

**The United Republic of Tanzania Ministry of Health,  
Community Development, Gender, Elderly and Children**

**NATIONAL GUIDE FOR  
COMPLAINT, COMPLIMENT AND SUGGESTION  
MANAGEMENT IN HEALTH FACILITIES IN TANZANIA**



October 2018



**Contents**

- Contents.....3
- Abbreviations .....1
- Foreword .....2
- Acknowledgement.....3
- 1 Introduction .....4
- 2 Purpose of the Guide.....5
- 3 Definitions.....6
  - Complaint.....6
  - Compliment.....6
  - Suggestion .....6
  - Who can complain, give compliments and suggestions.....6
  - Reasons for complaints .....6
- 4 Legal and Policy Framework .....7
- 5 Guiding Principles for an Effective Complaint, Compliment and Suggestion Management System .....8
  - Customer focus .....8
  - Visibility.....8
  - Accessibility .....8
  - Responsiveness .....8
  - Objectivity and fairness.....8
  - Transparency .....8
  - Confidentiality.....8
  - Accountability .....9
  - Continuous improvement.....9
- 6 Benefits of a Complaint, Compliment and Suggestion System ..... 10
- 7 Elements for Effective Complaint, Compliment and Suggestion Management..... 11
  - Enabling complaints, compliments and suggestions ..... 11
    - 7.1.1 Awareness of clients, the wider public and public institutions..... 11
    - 7.1.2 Ways of lodging complaints, compliments and suggestions ..... 11
  - Responding to complaints..... 12
    - 7.1.3 Acknowledgement ..... 12
    - 7.1.4 Recording received complaint ..... 12
    - 7.1.5 Analysis of a complaint ..... 13
    - 7.1.6 Investigation of a complaint..... 13
    - 7.1.7 Resolution of the complaint ..... 13
    - 7.1.8 Time frame for the different steps..... 14
    - 7.1.9 Flow of action in managing complaints ..... 14

7.1.10	Reporting of complaints, compliments and suggestions.....	16
	Accountability and learning.....	17
8	Structures and Requirements for the Implementation of Complaint, Compliment and Suggestion Management.....	19
	Required resources.....	19
8.1.1	Complaint, compliment and suggestion office.....	19
8.1.2	Human resources - complaint officer.....	19
8.1.3	Training and capacity development of complaints handling officer.....	21
8.1.4	Financial resources.....	21
	Structures and requirements specified for the different levels of care.....	21
8.1.5	Dispensaries.....	21
8.1.6	Health Centre.....	21
8.1.7	District Hospital.....	22
8.1.8	Regional Referral Hospital.....	22
8.1.9	Zonal Referral Hospital and Specialised Hospital.....	22
8.1.10	National Hospital.....	22
	Relation of complaint management structure to other structures of the hospital and the community.....	23
9	Annexes.....	1
	Annex 1: Complaint, Compliment and Suggestion Lodging Form for Written Complaints.....	1
	Annex 2: Complaint Register.....	1
	Annex 3: Compliment Register.....	1
	Annex 4: Suggestion Register.....	1
	Annex 5: Documentation Form for Complaint Investigation and Outcome: External Client.....	1
	Annex 5a: Documentation Form for Complaint Investigation and Outcome: Internal Client.....	1
	Annex 6: Reporting Form.....	1
	Annex 7: List of Categories of Complaints.....	1
	Annex 8: Guidance for Constructing a Complaint, Compliment and Suggestion Box.....	1

## Abbreviations

CHMT	Council Health Management Team
DED	District Executive Director
EHPA	External Hospital Performance Assessment
HMT	Hospital Management Team
ISS	Internal Supportive Supervision
MoHCDGEC	Ministry of Health, Community Development, Gender, Elderly and Children
OPD	Outpatient Department
PAS	Public Announcement System
PO-PSMGG	President's Office Public Service Management and Good Governance
QIT	Quality Improvement Team
RAS	Regional Administrative Secretary
RHMT	Regional Health Management Team
RMO	Regional Medical Officer
RRH	Regional Referral Hospital
SRA	Star Rating Assessment

## Foreword

The Tanzanian Government issued national guidelines for handling complaints in public services in 2012. These are implemented across various sectors and levels of service provision and management, including in the health sector. However, the guidelines have not been operationalized for the health sector, especially to ensure that all levels of service provision and also private and faith based owned health facilities are included.

This guide has been produced as an effort by the Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC) to increase accountability and ensure client-informed planning and service provision. Effective implementation of the guide will allow institutions to handle client complaints expeditiously, efficiently and transparently, while ensuring confidentiality, thus reducing dissatisfaction among both internal clients (staff) and external clients (service users). The guide also emphasizes the availability of key complaint handling structures as a precondition for effective and harmonized implementation of complaint management at all levels.

The goal of establishing complaint management in health facilities is to enable all facilities to use information emanating from the complaints process to improve service delivery, which is important for improving the quality of available services. Facilities should understand that complaints are feedback from clients on services provided and consequently, that there is a need to learn from the feedback and take effective measures to address the challenges identified.

