



**Focus Counseling & Mental Health**  
**1127 N. Kickapoo, Shawnee, OK 74801**  
**405-432-4132**  
**www.focusmhs.com**



**Complaint/Grievance Form**

Person reporting occurrence (optional)

Name of all persons involved:

Physical location of occurrence:

Time of occurrence:

Date of occurrence:

Time Reported:

Date Reported:

Reported To:

Describe complaint/grievance

Suggested resolution

Signature (optional)

Date

*Consumers may seek assistance from an advocate or other appropriate persons as necessary. The contact information for the Oklahoma Department of Mental Health and Substance Abuse is (866) 699-6605 or (405) 521-4256, Advocacy Division, 2401 NW 23rd Street, Suite 82, Oklahoma City, OK 73070.*

<i>For Office Use Only</i>	Date received	
Resolution or Action Taken		
Results of Action Taken		
Similar incident in the past year that would suggest a trend?	Yes	No
Was complainant satisfied with determination?	Yes	No
Explain:		
Focus Signature:	Date:	