

Client Grievance Policy and Procedures

SUMMARY

Background: The Ryan White HIV/AIDS Program (RWHAP) legislation for the Part A, MAI, and EHE programs requires, to the maximum extent practicable, that core medical and support services will be provided without regard to an individual's ability to pay, or to the current or past health condition of the individual to be served. Miami-Dade County's Office of Management and Budget (OMB) administers Ryan White Part A, MAI, and EHE services to support medical care and support services provided to program-eligible people with HIV (clients). This policy ensures a fair and transparent process for resolving grievances related to service delivery.

Purpose: To provide clients with a formal mechanism to address complaints and grievances, ensuring issues are resolved promptly and equitably. This policy also aims to prevent future grievances through proactive measures.

SCOPE

Applicable to all clients receiving services funded by the Miami-Dade County Ryan White Program, including eligible individuals, their representatives, and stakeholders.

LEGISLATIVE BASIS

Section 2602(c)(2) of the Ryan White Treatment Modernization Act requires Part A Grantees to establish grievance procedures consistent with HRSA guidelines. This ensures conformity with federal standards for grievance resolution.

DEFINITIONS

Refer to Appendix A for specific definitions relevant to this policy, including, but not limited to, terms such as "Client," "Contracted Service Provider," "Subrecipient," "Recipient," and "Grievance."

WHO MAY FILE A GRIEVANCE

Any eligible client of the Miami-Dade County Ryan White Part A, MAI, or EHE Programs who feels aggrieved by services received from or interactions with a Contracted Service Provider (also referred to as Subrecipient) may file a grievance.

ELIGIBLE GRIEVANCES

All issues, complaints, or disputes arising between clients and Contracted Service Providers within the scope of Ryan White Part A, MAI, or EHE-funded services are eligible for grievance under this policy, including those resulting in a determination of program ineligibility, a denial of core medical or support services to clients, or involuntary disenrollment (see Appendix C).

PROCEDURES

Step 1:

Communication with and Distribution of Client Grievance Policy and Procedures

- Contracted Service Providers are contractually required to develop, maintain, inform clients of, and implement client grievance policy and related procedures.
- Clients must be given a copy of the Contracted Service Provider's grievance policy at the time of intake/registration/enrollment and a copy of the policy must be conspicuously posted at the Contract Service Provider's service site(s). A timely response to complaints and grievances is required.
- Clients must also be given a copy of the Miami-Dade County Ryan White Program Client Grievance Policy and Procedures at the time of intake/registration/enrollment and a copy of this policy must be conspicuously posted at the Contract Service Provider's service site(s). A copy of these policies and procedures will also be available on the County's Ryan White Program website: www.miamidade.gov/grants/ryan-white-program. See Attachment 1, Miami-Dade County Ryan White Program Client Grievance Policy and Procedures Acknowledgment Receipt Form.
- Questions regarding these client grievance policies and procedures must be directed to the appropriate Contracted Service Provider representative or Recipient staff for a response in a timely manner, preferably within two (2) business days. See "Contact Information" section below for Recipient staff contacts.

Step 2:

Initial Report of Informal Complaint or Formal Grievance [submission to Contracted Service Provider (i.e., subrecipient)]: Clients are encouraged to resolve issues informally or formally with the Contracted Service Provider first, following the provider's internal policy and procedures for complaints or grievances. See Attachment 2, How to Report a Problem.

- Informal complaints and formal grievances must be tracked by the Contracted Service Provider, to include, at a minimum, the client's Computer Identification System number (CIS#), type of incident (informal complaint or formal grievance), date of incident, detailed narrative of the incident or occurrence, disposition (status) of the incident or occurrence (e.g., not started, pending, resolved to client's satisfaction, referred to County grievance process, etc.), and closure date (when applicable).
- The Contracted Service Provider must notify the Miami-Dade County Ryan White Program Administrator (see "Contact Information" section below) within three (3) business days of the receipt of **any** Ryan White Program-related informal complaint or formal grievance. This email notification must include the nature of the complaint or grievance, the date of the incident, and the related client CIS#.
 - ❖ However, eligible grievances resulting in the client's determination of ineligibility or a denial of service(s) must be immediately reported to the Recipient via the Secure Message module in the program's data management system, Provide® Enterprise

and will include the client's full name, CIS#, incident date, a detailed narrative of the occurrence, reason for denying the service, and final disposition (if available).

- The number and status of Ryan White Program-related complaints or grievances must also be reported to the Recipient through the Annual Progress Report, during monitoring site visits, or upon request from the Recipient.

Step 3:

Formal Grievance Process (submission to Recipient):

- **Submission of Grievance:** If "Initial Report to Contracted Service Provider" is unsuccessful (i.e., client is dissatisfied with the decision), the client may submit a completed Client Grievance Form (see Attachment 3) to the Recipient's Program Director or designee within ten (10) business days of the event or decision in question.
- **Receipt and Acknowledgment:** Within two (2) business days of receiving the grievance, the Program Director or designee will acknowledge receipt and provide a summary of the grievance process timeline.
- **Investigation and Resolution:** The Program Director or designee will investigate the concerns and provide a written response to the client within thirty (30) calendar days, outlining findings and any proposed resolution.

Step 4 (if needed):

Appeals Process:

- **If Dissatisfied:** Clients dissatisfied with the resolution / decision made by the Recipient may appeal in writing (see Attachment 4) within ten (10) business days of receiving the decision. The appeal should include reasons for disagreement and any supporting documentation.
- **Final Decision:** An independent review panel will review the appeal and issue a final written decision within ten (10) business days of receipt.