Effective complaints management at all levels of the health system requires collaborative support from service users, providers and leadership. In particular, it is vital that citizens understand the importance of complaint management and that such systems exist in all facilities. Sharing of key information with communities on complaint management implementation, especially on how various complaints have been addressed, is also important for building trust and confidence in using available methods to lodge complaints and in services provided.

It is my hope that all levels of the health sector will use this guide as a tool for addressing client complaints, analysing critically information emanating from complaints and taking measures to prevent such complaints by improving services accordingly.

Prof Muhammad Bakari Kambi

Chief Medical Officer

## Acknowledgement

The Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC) acknowledges the contribution of all stakeholders who participated in various stages of drafting this guide. In particular, the MoHCDGEC acknowledges the contribution of district medical officers, district hospital medical officer in-charges and complaint handling focal persons from health centres and dispensaries in Chunya, Tandahimba, Nachingwea and Lushoto district councils; complaint handling focal person and hospital secretary of Tanga Regional Referral Hospital, medical officer in-charge of Lindi Regional Referral Hospital Lindi Regional Medical Officer (RMO); complaint focal persons of Bugando and KCMC Zonal Referral Hospitals, complaint handling focal persons at Aga Khan Hospital and Muhimbili National Hospital; health service coordinator at Tanzania Christian Social Services Commission, the, JICA and PS3.

The process of developing this guide was informed by other existing national documents guiding the health sector, especially the 2012 National Guidelines for Handling Citizens Complaints in the Public Service issued by the Presidents Office Public Service Management and Good Governance (PO-PSMGG) and other related documents. The Ethics Division at the PO-PSMGG participated and contributed valuable information to guide the process. Special thanks go to President's Office Regional Administration and Local Governments (PO-RALG) for their timely participation in the process.

The Ministry would like especially to thank the German Government and, the Tanzanian German Programme to Support Health (TGPSH) and Options Consultancy Services for their valuable technical support.

Dr Mohamed Ali Mohamed

Director Health Quality Assurance Division

Ministry of Health, Community Development, Gender, Elderly and Children

# 1 Introduction

While for a long time the needs and opinions of clients were not given enough importance,, consideration of those and changing service provision accordingly has become an essential part of quality improvement efforts and quality management.

Complaint management is an important mechanism for gaining an awareness of clients' needs and enabling them to be incorporated into the planning and revising of health services.

Non-existent or non-functioning complaint, compliment and suggestion management systems have a negative impact, not only on provider–user relationships but also on the quality of service delivery, as it reduces the chances for users to raise their concerns and make suggestions for the improvement of services. Effective complaint management is an opportunity for improvement of services and care rendered, establishes a dialogue with clients and leads to increasing trust of clients in the services.

Client complaints also provide a valuable source of insight into safety-related problems within healthcare organizations. Clients are sensitive to, and able to recognize a range of problems in healthcare delivery, some of which are not identified by traditional systems of healthcare monitoring (e.g. incident reporting systems, retrospective case reviews).

Thus, client complaints and suggestions can provide healthcare organizations with important and additional information on how to improve patients' care.

The Tanzanian Government has recognised that offering clients the possibility to submit complaints and opinions, address them and improve service delivery accordingly is an important mechanism to improve quality of services. Therefore in 2012 the President's Office Public Service Management and Good Governance (PO-PSMGG) developed national guidelines for handling and management of citizens' complaints in all public service institutions of Tanzania.

This was also part of the Government's efforts to increase accountability and strengthen procedures for listening to clients.



## 2 Purpose of the Guide

This National Guide provides direction for public and private health facilities in Tanzania to establish and implement a standardised and effective clients' complaint, compliment and suggestion system and in this way, operationalizes the national guidelines of PO-PSMGG for health facilities. This guide builds on existing Tanzanian experiences implementing such a system in several health facilities at each level and draws on international experience as well.

The guide ensures that the rights of patients, their families and the community (external clients) and the rights of employees (internal clients) to complain are fulfilled by setting out processes to ensure that internal and external clients know how to lodge a complaint, compliment or suggestion, that their feedback is dealt with and investigated, and that they are informed about the outcome of the investigation.

It furthermore guides the process of learning from complaints, compliments and suggestions, changing service provision accordingly and improving its quality.

The guide:

- applies to all complaints, compliments and suggestions that are lodged in health facilities of Tanzania,
- is intended for use by clinical staff and non-clinical staff,
- describes the main sources or causes of complaints
- describes the principles of complaint handling
- describes the roles and responsibilities in the management process of complaints, compliments and suggestions and elements of effective handling
- describes the skills required for handling complaints,
- describes the resources required to establish the system
- describes the structures necessary for running a complaint management system
- describes the resources necessary for running a complaint management system
- defines the timeframes within which complaints and the results of the investigations of complaints are to be reported and feedback provided to the complainant,
- identifies the processes for analysis of, learning from and action on complaints, compliments and suggestions

The procedures elaborated in the guide do not apply to complaints related to broader national health policies, which must be referred to appropriate government institutions or committees outside the health facility as directed by national laws and guidelines.

## 3 Definitions

### Complaint

A complaint is the expression of dissatisfaction; displeasure, disapproval or discontent given verbally or in writing by any person or group of persons about the specific health service rendered and/or care provided, whether justified or not, which requires a response.

