

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF CORRECTION
BRIDGEWATER STATE HOSPITAL
PROCEDURAL STATEMENT
103 CMR 491- INMATE GRIEVANCES

Purpose: The purpose of this document is to establish guidelines for both informal and formal processing of patients/inmate grievances, in accordance with the requirements set forth in 103 CMR 491, Inmate Grievances.

I. Informal Complaint Resolution

The Informal Complaint Resolution process is the preferred mechanism for the resolution of patient/inmate concerns. Most requests and complaints can be addressed easily and quickly through direct communication with the staff person responsible for the particular area of the problem (e.g., unit officer, work supervisor, Correction Program Officer, the appropriate Department Head or other appropriate staff member). In accordance with the DOC Informal Complaint Resolution Standard Operating Procedure, staff shall respond to written or verbal concerns submitted by inmates in an expedient manner.

- A. The Superintendent has designated an Informal Complaint Resolution Coordinator (assignment letter attached).
- B. The informal complaint resolution process shall include, but not be limited to, the utilization of the DOC Informal Complaint Form (Attachment I, to the Standard Operating Procedure). This form is available from each Unit CPO.
- C. The Informal Complaint Forms shall be filled out and processed in accordance with the Standard Operating Procedure (SOP), (Section 7, a-n). Patients/inmates may submit these forms to the ICR Coordinator either in person, through institution mail or by depositing them in the locked grievance box in the Commons Building. The SOP is available in English and Spanish,

and patients/inmates may access the SOP through the patient/inmate Library.

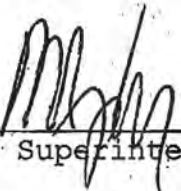
- D. Administrative personnel and other staff members are available in the Inmate Dining Room (IDR) for Patient/Inmate Management Access Period during the noon meal Monday through Friday. Patients/inmates may choose to address issues with appropriate staff at this time. While patients/inmates are encouraged to pursue informal measures prior to filing a formal grievance, they shall not be required to do so.

II. Formal Processing Of Inmate Grievances

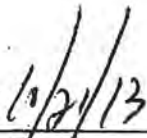
Bridgewater State Hospital shall adhere to the requirements set forth in 103 CMR 491, Inmate Grievances.

- A. Patients/inmates may obtain grievance and grievance appeal forms from the Institution Grievance Coordinator (IGC), Library, the assigned unit CPO and are also readily available on housing units. Additionally, the 103 CMR 491, Inmate Grievance Policy and related grievance/grievance appeal forms may be accessed through the patient/inmate library.
- B. A combination locked box for all grievance forms is located inside the Commons building. The IGC and his/her backup are responsible for checking it daily, Monday-Friday, (holidays and weekends excluded). Patients/inmates may submit completed Grievance forms to the Grievance Coordinator (IGC) via the locked grievance box, via institutional mail, or directly to staff (IGC, Superintendent, Deputy). Due to safety considerations, if a patient in the Intensive Treatment Unit wants to file a grievance unit staff will contact the IGC who will report to ITU and the patient will then dictate the grievance to the IGC. Patients residing in the Med West Unit or Infirmary may place a grievance in the locked grievance box located on the Med West Unit or Commons Building grievance box, if they have Commons privileges.
- C. Patients/Inmates who require special assistance (e.g. illiterate) in filing grievance or grievance appeal forms will be aided by their assigned unit CPO.

- D. Upon receipt of a patient/inmate grievance, the IGC is responsible for recording all initial grievances, investigative comments and decisions in the Inmate Management System (IMS). The IGC shall also be responsible to print the patient/inmate a copy of the grievance from IMS which will serve as a receipt to the patient/inmate. Grievance appeals shall be forwarded to the Superintendent's office and entered into IMS by the Superintendent or a designee other than the IGC. The original appeal number shall be entered into the "DESCRIPTION OF APPEAL" field in IMS. A copy of the grievance appeal as entered into IMS shall be forwarded to the patient/inmate and the IGC which shall serve as a receipt to the patient/inmate.



Robert Murphy, Superintendent



Date

Reviewing Authority

Date



Deval L. Patrick
Governor

Andrea J. Cabral
Secretary

*The Commonwealth of
Massachusetts*
Executive Office of Public Safety and Security
Department of Correction
Bridgewater State Hospital
20 Administration Rd.
Bridgewater, Massachusetts 02324
(508) 279-4500
www.mass.gov/doc



Luis S. Spencer
Commissioner

Peter A. Pepe, Jr.
Katherine A. Chmiel
Paul L. DiPaolo
Deputy Commissioners

Robert Murphy
Superintendent

TO: Luis S. Spencer, Commissioner

FROM: Robert Murphy, Superintendent

SUBJ: Grievance Coordinator

DATE: November 7, 2013

Please be advised that the Institutional Grievance Coordinator for Bridgewater State Hospital is Joy Gallant, CPO A/B.

Jessica Gagnon, CO I, has been appointed as the alternate Institutional Grievance Coordinator on an as needed basis.

The Informal Complaint Resolution Coordinator for Bridgewater State Hospital is Robert Cutting, CPO D.

These assignments are in accordance with 103 CMR 491 Inmate Grievances, section 491.06, Institutional Grievance Coordinator, and the DOC Informal Complaint Resolution Standard Operating Procedure, section 7 (a).