Step 4 (if needed):

Escalation to assigned HRSA Project Officer

- If the complainant followed the steps detailed above and still did not have their complaint or grievance resolved to the client's satisfaction, the Recipient will provide the complainant with the contact information to escalate their concern to the program's funder, the U.S. Department of Health and Health Resources and Services Administration (HRSA), HIV/AIDS Bureau, at <https://www.hrsa.gov/about/contact>. The Recipient will also notify the HRSA Project Officer assigned to Miami-Dade County.
- When complaints escalate to HRSA, the Recipient will contact the complainant (if requested) and the subrecipient agency.

REPORTING AND DOCUMENTATION

All grievances, decisions, and appeals will be documented and maintained confidentially by the Miami-Dade County Ryan White Program (Recipient) in accordance with applicable regulations and program standards.

Each Contracted Service Provider will maintain a central log and file (see sample, Attachment 5) of all Ryan White Program (Part A, MAI, and EHE) Client Grievances and complaints filed or received:

Central Log:

- Maintain a chronological log of all grievances and complaints.
- Specifically identify if the grievance or complaint was related to “refusal of services.”
- Identify:
 - Date grievance or complaint was file
 - Name of client filing the grievance or complaint
 - Computer Identification System Number (CIS#)
 - Nature of the grievance or complaint
 - Disposition of the grievance or complaint
 - Closure date of the grievance or complaint

Grievance or Complaint File:

- File to include documentation related to each grievance or complaint.
 - Specifically identify if grievance or complaint was related to “refusal of services.”
- Must include **original** documents, including but not limited to all grievance or complaint forms, letters, correspondence, and/or notes by the grievant or complainant, as well as all agency response memos, letters, or other documents concerning process and remedy.

PROSPECTIVE IMPLEMENTATION OF DECISIONS OR SETTLEMENTS

Any decision or settlement reached may involve prospective (future) change. It shall not require reversal of decisions previously made. For example, if a settlement requires changes in the Contract Service Provider’s process, the Contract Service Provider must use the new process going forward but is not required to re-do a prior decision.

DISPUTE PREVENTION AND EARLY RESOLUTION

Miami-Dade County’s Ryan White Program (Part A, MAI, and EHE) recognizes that the best way to deal with grievances is to prevent them and will work with each of its Contracted Service Providers to make reasonable efforts to prevent circumstances or situations within the service delivery processes that could give rise to a complaint or grievance. Regular training (for new hires and annually thereafter; or as programmatic changes occur) at the Recipient and Contracted Service Provider levels is necessary to ensure staff understand and are prepared to follow established policies, processes, and procedures.

CONTACT INFORMATION

For questions about this Client Grievance Policy or to initiate a formal grievance, please contact:

Program Director:

Daniel T. Wall
Assistant Director
Miami-Dade County Office of Management and Budget-Grants Coordination
111 NW 1st Street, 22nd Floor
Miami, FL 33128
305-375-4742
Daniel.Wall@miamidade.gov

And

Designee:

Carla Valle-Schwenk
Ryan White Program Administrator, OMB
Miami-Dade County Office of Management and Budget-Grants Coordination
Ryan White Program
111 NW 1st Street, 22nd Floor
Miami, FL 33128
305-375-3546
Carla.ValleSchwenk@miamidade.gov

Or send an email to:

RyanWhiteProgram@miamidade.gov

NOTE: Contracted Service Providers and clients are advised not to put personal protected health information (PHI) in the subject line or body of the email message, or in any telephone voice message.

REVIEW AND UPDATES

This policy will be reviewed annually to ensure compliance with federal guidelines and effectiveness in grievance resolution.

APPENDICES

- Appendix A: Definitions
- Appendix B: Contract and Monitoring Site Visit wording related to client grievances
- Appendix C: Excerpts from the Miami-Dade County Ryan White Program Service Delivery Manual, Service Definitions, Ryan White Program Client Rights and Responsibilities, and Involuntary Disenrollment of Clients

ATTACHMENTS

- Attachment 1: Client Grievance Policy and Procedures Acknowledgement of Receipt form
- Attachment 2: How to Report a Problem
- Attachment 3a: Client Grievance Form (English)
- Attachment 3b: Client Grievance Form (Spanish) – [TRANSLATION PENDING]
- Attachment 3c: Client Grievance Form (Haitian Creole) – [TRANSLATION PENDING]
- Attachment 4a: Client Grievance Appeal Form (English)
- Attachment 4b: Client Grievance Appeal Form (Spanish) – [TRANSLATION PENDING]
- Attachment 4c: Client Grievance Appeal Form (Haitian Creole) – [TRANSLATION PENDING]
- Attachment 5: Sample Agency Complaint and Grievance Log

REFERENCES

- (1) Miami-Dade County Policies and Procedures
- (2) Miami-Dade County Office of Management and Budget, Grant Coordination/Ryan White Program (OMB) Professional Services Agreement, most current
- (3) Department of Health and Human Services (HHS), Health Resources and Services Administration HIV/AIDS Bureau (HRSA/HAB) National Monitoring Standards, most current
- (4) Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87), as codified at Title XXVI of the Public Health Service Act (Chapter 6A)
- (5) 45 CFR Part 75: Uniform Administrative Requirements, Cost Principles, and Audit Requirement for HHS Awards (federal OMB Uniform Guidance), most current
- (6) HHS Grants Policy Statement, January 1, 2007, as may be amended
- (7) Miami-Dade County OMB Ryan White Program Comprehensive Monitoring Instrument, most current

CONTACT

Department/Division/Unit

Office of Management and Budget/Grants Coordination/Ryan White Program