The Guidelines developed by PO-PSMGG defines a complaint as “information lodged to the public office by an individual client, group of people or an institution to express dissatisfaction with services provided by a particular staff or an institution with expectation that changes will be instituted to rectify the problem”.

### Compliment

A compliment is an expression of praise, satisfaction and appreciation given by a person or a group of persons on the services or care rendered by a health facility or an individual. It provides valuable feedback about the level of satisfaction with service delivery.

### Suggestion

A suggestion is any proposal made or idea given by a person with the intension to improve the provision of health services.

### Who can complain, give compliments and suggestions

A complaint, compliment or suggestion can be made by a person affected by an action in the health facility or by a person acting on behalf of an affected person (external clients).

A complaint, compliment and suggestion may also be lodged by a member of staff (internal clients).

### Reasons for complaints specified

Reasons for complaints of external clients can be

- Lack of or inadequate information provided
- Misunderstanding
- Insufficient procedures and processes
- Malfunctioning or lack of required equipment
- Unsatisfactory condition of facilities
- Inadequate or a lack of required employees to ensure delivery of quality services
- Inadequate behaviour of employees
- Cost of services rendered
- Difficult working environment
- Inadequate resources
- Real or perceived sub-optimal performance of management
- Relationship to or treatment by superior
- Corruption

Reasons for complaints of internal clients can be

- Inadequate salaries
- Promotion and re-categorization
- Staff development and training
- Allowances and other Statutory payments
- Shortage of staff
- Heavy workload
- Communication with management
- Discrimination/ harassment
- Corruption

## 4 Legal and Policy Framework

The establishment and effective use of a complaint, compliment and suggestion management system is anchored in several legislative and policy documents of Tanzania including:

- Public Service (Amendment) Act (2007)
- Mwongozo wa Ushughulikiaji wa Malalamiko ya Wananchi Katika Utumishi wa Umma (PO-PSMGG 2012)
- Client Service Charter (MoHCDGEC 2018)
- Tanzania Health Policy (2007)
- Health Sector Strategic Plan IV (2015 – 2020)
- National Health and Social Welfare Quality Improvement Strategic Plan (NHSWQISP) (2013-2018)
- The Tanzania Quality Improvement Framework in Health Care (2011 – 2016)
- External Performance Assessment Tools:
  - ✓ Star Rating Assessment (MoHCDGEC) (2015 – 2018)
  - ✓ Guideline for Internal Supportive Supervision (ISS) and External Hospital Performance Assessment (EHPA) for Regional Referral Hospitals (MoHCDGEC 2018)

## 5 Guiding Principles for an Effective Complaint, Compliment and Suggestion Management System

An effective complaint handling system should be founded on basic values and principles. These include:

### **Customer focus**

The health facility establishment – management and employees – should be committed to effective complaint, compliment and suggestion management and value the feedback received from clients through various channels.

### **Visibility**

Information about how and where to complain or give a compliment or suggestion should be published as widely as possible through all means available for reaching the general public and all government institutions (e.g. various places of service provision within the health facility, offices of the council, police, and offices of the regional/local administration).

Health facility staff need to be aware of the existence of the complaint management system and know how the complaints process works. They can be informed during the staff meetings, which take place regularly.

### **Accessibility**

It should be made as easy as possible for clients to lodge a complaint, give a compliment or make a suggestion. The client and their families/supporting persons should be encouraged to complain or provide a compliment or suggestion at the point of service. All attempts should be made to reduce potential barriers to access.

An easy-to-understand and use complaint, compliment and suggestion procedure is desirable because it will allow and support clients to articulate their complaints including those with disabilities such as blind and deaf people, those with physical disabilities and those who are illiterate.

### **Responsiveness**

Complaints should be acknowledged promptly, addressed according to urgency, and the clients kept informed throughout the process. This can help to prevent dissatisfaction with the complaint management system and further complaints arising about delays. Where a delay is unavoidable, the client should be kept informed of progress and told when an outcome can be expected.

### **Objectivity and fairness**

Once a complaint is made, the procedure should ensure that different points of view from the clients and the respondent are listened to and investigated without prejudice. This requires a transparent system where the complainant is able to follow the complaint as it goes through the various stages. It also requires a system that provides for impartial, non-discriminatory handling of the complaint. Complaints should be treated with an open mind, without the health organisation being defensive or seeking to disapprove the complaint. Respondents must also be treated fairly by being accorded adequate opportunity to respond to the complaints and being protected from malicious complainants and complaints.

### **Transparency**

The health facility and the complaints handling office should exercise openness. All parties involved should share and have access to information necessary for finding an adequate response to the complaint. The process should be transparent for all parties involved throughout.

### **Confidentiality**

Personal information related to complaints should be kept confidential at all times. Care should be taken that information is only disclosed to those who have a demonstrable need to be able to contribute to the resolution of the complaint.

## **Accountability**

Lines of accountability for complaint handling should be clearly established, and complaints and responses to complaints monitored and reported to management and other stakeholders.

## **Continuous improvement**

Complaints, compliments and suggestions are an important information source for continuous quality improvement of services. The various relevant systems within the health facility and the management and should be used accordingly.

