5703 Lachman Ave NE
Albertville, MN 55301
(763) 284-1877
(763) 205-5834
info@endlessnorthclinic.com
www.endlessnorthclinic.com

Endless North Grievance Form

Purpose

This form allows you to share any concerns, complaints, or feedback about your experience at Endless North Clinic. We take all grievances seriously and will review and respond in a timely and respectful manner. Your care will not be affected in any way by submitting a grievance.

Patient Information

Patient Name _____ Date of Birth _____

Address _____ Phone _____

Details of Grievance

Date of Incident or Concern: _____

Staff or Department Involved (if applicable): _____

Please describe your concern in detail:

_____

_____

_____

_____

Desired Resolution (optional):

_____

_____

Please submit your written grievance to the Quality Assurance department by mail at Attn: Quality Assurance, Box 48 Albertville, MN 5530, email at qualityassurance@endlessnorthclinic.com, or by fax at (763) 205-5834. You may also use the assistance of an advocate outside of Endless North Clinic.

Parent/Guardian Full Name	Parent/Guardian Signature	Date

Relationship to Patient: _____

Minors (Age 16+) Full Name	Minors (Age 16+) Signature	Date

Clinic Use Only

Received by: _____ Date: _____

Follow-up Actions Taken:

_____

_____

Resolution / Outcome: _____

Completed by: _____ Date: _____

Endless North Clinic is committed to resolving grievances promptly and fairly. If you feel your concern has not been addressed, you may contact: **Minnesota Department of Health, Office of Health Facility Complaints** Phone: 651-201-4201 Toll-Free: 1-800-369-7994 Fax: 651-281-9796

Additional Contacts located in Minnesota:

MN Department of Human Services, Licensing Division	PO Box 64242, St. Paul, MN 55164 Phone: 651-431-6500 Fax: 651-431-7673
MN Office of Ombudsman for Mental Health and Developmental Disabilities	121 7th Place East Ste 420, Metro Square Bldg, St. Paul, MN 55101 Phone: 651-757-1800 Fax: 651-797-1950
MN Department of Health, Office of Health Facilities Complaints	PO Box 64975, St. Paul, MN 55164 Phone: 651-201-5000
MN Board of Behavioral Health	335 Randolph Ave, Ste 290, St. Paul, MN 55102 Phone: 651-201-2756 Fax: 651-797-1374 Email: bbht.board@state.mn.us
MN Board of Medical Practice	335 Randolph Ave, Ste 140, St. Paul, MN 55102 Phone: 612-617-2130 Email: medical.board@state.mn.us
MN Board of Nursing	1210 Northland Dr, Ste 120, Mendota Heights, MN 55120 Phone: 651-317-3000 Email: nursing.board@state.mn.us
Office of the Ombudsman for Mental Health and Developmental Disabilities	332 Minnesota Street Ste. W1410, First National Bank Building Saint Paul MN 55101 Phone: 651-757-1800 or 1-800-657-3506 Fax: 651-797-1950 Email: ombudsman.mhdd@state.mn.us