

13.0 Client Grievance

13.1 Policy

The agency, in its efforts to provide quality services to clients and the community, seeks to encourage and maintain the highest standards of service among staff, and be responsive to reports of client grievances.

A. Purpose

1. Clients who receive services may from time to time have complaints concerning services or staff. When such complaints arise, they shall be promptly and informally discussed so that they do not become lingering problems. Some problems may remain unresolved and the following procedure is designed to offer clients an opportunity to address their concerns.

B. Guiding Values

1. Clients have a right to receive services in a context that is safe, non-discriminatory, and trustworthy. The agency is respectful of the unique concerns of those who have been abused or whose trust has been violated by those in a position of authority, influence, or power. The agency seeks to create an environment that is safe, non-discriminatory, and trustworthy for all clients. Staff seeks to be open and responsive to the feedback and grievances of clients. Staff also seeks to develop relationships in which there is mutual accountability and responsibility.
2. The agency values direct feedback and honesty, personal responsibility, and mutual accountability. Maintaining these values while being respectful of the unique concerns of those whose trust has been violated by others is a central task in providing services to our clients. This grievance policy is intended to be consistent with the agency's values of directness, honesty, personal responsibility, and mutual accountability, the focus of which is the staff - client relationship, while at the same time seeking to hold staff accountable to the values of the agency.
 - a. Every complaint or problem is significant enough to be of concern.
 - b. Every problem should be resolved as quickly and as close to the source as possible.
 - c. Clients are encouraged to use the Grievance Procedure without fear of recrimination.

- d. The Grievance Procedure is to be used when direct communication by a client of a grievance to the staff involved or the staff supervisor does not result in a satisfactory resolution or when direct communication to the staff involved or the staff supervisor is not appropriate given the nature of the grievance.

13.2 Process

- A. The Complaint & Grievance Procedure shall be given to clients and parent/guardian at time of admission to an agency program and again when a grievance occurs.
- B. Clients can submit a written grievance to the Clinical Director or their designee.
- C. If a clinic staff is aware of a complaint, they will ensure the Clinical Director receives written documentation of the complaint within one day.
- D. The Clinical Director will inform the client in two (2) working days that grievance was received. The Clinical Director or their designee will give the client an estimate of when the investigation and a written report will be completed. In addition, the Clinical Director will talk with the client about how a Human Rights Officer may help the client with their grievance.
- E. The Clinical Director or their designee investigates the complaint and engages in the following actions around the investigation:
 - 1. Interviews the client, staff, any witnesses and reviews applicable documentation.
- F. The Clinical Director provides the client with a response in writing within a reasonable amount of time.
- G. If the client is not satisfied with the response of the Clinical Director or their designee, the client may appeal to the Chief Executive Officer (CEO) of the agency, who will look at all of the facts and circumstances and give the client a response in writing within five (5) working days.
- H. If the client is not satisfied with the response of the CEO, they may appeal to the agency's Board of Directors, who will consider all of the facts and circumstances involved and give the client a response in writing within five (5) working days of the scheduled monthly meeting.
- I. All written documentation pertaining to a grievance, including the complaint form, written responses, and documentation of the process and outcome, shall be placed in the client's record. A copy of the documents shall be placed in the central agency

file. All formal grievances submitted in accordance with these procedures shall be documented in the agency information system.

- J. All client grievance forms shall be brought to the direct attention of the Clinical Director.

13.3 Training and Supervision

- A. All agency staff will be trained and receive on-going supervision regarding this Client Grievance Policy and Procedure and all aspects of reporting and documentation of critical incidents as described above. Training and supervision also includes division, program and service-specific practices based on contractual requirements, licensing standards, and best practices. Training and supervision regarding critical incidents is implemented within the following established structures.
1. *Agency-Wide Orientation*: LUK generally provides new hire orientation and program orientation upon assignment to an eligible employment classification.
 2. *Program Specific Orientation and Training*: All employees must have an individual orientation plan which describes the training requirements necessary for staff to perform their job roles and responsibilities.
 - a. **Directors and Supervisors are expected to provide appropriate and timely training to all employees upon hire, change in job description, or change in position within the program or the agency.**
 - b. **All programs and services provide ongoing training to staff based on contractual requirements, licensing standards, and best practices.**
 3. *Agency-Wide Trainings*: Scheduled on an annual basis and are open to all employees. It is the employee's responsibility to attend these trainings. If unable to attend, the direct supervisor or director must be made aware.
 4. *Supervision*: On-going and scheduled individual and group supervision includes the regular and timely review of specific cases, events, and situations requiring the implementation of the Client Grievance Policy and Procedure.
 5. *Professional Development*: Employees should work with their Supervisors to establish an appropriate training and professional development plan and ask their direct supervisor for more information on internal/external training and professional development, including site locations and availability of funds.

LUK, Inc.

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All Programs: Client Handout

Complaint & Grievance Procedure

Definition

A complaint is a problem you are having with a LUK staff, service or program that needs to be dealt with.

A grievance is a formal written complaint for the purpose of investigation and resolution.

Grievance Procedure - Purpose

You may have complaints about services or staff. When you bring those complaints to our attention, we will work with you so that they do not become lingering problems. Some problems may remain unresolved and the following procedure is designed to offer clients an opportunity to address their concerns

Grievance Procedure - Guiding Values

LUK seeks to create an environment that is safe, non-discriminatory, and trustworthy. LUK works hard to respect the unique concerns of people whose trust has been violated by those in a position of authority, influence, or power. Staff tries to be open and responsive to your feedback and complaints. We value your opinion and perspective. LUK values direct feedback and honesty, personal responsibility, and mutual accountability. Staff seeks to develop relationships in which you and staff are accountable and responsible. This grievance policy is intended to be consistent with the agency's values, the focus of which is the staff - client relationship, while at the same time seeking to hold staff accountable to the values of the agency.

Grievance Procedure - Guiding Principles

Every complaint or problem is significant enough to be of concern.

Every problem should be resolved as quickly and as close to the source as possible.

Clients are encouraged to use the Grievance Procedure without fear of retaliation.

Grievance Procedure - Process

This Grievance Procedure is given to you and your parent/guardian (if needed) when you enter or start a program or service and again when a grievance occurs.

The Grievance Procedure is to be used when you have talked about a complaint with staff or the staff's supervisor and you are not satisfied with the result. Or you have a complaint that you think should involve someone else outside of your program or service.

If you need help writing your grievance a staff person of your choice can help you.

Your written grievance can be submitted to the Clinical Director or their designee. The Clinical Director will let you know in two (2) working days that your grievance was received. The Clinical Director or their designee will give you an estimate of when the investigation and a written report will be completed. In addition, the Clinical Director will talk with you about how a Human Rights Officer may help you with your grievance. The Clinical Director or their designee investigates all of the facts and circumstances and will give you a response in writing within a reasonable amount of time.

If you are not happy with the response of the Clinical Director or their designee, you may appeal to the Chief Executive Officer (CEO) of the agency, who will look at all of the facts and circumstances and give you a response in writing within five (5) working days.

If you are not happy with the response of the CEO, you may appeal to the agency's Board of Directors, who will consider all of the facts and circumstances involved and give you a response in writing within five (5) working days of the scheduled monthly meeting.

All written documentation about your grievance, including the grievance form, written responses, and documentation of the process and outcome, shall be placed in your record. A copy of the documents shall be placed in the central agency file. All formal grievances submitted in accordance with these procedures shall be documented in the agency information system.

Related Policies and Procedures

Number	Policy & Procedure Name
CR 1.05	Client Rights and Responsibilities

Applicable COA Standards

Number	Standard Name