



STA. ANA HOSPITAL



I. Mandate:

The Sta. Ana Hospital ensures to provide quality healthcare and treatment to all the people especially those indigent patients

II. Vision:

To become the premiere government hospital in Manila that provides quality cost effective health care.

III. Mission:

We are dedicated to provide quality patient care with unrelenting attention to clinical excellence, commitment and professionalism offered by dignified, compassionate and caring health care providers in partnership with the local government and the community.

IV. Service Pledge:

We, the officials and employees of Sta. Ana Hospital pledge and commit to provide quality healthcare services to the Manileños and to the Filipinos as a whole. With utmost integrity, patience and dedication, we will serve the public wholeheartedly without any hesitation, be kind, prompt and timely attends to every patient's needs. Provide adequate and accurate information. Be consistent and fair in implementing rules and regulations. Ensure appropriate feedback mechanism. Demonstrate sensitivity and appropriate behavior and professionalism. Wear proper uniform and identification. Be available during office hours. Respond to complaints. Treat everyone equally. Observe proper decorum. Abide the code of conduct and ethical standards of public officials and employees. Be transparent. Strictly observe confidentiality in workplace.



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Admitting Section

Releasing of Patient Data Sheet (PDS)



Releasing of Patient Data Sheet (PDS)

Office or Division:		Admitting Section		
Classification:		Simple		
Type of Transaction:		G2C – Government to Citizen		
Who may avail:		Patient (residents and Non-residents of Manila), Beneficiaries covered by the Manila City Ordinance 8344		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. For Patient's admission in ER or Ward	1.1 Interviews patient or his/her relative to accomplish Patient Data Sheet (PDS or Emergency Chart (ER)	1. None	5 minutes	Admitting Clerk/ OIC
	1.2 Encodes the (PDS) draft form slip containing data of the patient provided by himself/herself and/or an immediate relative.		10 minutes	
	1.3 Prepares PDS and availment forms for admission and instruct the patient and/or relative on the next process of admission.		5 minutes	
	1.4 Encodes and updates the patient's room assignment		2 minutes	
2. For Patient's Discharge	2.1 Records the patient account clearance slip for final diagnosis disposition, discharge date and time for discharged patients on the database and on the patients logbook.	2. None	2 minutes	Admitting Clerk



Pharmacy Department

Dispensing of Medicines to OPD, ER AND WARDS



Dispensing of medicines to OPD, ER and WARDS

Office or Division:	Pharmacy Department			
Classification:	Simple			
Type of Transaction:	G2C			
Who may avail:	Patients of Sta. Ana Hospital			
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
OPD				
1. Patient gets a queuing number at OPD waiting area.	1. Pharmacy staff verifies that the patient is a resident of Manila by asking for hospital card.	None	2 minutes	Pharmacist-on-duty
* Patient waits for the number to be called for check-up by Doctor. (doctors are assigned based on specific needs of patients e.g. OB-GYN, Pedia, IM, Optha etc.)	1.1 To avail drugs and medicines for OPD patients, Prescription (Rx) should be in duplicate copy and must have the following details:			
*Once evaluated, doctors may recommend specific test and/or prescribe medication.	Generic name of medicine			
*Patient goes to Pharmacy to check if medicines are available	Signa or instructions			
	Doctors complete name & signature			
	1.2 Rx is then stamped with date and "Pharmacy" as a proof that the medication has been given to patient.			



ER				
1. Patient goes to ER and is assessed by triage nurse.	1. Pharmacy staff verifies that the patient is a resident of Manila by asking for hospital card.	None	2 minutes	Pharmacist-on-duty
* Patient waits for the Doctor assigned to specific needs of patients e.g. (OB-GYN, Pedia, IM, Optha etc.)				
*Once evaluated, doctors may recommend specific test and/or prescribe medication.	1.1 To avail drugs and medicines for ER patients, Rx should be in duplicate copy and must have the following details:			
*Patient goes to Pharmacy to check if medicines are available	Generic name of medicine			
	Signa or instructions			
	Doctors complete name & signature			
	1.2 Rx is then stamped with date and "Pharmacy" as a proof that the medication has been given to patient.			
IN-PATIENT / WARD ADMISSION				
	1. Pharmacy section receives medication orders from ALL wards through a prescription. They may be received at anytime of the day.	None	2 minutes	Pharmacist-on-duty
	.1 Prescription is now transferred to a PDMO (patient medication order form) by the Pharmacist and considers the prescription valid for 7 days unless stated otherwise in the Rx.			



