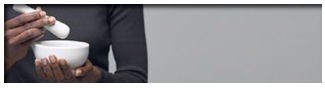

RCRMC is committed to fostering a safe environment that ensures and encourages patient safety. Efforts to support this commitment involve coordinated actions and communication between the staff, physicians, and hospital senior leadership, as well as involvement and education of patients and their families.

Patient safety is incorporated into the orientation and continuing education of all staff, physicians, and volunteers. The education includes the expectation that patient safety events and risks to patient safety are reported timely. The education includes, but is not limited to:

- General Orientation
- Department Specific Orientation
- Nursing and New Grad Nursing Orientation
- Annual Skills Days
- Annual Re-certification
- Department/unit in-service education
- Newsletters
- Annual Patient Safety Fair
- Online Learning Modules

For more information on National Patient Safety Goals or Core Measure reporting visit
www.jointcommission.org/
.

The public may contact the Joint Commission's Office of Quality Monitoring to report any concerns or register complaiints about a Joint Commission-accredited health care organization

by either calling (800) 994-6610 or emailing
compliant@jcaho.org

Education is provided by the Patient Safety Officer, Education Services, Human Resources, Directors and Chairs of Departments, and others as warranted.

The safety of healthcare delivery is enhanced by the involvement of the patient, appropriate to their condition, as a partner in the healthcare process. Patients and families are educated about their responsibility in helping to facilitate the safe delivery of care.

At RCRMC patient safety is very important. The goal is to provide exceptional care and services, and patients are encouraged to actively participate in their own care. Concerns about care, treatment, or services can be directed to the Hospital Patient Advocate at (951) 486-4313; or issues regarding patient safety can be reported on the Safety Hotline at (951) 486-4699.

The Joint Commission, Centers of Medicare and Medicaid Service, and California Department of Public Health are also authorized to make unannounced surveys or audits, which involve observing hospital operations to ensure high quality patient care and safety. RCRMC is committed to being proactive and continually survey ready. Leadership teams are tasked with daily monitoring of hospital operations and patient safety.

The Patient Safety Committee (PSC) is chaired by the Patient Safety Officer and is responsible for prioritizing risks, review and analysis of data, and performs risk analysis as appropriate. The PSC develops the patient safety plan and ensures policies and procedures are in place to support an effective patient safety plan.

National Patient Safety Goals

Joint Commission publishes a list of national patient safety goals (NPSG) each year. RCRMC is committed to fully support these goals.

The Joint Commission's 2013 NPSGs are:

- Improve the accuracy of patient identification
- Improve the effectiveness of communication among caregivers
- Improve the safety of using medications
- Reduce the risk of health care associated infections - hand hygiene
- The organization identifies safety risks inherent in its patient population
- Universal Protocol - Prevention of wrong site, wrong procedure, wrong person surgery

Hospital National Patient Safety Goals | Download PDF

Core Measures

The Joint Commission requires accredited hospitals to collect and submit performance data on the following measure sets:

- Acute Myocardial infarction (heart attack)
- Heart failure
- Community acquired pneumonia
- Surgical Care Improvement Program

This requirement was established to improve the safety and quality of care and to support performance improvement in hospitals. The Core Measure Initiative allows The Joint Commission to review data trends and to work with hospitals as they use the information to improve patient care.

For more information on National Patient Safety Goals or Core Measure reporting visit www.jointcommission.org/

Patient Satisfaction

- Hospital Consumers Assessment of Healthcare Providers and Systems Report | (Report to come)

Riverside County Regional Medical Center Title VI Complaint Investigation Procedure

It is the policy of the Riverside County Regional Medical CenterTransportation Department, as a grant recipient of the Federal TransitAdministration, to ensure compliance with Title VI of the Civil RightsAct of 1964; 49 CFR, Part 21; related statutes and regulations to thatend that no person shall be excluded from participation in or be deniedbenefits of, or be subjected to discrimination on the grounds of race,color, or national origin, under any program or activity receivingfinancial assistance.

Any complaint alleging that the Riverside County Regional MedicalCenter (RCRMC) Transportation Department has not complied with the TitleVI regulation must be submitted in writing to the Grievance Coordinator,26520 Cactus Ave, Moreno Valley, Ca 92555.

