

5.1.7 Health Care Grievance

(a) Policy

California Correctional Health Care Services (CCHCS) shall maintain a health care grievance (grievance) process to provide an administrative remedy to patients under health care's jurisdiction (medical, mental health, and dental) for review of complaints of applied health care policies, decisions, actions, conditions, or omissions that have a material adverse effect on their health and welfare. Any grievance which contains allegations against health care staff behavior or activity which would constitute staff misconduct if true, must be processed as a health care staff complaint (staff complaint).

(b) Purpose

To maintain the integrity of CCHCS and the Division of Health Care Services through fair, objective, and effective review of the grievant's complaints; provide for the resolution of a grievance at the lowest possible administrative level with timely responses to the grievant; provide the grievant intervention as deemed medically necessary by health care staff to address an identified health care issue and/or staff complaint; and afford the grievant an avenue for the exhaustion of administrative remedies prior to initiation of a court action.

(c) Responsibilities

(1) All health care staff involved in the grievance process shall be responsible for the effective operation of the grievance process and ensure that every grievance and staff complaint is reviewed thoroughly and answered appropriately in accordance with California Code of Regulations (CCR), Title 15, Division 3, Chapter 2, Subchapter 2, Article 5, Health Care Grievances, and applicable rules, regulations, and policies.

(2) Institutional Level

(A) The Chief Executive Officer, or designee, is responsible for the institution's grievance process, ensuring it operates effectively and consistently and is the institutional level reviewing authority.

(B) Each institution shall have a Health Care Grievance Office (HCGO) and assigned staff, including a Health Care Appeals Registered Nurse and a Health Care Grievance Coordinator, responsible for the processing of all grievances and staff complaints.

(C) Health care staff with supervisory authority over the subject of a staff complaint is responsible for conducting the confidential inquiry.

(3) Headquarters' Level

(A) The Chief, Health Care Correspondence and Appeals Branch (HCCAB), and the Deputy Director, Policy and Risk Management Services, are responsible for oversight of the statewide grievance process, ensuring it operates effectively and consistently.

(B) The Chief, HCCAB, is the headquarters' level reviewing authority.

(C) HCCAB shall have assigned staff, including licensed clinical staff, responsible for the processing of all health care grievance appeals and staff complaints.

(d) Procedure

(1) Institutional Level

(A) Grievances and staff complaints are subject to an institutional level review.

(B) HCGO staff shall process all grievances and staff complaints, prepare a response for each accepted grievance or staff complaint, and route the prepared response to the reviewing authority for review and signed approval.

(C) Completed grievances and staff complaints shall be mailed/delivered to the grievant within 45 business days of receipt, unless processed as an expedited health care grievance pursuant to CCR, Title 15, Section 3999.233(b).

(D) Additional information related to institutional level grievance procedures are outlined in the Health Care Grievances Operating Standards:

<http://lifeline/PolicyandAdministration/PolicyandRiskManagement/CorrespondenceandAppeals/OpStds/HCG-Complete.pdf>

(2) Headquarters' Level

(A) Grievances and staff complaints may receive a headquarters' level review, if requested by the grievant.

(B) HCCAB staff shall process all grievance appeals and staff complaints, prepare a response for each accepted grievance appeal or staff complaint, and route the prepared response to the reviewing authority for review and signed approval.

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(C) Completed grievance appeals and staff complaints shall be mailed/delivered to the grievant within 60 business days of receipt, unless processed as an expedited health care grievance appeal pursuant to CCR, Title 15, Section 3999.233(b).

(D) A headquarters' level grievance appeal disposition exhausts administrative remedies.

(E) Additional information related to headquarters' level grievance appeal procedures are outlined in the Health Care Grievances Operating Standards:

<http://lifeline/PolicyandAdministration/PolicyandRiskManagement/CorrespondenceandAppeals/OpStds/HCG-Complete.pdf>

(e) Training and Resources

- (1) HCGO and HCCAB staff shall complete grievance and staff complaint process training via the online Learning Management System upon hire and annually thereafter.
- (2) Supervisory staff who conduct staff complaint confidential inquiries shall complete staff complaint training for supervisors.
- (3) Health care staff involved in the grievance process shall utilize the Health Care Grievances Operating Standards and Standard Grievance Language resource documents available on the Department intranet.

References

- California Code of Regulations, Title 15, Division 3, Chapter 2, Subchapter 2, Article 5, Health Care Grievances
- Health Care Grievances Operating Standards:
<http://lifeline/PolicyandAdministration/PolicyandRiskManagement/CorrespondenceandAppeals/OpStds/HCG-Complete.pdf>
- Standard Language:
<http://lifeline/PolicyandAdministration/PolicyandRiskManagement/CorrespondenceandAppeals/Documents/Standard-Grievance-Lang.pdf>

Revision History

Effective: 08/2019