Foster/Adoptive Parent Grievance Policy

The Foster Care Program recognizes that at times difference of opinions will occur within treatment teams and between foster/adoptive parents and the agency. While it is expected that each member of the foster care staff and each foster/adoptive parent take responsibility for open, direct communication and problem-solving, the following is the procedure for expressing and resolving concerns when routine methods have not been successful.

Grievance Procedures

All clients, minor children and their parents/legal guardians, participants, adoptive parents, and foster parents shall have the right of appeal of grievance arising out of a service delivery practice of Bethany for Children & Families. Appeals must be made in the sequence outlined below.

1. Concerns must first be discussed with Bethany for Children & Families staff member and the supervisor assigned to the case being served. In the event services are provided through a contract with DCFS or DHS, the agency supervisor may consult with DCFS or DHS regarding resolution of the concerns.

2. If the concern cannot be resolved through discussion and the aggrieved party desires to appeal further, the aggrieved party must submit a written statement of the grievance within seven calendar days to the Illinois Child Welfare Division Director, who shall respond in writing within five working days to the aggrieved party.

3. If the aggrieved party is still not in agreement with the written response and desires to appeal further, the aggrieved party must request that the matter be referred to the President of Bethany for Children & Families. The Illinois Child Welfare Division Director shall then submit a written statement of this matter to the President within five working days of this request, including the written statement of the aggrieved party. The President will investigate the matter and give a written statement within five working days.

4. The Bethany for Children & Families Board of Directors must be notified of those grievances that reach the President. The President’s decision is final.

I acknowledge receipt of this grievance policy.

Foster/Adoptive Parent ____________________________ Date ______________

Foster/Adoptive Parent ____________________________ Date ______________

Adoption Specialist ____________________________ Date ______________