The complaint may use RCRMCsTitle VI Complaint Form to submit their complaint, or if the form is notused, the written complaint must at a minimum, provide the following information:

The specific act(s) of RCRMC's non compliance in question;The date(s) of RCRMC's non compliance in question;Specify the reasons why the complaining party believes that RCRMC isnot in compliance with the Title VI regulation(s) in question; The name and address of the complainant (and person discriminatedagainst if different from complainant); andIf applicable, the Title VI minority status of the complainant (orperson discriminated against if different from complainant).

Upon receipt of the written Title VI Complaint, the GrievanceCoordinator is to provide a summary of the complaint, and request aninvestigation of the complaint:

The Grievance Coordinator will coordinate efforts into investigatingthe act(s) of non-compliance with Title VI regulations alleged in thecomplaint and preparing a written response. A written response will beprovided to the complainant within 30 days from the date it is receivedby the Grievance Coordinator.

Upon review of the written investigation submission and any independentinvestigation deemed appropriate conducted by RCRMC, the Chief ExecutiveOfficer will either:

Render a decision which will be final, and advise all interestedparties of this decision in writing; orAt the sole election of the Chief Executive Officer, conduct aninformal hearing at which the interested participating parties will beafforded an opportunity to present their respective position, includingfacts, documents, justification, and technical information in supportthereof.

The parties may be, but are not required to be, represented by counselat the informal hearing, which will not be subject to formal rules ofevidence or procedures.Following the informal hearing, the Chief Executive Officer will rendera decision, which will be final, and advise all interested partiesthereof in writing.

Riverside County Regional Medical Center Title VI Complaint Investigation Procedure

Parties dissatisfied with the final decision of the Riverside CountyRegional Medical Center Chief (RCRMC), whether following review of thewritten submission or informal hearing, may submit their complaint(Enclosure) to the FTA at the address below no later than 180 days afterthe date of the alleged discrimination, unless the time for filing isextended by FTA.

Federal Transit Administration Office of Civil RightsAttn: Title VI Program Coordinator400 7th Street SW Room 9100Washington, DC 20590

Complaint Acceptance

Once a complaint has been accepted by the FTA for investigation, FTAwill notify the recipient or sub-recipient that is has been subject to aTitle VI complaint and ask the agency to respond in writing to thecomplainant's allegation. Once the complainant agrees to release thecomplaint to the recipient or sub-recipient, FTA will provide the agencywith the complaint.

If the complainant does not agree to release thecomplaint to the recipient or sub-recipient, FTA may choose to close thecomplaint. FTA strives to complete the Title VI complaint investigationwithin 180 days of the date that FTA accepts the complaint forinvestigation.

Investigation

FTA will make a prompt investigation whenever a compliance review,report, complaint or any other information indicated a possible failureto comply with this part.

The investigation will include, whereappropriate, a review of the pertinent practices and policies of therecipient, the circumstances under which the possible non compliancewith this part occurred, and other factors relevant to a determinationas to whether the recipient has failed to comply with the Title VI.

Letter of Finding and Resolution

After the investigation has been completed FTA's Office of CivilRights will transmit to the complainant and RCRMC one of the followingthree letters based on its findings:

A letter of resolution that explains the steps the recipient orsub-recipient has taken or promises to take to come into compliance withthe Title VI.A letter of finding that is issued when the recipient or sub-recipientis not found to be in noncompliance with Title VI. This letter willinclude an explanation of why the recipient or sub-recipient was notfound to be in non-compliance, and provide notification of thecomplainant's appeal rights.

If applicable, the letter can include alist of procedural violations or concerns, which can put the recipientor sub-recipient on notice that certain practices are questionable andthat without corrective steps, a future violation finding is possible.A letter of finding that is issued when the recipient or sub-recipientis found to be in noncompliance.

This letter will include eachviolation referenced as to the applicable regulations, a briefdescription of proposed remedies, notice of the time limit on theconciliation process, the consequences of failure to achieve voluntarycompliance, and an offer of assistance to the recipient or sub-recipientin devising a remedial plan for compliance, if appropriate.

Appeals Process

The letters of finding and resolution will offer the complainant andthe recipient or sub-recipient the opportunity to provide additionalinformation that would lead FTA to reconsider its

conclusions. Ingeneral, FTA requests that the parties in the compliant provide thisadditional information within 60 days of the date the FTA letter offinding was transmitted.

After reviewing this information, FTA’sOffice of Civil Rights will respond either by issuing a revised letterof resolution or finding to the appealing party, or by informing theappealing party that the original letter of resolution of findingremains in force.

FTA strives to transmit these letters within 30 to 60days of receiving the appeal.