Policy: To ensure that a mechanism is in place to receive complaints and comments regarding the North Carolina Local Health Department Accreditation (NCLHDA) program and process and that individuals who voice complaints receive an objective review and a timely response.

Purpose: The purpose of this policy is to provide timely and quality resolution to complaints and comments, as appropriate. Complaints and their disposition are to be documented and tracked. Corrective action, as indicated, will be planned and implemented to resolve concerns and complaints. This policy will be a component of the NCLHDA Performance Improvement Plan.

Definitions:

1. Comment – Verbal or written compliments, complaints, concerns, or observations made by local health department employees, state consultants and program personnel, stakeholders, partners and others regarding NCLHDA staff, services, policies, or procedures.
2. Complaint - A verbal or written expression of dissatisfaction with a person, process or program component of the NCLHDA Program.

Responsible Person(s): Accreditation Administrator (AA), State Accreditation Coordinator (SAC), other NCLHDA staff, NCLHDA Board

Procedures:

1. The NCLHDA Board will accept complaints and comments verbally (in person, telephone) or in writing (letter, e-mail, other) from any individual.
2. People who do not want to give their name may express complaints and concerns but follow-up action cannot be taken without a name and contact information for the complainant.
3. Any staff member may receive complaints and comments.
4. All complaints will be documented on or attached to and tracked through a Complaint and Resolution Form (Attachment 1).
5. Staff receiving complaint should assist in resolving and/or reporting the complaint when appropriate. Any complaint that is not readily resolved should be directed to the AA. All actions will be documented and forwarded to the AA.
6. The AA will sign off on the Complaint and Resolution Form and will inform complainant of resolution by email, by letter, in person or by phone.
7. On completion date, forms are to be retained by the AA for review and performance improvement.
8. Should corrective action be necessary, the AA will coordinate, along with staff and the NCLHDA Board, the plan to be implemented. Follow-up will be at least monthly until the plan is implemented.
9. All comments and complaints that do not have direct Board involvement will be reported to the Board annually.

**Reference Plans and Policies:**

Attachment 1 – Complaint and Resolution Form  
Performance Improvement Plan