

Client Grievance Policy



OVERVIEW

The UpValley Family Centers strives to offer excellent customer service in delivering our programs and services to the community. Our organizational values and guiding principles include treating others with trust, dignity and respect.

This Grievance Policy outlines what you can do if you feel you were treated unfairly, unprofessionally, or believe your rights have been breached. UVFC has a strict policy prohibiting retaliation in any form against anyone who files a grievance.

Grievance Process:

- **Deal with the matter informally** - A grievance may be dealt with informally by approaching the involved individual about your concern, if you feel comfortable doing so. You may also file a grievance without any discussion and proceed to the next step.
- **Speak with a Program Manager/immediate supervisor:** If you do not feel comfortable speaking directly with the person involved, you may contact the supervising Program Manager via phone at 707-965-5010. The Program Manager will provide you a verbal response within 3 business days after the investigation has been made. If the issue is not resolved to your satisfaction, the Program Manager will forward your concern to the Program Director.
- **Speak to a Program Director** - The Program Director will ask for your name, phone number, address, and specifics about the incident. The Program Director will provide you a response to your concerns verbally and in writing within 7 business days after the investigation has been made.
- **You may appeal to the Executive Director** - If you are not satisfied that your concerns were adequately addressed, you may request the Executive Director to review your complaint. You will be asked to complete the Client Grievance Form. The Executive Director will investigate the case and get back to you in writing within 10 business days. The UVFC Executive Director's decision and recommendations will be final.



Client Grievance Form

This form is to be completed to express a concern regarding the UpValley Family Centers' provision of services. The Executive Director will review this form and get back to you within 10 business days with a final decision. **No retaliation will be made for filing this complaint.**

Client Name: _____ Today's date: _____

Phone Number: _____ Email Address: _____

Address: _____

Date of incident: _____ People involved: _____

Please provide a brief description of the incident:

Have you tried to resolve the conflict? If so, how:

What do you think needs to be done to make things as right as possible?

Client signature: _____