REFERENCE: 65D-30.004
GRIEVANCE POLICY AND PROCEDURE

Purpose
Customer satisfaction is very important to SunServe. To that end, participants are made aware of their rights and responsibilities when enrolling in any program or/and services offered by SunServe. If a staff member, volunteer or client, including family members and/or a guardian of names parties, is dissatisfied for any reason or feels their rights have been violated, they are encouraged to ask to speak to a department director to resolve the issue as an informal inquiry. SunServe’s goal is to resolve complaints quickly and amicably to the best of our ability. If they are not satisfied with the actions taken, they may file an inquiry or grievance.

Responsibility:
1) An inquiry will be defined as the period prior to an individual (and/or their authorized representative) filing a grievance for any reason. The inquiry process is an informal process during which SunServe staff attempts to answer questions, provide clarifying information, and/or resolve concerns that are communicated by the complainant. If the inquiry process does not clarify, resolve or answer the individuals concerned, then the complainant may request to enter into the grievance process.
2) A grievance will be defined as a complaint or a concern from any individual (and/or their authorized representative) for any reason. The grievance process is initiated if the issue is not resolved through the inquiry process, as requested by the complainant.
3) A grievance is considered to be finalized or resolved if and when the entire grievance process is completed or when the customer agrees with the final disposition and/or does not wish for the process to move forward.

Procedure:
Notification of the Inquiry, Grievance and Appeals Procedure:
1) As part of the intake or application process for SunServe Mental Health services, all individuals will be provided with a clearly written, non-intimidating document stating their rights and responsibilities. This document is also posted in the lobby so as to be visible to all SunServe clients, volunteers, and staff. The inquiry form (attachment 1) will be included in this material which provides an applicable name and contact information for SunServe’s Director of Clinical Services.
2) SunServe Employees are educated regarding the Grievance Policy and Procedure and Client Rights Document during orientation. Each employee signs off that they have read and understand the Grievance Policy, Procedure, Client Rights document, and their responsibility to clients and volunteers.

Inquiry Process:
1) All inquiries will be brought to the attention of the Director of Clinical Services within 24 hours of a complainant's reporting for any reason. In cases where the Director of Clinical Services is unavailable or not in the office when the inquiry is initially requested, the Executive Director shall process or designate a designee.
2) Once the inquiry is requested, the individual requesting the inquiry will be required to complete and sign the inquiry request form (Attachment 2) and document as many details as possible regarding the concern. The inquiry request form may also be completed by the person who initially received the inquiry on behalf of the complainant, if the inquiry is initiated over the telephone. If completed by SunServe staff, the complainant shall be provided the completed inquiry request form to sign and return or acknowledge the
accuracy of its contents via a reply email. The complainant lack of signature or delay in returning the signed inquiry request form shall not hold up processing to address the inquiry request.

3) Within three (3) business days of receiving the inquiry request form, the Director of Clinical Services or designee will begin step one of the inquiry and grievance process and complete section 1 of the inquiry, grievance and appeals tracking form (Attachment 4), summarizing the information as provided by the individual reporting the question or concern and documenting the answers for clarifying information provided to the individual. The Director of Clinical Services or designee will attach the inquiry request form and any collateral information to the tracking form.

4) Additionally, the Director of Clinical Services or designee will ensure that the individual is provided with a copy of the inquiry request form and will document in the designated area of section 1 of the tracking form the date on which the copy was provided and how the copy was provided (mail, facts, e-mail or in person).

5) Based upon an interview or discussion with the individual who filed the inquiry, if the complainant’s questions or concerns are not explained or resolved to his / her satisfaction, then the complainant may file a grievance. The Director of Clinical Services or designee will mark whether the inquiry is resolved or if the issue remains unresolved. If the process ends at the inquiry, the Director of Clinical Services or designee will maintain the original copy in the Grievance File.

Grievance Process:
1) If a resolution is not reached during the inquiry process and the complainant desires to file a grievance, the Director of Clinical Services or designee will provide the complainant with the grievance form (Attachment 3). The inquiry request form, grievance form, tracking form, and any collateral information shall be forwarded to the Executive Director or designee within 1 business day of the filing of the grievance.
2) The Executive Director or designee will begin step two of the inquiry and grievance process within three (3) business days of receipt by completing section 2 of the tracking form.
3) If a resolution is reached at step 2, it will be documented in the area labeled "Proposed Resolution/Additional Comments," the final disposition will be documented in the space provided, and the grievance will be considered to be resolved. The Executive Director or designee will sign and date the form in the designated area of the tracking form. The Executive Director or designee will distribute the original form and copies as noted in the tracking form.

Appeals Process:
1) If a resolution is not reached at step 2, it will be documented and forwarded for step3 processing within 1 business day. The Executive Director or designee may skip this step of internally processing the grievance and provide all the forms and collateral documents to the funder if the complainants issue is related to state rule or funder policy.
2) The Director of Clinical Services, where needed, will document and process outcomes in the space provided on the tracking form. The Director of Clinical Services or designee will have up to 5 business days to investigate and attempt to contact the complainant.
3) The process will proceed in accordance with the timeframes outlined in the tracking form until the issue is resolved or the grievance process is finalized, continuing to move up step 4, the Grievance Committee.
4) In the event that the issue remains unresolved after the Director of Clinical Services or designee has individually investigated and addressed it, the Executive Director will convene the Grievance Committee (Step 4), to meet within 15 business days. Invites may include, but will not be limited to:
   A) the complainant and/or their authorized representative
B) the SunServe Director of Clinical Services
C) the Administrative Director
D) the Executive Director
E) a representative from the funding source, if applicable.

5) The complainant and/or their authorized representative will be provided with the opportunity to present their concerns, but will not be present during the committee discussion. (Note: Should the complainant choose not to attend, the Executive Director or designee will present the issues of the case to the invitees).

6) The Grievance Committee will review the information available, and will arrive at a final determination. The Director of Clinical Services or designee will maintain responsibility for documenting information regarding the participants, decision, and final resolution on the grievance and appeals tracking form. The resolution or decision by the Grievance Committee will be considered SunServe’s final disposition on the grievance.

7) Within five (5) business days of the Grievance Committee meeting, the Director of Clinical Services or designee will verbally advise the complainant of the Grievance Committee decision and will follow up with a letter advising the complainant of the outcome. If the grievance was related to a program/service funded by an external source, the letter will also include instructions for following up with the funding source’s Grievance Procedure. In the case of services funded by the Broward Behavioral Health Coalition (BBHC), participants will be provided with the BBHC consumer hotline number at 877 - 698 – 7794. (Note: this information is also included on the grievance form itself, so that they have the opportunity to register a complaint directly with BBHC.)

8) Upon notification that the complainant is appealing the decision to the funding source, the tracking form and all related documentation will be provided to the funding source in accordance with applicable procedures.

Final Disposition and Distribution:
1) It should be noted that at whatever stage in the process the issue is resolved, the tracking for will always be returned to the Director of Clinical Services or designee for copying and distribution within 3 business days of the resolution. The Director of Clinical Services or designee will maintain responsibility for completing the disposition letter and sending it to the complainant, and for copying and distributing the completed tracking form.

2) Copies of the final disposition letter sent to the complainant and all related documentation will be maintained in the grievance folder and will be attached to the completed tracking form.

3) Following final disposition, originals of the completed tracking form and all related documentation will be sent to the Director of Clinical Services for filing.
Inquiry form

An Inquiry is an informal process through which SunServe will attempt to answer questions and / or resolve concerns communicated to us regarding your complaint for ANY REASON. You may prevent your inquiry to any SunServe staff, or over the telephone. You will be asked to complete an inquiry request form with you may receive in person, or via fax or email. The inquiry request form insurance your inquiry is accurately recorded and brought to the attention of the executive director. You may also contact them directly via the following:
If we fail to answer your question or resolve your inquiry, then you have the option to file a formal grievance.

A Grievance is defined as a complaint or a concern you have for ANY REASON. The grievance process is initiated if the issue is not resolved through the SunServe inquiry process.

I have been informed about the SunServe inquiry process and grievance procedure.

Signature______________________ Printed Name______________________________

Phone_________________________ Date_________

If signee is under the age of 18 years old:

Parent/Guardian________________ Printed Name______________________________

Phone_________________________ Date_________
Grievance Form

A grievance is defined as a complaint or a concern for any reason. The grievance process is initiated if the issue is not resolved through the SunServe inquiry process and it is based on the belief that a SunServe employee has not adhered to a written policy, protocol, procedure, administrative rule or statute.

Please use this form to document the specific details of your grievance providing as much detail as possible. Also include the specific resolution that you are seeking. If the inquiry request form you completed and the inquiry process accurately summarizes the complaint or concern you are now following as a grievance, you do not have to restate the complaint on this form. However, you must sign and date this form in order to have a record of when the grievance is filed.

Mark one:
- Please use the information as stated on the inquiry request form I previously completed.
- I have described my grievance below.

Signature______________________  Printed Name________________________________

Phone_________________________  Date_________