

**Washington County**  
**Behavioral Health Division**

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**Policy on Individual Rights: Complaints and Grievances**

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Policy Number: ADMIN 153

Responsible Team(s): Quality Assurance

Origination Date: 05/05/2005

Next Review Date: 05/06/2027

Revision history: 08/11/2008, 01/07/2010, 12/07/2010, 12/28/2011, 01/28/2014,  
12/15/2014, 06/15/2018, 12/10/2018, 10/17/2020, 05/17/2021,  
05/17/2023, 07/12/2023, 02/02/2024, 05/16/2024, 05/06/2025

Related Documents: QA 503 Compliance Program: Investigations and Resolution, ADMIN 150  
Individual Rights and Responsibilities, ADMIN 153a Individual Rights: Complaints and  
Grievances, Behavioral Health Complaint and Grievance Form

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**OBJECTIVES**

The purpose of this policy is to describe Washington County Behavioral Health (WCBH) staff's responsibility to clients and their right to file complaints and grievances.

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**SCOPE/APPLIES TO**

Washington County Behavioral Health staff, contracted staff, volunteers, and interns (referred to collectively hereafter as "staff").

**POLICY**

**DEFINITION(S)**

**Client:** An individual receiving care coordination services with Washington County Behavioral Health and/or behavioral health services with a contracted provider.

**Complainant:** Refers to an individual who files a concern or complaint against an entity such as a provider or county.

**Complaint:** Refers to a verbal or written expression of dissatisfaction about a situation including care and services provided.

**Coordinated Care Organizations (CCO):** A corporation, governmental agency or other legal entity that provides care management and coordinated health care for its members.

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**Electronic Medical Record:** The electronic documentation of care and services coordination provided to, or on behalf, of an individual.

**Grievance:** A formal complaint or dissatisfaction with any part of the delivery of behavioral health services and supports including quality of care, interaction or failure to respect client rights.

**Member:** Client assigned to a CCO, and a specific population served i.e. Choice, Intensive Care Coordination (ICC) and Wraparound.

**Representative:** An individual who acts on behalf of a client at their request or when the client is unable to make decisions about a complaint or grievance. Representatives may include, but are not limited to, a legal guardian, relative, friend, an employee, or attorney.

### **POLICY STATEMENT**

Washington County Behavioral Health (WCBH) follows the Oregon Administrative Rules (OAR) 309-019-0115 Individual Rights and 410-141-3590 Member Rights and Responsibilities. As the Community Mental Health Program (CMHP), WCBH receives and investigates complaints and grievances per OAR 309-014-0021(1)(c) CMHP Management Functions. Complaints and grievances will be processed, responded to, and resolved in accordance with OAR 309-019-0215 Grievances and Appeals. Grievances received from members for services provided under CCO delegated agreements will be forwarded to the appropriate CCO.

A record of any complaints or grievances received for CCO's will be retained and reported to the designated CCO as required in delegation agreements.

Clients, their guardian, or representative have the right to file complaints and grievances at any time. They also may appeal the decisions resulting from the complaint or grievance. Staff will not discourage clients from making a complaint or grievance. Staff will not encourage clients to withdraw a complaint or grievance nor retaliate against a client for filing a complaint or grievance. Clients will be encouraged to make a complaint or grievance when they feel their rights have been violated. Clients and guardians are also encouraged to participate in the complaint and grievance investigation.

Staff support and assist clients in the complaint and grievance process by providing information on how to make a complaint or grievance. Written materials provided comply with language and access requirements. Staff, as needed, will assist the client in making a report either in writing or by verbal report to the entity of the client's choice.

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Clients, their guardian, or representative may file complaints or grievances directly with:

- Their service provider.
- Their Community Mental Health Program (CMHP) - Washington County Behavioral Health Division:
  - Phone: 503-846-4515 or toll free 1-833-266-3845 or (TTY 711)
  - Email: [BHquality@washingtoncountyor.gov](mailto:BHquality@washingtoncountyor.gov)
- Their Coordinated Care Organization (CCO):
  - CareOregon Member Services Line: 503- 416-4100 or (TTY 711)
  - Trillium Complaint Hotline: 1-877-600-5472 or (TTY 711)
  - Yamhill Community Care: 855- 434-7460 or (TTY 711)
- The Health Systems Division (HSD) of the Oregon Health Authority (OHA):
  - Client Services Unit (CSU): 1-800-273-0557 or (TTY 711)
  - Website: <https://www.oregon.gov/oha/hsd/pages/index.aspx>
- Disability Rights Oregon
  - Address: 511 SW 10<sup>th</sup> Ave #200 Portland, OR 97205
  - Phone: 503-243-2081 or (TTY 711)
  - Website: <https://www.droregon.org>
- The Governor's Advocacy Office (GAO) - OHA's Ombudsperson:
  - Address: 500 Summer Street NE, E20 Salem, OR 97301
  - Toll Free: 1-877-642-0450 or (TTY 711)
  - Email: [OHA.OmbudsOffice@odhsoha.oregon.gov](mailto:OHA.OmbudsOffice@odhsoha.oregon.gov)
- Department of Health and Human Services Office for Civil Rights:
  - Address: 200 Independence Avenue S.W Washington D.C. 20201
  - Phone: 1-877-696-6775
  - Website: <https://bit.ly/file-hipaa-complaint> to access the OCR online portal
  - For questions related to Privacy or Patient Safety, email [OCRPrivacy@hhs.gov](mailto:OCRPrivacy@hhs.gov)