

## **PROCESS FOR PATIENT SUGGESTIONS AND GRIEVANCES**

1. Suggestions and grievances will be directed to the office manager, Lyn Richardson, FAX: 501-224-0447, email: [lbrown@drsuzanneye.com](mailto:lbrown@drsuzanneye.com), Address: 12600 Cantrell Road, Little Rock, Arkansas 72223.
2. The suggestions and grievances must be in writing.
3. The written suggestions and grievances must identify the problem.
4. The written suggestions and grievances will then be discussed with Dr. Yee and any other staff involved by the clinic manager.
5. A decision will be made as to what course of action to take at this point. (Depending upon the nature and severity of the problem, a meeting to discuss the problem may be necessary.)

It is the policy of the office of Dr. Suzanne Yee to remedy patient grievances to the satisfaction of all parties involved.

## **PROCESS TO REPORT PATIENT CONCERNS ABOUT CARE AND SAFETY**

1. Concerns about care and/or safety will be directed to the office manager, Lyn Richardson, FAX: 501-224-0447, email: [lbrown@drsuzanneye.com](mailto:lbrown@drsuzanneye.com), Address: 12600 Cantrell Road, Little Rock, Arkansas 72223.
2. The concerns about care and/or safety must be in writing.
3. The written concerns about care and/or safety must identify the problem clearly.
4. The written concerns about care and/or safety will then be discussed with Dr. Yee and any other staff involved by the clinic manager.
5. A decision will be made as to what course of action to take at this point.

It is the policy of the office of Dr. Suzanne Yee to remedy patient concerns to the satisfaction of all parties involved.