The complaint, compliment and suggestion management system should be reviewed on a regular basis to identify challenges and achievements and to enable improvement of the system's performance.

(Principles customer focus, visibility, accessibility and continuous improvement apply to complaints, compliments and suggestions; the remaining principles to complaints only.)

## 6 Benefits of a Complaint, Compliment and Suggestion System

A well working complaint, compliment and suggestion system leads to the following benefits:

- Timely and cost-effective means of resolving complaints
- Positive attitude towards complaints, which are regarded as beneficial feedback to the health facility
- Learning from mistakes
- Increased motivation and enhanced ethical behaviour of health facility staff
- Increased commitment and sense of responsibility among health facility staff
- Increased awareness of clients' needs and expectations
- Services designed in a way that considers clients' perspective
- Strengthened quality improvement of healthcare services and safety through the use of information provided by the complaints system
- Strengthened policy and strategy formulation and implementation, including resource allocation
- Improved reputation of the health facility and increased public confidence in services provided
- Enhanced efficacy through avoided cost, increased revenue and client retention

## 7 Elements for Effective Complaint, Compliment and Suggestion Management

The three elements of an effective complaint management system are related to the guiding principles and values.

- Element 1: Enabling complaints
  - ✓ Guiding principles: Customer Focus, Visibility, Accessibility
- Element 2: Responding to complaints
  - ✓ Guiding principles: Responsiveness, Objectivity and Fairness, Confidentiality, Transparency
- Element 3: Accountability and Learning
  - ✓ Guiding principles: Accountability, Continuous Improvement

### Enabling complaints, compliments and suggestions

Enabling complaints, compliments and suggestions requires the implementation of different arrangements and activities.

#### 7.1.1 Awareness of clients, the wider public and public institutions

A complaint, compliment and suggestion system is only useful, if all relevant stakeholders know about it. Therefore, the general public, patients and their relatives should be informed about the established system and exactly how and where to lodge a complaint, compliment or suggestion. This information can be disseminated during education sessions carried out regularly at the health facility, displayed on posters and/or sign boards, shared through a public announcement system, radio programmes and social media, as well as through outreach activities.

Informing the health facility governing committee can ensure that the surrounding communities including community leaders and other influential persons in the community are well informed about the existence and functions of the system.

Potential users should be encouraged to lodge complaints, compliments and suggestions.

The employees of the health facility need to be aware of the system and exactly know how it works, both for themselves as well as for the patients. They should also understand how important the feedback of clients is for improving service delivery and therefore welcome complaints, compliments and suggestions. The system should be presented and discussed during the meetings of the management and the staff of different departments and sections.

Until such a system is well established, the public tends to address their complaints to other government institutions. Therefore, all local government authorities at council and regional level must be informed to be able to advise and re-direct potential complainants to the complaint system at the health facility. This will prevent lodging complaints with the wrong institutions or individuals and promote the use of the health facility based system.

#### 7.1.2 Ways of lodging complaints, compliments and suggestions

A person can lodge a complaint, compliment or suggestion for him/herself or on behalf of another person e.g. relatives of a patient.

Complaints, compliments and suggestions can be lodged in the following ways:

- Verbally in person
- Mobile phone
- Text message
- Email
- Submission form on the institution website where one exists

- Written letter
- Complaint form
- Client exit interviews

The health facility should provide a standardised complaint, compliment and suggestion form (see annex 1) for written complaints, which can be put into suggestion boxes (see construction advise annex 8) placed in different areas of the health facility that can be easily accessed. Complaint forms should be attached to the box and should also be available at wards, in the outpatient department (OPD), at the entrance desk, the laboratory, radiology, pharmacy etc. A pen should be kept at the suggestions box and the phone number of the complaint officer should be indicated at each box as well.

The boxes should be locked and emptied on a regular basis, at least once per week, by the person(s) responsible for handling complaints, compliments and suggestions. It might be decided to involve a second person in opening the box, which could be e.g. a member of the integrity committee, the health facility governing committee/advisory board or the hospital health management team (HMT).

To enable the use of phone, text messages and email for lodging a complaint, compliment or suggestion, the respective phone number and email address should be known to all staff of the health facility, the health facility governing committee, all offices of the local government authorities and be written on sign boards at the entrance and inside the health facility.

Complaints, compliments and suggestion may also be addressed verbally to the officer/s responsible for managing the system. These officers must be reliably available on specified days and times and in a specified location. They may also be approached directly during their visits to the wards. The exact arrangements are described for every level of care in detail in Chapter 8.

## **Responding to complaints**

Most complaints should be dealt with quickly and amicably at the point of care. This requires several actions and defined timelines.

### **7.1.3 Acknowledgement**

All complaints, independently of the means of delivery, should be acknowledged immediately after receipt accompanied by an appreciation for the complaint. This can be done in writing by post, email or text message, or verbally by phone. Clients should be informed of how long it will take until they receive a response.

The complaint officer(s) cannot acknowledge anonymous complaints. However, these complaints should also be registered and analysed, because they are useful for the improvement of services as well.

