Weill Cornell Medicine
Physician Organization

SafetyZone Portal
powered by CLARITY

SafetyZone
On-Line PO Complaint/Grievance Management System

DEFINITION OF PATIENT COMPLAINT

- A patient complaint is a deliberate expression of dissatisfaction, by a patient or on a patient's behalf, to a responsible party. Unlike survey data such as Press Ganey, complaint data are unsolicited and describe specific, reviewable events.
- A complaint is considered a grievance if it involves substandard clinical care, neglect, or abuse, or will require an in-depth quality review with a written response to the patient.

WHY CENTRALIZED REPORTING IS BEST PRACTICE

Reportable complaints provide actionable data about missed opportunities in care delivery and can help us improve how we care for patients. The purpose of centralized reporting is to support a standardized approach to service recovery, event review, and malpractice mitigation, as well as set the agenda for high-impact quality and patient safety initiatives.

WHEN TO REPORT IN SAFETYZONE

If you are a manager, you are responsible for reporting complaints that have been escalated to you and cannot be resolved to the patient's satisfaction by the end of day. Typical complaints fall into the following six nationally benchmarked categories:

Access:
- Access to Timely Appointment
- Answering Service/After Hours Triage
- Delay in Practice Response Time
- Lack of Insurance Participation
- Medical Records Request
- Office Hours Inadequate
- Phone Wait Time
- Referral Issue
- Scheduling Error
- Wait Time in Practice > 1 Hour

Billing:
- Pre-Authorization Not Obtained
- Collection Agency Dispute
- Coordination of Benefits
- Explanation of Benefits
- Incorrect Insurance on File
- Insurance Company Not Billed
- Patient Payment Made and Not Applied
- Specimen Sent to Wrong Lab
- Service Billed but Not Perform

Communication:
- Pre-Visit and Post-Visit Instructions
- Medication Instructions
- Timely Test Results Follow-Up
- Did Not Answer Questions

Clinical Care/Treatment:
- Wrong Diagnosis
- Delayed Diagnosis
- Wrong Treatment
- Delayed Treatment
- Procedural Complication
- Coordination of Care
- Lab Draw Technique
- Patient Verification
- Prescription/Refill Issues
- Inadequate Time Spent with Provider

Environment:
- Office Cleanliness
- Waiting Room Comfort
- Practice Location
- Parking
- Safety

Provider/Staff Behavior:
- Provider Attitude
- Staff Attitude
- Failure to Listen
- Empathy/Compassion
- Discrimination

EXAMPLES OF REPORTABLE COMPLAINTS

- Negative Clinician Behavior ("My Physician was rude to me and did not listen.")
- Unresolved repeat calls ("I keep calling to get my test result, it was supposed to be back by now, but no one is calling me back.")
- Billing Questions that Affect Patient Care ("I am not able to get my prescription because the pharmacy says it is not covered.")
- Weill Cornell Connect ("No one is responding to my messages, it has been more than 48 hours.")
- Access to Care ("I am unable to get an appointment with the doctor I was referred to until 8 weeks from now. That is too long.")
- Day of Service Complaints ("I had to wait for 2 hours until the doctor saw me.")

REQUIRED RESPONSE TO COMPLAINTS AND GRIEVANCES

- Complaint will typically require a brief investigation and report of findings
- Grievances will always require a chart review, as well as determinations of harm and standard of care

HOW MUCH TIME WILL THIS REQUIRE

- The expected volume of a complaints from a practice is 1/250 patient encounters. A practice that sees 100 patients/day would be expected, on average, to enter 2 complaints/week into SafetyZone.
- For practices using CRM, only a small subset of CRM entries will require entry into SafetyZone.
- Each entry may be initiated from the patient's Epic record and take should take < 90 seconds to complete
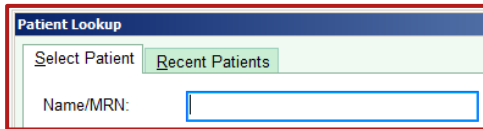- Submissions should be made within 24 hours of receipt of the complaint.

