

Cook Inlet Tribal Council, Inc.

Client Grievance Policy Acknowledgement Statement

I have read and been briefed on the CITC Client Grievance Policy and Procedures. I fully understand my rights and responsibilities as a CITC Program Recipient.

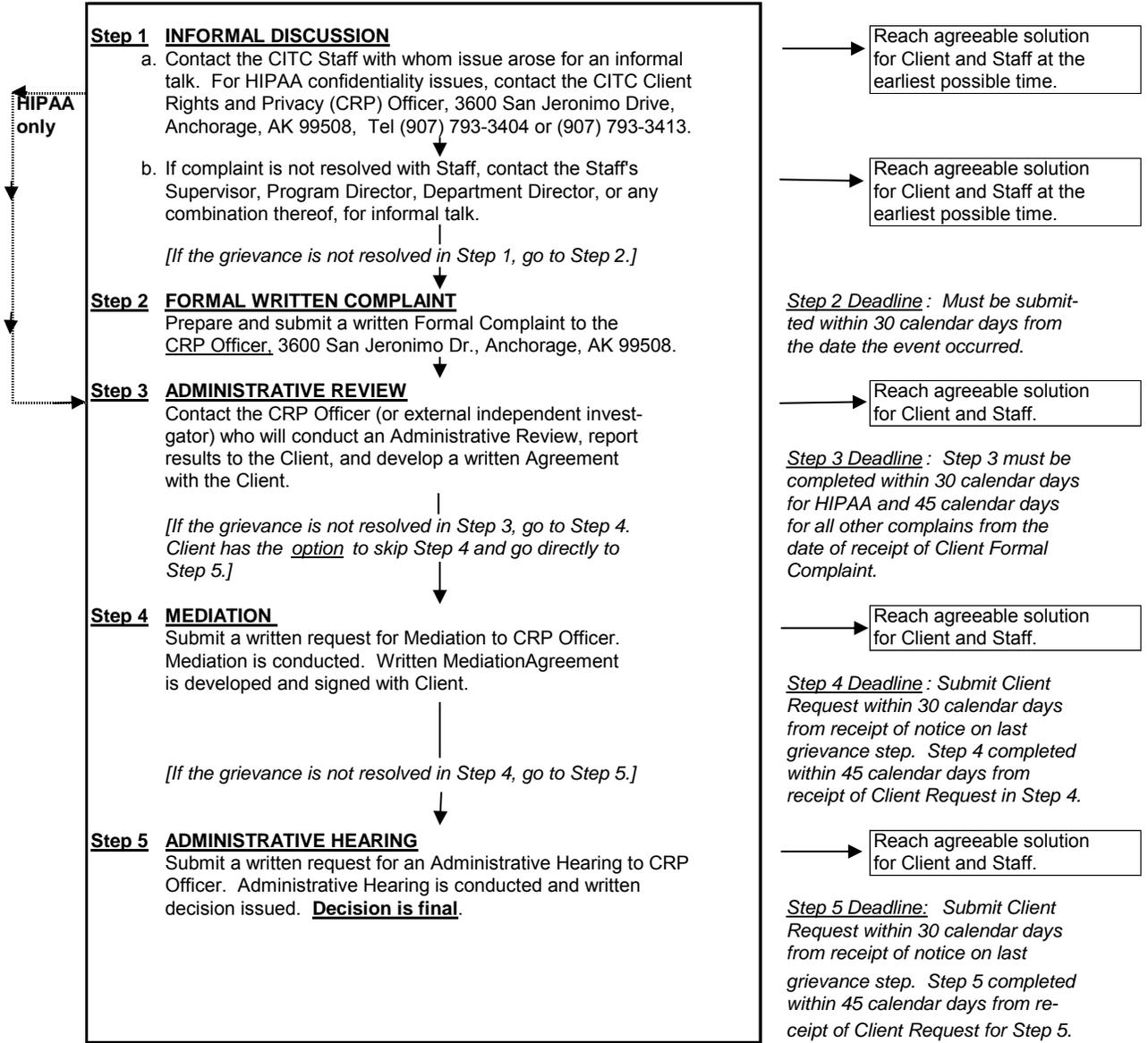
Client Signature:

Date:

Distribution: One copy to the Client and the original form for the CITC Office File.

