



# **COMPLAINTS MANAGEMENT PROCESS**

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## **1. INTRODUCTION**

The Complaint Management Process has been developed to provide a single system through which complaints about service and administrative action can be dealt with where possible internally, and to comply with the requirements for a general complaints procedure. These procedures outline the process by which complaints will be handled when raised by or on behalf of service users, and must be read in conjunction with the Complaints Policy.

## **2. OBJECTIVES:**

The Complaints Management Process aims to:

- Provide a framework for the management of complaints.
- Offer a complaints management regime that facilitates continuous improvement.
- Inform customers and staff of the forms of redress available to them.

## **3. SCOPE**

The Complaints Management Process applies to complaints about the quality or timelines of service provided, or conduct of any service provider that directly affects a service user.

## **4. POLICY STATEMENT**

The Complaints Management Process is designed to provide transparent efficient and effective complaints handling procedures across the Health Services of Anguilla. Complaints will be treated confidentially and complainants will not suffer any reprisals from the health service provider for making a complaint.

## **5. GUIDING PRINCIPLES**

All complaints are to be thoroughly and expeditiously investigated with the aim of achieving a mutually acceptable resolution, and informing improvements in service delivery and best practices. To facilitate the effective management of complaints the Ministry of Health is guided by the following principles:

- Patients' Rights and Obligations
- Customer satisfaction
- Customer focused service
- Customer Involvement in Quality Improvement.

## **6. BENEFITS OF MANAGING COMPLAINTS**

By effectively analysing complaints, steps can be taken to:

- redesign services;
- improve policies and procedures;
- increase efficiency and effectiveness;
- re-assess customer information needs;

- increase community confidence in decision making;
- provide transparency and accountability.

## **7. THE COMPLAINT MANAGEMENT PROCESS**

The complaint management process allows the health service to use patient/client feedback to increase satisfaction and to make improvements through:

- accountability by health service;
- management of complaints;
- data collection and analysis;
- risk management of potential problems;
- addressing systemic and recurring problems.

### **7.1 Accountability by the Health Sector**

The health service shall have a culture of accountability where management/senior staff is responsible for quality services and effective complaints handling. The responsibilities include:

- providing appropriate complaint management training of staff;
- developing, monitoring and reporting performance criteria for complaint handling;
- reviewing the local complaint management process on an annual basis, including information on action(s) taken in response to complaints;
- demonstrating a pro-active approach to patients/clients and staff feedback.

### **7.2 Management of Complaints**

The Complaint Management Process will operate within frameworks of natural justice and confidentiality. The complaint management process will include:

- A complaint investigation procedure;
- A central point of coordination to register the complaint;
- Management of the complaint process by :
  - acknowledging receipt of the initial complaint within (2) working days;
  - commencing an investigation of the complaint within five (5) working days of receipt of the initial complaint;
  - resolving complaints as soon as practicable in the best interest of all parties, ideally within thirty (30) working days of receipt and,
  - advising the complainant if there is a delay while providing updates on the progress of the investigation at fifteen (15) day intervals.

### **7.3 Risk Management of Potential Problems**

Complaints may be an early warning identifying opportunities for systemic improvement. The early identification of individual complaints of a serious nature or with potential for escalation should therefore be the foremost concern for the health services risk management programme.

### **7.4 Addressing Systemic and Recurring Problems**

Health services are required to classify and analyze complaints to facilitate the identification and regular reporting of systemic and recurring problems.

Highlighting systemic issues can be used by the health service to:

- demonstrate commitment to using patient/client feedback to change practice;

- assess the performance of the service provided;
- change organizational practices and procedures;
- redesign care and services;
- identify potential problems;
- provide staff with feedback on changes in care and service delivery;
- continually reassess patient/client needs;
- categorize all complaints.

## **8. STAFF COMPLAINTS**

Staff may use this management process when complaining on behalf of and with the knowledge and consent of the patient/client.

Staff complaints about other staff are not to be addressed under this policy, but should be addressed through the health services grievance and dispute procedure.

## **9. ACCIDENT, INCIDENT, ADVERSE EVENTS AND SENTINEL EVENTS**

The management of complaints about accidents, adverse events, clinical incidents and sentinel events should follow the health services normal complaint procedure.

## **10. POTENTIAL/ACTUAL MEDICO – LEGAL CLAIMS**

Accidents, incidents, adverse events, and sentinel events may become the subject of a complaint. If the reported incident, adverse event, or sentinel event has the potential to result in a medico – legal claim, liaise with the appropriate head who will inform the Chief Executive Officer. In addition, incidents, adverse events and sentinel events may be notifiable.

## **11. STORAGE OF COMPLAINTS RECORDS**

All complaints will be recorded separately from the patient's/client's health record, with the health record being strictly limited to clinical information.

Records of all complaints are to be retained for a minimum of 10 years by the health service for monitoring and evaluation purposes. Records shall be kept in a central location, with restricted access for reasons of confidentiality.

## **12. CATEGORIZATION OF COMPLAINTS**

It is essential that complaints data collection is compatible across a range of facilities to identify common factors in complaints about hospitals and health services, and to identify the opportunities for service improvement.

## **13. DATA COLLECTION, RECORDING AND REPORTING**

An effective complaint management process requires appropriate systematic recording of complaints and their outcomes. Issues to be included are:

- the number and type of complaints received;
- the type of services or practices about which complaints are made;
- response time against defined parameters;
- demographic details and demographic analysis;
- referral source of the complaint;
- resources;
- action(s) planned or taken;

- trend analysis of complaint issues; and,
- system changes and outcomes introduced as a result of a complaint.

**The process for recording and reporting complaints should include:**

- categorization of complaint data including severity and outcomes;
- collection, collation and reporting of complaint data;
- documentation of complaint data using minimum reporting fields;
- recording of complaint data electronically;
- reporting complaint data, investigation outcomes, analysis of trends and system changes.

**14. COMPLIMENT RECORDING AND REPORTING**

It is recognized that the health service also receive compliments. Compliments provide an opportunity for the health service to utilize positive patient/client feedback to offset the perceived negative aspects of complaints and to facilitate improvements in the delivery of health care.

**15. PROVISION OF COMPLAINTS DATA**

The health service is required to provide quarterly complaints data to the Ministry of Health and Social Development for collation and analysis. An aggregated complaints report will be provided to facilitate systemic improvement by enabling the health service to develop and implement strategies to improve the quality of service.

Copies of the aggregated complaints report will be made available to the Quality Council biannually.

**16. EVALUATION**

The Health Services Complaints Management Process shall be reviewed every 3 years.

The review shall include:

- An evaluation of the process including an audit of individual complaint files;
- Survey of staff, and patients/clients;
- An assessment of the adequacy of the Complaints Management System.

**17. CONCLUSION**

The evaluation and its review seek to ensure that the Complaints Management Process is able to facilitate the provision of appropriate information leading to health system improvement.

## REFERENCES

Quality 2001 A Reality, Ministry of Health, Trinidad and Tobago, March 1998.

[www.sunshinecoast.qld.gov.au.addfiles/documents/council/complaints\\_management\\_process.pdf](http://www.sunshinecoast.qld.gov.au.addfiles/documents/council/complaints_management_process.pdf)