



Grievance Policy and Procedure

POLICY: Denali Family Services shall resolve to the maximum extent possible a consumer's complaint or appeal.

PROCEDURE:

1. All clients have the right to file a grievance without fear or intimidation, or retaliation of any kind.
2. All clients shall be notified in writing of the grievance policy, during the intake process. A signed copy of receipt of the grievance policy shall be maintained in the client record, and updated at least annually.
3. Consumer grievances and feedback can be filed in one of three ways:
 - a. Any staff person shall provide a feedback form to any consumer upon request. Forms shall be readily available.
 - b. A consumer may file a verbal complaint directly or over the phone with the Clinical Director who will complete the consumer feedback form.
 - c. Clients can file a grievance by e-mail to the Clinical Director
4. If clients would like assistance in filing a grievance the client can designate a representative or advocate to assist them with all steps of the grievance process.
5. Upon request a client's case manager or clinician or the Clinical Director can assist the client in filing a grievance or provide a written referral to a client organization such as NAMI-Alaska or the Disability Law Center to assist them with a grievance.
6. The Clinical Director shall acknowledge positive feedback verbally or in writing to the consumer.
7. If the feedback is negative, the Clinical Director shall attempt to resolve the issue with the client in collaboration with the clinical director and treatment team within five (5) business days of receiving the initial grievance.
8. If the consumer does not feel that the issue was satisfactorily resolved, s/he must inform the Clinical Director within ten (10) business days.

9. Within five (5) business days of receipt of notice of consumer appeal, the CEO shall review all related documentation and make a determination. The CEO shall send notice of this determination to the consumer and to the Clinical Director.
10. If the client wishes to appeal the decision further, they may request verbally or in writing to have the appeal forwarded to the board of directors to be reviewed at the next board meeting.
11. Within 30 business days if a satisfactory resolution cannot be found a referral to Behavioral Health will be made to provide technical assistance for an unresolved grievance.
12. If the grievance involves alleged abuse, alleged unnecessary seclusion or restraint it will automatically be brought to the board of directors at the next board meeting.
13. The Clinical Director shall implement the resolution through collaboration with appropriate personnel, and shall document the resulting plan for grievance resolution.
14. The Clinical Director shall maintain a copy of the complaint, the resolution, and the notification.
15. The Clinical Director shall maintain a cumulative list regarding the nature and resolution of complaints. This list will include the type of incident/ concern and the resolution but the names of the clients and involved staff members would remain confidential.
16. The Board of Directors reviews a report analysis of client complaints at least once per quarter to assess complaint patterns, liability issues, and potential areas for improvement.
17. The continuous quality improvement process shall include review of feedback forms.
18. Client confidentiality shall be maintained throughout the grievance procedures.

If you have questions or need any assistance with this, please call the Clinical Director at 274-8281.