

# UNIVERSAL FAMILY CONNECTION INC. (UFC)

DOMESTIC VIOLENCE/VICTIM ASSISTANCE

## GRIEVANCE PROCEDURES

It is our responsibility to inform you, as our client, of the Grievance Procedure to follow should you have a complaint while participating in the Domestic Violence/Victim Assistance counseling program. Every client has the right to file a complaint if one feels one has not been treated fairly or if one suspects a trust and/or rights have not been upheld. The Grievance Procedure to be adhered to in the event of a complaint is as follows:

### STEP 1:

As a participant, you are encouraged to resolve any issues at the counseling site. The complaint is to be brought (this can be done verbally) first to the attention of the Program Coordinator. The Program Coordinator will attempt to informally resolve the concern within five (5) working days. If a solution is unattainable or if the complaint is not satisfied by the resolution offered, you will then be apprized by agency staff as to the next level of appeal.

### STEP II:

If an informed resolution cannot be arranged or is unsatisfactory to you as the complainant, you will be advised to appeal the complaint, in writing, to Executive Director, Audra Rowe, within two (2) days. The agency administrator will review the documentation related to the issue(s) and may request additional information in an effort to provide a speedy and fair resolution to the complaint.

Within four (4) working days from the receipt of the appealed complaint, the agency administrator will provide you, the complainant, with the agency's final written decision of the Grievance and reasons for the decision. If you, the complainant, are not satisfied with this decision, you will be advised to appeal to the:

Office of Affirmative Action Suite 6-100 Department of Children and Family Services State of Illinois 100 West Randolph Street Chicago, IL 60601	Telephone: 1.312.814.6100 TDD: 1.312.814.8783
---	--

By signing below, you will be acknowledging you have been informed of the preceding discussion. After signatures and dates are affixed below, a copy of this one-page document will be provided for your keeping and records. The original will be placed in your file/record.

\_\_\_\_\_  
Client's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff's signature

\_\_\_\_\_  
Date