

## Participant Grievance Procedure

This policy outlines the steps by which a participant may seek resolution to a grievance within PATH programs.

When a participant has a grievance the proper reporting protocol is as follows:

- 1. The participant is to first discuss the issue with their assigned staff member (i.e. case manager, employment specialist, housing navigator, etc.). If the assigned staff member is not available, the participant should bring the information to program management.
- 2. If the issue being discussed pertains to their assigned staff member, the participant should bring the information to program management. If the issue is not resolved from the initial discussion, the following steps should be taken in the order outlined below:
- 3. A request in writing, using the designated grievance form, needs to be submitted to the Program Manager. The Program Manager will investigate the matter, including the gathering of facts, obtaining statements from other participants or staff, etc. The participant will receive a written decision within 72 hours of receipt of the form. To the extent possible and when appropriate, the program manager may meet with the participant in person to review the grievance and written decision in a confidential area, which may be identified as management's office or a PATH conference room. If the participant does not feel he/she received a satisfactory response/resolution, the next step should include:
- 4. A request in writing, in the form of a letter, to the Program Director, explaining the grievance and requesting a meeting to seek resolution. This letter must be submitted to the Program Director within three standard business days of response from the Program Manager. Within three standard business days of receipt of the letter, the participant will be invited to meet with the Program Director to discuss the grievance in a confidential area, which may be identified as the Director's office or a PATH conference room. Prior to the meeting, the Director will investigate the matter, as described previously. A written decision will be drafted at the time of the meeting with a copy given to the participant. If the participant does not feel he/she received a satisfactory response/resolution, the next step should include:
- 5. A request, in writing, in the form of a letter, to the Chief Program Officer, explaining the grievance and requesting a meeting to seek resolution. This letter must be submitted to the Chief Program Officer within three standard business days of response from the Program Director. Within three standard business days of receipt of the letter, the participant will be invited to meet with the Chief Program Officer, at a mutually agreeable time, to discuss the grievance in a confidential area, which may be identified as the Officer's office or a PATH conference room. Prior to the meeting, the Chief Program Officer will investigate the matter, as described previously. A written decision will be drafted at the time of the meeting with a copy given to the participant. If the



- participant does not feel he/she received a satisfactory response/resolution, the next step should include:
- 6. The participant's right to review the written decision of the Chief Program Officer through a mediation or dispute resolution service. PATH will provide assistance with this step, including referral to mediation and scheduling a mutually acceptable date and time for all parties to meet. PATH will fully participate in the mediation/dispute resolution process and encourages the participant to do so as well. If the participant chooses to use the Dispute Resolution Services for mediation for a decision, this mediation will be the final, binding resolution of the grievance. The participant may elect to use one of the following resolution services:

Los Angeles County Office of the Los Angeles City Attorney Dispute Resolution Program City Hall 200 North Spring Street, 14 <sup>th</sup> Floor Los Angeles, CA 90012 (213) 978-1880	Los Angeles County Los Angeles County Bar Association 1333 Seventh Ave. San Diego, CA 92101 619-231-0781		San Luis Obispo County SLO Bar Association P.O.Box 585 San Luis Obispo, CA 93406 805-541-5930	
Santa Barbara County	Orange County		Kern County	
Conflict Solutions Center	Dispute Resolution Services		Kern County Superior Court	
1528 Chapala St. Suite 205	1221 E Dyer Rd. Suite 120		1415 Truxtun Ave	
Santa Barbara, CA 93101	Santa Ana, CA 92705		Bakersfield, CA 93301	
805-349-8943	949-250-4058		661-868-5433	
Ventura County		Santa Clara County		
Office of the District Atto	rney	Office of Human Relations		
5720 Ralston St. Suite 3	00	2310 North First Street, Suite 104		
Ventura, CA 93003		San Jose, CA 95131		
805-654-3110		408-993-4120		

- 7. In the event of a grievance that is filed due to a termination from PATH Services, the termination will be in effect until all procedures have been followed and a final resolution has been made. Participant will not be able to access any services within PATH programs if terminated from services. We will provide the participant with a referral to other programs if requested at the time case management is terminated. PATH wants to resolve any and all problems concerning participant's participation in PATH's programs in a fair, prompt, and efficient manner.
- 8. A copy of filed grievances with written resolution or disposition of said grievance will be kept within the program department in a separate grievance file.

These procedures are given to all participants at intake, and the signed participant acknowledgement of the procedures is placed inside participant's file. Clients are informed in Rights of Person served that grievance submissions will not result in retaliation or barriers to services.



Grievance Form
(Must be completed by the Program Participant)

Participant Name:								
	Grievance		Grievar	ace Appeal				
Provide a brief description of your grievance or your termination appeal (attach additional pages if needed):								
SIGNATURE:	D	ate:		Time:				
				ys to begin the process to addr e upon completion of the inves				
FOR AGENCY NAM	E USE ONLY							
				Grievance Box:				
Signed:			_Date: _		_			