ASPIRE Section: 1.J. Rights of Persons Served Subject: Client Bill of Rights, Responsibilities and Complaint Policy	
CARF Ref: ASPIRE- Section 1.J.1,& 3	
Last Review/ Revision: April 2026	Next Review: April 2027
Scope: Persons Served/Clients, Personnel and Other Stakeholders (as applicable)	Page: 1 of 6
Approved By: Amandeep Kaur, Chief Executive Officer	

1. Client Rights

All the persons served at Punjabi Community Health Services (PCHS) have the right to:

a. Access to Information

i. gain access to their records by submitting a *'*Request Form for Access to Personal Health Records' *(attached as Appendix 'A').* Request Form is available with the staff or at the reception desk.

ii. choose the services or programs in which the client participates based on the program orientation package which includes information about program guidelines, care/service plan procedures, costs, rights, and responsibilities.

b. Development of Care/Service Plan

i. ask questions and get answers about services.

ii. designate a person to be present with them during assessments.

iii. be an active participant in all decisions about their care plan or services.

iv. designate a person to participate in the development, evaluation and revision of their care/service plan.

v. discuss their care/service plan with their Case Manager/Worker.

vi. receive services in the appropriate setting - one that provides the most freedom relevant to their care/service plan needs.

vii. have their family involved in their care/service plan.

viii. refuse family participation in their care/service plan if they choose.

ix. based on the care/service plan, receive access or referral to resources related to legal entities for appropriate representation, self help

support services, and advocacy support services, as applicable.

c. Privacy and Confidentiality of Information

i. that all personal health information collected will be kept confidential.
ii. that the information will only be released or obtained after the client has provided written/verbal consent.
iii. that the client may withdraw their consent at any time through a verbal consent or written letter
iv. one to one intervention will be provided in a private setting.

d. Freedom from Abuse

i. be treated with dignity and respect.
ii. not be subjected to verbal, physical, sexual, emotional or financial abuse/exploitation; harsh or unfair conduct.
iii. to be dealt with in a manner that recognizes the client's individuality and is sensitive to and responds to the clients' needs and preferences, including preferences based on ethnic, spiritual, linguistic, familial and cultural factors.

e. Client has the right to

i. receive services in a culturally safe manner.
ii. receive clear and accessible information about services in the language they understand.
iii. receive assistance in co-ordinating their services from the health service provider or Ontario Health Team.
iv. refuse consent to the provision of any service.
v. Refuse/withdraw consent for being involved in any research project, if applicable.
vi. raise concerns or recommend changes in connection with the service provided.

f. Freedom from Financial Exploitation

i. receive a Fee for Service chart, where services are provided at a cost. The Fee for Service chart will be available at the reception.
ii. receive most services which are provided at no cost to the client.

g. Freedom from Retaliation

i. refuse service or care plan.
ii. receive services even if the client has complained against a staff member, and there will be no retaliation against the client.

h. Freedom from Humiliation

i. receive services even if the client has complained against a staff member, and there will be no humiliation against the client.

i. Freedom from Neglect

i. receive services even if the client has complained against a staff member, and therewill be no neglect against the client.

j. Freedom from Discrimination: -

i. Will not be denied services or treated differently based on the race, ethnicity, gender, sexual orientation, age, disability, religion, socioeconomic status or any other protected characteristics

ii. receive services free from discrimination on any other ground of discrimination prohibited the Human Rights Code or the Canadian Charter of Rights and Freedoms.

k. File a formal Complaint

i. make complaints, have them addressed, get a written response within 30 working days.

ii. complain in writing against the staff.

iii. a proper complaint procedure that will be outlined to the client when the complaint is filed.

iv. continue to receive services, and there will be no retaliation, humiliation or neglect against the client because of the complaint filed.

v. be assisted by an advocate of their choice; for example, family, friend, Case Manager, member of a consumer advocacy committee or organization, etc.

2. Client Responsibilities

As a person receiving services at PCHS, the client has the responsibility to:

a. Treat other clients and staff with respect and dignity.
b. In case of cancellation, provide 2 business days' notice.
c. Be on time for appointments.
d. Actively participate with the Case Worker/ Manager/Staff in developing a care/service plan that addresses their needs.

e. Ask questions if the clients do not understand or need more information about any aspect ofthe service they receive at PCHS.
f. Respect PCHS' zero-tolerance for violence, alcohol, substance abuse, smoking and use of weapons on our premises and during PCHS' external activities and events.
g. Inform the PCHS staff as soon as possible if there is a change in address, phone number,emergency contact or health card number.
h. Participate with staff in evaluating the services the clients have received.
i. Provide feedback to help PCHS offer better service to clients.
j. Share their capacity to receive virtual services.

3. Complaint Policy

a. Policy Statement

PCHS is committed to providing excellent service. We recognize that there may be concerns or complaints from time to time, and we believe that our clients and stakeholders have the right to tell us about them. We also believe that the process for resolving concerns and complaints should be timely, fair and respectful.

b. Complaint Procedure

The client should follow the step-by-step directions below to make a complaint and whatto expect during the process. A complaint will not result in retaliation or a barrier to their services.

Step 1: Resolve with Staff Member:

Try to resolve the issue with the PCHS staff members facing problems.

Step 2: Complaint to Staff's Immediate Supervisor:

If a client is not satisfied, they can submit a written complaint addressed to the staff member's immediate Supervisor (via mail, fax, or person). Please ask for the 'Complaint Form'(*attached as Appendix 'B'*) at Reception Desk. The client can also get the name anddesignation of the Supervisor from the Reception Desk.

Mailing address: Punjabi Community Health Services (PCHS),

2980 Drew Road, Unit 241, Mississauga, ON, L4T 0A7
Email address: info@pchs4u.com
Fax Number: 1855-326-7756
In-Person: The client can drop the sealed envelope at the Reception Desk at any of PCHS' office locations. Please address the envelope as 'Complaint Form.'

The client will receive a written response within 30 working days.

Step 3: Complaint to the Executive Team member:

If the client is still unsatisfied with the response from a Supervisor, they can fill and submit the 'Request form for complaining to next level' *(attached as Appendix 'C')* to the Executive Team member of the respective program .

Mailing address: Punjabi Community Health Services (PCHS), 2980 Drew Road, Unit 241, Mississauga, ON, L4T 0A7
Email address:

Amanjit@pchs4u.com (Sahara Support Programs, Mental Health program and Addictions Programs)
Sheena@pchs4u.com (Sahara Caregiver & Respite Program)
Faisal@pchs4u.com (Newcomer Settlement Programs)
Ansjyot@pchs4u.com (Sahara Health Promotion & Prevention Program, Marketing Dept.)
Ekta.choksi@pchs4u.com (Admin and IT dept)

Fax Number: 1855-326-7756
In-Person: The client can drop the sealed envelope at the Reception Desk at any of PCHS' office locations. Please address the envelope as 'Complaint Form.'

The client will receive a written response within 30 working days.

Step 4: Complaint to Chief Executive Officer (CEO):

If the client is still unsatisfied with the response from the Executive Team member, they can fill and submit the 'Request form for

complaining to next level' *(attached as Appendix 'C')* to the CEO.

Mailing address: Punjabi Community Health Services (PCHS), 2980 Drew Road, Unit 241, Mississauga, ON, L4T 0A7
Email address: Amandeep.Kaur@pchs4u.com
Fax Number: 1855-326-7756
In-Person: The client can drop the sealed envelope at the Reception Desk at any of PCHS' office locations. Please address the envelope as 'Complaint Form.'

The client will receive a written response within 30 working days.

Step 5: Complaint to Board Chair and President:

If the client is still unsatisfied with the response from the CEO, they can fill and submit the 'Request form for complaining to next level' *(attached as Appendix 'C')* to the Board Chair and President.

Mailing address: Punjabi Community Health Services (PCHS), 2980 Drew Road, Unit 241, Mississauga, ON, L4T 0A7
Email address: aphagoora@gmail.com
Fax Number: 1855-326-7756
In-Person: The client can drop the sealed envelope at the Reception Desk at any of PCHS' office locations. Please address the envelope as 'Complaint Form.'

The client will receive a written response within 30 working days.

Step 6: Still Unsatisfied?

If the client is still unsatisfied with the response from Board, they are free to seek independent advice at their own cost (outside of PCHS).