



MY SISTERS' PLACE
One Water Street, 3rd floor
White Plains, NY 10601

CLIENT GRIEVANCES

My Sisters' Place (MSP) seeks to deliver quality client services. We encourage clients with any concerns to bring them to the attention of a staff person or the program supervisor. If you are unable to resolve your concerns to your satisfaction, you may always ask to speak to a Director or Chief Program Officer (with regard to concerns related to counseling, shelter, support groups, or children's services) or to the Director of the Center for Legal Services (with regard to concerns related to legal services). If, after speaking to these managers, your concerns have not been resolved to your satisfaction, MSP offers a formal grievance procedure.

A "Grievance" is the method for a client to make a formal, written complaint regarding MSP's client services. A Grievance triggers an internal inquiry and corrective action, if necessary, by MSP's senior management. MSP policy prohibits discrimination against clients due to race, color, age, religion, sex, sexual orientation, gender identity, disability, national origin or immigration status. It should be understood, however, that MSP can only provide services that are permitted under state and federal laws, rules, and/or regulations.

MSP will not retaliate against a client who, in good faith, raises a concern or makes a Grievance about an MSP activity, policy, practice, or action of one or more of its staff.

PROCESS

1. Complete the Client Grievance Form. Please be as specific as possible (e.g., include the name of the MSP staff you dealt with, the dates of any incidents, etc.) and include copies of any documents relevant to your complaint. You may ask an MSP staff member or supervisor for help in completing the form, but this is not necessary.
2. Seal your Grievance in an envelope and mail or deliver it to:

My Sisters' Place
1 Water Street
White Plains, NY 10601
Attention: Chief Executive Officer
3. The Chief Executive Officer will send you a letter acknowledging receipt of your Grievance and will then facilitate an appropriate inquiry, including questioning relevant staff and witnesses, reviewing relevant documents and consulting with program supervisors and directors. As part of this inquiry, you may be contacted for additional information.
4. Within 30 days of receiving your Grievance, the Chief Executive Officer (CEO) will issue MSP's written decision and corrective action, if any, regarding your Grievance.

5. If you are not satisfied with MSP's written decision and corrective action, you may appeal this decision, either on the attached form or in a letter of your own format. Any such appeal must be in writing. This appeal will be reviewed by MSP's Chief Executive Officer and the chairperson(s) of MSP's Board of Directors. Within 30 days of receiving your written appeal, these parties will issue a written decision, either upholding the original decision or outlining additional corrective actions that will be taken regarding your Grievance. This decision is final.



MY SISTERS' PLACE
One Water Street, 3rd floor
White Plains, NY 10601

CLIENT GRIEVANCE FORM

Today's Date: _____

Name: (print) _____

Address: _____

Telephone: _____ (is it safe to call you here? Yes or No)
(safe times to call: _____)

Name of MSP Staff involved (if known): _____

MSP Program involved (if known): _____

Date(s) of incident(s) (if known): _____

Please describe your Grievance: (Please attach additional pages if needed)

Did you discuss your concern with an MSP Supervisor? YES NO

Name of MSP Supervisor: _____

If YES, please describe the MSP Supervisor's response.

(Please attach additional pages if needed)

How would you like MSP to respond to your concern?

(Please attach additional pages if needed)

Seal your Grievance in an envelope and mail or deliver it to:

My Sisters' Place
1 Water Street
White Plains, NY 10601
Attention: Chief Executive Officer