

**CONNECTICUT DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
COMMISSIONER'S POLICY STATEMENT (12/14)**

This policy, adopted with the input of consumers, families, providers and DMHAS line staff, is designed to encourage the resolution of grievances at the lowest possible level. It focuses on the mediation and settlement of issues as soon as possible after they arise.

All consumer grievances concerning mental health services shall be heard under the procedures set forth below. A final administrative decision under these procedures is a prerequisite for a request for a Commissioner's Fair Hearing under Chapter 54 of the General Statutes. This policy does not apply to matters assigned to the exclusive jurisdiction of the Psychiatric Security Review Board. All agency contracts will require compliance with this policy.

Information about these procedures shall be fully available to anyone applying for or receiving mental health services provided by DMHAS or its contract agencies. No DMHAS or contract agency staff member shall retaliate against a consumer for filing a grievance.

A. COVERED SERVICE PROVIDERS

All DMHAS facilities that provide direct mental health services shall make available the grievance procedures herein. Direct service DMHAS mental health contract agencies will also be covered. Only services supported partially or in full with DMHAS funds are subject to this policy. The Commissioner of DMHAS may determine that a program of a mental health contract agency shall be exempt from this grievance procedure and the DMHAS Fair Hearing procedure if he or she makes a written finding that (a) DMHAS funding for such program does not exceed 20% of its budget and (b) such program has an adequate procedure for the redress of grievances.

B. POSTING

A summary version of this policy together with the name and telephone number of the relevant consumer rights Officer shall be posted prominently in a form provided by the commissioner in every ward, program location and consumer lounge operated by any mental health agency covered by this policy.

C. GRIEVANCES

Formal grievance proceedings are available for any mental health consumer complaint which states that a staff member or an agency has (1) Violated a right of the consumer provided by statute, regulation, or directive of DMHAS; (2) Treated a consumer in an arbitrary or unreasonable manner; (3) Denied, involuntarily reduced or terminated services or failed to provide services authorized by a treatment plan due to negligence, discrimination or other improper reason; (4) Engaged in coercion to improperly limit a consumer's choice; (5) Unreasonably failed to intervene to protect one consumer whose rights are jeopardized by the actions of another consumer in a setting controlled by the Agency or Department; or (6) Failed to treat a consumer in a humane and dignified manner as required by Connecticut General Statutes, Section 17a-542.

D. FILING OF GRIEVANCES

1. A grievance may be filed by a consumer, or if he or she is unable to do so, by a person designated by the consumer or a person authorized by law or by the Commissioner of DMHAS to act on the consumer's behalf. A grievance must be filed within forty-five (45) days of the action complained of, unless good cause is shown for a late filing. A grievance may be withdrawn at any time by the affected consumer, unless it was filed by a guardian or conservator. Withdrawal of a grievance will not affect any agency disciplinary action begun under Section E-2.
2. Every DMHAS mental health facility and every mental health contract agency covered by this policy must designate a person to serve as a Consumer Rights Officer to receive and investigate grievances. An agency may designate another agency's Consumer Rights Officer to serve as its Officer. An agency may also designate another person to act, if the Officer is not available.
3. A grievance should be filed in writing with the Consumer Rights Officer. Upon request, agency staff shall assist consumers in preparing written grievances and transmitting them to the Consumer Rights Officer.
4. Any person filing a grievance may appoint, in writing, a representative of his or her choice to assist in pursuing the grievance. The Officer shall furnish all grievants with printed information that has been made available by advocacy programs. Any chosen advocate may appear and advocate for the grievant at any proceeding under this policy. The grievant and advocate, with the appropriate written permission, will have access to all relevant records necessary to resolve the grievance. All records relating to a grievance shall be confidential unless disclosure is authorized, in writing, by the grievant or the Office of the Commissioner of DMHAS in accordance with applicable law and policy. A copy of all records concerning a grievance shall be kept by the Consumer Rights Officer.

