

Client Personal Rights and Complaint Information for AOD Certified/Licensed Programs

Your Personal Rights at an AOD Certified Program

In accordance with Alcohol and/or Other Drug (AOD) Program Certification Standards, the Client Personal Rights include, but are not limited to, the following:

- The right to confidentiality as provided for in HIPAA and Title 42, Code of Federal Regulations, part 2.
- The right to be accorded dignity in contact with staff, volunteers, board members, and other individuals.
- The right to be accorded safe, healthful and comfortable accommodations to meet his or her needs.
- The right to be free from verbal, emotional, physical abuse and/or inappropriate sexual behavior.
- The right to be informed by the program of the procedures to file a grievance or appeal discharge.
- The right to be free from discrimination based on ethnic group identification, religion, age, gender, race, sexual orientation, disability, or the inability to pay for treatment.
- The right to be accorded access to his or her file.

Please note: If you are a **Medi-Cal beneficiary**, you are entitled to additional rights. To review these rights, please refer to the **Drug Medi-Cal Organized Delivery System Beneficiary Handbook** offered to you at the time of admission to the program.

Complaints

If you have concerns or feedback about the services you have received, this information can be communicated by any of the following:

- **Sharing directly with your counselor or the program.** We strongly believe this is the best way to express your concerns. Program staff is here to address your needs and to listen to you. If you are not comfortable talking with your counselor about a concern, you can ask to talk to the Program Manager.
- **Contacting the County's contracted advocacy organizations for grievance/appeal:**
 - For Residential Programs: Jewish Family Services 800-479-2233
 - For Outpatient Programs and Opioid Treatment Providers (OTPs): Consumer Center for Health Education and Advocacy (CCHEA) 877-734-3258
 - Providers shall have posters, brochures, and self-addressed stamped envelopes with grievance/appeal forms. These materials shall be displayed in a prominent public place.

- **Contacting the California Department of Health Care Services (DHCS) directly.** If you wish to file a complaint about a licensed, certified AOD drug service provider OR a registered or certified counselor you can do so via mail, fax or by using the Department of Health Care Services' (DHCS) online complaint form. To mail or fax a complaint, contact:

Department of Health Care Services
Substance Use Disorder Services
PO Box 997413; MS# 2601
Sacramento, CA 95899-7413
Fax number: (916) 440-5094

- To complete the DHCS online complaint form, use this link:
<http://www.dhcs.ca.gov/individuals/Pages/Sud-Complaints.aspx>
- Complaints for Residential Adult Alcoholism or Drug Abuse Recovery or Treatment Facilities may also be made by telephoning the appropriate licensing branch listed below:

SUD Compliance Division:
Toll Free Number: (877) 685-8333

You will not be subject to any discrimination, penalty, sanction or restriction for expressing a complaint by any of the above methods.

Acknowledgement

I have been personally advised and have received a copy of my personal rights and complaint information at the time of my admission to:

(Program Name)

(Client's Printed Name)

(Client's Signature)

(Date)