

REGARDING COMPLAINTS AGAINST PARENTING ACT MEDIATORS

Mediators practicing Parenting Act mediation in the State of Nebraska follow the *Nebraska Standards of Practice and Ethics for Family Mediators*. The *Standards* are the basis for behavior and ethical consideration; guiding mediators in their relationships to the parties in disputes, fellow mediators, and the citizens of Nebraska.

If you believe that a mediator or part of the mediation process does not adhere to the *Standards and Ethics*, you may, according to the *Policy for Approval of Parenting Act Mediators*, pursue one or more of the following options to address your grievance:

Option 1: You may request a meeting directly with the mediator to address the grievance,

Option 2: You may request an impartial mediator to assist in resolving the issues, and/or

Option 3: You may complete the grievance on the second page of this form and submit it to the Nebraska Office of Dispute Resolution (ODR).

Please refer to Section III, Part II of the *Policy for Approval of Parenting Act Mediators* for further information on the grievance process. The *Policy* can be found at the following web address:

https://supremecourt.nebraska.gov/sites/default/files/Programs/mediation/Reports/policy_for_approval_of_parenting_act_mediators.pdf

The *Standards of Practice and Ethics for Family Mediators* can be found at the following web address:

https://supremecourt.nebraska.gov/sites/default/files/Programs/mediation/Reports/standards_and_ethics_revised_10-31-08.pdf

Contact Information for

ODR: c/o Program Analyst

Office of Dispute Resolution, State Court Administrator Office
12th Floor State Capitol, P. O. Box 98910
Lincoln, NE 68509

402-471-2911 (phone)
402-471-3071 (fax)
nsc.mediation@nebraska.gov (email)

GRIEVANCE FORM

Upon receipt of your completed form, ODR will then review and investigate “to determine whether the allegations are in violation of this *Policy* or the *Nebraska Standards of Practice and Ethics for Family Mediators*.” ODR will notify the grievant upon receipt of the written grievance.

I. Personal Information

Your Name: _____ Today's Date: _____

Your Name: _____ Today's Date: _____

Your Mailing Address: _____

Your Phone #: _____ Your Email: _____

Mediator's Name: _____

Date(s) of mediation session(s): _____

Signature

Mediator Grievance Form ODR-GR-F-061 Signature _____

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Mediator Grievance Form ODR-GR-F-061
ODR Revised 1/1/2024

Signature
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