

Volume 12, Issue 5/2010 - Complaint Management

Complaint Management

Complaint management systems are a great way for hospitals to analyse patient satisfaction. Collecting and handling complaints, and receiving positive and negative feedback hospitals allow hospitals to analyse patient satisfaction and improve quality of the care they provide. The Hospital Association of Vienna developed a concept for standardised complaint management in 2003, putting it into practice in 2005.

In comparison to complaint management systems in general companies, it is not only important for hospitals to collect and handle complaints but also to get positive and negative feedback. This feedback allows for the analysis of patient satisfaction. The patient satisfaction rating in this service sector is always subjective, it is not about facts and figures but opinions and perceptions. Positive feedback from patients and their families also advances employee motivation.

The Hospital Association of Vienna installed an IT programme to collect and evaluate all patient feedback— positive and negative.

Aims

The general aim of the new complaint management system is to improve customer satisfaction. It is all about minimising the negative experiences in the hospital, being aware of the fragility of the business and improving the medical treatment of patients.

The first essential tool for an efficient complaint management system is an easily accessible way to complain. The hospital association of Vienna accepts oral and written complaints, complaints via telephone and via email. The patient can choose whichever method they prefer. Every feedback, regardless if positive or negative, is collected and taken into account for evaluation.

A few supporting measures have also been used such as the Internet and print media to inform the patient of the complaint procedure (e.g. a company-wide PR campaign).

The Process

Acceptance of Complaints

The Hospital Association of Vienna follows the complaint ownership principle. The employee, who is first informed about a complaint or problem by a patient/customer, is the "owner" of this complaint. The "owner" has the task of taking care of the complaint and, if it is within their sphere of competence, to solve the problem. If not, the complaint must be passed on to a colleague, with appropriate decision-making authority. For certain situations, patients or relatives may not want to contact employees involved in the situation. It may be unpleasant for patients to talk directly with the staff member involved, or there might be difficulties explaining their complaint or being understood. Therefore, in every hospital a complaint department is set up, providing an alternative way to make a complaint. There is a direct link between this department and the upper echelons of hospital management as complaint management is of utmost importance in the hospital.

Handling of Complaints

The duties of the employees of the complaint departments are to accept complaints, collect the important data and to pass the complaint to colleagues, who have decision-making authority. Furthermore, they have to gather the following information:

- Why is the customer unsatisfied?
- Where and when did the problem occur?
- Who is involved?
- Which solution does the customer want?
- What arrangements should be made?

After collecting the relevant data, they are entered in a computing database and categorised. It is not always easy to assign a complaint to the right category. If the complaint concerns the hospital building or contents, i.e. about the quality of a patient's stay, it is easy to assign. However, if the complaint is about a medical or quality of care issue it is more complex to assign. The right categorisation of complaints is very important because the analysis of complaints can bring vital information, which can in turn improve the quality.

After acquisition of data, including categorisation, the complaints are worked on. The last step is the administrative closing of the complaint.

After telephonic, vocal or written response, the data record is completed. All steps taken during the complaint process are recorded in the computing database and the relevant papers are saved.

Reaction to the Complaint

The first contact between employees and clients concerning the acceptance of complaints is of vital importance for a satisfactory handling and solution of the complaint. Clients who want to complain may not act rationally but emotionally. In addition, being in a hospital often provokes

feelings of fear and insecurity for both patients and their relatives. This is why the first contact is very important.

A discussion as to whether the complaint is legitimate or not, is neither targeted nor beneficial. Staff in the complaint management department are not allowed to evaluate if the complaint is legitimate or not.

During all communication, the customer/ patient must be allowed to express themselves and finish explaining their complaints and employees must listen to them. As a general rule, if the first conversation was successful the problem can usually be resolved. Or if not resolved, this first contact will at least establish the understanding that not every problem can be solved straight away.

To conduct a conversation is not easy, especially if the situation is dominated by emotions. Employees who are in direct contact with patients have to be trained very well. Training courses for employees in the complaint management department have to be passed regularly, because these employees have to hold long and difficult conversations with the patients and their relatives.

The processes mentioned were implemented within the complaint management department in 2005. In 2006, the complaint management department was renamed as an "Ombudsstelle". The change of name and according to this, also the shift of duties and responsibilities, have the advantage in that the ombudsmen are widely regarded as well grounded in their hospitals, more and more, they are moderators of delicate discussions.

Analysis of Complaints

Complaints and positive comments collected are analysed bi-annually.

At the end of each half-year period, a report detailing the number and type of the complaints is available for the management concerned. Based on this information, arrangements to improve quality can be planned and implemented. Meanwhile, there is enough data to compare the periods, so the effectiveness of measures can be evaluated.

The annual analysis in 2009 for negative and positive feedback shows that there is more positive than negative feedback. In 2009 there were 8,363 complaints and 10,730 positive comments.

The Anonymous Patient Survey

Patient satisfaction is predominantly measured using patient questionnaires. For 10 years now, there is a regular and anonymous postal patient survey after a patient is discharged. Patients receive a questionnaire around 10 days after their release from hospital. For the questions, there is a rating system from 1-5. In addition, the patient has the possibility of adding their own personal comments.

The returned questionnaire is recorded and then sent to the respective hospital for analysis. In the hospital, the questionnaires are gathered and the personal comments are analysed.

In 2009, 140,000 questionnaires were sent out with a return rate between 37 and 11 percent. Since 2001, the rate of return decreases each year by one or two percentage points and at the moment there is an average questionnaire return rate of 25 percent.

Analysis of Personal Comments

Within the implementation of a complaint management system the personal comments from the patient surveys, whether positive or negative, are registered, categorised and where appropriate, used to induce measures to improve quality. To use synergistic effects, patient questioning and complaint management have been connected.

It has been noted that there is a high fluctuation rate in the number of personal comments as complaints. Analysis showed that it is easier for the employees to identify complaints about the quality of the hotel services in the hospital but complaints concerning information, communication and organisation, are often not identified as such and therefore not registered.

The largest discrepancy can be found in the category "communication" with exactly 50 percent less entries identified.

Summary and Perspectives

In mid 2005, the complaint management in the Hospital Association of Vienna passed from the probationary year into routine. The figures of the collected positive and negative feedback show an efficient complaint management system. However, the fact that the current questionnaire has been in use for the past 10 years and that return rate is slowly decreasing show that a new instrument is needed. An instrument adapted to the customer needs ensuring a more efficient collection and evaluation and also an improved adaptation of the feedback and allowing benchmarking with hospitals in other countries.

A concept for realisation of this idea has already been developed. The new form of complaint management will be used company-wide by the end of 2011. This concept will also contain a central registration of positive and negative feedback from the personal comments to ensure the continuity and quality of the input and therewith assure the quality of acquisition.

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