### **7.1.4 Recording received complaint**

Regardless of the way they are lodged, complaints should be entered into a register (see annex 2). The information to be entered into this register includes:

- Reference number using patient registration number
- Date the complaint was received
- Name, gender, age, address and telephone number of the complainant (unless the complaint was made anonymously)
- Method used to lodge the complaint
- Nature and a short summary of the complaint
- Category of the complaint
- Severity of the complaint ( see paragraph 7.1.5 )
- Department or section being complained about
- Action taken to resolve the complaint



- Date when the process of finding the resolution was completed
- Date when the resolution was communicated to the client
- Degree of satisfaction of the client with the resolution offered
- Total number of days taken to resolve the complaint
- Complaint referred including referral institution
- Complaint not resolved

The complaint register must be kept in a safe place to guarantee confidentiality.

If possible the health facility should create a computer-based database for complaints.

### **7.1.5 Analysis of a complaint**

All complaints received should be assessed immediately and categorized (see annex 7) and prioritized according to their complexity, nature and severity.

This allows:

- Differentiating between easy to solve complaints with a minimum need for investigation and those, which are complex and need more time to resolve, the involvement of other persons and the review of documents like patients' records.
- Categorizing complaints according to their nature and severity, as follows:
- Minor complaints are those related to problems without serious clinical and life threatening implications.
  - ✓ Major complaints are those related to problems, which have serious clinical or even life threatening implications and endanger patient safety.

The resolution of major complaints should be given priority.

On the basis of this analysis a decision is made on whether the complaint can be handled by the health facility or needs to be referred to another institution or government authority.

### **7.1.6 Investigation of a complaint**

Some complaints may be dealt with quite quickly, with minimal need for investigation. For complaints requiring any degree of investigation, it is important to keep the client informed throughout the process. The purpose of the investigation is to establish the facts, gather information and explore options for the resolution. The investigation should be carried out in an impartial way and confidentiality kept at all times.

An investigation plan should be developed and include:

- which evidence to gather
- whom to interview
- which questions to ask
- which records and documents to review and
- which departments to involve

A successful investigation is conducted objectively, with an open mind and without bias. This means focusing on the facts of what happened, rather than relying on people's feelings or interpretations. The process should be transparent at all times and fair.

### **7.1.7 Resolution of the complaint**

After the investigation has been finalised the resolution found must be communicated to the client and/or her/his relatives and supporting persons. This should if possible happen during a face-to-face meeting. If it is not possible to arrange a meeting a letter should be written.

The communication should include the following:

- An expression of regret
- An apology
- Information on the root cause of the complaint and what has been done to rectify the problem and will be done to prevent an occurrence in the future

If the complainant is not satisfied with the resolution offered, a higher level of responsibility in the hospital or the responsible committee must be involved.

The implementation of the resolution takes place in the department or section concerned by the employees of the department or section.

The officer responsible for handling complaints should follow up in order to determine whether the agreed resolutions have been implemented and changes made.

#### **7.1.8 Time frame for the different steps**

A resolution for a complaint should be reached as quickly as possible.

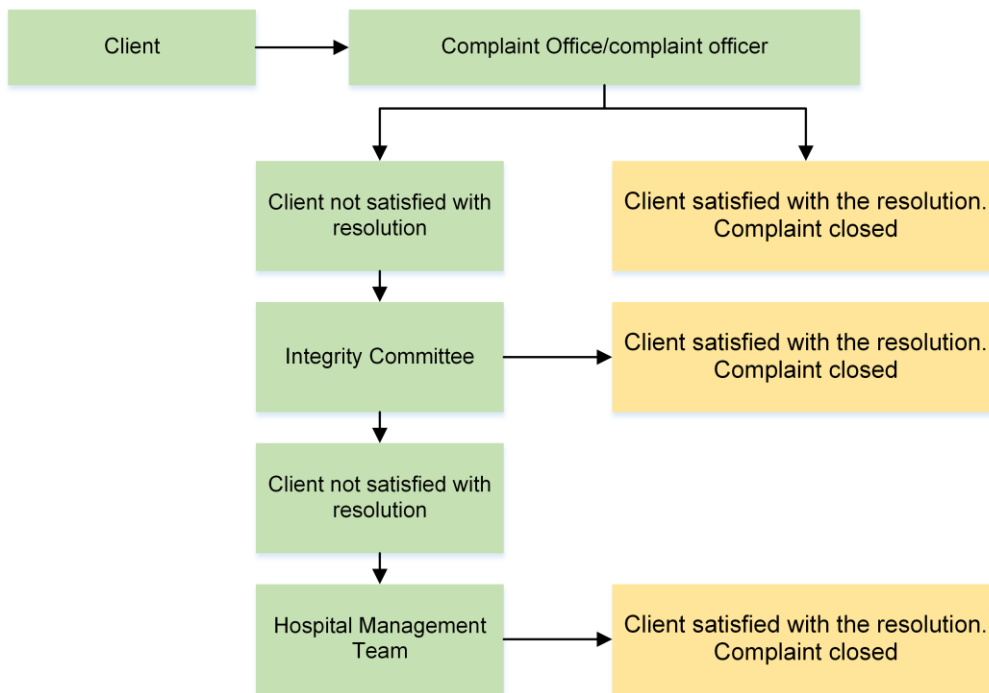
The complaint should be acknowledged immediately after it is received.

