



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/](http://www.jointcommission.org/)**

.The public may contact the Joint Commission's Office of Quality Monitoring to report any concerns or register complaints about a Joint Commission-accredited health care organization by either calling (800) 994-6610 or emailing

[compliant@jcaho.org](mailto: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/](http://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

- Transportation Department Title VI Complaint Form | [Download PDF](#)

It is the policy of the Riverside County Regional Medical Center Transportation Department, as a grant recipient of the Federal Transit Administration, to ensure compliance with Title VI of the Civil Rights Act of 1964; 49 CFR, Part 21; related statutes and regulations to that end that no person shall be excluded from participation in or be denied benefits of, or be subjected to discrimination on the grounds of race, color, or national origin, under any program or activity receiving financial assistance.

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

The complaint may use RCRMC's Title VI Complaint Form to submit their complaint, or if the form is not used, 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 is not in compliance with the Title VI regulation(s) in question; The name and address of the complainant (and person discriminated against if different from complainant); and if applicable, the Title VI minority status of the complainant (or person discriminated against if different from complainant).

Upon receipt of the written Title VI Complaint, the Grievance Coordinator is to provide a summary of the complaint, and request an investigation of the complaint:

The Grievance Coordinator will coordinate efforts into investigating the act(s) of non-compliance with Title VI regulations alleged in the complaint and preparing a written response. A written response will be provided to the complainant within 30 days from the date it is received by the Grievance Coordinator.

Upon review of the written investigation submission and any independent investigation deemed appropriate conducted by RCRMC, the Chief Executive Officer will either:

Render a decision which will be final, and advise all interested parties of this decision in writing; or At the sole election of the Chief Executive Officer, conduct an informal hearing at which the interested participating parties will be afforded an opportunity to present their respective position, including facts, documents, justification, and technical information in support thereof.

The parties may be, but are not required to be, represented by counsel at the informal hearing, which will not be subject to formal rules of evidence or procedures. Following the informal hearing, the Chief Executive Officer will render a decision, which will be final, and advise all interested parties thereof in writing.

### **Riverside County Regional Medical Center Title VI Complaint Investigation Procedure**

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

Federal Transit Administration Office of Civil Rights  
Attn: Title VI Program Coordinator  
400 7th Street SW Room 9100  
Washington, DC 20590

### **Complaint Acceptance**

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

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

### **Investigation**

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

The investigation will include, where appropriate, a review of the pertinent practices and policies of the recipient, the circumstances under which the possible non-compliance with this part occurred, and other factors relevant to a determination as 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 Civil Rights will transmit to the complainant and RCRMC one of the following three letters based on its findings:

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

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

This letter will include each violation referenced as to the applicable regulations, a brief description of proposed remedies, notice of the time limit on the conciliation process, the consequences of failure to achieve voluntary compliance, and an offer of assistance to the recipient or sub-recipient in devising a remedial plan for compliance, if appropriate.

### **Appeals Process**

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

conclusions. In general, FTA requests that the parties in the complaint provide this additional information within 60 days of the date the FTA letter of finding was transmitted.

After reviewing this information, FTA's Office of Civil Rights will respond either by issuing a revised letter of resolution or finding to the appealing party, or by informing the appealing party that the original letter of resolution or finding remains in force.

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