



WIOA Complaint and Grievance Policy (DRAFT CHANGES)

Purpose

The purpose of this policy is to inform Workforce Innovation and Opportunity Act (WIOA) program participants, staff, and other parties of the procedures for filing a complaint or grievance alleging violations of the WIOA Title I Program and/or other WIOA-related policies and regulations. Complaints or grievances related to the services and activities of the WIOA one-stop operator must adhere to this policy as well.

Audience

WIOA Title I Adult, Dislocated Worker, and Youth participants and staff, the WIOA one-stop operator(s), WIOA one-stop partners, and other parties affected by the local workforce development system are the intended audience for this policy.

Background

The Workforce Innovation and Opportunity Act (WIOA) mandates the development of procedures for filing complaints and grievances submitted by participants and other interested persons affected by, and who allege, violations of the requirements of WIOA Title I and WIOA-related regulations or policies. The Partner4Work WIOA Complaint and Grievance Policy applies to WIOA Title I Adult, Dislocated Worker, and Youth program complaints and complaints regarding WIOA one-stop operator services/activities only. For example, WIOA-enrolled participants may file specific complaints pertaining to a particular service providers' service, activities, case management efforts and ability to provide appropriate WIOA services.

References

WIOA Final Rule 20 CFR § 683.600

WIOA Section 181(c)

Policy

Partner4Work is the appropriate organization of contact when the complaint specifically concerns WIOA Title I Adult, Dislocated Worker, and Youth programs or complaints regarding the WIOA one-stop operator. Each WIOA Title I Adult, Dislocated Worker, and Youth funded service provider, as well as the one-stop operator, must adhere to this policy. Service providers and the one-stop operator must retain documentation on any customer complaints that are received and resolved at the service providers' level, including the contents of the complaint and the resolution. This documentation must be made available to Partner4Work compliance monitors upon request.

This formal complaint process is specifically intended for **violations of WIOA** requirements or significant service delivery concerns for which a resolution is required or requested. For general customer feedback, providers must have other mechanisms in place to collect and respond to this information (e.g., customer feedback survey). Generally, individuals may submit complaints for any of the following reasons:

- **Denial of Services:** Being improperly denied access to WIOA-funded programs, training, or benefits.

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- **Program Eligibility Disputes:** Issues related to eligibility determinations for WIOA services.
- **Service Delivery Concerns:** Allegations of mismanagement, inadequate services, or failure to follow program procedures.
- **Other Violations of WIOA Law or Regulations** – Any action that conflicts with WIOA statutory or regulatory requirements.

When possible, participants, staff, and/or other parties are encouraged to resolve an issue informally at the service provider level prior to filing a formal complaint with Partner4Work. Individuals or organizations interested in filing a complaint with Partner4Work must follow the procedures below.

Step 1: Opportunity to File a Complaint

Individuals or entities seeking to file a written complaint to Partner4Work must complete the Partner4Work Complaint and Grievance Form, which is attached to this policy and available at partner4work.org. This form must be mailed or emailed to the following:

Partner4Work Compliance Manager
650 Smithfield St
Centre City Tower, Suite 2400
Pittsburgh, PA 15222
grievances@partner4work.org

All complaints or grievances must be filed within **180 calendar days** of the alleged violation to be reviewed and considered by Partner4Work.

Step 2: Opportunity for an Informal Resolution

The Partner4Work Compliance Manager will notify the complainant, acknowledging receipt of the complaint, within **5 calendar days** of receiving the complaint.

The Partner4Work Compliance Manager will schedule a meeting with the complainant to occur within **15 calendar days** of receiving the complaint to attempt to reach an informal resolution between the parties. If an informal resolution can be reached, Partner4Work will request a written confirmation from the complainant verifying that they agree to the terms of the resolution. Partner4Work will notify all parties involved in writing that an informal resolution has been reached.

Step 3: Opportunity for a Hearing

If Partner4Work is unable to reach an informal resolution with the complainant, the complainant will be provided the opportunity for a hearing to take place no later than **30 calendar days** after the initial filing date of the complaint.

To ensure bias does not influence the outcome of a hearing, Partner4Work will perform an assessment of qualified staff. Upon conclusion, Partner4Work will appoint an impartial and qualified individual as the Hearing Officer to act as a mediator and attempt to resolve the issue(s) and render an independent decision. The Hearing Officer will

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send out a written notification of the hearing to all parties concerned, stating the date, time and place of the hearing and the issues to be heard.

All parties have the right to be accompanied by an attorney (at their own expense), or other duly authorized representative. All parties have the right to present testimony and to bring witnesses and records.

A written decision will be issued by the Hearing Officer to the complainant and all parties who attended the hearing within **60 calendar days** of the filing of the complaint. The decision will include: 1) a synopsis of the facts, 2) a statement of reasons for the decision, and 3) notification of records. All correspondence will be mailed certified with a return receipt requested.

Step 4: Commonwealth Grievance and Hearing Procedures

If Partner4Work does not provide a written decision within **60 calendar days** of receiving the complaint or either party involved receives a decision determined to be unsatisfactory, either party involved has the right to submit a local level appeal to the Commonwealth of Pennsylvania regarding the complaint in compliance with the Commonwealth of Pennsylvania's established procedures.

Information Requirements

WIOA Title I Adult, Dislocated Worker, and Youth providers and the one-stop operator must make commercially reasonable efforts to ensure participants, staff, WIOA one-stop partners, and other parties affected by the local workforce development system are informed of the content and requirements of this policy. This includes providing information on this policy during program enrollment and displaying the information in this policy at the PA CareerLink® center(s).

Labor Standards Violations

If a collective bargaining agreement covering the parties to the grievance so provides, an individual alleging a labor standards violation may resolve the grievance through binding arbitration.

Important Disclaimers:

- This policy does **not** address the procedures for processing complaints alleging discrimination under WIOA Section 188 Nondiscrimination and Equal Opportunity Regulations, (29 CFR Part 38).
- This policy does not address the procedures for processing complaints for WIOA mandated partner programs outside of WIOA Title I Adult, Dislocated Worker, and Youth programs and the WIOA one-stop operator. Such complaints should be made via the internal processes of those partner organizations/agencies.
- Nothing in this policy precludes a complainant from pursuing a remedy authorized under another federal, state, or local law.

Effective Date: TBD



Complaint and Grievance Form

Full Name: _____

Date of Filing (MM/DD/YYYY): _____

Phone Number: _____

Email: _____

Provider Name: _____

Case Manager (if applicable): _____

Name of the person and/or organization you are filing a complaint/grievance against (if applicable):

Date of Incident, if available (MM/DD/YYYY): _____

The reason for my complaint or grievance is:

I have discussed this complaint or grievance with the following provider staff (please include name of staff person and date discussed):

I received the following response from provider staff:

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My complaint or grievance has not been resolved due to the following:

I believe the best course action to resolve my complaint or grievance would be the following:

SIGNATURE

Print Name: _____

Signature: _____

Date: _____

This form must be submitted by mail or email to the following:

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Centre City Tower, Suite 2400
Pittsburgh, PA 15222
grievances@partner4work.org