Resolving a minor complaint which needs no or little investigation should take no longer than 3 working days; a major complaint followed by more complex investigations should take no longer than 15 working days.

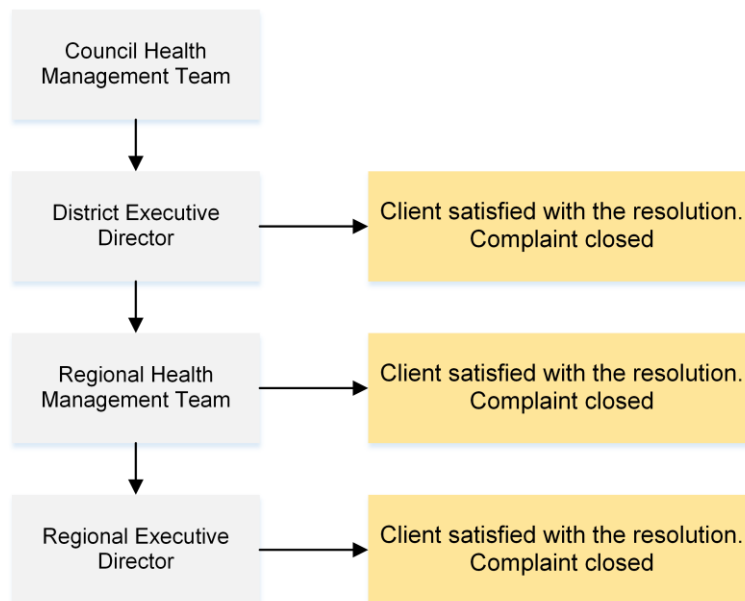
All parties involved should be informed in cases where the investigation and finding of a resolution takes longer.

#### **7.1.9 Flow of action in managing complaints**

Finding a resolution to a complaint lodged by an external or internal client requires the following steps to be taken. These steps are different for the different levels of care and are summarized below:



For dispensaries, health centres and district hospitals the next steps are:



If respective structures at Regional Referral Hospitals (RRH), Zonal Hospitals and Specialised Hospitals cannot resolve the complaint, they need to approach the MoHCDGEC. The person or department to be approached will depend on the nature of the complaint.

In line with the flow chart above, the following steps need to be taken from the moment a complaint, compliment or suggestion is received:

- The complaint will be registered and an acknowledgement of receipt provided to the client in cases where the complaint was not lodged in person.
- The complaint officer analyses the complaint and decides whether it requires immediate intervention.
- The complaint officer investigates the complaint and communicates with all parties involved such as unit(s), department(s) or individual(s) involved in the particular complaint in order to find a resolution.
- The resolution is communicated to the client.
- If the client is satisfied with the solution(s) reached, the whole process is documented in a register and the complaint closed.
- If the complaint did not reach the expected resolution, it is referred to the next level of the complaint management: the disciplinary committee.
- The complaint officer will communicate with the integrity committee chairperson, who may advise him/her on what to do or call for a committee meeting to find a resolution.
- The committee may require all parties involved to appear at a meeting for clarification or discuss the matter and suggest a possible resolution to the complaint officer, who will directly communicate with the complainant for feedback purposes.
- If the committee fails to find a resolution or the client is not satisfied with it, the committee refers the complaint to the next level of decision-making: the Hospital Management Team.
- The chairperson of the Hospital Management Team (the Medical Officer in charge) will explain the situation to the members in a team meeting.
- The Hospital Management Team may suggest possible resolution(s) or action(s) to be taken by the lower levels (the disciplinary committee, the complaint officer or other structures established in the hospital like the Quality Improvement Team/Work Improvement Teams).
- The solution reached is then communicated to the complaint officer through the chairman of the disciplinary committee for feedback to the client.
- The client may not be satisfied with the whole process and the resolution reached. Since the Hospital Management Team is the highest level at the institution, the client can still be advised to go to a higher level beyond the institution. For dispensaries, health centres and district hospitals, these are the Regional Administrative Secretary's (RAS) office through the Regional Health Management Team (RHMT) or the District Executive Director (DED) through the Council Health Management Team (CHMT) for further investigation. For escalating a complaint beyond Regional Referral Hospitals (RRHs), Zonal Hospitals and specialised hospitals the complaint needs to address the respective person or department at the MoHCDGEC.

The whole process needs to be documented using the respective form (see annex 5 and 5a)

### **7.1.10 Reporting of complaints, compliments and suggestions**

It is the responsibility of the complaint officer to report regularly (see reporting form in Annex 6).

#### **7.1.10.1 Reporting to management and quality improvement structures**

The extent of reporting depends on the size of the health facility.

A monthly report should be compiled and submitted to the Quality Improvement Team (QIT) of the health facility, which will inform the Hospital Management Team (HMT). The health facility governing committee meets quarterly and will also receive a report on the occasion of its meetings.

