



ALASKA PSYCHIATRIC INSTITUTE

Grievance/Comment/Complaint Form

STAFF USE ONLY	
RECEIVED:	RESOLVED:
LOG #	

Patient's Name:

Unit:



GRIEVANCE



COMMENT / SUGGESTION



COMPLAINT

Grievance form
Rev. 08/24

Please describe your concern, comment, or complaint.

Include any relevant details such as staff names, dates, times, and any other important information:

If this is a grievance, have you already informed a staff member?

If yes, please provide the name of the staff member, along with the date and time you informed them. If applicable, describe any actions staff have taken to address your concern:

Patient Signature: _____

Date/ Time Submitted: _____

Patient Advocacy Response:

PA Staff Signature: _____

Date/ Time Submitted: _____

Once completed, this form may be submitted in-person at API or [emailed to a Patient Advocate](#).

NOTE: *Retaliation as a result of filing this form is strictly prohibited.*



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Grievance & Complaint Procedure

Grievance form
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DEFINITIONS

Complaint: A verbal statement by a patient of a situation or practice that is unsatisfactory or unacceptable to that patient that can be resolved by API unit staff.

Grievance: A patient grievance is a formal or informal, written, or verbal complaint that is made to any hospital staff member by a patient, or the patient's representative, regarding the patient's care.

GRIEVANCE

Step 1: Initial Complaint Handling

- Upon receipt of a complaint, API staff will attempt to resolve the issue during the shift it is received.
- If unresolved, the patient will be assisted in filing a formal grievance document.

Step 2: Filing a Grievance

- Patients can file a grievance by placing a completed grievance form in their unit's locked Patient Grievance Box, or by handing it to an patient advocate staff member.
- Patient advocate staff or designated representatives will assist the patient in completing the form if necessary.

Step 3: Investigation

- Grievances involving abuse or neglect are immediately forwarded to API Senior Management.
- Patient advocate staff meet with the patient to discuss the grievance. If patient advocate staff are unavailable, a Nursing Shift Supervisor or designee will take over.
- The respective department leadership or Medical Director/Chief of Psychiatry will investigate the grievance. A response is provided within five business days unless further time is required.

Step 4: Resolution

- API aims to resolve grievances and provide a written response within seven business days.
- If the grievance requires more time, the patient is notified in writing, and a final response is given within 30 days.

Step 5: Notification of Resolution

- Once resolved, the patient or their representative receives written notice of the resolution, outlining the investigation, actions taken, and the final outcome.
- If the grievance is not resolved to the patient's satisfaction, the complaint is marked "completed," and the patient is informed of their right to challenge the results.

Step 6: Additional Redress

- Patients unsatisfied with the outcome may contact the hospital's Director of Quality Assurance or the governing body co-chair, Treasurer and CEO, the designated impartial body.
- Contact information for external agencies is provided by the P.A for further redress.