**Massachusetts Department of Correction
Informal Complaint Resolution
Standard Operating Procedures**

1. The informal complaint resolution process is the preferred mechanism for the resolution of inmate concerns. Effective communication between institution staff and inmates is essential. Most requests and complaints can be addressed easily and quickly through direct communication with the staff person responsible in the particular area of the problem. It is important that inmates attempt to address their issues at the lowest institutional level possible. Inmates are expected to express their concerns in a respectful, constructive manner. Staff awareness as to the need for prompt attention and response to these issues is also essential and will minimize the use of formal grievance procedures.
2. Communicating requests and complaints verbally should be the first step taken to address informal requests and concerns. Other avenues of informal communication include but are not limited to staff access, and correspondence submitted to the staff person responsible for the area of concern. Staff shall respond to written or verbal concerns submitted by inmates in an expedient manner.
3. The inmate orientation program and manual shall include a component addressing the staff communication and informal complaint resolution process.
4. The informal complaint resolution process shall include, but not be limited to, the utilization of the informal complaint form (Attachment I).
5. While inmates are encouraged to utilize other available avenues as defined in the Informal Complaint Resolution Standard Operating Procedures (2), for addressing complaints prior to submitting an informal complaint form, they shall not be penalized for failing to do so.

6. The informal complaint resolution process is not a substitute for existing appeal processes, including but not limited to classification and disciplinary appeals.
7. Informal Complaint Forms:
 - a) The informal complaint resolution process shall be coordinated by a supervisory level staff person.
 - b) The superintendent shall designate areas where inmates may obtain the informal complaint forms, including the inmate libraries and special housing units.
 - c) Inmates shall file an informal complaint form within five (5) working days of the actual incident or within five (5) working days of the inmate's becoming aware of the incident or situation, whichever is later.
 - d) Informal complaint forms should contain a brief description of the issue. If more than one (1) issue exists, inmates shall use separate forms for each issue to ensure it is referred to the appropriate staff person for response.
 - e) Inmates shall address forms to the responsible supervisory staff person and submit them via institution mail or deposit them directly into the locked drop box designated for grievances.
 - f) The institution grievance coordinator shall forward informal complaint forms submitted via the locked drop box to the responsible supervisory staff person each business day.
 - g) The responsible supervisory staff person shall immediately screen the incoming informal complaint forms and shall ensure they are recorded into the informal complaint resolution log within one (1) working day of receipt.
 - h) Within one (1) working day of logging the informal complaint form, the responsible supervisory staff person shall forward a copy of the informal complaint form to the appropriate department head or the responsible area staff person for possible resolution.

- i) The department head or responsible area staff person shall evaluate the request or concern, including interviewing the inmate if deemed appropriate.
 - j) Once the department head or responsible area staff person makes his/her decision, he/she shall take appropriate action to resolve the matter or advise the inmate of the reason for denial of the inmate's complaint.
 - k) The department head or responsible area staff person shall issue a response to the inmate within ten (10) working days of receipt from the responsible supervisory staff.
 - l) The department head or responsible area staff shall return a copy of the informal complaint form with the documented outcome to the responsible supervisory staff.
 - m) The responsible supervisory staff shall document the outcome of the informal complaint resolution process into the informal complaint resolution log. The responsible supervisory staff shall also maintain the completed informal complaint form which shall be attached to the original on file.
 - n) The superintendent or designee shall review the log periodically to identify and address potential problem areas.
8. Once the informal complaint resolution process has concluded and if the inmate is not satisfied with the informal decision rendered, the inmate shall have ten (10) working days from receipt of the informal complaint decision to file a formal grievance without being penalized.

**COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF CORRECTION
INFORMAL COMPLAINT FORM**

Inmate Name _____ Commitment # _____ Incident Date _____
Institution _____ Housing Unit _____

CHECK OFF AREA OF CONCERN (one issue per form allowed)				
<input type="checkbox"/> HOUSING ASSIGNMENT/STATUS	<input type="checkbox"/> LAUNDRY	<input type="checkbox"/> PROGRAMS	<input type="checkbox"/> MAIL	<input type="checkbox"/> FOOD
<input type="checkbox"/> CLOTHING/LINEN EXCHANGE	<input type="checkbox"/> RELIGION	<input type="checkbox"/> PROPERTY	<input type="checkbox"/> VISITS	
<input type="checkbox"/> LEGAL EXCHANGE	<input type="checkbox"/> LIBRARY	<input type="checkbox"/> PHONE	<input type="checkbox"/> OTHER: _____	

State completely, but briefly, the single issue of concern and your requested resolution

List any previous steps you have taken to resolve your concern

(Use other side of page if more space is needed)

Inmate Signature _____ Date _____

Note: If you follow instructions in preparing your request, it can be addressed more readily. Your complaint will be reviewed and replied to within ten (10) business days from the date of receipt.

DO NOT WRITE BELOW THIS LINE (Reserved for Staff Response)

Received By _____ Date Received _____

DECISION

Complaint: Has merit _____ Has some merit _____ Has no merit _____ N/A _____

Resolution: Granted _____ Partially Granted _____ Denied _____ Alternate Resolution Offered _____ N/A _____

Comments _____

Decision By _____ Date _____