



CLEAR HORIZONS CLINICAL SERVICES, LLC

Policy Name and Number:	1.6 Service User & Community Complaint Process
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Approved by:	Marie Pickett, LCSW

Preamble

Clear Horizons Clinical Services, LLC values and encourages the feedback of service users and community members about the programs and practices of the organization. Complaints can provide important opportunities for improving service. A complaint may be defined as an expression of dissatisfaction or unmet expectation. A complaint can be made by the service user or **Community member** with support if necessary. The complaint can relate to any aspect of the organization's programs and services. A service user or community member who believes they have experienced discrimination at **Clear Horizons Clinical Services, LLC** may request a grievance form from therapist or staff member. All grievances will be handled in a fair and timely manner as outlined in the grievance form.

POLICY

Clear Horizons Clinical Services, LLC is committed to listening to service user and community member complaints and responding in a fair, timely and respectful manner. All complaints will be considered without reprisal or discrimination. Language support for non-English speaking service users or community members will be provided. **Clear Horizons Clinical Services, LLC** actively informs service users and community members of their right to register complaints (verbal or written) and seek resolution. This information is accessible and publicized in **Clear Horizons Clinical Services, LLC Client Rights and Responsibilities Statement**. Service users or community members who speak languages other *than* those covered by the latter documents or who have reading difficulties are encouraged to have this policy explained to them by a **Clear Horizons Clinical Services, LLC** staff person or the counselor at the beginning of service. **Clear Horizons Clinical Services, LLC** will assist persons with disabilities to register their complaints and seek resolution.

All aspects of a complaint will be handled in confidence. However, if the complaint involves allegations of illegal or unethical behavior, information may need to be shared with external authorities.

All complaints are documented. The maintenance of complaint files is the responsibility of department Managers.

Complaints deemed a risk to the organization are brought forward to the board of directors by the Executive Director. Complaints related to the violation of board governance policies are reviewed by the board. Directors (senior management) will provide information about complaints to the Executive Director's office so that a summary report can be created and submitted to the board annually. Clients with questions, comments or complaints about **Clear Horizons Clinical Services, LLC** privacy policies and procedures or about the collection, use or disclosure of their personal information will be directed to the Privacy Officer.

SCOPE

The *Service User and Community Member Complaint* policy applies to all **Clear Horizons Clinical Services, LLC** programs and services.

PROCEDURES

As the goal of **Clear Horizons Clinical Services, LLC** is to give sufficient Local authority to meet service user needs, complainants will be encouraged, but not required to work within the lines of authority within the organization. To provide maximum support to the staff-service user and community member relationship, the complaint resolution process begins with the involvement of the staff person who provided service, unless this is not in the best interests of the service user or community member.

STEP 1: Receiving a Complaint

- a. If the person providing service receives the complaint the service user or community member should be offered the earliest opportunity to discuss their concern(s).
- b. If the complaint is received by any staff member or volunteer of the Organization other than the person providing service the service user or community member should be directed to the person providing service with an explanation of **Clear Horizons Clinical Services, LLC** policy. If the complainant is reluctant to speak directly to the person providing service, they should be referred to that person's immediate manager. The person providing the service should be alerted to the existence of the complaint.
- c. In hearing a complaint the person providing service may decide to involve or consult their manager at any stage. This option should be taken if the service user brings a friend or advisor.
- d. If the complaint is handled to the mutual satisfaction of the complainant and the person providing service, the complaint and resolution is documented on the Complaint Form and a copy is forwarded to the manager of the person providing service and the department director.