	<p>- A PDMO update can be a new medication, increase dose, decrease dose, shifted IV to oral, etc.</p> <p>1.2 Pharmacist prepares medication that would be used for one day. This is individually labeled for each patient.</p> <p>1.3 Pharmacy Dept makes sure that all medications are prepared no later than 5AM in the morning since most patients will received a dose for 6AM.</p> <p>- Nurse or Nursing assistant receives and check the quantity and correctness of medications on the PDMO. They then signs their name and date/time they received the medicines.</p> <p>1.4 By 6AM every morning, medicines for the day are now on each ward and may now be utilized by the patient.</p>			
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Records Section



1. Medical Certificate with Dry seal – Requested by patient

Office or Division:	Records Section			
Classification:	Simple			
Type of Transaction:	G2C			
Who may avail:	Patient			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the Hospital card and the one valid ID	1. Validate the Hospital card and the valid ID	None	2 to 3 working days	Ms. Sophia Ann Magalona (Records Officer 1)
2. Fill up the request form	2. Give a request form			
3. Submit the filled-up form at the records section. If admitted, Discharge together with Summary/ OR Tech(surgery cases), Birth cert. of the Baby (OB cases)	3. Validate the filled-up form and give a claim stub to the patient			



2. Securing Insurances (SSS, GSIS, etc...) requested by patient

Office or Division:		Records Section		
Classification:		Simple		
Type of Transaction:		G2C		
Who may avail:		Patient		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Forms provided to be filled-up by the attending physician		GSIS, SSS, and any private or government offices the patient is affiliated		
Discharge Summary of the patients				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the Hospital card and the one valid ID	1. Validate the Hospital card and the valid ID	None	2 to 3 working days	Ms. Sophia Ann Magalona (Records Officer 1)
2. Fill up the request form	2. Give a request form			
3. Submit the filled-up form at the records section. If admitted, Discharge together with Summary/ OR Tech(surgery cases), Birth cert. of the Baby (OB cases)	3. Validate the filled-up form and give a claim stub to the patient			



3. Securing Death Certificates (2nd floor Records Section)

Office or Division:		Records Section		
Classification:		Simple		
Type of Transaction:		G2C		
Who may avail:		Relative		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present Valid ID of the expired Patient and valid ID of the claimant (nearest kin) together with the Xerox copies	1. Validate the ID's presented and double check all information given by the claimant written in the medical record	None	20 to 30 minutes	Mr. Arthur Fabilona (Administrative Aide VI)
2. Wait for the issuance of Death certificate	2. Transcribed all information in the 4 copies of Death Cert. and print.			
3. Double check all encoded information in the 4 copies of original death certificate and must be signed by the claimant.	3. If all information is correct release 3 original copies to the claimant			



4. Securing Late Registry Birth Certificates (2nd floor Records Section)

Office or Division:	Records Section			
Classification:	Simple			
Type of Transaction:	G2C			
Who may avail:	Patient			
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE			
Certificate of No Record	PSA –Philippine Statistic Office			
Discharge Summary of Mother and Baby	2 nd floor, Records Section			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Prepare a copy of Discharge Summary of the mother and the baby, with the “No record Certificate from the PSA together with the Xerox copies and submit it to the record section. (must be applied by the mother only)	1. Validate the document presented, if complete, give the Birth Cert. Draft Form to the mother to be filled-up.	None	30 working days	Ms. Maripaz Cano (Admin. Aide VI)
2. Fill up the draft form and submit it to the records staff.	2. Validate the filled-up form and schedule the return of the mother/father for signature.			
3. Wait for the scheduled date of Return for the signature of mother and father	3. Prepare the said Draft Form, Encode and Print 4 original copies of Birth Certificate			
4. Upon claiming on the scheduled date, Present the claim stub and valid ID to the records staff. The 4 original copies of Birth Cert. will be submitted to the City Civil Registry for registration by the parents.	4. Released the 4 original copies to the mother for registration at the City Civil Registry, Manila			



