

Grievance Policy and Procedure

If a resident feels that their rights have been violated or if they feel they have been unjustly accused of violating any rule, then they must use the following grievance procedure. It is important that the resident follows these steps. This procedure has been established to ensure that you are treated fairly. Situations in which you have clearly violated rules or situations that are beyond the direct control of staff do not constitute ground of grievance. Safe Place Treatment Services will post grievance policy in a conspicuous location in the residence. Safe Place Treatment Services will include a FARR grievance re-direct link on the provider website.

The processing procedures for grievances and complaints are as follows:

- a. The resident is encouraged to discuss any problems with their resident manager. The resident and resident manager will try to find a resolution. The resident manager will correspond with the CRRA on the grievance and/or complaint and any resolution.
- b. All grievances shall first be filed with the resident manager by completing a grievance form. Grievance forms are located in each residence. The resident manager will conduct an internal investigation and render an initial determination and resolution within 2 days of receipt of the complaint in writing.
- c. If the complainant is not satisfied or if the complaint is not resolved with the results achieved in Step 2, the complainant may file an appeal and/or the grievance shall be forwarded to the CRRA and this meeting shall be held within five days of the date it is requested. The decision of the CRRA is final.
- d. The resident shall be presented a resolution and response to their grievance in writing.
- e. In the event that the Client does not feel a resolution has been reached they may contact FARR.
- f. Resident will face no retribution for filing a grievance against a provider.

If the grievance is against a manager, a grievance may be submitted in writing straight to the CRRA. The CRRA will speak with you within two business days after receiving the grievance. Within two business days after that, the CRRA will respond to you in writing.

If you do not feel that your concern will be or was not addressed through this grievance form, we encourage you to visit www.farronline.info/grievance or by phone at (561) 299-0405 and file a grievance with our accrediting body. The safety and health of the community is our primary focus, so that every individual has the opportunity to achieve long term recovery.

Resident Signature: _____
Witness Signature: _____

Date: _____
Date: _____

Grievance, Suggestion, Complaint Form

1. Please describe your grievance, complaint, or suggestion.

2. Describe: What attempts you have made to resolve the grievance, complaint, or suggestion?

3. Describe: How you would like to see this grievance, complaint, or suggestion resolved.

Please complete this form and give it to your house manager, CRRA, or another staff member. Safe Place Treatment Services considers client feedback very seriously and will carefully review this form. As noted in the client grievance procedure, a formal grievance process begins within 24 hours of your turn in this form.

Resident Signature

Date

Resident Name (print)

Staff Signature

Date

Response to Grievance

Copy given to resident on: _____

By: _____

Resident Initials _____