

# COMPLAINT MECHANISM POLICY



# **Table of Contents**

PURPOSE	1
AUTHORITY	
PROCEDURAL DIRECTIVES	
A. GRIEVANCE PROCESS	
B. REVIEW PROCESS	
C. NEW STAFF	
D. COMPLAINT RECORDS	
COMPLAINT MECHANISM ACKNOWLEDGEMENT	7



# **PURPOSE**

The purpose of this policy is to provide a complaint mechanism to individuals receiving services, the family, the legal representative, other team members and agency staff.

## **AUTHORITY**

This policy is approved by the Board of Directors.

# PROCEDURAL DIRECTIVES

When participants are dissatisfied with their services, they may follow the steps listed below. Family, legal representative or other team members (including ABLED, Inc. staff) may follow the steps on behalf of the participants. ABLED, Inc. staff will provide whatever support is needed to fulfill the requirements.

#### A. GRIEVANCE PROCESS

- 1. Participants should be made aware that they are able to file an anonymous complaint by accessing a survey on the "Contact Us" page of ABLED, Inc.'s website.
- 2. Issues regarding staff schedules or ABLED, Inc. policies should be discussed with ABLED's executive staff or supervisor closest to the issue.
- 3. Any issues which remain unresolved may be taken to the ISP Team for resolution.
- 4. If dissatisfaction remains, please submit your concern in writing to the EVP Operations. The EVP Operations will respond in writing within ten (10) calendar days after receiving the complaint.
- 5. If dissatisfaction remains, you may go to the Chief Executive Officer (CEO). The concern must be submitted in writing. The CEO has (10) days to respond after receiving the complaint. This decision shall be final and is not subject to appeal by the Board of Directors.
- 6. At any point in this process or if the CEO's decision/recommendation does not resolve the issue, the person will be informed they have the following rights to:
  - a. Contact Nebraska Advocacy Services (1-800-422-6691).
  - b. Contact Health and Human Services System Services Coordination staff (contact ABLED, Inc. executive staff for the number).
  - c. Access the legal system.

#### **B. REVIEW PROCESS**

This policy will be provided to and reviewed with each participant and the legal representative at the following times:

- 1. When services begin.
- 2. Prior to or at the annual ISP meeting.
- 3. Upon request.

#### C. NEW STAFF



This procedure will be reviewed with staff within 30 days of employment and on an annual basis and other team members upon request.

## D. COMPLAINT RECORDS

Formal complaints will be maintained in the ABLED, Inc. main office including all complaints, the resolution, and the response to the complainant.



# COMPLAINT MECHANISM ACKNOWLEDGEMENT

#### **GRIEVANCE PROCESS:**

- 1. Issues regarding staff schedules or ABLED, Inc. policies should be discussed with ABLED's executive staff or supervisor closest to the issue.
- 2. Any issues which remain unresolved may be taken to the ISP Team for resolution.
- 3. If dissatisfaction remains, please submit your concern in writing to the EVP Operations. The EVP Operations or designated staff will respond in writing within ten (10) calendar days after receiving the complaint.
- 4. If dissatisfaction remains, you may go to the Chief Executive Officer (CEO). The concern must be submitted in writing. The CEO has (10) days to respond after receiving the complaint. This decision shall be final and is not subject to appeal by the Board of Directors.
- 5. At any point in this process or if the CEO's decision/recommendation does not resolve the issue, the person will be informed they have the following rights to:
  - a. Contact Nebraska Advocacy Services (1-800-422-6691).
  - b. Contact Health and Human Services System Services Coordination staff (contact ABLED, Inc. executive staff for the number).
  - c. Access the legal system.

I acknowledge that I received the above copy of ABLED's Complaint Mechanism Policy. It was reviewed with me (check one):

At the Intake Meeting	
At the Annual ISP Meeting	
Upon Request/Other	

Comments:	
Participant:	Date:
Legal Guardian: (If applicable)	Date:
ABLED, Inc. Representative:	Date: