



OFFICE FOR THE AGING

Steven M. Neuhaus
County Executive

Ann Marie Maglione
Director

GRIEVANCE PROCEDURE ORANGE COUNTY OFFICE FOR THE AGING

I. PURPOSE

The Orange County Office for the Aging has established the following process for resolving complaints from persons who are dissatisfied with or denied services funded by Orange County Office for the Aging.

II. NOTIFYING PARTICIPANTS OF RIGHT TO FILE GRIEVANCE

The Orange County Office for the Aging and each of its service provider agencies (“service provider agencies”) shall notify participants and applicants of their right to file a grievance as follows:

1. A summary of the procedures, including a statement that assistance to file shall be provided to older persons, must be prominently posted at service delivery sites or offices at which participants and service applicants apply for services. Summaries shall also be written in languages other than English where required to serve the client/applicant population.
2. In-home service participants shall be informed of grievance procedures through written and verbal statements provided to them upon assessment and/or reassessment for services.

III. DENIAL OF SERVICE

A participant or applicant who is denied services must be given the reason for denial.

For housekeeping, homemaker, home delivered meals, case management and other services for which written applications are made, the denial shall be confirmed in writing and the applicant informed of the right to file a grievance and to whom the grievance shall be addressed.

For congregate meals, transportation, recreation and other services which are applied for verbally by telephone in person, the client may be told of the right to file a grievance verbally.

IV. GRIEVANCE PROCESS

Filing of Grievance:

1. Participants must submit their grievance in writing to the Orange County Office for the Aging Assistant Director.
2. The grievance should be filed within thirty (30) days of denial, reduction or termination of services or of the event or circumstances with which the participant is dissatisfied.
 - a. The grievance should be filed on the form entitled "COFA 42 COMPLAINT LETTER FORM," which can be provided by the Orange County Office for the Aging. The form shall include a written statement setting forth in detail the date, time and circumstances that are the basis of the complaint.

Investigation and Response to Grievance:

1. The Assistant Director will research the nature of the complaint with both the individual and the other persons involved in the action(s) complained of or in the denial of services.
2. The Assistant Director shall review all pertinent facts and/or documents, shall determine whether the agency's actions were made in accordance with lawful procedures (that is, consistent with applicable Older Americans Act and or State laws, regulations and policies) and supported by facts.
3. The Assistant Director shall prepare and send a written response to the grievant and to the Orange County Office for the Aging Director within fifteen (15) days after the grievance is filed. The response shall set forth the circumstances relating to the grievance, the action requested by the grievant, the findings of the Assistant Director, a proposed remedial action, if any, and reason(s) for and facts relied on, for determination.

Please note:

No remedial action is required if after review of the grievance the Assistant Director finds any of the following:

- a) services are denied because of funding restrictions,*
- b) ineligibility,*
- c) the hours or location of the program have changed,*
- d) services are no longer needed as determined by reassessment, or*
- e) services are terminated due to the client's disruption to the program.*

This listing of reasons is not all inclusive. It illustrates and provides guidance on the most probable reasons for the Assistant Director's decision not to take future action on a particular grievance.

V. APPEAL OF INITIAL RESPONSE/DESCISION

If the grievant is not satisfied with the determination of the Assistant Director:

1. The grievant may initiate a request for subsequent review by the Orange County Office for the Aging Director within twenty (20) calendar days following the receipt of notification by the Assistant Director.

2. The Orange County Office for the Aging Director will review the materials associated with the grievance to ensure that the pertinent policies and procedures have been applied and followed. If necessary, the Director will meet with the grievant to allow them the opportunity to present information about the grievance.
3. If the Orange County Office for the Aging Director finds that all policies and procedures have been followed, the decision will stand. The decision may be overturned if the Director finds that proper policy and procedures have not been followed. This subsequent review shall be completed within forty-five (45) days of the receipt of the request to review the Director's decision. The grievant will be notified of the final ruling by mail.

VI. RECORD KEEPING

The Orange County Office for the Aging shall keep a file for six years of all relevant documents and records. This shall include at minimum: the initial grievance; any investigative reports; any written response submitted by the Office for the Aging or other service provider agency; any documents or the records submitted by any party; the written initial response of the Office for the Aging; and if applicable, the notice to the grievant of the right to appeal.

VII. CONFIDENTIALITY

No information, documents or other records relating to a grievance shall be disclosed by program staff or volunteers in a form that identifies the grievant without the written informed consent of the grievant, unless the disclosure is required by court order or for program monitoring by authorized agencies.



OFFICE FOR THE AGING

Steven M. Neuhaus
County Executive

Ann Marie Maglione
Director

ORANGE COUNTY OFFICE FOR THE AGING COMPLAINT LETTER FORM

Date: _____

Orange County Office for the Aging
40 Matthews St, Suite 305
Goshen, NY 10924

Attention: Assistant Director

I am writing to request a review of the following grievance:

___ I was denied service (Name and date of service _____)

___ I am not satisfied with the quality of service or activity provided by your agency or by your service provider. (Name and date of service _____)

___ I have the following grievance (describe in detail) _____

Please respond to:

Name _____ Phone _____

Address _____

Signature _____

THIS FORM MUST BE FILED WITHIN 30 CALENDER DAYS OF THE EVENT OR ACTION UNLESS YOU ARE GRANTED AN EXTENSION FOR GOOD CAUSE.



OFFICE FOR THE AGING

Steven M. Neuhaus
County Executive

Ann Marie Maglione
Director

ORANGE COUNTY OFFICE FOR THE AGING GRIEVANCE PROCEDURE

If you have been denied a service or are not satisfied with a service, you have a right to file a grievance.

1. If possible, try to resolve the problem with Orange County Office for the Aging or service provider.
2. If you need help with your grievance, the Office for the Aging will assist you.
3. You must submit your formal grievance in writing. The Office for the Aging will provide you with the appropriate form.
4. Your grievance must be filed within 30 days of the event with which you are dissatisfied. The grievance must be sent to the Office for the Aging.
5. The Orange County Office for the Aging Assistant Director will review the grievance and provide a written response to you within 15 days after the grievance is filed.
6. If you are not satisfied with the decision of the Assistant Director, you may appeal the decision. This must be done within 20 calendar days of receiving the Assistant Director's determination.
7. The Director of the Office for the Aging will review your appeal and notify you of the final ruling within 45 days.

Please note:

No remedial action is required if after review the Director finds: Services are denied because of funding restrictions, ineligibility, hours or location of the program have changed, services are no longer needed as determined by reassessment or services are terminated due to client's disruption to the program. This list of reasons is not inclusive. It illustrates and provides guidance on the most probable reasons for the Director's decision not to take further action on a particular grievance.

FOR MORE INFORMATION CONTACT:
ORANGE COUNTY OFFICE FOR THE AGING
PHONE: 615-3700

Receipt Acknowledged

Date: _____