

CDS
COMPLAINT/GRIEVANCE REPORT FORM
(This document is subject to confidentiality and should be handled accordingly)

If you feel there is a problem or you have been treated unfairly to the point of not being able to resolve the problem or issue, please complete the following complaint process.

COMPLAINT/GRIEVANCE PROCESS:

- Think about what is really bothering you.
- Try to discuss your concerns with a staff member currently on duty.
- If you feel satisfied with the discussion, the process ends.
- If you do not feel satisfied with the discussion, complete the reporter section of the Complaint/Grievance Report Form.
- Give the Complaint/Grievance Report Form to a staff member with whom you feel comfortable.
- You will receive a Complaint/Grievance Report Receipt from staff, who will ask you to sign above.
- The Complaint/Grievance Report Form will be given to a counselor, or supervisor who will review your concerns with you.
- If you are not satisfied with the outcome of the discussion, the form will be forwarded to a higher-level supervisor(s), through the chain of command.

TO BE COMPLETED BY THE REPORTER:

Participant Name: _____ Date: _____ Program Name: _____
Complaint concerns: ___ Another participant: ___ Staff: ___ Supervisor: ___ Other (specify): _____ *****
Description of the problem: _____ _____ _____
What have you done to resolve the problem (including names of persons you spoke with)? _____ _____ _____
What would you like to see happen now? _____ _____

TO BE COMPLETED BY PROGRAM STAFF:

FINAL RESPONSE: _____ _____
Staff signature: _____ Title: _____ Date: _____
I agree ___; I do not agree ___; with the action taken. I have received a copy of this complaint after the final written response.
Participant signature: _____ Date: _____

Chain of command involved/informed: (indicate with a date which person(s) reviewed the complaint) ___/___/___/ Counselor ___/___/___/ Site Supervisor ___/___/___/ Coordinator ___/___/___/ COO ___/___/___/ CEO

Attach any applicable documentation to this form. Do not file forms in participant file/ record. Place original Complaint/Grievance Report Form in the "Complaint/Grievance Log" along with any applicable documentation.

Reviewed by Supervisor _____

_____ faxed to COO
Date