

# Department of Health Patient Safety Complaint Filing Instructions

## Step by Step Guide

### Addendum B

#### Option #1- File online

1. Follow Link or QR Code Below
2. Click begin and select "I am filing a complaint on a healthcare provider or healthcare facility."
3. Ignore the Provider Credential Search screen and the dropdown box. Instead, select the orange NEXT button on the lower right hand of your screen.
4. Select one from the Facility Type dropdown box.
5. Fill in the remaining information in the boxes on this screen.
6. Read your rights regarding Whistle Blower information and select whether you wish to file anonymously or not. Click NEXT (remember, you have retaliation protections under National Labor Relations Board, Nurse Staffing Committee law, and applicable collective bargaining agreements).
7. Complete the next screen- Health Systems Quality Assurance Complaint Form
8. Provide your email in order to progress to the next step.
9. Submit all the information (example below).
10. Save a copy for yourself and send a copy to your WSNA nurse representative.

Complaint Online Form:

<https://fortress.wa.gov/doh/providercredentialsearch/ComplaintIntakeForm.aspx>



#### Option #2- File by email or USPS

1. Submitting your complaint by email: submit the complaint directly to DOH as an email using a PDF or Microsoft Word attachment. Send email and any attachments to: [hsgacomplaintintake@doh.wa.gov](mailto:hsgacomplaintintake@doh.wa.gov)
2. Submitting your complaint by USPS mail, send to:  
Washington State Department of Health  
Health Systems Quality Assurance Complaint Intake  
P.O. Box 47857  
Olympia WA 98504-7857

General Information:

<https://www.doh.wa.gov/AboutUs/FileaComplaint>

Q&A:

<https://www.doh.wa.gov/LicensesPermitsandCertificates/FileComplaintAboutProviderorFacility/FacilityComplaintProcess>

#### Follow the link in the email and provide the following information:

- Your name and contact information (phone number, mailing address, e-mail address).
- Location of incident occurrence including type and name of the facility, where in the facility the incident occurred, (e.g., patient room number, unit, service area).
- The date the incident occurred, names of staff/other people involved in the incident, names of who saw/heard the incident.
- Provide specific details about the incident. Include the reason(s) for your complaint, important information/data/evidence, and your suggested resolution(s) to the complaint.

#### Tips and other thoughts:

- Don't panic
- Include all relevant information. If DOH opens an investigation, the DOH investigator will contact you to obtain more details.
- Strive for timely complaint submission, ideally on the same day of the occurrence.
- A DOH complaint is not an immediate intervention and depending on the severity of the occurrence may take days to months for the Department of Health to respond.
- Remember: The employer may NOT retaliate.
- Contact your nurse representative for questions.

