



Beda?chelh, Indian Child Welfare
2828 Mission Hill Rd
Tulalip, WA 98271

beda?chelh Concern/Grievance Review Request

beda?chelh's Policy is to partner with families in order to work towards the common goal of ensuring the well-being of the children of the Tulalip Tribes. It is beda?chelh's belief that partnering with families is the most effective way to protect and cultivate the best future for the children of the Tulalip Tribes. beda?chelh strives to meet each individual family's needs while balancing the guiding principles of child welfare and the best interest of the child along with Court requirements as outlined in the Juvenile and Family Code under Title 4.05.

beda?chelh has established a process that allows for families with an open Child Protective Services (CPS) case or current Youth In Need of Care (YINC) dependency who have a concern regarding an individual beda?chelh staff member and/or the CPS or YINC dependency process to express these concerns. If you have an open CPS case or YINC Dependency and wish to express a concern, please follow the below steps:

1. Contact the Family Advocacy Administrative Assistant at (360) 716-3284 to obtain a beda?chelh Concern/Grievance Form
2. Fill in all requested information on the Form with as much detail as possible and
3. Return the completed Form, either via mail or in person, to the beda?chelh Manager, for confidentiality purposes, please submit the Form in a sealed envelope.

Once the Form has been received, the following process will be followed:

1. The Lead Social Worker will review the beda?chelh Concern/Grievance Form and contact the client to discuss the concern and clarify any information;
2. The Lead Social Worker will investigate the reported concern/grievance to make a determination on if action is needed and, if so, what steps will be taken to address and remedy the concern/grievance;
3. Once a determination is made, the Lead Social Worker will meet with the client to discuss beda?chelh's reply to the concern/grievance;
4. After discussing beda?chelh's reply to the concern with the client, the Lead Social Worker will provide the client with a follow-up letter going over what was discussed;



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5. If the concern is not resolved with the Lead Social Worker, the client may request a meeting with the beda?chelh Manager and Family Advocacy Executive Director; the client may make this request through the Lead Social Worker or by contacting the Family Advocacy Administrative Assistant at the number listed above; and
6. If the concern has not been resolved through the beda?chelh Manager and Family Advocacy Executive Director, the client may request to speak with the CEO.

To further this Policy, at any time, if families with an open CPS case or YINC Dependency would like to meet with the beda?chelh Advocacy Committee to express their concerns or grievances, they may do so. The beda?chelh Advocacy Committee is a separate process for clients to discuss their concerns and grievances. The client will be required to complete a Release of Information (ROI) for beda?chelh to be able to share information should the client choose to utilize the beda?chelh Advocacy Committee.

Note: This grievance process does not apply to Court Orders on Motions and/or Appeals. These concerns will need to be addressed through the Client's Legal Advocate and the Court.



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Beda?chelh 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 beda?chelh. This form is received by beda?chelh Manager and kept confidential. 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.*



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Beda?chelh Concern/Grievance Form (Continued)

Please list the steps you have made with beda?chelh in the past to address this concern/ grievance.

[Empty space for listing steps taken to address the concern/grievance.]

Briefly describe the specific action you are suggesting beda?chelh take in this matter and / or your desired outcome.

[Empty space for describing suggested actions and desired outcomes.]



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Phone:

Email:

Signature:

Office Use Only

| | |
|---------------------------|-------------|
| Date Received: | Signature: |
| Date Reviewed by Manager: | Signature: |
| Status: | Next Steps: |