GRIEVANCE PROCEDURE FOR RESPONDENT CONTRACTORS TO ACAM’S HOMELESSNESS PREVENTION AND INTERVENTION PROJECTS – ACCOUNTING SERVICES ONLY

Purpose
The purpose of the grievance procedure is to settle any grievance between a Respondent Contractor and Alliance of Community Assistance Ministries, Inc. (ACAM), as quickly as possible to assure an efficient and fair procurement.

Eligibility
A grievance may be filed by any respondent Contractor that claims it has been adversely affected by:

1. The score assigned by the Proposal Review Team.
2. Improper application of procedures.

Procedure for Filing Respondent Contract Grievances
The following steps must be followed in the order given. Time limits shall begin on the first working day after the applicable occurrence, filing, appeal, response, or recommendation. Working days shall not include weekends or national holidays.

Step 1
To be considered, a grievance must be filed in writing with ACAM within 24 hours of preliminary contract award announcement on September 23, 2020. This written grievance should be sent to Susan Young, Compliance and Reporting Specialist at syoung@acamweb.org. ACAM has forty-eight (48) hours from receipt of the grievance form to respond to and resolve the grievance.

Step 2
If the respondent Contractor is not satisfied with the proposed resolution, the respondent Contractor has twenty-four (24) hours to file an appeal with the ACAM Grievance Committee. The Grievance Committee has forty-eight (48) hours to investigate, talk with the grievant, and respond in writing using the official form.

General Provisions
1. The Grievance Forms provided by the Compliance & Reporting Specialist should be used in pursuing a resolution of the grievance.
2. The respondent Contractor may represent itself or be represented by a chosen representative when presenting the Contractor’s grievance.
GRIEVANCE PROCEDURE FOR ACAM—Respondent/Proposer Contractor

Grievance Form

Respondent Contractor: _______________________________________________________

Respondent Representative: _____________________________________________________

Job Title: ________________________

Contractor’s Address: _________________________________________________________

Contractor’s Phone Number: __________________________________________________

We have discussed this complaint with ACAM’s Compliance & Reporting Specialist and received his/her verbal answer on (date) ______________________. Because this answer is unacceptable to us, we wish to file a formal complaint.

**Nature of grievance.** Explain how your Contractor was unfairly treated including names and dates. (Use additional pages if needed.)
A just and fair solution of our grievance is:

We understand that if we wish to further appeal our complaint, we have twenty-four (24) hours from response to submit a grievance form to the next level of appeal. Grievances not appealed timely are considered settled at the previous level.

__________________________________  ____________________________________
Date                                                                            Signature
GRIEVANCE PROCEDURE FOR ACAM --Proposer/Respondent Contractor

Grievance Form Response from ACAM’s Grievance Committee

Respondent Contractor: ________________________________

Respondent Representative: ________________________________

ACAM’s Grievance Committee Response to Respondent Contractor’s Complaint:

Grievances not appealed timely are considered settled at the previous level.

____________________                                            ____________________________________
Date                                                                               Signature