Customer Satisfaction through Effective Complaints Management in Healthcare

Dr. Pallavee Shrivastava
Assistant Professor
FCM, SGT University
Gurugram, Haryana

Abstract:

Complaints are inherent in every work environment but in healthcare services, complaints are critical, needing immediate resolution. This research paper presents the benefits of implementing a complaints management system in healthcare administration. It also describes the essential features of a best-in-class complaints management solution. Failing to deal effectively with complaints proves detrimental, not only from a regulatory standpoint but also in terms of avoidable litigation and attendant costs.

To stay as a provider of choice, healthcare service providers need to invest in technology solutions, including an automated complaints management system. A best-in-class solution for complaints management provides seamless handling of complaints and introduces a systematic process for improvement, thus enabling hospitals to turn weaknesses into opportunities.

Key words: Complaints, Health care Service Providers

Introduction:

Healthcare providers face the formidable task of optimizing costs without lowering the quality of inputs. This at a time when maintenance cost of hospital is increasing at an estimated 7% annually. In addition, the hospital administration has to cater to the growing demand of patients for more and better healthcare services. The fact that not many people in the US have faith in their healthcare providers is evident from the report published by The Economist in 2006. This report claims that only 15% of Americans have a great deal of confidence in healthcare organizations. In this scenario, one single mistake can put the reputation and the financial health of the hospital in jeopardy.

Complaints management is a major initiative under the broader compliance management strategy. By leveraging technology, complaints management can help deliver superlative service and quality.

Literature Review:

- Clark, P. A., Wolosin, R. J. and Gavran, G. (2006). Explored that the interrelationships between three categories of service quality in healthcare delivery organizations: patient, employee, and physician satisfaction. Using the largest and most representative national databases available, the study compares the evaluations of hospital care by more than 2
million patients, 150,000 employees, and 40,000 physicians. The results confirm the relationship connecting employees' satisfaction and loyalty to their patients' satisfaction and loyalty. Patients' satisfaction and loyalty were also strongly associated with medical staff physicians' evaluations of overall satisfaction and loyalty to the hospital. Similarly, hospital employees' satisfaction and loyalty were related to the medical staff physicians' satisfaction with and loyalty to the hospital. Based upon the strength of the interrelationships, individual measures and subscales can serve as leverage points for improving linked outcomes. Patients, physicians, and employees, the three co-creators of health, agree on the evaluation of the quality of that service experience. The results demonstrate that promoting patient-centeredness, enhancing medical staff relations, and improving the satisfaction and loyalty of employees are not necessarily three separate activities in competition for hospital resources and marketing leadership attention.

- Cleary, P. D. (2003). examined the case of a patient admitted for ankle arthrodesis due to severe hemophilia-related arthritis. The surgery was successful, but the hospital stay was marked by inefficiency and inconveniences, as well as events that reveal fundamental problems with the hospital's organization and teamwork. These problems could seriously compromise the quality of clinical care. Unfortunately, most of these events occur regularly in U.S. hospitals. Relatively easy and inexpensive ways to avoid many of these problems are discussed, such as reducing variability in non-urgent procedures and routinely asking patients about their experiences and suggestions for improvement.

- Curry, R. (2006). Stated that the NHS is being transformed into a patient led service requiring radical new ways of gathering patient's views. Sunderland Teaching Primary Care Trust (TPCT) demonstrated its commitment to this change by introducing an action research project in parallel to the introduction of a new nurse led urgent care team (UCT). The research provides evidence of the quality of the new service and highlighted a service gap for housebound patients with chronic disease. This needs to be used positively to make improvements for patients in line with the NHS Improvement Plan and long-term conditions agenda.

- Dagdeviren, N. and Akturk, Z. (2004). Stated that seeking to understand patient perspectives is an important step in the efforts to improve the quality of health care. Developed by the EQuIP Task Force on Patient Evaluations of General Practice Care, the EUROPEP instrument aims to collect information on patient evaluations of general practice care. Result found that patient evaluations can help to educate medical staff about their achievements as well as their failures, assisting them to be more responsive to their patients' needs. In order to get the best benefit from EUROPEP, national benchmarking should be started to enable national and international comparisons.
Objectives of the study:

1. To study the Complaints Management in Healthcare
2. To study the customer satisfaction in Hospitals.

Research Methodology:

In depth literature review and available secondary data from various sources has been used to develop this paper.

Need for Streamlined Complaints Handling in Healthcare:

Customer complaints management has become an integral part of hospital management, both from a regulatory perspective and a customer service standpoint. Regulatory bodies have established specific guidelines for capturing, investigating, resolving and reporting customer complaints. Some of the major drivers of complaints management are:

- **Regulatory Compliance:** Hospitals are under the continuous watch of regulatory bodies and need to follow certain guidelines. An effective complaints management system supports compliance with these regulations by ensuring streamlined workflow and the correction of complaints.

- **Competition:** With an ever increasing number of healthcare service providers, patients today have a lot of options and expect the best in terms of quality and service from their hospital. An ignored complaint can hurt the image of the hospital and affect its bottom-line.

- **Costs:** It is estimated that the cost of replacing a current patient is ten times more than the cost of retaining an existing one. Effective handling and resolution of complaints drive continuous improvement in operations ensuring customer retention.

- **Customer Litigation:** Today’s informed customer expects value for every dollar spent and does not hesitate to take legal help in case of an ignored complaints or discrepancies.

In response to consumer concerns and litigation, the US healthcare industry, is concentrating on means to prevent medical mistakes and implement effective ways to manage complaints. It is imperative for a complaints management system to seamlessly integrate with hospital operations and be equipped to provide adequate complaints redressal to achieve the desired results.