Cook Inlet Tribal Council, Inc.
CLIENT GRIEVANCE STEPS

If an event occurs that results in a grievance, a CITC Client is to follow the steps outlined below.



NOTE: A Client who has a grievance, is expected to follow the CITC Grievance policy options before pursuing external resolution of a complaint. This Chart is a summary of the CITC client grievance process. CITC Policy No. 3.100 "Client Grievance," approved by the CITC Board of Directors, February 27, 2004, should be read in its entirety for full information.

Cook Inlet Tribal Council, Inc.
3600 San Jeronimo Drive
Anchorage, AK 99508

CLIENT GRIEVANCE POLICY
AND CLIENT ACKNOWLEDGEMENT STATEMENT

I. PURPOSE

Cook Inlet Tribal Council, Inc. (CITC) respects the rights of clients and will assist clients in resolving any complaints arising from a real or perceived violation of client rights through a fair, impartial and orderly process.

II. SCOPE

This policy applies to all CITC clients and supercedes all other client grievance policies and procedures that CITC had at the time this policy was adopted.

III. DEFINITIONS

- A. **Client.** A person of any age who is either currently receiving services or has received services from CITC. "Client" also includes a client's designated representative such as family members, care-givers and support persons.
- B. **Client Rights and Privacy Officer ("CRP Officer").** A CITC employee, appointed by the CITC President/CEO and is the key compliance officer for all federal and state human rights laws including those that apply to the privacy (confidentiality) of patient/client information pursuant to HIPAA, 42 U.S.C. Par. 290dd-3 implementing regulations and 42 C.F.R. Part 2 and client rights.
- C. **Complaint.** Formal charge or accusation made by a client arising from unjust treatment as a result of policies or actions such as but not limited to confidentiality, non-discrimination, staff conduct, client conduct of the department, a department service offered, or lack of access to an offered service.
- D. **Grievance.** A circumstance thought to be unjust or injurious and grounds for a complaint.
- E. **HIPAA. Health Insurance Portability and Accountability Act of 1996** (federal law) Contains provisions for safeguarding the privacy and confidentiality of patient/clients' protected health information. It applies to CITC's covered programs: Tribal Vocational Rehabilitation; Substance Abuse Services' Residential Treatment Center; First Step Assessment Center; Family Treatment Center; Mobile Treatment Unit; Clare Swan; Recovery Journey; Wisdom Place; Re-entry/Pathways to Sobriety; Family Service Department's Clinical Services; Program Evaluation; Shared Services Accounting Department Billing Unit; and Shared Services Information Technology Services.

IV. POLICY

- A. **Policy Statement.** It is the policy of Cook Inlet Tribal Council, Inc. (CITC) that a current or past client who has a real or perceived grievance arising from unjust treatment at CITC as a result of policies or actions such as but not limited to (a) non-discrimination, (b) conduct of staff, (c) conduct of clients of the department, (d) a department service offered or determination, (e) lack of access to a service offered; or (f) confidentiality is entitled to protest the policies or actions and participate in a process to resolve the dissatisfaction through an orderly CITC internal grievance procedure. **All** CITC services and programs are dependent upon grant agency and donor funds, and eligibility for such services and program participation is dependent upon the terms and conditions of the respective funding sources.
- B. **Client Rights and Responsibilities**
 - 1. **Rights.** A client has a right to:
 - a. be treated with respect;

