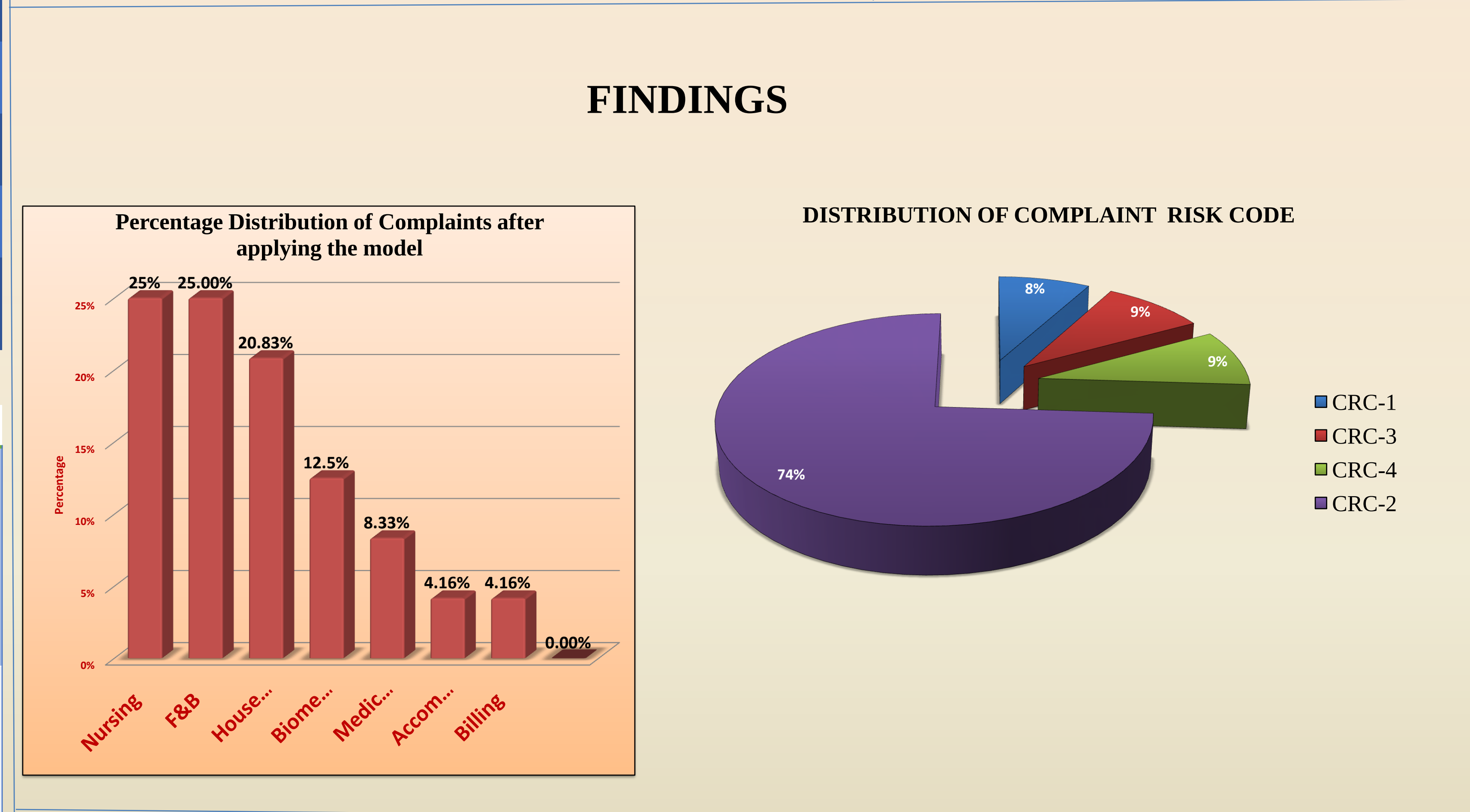


INTRODUCTION Complaint management is an integral part of the quality improvement approach that has been adopted by the health services. An effective complaint management system makes a vital contribution to this approach.	Objectives: - To prepare a prioritizing model for patients complains in Patient Welfare Department (PWD) in a tertiary care hospital. - To implement the prepared model. - To compare the present handling of the complaints with the complaints analysed by the tool.	Methodology - Study area- Tertiary healthcare Hospital - Study Design- interventional, retrospective, descriptive and observational - Sample Design- Sample of all complains received by the PWD from 16th may 2016 to 22nd may 2016 were observed and applied in the model. - Study Time- Study was done over a period of 14 days with an approval of model on 23th may 2016 - Study Tool- Complaint Management Risk Assessment Matrix	OBSERVATIONAL LEARNING Observed working of various departments:- - Patient welfare department - Quality department - Front office - Nursing care - Accommodation
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CONSEQUENCE CATEGORY TABLE		LIKELIHOOD CATEGORY TABLE	
Category	Descriptions	Category	Description
Serious	Issues regarding serious adverse events, sentinel events, long-term damage, grossly substandard care, professional misconduct or death that require investigation.	Frequent	Recurring, done, found or experienced often.
Major	Significant issues of standards, quality of care, or denial of rights. Complaints with clear quality assurance or risk management implications or issues causing lasting detriment that require investigation.	Probable	Will probably occur in most circumstances several times a year
Moderate	Issues that may require investigation. Potential to impact on service provision/delivery. Legitimate consumer concern, especially about communication or practice management, but not causing lasting detriment.	Occasional	Happening from time to time, not constant, irregular
Minor	No impact on or risk to the provision of health care or the organisation. Complaint could be easily resolved at the frontline.	Uncommon	Rare, unusual but may have happened before.
Minimum	Trivial, vexatious, misconceived.	Remote	Usually a “one off”, slight/vague connection to healthcare service provision.

COMPLAINT MANAGEMENT RISK ASSESSMEMNT MATRIX TABLE						
Severity of Patient's Complaint	Probability of Recurrence					
	Frequent	Probable	Occasional	Uncommon	Remote	
Serious	1	1	1	1	2	1 Immediate action Equivalent to CRC 1 Incident where the capacity to generate an electronic notification to the manager of the relevant department, executive management, and the quality team. Typically the Facility director, Medical Superintendant and the Senior Complaints Officer would be notified. Root Cause Analysis (RCA) investigation commenced. A Reportable Incident Brief (RIB) is completed and forwarded to the department. 2 The complaint is referred to line management/ complaints manager Equivalent to a CRC 2 , where a notification may be generated to the manager of the relevant department and the quality team. The Facility director and the Medical Superintendent are notified if there are clinical issues involved and/or a Root Cause Analysis (RCA) investigation is to be undertaken at the discretion of management. 3 Where appropriate, the complaint is resolved at the local level For a CRC 3 ,a notification may be provided to the manager of the relevant department and/or the Complaints Manager. 4 Generally resolved at the local level For a CRC 4 , Difficult-to-manage complaints can be referred to Complaints Manager. The complaint is managed by routine procedure and is reported.
Major	1	1	2	2	3	
Moderate	2	2	2	2	3	
Minor	3	3	3	3	4	
Minimum	3	3	4	4	4	



SUGESSTIONS - This model will help the hospital for future assessment of patient's complaints .It will help in taking the required action on time.
