Stockton, CA 95202 1212 North California Street Quality Assessment & Performance Improvement Office San Joaquin County Behavioral Health Services

Stamp Postage

Client Rights

- second opinion
- not subject to discrimination or
- before and during the appeal Review your case file or records

inside this form if:

to talk to someone about a problem,

This grievance is not resolved to

your satisfaction.

You need immediate help, or want

Contact one of the Advocates listed

and phone number where you can be

Please include your name, address,

reached or a message can be left for

you about your grievance.

California Department of Social State Fair Hearing Division Services

Telephone: 1-800-952-5253 Or TDD: 1-800-952-8349

appeal process has been completed. to request a State Fair Hearing after the continued while an appeal or State Fair Services will ensure that services are Hearing is pending San Joaquin County Behavioral Health If you have Medi-Cal you have the right

Behavioral Health Services

San Joaquin County

Grievance Form

You have the right to:

Return Address:

- interpreting services language and receive free Request services in your preferred
- Request a change of provider or
- appeal) penalty for filing a grievance or an File a grievance or appeal (you are
- your behalf. Authorize another person to act on
- or writing to: are a Medi-Cal beneficiary by calling Request a State Fair Hearing, if you

To mail this grievance, put a stamp on

it, fold it, and mail it to the address

printed on the other side.

Fold Line

PO Box 944243, Mail Station 19-37 Sacramento, CA 94244-2430

(for Hearing Impaired)

Health Services staff member, who will any San Joaquin County Behavioral preter, you can just give the form to give it to the Quality Assessment & suggestion box in the lobby of any Behavioral Health Services. If you Performance Improvement Office. You may also put this form in the clinic at San Joaquin County San Joaquin County

Behavioral Health Services Grievance Form

Grievance Form English_01/18Pub

Grievance:

ance on this form. ic, you may file a written griev-Behavioral Health Services clinreceive at a San Joaquin County mental health services that you If you are dissatisfied with the

San Joaquin County Behavioral Standard or Expedited Appeal. For those issues, you may file a reduction or denial of services. matter other than changes, Health Services clinic. These forms are available at any A grievance can be about any

	Please write the subject of your grievance below:
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Please leave a number or address where you may be contacted

	Address (optional):	Phone:	Name:	
(Street)				
(City)				•
		Message Phone? Yes		
(State) (ZIP Code)		Yes		
ode)		No		

For reasons of confidentiality, close and fasten with a small piece of clear tape. Add a postage stamp.

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Date:

For more information, you can call a number below:

- + Consumer Support Warm Line (209) 468-3585
- Patient's Rights Advocate (all ages) Telephone: (209) 468-8676 Fax: (209) 468-2399
- Family Advocate (209) 401-6087
- * Consumer Advisory Council (CAC) (209) 468-3498 Consumer Outreach Coordinator
- Parent Partners (Children And Youth Services) (209) 468-2241 or (209) 468-3690
- Southeast Asian Languages
- (Cambodian, Hmong, Khmu, Laotian, and Vietnamese languages) (209) 953-8843
- (209) 468-9393 in Stockton (866) 468-9393 outside of Stockton Problem Resolution Line

1212 North California Street **Behavioral Health Services** Stockton, CA 95202 San Joaquin County

^{*}To mail, fold this form so our return address is visible.

San Joaquin County Behavioral Health Services (SJCBHS) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Español (Spanish)	ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (209) 468-9370.
繁體中文 (Chinese)	注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電(209) 468-9370.
ıĝı	ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា
(Cambodian/Khmer)	(Cambodian/Khmer) ដោយមិនគិតឈ្លួល គឺអាចមានសំរាប់បំរើអ្នក។