



Family Support & Resource Center
101 Nob Hill Rd. Suite 201
Madison, WI 53713
608/237-7630
www.fsrcdane.org

COMPLAINT & GRIEVANCE PROCEDURE

If you have a complaint about any decision or action of the Family Support & Resource Center or its individual staff members, we encourage you to bring your complaint to our attention and to use our complaint/grievance procedure.

Informal Complaint Process

1. The complaint procedure starts with an informal discussion between the parties involved. There is no time limit for this step, but we encourage you to bring up the matter as quickly as possible with the staff person most immediately involved and/or his or her supervisor.
2. If you are not satisfied with the outcome of this discussion, you should write down your complaint. Call 237-7630 if you want to use a complaint form. Send your written complaint within 10 days to the Director of the Family Support & Resource Center:

Heidi Rossiter, Executive Director
Family Support & Resource Center
101 Nob Hill Rd. Suite 201
Madison, WI 53713
237-7630

The Director of the Family Support & Resource Center is also the Equal Opportunity Coordinator. Complaints of discrimination based on age, race, color, disability, gender, religion or other protected status should also be addressed to her.

The Director will investigate the complaint and complete a written report, including scope of investigation, facts which support or refute the complaint, the decision, as well as notice pertaining to your rights and obligations for appeal, within 7 days. You will receive a copy of this decision.

3. Throughout this process, you should know:

- ⇒ It is the Family Support & Resource Center's responsibility to furnish qualified translators for persons with limited ability to read, speak, or understand English, and interpreters for persons with communication impairments during any phase of the complaint process.
- ⇒ You or any other person acting on your behalf, may use the complaint procedure.
- ⇒ You may be assisted in making your complaint by friends, family members or advocates.
- ⇒ People who file complaints, who are witnesses or testify, who investigate or decide about complaints, are protected from retaliation for their actions.

Formal Complaint Process

You have the right to file a formal complaint without using our informal process or as an appeal to our informal complaint decision.

Depending on the issue and the government agency which provides funds for the program, you may file a formal complaint:

1. **Dane County Department of Human Services** will investigate all complaints including violation of your rights under Chapter 51 of the Wisconsin Statutes. Within 15 days of receiving a written decision from the Director of Family Support & Resource Center, you may appeal to the Administrator of the Adult Community Services Division, Dane County Department of Human Services. The Administrator of the Division or the appointed designee will hold a hearing within 15 days with copies of written materials sent to the office of the Director of Human Services. After the hearing, a written decision will be issued within 15 days, or you may choose not to have the hearing and to file the complaint with the Director of the Dane County Department of Human Services.
2. For **Medicaid Home and Community-Based Waiver** participants, you may request a fair hearing by writing to the Wisconsin Division of Hearings and Appeals, 5005 University Ave, Suite 201, Madison, WI 53705-5400 no later than 45 days from the end date for waiver services.
3. For **Family Support Program** participants, you may file a request for a fair hearing with the Department of Health and Social Services, Office of Administrative Hearings, within 90 days of being denied eligibility for Family Support or reduction or termination of your Family Support services. Call 266-3096.
4. Complaints of discrimination on the basis of age, race, color, disability, gender or other protected status, may be filed with the **Wisconsin Department of Health and Human Services, Affirmative Action/Civil Rights Compliance Officer** (266-5863) or the **U.S. Department of Health and Social Services, Office for Civil Rights** (312-886-2359) within 180 days of the discriminatory incident.
5. Complaints regarding denial of accommodation or perceived discrimination due to a disability may be filed with the **Dane County Americans with Disabilities Act Coordinator** (267-1520) within 60 days of the event or incident.

Grievance procedures are in addition to, and do not limit your right to pursue other remedies under the law, including the courts.

For more information about your rights, you may call the Disability Rights Wisconsin at 267-0214.

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