Council charter. Present the updates to the Resident Council.</p> <p><input type="checkbox"/> Review and revise grievance process with the facility Family Council/group charter. Present the updates to the Family Council.</p> <p><input type="checkbox"/> Review grievance process at care conferences – part of resident, resident representative education process</p> <p><input type="checkbox"/> Review and revise admission agreement to include grievance policy and procedure as well as a handout with the Grievance</p>

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Regulation	Recommended Actions
<p>information of independent entities with whom grievances may be filed, that is the pertinent State Agency, Quality Improvement Organization, State Survey Agency and State Long-Term Care Ombudsman program or protection and advocacy system;</p> <p>(ii) Identify a Grievance Official who is responsible for overseeing the grievance process, receiving and tracking grievances through to their conclusions; leading any necessary investigations by the facility; maintaining the confidentiality of all information associated with grievances, for example, the identity of the resident for those grievances submitted anonymously; issuing written grievance decisions to the resident; and coordinating with state and federal agencies as necessary in light of specific allegations;</p> <p>(iii) As necessary, taking immediate action to prevent further potential violations of any resident right while the alleged violation is being investigated.</p> <p>(iv) Consistent with § 483.12(c)(1), immediately report all alleged violations involving neglect, abuse, including injuries of unknown source, and/or misappropriation of resident property, by anyone furnishing services on behalf of the provider, to the administrator of the provider; and as required by State law;</p>	<p>Officials name and contact information</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Update Employee Orientation, Agency Staff orientation, vendor orientation, volunteer orientation related to the new grievance policy and procedure. Include the roles and responsibilities of the Grievance Official, name and contact information</li> <li><input type="checkbox"/> Conduct all staff education on the grievance process, roles and responsibilities as well as the Grievance Officials roles and responsibilities. Add to annual training calendar.</li> <li><input type="checkbox"/> Update facility Abuse Prevention Program to include the grievance process as well as Grievance Official’s role and responsibilities</li> <li><input type="checkbox"/> Develop a process to educate all current residents and resident representative on the new grievance process as well as Grievance Official’s role and responsibilities; include their rights, investigation process, and the follow up process</li> <li><input type="checkbox"/> Track, trend and analyze all grievances to determine specific actions needed for performance improvement. Incorporate grievance process and outcomes into the facility QAPI program</li> <li><input type="checkbox"/> Review updated Grievance Policy and Procedure with Medical Director</li> <li><input type="checkbox"/> Design a Grievance Official orientation and competency training process that aligns with the facility grievance policy and procedure and regulatory requirements</li> </ul>

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<b>Regulation</b>	<b>Recommended Actions</b>
<p>(v) Ensuring that all written grievance decisions include date grievance was received, a summary statement of resident's grievance, the steps taken to investigate the grievance, a summary of the pertinent findings or conclusions regarding the resident's concern(s), a statement as to whether the grievance was confirmed or not confirmed, any corrective action taken or to be taken by the facility as a result of the grievance, and the date the written decision was issued;</p> <p>(vi) Taking appropriate corrective action in accordance with State law if the alleged violation of the residents' rights is confirmed by the facility or if an outside entity having jurisdiction, such as the State Survey Agency, Quality Improvement Organization, or local law enforcement agency confirms a violation for any of these residents' rights within its area of responsibility; and</p> <p>(vii) Maintaining evidence demonstrating the result of all grievances for a period of no less than 3 years from the issuance of the grievance decision</p>	<p><input type="checkbox"/> Update records retention policy and procedure to reflect the maintenance and confidentiality of the grievance records; to be included in the QAPI program</p>



The below areas serves as a cross reference for facility leaders to conduct addition policy and procedure review across departments to incorporate the changes set forth in **483.10 (j)** grievances. This listing is not all encompassing however should serve as a resource for leaders as they update their internal policies, procedures and operational processes.

- Resident Rights
- Abuse Prevention Policies and Procedures
- Resident Council
- Family Council
- New Employee Orientation
- Grievance Officer Orientation
- Annual Education Plan
- Medical Record retention
- Incident Accident Process
- Quality Assurance and Performance Improvement

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