

Notice of Grievance Rights - Youth Being Served by Child Welfare Services

The Office of Client Advocacy (OCA) administers a fair, simple, and timely grievance system. Grievances can be filed by, or on behalf of, youth being served by Child Welfare Services (CWS). Policies describing the grievance system are found in OAC 310:678-5-1 through 9.

You have a right to file a grievance, to receive a written response to your grievance, and to appeal if you are not satisfied with the response. You have the right to report allegations of abuse, neglect, and mistreatment. If any person attempts to deny you these rights or causes a problem for you when filing a grievance, contact your local grievance coordinator or call OCA at 405-522-2720.

Who may file a grievance: Any child served by CWS may file a grievance. Grievances may also be filed by anyone interested in the welfare of a child served by CWS, such as a parent, staff, foster parent, or court-appointed special advocate (CASA).

What complaints are considered: You may submit a grievance about any policy, rule, decision, behavior, or action by an Oklahoma Human Services employee or other persons authorized to provide care.

How to file a grievance: You have 45-business days from the date of your problem to file a grievance. This can be done online at www.okfosteryouthmatters.org or in writing, using the Grievance Form (15GR001P or 15GR001E). You may request assistance from the local grievance coordinator in obtaining the form, filling it out, and filing the grievance. Submit the completed form to the local grievance coordinator or by email to oca.grievances@health.ok.gov.

What happens next: You will receive a written response approximately 10-business days after submitting your grievance. Your local grievance coordinator will contact you to discuss the response to your grievance.

Local grievance coordinator name	Phone number	
Signatures		
This notice was explained to:		
	On	
Name	Da	ite
Minor or youth signature	Da	ate
Parent or legal guardian signature	Da	nte
Signature of person completing form Title	Da	ite