

Hamilton County Mental Health Court Grievance Procedure

Hamilton County Mental Health Court is a Hamilton County government department. Our goal is to provide supportive services that will empower our participants to improve their quality of life and be successful. However, if you have concerns with the services you receive, you have the right to file a grievance.

Grievances are concerns, problems or complaints raised by a client regarding a Hamilton County Mental Health Court team member, Service Providers, or services that are being offered to you through the Hamilton County Mental Health Court programs. Issues that may cause grievances include:

- Issues with services provided directly by Mental Health Court
- Issues with a Mental Health Court team member
- Issues with a Service Provider as part of the Mental Health Court collaborative team.
- Discrimination

If for any reason, you have concerns with the services you receive, you may complete the Client Grievance form (located at the Family Justice Center and Hamilton County Courthouse) and send it to the contact provided below. The information we will need to address your concern will include: Who is involved? What happened? When did the incident occur? Why this issue is considered a grievance? How should it be resolved? It is important to give as much detail as possible to make sure your complaint is taken seriously.

1. If you feel that your complaint is related to discrimination based on race, color, religion, national origin, age, sex, and/or disability, please send your grievance in writing to the following:

Ken Jordan 317 Oak Street, Suite 220 Chattanooga, TN 37403

Upon receipt of the complaint, the Title VI Program Coordinator will determine its jurisdiction, and need for additional information. Title VI Program Coordinator will notify the complainant, in writing, within ten (10) days of receipt of the complaint. In order to be accepted, a complaint must meet the following criteria: a. The complaint must be filed within 180 calendar days of the alleged occurrence or when the alleged discrimination became known to the complainant. b. The allegation(s) must involve a covered basis such as race, color, sex, age, national origin, or disability. c. The allegation(s) must involve a program or activity that receives Federal or State financial assistance. Hamilton County will assume responsibility for investigating complaints against any of its subrecipients.

2. All other grievances should be mailed in writing to the following:

Matthew Naylor – HCMHC Coordinator Mental Health Court 317 Oak St. Chattanooga, TN 3703

You should receive a response within 24 hours of your complaint being received.

3. If you are unsatisfied with the response provided, you can submit an appeal to the Executive Director of Economic and Community Development at the address below. Your appeal will need to be submitted within 24 hours of the event. You should receive a response within 24 hours of your complaint being received:

Alexa LeBoeuf Executive Director of Economic and Community Development 100 Cherokee Blvd Chattanooga, TN 37405

GRIEVANCE FORM

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| Name: |
|--------------------------------|
| Contact Information: |
| Date: |
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| Please detail grievance below: |
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If the complainant feels that Hamilton County Mental Health Court has not resolved the issue, they may file a grievance or complaint with the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS).

East Tennessee Complaint Intake Number: 1-866-777-1250 Middle Tennessee Complaint Intake Number: 1-866-797-9470

Clients can also file a complaint with the Department of Consumer Affairs at:

P.O. Box 20207

Nashville, TN 37202-0207 Telephone: (615) 741-3491

Or online at: https://www.tn.gov/attorneygeneral/working-for-

tennessee/consumer-affairs.html