

5122-2-04

**ClientPatient complaint and grievance procedure for regional psychiatric hospital inpatient services.**

- (A) The purpose of this rule is to promote individual recovery and provide a means for persons ~~served~~ who have received or are receiving regional psychiatric hospital (RPH) inpatient services, ~~or persons acting on their behalf~~their representatives, to lodge complaints,~~request mediation~~, and file grievances and appeals regarding care, treatment, environmental conditions, and the exercise of clientpatient rights or other aspects of inpatient care or services and to have those complaints, grievances, and appeals heard and acted upon in a timely manner,~~including access to mediation~~. This rule also reinforces the obligation of all staff to listen to and respond to the complaints and grievances of persons served.
- (B) The provisions of this rule ~~shall be applicable~~apply to all RPHs providing inpatient services under the managing responsibility of the department.
- (C) The deputy director of hospital services and medical director of the Ohio department of mental health and addiction services ~~shall~~are to adopt a policy regarding clientpatient complaint and grievance ~~procedures at RPHs~~procedure for each RPH.
- (D) Each RPH may make changes to ~~the client's patient~~ complaint and grievance procedure ~~policy~~ with the approval of the RPH's governing body,~~and~~ the department's client's rights specialist~~deputy director of hospital services, advocacy services administrator, and the medical director of the department~~.
- (E) ~~The client compliant~~Each RPH patient complaint and grievance procedure ~~policy shall~~ ~~be~~is to be based on 42 CFR 482.13 and the centers for medicare and medicaid services state operations manual, ~~effective date October 17, 2008~~appendix A, revised February 21, 2020.
- (F) ~~The client compliant~~Each RPH patient complaint and grievance procedure ~~policy shall~~is to be reviewed by the deputy director of hospital services, advocacy services administrator, and medical director not more than three years after the date of the last review of the policy~~procedure~~.

Effective: 8/15/2023

Five Year Review (FYR) Dates: 5/17/2023 and 08/15/2028

CERTIFIED ELECTRONICALLY

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Certification

07/24/2023

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Date

Promulgated Under: 119.03  
Statutory Authority: R.C. 5122.33  
Rule Amplifies: R.C. 5122.29  
Prior Effective Dates: 03/07/1986, 07/27/1990, 12/13/1999, 06/06/2011,  
06/01/2017