- b. be treated without regard to race, age, color, sex, religion, national origin, disability, marital status, parental status, changes in marital status pregnancy, socioeconomic status, language or status as a Viet Nam Era or special disabled veteran, or other protected classification under local, state or federal law;
 - c. be treated without regard to disability unless treatment being provided by CITC makes treatment hazardous to the individual;
 - d. have all personal information treated in a confidential manner; provided, however that only protected health information maintained by covered programs shall be subject to CITC's HIPAA Policies or HIPAA use and Disclosure Procedures;
 - e. review his/her file with an appropriate staff present;
 - f. be fully informed regarding any and all fees associated with his/her services received from CITC;
 - g. be given clear information regarding participation in all program activities, i.e., attendance, completion requirements;
 - h. be treated without fear of reprisals;
 - i. fair and impartial resolution of issues that may arise in the delivery of CITC programs or services to the client; and
 - j. if denied direct assistance or services be provided with a written explanation regarding the reasons for denial and indication as to what issues need to be resolved for re-application or reinstatement.
2. **Responsibilities.** A client has the responsibility to:
- a. treat CITC employees with respect;
 - b. be accurate and complete as possible when providing information to a CITC employee;
 - c. submit complaints that are not frivolous (trivial);
 - d. abide by CITC program/service rules and regulations in which the client is applying to enter;
 - e. actively participate in decisions and perform those activities made in the decision-making process regarding any services received from CITC;
 - f. inform the appropriate CITC employee of any changes in client information such as name, address, or income changes, etc.
 - g. abide by CITC's Client Grievance Policy and Procedure; and
 - h. ask for clarification regarding any CITC services received but not understood by the client.

- C. **Client Complaint Resolution.** All client complaints will be reviewed fairly and impartially. No specific form is necessary to file a grievance; however a complaint must be in writing.

Confidentiality. If the grievance involves breaches of patient/client confidentiality regarding HIPAA requests to amend, for an accounting, for access, for a restriction, and for alternative communications, it shall be processed in accordance with the CITC HIPAA Use and Disclosure Policy and Procedure (Pol. No. 3.100) by the CITC CRP Officer. If any of CITC's grants require CITC to have a client grievance procedure, HIPAA does not preempt their application to complaints arising under HIPAA.

- D. **Client Notification.** The CITC Client Grievance Policy and Procedures shall be discussed and distributed to all clients at the time of entry into a CITC program or service. Each client will enter into an agreement with CITC using the "*CITC Client Rights and Responsibilities Agreement*" form. The original document will be kept by CITC and a copy issued to the client. The CITC Client Grievance Policy and Procedures will be posted in every building where CITC provides programs and services.

- E. **Costs.** CITC will not pay legal fees that may be incurred by a client involved in an informal or formal grievance with CITC. CITC will pay for its mediation expenses but not the costs for client representation.

- F. **Disability Accommodation.** The applicable CITC program shall make disability-related accommodation to the extent required under applicable law to assist an individual in the conduct of a client grievance.
- G. **Client Services During Complaint Resolution.** Pending a final resolution of a complaint, no service may be reduced or terminated unless the services were obtained through misrepresentation, fraud or collusion or the individual or authorized representative requests suspension, reduction, or termination of services.
- H. **Employee Disciplinary Action.** If a CITC employee is determined to be in violation of the CITC's policies, including CITC's HIPAA Use and Disclosure Policy and Procedures (CITC Policy No. 2.100), the employee will be subject to discipline, up to and including termination of employment.

V. TIME LIMITS

The time limits stated in the CITC Client Grievance Policy and Procedures are mandatory.

VI. CONTACT

CITC Client Rights and Privacy Officer (CRP Officer): Cook Inlet Tribal Council, Inc., 3600 San Jeronimo Drive, Suite 400, Anchorage, AK 99508. Tel (907) 793-3407.

VII. PROCEDURES

There are several options to assist a client in resolving a complaint arising from a real or perceived violation of client rights during any and all stages of client participation in the delivery of CITC programs and services. Every effort should be made to resolve the client grievance at the earliest possible time. If the complaint is not resolved through Informal Discussion, a client may follow the Formal Complaint Procedures.

Step 1. Informal Discussion

The client, before submitting a Formal Complaint, should attempt to resolve the complaint through Informal Discussion so that no further action is required. The client is to request a meeting with the CITC employee against whom the complaint is aimed or with the person who is most involved in the conditions resulting in the complaint; or, the client may request a meeting with the employee's supervisor or program director or department director.

If a client contacts an employee other than the one against whom the complaint is aimed, the client is to be referred to the CRP Officer. It is the responsibility of the CRP Officer to direct the client to the appropriate employee against whom the complaint is aimed.

Confidentiality Complaints. If the complaint involves a matter of HIPAA confidentiality, it must be directed to the CRP Officer. The CRP Officer will investigate the alleged privacy violations and render a written decision to the client within thirty (30) days. A copy of the decision shall be kept on file by the CRP Officer. The CRP Officer's decision is final.

