

GRACE FOR ADDICTIONS

Grace House Grievance Procedure

Controlling revision: October 22, 2026

PURPOSE

Grace For Addictions is committed to treating all participants with dignity, respect, and fairness. This Grievance Procedure provides a formal process for participants to raise concerns, file complaints, and seek resolution when they believe they have been treated unfairly or when house policies have been violated.

You have the right to file a grievance without fear of retaliation.

CORE PRINCIPLES

✓ YOUR RIGHTS:

- **Right to be heard:** Your concerns matter and will be taken seriously
- **Right to fairness:** You will receive an impartial review
- **Right to appeal:** If you disagree with the resolution, you can appeal
- **Right to support:** You may have someone support you through the process
- **Right to protection:** You will not face retaliation for filing a grievance

✓ OUR COMMITMENT:

- We will listen with openness and respect
 - We will investigate thoroughly and fairly
 - We will respond in a timely manner
 - We will maintain confidentiality (within legal limits)
 - We will use grievances to improve our program
-

WHAT IS A GRIEVANCE?

A GRIEVANCE IS A FORMAL COMPLAINT ABOUT:

Treatment by Staff: - Disrespectful or discriminatory treatment - Staff not following program policies - Violation of your rights - Unfair discipline or consequences - Confidentiality breach

Program Policies or Procedures: - Unclear or unfair house rules - Inconsistent enforcement of policies - Accommodation requests denied - Discharge decisions - Financial issues (fees, payment disputes)

Living Conditions: - Safety concerns not addressed - Maintenance or cleanliness issues - Roommate conflicts not resolved - Inadequate food or supplies - Access to services or resources

Conflicts with Other Participants: - Harassment or bullying - Violation of your personal boundaries - Theft of your property - Behavior affecting your recovery

Medication or Treatment Issues: - Medication access denied (including MOUD) - Treatment choice restrictions - Medical needs not accommodated

Discrimination: - Treatment based on race, color, religion, sex, gender identity, sexual orientation, national origin, age, or disability

WHAT IS NOT APPROPRIATE FOR GRIEVANCE PROCEDURE?

These issues should be addressed through other processes:

- **Emergency safety concerns** → Report immediately to staff, call 911 if needed
- **Minor day-to-day issues** → Talk directly with peer coach or House Manager first
- **Disagreement with policies you understood and agreed to** → Discuss with staff, but policies apply to all participants equally
- **Criminal activity** → Report to police
- Abuse of a child or dependent adult → Iowa HHS 24-hour reporting line: 1-800-362-2178. Call 911 for imminent danger. Official source: <https://hhs.iowa.gov/contacts/child-or-dependent-adult-abuse-reporting>

However, if you tried these other processes and the issue is still not resolved, you may file a grievance.

GRIEVANCE PROCESS — HANDBOOK-ALIGNED

Step 1 — Informal Resolution (Within 3 Days)

If you are comfortable doing so, speak directly with the person involved.

Be specific about what occurred, how it affected you, and what resolution you are seeking.

If the concern involves a housemate, a peer mediator can be requested.

Many concerns can be resolved quickly through honest conversation.

Step 2 — Formal Written Grievance (Within 10 Days of Incident)

Complete a Grace House Grievance Form (available from the House Manager or in the resident binder).

Submit the completed form to the House Manager.

You will receive a written acknowledgment within 24 hours confirming receipt.

Your grievance will be reviewed within 5 business days.

Step 3 — House Manager Response (Within 5 Business Days)

The House Manager will investigate the grievance by reviewing the facts and speaking with relevant parties.

A written response will be provided to you within 5 business days of receiving your form.

The response will include findings, any action taken, and the reasoning behind the decision.

Step 4 — Appeal (Within 5 Days of House Manager Response)

If you are not satisfied with the House Manager's response, you may appeal to Grace For Addictions leadership.

Submit a written appeal to thomas@graceforaddictions.org with a copy of your original grievance and the response received.

A final decision will be provided within 10 business days.

FILING OPTIONS AND SUPPORT

Your concern involves the House Manager (file directly with Executive Director)

Option A: Complete Grievance Form - Grievance Forms are available from any staff member, posted in common area, or from Executive Director - You may complete the form yourself or ask staff to help you write it - Staff who help you write it will not read it unless you give permission

Option B: Write a Letter - If you prefer, you can write your grievance in a letter instead of using the form - Include all information listed on the form (see below)

Option C: Anonymous Grievance - You may file anonymously by placing your written grievance in the locked suggestion box - Note: Anonymous grievances are harder to investigate and we cannot respond directly to you

WHAT TO INCLUDE IN YOUR GRIEVANCE:

Required Information: 1. Your name (unless filing anonymously) 2. Date you're filing 3. Description of what happened (who, what, when, where) 4. Why you believe this is unfair or violates policy 5. What resolution you're seeking (what would fix this?) 6. Any attempts

you made to resolve informally 7. Names of witnesses (if any) 8. Your signature (unless anonymous)

Be as specific as possible. The more detail you provide, the better we can investigate.

