

5122-2-04

Client~~Client~~ Patient 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 client/patient 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 client/patient 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~~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:

Five Year Review (FYR) Dates: 5/17/2023

Certification

Date

Promulgated Under: 119.03
Statutory Authority: R.C. 5122.33
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