

## SAN FRANCISCO MENTAL HEALTH PLAN GRIEVANCE PROCESS

For All Clients in Mental Health and Substance Abuse Programs within Community Behavioral Health Services

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You are encouraged to informally resolve your concerns by speaking with the program directly. The **grievance process** is a formal way for you to express any dissatisfaction about your services that is not one of the problems covered by the Appeal and State Fair Hearing processes. You have the option at anytime and without reprisal to use the formal grievance process provided by the San Francisco Mental Health Plan (SFMHP).

### Here are the steps to the SFMHP grievance process:

- You or a representative acting on your behalf may file a grievance, preferably by using the Grievance Form (CBHS 316). Representatives may include, but are not limited to: staff, family members, friends, other clients, trained advocates or legal representatives.
- If your representative is not employed through the SFMHP, confidentiality will be protected by your authorized disclosure and your representative's signed confidentiality agreement.
- You may also seek assistance from Behavioral Health Access Center (415-503-4730) or from the Office of Cultural Competence & Client Relations (415-255-3422).
- You may file a grievance in person, by phone or via US Mail:

#### In person or by phone:

Officer of the Day  
Behavioral Health Access Center (BHAC)  
1380 Howard Street, 1st floor  
San Francisco, CA 94103  
415-503-4730 or 1-800-750-2727  
TDD: 1-888-484-7200

#### Via US Mail:

Grievance Officer  
Office of Quality Management  
1380 Howard Street, 2<sup>nd</sup> Floor  
San Francisco, CA 94103

**-OR-**

postage-paid envelope

- You will receive a written acknowledgement of receipt of your grievance. The Grievance Investigator will make every attempt to contact you. The investigator will not have any prior involvement regarding your issue and will have appropriate clinical expertise if your grievance concerns clinical issues.
- A written decision will be sent to you or your representative within 60 calendar days from the date of receipt. The time frame may be extended up to 14 days if requested by you or if the SFMHP determines an extension to be in your best interest.
- The Grievance Officer (415-255-3632) will provide information on the status of your grievance upon request by you or your representative.