

Policy Title: CLIENT GRIEVANCE

Policy Owner: Chief Executive Officer	Date Written: 10/01/13
Applicable Programs: ALL	Date Reviewed and Approved by PLT: 3/11/14, 02/17/15, 8/26/15, 7/29/16; 10/22/19, 10/14/20, 1/5/21, 3/9/22
Statutory or Regulatory Citation: MN Stat 245D.10.subd2; Rehabilitation Act of 1973 – Section 504; MN Statutes 245A.04, Subd 1d	Signature if needed:

Policy: It is the policy of St. David's Center to ensure that people served by our programs have the right to respectful and responsive services. It is the policy of St. David's Center not to discriminate on the basis of disability as stated in the Rehabilitation Act of 1973, Section 504. St. David's Center is committed to providing an internal complaint and grievance process that provides prompt and equitable resolution of complaints for the people served in our programs and their authorized or legal representatives.

Definitions:

“Grievance / Complaint” means an expression of dissatisfaction about any matter including, but not limited to, the quality of care, services provided, program policies, program procedures, staff, or the facilities.

“Service Initiation” is a person receiving services and their case manager will be notified of this policy, and provided a copy, within five working days of service initiation.

General Grievance Procedure:

1. All grievances will start with the person's primary staff member and his / her supervisor.

- A. The first step is to speak to a staff person and / or supervisor about their complaint or problem and seek a solution that is acceptable to both the client and St. David's Center.
- B. If that does not resolve the situation, the client can inform the staff person that they are filing a formal grievance and submit the grievance in writing to the staff member and / or supervisor. Staff member shall provide the grievance form to families ([Client Grievance Form](#)) and inform their supervisor of the pending grievance submission. *

**While the senior director of the service area will be the identified person to complete the grievance review process, families can ask that the highest level of authority (board chair) reviews the information from the start.*

- C. **Steps that will be followed by St. David's Center staff members** in response to a written client grievance:
1. The family will provide copy of the written grievance to the supervisor and senior director. If grievance is against one of these persons, it can go directly to CEO.
 2. The senior director will inform family of receipt of the written grievance and the plan to address (including timing).
 3. Timing of Response and Resolution:
 - End of the next business day - response time required to grievances that affect the health and safety of clients
 - 14 calendar days of receipt of complaint – families will receive an initial response to the grievance
 - 30 calendar days of receipt of complaint – timeframe in which grievance will be resolved*

**If the complaint is not resolved within 30 calendar days, St. David's Center will document the reason for the delay and a plan for resolution.*
 4. Once a client grievance is received, the senior director of the department will inform the CEO that a grievance review is underway and will complete the grievance review process using the form ([Client Grievance - Sr. Director Review Form](#)). The review will include an evaluation of whether:
 - related policy and procedures were followed;
 - related policy and procedures were adequate;
 - there is a need for additional staff training;
 - the complaint is similar to past complaints with the persons, staff, or services involved;
 - there is a need for corrective action by the license holder to protect the health and safety of persons receiving services.
 5. Based on this review, St. David's Center must develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by staff or the license holder, if any.
 6. The program will provide a written summary of the complaint and a notice of the complaint resolution to the client. If client has a case manager, they must also be notified. The summary must include:
 - identifies the nature of the complaint and the date it was received;
 - includes the results of the complaint review; and
 - identifies the complaint resolution, including any corrective action.
 7. The complaint summary and resolution notice must be maintained in the person's record.

2. If a grievance is unresolved at the program level, it will be escalated to the CEO.

If the person or person's authorized or legal representative does not believe that their grievance was resolved, they may bring the complaint to the next level of authority in the organization, St. David's Center's Chief Executive Officer (CEO):

- A. The original written grievance and the program response will be submitted to the CEO by the program leadership staff or family.
- B. The CEO can be reached at:
Julie Sjordal
3395 Plymouth Road, Minnetonka, MN 55305
Phone: 952-939-0396
Email: jsjordan@stdavidscenter.org
- C. The CEO will interview the staff and family and will review all written materials.
- D. CEO will consult with applicable resources as necessary (e.g. Medical Director, Behavioral Specialist, Legal Counsel).
- E. The CEO will respond in writing to the family within 14 calendar days of receipt of the escalated grievance.

3. If a grievance is unresolved after the CEO review or if the grievance is against the CEO, the client may submit the grievance to St. David's Center's Board of Directors.

If the person or person's authorized or legal representative does not believe that their grievance was resolved after the CEO review, they may bring the complaint to the highest level of authority in the organization, St. David's Center's Board of Directors:

- A. The original written grievance and all responses will be submitted to the Board Chair by the CEO or by the client directly
- F. The Board Chair can be reached by sending all documentation to the attention of:
St. David's Center's Board Chair
3395 Plymouth Road, Minnetonka, MN 55305
Phone: 952-939-0396
- G. The Board Chair will interview the CEO, other staff members and the client and / or the authorized representative and will review all written materials.
- H. Board Chair will consult with applicable resources as necessary (e.g. Medical Director, Behavioral Specialist, Legal Counsel) and consult with the Board Executive Committee or the full Board as needed to determine the final resolution of the grievance.
- I. The Board Chair will respond in writing to the family within 14 calendar days of receipt of the escalated grievance.

Procedures around non-compliance of above noted procedures:

Staff not complying with the above noted procedure may be subject to corrective action.

Reference or Attachment:

[Client Grievance Form](#)

[Client Grievance - Sr. Director Review Form](#)