WHAT PRACTICES CAN EXPECT TO GET BACK

WCM QPS Staff will review every case entered and reach out to the practice to help resolve complaints in a standardized way and share best practices. SafetyZone will also provide actionable data for individual practices to support their quality and patient safety efforts.

HOW TO ENTER A COMPLAINT OR GRIEVANCE INTO SAFETYZONE

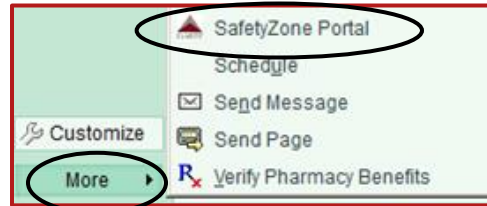**PREFERRED METHOD: ENTER AN EVENT TO SAFETYZONE THROUGH EPIC**

Step 1: Confirm patient in Epic

a. Patient Record Found: Complete Steps 2 <u>and</u> 3
b. No Patient Record: Go to Step 3

Step 2: Enter Patient's Chart ➡ Click "More" ➡ SafetyZone

Step 3: Under "Links" ➡ Quality and Safety ➡ SafetyZone

Step 4: Login using your CWID and Password

Step 5: Click the center "Submit Event" Icon

Step 6: Select Complaint Form

Step 7: Complete the form appropriately; Click "Save" to submit

Note: Fields marked with an asterisk (*) are required

HOW TO REVIEW AN EVENT IN SAFETYZONE

Step 1: Access Site
a. Email Notification

notification@healthcaresafetyzone.com
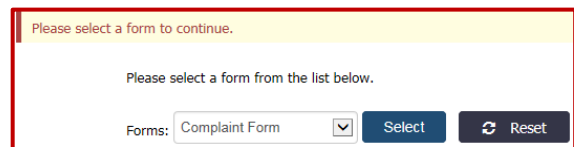Healthcare SafetyZone® Portal Event

Weill Cornell Medicine - Patient Reporting Form - SafetyZone® Portal

Incident   EventType   SubEventType   View Details   ◄━━

b. QPS Intranet Site

SAFETYZONE PORTAL

SAFETYZONE   ◄━━

Step 2: Login using your CWID and Password

Weill Cornell Medicine

WCM Web Login

CWID

Password

Login

Step 3: Click "My Review" Icon

Weill Cornell Medicine
Physician Organization — SafetyZone Portal

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Submit Event

Step 4: **a.** Change dropdown menu to "Complaint Form"

Please select a form to continue.

Please select a form from the list below.

Forms: Complaint Form ▼   Select   ⟳ Reset

b. Sort Events Accordingly

My Review

Event No: [   ]   🔍 Search
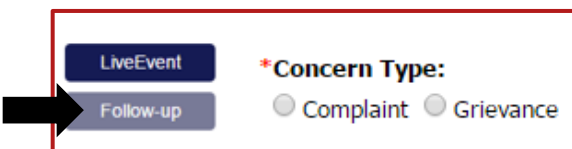
☐ Select All   Patient Last Name: [   ]   ⟳ Reset
☑ Submitted
☐ In Review
☐ Closed
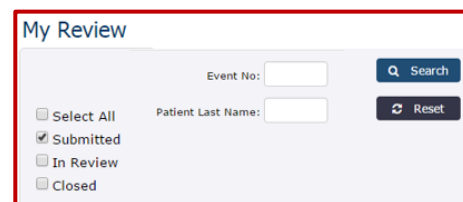
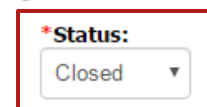**Step 5:** Complete Follow-Up Section: Select if case is a Complaint or Grievance and complete form appropriately

LiveEvent

━━► Follow-up

*Concern Type:
○ Complaint   ○ Grievance

Step 6: When review is complete

a. Change Status to Closed

*Status:
Closed ▼

b. Click Save

💾 Save Event

QUESTIONS OR CONCERNS: Use the "Ask a Question" Link within the SafetyZone Portal
OR Send an email to safetyzonesupport@med.cornell.edu