**Section 1. Grievance Policy**

The client has the right to register formal complaints regarding CT Rapid Re-housing services and will not be denied these services based upon such complaints. This Grievance Policy must be presented to the client during the initial intake interview.

The standardized grievance procedure is intended to address only issues specific to the CT Rapid Re-housing program. The program is not expected to address complaints lodged by one client in reference to another client’s issues; neither is it expected to address complaints regarding other agencies or external programs.

The client must also be informed that accompaniment by an advocate (e.g., co-worker, friend, family member, etc.) at each step of the grievance process is permissible and that the complaint may be withdrawn by the client at any time.

**Section 2. Grievance Procedure**

This standardized grievance procedure is intended to address only issues specific to the CT Rapid Re-housing program.

**The program has a designated liaison for client complaints**. The liaison will work with the client to ensure that each step of this procedure is completed and documented appropriately. The liaison is responsible for the routing of the complaint to each successive level of review. Case management and supervisory staff may not serve as liaisons.

# Step 1

***The client requests to file a grievance that specifically relates to the CT RRP program.***

Immediately upon expression of a concern or complaint, the client will be directed to the program’s liaison to obtain Concern Form. The liaison is responsible to explain each step of the grievance procedure to the client and to assist in the proper completion of the form. This form is deliberately formatted and worded to limit the length of the complaint and to compel the client to succinctly describe the issue of concern. It is imperative that the description be clear and manageable. Attachments are not acceptable. The completed form must be returned to the liaison by the client within 15 days of the incident. **Go to Step 2.**

# Step 2

***The liaison directs the Concern Form to the case manager.***

The liaison will review the form for completeness and timeliness within 3 business days of receipt from the client. Late or incomplete forms will not be accepted. Complete and timely forms will be forwarded to the client’s identified case manager within **three (3) working days** of receipt of the form from the client. The case manager will review the Concern Form and is to attempt to meet face-to-face with the client to resolve the matter. This meeting must be scheduled within **five (5) working days** of receipt of the form from the liaison.

In meeting with the client, the case manager should make all reasonable efforts to resolve the concern to the client’s satisfaction. The liaison should be available to witness the meeting and to immediately prepare the documentation following the meeting.

If the matter is resolved, the client will sign the Concern Form, indicating satisfaction with the proposed resolution. The liaison will then place the completed Concern Form in the client’s confidential chart. **Stop, no further action is necessary.**

If the client is dissatisfied with the outcome of the meeting with the case manager, the liaison will immediately obtain the client’s signature indicating dissatisfaction with the proposed resolution and will direct the Concern Form to the grievance committee within **two (2) working days** of the meeting with the case manager. **Go to Step 3.**

**Step 3**

***The liaison directs the Concern Form to the relevant agency and the agency processes the Grievance in accordance with their grievance policy.***

The relevant agency to which the Concern Form was directed will process the grievance in accordance with their grievance policy.

The liaison is responsible for:

* Obtaining a copy of the relevant agency’s grievance policy;
* Helping the participant to understand and effectively use the relevant agency’s grievance process;
* Coordinating with the relevant agency to ensure that the grievance is processed in accordance with the policy;
* Advocating with the relevant agency for resolution of the matter within **fifteen (15) business days of receipt by the relevant agency of the Concern Form**;
* Participating in any meetings relevant to the grievance, unless the participant objects to such participation; and
* Ensuring that the participant has received and understands the outcome of the agency’s grievance process.

These liaison responsibilities are identical regardless of whether the relevant agency is the agency by which the liaison is employed.

If the matter is resolved via the relevant agency’s grievance process, the liaison will obtain the participant’s signature on the Concern Form, indicating satisfaction with the resolution. The liaison will then place the signed Concern Form in the participant’s chart. No further action is necessary.

If the participant is dissatisfied with the outcome, the liaison will obtain the participant’s signature indicating dissatisfaction with the proposed resolution, place the signed Concern Form in the participant’s chart, and direct the Concern Form within two (2) business days of the meeting to the relevant CoC in accordance with that CoC’s grievance policy. The process will then proceed to Step 4.

## **Step 4**

***The liaison directs the Concern Form to the relevant CoC in accordance with that CoC’s grievance policy.***

The relevant CoC to which the Concern Form was directed will process the grievance in accordance with their grievance policy.

The liaison is responsible for:

* Obtaining a copy of the relevant CoC’s grievance policy;
* Helping the participant to understand and effectively use the relevant CoC’s grievance process;
* Coordinating with the relevant CoC to ensure that the grievance is processed in accordance with the policy;
* Advocating with the relevant CoC for resolution of the matter within **fifteen (15) business days of receipt by the relevant CoC of the Concern Form**;
* Participating in any meetings relevant to the grievance, unless the participant objects to such participation; and
* Ensuring that the participant has received and understands the outcome of the CoC grievance process.

If the matter is resolved, the liaison will obtain the participant’s signature on the Concern Form, indicating satisfaction with the resolution. The liaison will then place the signed Concern Form in the participant’s confidential chart. No further action is necessary.

If the participant is dissatisfied with the outcome, the liaison will assist the participant to pursue the grievance through any final step available via the CoC’s grievance policy. If the participant remains dissatisfied, the liaison will document that on the Concern Form and place the final Concern Form in the participant’s chart. The decision rendered via the final step in the relevant CoC’s grievance process is final and no further action is necessary.

For purposes of continuity and efficiency, the DOH RRH program will not process the same complaint by the same participant more than one time.

CLIENT CONCERN FORM

This form is to be used by Rapid Rehousing clients to submit grievances regarding the level of service quality, violation of program policies, or breaches of confidentiality. Once completed, return this form to the program’s designated grievance liaison [insert name and contact information]

Please complete the following information:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Your Name |  |  | Today’s Date |  |
| Your Case Manager |  |  | Date of Incident |  |

Briefly describe the incident or concern:

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Briefly describe your expected resolution to this problem or concern:

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| Sign your name | Date |

*Your signature here provides consent for release of information regarding this grievance to CT RRP (Enter Lead or subcontractor Name) and other appropriate parties.*

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| --- | --- | --- |
| THIS PAGE – OFFICE USE ONLY | Designated liaison for this grievance |  |

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| Step 2 | Date this form provided to case manager |  | Date of meeting with client |  |
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| Result | Description of proposed resolution |  |
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| Client is satisfied with resolution | ❑ | Client is dissatisfied with resolution | ❑ |
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| Satisfied client signature |  | Date |  | Dissatisfied client signature |  | Date |
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| Step 3 | Date this form provided to grievance committee |  | Date of meeting with client |  |
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|  | Date of committee decision to liaison |  | Date of meeting with client |  |
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| Result | Description of proposed resolution |  |
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| Client is satisfied with resolution | ❑ | Client is dissatisfied with resolution | ❑ |
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| Satisfied client signature |  | Date |  | Dissatisfied client signature |  | Date |
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| Step 4 | Date this form provided to board of directors |  | Date of meeting  |  |
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|  | Date of board decision to liaison |  |  |  |
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| Result | Description of proposed resolution |  |
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| Program has received this decision | ❑ | Client has received this decision | ❑ |
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|  |  |  |  |  |  |  |
| Liaison signature |  | Date |  | Liaison signature |  | Date |
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