

**AGENCY NAME
RYAN WHITE PART A**

GRANTEE GRIEVANCE

Grievance Intake Form

Grievances and the Right to File a Grievance: Grievances may be filed with the Phoenix EMA Ryan White Part A program (the “Grantee”) regarding the following::

1. Deviations from the Grantee’s established contracting and awards process (for example, the selection of a particular provider in a manner inconsistent with Maricopa County ’s established procurement process), and
2. Deviations from the established process for any subsequent changes to the selection of contractors or awards.
3. Contracts and awards not consistent with priorities (including any language regarding directives on how best to meet those priorities) and resource allocations made by the Planning Council, and
4. Contract and award changes not consistent with priorities and resource allocations made by the Council.

Eligibility: You are eligible to file a grievance if you are *directly affected* by the outcome of such a deviation. The following entities and individuals may be “affected parties” and eligible to file grievances:

- Providers of HIV-related services that might be eligible to receive Ryan White Part A or Part B funds, including Minority AIDS Initiative (MAI) funds
- The Phoenix EMA HIV Planning Council (for grievances related to areas #3 and #4 above)

Timing: If you wish to file a grievance with the Grantee, this form must be completed, submitted, and received by the Ryan White Part A Administrative Agent’s office within twenty (20) business days of the date of the alleged deviation, or the date the decision was announced. You will be contacted within two (2) business days after receipt of this form by CSPU Staff.

Filing Fee: There is no administrative fee associated with filing this grievance.

Informal Resolution: You are encouraged to consider informal discussion about your concerns prior to filing a grievance. Within ten (10) days after the date of the event or action, you may contact the Part A Grantee representative and request the opportunity to discuss your concerns and seek informal resolution. If you do not reach a resolution acceptable to you, you may still file a formal grievance using this form up to 30 days after the date of the alleged deviation or the announcement of the decision.

Submission: Submit the completed form to the Phoenix EMA Ryan White Part A Office at the address below by mail, electronic mail (with electronic signature), or fax, or bring it to the office during normal working hours. The date of submission is the date the Grievance Intake Form is received by the Grantee representative . The office is located at:

Ryan White Part A Program
Maricopa County
301 W. Jefferson
Phoenix, AZ 85003
Phone: 602-506-5341
FAX: 602-506-6300
EMAIL: connerr001@mail.maricopa.gov

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Name(s) of person(s) filing the Grievance:

Name of Entity on whose behalf the grievance is being filed:

*Check here if you are
filing as an individual*

Address: _____

City: _____ **State:** _____ **Zip code:** _____

Telephone Number: _____ **Cell phone:** _____
(daytime) (optional)

E-mail address: _____ **Fax number:** _____
(optional) (optional)

Indicate ONE preferred method of contacting you:

___ Daytime phone ___ Cell phone ___ E-mail ___ Postal service ___ Other (specify)

What was the date of the alleged deviation from established policy or the date the decision was announced?

Which policy(ies) or procedures do you feel were not followed?

Describe the alleged deviation and how you (entity or individual) were directly affected.
(Add additional pages as needed).

Describe what remedy you seek (Add additional pages as needed).

I attest that the information provided in this form is accurate, that I as an individual or the entity I represent has standing to file a grievance with the Ryan White Part A and Part B Grantee.

Signature of Grievant: _____ **Date:** _____