

POLICY AND PROCEDURE PERTAINING TO RESIDENT COMMUNICATING CONCERNS, GRIEVANCE or COMPLAINT POLICY

PURPOSE

The purpose of this policy is to promote service recipient's rights by providing the resident and/or legal/designated representatives, if applicable with a process to communicate concerns and address grievances.

POLICY

It is the policy of Gleasner's Assisted Living, and Eon Inc. Home Care to ensure residents have the right to respectful and responsive services. We are committed to providing a simple complaint process for residents and their legal/designated representatives to bring grievances forward and have them resolved in a timely manner. Should a resident and/or legal/designated representative, if applicable, feel a concern, complaint, or problem has not or cannot be resolved through informal discussion with the staff or supervisors, they should file a formal grievance. GAL and Eon Inc. Home Care will not discriminate or take any action that negatively affects a resident in retaliation for a complaint made, concern expressed, or formal grievance by the resident or the legal/designated representative, if applicable or employee if filed in good faith on behalf of the resident. This complaint system must provide reasonable accommodations for any special needs of the resident or legal/designated representative, if applicable.

Staff and resident, and/or legal/designated representatives, if applicable, will receive training regarding the informal complaint and formal grievance procedure. This policy will be provided, orally and in writing, to all residents and/or legal/designated representatives, if applicable. Reasonable accommodations will be provided of any special needs of the resident or representative, if requested. A resident, their legal representative, if applicable, will be notified of this policy, and provided a copy prior to signing a contract.

PROCEDURE

I. Informal Complaint – EON, Inc. Home Care

The resident or legal/designated representative should talk to a staff person that they feel comfortable with about their concern, complaint or problem or preferably submit Communicating Concerns/Informal Complaint Report and Review Form.

- A. Typically, this would be the Community Support Program Director (CSPD). The CSPD Contact information is posted in the common area on the EON Inc. Home Care Resident Grievances Contact Information form.
- B. Community Support Program Director and/or Community Service Director (CSD) will document the concern, complaint, or problem in Therap's General Event Report (GER) Under Event: Other Event Information, Type: Complaint and/or Possible Litigation.
- C. The CSPD will attempt to resolve the complaint with the resident and/or legal/designated representative.

II. Formal Grievance – EON, Inc. Home Care

- A. The resident or legal/designated representative will clearly inform the Community Services Director (CSD) in writing or verbally that they are filing a formal grievance and not an informal concern, complaint, or noting a problem. It is preferred to have the formal grievance in writing. The CSD/ALD Contact information is posted in the common area on the GAL and Eon Inc. Home Care Resident Grievances Contact Information form.
- B. If a resident or legal/designated representative does not believe that their formal grievance has been resolved by staff in the program area, they may notify in writing or discuss the formal grievance with the highest level of authority in the program: Eon Inc. Home Care President and Chief Executive Officer (CEO), who may be reached at:

Name: Tyler Berg

Address: 1200 South Broadway, New Ulm, MN 56073

Telephone: (507) 233-3030

Email: tberg@theon.com

III. Complaint – Glesener's Assisted Living

- A. The resident or legal/designated representative should talk to a staff person that they feel comfortable with about their concern, complaint or problem or preferably submit Communicating Concerns/Informal Complaint Report and Review Form. Contact information is posted in the common area on the EON Inc. Home Care Resident Grievances Contact Information form.
 - 1. All oral and written complaints will be directed to the LALD. It is preferred to have the complaint in writing.
 - 2. The LALD will review the complaint and determine the most appropriate staff person to investigate and follow-up and assign the complaint to that staff person.
 - 3. The staff person will complete the complaint investigation and follow-up and document appropriately on the Complaint Report and Review Form
 - 4. The completed Complaint Report and Review Form will be routed to the LALD for final review/
 - 5. The LALD will document the complaint in Therap's General Event Report (GER) Under Event: Other Event Information, Type: Complaint and/or Possible Litigation.
- B. If a resident or legal/designated representative, if applicable does not believe that their complaint has been resolved by the LALD, they may notify in writing or discuss the complaint with the highest level of authority in the program: EON, Inc./GAL President and Chief Executive Officer (CEO), who may be reached at:

Name: Tyler Berg

Address: 1200 South Broadway, New Ulm, MN 56073

Telephone: (507) 233-3030

Email: tberg@theon.com

- C. Complaints are reviewed during quality management process.

D. Response Formal Grievance/Complaint

- A. If at any time, staff assistance is requested in filling a formal grievance/complaint, the following assistance will be provided:
1. The name, address, and telephone number of outside agencies;
 - a. Additional information on outside agencies that also can provide assistance to the resident and/or legal/designated representative are listed at the end of this procedure; and
 2. Responding to the formal grievance in a manner that the resident and/or legal/designated representative's concerns are resolved.
- B. All formal grievances affecting a resident's health and safety will be reported to and responded to promptly by the CSPD and/or CSD/LALD.
- C. The CSD/LALD will respond within 14 days.
- D. The President and CEO will then respond within 14 calendar days.
- E. All formal grievances will be resolved within 30 calendar days of receipt of the grievances. If this is not possible, the CEO will document the reason for the delay and a plan for resolution.
- F. A grievance review will be completed by the CSD/LALD. The grievance review will include an evaluation of whether:
1. Related policies and procedures were followed.
 2. The policies and procedures were adequate.
 3. There is a need for additional staff training.
 4. The complaint is similar to past complaints with the persons, staff, or services involved.
 5. There is a need for corrective action by GAL to protect the health and safety of resident.
- G. Based upon the results of the complaint review, the CSD/LALD will develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by staff or EON/GAL, if any.
- H. GAL and Eon Inc. Home Care will provide a written summary of the complaint and a notice of the complaint resolution to the person and/or legal/designated representative that:
1. Identifies the nature of the complaint and the date it was received;
 2. Includes the results of the complaint review; and
 3. Identifies the complaint resolution, including any corrective action.
- I. The complaint summary and resolution notice must be maintained in the resident's record.
- J. Any resident or legal/designated representative, if applicable, filing or wishing to file a grievance has the right to the assistance of an advocate. Assistance may be obtained by contacting a relative or friend who wishes to serve as an advocate for the person or by contacting (current as of 8/1/2021):

Outside Agency	Phone	Address and Email Address
The ARC Minnesota	651-523-0823	770 Transfer Road, suite 26 St. Paul, MN 55114 Email: mail@arcmn.org Website: www.thearcminnesota.org
State Office of Ombudsman for Long-Term Care	651-431-2555 or 800-657-3591	P.O. Box 64971 St. Paul, MN 55164-0971 Website: Ombudsman / Minnesota Department of Human Services (mn.gov)
Regional Ombudsman for Long-Term Care	Sylvia Hasara 507-662-6652	Website: Regional Ombudsman directory / Minnesota Department of Human Services (mn.gov)
State Ombudsman for Mental Health and Developmental Disabilities (OMHDD)	651-7567-1800 or 800-657-3506	121 7 th Place East Suite 420 Metro Square Building St. Paul, MN 55101-2117 FAX: (651) 797-1950 Email: ombudsman.mhdd@state.mn.us Website: www.ombudmhdd@state.mn.us
Regional Ombudsman for Mental Health and Developmental Disabilities (OMHDD) West Central (Region 5)	320-864-2093 or 651-529-0050	Chris Michel 623 12 th Street, Suite 107 Glencoe, MN 55336 Fax: 651-797-1968 Email: christine.r.michel@state.mn.us Website: Ombudsman by Region / Minnesota.gov (mn.gov)
Minnesota Disability Law Center	612-332-1441 1-800-292-4150	430 1 st Ave North, Suite 300 Minneapolis, MN 55401 Email: mndlc@mylegalaid.org Website: Legal aid for people with low income, disabilities, and seniors - Mid-Minnesota Legal Aid (mylegalaid.org)
Minnesota Department of Health Health Regulation Division	651-201-4101	85 E. 7th Place PO Box 64970 St. Paul, MN 55164-0970 Phone: 651-201-4101 Email: health.fpc-web@health.state.mn.us Website: (www.health.state.mn.us)
Minnesota Department of human Services Licensing Division	651-431-6500	444 Lafayette Road St. Paul, MN 55115 E-mail: dhs.info@state.mn.us Website: www.mn.gov/dhs/general-public/licensing
Office of Health Facility Complaints (OHFC)	(651) 201-4200 or (800) 369-7994	P.O. Box 64975 St. Paul, MN 55164-0975 Website: www.health.state.mn.us/divs/fpc/ohfcinfo/contohfc.htm
Common Entry Point/Minnesota Adult Abuse Reporting	(844) 880-1574	Website: http://mn.gov/dhs/reportadultabuse

REFERENCED POLICIES

None

REFERENCED FORMS

Therap General Event Report (GER)
Complaint Contact Information Form
Complaint Report and Review Form