

**Yolo County Department of Alcohol, Drug, and Mental Health Services
Client Grievance Form**

You have the right to file a grievance with Yolo County Department of Alcohol, Drug, and Mental Health Services for any dissatisfaction that you might have, except if the dissatisfaction is about receiving a Notice of Action from Yolo County Department of Alcohol, Drug, and Mental Health Services. If you received a Notice of Action and would like to appeal the decision given in the Notice of Action (such as a denial of mental health services), you should not use this form. If you want to appeal or complain about a Notice of Action, please ask a staff person for a Client Appeal Form.

Client Name:	Client ID:
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Mailing Address (so that we may contact you about your grievance)

Street Address:

City:	Zip Code:
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Date that the problem occurred:

Please describe the problem that you would like Yolo County Alcohol, Drug, and Mental Health Services to investigate. Give as much information as you can, including who, what, where, when, and why. You may attach additional pages or write on the back of this form if you need.

When Yolo County Alcohol, Drug, and Mental Health Services receives your completed form, a staff person will stamp it with the date. You will be sent a notice in writing informing you that the Department has received your grievance and is in the process of investigating it. In most cases Yolo County Department of Alcohol, Drug, and Mental Health Services will let you know what the result of your grievance is within 60 days after receiving your grievance. You will receive this result in writing.

For more information about filing a grievance, please read the Yolo County Department of Alcohol, Drug, and Mental Health Services Client Problem Resolution Guide or contact the Quality Management Department at 530-666-8788

Please send the completed form to:
Yolo County Department of Alcohol, Drug, and Mental Health Services
Quality Management Department
137 N Cottonwood St. Suite 2501
Woodland, CA 95695

For Office Use Only

Received by (Staff Signature):