



Apicha Community Health Center

PATIENT GRIEVANCE POLICY NOTICE

Patient satisfaction is a priority at Apicha Community Health Center. Our staff are committed to treating you with the utmost respect and concern. This notice explains the process for raising concerns or complaints with us.

We encourage you to discuss any concerns directly with staff involved whenever possible. If you are not able to resolve your concerns directly with staff, you may ask to speak with the appropriate department manager to resolve the issue. If the issue cannot be resolved, you may submit your concerns to the Grievance Officer at the following address:

Grievance Officer: Yumiko Sano
Mailing Address: Apicha Community Health Center
400 Broadway New York, NY 10013
Email Address: Grievance@apicha.org or Incident@apicha.org
Telephone: (646) 572-2278

The Grievance Officer will acknowledge receipt of your complaint within seven days. Your complaint will be investigated, and if you request a response, we will send you a response within thirty days with the findings of the investigation and final resolution, or informing you of the progress of the investigation.

If you are not satisfied with the response, you may contact the New York State Department of Health's Office of Health Systems Management by calling their toll-free number at 1-800-804-5447. You may also print and complete the Health Facility Complaint Form available on the Department of Health's website at <https://apps.health.ny.gov/surveyd8/facility-complaint-form> and send it to:

New York State Department of Health
Centralized Hospital Intake Program
Mailstop: CA/DCS
Empire State Plaza Albany, NY 12237