# POLICY AND PROCEDURE ON GRIEVANCES

1. PURPOSE

The purpose of this policy is to promote service recipient right by providing persons served and/or legal representatives with a simple process to address complaints or grievances.

1. POLICY

Each person served and/or legal representative will be encouraged and assisted in continuously sharing ideas and expressing concerns in informal discussions with management staff and in support team meetings. Each concern or grievance will be addressed and attempts will be made to reach a fair resolution in a reasonable manner.

Should a person and/or legal representative feel an issue or complaint has not or cannot be resolved through informal discussion, they should file a formal grievance. Staff and persons served and/or legal representatives will receive training regarding the informal and formal grievance procedure. This policy will be provided, orally and in writing, to all persons served and/or legal representatives. If a person served and/or legal representative feel that their formal complaint has not or cannot be resolved by other staff, they may bring their complaint to the highest level of authority in the program, the Administrator (ADM), who may be reached at the following:

Name: Kristal Walen, Administrator

Address: 805 Pacific Avenue, PO Box D, Argyle MN 56713

Telephone Number: 218-437-6695

The company will ensure that during the service initiation process that there is orientation for the person served and/or legal representative to the company’s policy on addressing grievances. Throughout the grievance procedure, interpretation in languages other than English and/or with alternative communication modes may be necessary and will be provided upon request. If desired, assistance from an outside agency (i.e. ARC, MN Office of the Ombudsman, local county social service agency) may be sought to assist with the grievance.

Persons served and/or legal representatives may file a grievance without threat or fear of reprisals, discharge, or the loss of future provision of appropriate services and supports.

1. PROCEDURE
2. All complaints affecting a person’s health and safety will be responded to immediately by the manager.
3. Direct support staff will immediately inform the manager of any grievances and will follow this policy and procedure. If at any time, staff assistance is requested in the complaint process, it will be provided. Additional information on outside agencies that also can provide assistance to the person served and/or legal representative are listed at the end of this procedure.
4. If for any reason a person served and/or legal representative chooses to use the formal grievance process, they will then notify in writing or discuss the formal grievance with the manager will initially respond in writing within 14 calendar days of receipt of the complaint.
5. If the person served and/or legal representative is not satisfied with the manager response, they will then notify in writing or discuss the formal grievance with the Administrator (ADM), who will then respond within 14 calendar days.
6. All complaints must and will be resolved within 30 calendar days of receipt of the complaint. If this is not possible, the Administrator (ADM) will document the reason for the delay and the plan for resolution.
7. If the person served and/or legal representative believe their rights have been violated, they retain the option of contacting the county's Adult or Child Protection Services or the Department of Human Services. In addition, persons may contact advocacy agencies (listed at the end of this policy) and state they would like to file a formal grievance regarding their services, provider company, etc.
8. As part of the complaint review and resolution process, a complaint review will be completed by the Administrator (ADM) or the Resident Program Supervisor (RPS) and documented by using the *Internal Review* form regarding the complaint. The complaint review will include an evaluation of whether:
9. Related policies and procedures were followed.
10. The policies and procedures were adequate.
11. There is a need for additional staff training.
12. The complaint is similar to past complaints with the persons, staff, or services involved.
13. There is a need for corrective action by the company to protect the health and safety of persons served.
14. Based upon the results of the complaint review, the company will develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by staff or the company, if any.
15. A written summary of the complaint and a notice of the complaint resolution to the person served and/or legal representative and case manager will be provided by using the *Complaint Summary and Resolution Notice* form. This summary will:
16. Identify the nature of the complaint and the date it was received.
17. Include the results of the complaint review.
18. Identify the complaint resolution, including any corrective action.
19. The *Complaint Summary and Resolution Notice* will be maintained in the service recipient record.

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| **Outside Agency Name** | **Telephone Number** | **Address and Email Address** |
| ARC MN | (651) 523-0823  (800) 582-5256 | 770 Transfer Road, Suite 26, St. Paul, MN 55114  [www.thearcofminnesota.org](http://www.thearcofminnesota.org)  mail@arcmn.org |
| ARC Greater Twin Cities | (952) 920-0855 | 2446 University Ave W, Suite 110, St. Paul, MN 55114  [www.arcgreatertwincities.org](http://www.arcgreatertwincities.org)  info@arcgreatertwincities.org |
| ARC Northland | (218) 726-4725 | 424 W Superior St, Suite 201, Duluth, MN 55802  [www.arcnorthland.org](http://www.arcnorthland.org)  [cbourdage@arcnorthland.org](mailto:cbourdage@arcnorthland.org) |
| Disability Law Center/Legal Aid Society | (612) 332-1441 | 430 1st Ave North, Minneapolis, MN 55401  [www.mndlc.org](http://www.mndlc.org)  website@mylegalaid.org |
| MN DHS-Licensing | (651) 431-6500 | 444 Lafayette Road, St. Paul, MN 55115  [www.mn.gov/dhs/general-public/licensing/](http://www.mn.gov/dhs/general-public/licensing/)  [dhs.info@state.mn.us](mailto:dhs.info@state.mn.us) |
| MN Office of the Ombudsman for Families (and Children) | (651) 603-0058  (651) 643-2539 Fax  1-888-234-4939 | 1450 Energy Drive, Suite 106 St. Paul, Minnesota 55108  http://mn.gov/ombudfam/ |
| MN Office of the Ombudsman for MH/DD  Jennifer Stans | (651) 757-1800  (800) 657-3506  Fax: 651-797-1955  218-763-1895 | 121 7th Place East, Suite 420, Metro Square Building,  St. Paul, MN 55101  www.ombudmhdd.state.mn.us  Email: Jennifer.stans@state.mn.us |
| MN Office of the Ombudsman for Long-Term Care | (651) 431-2555  (800) 657-3591 | P.O. Box 64971, St. Paul, MN 55164  [www.dhs.state.mn.us/main](http://www.dhs.state.mn.us/main)  [dhs.info@state.mn.us](mailto:dhs.info@state.mn.us) |
| Local County Social Service Agency: ask for either child protection or adult protection dependent upon the age of the person | 218-745-5124 | Marshall County Social Services  208 E Colvin Ave # 14, Warren, MN 56762 |

**MN Area on Aging:**

| **MN Area on Aging** | **Telephone Numbers** | **Address and Email Address:**  **http://mn4a.org/aaas/** |
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| Land of the Dancing Sky Area Agency on Aging | Main: 218-745-6733 | 109 South Minnesota Street Warren, Minnesota 56762  Serves: Becker, Beltrami, Clay, Clearwater, Douglas, Grant, Hubbard, Kittson, Lake of the Woods, Mahnomen, Marshall, Norman, Otter Tail, Pennington, Polk, Pope, Red Lake, Roseau, Stevens, Traverse & Wilkin. |