

Complaint Review

Purpose: Ohio Recovery Housing (ORH) is dedicated to listening to operators, stakeholders, and community members. The purpose of this procedure is to allow those with Complaints to contact ORH, explain their Complaints and have their Complaints addressed.

ORH also seeks to ensure that all ORH certified homes are meeting national quality standards.

If a Complaint is raised that a certified associate may not be meeting one or more of the quality standards, ORH will review the matter carefully to verify that National Quality Standards are being met.

Important Note: If at any point in this process ORH becomes aware of a serious health or safety risk, appropriate authorities will be contacted immediately.

- I. Process: Anyone can contact ORH with a Complaint about recovery housing. This includes a resident, a family member of a resident or a community member.
 - a. ORH will maintain a website that explains the Complaint review process as well as an online form to submit Complaints.
 - b. Any individuals who contact ORH via phone or email with a Complaint will be directed to the online form and will be provided with any assistance in completing the online form. This may include completing the form over the phone with an individual who needs assistance and recording appropriate agreements verbally.
 - c. If staff have not already spoken to the individual bringing the Complaint – they will contact the individual filing the Complaint within 10 business days.
 - d. The staff will verify that the information contained on the form is correct and explain the Complaint review process. The staff will confirm that the individual would like ORH to continue with the Complaint review
 - e. If staff are unable to get in touch with the person who submitted the Complaint after making a good faith effort to communicate with them, ORH will not engage in a formal Complaint review.
- II. Determining if Complaints can be formally Reviewed
 - a. ORH will review the information provided and determine if ORH is able to review the Complaint.
 - b. ORH can only review Complaints related to organizations that are certified by ORH

- i. If an organization is chartered by Oxford House, ORH will provide the person bringing the Complaint with the contact information for Oxford House as well as submit the Complaint to Oxford House via the Oxford House website.
- ii. If the dwelling is licensed by the Ohio Department of Rehabilitation and Corrections (ODRC) as a halfway house, the person bringing the Complaint will be provided the contact information for ODRC.
- iii. If an organization is not chartered by Oxford House, licensed by ODRC or certified by ORH, ORH will make a good faith effort to reach out to the operator to offer technical assistance. Starting January 1, 2025, ORH will also provide information on the uncertified property to the Ohio Department of Mental Health and Addiction Services (OhioMHAS) and follow any instruction provided by OhioMHAS.
 - 1. ORH will make a good faith effort to communicate with the operator of the recovery home given the information provided. In some circumstances phone numbers, emails or other details may not be available, in these circumstances, it may not be possible for ORH to make contact with the operator.
 - 2. If the operator submits an application, ORH will review the application according to the ORH Certification Review Process, unless OhioMHAS instructs ORH otherwise.
- c. ORH can only review matters that are related to ORH measures of the NARR standards.
 - i. If the matter involves an issue outside of the ORH measures of the NARR standards ORH will provide information and resources to the individual on where the matter can be appropriately reported and investigated.
 - ii. ORH can only review matters that have taken place in the last six months.
 - iii. ORH can not accept anonymous Complaints
 - iv. ORH must be able to contact the person to follow up with them and ask any additional questions.
 - v. Whenever possible, ORH will keep the name of the person confidential.
 - vi. The person must also be aware that ORH may need to share their name to collect appropriate documentation and evidence to review the Complaint. Additionally, due to the nature of the Complaint, the

operator involved may discover the name of the person, even if ORH does not share it directly

- vii. ORH can not review matters that are specific to an individual resident's experience if that resident does not agree to have the matter reviewed.
 - viii. ORH will not review matters that are resident specific if the specific resident does not agree to have the matter reviewed.
 - ix. If the matter involves multiple residents, only one resident needs to agree to have the matter reviewed.
 - x. If the matter does not involve specific residents, but is organization-wide or property specific, ORH may review the matter.
 - xi. In cases where it is not possible to gain permission from the resident involved ORH may obtain appropriate permission from the resident's family member.
- d. ORH can not review matters that require consent to view personally identifiable information if ORH is unable to obtain consent to view such information.
- i. If the matter would require ORH to collect or view documents with personally identifiable resident information ORH must be able to obtain appropriate consent. If it is not possible for ORH to obtain consent, or the resident does not consent, ORH will be unable to review the matter.
 - ii. If the resident is unable to legally consent, ORH will make a good faith effort to get consent from the appropriate person or entity who can legally provide consent.
 - iii. If the matter does not require ORH to request, collect or view documentation with personally identifiable information, ORH will be able to review the matter.
- e. Handling of Personally Identifiable Information
- i. ORH will collect appropriate consent as required by law to view such documentation.
 - ii. All records containing personally identifiable information may only be shared and viewed through appropriately secure platforms.
- f. If the Matter is determined unable to be reviewed by ORH
- i. ORH will inform the person bringing the Complaint of the reasons why ORH is unable to review the matter.
 - ii. ORH will provide information and resources on any entity that is more appropriate to review the matter, if such an entity is known to ORH.