If you need accommodation (language interpretation, disability accommodation, etc.) to participate in the grievance process, let us know immediately. We will provide it.

During the investigation: - You may be asked for additional information - You will not face retaliation for filing - You should continue following house rules and expectations - Separate you from the person involved if needed for safety/comfort

Confidentiality: The investigation will be kept as confidential as possible, but some information may need to be shared to conduct a fair investigation.

WRITTEN RESPONSE AND APPEAL DETAILS

You will receive a written decision that includes:

FINDINGS:

Summary of your grievance

Summary of investigation

Determination: ☐ Grievance is UPHELD (you were right)
☐ Grievance is PARTIALLY UPHELD (you were partially right)
☐ Grievance is NOT UPHELD (concern not substantiated)

REASONING:

Explanation of why this decision was made

Which policies or facts support the decision

RESOLUTION/ACTION TAKEN:

If upheld: What will be done to address your concern?

Policy change

Staff discipline/retraining

Accommodation provided

Apology

Corrective action

If not upheld: Explanation of why current situation is appropriate

YOUR RIGHT TO APPEAL:

You will be informed of your right to appeal if you disagree

Instructions for how to file an appeal

YOU HAVE THE RIGHT TO APPEAL IF:

You believe the investigation was incomplete or unfair

You have new information that wasn't considered

You believe the decision was wrong

You disagree with the resolution

What to include in your appeal: 1. Copy of original grievance 2. Copy of decision you're appealing 3. Why you disagree with the decision 4. What new information you have (if any) 5. What resolution you're still seeking 6. Your signature and date

You will receive a written final decision that includes:

Summary of your appeal

Final decision: ☐ Appeal GRANTED (original decision overturned)

☐ Appeal DENIED (original decision stands)

☐ Modified decision (partial change)

Reasoning for decision

Actions to be taken (if any)

IF YOU'RE STILL NOT SATISFIED: EXTERNAL RESOURCES

If you have exhausted the internal grievance process and remain unsatisfied, you have the right to file complaints with external agencies:

IOWA HHS RECOVERY HOUSING — INFORMATION AND CERTIFICATION QUESTIONS:

Iowa HHS recovery housing helpdesk: recoveryhousing@hhs.iowa.gov. This is a verified information/certification contact, not represented as a dedicated complaint inbox. Official source: <https://hhs.iowa.gov/media/16668/download?inline=>

CERTIFICATION OR ACCREDITATION COMPLAINT ROUTING:

Ask the House Manager for the current certifying or accrediting organization and its applicable complaint procedure. This document does not claim that Grace House is accredited by MCRSP or any other organization.

IOWA OFFICE OF CIVIL RIGHTS:

Iowa Office of Civil Rights: 515-281-4121 or 1-800-457-4416; 6200 Park Avenue, Suite 100, Des Moines, IA 50321-1270. Official contact information:
<https://icrc.iowa.gov/contacts/contact-iowa-civil-rights-commission>

DISABILITY RIGHTS IOWA:

Disability Rights Iowa: 515-278-2502 or 1-800-779-2502; Relay 711; contact@driowa.org; 606 Walnut Street, Suite 2220, Des Moines, IA 50309. Official contact information:
<https://disabilityrightsowa.org/how-we-help/contact-us/>

LEGAL AID:

Iowa Legal Aid: general contact 1-800-532-1275. Current eligibility and help information:
<https://iowalegalaid.org/get-help/> . The official website provides the current contact route for your circumstances.

PROTECTION FROM RETALIATION

YOU WILL NOT BE PUNISHED FOR FILING A GRIEVANCE

Retaliation includes: - Immediate discharge after filing grievance (unless safety issue unrelated to grievance) - Increased discipline or scrutiny - Harassment or intimidation - Denial of services or privileges - Negative comments or gossip about you filing - Pressure to withdraw your grievance

If you experience retaliation: - Document what happened - Report immediately to Executive Director (or Board Chair if ED is involved) - File a separate grievance about retaliation

Retaliation is a serious policy violation and will result in staff discipline up to and including termination.

