Division of Prevention and Behavioral Health Services
Department of Services for Children Youth and Their Families
State of Delaware

CS 006	**COMPLAINT POLICY**		
Authored by:	Kelly Soliman, LCSW	Title: Manager of Quality Improvement	
Approved by:	Susan Cycyk, M. Ed., CDC	Title: Division Director	
Signature:	4/10/2013	Date Adopted: 9/17/97	
	Revision Date: 12/2/97, 10/11/03, 2/8/07, 3/10/10, 4/25/11, 4/20/12, 4/15/13	Reviewed: 4/10/08	Page: 1 of 1

I. PURPOSE

The purpose of this policy is to establish a mechanism by which concerns/complaints may be registered with the division when initial efforts to resolve the complaint have not succeeded.

II. SCOPE OF APPLICABILITY

This policy applies to DPBHS clients, client representatives, DPBHS providers and constituents. It is established to address any disputes, concerns/complaints with the exception of disputes regarding eligibility, denial of continued stay, and level of care which are addressed through the DPBHS Appeal Policy (CS 005).

III. POLICY STATEMENT

It is the policy of the Division of Prevention and Behavioral Health Services to be responsive to concerns/complaints or disputes expressed by our clients, their representatives, our providers and constituents. It is recognized that there will be times when such concerns/complaints or disputes can not be resolved at the point at which they occur. DPBHS staff will ensure that no complainant will experience any form of retaliation for registering a complaint.

The Department of Services to Children, Youth and Their Families, policy 215, Constituent Concerns, defines Executive Constituent Concerns and establishes procedures for handling and documenting Executive Constituent Concerns. The process by which other unresolved complaints, concerns, or disputes are to be handled is found in the DPBHS Complaint Procedure which accompanies this policy.

It is the intent of the Division to resolve concerns/complaints at the lowest level possible.

IV. DOCUMENTATION

Documentation of complaints, concerns and/or disputes will be maintained in the DSCYF Constituent Complaints Database. Responsibility for entry of complaint/concern/dispute information in the database resides with in the DPBHS Quality Improvement Unit.

V. QI/QA MEASURES

Aggregate reports on concerns/complaints are provided to the Quality Management Committee on an annual basis. The Quality Management Committee will report significant findings and/or recommendations to division leadership when assigned to the DPBHS Leadership meeting agenda.

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	COMPLAINT PROCEDURE		
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COMPLAINT PROCEDURE

The DPBHS Complaint Procedure is established to address any complaint, concern, inquiry or dispute (hereinafter referred to as a concern) not addressed through the DPBHS Appeal Policy.

Concerns may be received by DPBHS either directly from a complainant or his/her respresentative. Upon receipt of a concern, the person receiving the concern will notify his/her supervisor and notify the DPBHS Concern Liaison, providing pertinent information regarding the complaint/concern/dispute to include:

- Nature/description of the complaint/concern/dispute
- Name of the constituent concern source
- Name of the client and/or family involved
- Division cited in concern/complaint/dispute
- Contact numbers or e-mail and mailing address

The staff person receiving the concern will advise the complainant that their concern will be considered and a response provided within ten (10) calendar days of receipt of the concern.

In accordance with the DSCYF Constituent Concern Policy (#215), the DPBHS Director shall appoint a Division Concern Liaison whose responsibilities are established are as follows:

1. Collect and record pertinent information including nature/description of the concern, name of the constituent concern source, name of child and/or family involved, division cited in concern, name of employee involved, contact numbers or email and mailing address. Constituent concern sources should be advised that their concern will be considered and a response provided within ten (10) calendar days.
2. If the reported concern meets the criteria of an Executive Constituent Concern, it is be referred to the Office of the Cabinet Secretary within four (4) calendar days for data entry into the Constituent Concern database, coordination and follow-up.
3. If determined not to be an Executive Constituent Concern, the Division Concern Liaison shall:
    - enter information into the Constituent Concern database, and
    - conduct a review of FACTS and solicit additional information as necessary to investigate the concern and determine compliance with policy and procedures. Reviews should always ensure a continuous focus on safety.
    - formulate findings and develop recommendations based upon the information obtained during the investigation.
    - report findings and recommendations in adherence to division protocol and/or policy. Provide a written response to the constituent concern source/complainant within ten (10) calendar days. Responses are written in accordance with DSCYF's policy on confidentiality (refer to section VI. Confidentiality). Responses should also include the following, when appropriate:
        - ► a thank-you to the constituent concern source/complainant for bringing this matter to the Division's attention,
        - ► non-specific, general information outlining policy, procedure or practices relevant to the

presenting concern,
- ► provide assurance the examination of the concern includes review of all relevant policy, procedure and practices,
- ► a statement reinforcing that child safety is our top priority.

4. Enter findings, recommendations, and response into the Constituent Concern Database.

DPBHS Procedure

I. Any staff person receiving a concern will take prompt action to resolve the identified concern and, if appropriate, notify his/her direct supervisor.

A concern may be verbal or written and may be registered as follows:

- Concerns regarding interpersonal interactions and/or responsiveness of staff are to be addressed directly to the individual involved or his/her supervisor.
- Concerns related to quality of services, responsiveness of providers, billing or timeliness of provider payments, and contractual compliance matters are to be addressed to the appropriate DPBHS program administrator.
- The Manager of Quality Improvement shall be contacted if the complainant requires assistance.

If the complaint is not successfully resolved within four (4) calendar days of receipt, it is the responsibility of the individual receiving the concern to:

- notify his/her direct supervisor
- refer all concerns for which resolution is not achieved at this level to the Division Concern Liaison,
- and to provide the Liaison with documentation of all actions taken to address the initial concern.

Upon receipt of the concern, the Liaison will contact the complainant and advise of his/her right to request assistance from the Manager of Quality Improvement in formalizing a written concern.

II. Upon receipt of a second level concern, the Concern Liaison will:
- notify the Unit Director and the DPBHS Deputy Director
- review the concern, interview individuals as appropriate, and review any other pertinent information
- the concern will be reviewed with written notification of the decision to the complainant within ten (10) calendar days of receipt of the concern.
- inform the complainant of the right to request a review of the response to the DPBHS Director within ten (10) calendar days of receipt of the notification and that the DPBHS Quality Improvement Administrator is available to assist in formulating the concern.

III. If the complainant registers a third level concern to the DPBHS Director within the prescribed time period, the Division Director will review the concern, make a final decision and provide written notification of the final decision to the complainant with a copy to the DPBHS Concern Liaison within ten (10) calendar days of receipt of the complaint.

IV. The DPBHS Concern Liaison will enter required information into the DSCYF Constituent Concern Database of all level two and three complaints received to include all information required by DSCYF Policy 215.