



Patient Complaints

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Introduction:

In healthcare, many organizations are under the misconception that patient complaints mean failure (1, 2). In reality often complaints show that there is room for improvement in the services provided by hospitals. Patient complaints may reflect how effective the services can be and also to reveal how these services could improve through the point of view of the patient (1). Therefore, any efforts towards the reduction of patient complaints may certainly lead to more satisfied patients.

How do we organize complaints? Careful categorization and recording are needed in order to determine the nature of complaints. For example, dividing complaints into clinical and non-clinical, communication issues and complaints concerned with treatment (1). Furthermore, making the procedure easier and more accessible is integral and the feedback from complaints could be constructive. Often hospitals lack protocols and procedures to deal with complaints and “this situation created misunderstandings and conflicts between staff.” (1).

During a research study in 3 hospitals in Greece, 32.1% of patient complaints stemmed from ineffective administration of services (3). This indicates that improving administration may satisfy up to 1/3 of patients. During the same study in Saint Savvas Oncology Hospital and University Hospitals Ippocraton and Laiko, it was found that the written complaints were often missing important details regarding the complainants. This happened because the complaints were written on plain paper and not on the official quality forms printed by the Ministry of Health (3). The major shortcoming of this research was that there was no proper system in place to record and analyze complaints and no categorization (3).

The administrative procedure of any hospital should aim towards an efficient system regarding patients' submission of their complaints. This may range from the hospital staff passing on the message that complaints are accepted and welcomed, through the use of public notice boards, online browsing and suggestion boxes (1). Of course, the easiest way to convey complaints is verbally. It should be made clear to the patients or relatives who complained via email or letter, that these complaints should be registered by the Social Work Department (1). The healthcare organization needs to be prepared to try hard and listen, in order to understand the complaints of the patients; it must accept that the procedure may often be stressful for patients (4).

Staff attitude and communication issues:

Communication in medicine is very important, especially in outpatient services of hospitals. A study in Greece showed that 4 out of 10 complaints are made in the outpatient department (3). This is the most vulnerable service. In Australia a study of almost 19000 people showed that about 1/4 of complaints arose due to communication issues (5). Services such as non-clinical ones that involve communication and staff interaction seem to be more prone to complaints. As you can see in another study, "63 per cent of all the complaint issues were about non-clinical issues, half of which were due to perceived lack of appropriate behaviour of staff, or to poor communication between staff and patients or their relatives." (6). In a University Hospital setting the rate was 1 complaint per 400 health care episodes 19% of which due to communication issues (7).

There is a need to properly train doctors as many lack the confidence to efficiently deal with unhappy patients (8, 9, 10, 11, 12). A simple way to do this is the BLAST method, which stands for Believe Listen Apologize Satisfy and Thank (8). This method is simple enough to help inexperienced young doctors and even staff that are prone to mistakes. In

another setting a study showed that about 1/3 of doctors interrupted the patients too soon, while they were expressing their worries (8, 13). When allowing them to continue uninterrupted the average time needed was only 6 seconds (8, 13, 14).

Are complaints gender related?

An interesting approach into investigating patient complaints is the relationship between gender and patient complaints. In this case the gender of the complainant, gender of the doctor towards whom the complaints were directed and even the gender of the patient, were considered (15). Patients that had a female as a doctor seemed to be more satisfied than those who had a male doctor (15, 16). A study in Australia showed that 79% of doctors named in complaints were male (5). Women may also find themselves more involved into taking decisions with patients compared to men (15, 17). Females are more likely to file a complaint about the services provided to them (15, 18, 19, 20, 21, 22, 23, 24). At times, patients complain due to their economic and financial status (25). It seems that the phenomenon is more common among people with serious financial problems as these patients complained about unfair policies (25).

The healthcare system policies differ from country to country and different approaches may work towards avoiding complaints. In the Netherlands for example, all citizens have a family physician, which provides care during a long period of time (26). The results are impressive as about 95% of health problems were managed by family physicians (26, 27, 28). This system provides a different type of doctor patient relationship than the outpatient departments.

Patient complaints and compliments (29):

The process of patient complaints and compliments provide a valuable feedback in evaluating the services given by the healthcare organization. This helps the medical institutions to improve the services that they provide.

The procedure is divided into two main steps:

1. Local resolution- directly to the healthcare provider or commissioner.
2. In case of no resolution, patient must refer to Parliament or Healthcare Ombudsman.

Following guidelines (30):

All healthcare personnel are obliged to follow the guidelines in order to provide suitable and effective services to the patients.

There are some guidelines by the NHS constitution that must be followed:

- Patients have the right to have any complaints about hospital services.
- Patients should be informed about the outcome of their complaints.

Key elements of the regulations:

- Arrangements must be made in the medical practice to handle complaints effectively and deliver responses quickly and appropriately.
- Hospital staff must treat the patients who are complaining with respect and inform them about the outcome of their complaint.
- There should be a complaints manager that oversees the procedure.

Quality of care and complaint form (31):

The form instructs in a stepwise manner the complainant on how to fill in the information about personal details and information about the complaint. It also mentions what to do afterwards.

Discussion:

It seems almost unthinkable that doctors nowadays can treat patients badly, but this still may happen. Furthermore, some patients may feel that they are treated unfairly because of their age. They are made to believe that because of their old age they do not receive the proper care and attention by their doctors (32). Healthcare workers must not think of patients as medical numbers or case files. Patients are in a position to recognize whether their doctors have a negative and disrespectful attitude towards them (32). They also expect an apology when mistreated. Adhering to this will lead to patients that acknowledge and congratulate medical staff when they are satisfied (32).

In the USA, the Quality Improvement Organizations are the ones which provide the guidelines for complaints; working together with Centers of Medicine and Medicaid Services they provide healthcare quality check and improvement (33). The official US Government Site for Medicare and the American Medical Association website, also provide extensive options and advice on who to contact for filing complaints based on the type of complaint (34, 35). It is important that these organizations are not affiliated with the healthcare services and remain independent so that they can be objective.

Doctors have great influence on the life of patients and this means that they have great responsibilities towards the improvement of their quality of lives. Therefore, they should all be well-prepared and properly trained with regards to patient complaints. This applies especially to young and inexperienced doctors as well as medical staff who have a heavy workload and are more prone to mistakes. It is obligatory to familiarize themselves with the complaint procedures and laws of the system they work for as well as strictly follow legal guidelines. Hospital staff should lead by example and abide by the laws they work under as often patient complaints may have a detrimental effect upon their jobs. Doctors may lose their jobs as well as their practice license if they do not properly follow the law (36).

Good communication skills in medicine are paramount and must be emphasized especially in the process of how complaints arise. Communication should not be overlooked, because if addressed properly, it can greatly reduce patient complaints, as this is the most common issue. With good communication, complaints can be avoided and if they occur then they can be successfully resolved. Constructive criticism can be very helpful and should be welcomed by all healthcare personnel. In this way the patients or complainants can feel comfortable when filing a complaint. They should not feel that they are doing something wrong by making a complaint.

Conclusion:

All complaints must be well-documented and properly administered at the moment the dispute arises. Complaints as well as compliments provide the most valuable feedback that significantly improves the services any healthcare system may provide. It also informs healthcare staff on specific areas that need improvement. As a result, more patients will be satisfied with the services provided to them and ultimately the healthcare providers will have the time to concentrate on improving the quality of services offered to their patients.

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