## PROCESS TO EXPRESS and FILE A COMPLAINT

It is the mission of this organization to provide care that we would wish for our loved ones and ourselves.

We welcome suggestions and complaints, as well as appreciation. Your feedback is important to help us improve patient care and our environment.

If a complaint is filed, patients, family members, and/or visitors can do so without fear of discrimination, reprisals, or retribution. All complaints will be taken into consideration and processed accordingly without regard to age, race, sex, religion, culture, physical handicap and personal values or beliefs.

We will give you a patient satisfaction survey form immediately following your surgery. We hope you take the time to complete the survey. You can go online to our website <a href="https://www.oscshreveport.com">www.oscshreveport.com</a> and complete a patient satisfaction form at any time.

You may express your concern or complaint at anytime to any staff member, department head or the administrator.

The administrator reviews all complaints and attempts to rectify any issue within 48 hours of the receipt of the complaint. The administrator will contact you with a potential resolution within 48 hours of you expressing a complaint. If the issue is not resolved to your satisfaction, the Governing Body will review the complaint. A representative of the Governing Body will contact you within seven (7) days of the complaint. The administrator has the responsibility to issue a written decision within thirty (30) days of the complaint.

If the issue is not resolved to your satisfaction, you may file a written complaint with:

Louisiana Department of Health and Hospitals Attn: Ambulatory Surgery Division 500 Laurel Street, suite 100 Baton Rouge, LA 70801-1811 Phone: 225-342-0138

Fax: 225-342-5292

And/or you can file a complaint with the Center for Medicare & Medicaid Services at: www.medicare.gov/ombudsmanactivities.asp