



## **Children's Service Society Client Complaint Policies**

Children's Service Society (CSS) strives to provide excellent customer services to all clients including child care providers and parents. Grievance procedures have been developed to assist clients in resolving problems. Clients will not be subject to intimidation or other negative treatment for initiating a grievance process.

1) Clients should attempt to resolve all grievances informally with the staff member. The formal review process should be used only when a client has not received satisfactory resolution of his/her problem through informal methods.

2) If the grievance cannot be resolved through discussion with the staff member the client should speak with that staff's direct supervisor, or submit a Complaint/Feedback form to:

Children's Service Society  
Attn: Encarni Gallardo  
655 East 4500 South, Suite 200  
Salt Lake City, Utah 84107

3) The CSS Program Director and Executive Director will discuss the grievance and write a Plan of Action to resolve the issue or incident. The Plan of Action will be sent to the client within 30 days of receiving the written grievance. If the client does not respond within 30 days of receiving the Action Plan CSS will consider the incident or issue resolved.

5) If a client is not satisfied with the Plan of Action they may request in writing a meeting or phone call with the agency Executive Director. The client needs to provide an explanation about why the Plan of Action is not satisfactory. If the client does not find an acceptable solution to the problem, the client may look for further assistance outside of the agency.

### **Client's Responsibility**

*Clients should not discuss their grievance with any other CSS staff member. The grievance should only be addressed to the staff member it concerns. If a client attempts to discuss the grievance with another CSS staff member they will be immediately referred to the staff member or their direct supervisor. If a client does not wish to speak with the staff member they have a grievance against or their direct supervisor no other staff member may discuss their grievance with the client.*

# Feedback Form

1. Please use this form to tell us about your experience/complaint.
2. Please, write clearly in dark ink.
3. Please, complete the entire form.
4. Please, make sure you include copies of documents if applicable.

Your Information	
Name	Phone Number
Address	
Please check one	<input type="checkbox"/> Feedback <input type="checkbox"/> Complaint
Name of staff person involved:	Date:
Did you talk to the individual/s involved?	
Briefly describe your experience: <i>(Use reverse side if more space is needed)</i>	

## READ THE FOLLOWING BEFORE SIGNING BELOW

In signing this document I have no objection to the contents of this document being discussed with the person the comments are directed towards. The above experience is true and accurate to the best of my knowledge. I also understand that any false statements will invalidate any complaint.

Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE, ENCLOSE ANY COPIES OF APPLICABLE DOCUMENTS

Return to: Children's Service Society  
Attention: Encarni Gallardo  
655 East 4500 South, Suite 200  
Salt Lake City, UT 84111

Email to : [encarni@cssutah.org](mailto:encarni@cssutah.org) / Phone Number: 801-326-4368 / Fax Number: 801-355-7453 – Attn: Encarni Gallardo

OFFICE USE ONLY Date Received \_\_\_\_\_ Follow-Up Date \_\_\_\_\_