



## **CHILD DEVELOPMENT DEPARTMENT**

### **INFORMAL COMPLAINT PROCEDURE**

The purpose of this procedure is to establish a process whereby members of the community, including parents, who have concerns regarding the Head Start program and State-funded early childhood programs in the Sacramento City Unified School District, can have these concerns and/or complaints resolved at the lowest level. The informal complaint procedure is reviewed annually with two parents groups, the Head Start Policy Committee (PC) and the Parent Advisory Committee (PAC) for State programs.

The goal of this procedure is the informal resolution of complaints. It is recognized that complaints and concerns frequently arise out of a lack of communication among parties involved. Thus, many complaints or concerns can be resolved when the interested parties meet informally to discuss the concerns. To that end, a complainant must demonstrate that he/she has attempted to solve his/her concern prior to filing a complaint under this procedure.

#### **Complaint resolution procedure:**

1. Talk to the employee about the concern. See if a resolution can be found that meets your approval.
2. Discuss the problem/concern with the Parent Advisor or another resource staff person (e.g., Social Worker, etc.) and work together with site personnel to find a resolution. If no resolution is found, staff personnel will assist in completing the complaint form and immediately send to the Child Development Department.
3. The Site Coordinator or assigned designee will investigate the complaint by interviewing witnesses, documenting facts and other evidence.
4. A conclusion will be reached and the complaint is sustained (found to be true) or not sustained.
5. A follow-up meeting with all parties involved will be held with the complainant to discuss the findings.
6. If the complainant is dissatisfied with the conclusion, an appeal can be made to the Administrator of the Child Development Department.



## Child Development Department Informal Complaint Form

Date: \_\_\_\_\_

To: Coordinator  
Child Development Department

From: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

You will be contacted within five (5) working days upon receipt of this form in the Child Development Department.

Name of preschool site or name of employee and job location against which charge or complaint is being made:

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Nature of the charge or complaint:

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When did event occur? Date(s): \_\_\_\_\_

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What I have done to resolve this complaint so far:

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Office use only:
Date received