Medical Social Service Unit



Referral to Sta. Ana Hospital or Outsource Services

Office or Division:		Medical Social Service Unit		
Classification:		Simple		
Type of Transaction:		G2C		
Who may avail:		Patients/Clients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1 latest valid ID or document with address in Manila		SAH – Other 5 City Hospitals of Manila		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client goes directly to MSSU	1. Medical Social Worker shall screened client/clients relative referred by SAH	None	95 minutes	Social Worker On Duty Sliding Basis: 1. Liberty P. Basa 2. Don Derek C. Pongerrada 3. Angelita E. Lasat 4. Pauline Joan L. Marifosqui
2. Client presents the Sta. Ana Hospital ward referral letter of concern agency to MSSU.	2. MSW receives and read the SAH ward referral or interagency letter of concern agency.			
3. Client gives the requirements; a valid ID or valid documents.	3. MSW retrieves data if old patient.			
4. Client responded to the interview conducted by the MSSU.	4. MSW conduct interviews/extract data if new patient.			
5. Client sign in the intake interview sheet form of MSSU	5. MSW asked to sign in the Intake Interview Form if new patient.			
6. Client waits for the referral letter of instruction of the MSW on what to do and where to go.	6. MSW coordinate the case to SAH concerns department or concern agency (if resources not available in SAH) a. MSW makes the referral letter (if outside referral) b. MSW instruct client/relative on what to do and where to go.			
7. Client sign in the Referral Registry Logbook of Patients.	7. MSW instructs Social Service staff to log patient in the general registry log book and encode in the computer.			
8. Client goes back to MSSU for feed backing purposes.	8. Request the client/relative to go back to MSSU for feed backing purposes.			



Service Delivery Network/ Referral System

Office or Division:	Medical Social Service Unit			
Classification:	Simple			
Type of Transaction:	G2C			
Who may avail:	Patients/Clients			
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE			
1 latest valid ID or document with address in Manila	SAH – Other 5 City Hospitals of Manila			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client goes directly to MSSU for their request	1. SDN Coordinator screen and receives the referral from MHD, Office of the Mayor (PESO), etc. and 1 valid ID/document presented by the client.	None	2-3minutes	SDN Representative: JO employee - Vanessa B. Montealegre
2. Client presents the referral letter plus 1 valid ID/document to MSSU staff or MSW	2. SDN Coordinator requests the client to log in the General Registry Log book.			
3. Client Register in the General Registry Log Book of the patients	3. SDN Coordinator assists patients with SDN referral to Laboratory and other diagnostic procedures requested.			
4. Client waits for the instruction of Social Delivery Network (SDN) coordinator on where to go and what to do.	4. SDN Coordinator complies results of procedures.			
5. Client of the Office of the Mayor (PESO) submit to SDN coordinator the result of Laboratory Tests and other diagnostic procedures if there is any;	5. SDN Coordinator assists patients in their Physical Examination conducted by attending physician.			



