



CITY OF PHILADELPHIA
Department of Behavioral Health and Intellectual disAbility Services
Promoting Recovery, Resilience & Self Determination

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Commissioner

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Division of Behavioral Health Complaint Policy

EFFECTIVE DATE: January 21, 2021

REVISION DATE: March 31, 2021

SCOPE:

This policy details the procedure by which complaints involving an Eligible Individual receiving services from a Behavioral Health Provider or Behavioral Health Program funded by Philadelphia County and contracted with the Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIDS) are resolved.

PROCEDURE STATEMENT (PURPOSE/INTENT):

The purpose of this policy is to ensure that all participants of behavioral health services are treated fairly and that service providers are responsive to the needs of the participants, particularly as it relates to complaints and resolution to said complaints.

PROCEDURE AND APPROPRIATE USE:

Behavioral Health Complaints

This procedure describes the process for reporting complaints involving Eligible Individuals that currently receive or have received a publicly funded behavioral health service.

Eligible Individuals/Personal Representatives may file a complaint 24/7 in writing, verbally, and through alternative forms of communications including TTD/TTY, Braille, or other common types of communication.

Eligible Individuals/Personal Representatives shall be treated with patience and respect.

Translation services are available to individuals who are making complaints who have limited English proficiency and/or who are Deaf or Hard of Hearing. Translation services can be telephonic, in-person, video-remote as needed and extend to translation of written communication.

- 1) To file a complaint, Eligible Individuals/Personal Representatives may:
 - a. Call DBHIDS at (215) 685-5400 or mail written complaints to: Department of Behavioral Health and Intellectual disAbility Services: Division of Behavioral Health, Clinical Coordination Unit, 1101 Market Street, 7th Floor, Philadelphia, PA 19107.
 - b. Call the Consumer Satisfaction Team (CST) directly at 215-923-9627 and report a concern or complaint to a CST staff member. Eligible Individuals can also access CST staff to voice a complaint when CST is performing an on-site review at their program (i.e. Residential, Intensive Outpatient, CIRC, etc.).

2) The complaint is documented and assigned to a DBHIDS staff person for follow-up by the Clinical Coordination Unit within 3 days of receipt.

3) The Clinical Coordination Unit staff in the Behavioral Health Division at DBHIDS will acknowledge receipt of the complaint within 3 days from assignment in writing via the Complaint Acknowledgement Notification to the Eligible Individual/Personal Representative.

4) During the Investigation, all parties involved in the complaint will have the opportunity to provide facts related to the complaint and to give their perspective.

The assigned DBHIDS staff person will document the findings in writing in the Complaint Resolution Summary and review the findings with the Clinical Coordination Unit Manager and the DBHIDS Quality Management Unit to determine a resolution within 45 days from the day the Eligible Individual/Personal Representative filed the complaint. Complaints will be processed using a tiered system.

First Level Behavioral Health Complaints

The Quality Management Unit will notify the Eligible Individual/Personal Representative of the resolution in writing via Complaint Resolution Notification within 45 days from the day the Eligible Individual/Personal Representative filed the complaint.

For those complaints originating with CST – the process for response and review occurs on a 2-week cycle in conjunction with CST.

If the Eligible Individual/Personal Representative is not satisfied with the outcome of the First Level Complaint, the Eligible Individual/Personal Representative can file a Second Level Complaint within 45 days of receipt of the Complaint Resolution Notification by request by any of the same means used for the initial complaint.

Second level Behavioral Health Complaints

Second Level Complaints are reviewed by the Director of the Behavioral Health Division and the DBHIDS Quality Management Unit. A Decision Letter will be sent to the individual within 45 days of the request for a Second Level Complaint.

If the Eligible Individual/Personal Representative remains dissatisfied with the outcome of the Second Level Complaint, a Third Level Complaint may be filed within 45 days of receipt of the Second Level Decision Letter by request by any of the same means used for the initial complaint.

Third Level Behavioral Health Complaints

Third level Complaints are reviewed by the DBHIDS Chief Medical Officer and the DBHIDS Quality Management Unit. A Decision Letter will be sent to the individual within 45 days of the request for a Third Level Complaint.

Documents related to all Complaints, including correspondence, will remain on file for 7 years.

DEFINITION(S):

Complaint: A dispute or objection regarding a Behavioral Health Provider or Behavioral Health Program contracted with the DBHIDS Division of Behavioral Health, the coverage, operations, or management of a Philadelphia County Funded Provider or Program which has been filed with the Division of Behavioral Health at DBHIDS. The term does not include grievances.

Eligible Individuals: A Philadelphia resident eligible to receive Behavioral Health services from a Behavioral Health Provider or Behavioral Health Program contracted with the DBHIDS Division of Behavioral Health. When that person is a child (under the age of 18), there is explicit inclusion of the family/legal guardian in all rights granted to the member.

Personal Representative: An individual the Eligible Individual designates to represent the Eligible Individual through the complaint process. The Eligible Individual must notify DBHIDS of this assignment in writing via the Appointment of Personal Representative Form (APRF) which will be forwarded upon designation. This form will include the signature of

the Eligible Individual, and Personal Representative as well as date signed and address and telephone number of the representative. A new APRF will have to be completed for each new complaint process. This form can be found on the Department of Behavioral Health and Intellectual disAbility Services website, under [Complaints and Grievances](#).

UNIT DIRECTOR APPROVAL:

Sandy Vasko

DATE:

4.6.21

COMMISSIONER, OR COMMISSIONER DESIGNEE, APPROVAL

Jill Bowen, PhD

DATE:

4/1/2021