



## **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 Family Support Coordinator, Jo VerMulm at United Cerebral Palsy of Middle Tennessee, phone: 615-796-3341, email: jo\_vermulm@ucpnashville.org . 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 DIDD Regional Office Family Support staff in writing or by phone. (Regional Director, Tammie Browning phone: 615-231-5057 tammie.browning@tn.gov ) This notification shall occur within thirty (30) days of the aggrieved occurrence. The Regional Office shall forward the source of complaint in writing to the Local Council for resolution. The Local Council shall meet with the agency and family separately to discuss the grievance and for supporting documentation to be reviewed. It is the family's choice to attend the meeting in person, attend the meeting with an advocate, send an advocate to the meeting on their behalf, or rely upon written documentation of the complaint to be presented at the meeting. This meeting shall occur no later than thirty (30) calendar days following the receipt of the written grievance. Within ten (10) calendar days following the meeting, the Local Council shall compile a meeting summary and submit it to the DIDD 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 DIDD Regional Office Family Support staff [insert Regional Office contact information]) in writing or by phone within ten (10) calendar days following receipt of the notification from the Local Council. The Regional Office shall forward the complaint in writing to the District Council for resolution. The District Council shall meet with the agency and the family separately to discuss the grievance and review any supporting documentation provided. It is the family's choice to attend the meeting in person, attend the meeting with an advocate, send an advocate to the meeting on their behalf, or rely on written documentation of the complaint to be presented at the meeting. This meeting shall occur no later than thirty (30) calendar days following the receipt of the written grievance. Within ten (10) calendar days following the meeting, the District Council shall compile a meeting summary and submit it to the DIDD 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 DIDD Regional Office Family Support staff [insert Regional Office contact information] in writing or by phone within ten (10) calendar days upon notification from the District Council. The Regional Office staff shall forward the source of complaint in writing to the chairperson of the Family Support State Council and to the State Coordinator of the Family Support Program. All parties involved will present the complaint or grievance before the Family Support State Council. It is the family's choice to attend the meeting in person, attend the meeting with an advocate, send an advocate to the meeting on their behalf, or rely on written documentation of the complaint to be presented at the meeting. This meeting shall occur at the next scheduled meeting for the Family Support State Council. The Regional Office staff shall 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 (10) calendar days following the meeting. The decision of the Family Support State Council shall be final.

### **Fraud, Waste and Abuse Policy**

The Family Support Program and its staff, provider agencies and volunteers shall comply with DIDD 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 DIDD Policy 70.2.1, as applicable. See appendix (*new appendix # with policy*).

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:

[https://www.tn.gov/content/dam/tn/didd/documents/consumers/family-support/Family\\_Support\\_Program\\_-\\_Guidelines.pdf](https://www.tn.gov/content/dam/tn/didd/documents/consumers/family-support/Family_Support_Program_-_Guidelines.pdf)

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

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