Step 2. Formal Written Complaint

If the complaint is not resolved satisfactorily in Step 1, the client may prepare and submit a written Formal Complaint to the CRP Officer no later than thirty (30) calendar days from the time of the occurrence of the event that resulted in the grievance. The written statement must include: (1) description of the complaint, (2) name of the CITC employee or condition about which the complaint is issued, (3) date when the grievance arose, (4) proposed solution to the complaint, (5) signature of the

client submitting the complaint, and (6) date in which the complaint was written and submitted. No form is necessary but it must be submitted in written form. [CRP Officer, 3600 San Jeronimo Drive, Anchorage, AK 99508. Tel (907) 793-3407]

Step 3. Administrative Review

Upon receipt of a Formal Complaint submitted in writing by the client, the CRP Officer will conduct an Administrative Review or select another internal investigator (CITC employee) or an external independent investigator to conduct the Administrative Review in the CRP Officer's sole discretion.

Administrative Review Procedure: The CRP Officer will:

1. Inform the aggrieved client of (a) the Administrative Review procedure and (b) his/her right to have a representative present during the Administrative Review;
2. Review documents pertinent to the issue and identify and conduct interviews of key individuals to the issue;
3. Conduct the Administrative Review within twelve (12) calendar days from receipt of the client's written complaint or at a time mutually agreed to by the parties involved so that the entire review can be completed within forty-five (45) calendar days, unless the parties agree to a specific time extension. If the Administrative Review is not conducted within thirty (30) calendar days from the submission of the written complaint due to undue delays by the client, the client's request for an Administrative Review will be declared invalid.
4. Hold the Administrative Review at a time and place convenient to the client and any other individuals to be interviewed.
5. Attempt to resolve the matter to the satisfaction of the client and develop a written agreement with the client. Submit a copy of the written agreement to the department director, the involved employee(s) and program manager.
6. If there is no resolution to the complaint to the satisfaction of the client, explore options with the client and provide information on the right to Mediation or Administrative Hearing, including timeframes and direct the written request to the CRP Officer.
7. Following the review, brief the employee, program manager and department director on the results of the Administrative Review and be available to clarify the results.
8. The results of the Administrative Review are binding unless the decision of the CRP Officer is not permitted by law.
9. The client may reject the findings of the review and request either Mediation (Step 4) or an Administrative Hearing (Step 5).

Step 4. Mediation

Mediation is an alternative dispute resolution method available to clients as another means of resolving a complaint when a CITC Administrative Review has not resolved the dispute to the satisfaction of the aggrieved client.

Mediation discussions are confidential and may not be used as evidence in a subsequent due process hearing, nor may mediation be used to deny or delay the client's right to pursue an impartial hearing, provided that the client has signed a written confidentiality agreement.

Participation in Mediation is voluntary on the part of the client and CITC. Either party may reject Mediation as an alternate dispute resolution method. Either party, once accepting Mediation, may terminate the mediation process with or without cause upon submission of a written notice to the other party.

Mediation Procedure:

1. The aggrieved client must submit (a) a written request for Mediation to the CRP Officer that clearly states the reason for dissatisfaction with the results of the Administrative Review, signed and dated, and (b) a written confidentiality agreement that mediation discussions shall remain confidential. Mediation must be requested by the client within thirty (30) calendar days from the issued Administrative Review notice of results; otherwise, mediation is not an option.
2. The CRP Officer will request the department director or division vice president who is not directly related to the issue that created the client's dissatisfaction to represent CITC in the mediation.
3. The CRP Officer will select randomly a name from an external independent mediator list maintained by CITC.
4. The Mediator will
 - a. Arrange and conduct the mediation session with the aggrieved client and the CITC representative. Mediation must be conducted within twelve (12) calendar days from receipt of the client's written request for Mediation or at a time mutually agreed to by the parties involved. The entire review must be completed within forty-five (45) days, unless the parties agree to a specific time extension. If the Mediation is not conducted within thirty (30) calendar days from the submission of the written request due to undue delays by the client, the client's request for Mediation will be declared invalid.
 - b. Prepare a written Mediation Agreement, if agreement between the parties is reached, signed and dated by the client, the Mediator and the CITC representative.
 - c. Submit a copy of the signed and dated Mediation Agreement to the client, CITC representative and the Department Director.