GRIEVANCE TRACKING & CONFIDENTIALITY

CONFIDENTIALITY:

Who has access to grievance records: - House Manager - Grace For Addictions leadership handling an appeal - Investigator assigned to the grievance - Staff directly involved in the grievance - Legal counsel (if needed)

Your grievance will NOT be: - Discussed with other participants - Posted publicly - Shared with people not involved in investigation - Used against you in your participant file (unless relevant to discharge for cause)

DOCUMENTATION:

All grievances are documented and tracked for: - Ensuring timely response - Identifying patterns or systemic issues - Program improvement - Accountability

Records are kept for: 7 years in secure, confidential files

SPECIAL SITUATIONS

IF YOU'RE DISCHARGED BEFORE GRIEVANCE IS RESOLVED:

- Your grievance will still be investigated
- You will still receive a written response
- If upheld, you may be offered opportunity to return to Grace House (if space available)

IF YOU LEAVE VOLUNTARILY BEFORE GRIEVANCE IS RESOLVED:

- You may continue the grievance process
- You will receive written responses at your forwarding address
- If you have no forwarding address, responses will be held for 30 days

IF YOUR GRIEVANCE INVOLVES MULTIPLE PEOPLE:

- You may file together (class grievance) or separately
- Each person's concerns will be addressed
- Resolution may be different for each person depending on individual circumstances

IF YOU NEED HELP FILING:

- Any staff member can provide a blank form
 - Family member or friend can help you write it
 - You can ask for assistance from peer coach (they won't read it without your permission)
 - Iowa Legal Aid general contact: 1-800-532-1275; current help information at <https://iowalegalaid.org/get-help/> .
-

GRIEVANCE FORM

Complete this form to file a formal grievance.

YOUR INFORMATION:

Your Name: _____
(Leave blank if filing anonymously)

Date: _____

Room Number: _____

Best way to contact you with updates:

- ☐ In-person meeting
 - ☐ Phone: _____
 - ☐ Email: _____
 - ☐ Written note delivered to me
-

YOUR CONCERN:

1. What is your grievance about? (Check all that apply)

- ☐ Treatment by staff (disrespectful, unfair, discriminatory)
 - ☐ Program policy or procedure (unfair rule, inconsistent enforcement)
 - ☐ Living conditions (safety, maintenance, cleanliness)
 - ☐ Conflict with another participant
 - ☐ Medication or treatment access
 - ☐ Discrimination (race, gender, religion, disability, sexual orientation, etc.)
 - ☐ Financial issue (fees, payment)
 - ☐ Discharge decision
 - ☐ Privacy/confidentiality violation
 - ☐ Other: _____
-

2. Describe what happened. Be as specific as possible.

(Who was involved? What happened? When did it happen? Where did it happen?)

3. Why do you believe this was unfair or wrong?

(Which policy was violated? Why was this treatment inappropriate?)

4. Have you tried to resolve this informally? ☐ Yes ☐ No

If yes, what did you try?

- ☐ Talked to peer coach
- ☐ Talked to House Manager
- ☐ Requested meeting with Executive Director
- ☐ Other: _____

What was the result of these attempts?

5. Were there any witnesses? ☐ Yes ☐ No

If yes, please list their names:

6. What would resolve this concern for you?

(What specific action do you want taken?)

- ☐ Apology
- ☐ Policy change
- ☐ Staff discipline
- ☐ Change in my consequences/discipline
- ☐ Accommodation for my needs
- ☐ Financial adjustment
- ☐ Other: _____

Explain:

7. Is there anything else we should know?

SIGNATURE:

I certify that the information I have provided is true and accurate to the best of my knowledge.

Signature: _____

(Leave blank if filing anonymously)

Date: _____

FOR OFFICE USE ONLY:

Date Received: _____

Received By: _____

Assigned To: _____

Acknowledgment Sent: ☐ Yes — Date: _____

Investigation Complete: ☐ Yes — Date: _____

Decision Sent: ☐ Yes — Date: _____

Appeal Filed: ☐ Yes ☐ No

Final Resolution Date: _____

GRIEVANCE FORM SUBMISSION

Submit completed form to:

House Manager
Grace For Addictions
1311 9th Street
Des Moines, Iowa 50314

Or hand-deliver in sealed envelope marked “Confidential Grievance”

Questions about the grievance process?

Ask any staff member or contact the Executive Director

PROGRAM IMPROVEMENT

Your feedback makes us better.

All grievances are reviewed regularly to identify: - Training needs for staff - Policy clarifications or changes needed - Communication improvements - Service gaps - Systemic issues

Even if your individual grievance is not upheld, your feedback helps us improve for everyone.

Approved By:

_____ Date: _____
Executive Director

_____ Date: _____
Board Chair

Grace For Addictions | Grace House
Grievance Procedure — Controlling revision: October 22, 2026

Your voice matters. Your rights matter. We are committed to listening and responding with fairness and respect.