**Patient Complaint Process**

**Section:** Company and Employee Standards

**Compliance:** URAC Specialty Pharmacy 2.1

**URAC Standards:** PHARM Core 21, 35, PHARM-OP 14, CSCD 8

**Policy ID:** 1.11

**Approved by:**

**POLICY**

<insert practice name> values input from its customers to help ensure the highest quality of services are provided. <insert practice name> maintains a formal process to address customer complaints, responds in a timely manner and utilizes the information to promote organizational improvement. **[PHARM Core 21 (b-ii)] [PHARM Core 35]**

The complaint process is a way for us to monitor, identify and address issues related to the quality of service provided by the pharmacy staff such as meeting special needs of a population, cleanliness of pharmacy and hours of operation. **[PHARM-OP 14 (a-ii)]**

**PROCEDURE**

1. At the time of admission, the patient is informed in writing of <insert practice name>’s mechanism for receiving, reviewing, and resolving patient complaints. “Welcome Packets” are mailed to each patient that has the details on how to notify <insert practice name> of their complaint and the process for handling. Patients may also utilize the “Contact Us” on the <insert practice name> website (website url) to notify regarding an issue that they would like to report. Click on “Ask a pharmacist” to leave a message or issue for pharmacy staff.
2. The staff member receiving the complaint will complete a “Complaint Form”, record the date, caller, description of complaint, and information about the individual(s) and/or product(s) involved. **[CSCD 8 (c-ii)]** The staff member will determine what actions the patient feels should be initiated to resolve the problem, and attempt to resolve the complaint to the patient's satisfaction. If resolution is accomplished, the Complaint Form will be filed in the designated file for review by the Quality Management Committee. **[PHARM Core 35 (a)]**
3. When the complaint is not resolved at this level, the information is forwarded to the Pharmacy Manager.
4. Within five (5) calendar days of receiving a complaint, <insert practice name> will notify the patient using either oral, telephone, email, fax, or letter format, that it has received the complaint and that it is investigating. Within fourteen (14) calendar days, <insert practice name> will provide verbal notification to the patient as to the nature of the complaint, results of its investigation, steps taken by the organization to resolve the complaint and its response to the complaint. Similar written notice will be provided upon patient request. **[PHARM Core 35 (b)]**
5. In the event, that the complaint cannot be resolved and review by the Quality Management Committee is required, the patient will be notified in writing with th*e date of the* next Quality Management Committee meeting.
6. At the conclusion of the review by the Quality Management Committee, the patient will be notified in writing regarding the outcome of the investigation with a resolution statement that this would be the final review process for the compliant and there are no complaint appeal options **[PHARM Core 35 (b, c)]**
7. All complaints will be held in strictest confidence. Information, including the patient’s name, will be disseminated on a need-to-know basis only
8. A summary of all complaints will be reviewed by the Pharmacy Manager at *least quarter*ly. Information from these complaints will aid in addressing areas for improvement as well the time frame required to resolve the complaints effectively.
9. The summary of all complaints and “Complaint Log” will be included for review at the quarterly Quality Management Committee meetings and Governing Body meetings. **[PHARM Core 35 (e)]**
10. The “Complaint Log” will be utilized to track and generate reports for the complaint activity to include:
    1. Compliance with established timeliness standards surrounding the complaint/appeal resolution processes **[PHARM Core 35 (d)]**
    2. Types of complaints
    3. Involved providers
    4. Analysis of complaints to identify trends and ensure the root causes that led to the complaint are identified and quality improvement activities are developed to correct deficiencies
11. Should the patient feel their privacy rights have been violated, they may contact <insert practice name>’s Privacy Officer (Pharmacy Manager). The patient may also file a complaint with the Secretary of Health and Human Services (Office of Civil Rights) (<http://www.hhs.gov/ocr/privacy/index.html)>
12. All complaints will be documented and copies of Complaint Forms, communication to customers, investigations, and written responses shall be maintained by <insert practice name>.

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