Consumer Grievance Policy

It is the policy of this vendor to provide all consumers and those seeking services with a copy of the client grievance policy and an opportunity to file a formal grievance. We do ask that you initially try and resolve your concerns with the manager at your local branch office. However, if you feel that your concerns have not been resolved and you choose to file a formal grievance, we assure you that no adverse repercussions will occur to you in any future interaction with this vendor.

Please put your grievance in writing below on the space provided to you. Then please mail this form back to the corporate office (address below) with attention to the Chief Operating Officer. The COO will call you in a timely fashion with further discussion.

Name: Date:

Phone Number:

Address:

Mail this form to:

Live 2 Give Home Healthcare
1140 Birdie Hills Road
St. Peters, MO 63376
Attn: Chief Operations Officer