<p>6. Client of the Office of the Mayor (PESO) waits for the reply of text message coming from SDN coordinator outcome of his/her Physical Examination.</p>	<p>6. SDN Coordinator submits all the result of the Physical Examination of the client if he/she is physically fit or if not fit advice by the attending physician to consult other concern department like cardiology, radiology department, etc. and for scheduling.</p>			<p>JO Employee Reliever – Daniella Shein M. Villafranca</p>
<p>7. Clients of MHD with referral letter goes to OPD or ER Section if it's Emergency for medical consultation and other hospital needs.</p>	<p>7. MSW advice client from other 5 City Hospitals with Inter-agency referral letter to go to Director's Office for notation of SAH Hospital Director.</p>			
<p>8. Client from other 5 City Hospital goes directly to MSSU for their medical request but they were advice to seek approval first to SAH Hospital Director's.</p>	<p>8. SDN Coordinator or MSW compiled and encoded in the computer all the list of SDN clients.</p>			
<p>9. Client filled up the Patient Satisfaction Survery form and drop it in the drop box located at the MSSU.</p>	<p>9. SDN Coordinator or MSW request the client to drop in the drop box the filled up Patient Satisfaction Survery form located at the MSSU.</p>			



PhilHealth & Billing Section



Releasing of Philhealth Membership if Active or Inactive

Office or Division:		Philhealth & Billing Section		
Classification:		Simple		
Type of Transaction:		G2C		
Who may avail:		Qualified Philhealth Members (Inpatient/Outpatient – with procedure)		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Verification of membership if active or inactive		Philhealth online portal		
If with discrepancy on member's name/ birthdate		Nearest Philhealth office for updating and printing of MDR (member's data record)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present philhealth identification number or complete name and birthday	1. Verify membership in Philhealth online portal	None	2-5 minutes	Philhealth frontliner staff
2. If with active membership	2. Fill up and sign PMRF (patient membership registration form)	None	10-15 minutes	Philhealth member
3. If inactive (sponsored)	3. Refer to Social Service for sponsorship	None	Within 72 hours after admission	Social Worker
4. If inactive – IPM(Individually Paying Member)	4. Advise patient to secure payment to the nearest Philhealth LHIO	None – just photocopy of Philhealth Official Receipt	Must be secured before patient is discharged.	Philhealth member of Authorized representative
5. If with incomplete contribution (Private member)	5. Updated certificate of contribution and Employer-signes Claim Signature form	None	Must be secured before patient is discharged.	Philhealth member of Authorized representative



Processing of Philhealth Claim Forms

Office or Division:		Philhealth & Billing Section		
Classification:		Simple		
Type of Transaction:		G2C		
Who may avail:		Qualified Philhealth Members (Inpatient/Outpatient – with procedure)		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Certified True Copies of required medical records		Records Section		
Duly signed Claim form 2, Claim Signature Form		Philhealth Frontline (Sta. Ana Hospital)		
Claim Form Signature form (with signature of employer)		Respective member's employer		
If with discrepancy or for updating: Birth Certificate, Marriage Contract		Member		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill up and signing of Philhealth Forms	1. Provide Philhealth Forms	None	10 – 15 minutes	Philhealth Frontliner and Member
2. Upon discharge of Patients	2. Request certified medical records from Record Section	None	1 – 2 weeks	Records Section



Radiology and Laboratory Department



Processing & Release of Result (Laboratory Test)

Office or Division:		Laboratory Department		
Classification:		Simple		
Type of Transaction:		G2C		
Who may avail:		In-Patients and Out-Patient with procedures		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Laboratory Request duly signed by the Admitting Physician.		In- patient- Doctors on Duty/ Nurses/N.A. Out-Patient- Doctors on Duty at the OPD area and Nurses		
Validation of the completeness of the information; otherwise request form needs to be filled up completely by the prescribing doctors.				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Registration	1. Identify the patients request and the procedure needs to be done 1.1 Ensure completeness of data. 1.2 Determine the classification of the patients if Out-patient, ER-patient and In-patient	No charge	2-5 minutes	Receptionist Med-Tech on Duty
Scheduling of the procedure depends on the urgency and types of test.	1. Ascertain if the patients test is either with fasting (Nothing by mouth) or without fasting. 1.1 If OPD- with fasting patients will be scheduled the next morning for blood extraction as priority. (8 to 10 hrs fasting depends on the test required). 1.2 If OPD- procedure may be done the same day. 1.3 If ER cases but with no fasting required, procedure will follow immediately.	No charge	1-2 minutes	Med-Tech on Duty