Best Practices in Complaints Management:

A complaints management system in place needs to be backed by a consumer focused approach and has the following vital aspects:

- **Appropriate Location to Receive Complaints:** Consumers need to know where and how to file complaints. A place is selected to receive complaints, which is visible and
accessible to consumers and is well-publicized to encourage consumers to voice their dissatisfaction and to make the good intentions of the company apparent.

- **System for Prioritizing Complaints:** Complaints are prioritized on basis of severity level. Complaints which are more important are addressed first.

- **Process and Record of Complaints:** Complaints are logged and categorized for resolution and record-keeping. Categories are clearly defined and are exclusive of one another. Finally, the complaint is assigned to one person for handling and then forwarded to another level of authority for supervision.

- **Acknowledgement of Complaints and Defining of Responsibility:** Complaints are always acknowledged by talking to the customer on phone or in person. In some cases formal letters are also issued to acknowledge complaints.

- **Investigation and Analysis of Complaints:** Fairness in analysis of the complaint is demonstrable and documented. Records of all meetings, conversations and findings are maintained in the complaints file.

- **Resolution Consistent with Company Policy:** The complaint is forwarded to the appropriate level of authority for resolution and the consumer is kept informed about progress reports. A notification of the proposed settlement is sent to the consumer promptly.

- **Follow-up with the Customer:** If the consumer is not satisfied with the resolution, the problem is addressed again. The complaint is referred to a third-party dispute-resolution mechanism, if necessary.

- **Analysis and Summary of Complaints:** Complaints statistics and action proposals are circulated to appropriate departments and an action plan for complaints prevention is developed and implemented.
An effective complaints management system must also provide visibility into the complaints database and lifecycle. This should be done with the help of comprehensive, aggregate reporting and individual case status tracking, for giving maximum benefit to the healthcare provider.

**The Complaint Management Process:**

The complaint management process involves six steps that organizations can use to influence effective service recovery:

1. Encourage complaints as a quality improvement tool;
2. Establish a team of representatives to handle complaints;
3. Resolve customer problems quickly and effectively;
4. Develop a complaint database;
5. Commit to identifying failure points in the service system; and
6. Track trends and use information to improve service processes.
Benefits of a Software Solution for Complaints Management:

Complaints are valuable sources of information that organizations can use to improve their service. A good complaints management software solution not only provides a track of complaints, but also helps imbibe remedial actions across various functions of the hospital. It leverages valuable information found in the content of complaints into opportunities for growth and development.

1. Provides fast and accurate capture and classification of customer complaints.
2. Automatically routes complaints cases to appropriate staff based on subject, classification, staff skill set and availability.
3. Tracks each complaint in real-time from capture and initiation through investigation, reporting and closure.
4. Provides a consolidated real-time view of all complaints being processed by the hospital management along with their associated data, files and correspondence using an intuitive interface.
5. Ensures adherence and compliance to standard best practice processes.
6. Drives work to completion and ensures meeting of milestones and performance targets using workflow, alerts and notifications.
7. Provides real insight into the management process through graphical dashboards, MIS and trend analysis reports.
8. Reduces end-to-end cycle times through optimized routing of work, elimination of manual handovers and reduced reliance on paper documentation.

An efficient complaints management solution provides strategies for dealing with consumers at the first point of contact, assessing the severity, investigating and resolving complaints quickly and more effectively.

Best-in-Class Complaints Management Solution:

An effective complaints management solution can steer a company in a positive direction. When integrated well with other departments and policies of the healthcare service provider, it brings consistency in the entire operational process. Listed below are ‘must-have’ features of a complaints management solution.

- **Automated Data Evaluation:** The system assimilates, analyzes, and automatically assigns a complaint as soon as it is logged.
- **Automatic Alerts:** Automatic real-time alerts are generated and sent to the required personnel. It obviates the need for human interference and simplifies operations.
- **In-built Reporting System:** Provides reporting and analysis of the complaints data.
- **Browser Based:** The system is browser based enabling personnel to view dashboards of information, as per their requirement, from anywhere in the hospital or even outside.
- **Secure:** The system prevents unauthorized access. Automatic time-out options, appropriate password settings, intruder login detections etc., are an inherent part of its security system.
- **Communication across Channels**: In order to deliver best results, the complaints management system allows data sharing both vertically and horizontally across the hospital hierarchy, while integrating with other systems and departments of the organization.
- **Flexible & Scalable**: The system is flexible easily grows with the needs of the organization, in a cost effective manner.

While there may be hospital specific requirements -a best-in-class software solution provide the benefits of a reliable complaints management system.

**Theoretical Framework for Creative Business Model:**

![Diagram showing the theoretical framework for creative business model]

- **Consumer Empowerment**
- **Consumer Involvement & Participation**
- **High Efficiency & Cost Reduction in Service Delivery**

**Consumer Satisfaction**

- **Consumer’s Positive Word of Mouth (PWM)**
- **Consumer’s Willingness to Pay (WTP)**
- **Consumer’s Loyalty & Repurchase Behavior**

**Consumer’s Behavioral Outcomes**
Conclusion:

The focus of a hospital is to not only to treat the patients but also to provide an environment which acts as a catalyst in their recuperation. But, unfortunately, during the work process, there occur a lot of deviations which disturb the workflow and are voiced by the patients as ‘complaints’.

Effectively addressing a complaint not only satisfies the customer but is also an opportunity to create a positive experience with customers, building a healthier foundation, stronger brand value and avoiding legal penalties. As healthcare management faces mounting regulatory and market pressures, an efficient complaints management system in place can avert a lot of problems while navigating a healthcare services organization towards a better future.

References:


