FAMILY SUPPORT PROGRAM
APPEALS/GRIEVANCE PROCEDURE
AND FRAUD, WASTE AND ABUSE POLICY

Appeals/Grievance Procedure

The following procedure shall be followed should a family become dissatisfied or have a dispute pertaining to program operations, staff, services provided, or decisions made. Every effort shall be made to settle the issue as quickly as possible and as close to the source as possible.

The complaint shall first be brought to the attention of the Family Support Coordinator at your local agency. The coordinator will attempt to remedy the situation to the satisfaction of all parties.

If attempts at resolution are unsuccessful at the agency level, the following procedure shall be followed to resolve any complaint or grievance regarding Family Support services:

1. *Local Council Review*-The family shall contact the DDA Regional Office Family Support staff in writing or by phone to report the complaint or grievance. East, TN 423-787-6953, West, TN 901-355-1571, Middle, TN 615-231-5057. This notification shall occur within thirty days of the aggrieved occurrence. The Regional Office will forward the source of complaint or grievance in writing to the Local Council for resolution. The Local Council shall meet with the agency separately from the family, and shall offer to meet with the family separately, to discuss the complaint/grievance and present evidence. The agency is required to have a representative meet with the Local Council. It is the family's choice to either: (1) attend the meeting in person; (2) attend the meeting with an advocate; (3) send an advocate to the meeting on their behalf; or (4) have the Local Council rely solely on the documentation provided by the family. If the family does decide to have an advocate attend the meeting with the Local Council, the family will provide notice to the DDA Regional Office Family Support staff at least 48 hours prior to the meeting. If this deadline is not met, then the meeting will be re-scheduled to a time where the 48-hour timeline for notice by the family can be met. The meeting of the Local Council with the agency may occur at a different date than the meeting of the Local Council with the family or the review of the documentation submitted by the family without their attendance. The meeting(s) of the Local Council shall occur as soon as possible following the receipt of the written complaint/grievance. Within ten business days following both: (1) the meeting of the Local Council with the agency, and (2) either the meeting of the Local Council with the family or a review of the documentation submitted by the family without their attendance; the Local Council shall compile a meeting summary and submit it along with its decision to the DDA Regional Office and Family Support staff as well as notify the family of its decision in writing.
2. *District Council Review* - If the family is not satisfied with the Local Council decision, the family shall contact the DDA Regional Office Family Support staff in writing or by phone within ten business days following receipt of the notification from the Local Council of its decision. East, TN 423-787-6953, West, TN 901-355-1571, Middle, TN 615-231-5057. The Regional Office will forward the complaint or grievance in writing to the District Council for resolution. The District Council shall meet with the agency separately from the family, and shall offer to meet with the family separately, to discuss the complaint/grievance and present evidence. The agency is required to have a representative meet with the District Council. It is the family's choice to either: (1) attend the meeting in person; (2) attend the meeting with an advocate; (3) send an advocate to the meeting on their behalf; or (4) have the District Council rely solely on the documentation provided by the family. If the family does decide to have an advocate attend the meeting

with the District Council, the family will provide notice to the DDA Regional Office Family Support staff at least 48 hours prior to the meeting. If this deadline is not met, then the meeting will be re-scheduled to a time where the 48-hour timeline for notice by the family can be met. The meeting of the District Council with the agency may occur at a different date than the meeting of the District Council with the family or the review of the documentation submitted by the family without their attendance. The meeting(s) of the District Council shall occur as soon as possible following the receipt of the written complaint/grievance. Within ten business days following both: (1) the meeting of the District Council with the agency, and (2) either the meeting of the District Council with the family or the review of the documentation submitted by the family without their attendance; the District Council shall compile a meeting summary and submit it along with its decision to the DDA Regional Office and Family Support staff as well as notify the family of its decision in writing.

3. *State Council Review* - If the family is not satisfied with the District Council decision the family shall contact the DDA Regional Office Family Support staff in writing or by phone within ten business days upon notification from the District Council. East, TN 423-787-6953, West, TN 901-355-1571, Middle, TN 615-231-5057. The Regional Office staff will forward the source of the complaint or grievance in writing to the Chairperson of the Family Support State Council and to the State Coordinator of the Family Support Program. The Family Support State Council will review the complaint or grievance at its next scheduled meeting following the date of the decision of the District Council. While the agency is required to have a representative at the State Council meeting, it is the family's choice to either: (1) attend the meeting in person; (2) attend the meeting with an advocate; (3) send an advocate to the meeting on their behalf; or (4) have the State Council rely solely on the documentation provided by the family. The Regional Office Family Support staff will help the family compile a written form of findings for the Family Support State Council meeting. The State Council shall notify the family of its decision in writing within ten business days following the meeting. The decision of the Family Support State Council is final.

Fraud, Waste and Abuse Policy

The Family Support Program and its staff, provider agencies and volunteers shall comply with DDA Policy 70.2.1 related to preventing, detecting, and reporting fraud, waste and abuse of government funding. Individuals enrolled in the Family Support Program (and/or his/her guardian/conservator) shall comply with DDA Policy 70.2.1, as applicable. See appendix I.

It is expected that the provider agency, volunteers, service providers and the individual enrolled in the Family Support Program (or his/her guardian/conservator) shall cooperate with investigative matters. Failure to cooperate could result in denial of a claim, termination of the Family Support contract, disenrollment from the program and/or a criminal investigation. Disenrollment from the program would prevent reapplication in subsequent years.

By signing and dating this form, I, the person supported or legal representative, understand that I must abide by the procedures stated above and as applicable, incorporated in the Family Support Guidelines. Furthermore, I understand that providing invalid, inaccurate, or incomplete information may be considered as fraud, waste or abuse and may result in denial of a claim, disenrollment from the program and/or criminal investigation. Disenrollment from the program would prevent reapplication in subsequent years.

*A full copy of the Family Support Guidelines can be located at:

Family Support Guidelines

**Note:* A hard copy may be requested from the agency

*****A signed acknowledgement form must be maintained in the file*****

FAMILY SUPPORT PROGRAM

20__-20__ ACKNOWLEDGMENT OF RECEIPT OF THE APPEALSGRIEVANCE PROCEDURE and FRAUD, WASTE AND ABUSE POLICY

By signing and dating this form, I, the person supported, or legal representative indicate that I have received and understand the forms listed below:

☐ **Appeals/Grievance Procedure**

☐ **Fraud, Waste and Abuse Policy**

_____ _____

Signature of Individual Date Signed

or

_____ _____

Personal Representative/Guardian as applicable Date Signed

_____ _____

Signature of Agency Employee Date Signed