E. PROCEDURE AFTER GRIEVANCE FILING

1. As soon as possible after the filing of a grievance, the Consumer Rights Officer will interview the grievant, interview appropriate other parties, examine relevant records and take any other action which will enable a full understanding of the issue. The inquiry, disposition and if necessary, Director's decision will be completed within twenty-one (21) days of receipt of a grievance, unless the Agency Director i.e., the head of the DMHAS Facility or contract agency, authorizes an additional fifteen (15) days for reasonable cause with written notice to the grievant. A Consumer Rights Officer may authorize another staff member to conduct an inquiry and attempt to resolve a grievance, but ultimate responsibility for the written reports required by E.3 and E.4 shall be the Officer's.
2. If at any time during the inquiry, the Officer has reason to believe that a violation of a DMHAS work rule (for DMHAS facilities), an agency personnel policy or a criminal statute has occurred, he or she will immediately initiate a referral to the appropriate authority. The Officer will assist in any other investigation, as requested, and will report to the grievant on its status. Pending a resolution of such referred grievance, the Office will defer further action. However, if a portion of the grievance is resolvable without interfering with any other investigation, the Officer will proceed on that portion.
3. Unless a referral under E.2 has been made, the Officer will mediate, provide information and counseling or take other actions likely to assist the parties in resolving the issue. The Officer will encourage all parties to accept an informal resolution. If the Officer believes such a resolution is possible, he or she will make a written proposal summarizing in writing the nature of the dispute and its recommended resolution. The Officer will inform the grievant that he or she has ten (10) business days to consider signing an acceptance of the proposal that will

terminate the grievance, or, in the alternative, that he or she has right to a formal decision on the grievance. Failure of a grievant to respond to an offered resolution within ten (10) business days shall be treated as a withdrawal of the grievance. The time during which a grievant is considering an offered resolution shall not be counted towards the time periods in E.1. A written resolution shall not contain information violate of the right to confidentiality of other persons.

4. If the grievant requests a formal decision or rejects a proposed resolution, the Officer will prepare a written report of the information found, and present it to the facility or agency Director or designee, and the grievant. The grievant and his or her representative, shall be given the opportunity to present additional material and, upon request, to appear in person before the Director. The Director will provide a written decision to the grievant, including a statement of any actions to be taken and the grievant's appeal rights.

F. APPEALS

1. A decision of a facility or agency denying a grievance may be appealed within fifteen (15) days of the grievant's receipt of it to an official designated by the Commissioner of DMHAS, unless the time is extended by the official for good cause shown. Additionally, if a decision of a facility or agency is more than seven (7) days overdue, the grievant may treat it as a denial and appeal it. An appeal must be in writing and should state what decision is being appealed from and the grounds of appeal.
2. Upon receipt of the appeal, the official shall conduct such additional investigation that he or she deems necessary, receive additional information from the parties and may convene an informal conference of all parties. If the grievance cannot be informally resolved, the Officer will issue a written decision no later than fifteen (15) days from the date of the conference, or from the date of the appeal, if no conference is held.
3. The determination of that official shall serve as the Department's final administrative decision. If it results in the denial, involuntary reduction or termination of services, the grievant may request a Fair Hearing in accordance with regulations promulgated by the Commissioner. Such a request, which shall be mailed to the Office of the Commissioner of the Department of Mental Health and Addiction Services within thirty (30) days from the date of mailing of the Official's decision, shall identify the services that have been denied, involuntarily reduced, or terminated, and shall specify the date of the Official's decision.
4. An agency that determines that the immediate suspension or termination of a service is necessary shall provide the consumer with a written notice setting forth the action taken by the agency and right of appeal. Additionally, the notice shall inform the consumer that a request for continuation of services pending an appeal may be made to official designated by the Commissioner. Such official may order the service continued until a decision is reached under E.4, or order the provision of modified services, or order an expedited hearing under E.4.

G. DATA COLLECTION

1. All covered mental health agencies shall provide information to the Commissioner's office about the nature of grievances filed, their numbers and resolutions as the Commissioner shall direct.
2. The Department of Mental Health and Addiction Services will provide training, technical support, and oversight, to ensure compliance with this policy.

