

**LANCASTER COUNTY DRUG AND ALCOHOL COMMISSION**  
**Complaint / Grievance & Appeal Procedure**

**Individual's Name:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

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**POLICY**

If an individual disagrees with an administrative or financial decision or action made by, or on behalf of, the LCDAC (Lancaster County Drug & Alcohol Commission) and is seeking reconciliation due to the inability to resolve the issue, the individual has a right to file a grievance and/or to file a complaint. The process for filing a grievance and/or a complaint is indicated below.

**FILING A COMPLAINT**

Given that LCDAC has the responsibility to plan, coordinate, programmatically and fiscally manage and implement the delivery of substance use disorder prevention, intervention, and treatment services within Lancaster County, it is imperative that LCDAC remain apprised of any issues, problems, or concerns within this framework. As such, a process is in place for individuals residing in Lancaster County to file a complaint with LCDAC regarding any issues/problems/concerns relevant to any substance use disorder service provider.

**Procedure to file a complaint with LCDAC:**

- LCDAC has a form to document and record any/all issues/problems/concerns experienced by any Lancaster resident relevant to a substance use disorder service provider.
- Residents may contact the LCDAC office directly for staff to complete the document or the document may be completed by the Lancaster County resident & submitted to the LCDAC office.
- The document is designed so that it may be completed by LCDAC staff, the resident experiencing the issue, or by a third party.
- All filed documents will be processed to ensure that follow-up occurs.
- The LCDAC staff will do their due diligence in sharing the outcome of the follow-up process.
- All completed documents will be retained on file at the LCDAC office.

**FILING A GRIEVANCE**

If an individual disagrees with an administrative or financial decision or action made by, or on behalf of, the LCDAC and is seeking reconciliation due to the inability to resolve the issue, the individual has a right to file a grievance.

**The process for filing a grievance is indicated below:**

- All grievances must be in **written format** and submitted to LCDAC Executive Director. Grievances may be submitted for the following reasons:
  - ❖ Denial or termination of services,
  - ❖ Level of care determination,
  - ❖ Length of stay in treatment,
  - ❖ Violation of civil or human rights, and
  - ❖ Breach of confidentiality.

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- In the event an individual grieves a treatment funding decision related to a reduction or termination of services or length of stay in treatment, LCDAC is required to continue funding treatment services at the current level of engagement until the appeal is resolved. This applies to all treatment services, including the provision of Medication Assisted Treatment (MAT).
- **By reading and signing this document, the individual is notified of their rights to:**
  - ❖ File a grievance.
  - ❖ Have access to all documentation pertaining to resolution of a grievance within the confines of state and federal confidentiality regulations.
  - ❖ To be involved in the appeal process and have representation by means of an advocate, attorney, or any other individual chosen by the individual at each level of appeal.

### APPEAL PROCESS

#### ❖ LEVEL I

An individual initiates the grievance process with a written correspondence delivered to the LCDAC Executive Director:

- ❖ A panel made up of LCDAC staff and a supervisory level staff member, none of whom are directly involved in the dispute, will review the grievance, and obtain additional information as necessary.
- ❖ The aggrieved individual has the right to be involved in the process and have representation by means of an advocate, Case Manager, or any other individual chosen by the aggrieved individual.
- ❖ The panel chairperson will render a written decision to the aggrieved individual and DDAP within seven (7) days of receipt of the grievance via the DDAP-approved Grievance and Appeal Reporting Form (DDAP-EFM-1009) on DDAP's website. **NO identifying information** may be included or attached to this form.
- ❖ The panel chairperson will also advise the aggrieved individual of their right to further appeal this decision, if desired, and the process for the next level of appeal.
- ❖ The Case Manager Supervisor will document the grievance proceedings in the file of the aggrieved individual and provide a written report to the Executive Director of LCDAC.
- ❖ Documentation will include, at a minimum:
  - the date of contact,
  - the specific action being appealed,
  - the redress being requested,
  - the response, and
  - the basis for the response.
- ❖ The aggrieved individual has the right to have access to all documentation pertaining to the resolution of the grievance within the confines of state and federal confidentiality regulations.

#### ❖ LEVEL II

If the aggrieved individual wishes to appeal the Level I decision,

- ❖ An appeal to the final level of the grievance procedure must be submitted in writing.
- ❖ The final level of appeal is made to an independent review board or hearing panel that is comprised of an odd number (no less than 3) of members who have no financial, occupational, or contractual agreements with LCDAC.

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- ❖ This review panel is comprised of members from:
  - Lancaster County Children & Youth Social Services Agency,
  - Lancaster County BHDS (Behavioral Health & Developmental Services), and
  - Lancaster County Office of Aging.
- ❖ The aggrieved individual will be required to sign a consent form to permit confidential information relating to the appeal to be released to the independent review board for the purpose of rendering a decision on the appeal.
- ❖ The aggrieved individual has the right to be involved in the process and have representation by means of an advocate, Case Manager, or any other individual chosen by the aggrieved individual.

**This grievance committee will:**

- Review documentation and conduct a grievance meeting with all parties involved, such as the client, Case Manager, Case Management Supervisor, and any other persons who can provide information regarding the grievance.
- Render a decision in writing within seven (7) days of the receipt of the Level II grievance.
- Ensure all parties will adhere to the decision made by the Level II grievance committee.

**The LCDAC Executive Director will:**

- ❖ Notify the aggrieved individual and DDAP of the outcome within seven (7) days.
  - Notification is to be executed using the DDAP approved Grievance and Appeal Reporting Form, which is published on DDAP’s website (**www.ddap.pa.gov**). No individual-identifying information is to be included or attached to this form.
- ❖ Inform the aggrieved individual has the right to have access to all documentation pertaining to the resolution of the grievance within the confines of state and federal confidentiality regulations.

**RECORDS**

LCDAC will maintain a record of all grievances received which will include, yet not be limited to, dates, actions taken, and resolution and shall adhere to record retention requirements set forth by DDAP.

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**Your signature below certifies the following:**

- ❖ This Complaint/Grievance and Appeal Procedure has been read and/or discussed with you.
- ❖ You understand this process.
- ❖ A copy of this process has been offered to you.

\_\_\_\_\_  
Individual’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

Check appropriate box:  I have accepted a copy of this document     I have declined a copy of this document