STEP 2: Discussion with a Manager

- a. If the person providing the service is unable to resolve a complaint, the complainant is offered the opportunity to speak with the manager.
- b. The preferred method is to have the manager call the service user or community member. This affords the staff person the opportunity to discuss the matter with the manager prior to any further action or outreach to the complainant.
- c. The manager calls the service user or community member as soon as possible after consulting with the person who provided the service.
- d. If a service user or community member calls a manager to complain about the person providing the service or about the service provided, the manager should hear the complaint but offer no action without discussing the matter with the staff person involved.
- e. From the point a manager takes a call from a service user or community member or calls a complainant about a complaint, a meeting between the manager and complainant should be offered within five working days.
- f. The staff person(s) and manager should jointly plan the response to the service user's or community member's complaint. When possible, the plan should support the integrity of the service user/community member/staff relationship and, unless contraindicated, the staff person will be present at any meeting between the manager and complainant.
- g. The role of the manager is to resolve the matter to the satisfaction of the service user or community member and staff person(s) or, failing this, to inform the complainant of their right to seek resolution through a meeting with the Director.
- h. A letter must be sent to the service user or community member within two weeks of the meeting. The Director of Programs and Services is informed of the complaint and the resolution or lack of resolution.

STEP 3: Meeting the Department Director

- a. If the service user or community member is not satisfied with the response from the manager the initiative for carrying the complaint to the Director rests with the complainant.
- b. The service user or community member should be informed of the name and phone number of the Director if she/he wishes to pursue the complaint. The Director is alerted immediately if a call is anticipated, and a **copy** of the completed *Complaint Form* is provided.
- c. If requested, the Director will meet with the service user or community member within two weeks of receiving the request.
- d. Prior to this, the Director will contact the manager and the staff person and seek any necessary consultation. Whenever possible the Director will attempt to involve the staff and manager in the planning process and may invite one or both to the meeting.
- e. The Director will attempt to resolve the problem with the service user or community member. Whatever the outcome, the Director will inform the complainant by mail not more than two weeks after the meeting.
- f. The Director will inform the Executive Director of the meeting with the service user or community member and the outcome.

STEP 4: Meeting the Executive Director

- a. If the service user or community member is not satisfied with the response from the Director the complainant may take the complaint to the Executive Director and should be informed of the name and phone number of the Executive Director.
- b. The Executive Director should be alerted immediately if a call is anticipated, and a **Copy** of the completed *Complaint Form* should be provided.
- c. If requested, the Executive Director or her or his designate will meet with the service user or community member within two weeks and attempt to resolve the matter.
- d. Prior to this, the Executive Director will inform the Director, manager, and the staff person(s) of the approach and seek any necessary consultation.
- e. Whenever possible the Executive Director will involve the staff person(s) and manager in the planning process and may invite one or all of them to the meeting.
- f. Prior to the meeting the Director will ensure that a letter bearing his/her signature is sent to both the service user or community member and the Executive Director outlining the complaint and all the steps taken to resolve the complaint.
- g. Within two weeks of meeting the service user or community member, the Executive Director or her/his designate will send a letter to the complainant setting out any agreement reached, or failing this, the Executive Director's decision regarding the complaint. The person(s) providing the service and those at the first level of authority will be **Kept** informed throughout all attempts to resolve complaints. In instances where there is an allegation of criminal or serious ethical breach of conduct by **Clear Horizons Clinical Services, LLC** personnel, the Executive Director may waive the requirement to inform personnel until legal and/or police advice is sought and may continue to refrain from informing the person during the course of an investigation providing there is no breach of a legal or contractual standard. While every attempt should be made to achieve a positive resolution with the complainant, the integrity of **Clear Horizons Clinical Services, LLC** policies and the integrity and safety of **Clear Horizons Clinical Services, LLC** personnel and other service users or community members must be maintained.

STEP 5: Documentation

All complaints received from a service user or community member are initially documented by the staff person who received the complaint using the *Complaint Form*. A flag noting that a complaint has been received is placed in the client or community member's record. A copy of the complaint is forwarded to the staff manager. The complaint file (includes all documentation, correspondence, resolution and follow up) is maintained separately from the service user's client record or the community member's file in the appropriate director's office. A record of the complaint will be made available to the complainant on request, except in the case where

the confidentiality of another service user or community member may be breached. These records will be retained for the same period as the client or community member record (currently 10 years).



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