

ELWYN

SUBJECT: **Grievance Procedure for Individuals Served and Their Representatives**

PURPOSE:

The purpose of this policy and procedure is to empower individuals receiving services from the organization, and their parents, guardians and/or substitute decision makers, to raise complaints, concerns, suggestions with administrative personnel, and to seek redress for, inappropriate programming or services, failure to implement or delays in implementing programs or services, inappropriate actions or failures to act by organization representatives, accessibility of programs or facilities, retaliatory conduct, misuse of funds, and other actions, inaction, or conditions that might be detrimental to the well-being of any individual served.

This policy and procedure is not intended to preclude use of the complaint and appeal procedure described in the Elwyn Non-Discrimination Policy 109 and is intended to be supplemental to and not supersede or replace any specific complaint or grievance policy or procedure required by program licensing regulations and in the event that a complaint, concern or suggestion falls within the parameters of a program-specific policy, that policy shall apply.

POLICY:

This Policy is intended to set forth a mechanism for individuals served and their representatives to raise concerns to organization representatives in supervisory and managerial roles and with decision-making authority.

POLICY GLOSSARY:

Complaint means an informal concern raised by an individual served, parent, caretaker or substitute decision maker regarding services provided through an Elwyn program.

Grievance means a complaint that has not been informally resolved and is proceeding through the organization's formal grievance procedure as described in this Policy. Grievances are required to be in writing and may be completed with the assistance of a family member, staff member or representative.

Complainant means any individual served by the organization, parent, caretaker or substitute decision

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maker who has availed themselves of the procedures set forth in this policy to raise a complaint about the services provided through an Elwyn program.

PROCEDURE:

Any individual served, parent, caretaker or substitute decision maker may use the following procedure to raise a Complaint and/or Grievance:.

Informal Resolution: Complainants may first raise their concerns as a Complaint at the Program level by contacting and discussing their concerns with the responsible administrative personnel, including as applicable, supervisors, managers, administrators, and program directors. Complaints should be addressed to supervisory and managerial staff with oversight responsibility for the particular facility and program involved and may be raised verbally or in writing. Supervisory and managerial staff shall use reasonable efforts to resolve any issue raised by a complainant. In the event that an issue is not resolved using this informal process, or an individual served or their representative elects to skip the informal process, they should proceed to Level One to initiate a formal grievance under this Policy.

Level One. Complainants may initiate a Grievance under this Policy by contacting the Program Director, Manager or Administrator or designee responsible for coordination of services for the individual whose services are the subject of the grievance. The Grievance must be in writing using the form attached to this Policy.

The Program Director, Manager or Administrator will acknowledge receipt of the Grievance, document nce, research the concern, and contact the Complainant with a resolution to the concern within a reasonable amount of time under the circumstances and in accordance with any applicable Service Area or Program policy or guidelines.

Level Two: If a Complainant is not satisfied with the resolution or any subsequent resolutions, or if the responsible Program Director, Manager or Administrator fails to respond within five (5) business days of receipt of the Grievance, the Complainant may escalate their Grievance to the Executive Director responsible for the Service Area. The Executive Director will acknowledge receipt of the Grievance, document the Grievance, research the concern, and contact the Complainant with a resolution to the concern within a reasonable amount of time under the circumstances and in accordance with any applicable Service Area or Program policy or guidelines.

Level Three: If a Complainant is not satisfied with the resolution or any subsequent resolutions, or if the responsible Executive Director fails to respond within five (5) business days of receipt of the

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Grievance, the Complainant may elevate their Grievance by contacting the organization's Compliance Hotline at 1-877-837-4250. Anonymous complaints can be filed through the Compliance Hotline.

Method of Communication:

Complainants may raise an informal Complaint verbally or in writing.

A formal Grievance should be initiated in writing using the attached Grievance form directed to the organization representatives listed in the Levels above. The Complainant should provide their full name, contact information, the name of the individual served, their relationship to the individual served if applicable, and describe in as much detail as possible the problem about which they are complaining.

Policy Dissemination

This Grievance Policy must be shared with all individuals supported and parents/guardians at the time of admission, will be part of the organization's corporate policy manual(s) and will be posted in an appropriate location on the organization's website. Any changes to this policy will be communicated in writing to consumers and parents/guardians via email on file.

Retaliation Prohibited

The organization strictly prohibits retaliation against individuals, families, or their representatives for reporting, filing, testifying, assisting or participating in any manner in any investigation, proceeding or hearing conducted by the organization or a federal or state law enforcement agency or court.

Individuals, families, and substitute decision makers should report any suspected retaliation to their Program Administrator or the Compliance Hotline. Reports of retaliatory conduct will be objectively, timely and thoroughly investigated. If a report of retaliation is found to be valid, the organization will take appropriate remedial action, up to and including discharging individual(s) responsible. This organization will not retaliate against any consumer or parent/guardian for raising a complaint and will not knowingly permit retaliation by management or other employees.

Non-Discrimination

The organization shall not deny or intentionally limit access to services to any eligible person on the basis of that person's race, national origin, color, religion, sex, ancestry, marital status, sexual

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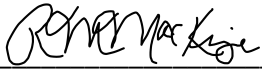
orientation, gender identity, physical or mental disability, age, Limited English Proficiency, or genetic profile.

RELATED DOCUMENTS AND FORMS:

Grievance Form

APPROVALS:


Reviewer:



Regina MacKenzie, SVP & General Counsel

Date: March 3, 2025

Approved:



Chuck McLister, MA, MBA
President and Chief Executive Officer

Date: March 3, 2025

Effective Date: April 29, 2015

Last Reviewed Date: March 3, 2025

Last Revised Date: March 3, 2025

Action Needed: Dissemination to Operations leaders, training of impacted staff, begin to disseminate Policy to individuals served and their representatives unless a program-specific policy or grievance/complaint form is already in place and is disseminated, post on website.

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POLICY 107 GRIEVANCE FORM FOR INDIVIDUALS, FAMILIES AND SUBSTITUTE DECISION MAKERS

Date of Form Completion: _____

Name of Individual Served: _____

Program Name/Location: _____

Name and Contact Information of Individual Completing This Form:

Name: _____

Relationship To Individual Served: _____

Telephone Number: _____

Email Address: _____

Description of Issue of Concern (please add additional pages as needed):

Did you raise this concern as an informal complaint? Yes/No

If you raised this concern as an informal complaint, please identify who you raised this concern with, any relevant dates, and the disposition of your complaint:

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Complainant's Signature:

Submission Instructions:

Level One Grievance – Submit this form to the Program Manager, Administrator or Director

Level Two Grievance – Submit this form to the Program Executive Director

Level Three Grievance – Contact the Compliance Hotline at 1-877-837-4250 or elwyn.alertline.com

FOR ELWYN INTERNAL USE ONLY

Date Form Received: _____

Does this program have a program-specific separate complaint/grievance policy or procedure?

YES/NO

If yes, forward this form to the appropriate program designee for follow up.

If no, follow the instructions above for Policy 107

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