- III. Conducting a Formal Review
 - a. The organization will be notified that a Complaint has been received. The notice will include the appropriate details of the Complaint, a request for any evidence showing compliance with quality standards as it relates to the Complaint and/or notification of an onsite visit.
 - b. ORH will make a good faith effort to receive a response from the operator.
 - c. The operator will have five business days to respond to the request
- IV. Operator Response to Complaint Review
 - a. If The operator does not respond to communications from ORH within five business days
 - i. The ORH Executive Director or their designee will make a Recommendation to the business affairs committee based on the information that is available.
 - b. The operator provides a response:
 - i. It is the operator's responsibility to provide an appropriate response that includes answers to all of the questions asked by the ORH reviewers, as well as all of the requested documentation. The operator may reach out to reviewers to ask questions about what is expected in order to ensure a complete response is provided.
 - ii. ORH Will review the response and any evidence provided. ORH staff will consider any response that is submitted. They will decide the following
 - 1. The organization is following the quality standards
 - a. The evaluation will be recorded
 - b. No further action will be needed
 - 2. OR the organization is not implementing quality standards.
 - a. ORH will determine if it is appropriate to engage in a quality improvement plan See Appropriate section on approving quality improvement plans.
 - b. If the organization is eligible to implement a quality improvement plan ORH will follow the process listed in the Quality Improvement Plan Implementation Section.
 - 3. If ORH determines that the organization is not eligible to engage in a quality improvement plan ORH will make a recommendation concerning the organization's certification to the ORH Business Affairs Committee.
- V. Quality Improvement Plan Determination

- a. The ORH staff will consider the following factors when determining if the organization is eligible to participate in a quality improvement plan as a result of a Complaint
 - b. Total number of Complaints that have been received, reviewed, and determined that the organization was not currently meeting quality standards in the past twenty-four months
 - i. If the organization has had three or more substantiated Complaints the ORH board of directors will review the complaints and determine if there are further systemic issues that need to be addressed and address each circumstance on an individual level.
 - c. The ability to implement the quality improvement plan within three months
 - i. If it is not possible for the organization to implement the quality plan within three months, then the organization will not be eligible to participate in a quality improvement plan.
 - d. The review reveals a severe threat to the health or safety of residents of the recovery home.
 - i. If the results of the review revealed that residents of the recovery home or others in the community are at a severe risk of harm to health or safety, the organization will not be eligible to participate in a quality improvement plan
 - e. The Complaint involves submission of falsified documentation, verified misrepresentation of the organization's certification status or other purposeful deception
 - i. If an organization is found to have submitted false documents, misrepresented their certification, or other purposeful deception, the organization is not eligible for a quality improvement plan.
- VI. Implementation of the quality improvement plan
- a. ORH will present a quality improvement plan to the operator that contains specific action steps and deadlines in which action steps need to be taken.
 - b. Organization will accept and agree to implement the plan.
 - i. If the organization does not implement the appropriate steps within the time frame provided, or refuses to accept the plan, then the organization is considered to have lapsed on their quality improvement plan
 - ii. If the organization lapses in their quality improvement plan, ORH will recommend removal of certification to the ORH Business Affairs Committee

- c. The organization is permitted to request an extension for any of the timelines contained in the quality improvement plan. All extension requests must be submitted prior to the deadline. The request must include the reason for the extension request and the amount of time needed.
 - i. The Executive Director may approve extensions up to 60 days.
 - ii. Extensions requests over 60 days must be approved by the ORH Vice-President
 - iii. Total extensions requests may not exceed 120 days
 - iv. Extensions may only be granted for unforeseen and/or emergency circumstances.
 - v. ORH may request documentation as evidence supporting the request for the extension
- d. Once the quality improvement plan is considered concluded sufficiently, the organization will automatically maintain certification and no further action is needed
- e. Ineligibility to Implement a quality Improvement Plan
- f. If an organization is not eligible for a quality improvement plan, the business affairs committee will consider the matter based on the information that is available.

VII. Removal of Certification

- a. If The ORH Business Affairs committee approves removal of certification
- b. The official removal of the certification will occur 14 days after the operator is informed of the decision of the ORH Business Affairs committee.
 - i. The operator may file an appeal in accordance with the ORH appeals policy.
- c. The operator may apply for re-certification as a new applicant. Prior to applying, the organization must submit evidence that quality issues have been addressed.
- d. For operators who have had certification removed due to misrepresentation or deception, the individuals who participated in the deception need to no longer be involved in the recovery housing program in order for the organization to reapply for certification.
- e. ORH will consider if the details provided are sufficient and notify the applicant if they are eligible to submit an application for certification. The applicant will complete the same review process as new applicants.

VIII. Designation of Duties

- a. The ORH Executive Director and/or the ORH Board Vice-President may designate another person to fulfill the roles and responsibilities of the ORH Executive director
 - b. If the matter involves the organization operated by the ORH Vice president, the President of the ORH Board will fulfill the duties of the ORH Board Vice President
 - c. If there is conflict of interest with both the Vice-President and Board President the ORH Business Affairs committee will appoint another member of the ORH board of Directors to make determinations.
 - d. Any members of the Business affairs committee with a conflict of interest will recuse themselves from a decision about the organization
- IX. Documentation
- a. All documentation related to the Complaint process will be stored in the individual organization's records.