

CHOICE, unlimited

Creating and Enhancing Opportunities Within Local Communities

Grievance Policy for Recipients of Services

I. Policy:

It is the policy of CHOICE, unlimited to ensure that people served by this program have the right to respectful and responsive services, including the right to file a formal grievance. A “grievance” may be defined as: “complaint about, statement of dissatisfaction with, or verbalized resistance to an agency policy, program practice or staff activity which a service recipient, their family, or the individual’s legal representative feels adversely impacts them.” The grievance procedure pertains to all program services and applies to current service recipients, their families, their legal representatives, individuals seeking but not admitted to services, and individuals terminated from services when such grievance relates to the circumstances of termination. CHOICE, unlimited is committed to providing a simple complaint process for service recipients and their legal representatives to bring grievances forward and have them resolved in a in a timely manner.

Filing a grievance will not result in retaliation or create barriers to service. As mandated by the Board of Directors, CHOICE, unlimited shall have a grievance procedure located in Policy Book II –Section I and in handbooks for all service recipients, their families, or their legal representatives to use to seek redress of agency policies or procedures adversely impacting them.

II. Procedures:

A. Information at Service Initiation

A person receiving services and/or their legal representative and case manager will be notified of this policy, and provided a copy, within five working days of service initiation. CHOICE, unlimited will facilitate ongoing communication with individuals receiving services, the individual’s family, and the individual’s legal representative. Every attempt will be made to resolve concerns as they occur.

B. Responsibility of a service recipient when filing a grievance

1. The service recipient and/or the person’s legal representative:
 - a. should talk to a staff person they feel comfortable with about their complaint or problem;
 - b. clearly inform the staff person they are filing a formal grievance and not just an informal complaint or problem; and
 - c. may request staff assistance in filing a grievance. Forms are available at CHOICE, unlimited.
2. If the person and/or their legal representative does not believe that their grievance has been resolved, they may bring the complaint to the highest level of authority in this program:
 - The highest level of authority in this program is Kristie Buchman, Executive Director.
 - Contact Information: 1829 East Superior Street, Duluth, MN 55812
Office phone: 218-724-5869
Cell Phone: 218-522-0577

3. If the person or person's legal representative has a grievance involving the Executive Director, they may take the complaint to the President of the Board of Directors.

C. Responsibility of CHOICE, unlimited staff when a grievance is filed

1. Upon request, staff will help the service recipient and their legal representative with the complaint process. This assistance will include:
 - a. responding to the complaint in such a manner that the service recipient or legal representative's concerns are resolved.
 - b. providing the name, address, and telephone number of outside agencies to assist the person.
2. CHOICE, unlimited will promote early identification and resolution of grievances.
3. CHOICE, unlimited will negotiate in good faith with individuals filing a grievance.
4. Confidentiality of all records and proceedings will be maintained at all times.
5. Service recipients are informed that filing a formal grievance will not result in retaliation or create any barrier to services.
6. CHOICE, unlimited will respond promptly to grievances that affect the health and safety of service recipients.
7. A response to the grievance will be given within 14 calendar days of receipt.
8. A good faith effort will be made to resolve the grievance within 30 calendar days of receipt.
9. If the grievance is not resolved within 30 calendar days, CHOICE, unlimited will document the reason for the delay and develop a plan for resolution.
10. Once a grievance is received, CHOICE, unlimited is required to complete a Service Recipient Grievance Review. The Service Recipient Grievance Review will include an evaluation of whether:
 - a. related policies and procedures were followed;
 - b. related policies and procedures were adequate;
 - c. there is a need for additional staff training;
 - d. the grievance is similar to past complaints involving persons served, staff, or services.
 - e. there is a need for corrective action by CHOICE, unlimited to protect the health and safety of persons receiving services.
 - f. whether the action plan accomplished intended results.
11. Based on this review, CHOICE, unlimited must develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by staff or our agency, if any.
12. The program will provide a written summary of the grievance and a notice of the resolution to the person and case manager that:
 - a. identifies the nature of the grievance and the date it was received;
 - b. includes the results of the grievance review; and
 - c. identifies the complaint resolution, including any corrective action.

D. Alternative resolution through mediation

Mediation is an alternative dispute resolution process in which the parties talk to each other with the help of an external mediator to try to resolve differences. Mediation will be made available on a case by case basis and will be conducted by a qualified and impartial mediator trained in mediation techniques. Mediation will not be used to deny or delay the individual's right to due process.

E. Additional assistance through an advocate

If the person served, their family and/or legal representative feel they need an advocate to assist them in this process they may contact the Disability Law Center at 218-722-5625-or they may seek their own advocate.

Address: Disability Law Center: 306 West Superior Street, Duluth, MN 55802

F. Appeal Process

If the service recipient, their family and/or legal representative is dissatisfied with the Executive Director's decision, they may appeal directly to the Board of Directors.

1. A written statement must be submitted within five (5) days of the grievance decision to the President of the Board of Directors.
2. The person or the person's authorized or legal representative may, upon written request, be granted the courtesy of a personal interview with the Board of Directors.
3. The Board of Directors will review the grievance decision and the person or the person's authorized or legal representative will be notified of their decision within five (5) days of their meeting with the complainant.
4. The decision of the Board of Directors is final.

G. Recordkeeping

The grievance summary and resolution notice must be maintained in a confidential file in the Executive Director's office.

H. Review

All formal complaints are reviewed by the Board of Directors on an annual basis, and trends, if any, are identified and addressed.

Policy reviewed and authorized by:

Print name & title

Signature

2.I.h. Grievance Policy for Recipients of Services
Policy Manual 2, Section I. Service Recipient Handbook
Reviewed/Revised: 8/4/2022
Legal Authority: Minn. Stat. § [245D.10](#), subd. 2 and 4

Service Recipient Grievance Form

1. Name _____

2. Street Address _____

3. City _____ State _____ Zip _____

4. Telephone _____

5. Have you previously requested assistance regarding this grievance
Yes _____ If yes, who did you speak with? _____
No _____

6. Briefly describe your formal grievance:

7. What suggestions do you have?

8. What do you consider a fair resolution?

9. Did someone assist you in filling out this form?
Yes _____ If yes who assisted you? _____
No _____

Complainant's signature

Date

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Grievance Review Form

1. Name of Service Recipient: _____

 2. Describe the grievance details: _____

 3. Evaluation:
 - a) Were related policies and procedures followed? Yes No
If no, explain:

 - b) Were the policies and procedures adequate? Yes No
If no, explain:

 - c) Is there a need for additional staff training? Yes No
If yes, explain:

 - d) Is the reported grievance similar to past events? Yes No
If yes, describe:

 - e) Is there a need for corrective action to protect the health and safety of vulnerable adults?
 - f) Yes No
If yes, describe corrective action taken:

 4. Conclusion and additional information:

- Person conducting the review
Signature/Title: _____
Date: _____