

## **Complaint Policy**

### **1. Introduction**

- a. Clark County has adopted this Access Establishment Policy to comply with our duties under the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), the Department Health and Human Services (“DHHS”) security and privacy regulations, the Joint Commission on Accreditation of Healthcare Organizations (“JCAHO”) accreditation standards, as well as our duty to protect the confidentiality and integrity of confidential medical information as required by law, professional ethics, and accreditation requirements.
- b. This policy governs what steps occur for a patient to file a complaint if the patient feels his or her privacy rights have been violated. All personnel of Clark County must comply with this policy. Familiarity with this policy and demonstrated competence in the requirements of the policy are an important part of every employee’s responsibilities.

### **2. Policy**

- a. The patient may file a complaint concerning Clark County’s violation of patient rights or concerns with Clark County’s privacy policies and procedures.
- b. Any intimidation of or retaliation against patients, families, friends, or other participants in the complaint process is prohibited. Employees who violate this policy are subject to disciplinary action.
- c. If the patient’s rights have been violated, employees who violated these rights are subject to disciplinary action, up to and including termination. Clark County will mitigate, to the extent feasible, any known harmful effects of a violation.

### **3. Procedure**

- a. Once a patient files a complaint concerning Clark County’s violation of patient rights or a concern with Clark County’s privacy policies, the department’s privacy officer or designee shall send a notification to the patient acknowledging receipt of the complaint and what steps will be done to evaluate the complaint.
- b. The department’s privacy officer or designee shall investigate the complaint to thoroughly understand the extent of the alleged violation.
  - i. The investigation shall also include a determination of what steps were implemented to mitigate the violation and what steps were implemented to prevent the violation in the future or to correct Clark County’s privacy policy.
  - ii. Depending on the extent of the violation or concern, an investigation shall not exceed 60 days.
  - iii. All investigations must be thoroughly documented.

- c. Within a reasonable time after the investigation is completed, a written response shall be provided to patients summarizing the findings from the investigation and what steps were taken to rectify and prevent violations.
  - i. A copy of the response shall be provided to Clark County's Privacy Officer.
4. Any questions regarding the investigation process or if liability claims may arise from the violation, the Clark County Corporation Counsel will be contacted.