



## INITIAL CUSTOMER COMPLAINT PROCEDURE

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**Effective Date:** October 10, 2011

**Reference:** State Policy #1012 and Local One Stop Guidance 10-04

**PURPOSE:** To ensure customers expressing an initial interest in filing a complaint can be assisted by any partner at WorkSource Central Basin. All WorkSource Center staff will be able to identify the appropriate complaint contacts and refer customers interested in filing a complaint.

### **PROCEDURE:**

- Customers expressing an interest in filing a complaint (alleging a violation of Wagner-Peyser, WIA Title I-B, or Trade Act regulations and /or federal, state or local nondiscrimination laws) to a WorkSource Center staff member will be referred, using existing referral practice i.e. phone and/or in person contact, to one of the Center's Initial Complaint Contacts on site.
- If Initial Complaint Contact is not available staff member may contact a designated back-up person.
- The Initial Complaint Contact meets with the customer to understand the nature of the complaint, inform them of their right to file a complaint, then determines program jurisdiction.
- Initial Complaint Contact notifies the appropriate program manager (s) who then completes the complaint resolution with the customer according to their established program complaint procedures.
- In the event that no Initial Complaint Contact persons are not currently available, the center staff will take the customer's name and phone number, and they will receive a phone call within 24 hours from an Initial Complaint Contact to arrange a meeting or discuss over the phone.
- Note: complaints relating to programs other than Wagner-Peyser, WIA Title I-B, Trade Act, non discrimination, will be directly referred to the program complaint person identified on the flow chart.

Center Operator members have designated two Initial Complaint Contact person(s) and two back-up Complaint Contact person(s),

- Todd Wurl - Employment Security Department (ESD)
- Yolanda Rios – SkillSource (SS)
- Willie Holmes (ESD – backup person)
- Emily Anderson (SS – backup person)

### **TRAINING:**

WorkSource Center staff will be trained on the Center procedures by the One Stop Operator or by respective partner managers and/or supervisors using the following:

- Copy of Initial Customer Complaint LOG 10-04 and State Policy #1012
- Copy of Center Procedures
- Center Flow Chart
- Names of initial contact and back-up persons and phone numbers

WorkSource Center Operator will document staff training via training roster sign in sheet and accompanying materials covered.

# WorkSource Central Basin

## Initial Complaint Procedure Flow

**WorkSource Center staff**  
Refers the customer interested in filing a complaint to the  
Center Initial Complaint Contact(s)



**Center Initial Complaint Contact**

Todd Wurl - (ESD)  
Yolanda Rios – SkillSource (SS)  
Willie Holmes (ESD – backup)  
Emily Anderson (SS – backup)

- Immediately assists customer interested in filing a complaint
- Informs customer of their right to file a complaint
- Determines complaint jurisdiction and refers to appropriate program manager below to continue the process consistent with the specific program’s complaint policy and procedure.



**Equal Opportunity (EO)**

Dave Peterson (local)  
509 663-3091 x228

Kintu Nnambi  
360 725-

**ESD (WP & TA)**

Todd Wurl  
509 766-4107  
or  
Willie Holmes  
509 766-4134

**SkillSource (WIA Title I-B)**

Yolanda Rios  
509 766-6310  
or  
Emily Anderson  
509 766-6315

**DVR**

Kathleen Grignon  
509 766-5571  
or  
Tami Alling  
509 766-5570

**MSFW**

Lorenzo  
509 766-4130  
or  
Greg Gutierrez  
509 766-4104

**OIC**

Jodi Bortz  
509 764-8120

**Job Corps**

Darrell Pantalone  
509 765-0330

**Grant County Integrated Services**

Bernie Warren  
509 764-2657



**INITIAL CUSTOMER COMPLAINT REFERRAL FORM**

PLEASE PRINT ALL INFORMATION

Date/ Time: \_\_\_\_\_

Name of Complainant: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Cell Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Primary Language: \_\_\_\_\_

Referred to (complaint contact's name): \_\_\_\_\_

What is the complaint about? \_\_\_\_\_



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