The report should cover:

- Number of complaints received
- Proportion of each complaint category
- Proportion of preferred means of complaints lodging
- Issues and key themes that the complaints have raised
- Type of resolutions achieved
- Proportion of complaints not resolved
- Proportion of complaints not solved disaggregated by complaint category
- Proportion of resolutions which have taken longer than recommended
- Proportion of cases with delayed information to clients about resolution reached
- Proportion of clients satisfied with the resolution offered
- Proportion of clients not satisfied with the resolution
- Reasons for not being satisfied
- Number of compliments and suggestions made
- Proportion of complaints disaggregated by department/unit
- Proportion of compliments related to complaints lodged
- Proportion of suggestions made related to complaints lodged
- Action taken after compliment and suggestion
- Trends in the number and categories of complaints, compliments and suggestions over time
- Improved awareness of clients about the possibility and usefulness of lodging complaints and positive feedback to a health facility is expressed through increasing numbers of complaints.

#### **7.1.10.2 Reporting to the public**

Reporting to the public is of great importance and demonstrates that the health facility uses their complaints, compliments and suggestions to improve the services provided and change them according to their needs. It will encourage clients to communicate complaints, compliments and suggestions.

Information can be given on the notice board of the health facility, through the Public Announcement System (PAS) and through the Health Facility Governing Committee.

The information must be endorsed for publication by the HMT and should include:

- Number of complaints received
- Proportion of categories of complaints
- Proportion of complaints resolved
- Changes made
- Proportion of complaints resolved in time
- Trends of numbers and categories of complaints over time
- Number and type of compliments and suggestions made
- Trends of numbers and type of compliments and suggestions made over time
- Action following compliments and suggestions

#### **Accountability and learning**

Complaints, compliments and suggestions are a source for continuous quality improvement because they help to identify systems failure and point to necessary changes.

It is important to follow trends in the types of complaints, compliments and suggestions. This will enable facilities to identify the most common system failures as well as best practice.

In the case of a system failure being identified through complaints and suggestions, further analysis will lead to identification of the root cause. The root cause must be addressed in order to improve the quality of services and care provided and to understand which measures need to be implemented.

Root cause analysis takes place monthly after the complaints related report has been submitted. The head of departments represented in the HMT will request that the concerned members in the department meeting and the Work Improvement Team (WIT) analyse the complaint. Action to be taken after the root cause is known will be supported by the head of department and/or the HMT. However, during communication the chain of communication should be adhered to, according to the level of the facility.

Compliments show good practice, which should be rolled out to other areas of the hospital.

Complaints and client feedback information should be used for decision-making and planning.

## 8 Structures and Requirements for the Implementation of Complaint, Compliment and Suggestion Management

Several structures and requirements for the implementation of a complaint management system are equally important for health facilities at all levels of care.

Some structures and instruments need to be specified for the different levels.

### Required resources

#### 8.1.1 Complaint, compliment and suggestion office

Every health facility should have an office or unit headed by the complaint officer/customer relation officer, who is responsible for handling complaints, compliments and suggestions according to regulations. The office provides for clients the possibility to lodge their complaints, compliments and suggestions verbally in person in a supportive environment.

The office also enables the complaint officer to carry out the work related to complaints, compliments and suggestions.

*The following aspects should be considered, when allocating an office:*

- The office should be in a place that is easily accessible for both internal and external clients of the hospital.
- It should preferably be situated at the front or in the middle of hospital premises, and not at the back.
- The office should be clearly signposted
- The office should be of a reasonable size and well ventilated

*The equipment should include:*

- A desk
- Three chairs
- A lockable cupboard for keeping confidential documents
- A mobile phone
- A desktop or laptop (not required for dispensaries and health centres)
- A printer (not required for dispensaries and health centres)
- A register book
- Writing paper
- Files for keeping documents and forms
- A signboard at the door indicating the purpose of the office
- Opening hours of the office should be clearly indicated

#### 8.1.2 Human resources - complaint officer

The complaint officer should be appointed by the director/officer in charge of the health facility.

*The responsibilities of the complaint officer are:*

- Receive clients at the office for face-to-face meetings
- Receive complaints, compliments and suggestions by phone, text message and email
- Open the suggestion boxes every week
- Visit wards and the OPD once per week and ask patients how they feel, as well as offering bed ridden clients support to formulate complaints, compliments and suggestions
- Enter all complaints, compliments and suggestions into the register
- Acknowledge receipt of the complaint

- Analyse the complaint, compliment or suggestion
- Categorize the complaint, compliment or suggestion
- Develop an investigation plan and arrange necessary meetings and discussions as part of the investigation
- Study patient files and other documents, if necessary for finding a resolution
- Find resolutions and communicate them to all parties involved by organising a meeting and/or by writing a letter
- Refer the case to a higher level and appropriate authority, if the resolution found does not satisfy the client
- Follow up on the implementation of the resolution and agreed changes
- Write monthly reports and submit to the QIT
- Participate regularly in HMT and QIT meetings
- Participate in meetings of the health facility governing committee if requested
- Promote the sensitization of staff and stakeholders on complaint, compliment and suggestion handling
- Advise management on complaint handling
- Act as link between the hospital management team and clients
- Monitor trends of complaints, compliments and suggestions over time
- Conduct client exit interviews

