



ALBUQUERQUE AMBULATORY
Eye Surgery Center

Albuquerque Ambulatory Eye Surgery Center
Patient Complaints/Grievance Process

PURPOSE:

The Albuquerque Ambulatory Eye Surgery Center (AAESC) regards the physician-patient relationship to be held in the highest esteem requiring trust, mutual respect and confidentiality. In an attempt to offer quality care on both a personal and professional level, patients will be encouraged to make comments on the care they receive.

POLICY:

If a patient and/or family member offer a complaint, the AAESC will try to resolve the issue to the best of its ability, at the time of the complaint. Complaints may be obtained from the surgical call-backs, post-op questionnaires, feedback from the post-op or attending physician. If there are frequent complaints about the same issue, a quality assessment or process improvement may be initiated.

What is a grievance?

A grievance is a formal or informal written or verbal complaint that is made to the Ambulatory Surgery Center (ASC) by the patient or patient's representative, regarding a patient's care or ASC compliance issue.

If the complaint requires additional actions for resolution (not resolved by the coordinator/charge nurse) or if the person reporting the complaint would like a response in writing then the complaint is now considered a grievance.

The Medical Director and the Surgical Services Director are the 2 contacts for the AAESC Grievance Process who has authority to address a grievance.

All grievances alleging mistreatment, neglect or abuse that are submitted to any ASC staff members, whether verbally or in writing, must be immediately reported to the Surgical Services Director or the Medical Director. Grievances alleging mistreatment, neglect, abuse, or other behavior that endangers a patient will be investigated as soon as possible, given the seriousness of the allegations and the potential harm to patients. If there is confirmation that the alleged mistreatment, neglect, abuse or other harm took place, then the ASC will report the event to the appropriate local and state authority (see Section 1: General Information, policy 6, 7 and 8).

When an employee receives a grievance (written or verbal) the employee will begin the grievance process by initiating the *Grievance Report* form then forwarding it to the AAESC

Coordinator/Manager. The Director shall call or write to the patient acknowledging receipt of the complaint within five (5) working days of receiving the grievance. The Director shall also address the subject of the grievance in depth and document appropriately, investigate the grievance and take appropriate action, as indicated. The grievance process will take no more than 30 days from the time the grievance was filed. If there are unusual circumstances that cause the grievance process to exceed 30 days the patient or patient's representative will be notified. The patient will be given written notice of its decision.

If the Director cannot resolve the matter, it will be referred to the attention of the Medical Director. If the matter is not resolved to the patient's satisfaction, the patient may take the grievance to a representative of their choice. The AAESC will not discriminate or use any coercion or reprisal against a patient or patient's representative for taking action to solve the problem. All

complaints/problems and documentation regarding such shall be secured in a file by the Administrator and reviewed quarterly. The process on how to issue a complaint can be found in the **Patient Rights and Responsibilities** form. A copy of the form is posted in the AAESC.



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Information on Advance Directives (Living Will)

There may be a time in your life when you are unable to make healthcare choices for yourself. Some serious decisions that people are often called upon to make include treatment choices, artificial life support, and quality of life. You have a choice about medical interventions such as ventilators, CPR, drugs to sustain blood pressure, antibiotics and artificial nutrition (food) and hydration (water).

There are two legal documents which allow you to express your wishes about healthcare decisions. These documents allow you to determine your decision about certain medical treatments and procedures in advance of illness or life threatening circumstances.

An advance healthcare directive consists of a living will and a power of attorney for healthcare. You may complete either or both of these documents.

A living will allows you to decide for yourself how you would address specific end of life decisions. There are three choices that the living will provides:

- 1) Not to prolong life:
 - a) In the case of an incurable and irreversible condition that will result in your death within a relatively short time.
 - b) You become unconscious and, to a reasonable degree of medical certainty, will not regain consciousness.
 - c) The likely risks and burdens of treatment would outweigh the expected benefits. This choice also allows you to determine if you want to receive artificial food and water based on the conditions listed above. Unless you were to specifically object, this choice would also provide treatment to ease any pain and discomfort.
- 2) To prolong your life as long as possible within the limits of generally accepted healthcare standards.
- 3) To make a specific choice yourself but allow a person of your choice (power of attorney for healthcare decisions) to make end-of-life decisions for you.

A power of attorney for healthcare allows you to choose a person to make healthcare decisions for you, should you become incapacitated. You can limit the type of decisions that your agent may make for you, if you choose to do so. This document provides a place for you to list alternative agents,

should your original agent be unavailable or unable to act. Your agent's authority becomes effective when your primary physician and one other qualified healthcare professional determine that you are unable to make your own healthcare decisions.

You can also use this form to designate a person to make your current healthcare decisions, even though you are completely capable of making those decisions for yourself. Some persons prefer not to be involved in the decision making process of their healthcare at any stage and designate another person to make current and future decisions for them by completing a power of attorney for healthcare.

You do not have to sign any form if you choose not to do so. If you do not sign a form or tell your doctor about whom you want to make your healthcare decisions (or if someone you identify is not reasonably available), a family member who is reasonably available may act. Family members are selected to act on your behalf in descending order: spouse/significant other, adult child, parent, adult brother or sister, grandparent, close friend.

Advance directives (living will and power of attorney for healthcare) allow you to make your own choices about medical decisions. Making decisions in advance will provide direction and perhaps comfort to family members or agents who may make significant choices on your behalf.