

The Avenue Family Network, Inc.
CLIENT GRIEVANCE FORM

Client Name: _____ ID #: _____
Address: _____
Supervisor's Name: _____ Title: _____
Program: _____

IN ACCORDANCE WITH THE CLIENT GRIEVANCE POLICY THIS GRIEVANCE IS SUBMITTED AT:

Step 1: Step 2: Step 3: Step 4:

1 Has this grievance been discussed with your immediate case manager? Yes No

If Yes, date discussed: _____

Subject of grievance: _____

2 What is the specific action or situation which causes you to file this grievance? Be very specific with all information.

Date (When did this action or situation happen?): _____

B. Location (Where did this action or situation happen?): _____

C. Approximate Time: _____

Name of Person(s) Responsible for causing this action or situation: _____

Specific action or situation-Describe what happened to cause you to file this grievance: (Use attachment if necessary) _____

3. What do you feel is the resolution to this specific situation? (Use attachment if necessary)

Client's Signature: _____ Date: _____

I acknowledge receipt of this grievance by hand delivery on the date indicated.

Agency Representatives Signature: _____ Date: _____

Title: _____

CLIENT GRIEVANCE DISPOSITION

RESPONSE TO GRIEVANCE STEP: Step 1: Step 2: Step 3: Step 4:

Responder's Name: _____ **Date Grievance was received:** _____

What do you see as the specific issues in this grievance? (Response should use all areas

1. under #2 of Client's Grievance). (Use attachment if necessary)

2. What action can or will you take to resolve client's grievance? (Use attachment if necessary)

3. What is the basis for your decision and/or action? (Use attachment if necessary)

Responder's Signature: _____ **Date:** _____

Title: _____

I acknowledge notification of this Grievance Disposition on the date indicated below. I accept this response as satisfactory resolution to my grievance: Yes No

Client's Signature: _____ **Date:** _____

INSTRUCTIONS: Original Grievance Form should be given to appropriate supervisory representative. Supervisors are reminded to address and respond to each specific issue within the time limits specified within the Client Grievance Policy. The Recipient Rights Officer is available to assist supervisors with any questions. Should the grievance reach Step 4 (review by the Executive Director) the Executive Director shall make the final determination as to the outcome of the grievance.