bədaʔčəɬ, Indian Child Welfare
2828 Mission Hill Rd
Tulalip, WA 98272

bədaʔčəɬ Concern/Grievance Review Request

bədaʔčəɬ's policy is to partner with families in support of the shared goal of ensuring the well-being of Tulalip children. We believe that collaboration with families is the most effective way to protect and support the best possible future for our children.

bədaʔčəɬ has established a process for families with an open Child Protective Services (CPS) case, Youth in Need of Care (YINC) dependency, or Guardianship case to share concerns related to specific staff or the services provided.

To submit a concern, please follow these steps:

1. Contact the bədaʔčəɬ's Office Coordinator or Administrative Assistant at (360) 716-3284 to request a paper form, or download the form online at: https://www.tulaliptribes-nsn.gov/Dept/bedachelh

2. Fill out the form completely with as much detail as possible.

3. Return the form by mail or in person to the bədaʔčəɬ Manager/Director. For confidentiality, submit it in a sealed envelope. If you have questions, you can contact the Manager/Director at (360) 716-4059.

Once the form is received:

1. The Manager/Director will review the concern and contact the client to clarify any information.

2. The Manager/Director will investigate the concern and determine appropriate next steps.

3. The Manager/Director will meet with the client to discuss the findings and the response.

4. A follow-up letter will be provided summarizing what was discussed and any actions taken.

5. If the concern is not resolved, the client may request a meeting with the Family Advocacy Executive Director by contacting the Family Advocacy Administrative Assistant at (360) 716-3284.

6. If still unresolved, the client may request to speak with the CEO at (360) 716-4023.

Families with an open CPS or YINC case may also request to meet with the bədaʔčəɬ Advocacy Committee. This is a separate process and provides an opportunity to voice concerns in a different setting.
A Release of Information (ROI) will be required before any case details can be shared with the committee. More information about the bədaʔčəɬ Advocacy Committee can be found at
https://www.tulaliptribes-nsn.gov/Dept/bedachelh

Please note: **This grievance process does not apply to concerns about court orders, motions, or appeals. These must be addressed through your legal advocate and the Court.**

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bədaʔčəɬ Concern/Grievance Form

MUST INCLUDE SIGNATURE & CONTACT INFORMATION TO BE REVIEWED

Please use this form to tell us your concern or grievance regarding an experience you had with bədaʔčəɬ. This form is received by bədaʔčəɬ Manager/Director. All concerns or grievances are reviewed for next steps.

Date: _____ Name: _____

Please describe your concern or grievance in the space below: Please include the date of the event if applicable. Use additional paper if necessary.

Please list the steps you have made with bədaʔčəɬ in the past to address this concern or grievance.
Briefly describe the specific action you are suggesting bədaʔčəɬ take in this matter and / or your desired outcome.

Phone: _____ Email: _____

Signature: _____

Office Use Only

Date Received:	Signature:
Date Reviewed by Director/Manager:	Signature:
Status:	Next Steps: