Assurance of Confidentiality Statement

This is to assure you as a consumer receiving mental health services through the Los Angeles County Department of Mental Health that the consumer perception survey that you are about to complete is confidential. Your therapist will not see this and your responses will in no way affect your right to services. Because the Department will use the results to improve the quality of services, we are interested in your honest opinions, whether they are positive and/or negative. Thank you for your cooperation and help in improving our services to you.

If you have any issues or concerns that are serious and sensitive, please discuss/report these concerns immediately to the program manager who will assist you!

保密聲明

此聲明是向通過洛杉磯縣心理健康局接受心理健康服務的消費者保證,您即將完成的消費者 體驗問卷調查是完全保密的。您的治療師不會看到這份問卷調查而您的回覆也絕不會影響您 接受服務的權利。我們將使用調查結果來提升服務的品質,無論您的意見是正面或是負面 的,我們關心的是您真誠的意見。感謝您的參與和協助我們提升服務的品質。

如果您有任何嚴重或敏感的問題或疑慮,請立即向部門經理討論/報告這些問題,他們將為您提供協助。