## Virginia Public Guardian Program

#### COMPLAINT PROCESS and FORM

This complaint process may be used only to report **non-urgent** concerns or complaints about a client of the Virginia Public Guardian Program (PGP). The form is not required, but all complaints must be in writing.

Note: Only about 7% of Virginians with a guardian have a *public* guardian. Public guardians are entities under contract with the Department for Aging and Rehabilitative Services (DARS) to operate local public guardian programs. Some also provide private guardianship services. **If the individual is not a client of the Public Guardian Program, DARS has no oversight authority.** 

If you are unsure whether your complaint involves a client of the Public Guardian Program, email <u>publicguardian@dars.virginia.gov</u> before preparing a written complaint.

#### **Submission**

You may submit a written complaint by email, fax, or mail. If you mail the complaint, we recommend that you keep a copy.

DARS will respond within 10 business days of receipt.

**Email:** <u>publicquardian@dars.virginia.gov</u>

**Fax:** 804-662-7663

Mail: DARS Public Guardian Program Director

8004 Franklin Farms Dr

Henrico, VA 23229

**Important:** To report suspected adult abuse, neglect, or exploitation, do not use this form.

You have three options: (1) <u>complete an online report</u>, (2) call 888-832-3858, the 24-hour, toll-free APS hotline, or (3) call the <u>local department of social services</u>.

For more information, visit <a href="https://www.dars.virginia.gov/aps/APSreport.htm">https://www.dars.virginia.gov/aps/APSreport.htm</a>.

For emergency situations, call 911.

### **Virginia Public Guardian Program Complaint**

## **PART 1: Identifying Information**

1.	What is the name of the Public Guardian Pro-	gram client?	
2.	What is the name of the public guardian/public conservator? (Select only one.)		
	☐ Appalachian Agency for Senior Citizens (AASC) Public Guardian & Conservator Program ☐ Alleghany Highlands (AHCSB) Public Guardian Program		
	<ul> <li>□ Arc of Northern Virginia's Public Guardianship of Last Resort Program</li> <li>□ Bridges Public Guardianship Program</li> </ul>		
	☐ Catholic Charities of Eastern Virginia (CCEVA) Public Guardianship Program		
	<ul><li>□ Commonwealth Catholic Charities (CCC) Public Guardian Program</li><li>□ District Three Public Guardian Program</li></ul>		
	☐ Family Service of Roanoke Valley Public Guardian & Conservator Program ☐ Jewish Family Service (JFS) of Tidewater Public Guardian & Conservator Program		
	<ul> <li>☐ Mountain Empire Older Citizens (MEOC) Public Guardian &amp; Conservator Program</li> <li>☐ SPAN Center Public Guardian Program (formerly Senior Connections)</li> </ul>		
3.			
4.			
	Name:	Phone number(s):	
	Email address:	Mailing address:	
	If you are making this complaint in your professional capacity:		
	Title:	Employer:	
	Supervisor's name:	Supervisor's phone number:	
Pa	rt 2: Complaint Details		

Describe your concerns below. Please include dates, locations, the names of those involved, and their relationship to the Public Guardian Program client. You may attach additional pages or documents if necessary, but a brief summary is preferable. DARS staff will contact you within ten days of receipt and will let you know if any additional details are needed.

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# Virginia Public Guardian Program Complaint

Today's Date:	Public Guardian Program client name:

# **Complaint details:**

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