	<p>1.4 For In-patient no fasting test will be done during warding time.</p> <ul style="list-style-type: none"> o 6:00 AM o 2:00 PM o 6:00 PM o 10:00 PM o 12:00 AM <p>1.5 Encoding to receiving logbook.</p>			
Actual procedure	<p>1. Ask the patient to go inside the reception/extraction area.</p> <p>1.1 If ICU/ER/OR staff will go to the patient and perform the procedure.</p> <p>1.2 Verify patient's identity and the test requested.</p> <p>1.3 Prepare necessary materials for the test.</p> <p>1.4 Hand Hygiene</p> <p>1.5 Collection/Extraction of specimen.</p> <p>1.6 Analyzing and validation of the specimens collected.</p> <p>1.7 Run the specimens to Lab machines if needed.</p> <p>1.8 3 way verification process.</p> <ul style="list-style-type: none"> o Machine to Manual (Human to Human) o Manual to Manual o (1 med tech to other med tech) o Manual to immediate superior. (Med Tech to Chief Med Tech/Section Head) 	No charge	5-10 minutes	Med-tech on duty
Releasing of Result	<p>1. Asking for the releasing receipt from the receiver.</p> <p>1.1 Retrieving and searching for the availability of result (OPD basis)</p> <p>1.2 Result of OPD patient- the following day at the releasing area.</p> <p>1.3 ER patient- as soon as the test is done and verified. Result will be delivered to ER nurse station.</p> <p>1.4 Ward Patient- result will be sent to respective ward station the next warding time after extraction.</p> <p>1.5 Documentation upon receipt of the result by the nurses, nurse attendants, patients and relatives.</p>	No charge	4-5 minutes	Receptionist and Med-Tech on duty.



Processing & Release of Result (Radiology Test))

Office or Division:	Radiology Department			
Classification:	Simple			
Type of Transaction:	G2C			
Who may avail:	In-Patient and Out- Patient with procedure.			
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE			
Radiology Request (X-Ray, Ultrasound and CT-Scan) duly signed by the Admitting Physician.	In- patient- Doctors on Duty/ Nurses/N.A. Out-Patient- Doctors on Duty at the OPD area and Nurses			
Validation of the completeness of the information; otherwise request form needs to be filled up completely by the prescribing doctors.				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Registration	1. Identify the patients request and the procedure needs to be done 1.1 Ensure completeness of data. 1.2 Determine the classification of the patients if Out-patient, ER-patient and In-patient	No charge	2-5 minutes	Receptionist Rad-Tech on Duty
Scheduling of the procedure depends on the urgency and types of test.	1. If OPD- procedure will be scheduled upon availability. 1.1 If ER cases procedure will follow immediately.	No charge	1-2 minutes	Rad-Tech on Duty
	1.2 If ER cases but with special preparation, patient will need to follow instruction first prior to procedure. 1.3 For In-patient with special preparation needed, advise will be given first then scheduled upon availability or the same day. 1.4 Encoding to receiving logbook.			



Actual procedure	<ol style="list-style-type: none"> 1. Ask the patient to go inside the waiting area. <ol style="list-style-type: none"> 1.1 If ICU/ER/OR nursing staff/ nurse attendant will bring the patient down to the x-ray department. 1.2 Verify patient's identity and the test requested. 1.3 Prepare necessary materials for the test/radiation area. 1.4 Hand Hygiene 1.5 Bring the patient inside the radiation area/ CT-Scan room 1.6 Verification of the procedure 1.7 Advice patient when to secure and give them the claim stub of their result. 	No charge	5-10 minutes	Rad-tech on duty
	<ol style="list-style-type: none"> 1.8 If In patient/ ER/ OR/ nurse attendant will get their respective results. 			
Releasing of Result	<ol style="list-style-type: none"> 1. Asking for the releasing receipt from the receiver. 			
	<ol style="list-style-type: none"> 1.1 Retrieving and searching for the availability of result (OPD basis) 			
	<ol style="list-style-type: none"> 1.2 Result of OPD patient- the following day. 			
	<ol style="list-style-type: none"> 1.3 ER patient- as soon as the test is done and verified by the Radiologist on duty. Result will be called to them for release. 1.4 Documentation upon receipt of the result by the nurses, nurse attendants, patients and relatives. 	No charge	4-5 minutes	Receptionist and Med-Tech on duty.



