

PRIDE IN NORTH CAROLINA, LLC.
231 Commerce St.
Greenville, NC 27858
(252)- 321-8080

GRIEVANCE/APPEAL REPORT

Instructions:

1. This form is to be completed if you have a grievance/concern that you have already addressed with a supervisor which, in your opinion, has not been satisfactorily resolved.
2. Complete Section 1 and forward to the Regional Director. A meeting will be scheduled within 3 business days.
3. The Regional Director will document his/her decision in Section 2.
4. You will sign below the Regional Director findings and indicate if you accept the decision, or would like to appeal it.
5. If you appeal, it will be forwarded to the QAIQI Director who will make a final decision within 5 working days.

Section 1: (to be completed by the individual initiating the grievance)

Your Name

Today's Date

(Circle One) Person Served / Family Member / Guardian / Employee / Other

Address

Telephone Number

E-mail

Please describe your grievance (include dates, people involved, and location):

How was the concern initially addressed? (Please include any actions taken)

Name and Title of **Pride in North Carolina, LLC** supervisor you initially reported your concern to:

Date the concern was initially reported:

What would you like to see happen?

Signature

Date



Section 2: (to be completed by the Regional Director)

Decision made/actions taken by Regional Director:

How can this situation be avoided in the future? (Describe actions to prevent future incidents)

Regional Director Signature

Date

Initial One: I accept the decision: _____ I wish to appeal the decision: _____

Comments: _____

Signature of the Individual who initiated the grievance

Date

Regional Director will fax all appeals to the QAQI Director within 24 hours

Appeal Decision:

Date:
