

# **OSPITAL NG PARAÑAQUE**

**ANCILLIARY DIVISION APPROVAL MATRIX** 



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Revision :4.0

Section / Department

LABORATORY SECTION

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Policy Title:

POLICY AND PROCEDURE FOR HANDLING COMPLAINTS/ CLIENT FEEDBACK

Prepared By:

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Darius J. Sebastian, MD,MPH,PHSAE Hospital Administrator Approved by:

Jefferson R. Pagsisihan, MD, MHM Hospital Director

## I. INTRODUCTION

Ospital ng Parañaque1,Laboratory Section works to maintain and enhance its reputation by providing high quality laboratory services. The laboratory understands the value of complaints as it helps to improve in the delivery of quality laboratory services to the satisfaction of its patients.

The Laboratory is committed to be responsive to the needs and concerns of our patients and acts in resolving every complaint as quickly as possible.

This policy has been designed to provide guidance to both our patients and laboratory staff on the manner on how complaints are received and managed. The laboratory is committed for a consistent, fair and impartial handling of complaints.

### II. OBJECTIVE

- a. To be aware of the laboratory complaint receipt and handling processes.
- b. To enable the laboratory staff, understand the complaint handling process
- c. To ensure impartial investigation of complaint with balanced view of all information and evidence
- d. To know the most reasonable steps to actively protect personal information
- e. To ensure that all complaints are considered taking account of individual needs and circumstances.

#### III. COMPLAINT:

Complaint is an expression of dissatisfaction by a patient/client relating to the delivery of laboratory services



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### IV. COMPLAINT CAN BE MADE

If a patient is dissatisfied with the laboratory services, the patient or relative should in the first instance consider speaking directly with the staff. Likewise, complaints can be forwarded to the laboratory:

- By completing the feedback form located at the reception area.
- By putting the complaint in writing

#### V. COMPLAINT INFORMATION AND RECORDING

- a. Name and contact details,
- b. The name of the staff concerned
- c. The nature of the complaint,
- d. Details of any steps you have already taken to resolve the complaint,
- e. Details of conversations you may have had with the staff
- f. Copies of any documentation which supports the complaint.
- g. The person receiving or managing the complaint should provide immediate assistance to mitigate the situation and to avoid further escalation of the problem.

#### VI. INVESTIGATION AND RESOLUTION

a. The laboratory will follow section VI of The Policy on Reporting, Investigation and Analysis of Incidents, Adverse Events and Other Related Processes.

#### VII. COMMENT FEEDBACK

- a. Ospital ng Parañaque, Laboratory Section is committed to resolving complaint issues at the first point of contact. However, this will not be possible in all circumstances, in which case a more formal complaints process will be followed.
- b. The laboratory will immediately acknowledge the receipt of the complaint.
- c. Once the complaint has been received, the laboratory will undertake an initial review of the complaint.



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- d. There may be circumstances during the initial review or investigation of the complaintwherethelaboratoryhastoclarifycertainaspectsincomplaint, the laboratory may request additional documentation. In such circumstances the laboratory will explain the purpose of seeking clarification or additional documentation and provide feedback on the status of the complaint.
- e. Once the complaint has been finalized, the laboratory will advise the client of the findings and any action taken in writing, unless it has been mutually agreed that it can be provided verbally.