

GENERAL GRIEVANCE POLICY AND PROCEDURE MANUAL

It is the policy of the Disability Rights Mississippi (DRMS) to treat its clients and applicants with fairness and professionalism. Clients or applicants who believe they have not been fairly or professionally served by DRMS have the right to present their grievance for prompt consideration and resolution. Under the PAIMI program, clients, applicants, family members or representatives of individuals who have received or are receiving mental health services who believe the agency is not operating in compliance with applicable law and regulations may also file a grievance

Notification

It is the policy of DRMS to notify all its clients and applicants that these grievance procedures exist: (1) at intake, (2) at the time a retainer is signed by the client, (3) at the time of case closure and, (4) at any time it becomes clear the client or applicant is not satisfied with the service being provided, and, (5) at the time a letter declining representation is sent.

Time Limitation

A client or applicant may present a grievance concerning a continuing practice or condition at any time. However, a grievance concerning a particular act or occurrence must be brought within thirty days after such act or occurrence. If a good reason is given for not bringing the grievance within the specified time limit, the agency may at its discretion extend this time limit.

Definitions

The following definitions apply to the grievance procedure and policies:

• Applicant - An applicant is a person with a disability, or his or her legal guardian or legal representative, who believes him or herself to be eligible for DRMS services and who has sought representation on a specific issue from DRMS.

- Client A client is anyone whose case has been accepted for representation by DRMS.
- Family members Family members include close relatives who are involved in the lives of individuals who have received or are receiving mental health services.

• Representatives - Representatives include legally authorized guardians or conservators, agents appointed through power of attorney, or individuals who have been informally asked by individuals who have received or are receiving mental health services or their family members, to assist or speak for them for the purpose of filing a grievance with DRMS related to the failure to comply with the federal PAIMI law and regulations.

Types of Grievances

A. Denial of Services Grievances - Within thirty days of the denial of services, an applicant may request that the Executive Director conduct a review of his or her request for representation. This may be done in writing or communicated in any way that accommodates the applicant and is effective in communicating the complaint. The Executive Director will be the final arbitrator of grievances concerning representation. The Executive Director will issue a decision within 10 working days from receipt of a complaint.

B. Dissatisfaction with Services Grievances - A client of DRMS may grieve a lack of fairness or professionalism in the handling of his or her case. Clients will be directed to follow the Informal Resolution and, if necessary, the Formal Resolution procedures outlined below.

Informal Resolution Procedure

Communication with Case Handler - The client should initially attempt to resolve any problem by communicating complaints to the person handling the case.

Communication with Supervisor - If the discussion with the case handler does not result in a satisfactory resolution of the client's complaint, the client should next ask to speak with, or write to, the case handler's supervisor. For complaints about case handling, the appropriate supervisor is the relevant Team Attorney. If the supervisor was involved in the action or decision that is the subject of the complaint, or for any other reason feels he/she cannot objectively complaint, he/she shall refer the grievance to his/her immediate supervisor, ordinarily the Legal Director or Litigation Director.

The supervisor will listen to the complaint, review the proceeding from the client's point of view, review the case with the case handler, review the case file, and consult with the Legal Director and/or the Litigation Director, if appropriate. The supervisor also has the option to convene a panel of three staff members who were not involved in the case for further review and advice on the way in which the complaint should be resolved. Following this review, the supervisor will respond to the client in writing within ten (10) working days with a finding.

If the supervisor finds that there is merit to the client's complaint, the supervisor will develop and present to the client a plan for resolving the client's dissatisfaction. This may be done in person, by phone, by letter, or by alternative format.

If the client continues to be dissatisfied, he or she will be advised of further appeal rights, i.e., the right to file a formal grievance within ten (10) working days of receipt of the informal grievance decision.

Communication with Executive Director or Board

At no time during the informal grievance procedure should the client or DRMS staff person communicate with the Executive Director or the Board about the substance of the complaint. This is to ensure that the Executive Director and Board will not have been prejudiced about the complaint before it reaches the formal or appeal stage of the complaint process. If the complaint involves a staff person who is supervised by the Executive Director, the Executive Director will proceed as above; however, the formal complaint procedure will commence with appeal to the Board of Directors.

Formal Resolution Procedure

If a grievance cannot be resolved informally, a client may present the grievance to the Executive Director under the formal procedure as outlined below.

Content and Time Limits

The formal grievance must be in writing, must be presented within ten (10) working days of the informal finding and clearly state why the client is dissatisfied and a proposed resolution. In instances where the client cannot write, the formal may be communicated in any manner that accommodates the client and is effective in communicating the complaint. Upon request, the Executive Director shall designate an uninvolved staff member to assist the complainant in communicating the complaint.

Rejection of Grievance

The Executive Director may reject the grievance if it was not filed within the time limits specified for filing.

Procedure

The Executive Director will investigate the complaint, and inform the client in writing (or alternative format), of the decision and/or proposed resolution within ten (10) working days of the date of receipt of the formal complaint. The Executive Director's reply must notify the client of the right to file an appeal within ten (10) working days of the date the decision was received by the client.

Appeals

An appeals panel, consisting of three board members designated by the Board, shall be convened at a time and place mutually convenient for the client and the panel for the purpose of hearing the appeal. Appeal hearings may be conducted by telephone, video conference, or other method convenient and accessible to the parties involved.

The panel will consider all documents, testimony, and evidence related to the grievance, including statements of the complainant. Rules of evidence will not be strictly applied. The complainant has the right to be accompanied and/or assisted by persons of his/her choosing and to call relevant witnesses. Both the complainant and the panel may cross-examine any witnesses who appear and testify.

The Panel may set guidelines and time limits for the grievance hearing process and will communicate those guidelines and timelines at the commencement of the hearing.

The panel may exclude anyone from the hearing (including the complainant) for loud, disrespectful or otherwise inappropriate conduct which obstructs the hearing.

The appeals panel will issue its decision within ten (10) working days of the hearing. The decision of the appeals panel is final.

PAIMI ASSURANCE GRIEVANCE POLICY

DRMS is required by federal law to establish a grievance procedure for individuals who have received or are receiving mental health services, family members of such individuals, or representatives of such individuals or family members to assure that DRT is operating in compliance with the Protection and Advocacy for Mentally III Individuals Act. 42 U.S.C. § 10805(a)(9). This type of grievance is different than the complaints about DRMS services and agency P&Os as discussed in Section 3.2. This type of grievance can be filed by individuals who have received or are receiving mental health services, family members of such individuals, or representatives of such individuals or family members of such individuals, or representatives of such individuals or family members. In addition to requiring this procedure, the PAIMI Act requires DRMS to send out notices to mental health providers regarding the right of individuals to file assurance grievances.