DATE

CLIENT'S NAME

CLIENT'S ADDRESS

CITY, CA ZIP

Dear CLIENT'S NAME,

According to our records, you have been working with INSERT STAFF NAME at INSERT CLINIC NAME. We are writing to inform you that effective INSERT DATE, INSERT STAFF NAME is no longer working with INSERT AGENCY and/or CLINIC NAME. Additionally, we want to make sure you are informed you do not need to do anything for continued services, as we will assign you to a new provider.

[ ]  Your new provider is INSERT STAFF NAME at INSERT CLINIC NAME.

[ ]  You have not yet been assigned a new provider.

If you wish to speak with INSERT CLINIC NAME to discuss your transfer of care to a new provider, please call INSERT CLINIC PHONE #. You have the ability and right to choose a different available provider at the clinic or can choose to receive services at a different clinic within DBH’s network of providers, if you would like.

DBH would like to offer the following information for your convenience:

* For life threatening emergencies, please call 911.
* Continued care, please call INSERT CLINIC NAME at INSERT CLINIC PHONE #.
* For non-life threatening emergencies, the following resources are available to you:
	+ Department of Behavioral Health (DBH) Community Crisis Response Team (CCRT) for a mobile crisis response seven (7) days a week from 7 a.m. – 10 p.m. at .
	+ Crisis Stabilization Unit (CSU) at .
	+ Crisis Walk-In Clinics (CWIC): Rialto: (909) 421-9495, Victorville (760) 245-8837, Yucca Valley: (855) 365-6558}.

If you need assistance in the transition to a new provider, find another clinic or another available provider in your area please feel free to call the DBH Access Unit twenty-four (24) hours a day, seven (7) days a week at:

* (888) 743-1478
* (888) 743-1481 [TDD]

Please contact INSERT CLINIC NAME if you have any questions regarding this notice at INSERT CLINIC PHONE NUMBER.

Sincerely,

INSERT SUPERVISOR NAME AND SIGNATURE HERE

Mental Health Clinic Supervisor

c: DBH Quality Management

 Your medical record