FEEDBACK AND COMPLAINTS MECHANISM

How to send feedback	<p>Answer the client's survey form and drop it at the designated drop box at the lobby beside the Admitting Section Office.</p> <p>Contact info: 516-8435 or email at staanahospital@yahoo.com</p>
How feedbacks are processed	<p>The survey form are collected every month by s designated personnel at tallied, compiled and records all the feedbacks and concerns of the patient, relative or concerned citizen.</p> <p>Feedback requiring answers and attention are forwarded to respective offices and they are required to answer or provide solutions within 24 hours upon receipt of the feedbacks. The answer of the office concerned are then relayed to the citizen verbally or in writing if necessary.</p>
How to file a complaint	<p>May be done in writing, addressed to the hospital director through the chief administrative officer, and may be hand in personally at the chief administrative office at the 2nd floor.</p> <p>Complaints may also be filed through e-mail at staanahospita@yahoo.com</p> <p>The complaint must specifically state the following:</p> <ul style="list-style-type: none"> - Name of the person being complained - Incident - Evidence, if any - Statement of witness, if any
How complaints are processed	<p>The complaints are processed upon proper evaluation and verification of the incident. The chief administrative officer designates and officer to investigate on the basis of the complaint and seek explanation on the office concerned. The investigating officer will submit a report and suggests or recommends appropriate action. The hospital director and or the chief administrative officer and the head of the concerned division will relay to the complainant the appropriate action of the hospital.</p>



	Outsourced Services Clients	SDN Clients
How to send feedback	<ul style="list-style-type: none"> • A reply form is inserted in a referral letter which indicates the SAH-MSSU contact no. like landline or email address. (indicates whether the client request is granted or not it not why) • In the reply form a contact no. of SAH was written like email address of SAH. The referring agency can contact MSSU or email the Social Service Office. 	<ul style="list-style-type: none"> • A Patients Satisfaction Survey form is used for SDN patient/client referred by Office of the Mayor (PESO) and MHD referral letters. • The Patient Satisfaction Survey form is filled up by the client/client relative and put it in a drop box located at MSSU.
How feedbacks are processed	<ul style="list-style-type: none"> • In the reply form a contact no. of SAH was written like email address of SAH. The referring agency can contact MSSU or email the Social Service Office. 	<ul style="list-style-type: none"> • After one month this form shall be tally and; • An evaluation and recommendation shall be done by SDN or MSW based on the outcome of the survey form.
How to file a complaint	<ul style="list-style-type: none"> • The letter can be address to Hospital Director Attention: MSSU-HEAD or email to SAH concerned department. • Drop the letter to Post Office address to Hospital Director attention concerned department or drop the letter to SAH Suggestion box located in the Lobby. 	
How complaints are processed	<ul style="list-style-type: none"> • MSSU Head or D.O receives the complaints from client/client relatives. • MSSU Head screen whether the complaint is valid or not. • If complaint is for Nurses, MSSU Head refers it to department concerned or Chief of Clinics to handle the case. • If complaint is for Administration Staff, D.O refers it to Chief of Clinics or concerned department. • If complaints is for Social Service Staff the Head mediates between the worker and the client. Evaluates the case to the management level if the case is unresolved. • Make incident report or a reason for conflict or advise the concern staff to make an incident report. 	
Contact Information of CCB, PCC, ARTA	ARTA: complaints@arta.gov.ph : 1-ARTA(2782) PCC: 8888 CCB: 0908-881-6565 (SMS)	