Step 5. Administrative Hearing

An Administrative Hearing is a procedure whereby the aggrieved client who is dissatisfied with any determination concerning his/her complaint may present testimony and evidence or arguments, including testimony and evidence or arguments to the contrary, and seek a final determination from an impartial CITC Administrative Hearing Committee or Hearing Officer. This step may be selected by the client after a concluded Administrative Review and either before or after the Mediation step in the client grievance procedure.

Administrative Hearing Committee and Officer. The Committee and Committee Chair shall be appointed by the CRP Officer and include one vice president and two department directors or program managers none of whom has oversight for the program or service from which the complaint arose. As an alternative, the CRP Officer may, in consultation with appropriate CITC staff, select an external and independent Hearing Officer that is particularly knowledgeable about the nature of the grievance from a list maintained by CITC or available to CITC upon request to conduct the Administrative Hearing.

Administrative Hearing Procedure:

1. The client must submit a written request for an Administrative Hearing to the CRP Officer. The client's written request, clearly stating the client's dissatisfaction, must be submitted within thirty (30) calendar days from the date of receipt of notice of results from the CRP Officer pertaining to the last completed grievance procedure; otherwise, the request is voided.

2. An Administrative Hearing shall be conducted within ten (10) calendar days of receipt of the client's written request, unless informal resolution is achieved prior to the forty-five (45) day Administrative Review or the parties agree to a specific extension of time.
3. The Administrative Hearing Committee (or Hearing Officer) shall arrange for the Hearing by issuing notice of date, time and location of the Hearing to the client and other individuals named in the complaint who are to provide information pertinent to the issue. The Committee (or Hearing Officer) shall make all reasonable efforts to determine the facts regarding the allegations in the complaint based on pertinent documents and to allow the client and other individuals, if any, a reasonable opportunity to present evidence or argument.
4. The Administrative Hearing shall be held as scheduled, and the Committee (or Hearing Officer) shall listen to all testimony presented during the Hearing.
5. Upon conclusion of the Administrative Hearing, the Committee (or Hearing Officer) shall review and discuss the complaint, evidence, findings and decision for dismissal or resolution of the complaint. The Committee (or Hearing Officer) shall issue a written report of the findings and decision of the hearing within thirty (30) days from the completion of the hearing to the client, the program director, department director division vice president and president/chief executive officer.
6. The decision of the Administrative Hearing Committee (or Hearing Officer) is final.
7. The reports and related documents to the Administrative Hearing shall be maintained in a confidential file by the CRP Officer.

Step 6. External Complaint Resolution

Clients must exhaust the procedures available under this CITC client grievance policy before pursuing an external resolution of a complaint.

Confidentiality Complaints

A client also may file a complaint with the Secretary of the U.S. Department of Health and Human Services ("DHHS"). Complaints must be (1) filed in writing, either on paper or electronically; (2) name the entity that is the subject of the complaint and specifically describe the acts or omission believe to be in violation of the applicable requirements of HIPAA; and (3) be filed within 180 days of when the client knew or should have known that the act or omission occurred, unless this time limit is waived by the Office for Civil Rights ("OCR") for good cause shown. Complaints to the Secretary may be filed only with respect to alleged violations occurring on or after April 14, 2003.

The Secretary (of "DHHS") has delegated to the "OCR" the authority to receive and investigate complaints as they may relate to HIPAA. A client may file a written complaint with the OCR by mail, fax, or e-mail at the addresses listed below. Clients may, but are not required to, use the OCR's Health Information Privacy Complaint form. To obtain a copy of this form, or for more information about the Privacy Rule or how to file a complaint, contact an OCR office or the internet address: www.hhs.gov/ocr/hipaa/. Address written complaints to: Region X, Office for Civil Rights, U.S. DHHS, 2201 Sixth Avenue, Suite 900, Seattle, WA 98121-1831. TEL (206) 615-2287. FAX (206) 615-2297. TDD (106) 615-2296. For all complaints filed by e-mail, send to: OCRComplaint@hhs.gov. For further information contact Lester Coffey, OCR, DHHS, Mail Stop Room 506F, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201. TEL (202) 205-8725.