*When meeting the client, the officer should:*

- Listen keenly and identify the condition of the complainant
- Ensure that the complainant understands well all steps and how his/her complaint will be handled
- Avoid giving an opinion before the complainant has finished giving an explanation
- Refrain from showing their emotions or feelings when handling clients
- Use clear, respectful and understandable language
- Avoid blaming and disrespecting the client
- Avoid utterances which insinuate favouring one side
- Not wear a uniform but instead wear normal clothes to present him/herself as neutral and not as a health worker

*To be able to fulfil the responsibilities the complaint officer should have the following characteristics and skills:*

- He/she should be an experienced nurse/officer with good knowledge of processes of patient care as well as elements of hospital management, quality improvement and complaint, compliment and suggestion handling
- He/she should be a senior officer, well respected and trusted by all age groups of patients, staff and community
- He/she should be confident and able to communicate with employees of all cadres
- He/she should be an active person, who likes his/her work and will work quickly to find a resolution when handling a client complaint.
- He/she should be able to work independently without supervision
- He/she should be very familiar with the health system
- He/she should be well informed and knowledgeable of the functions of the institution like mission statement, vision statement, hospital performance indicators as well as administrative issues
- He/she should have good communication skills
- He/she should be patient and a good listener
- He/she should be able to learn and contribute to the improvement of the system.



### **8.1.3 Training and capacity development of complaints handling officer**

The office handling public complaints should have adequate and competent staff. The staff should be specifically trained in relevant complaints handling areas, such as communication skills, public relations and customer care, to enable them to fulfil their responsibilities effectively.

The training should, among other things, equip the officers with thorough knowledge of the role of public service, the values and principles of public service, best practice in complaints handling, the fundamentals of an effective complaints handling system, how to establish the system and the processes for running it effectively.

### **8.1.4 Financial resources**

The health facility should allocate a defined budget for complaint, compliment and suggestion management to enable a smooth running of the system. This should be ensured by including a budget submitted by the complaint officer into the annual financial plan of the health facility.

## **Structures and requirements specified for the different levels of care**

The following chapters include additions or specifications of requirements mentioned in the chapters 8.1.1 to 8.1.3 for the different levels of care.

All information given and regulations suggested in those chapters above are applicable to all levels.

### **8.1.5 Dispensaries**

The dispensary is a small facility with limited space and a limited number of staff members. Therefore, the following arrangements should be put in place:

*Complaint, compliment and suggestion office:*

- Whenever possible, there should be a separate office allocated for receiving complaints, compliments and suggestions only and this should, ideally, be located at the OPD
- If this is not possible an office at the OPD, which is used for other purposes, should be allocated at specific days and times of the day for receiving clients who wish to complain, or give a compliment or suggestion
- The employee given the responsibility of a complaint officer has other duties as well but must be available during the defined days and times in this office to receive clients and perform all duties related to complaints.
- The days and times the office functions as a complaint, compliment and suggestion office should be made known to dispensary staff in staff meetings and to the public through sign boards
- The complaint officer should receive complaints, compliments and suggestions as defined in the overall regulations
- The complaint officer should have the same responsibilities and skills as his/her colleagues in bigger health facilities
- The officer should report directly to the in charge of the hospital
- The officer should be a member of the QIT

### **8.1.6 Health Centre**

A health centre should be in the position to allocate an office for complaint, compliment and suggestion management only.

- The office should be located at the OPD and be well accessible every day during working hours
- The only responsibility of the officer assigned should be managing complaints, compliments and suggestions

- The complaint officer should be available all the time during the opening hours at the complaint, compliment and suggestion office
- The officer should report directly to the in charge of the facility
- He/she should be a member of the QIT

### **8.1.7 District Hospital**

A separate room at the OPD, which can be accessed easily, should be allocated for the management of complaints, compliments and suggestions.

- The office should be open and accessible for clients every day during the working hours of the hospital
- The office should be equipped with a desktop or laptop computer and a printer
- One member of staff should be freed from other duties and work for complaint, compliment and suggestion management only
- The officer should report directly to the in charge of the hospital.
- He/she should be a member of the QIT.

### **8.1.8 Regional Referral Hospital**

A room should be allocated for the complaint, compliment and suggestion management only at the OPD or near the entrance.

- The office should be open and accessible for clients every day during the working hours of the hospital.
- The complaint office should be equipped with a desktop or laptop computer and a printer.
- One member of staff should be freed from other duties and work for complaint, compliment and suggestion management only
- An assistant, who is also working for managing complaints, compliments and suggestions only, should support the complaint officer and be appointed by the hospital management.
- The complaint officer should report to the in charge of the hospital and be a member of the QIT

### **8.1.9 Zonal Referral Hospital and Specialised Hospital**

A room should be allocated for the complaint, compliment and suggestion management only, located at the OPD or near the entrance.

- The office should be open and accessible for clients every day during the working hours of the hospital
- The hospital management should assign three members of staff for working as complaint officer and assistant complaint officers to support the officer in charge and free them from any other responsibility
- The complaint office should be equipped with a desktop or laptop computer and a printer
- The complaint officer should report to the in charge of the hospital and be a member of the QIT

### **8.1.10 National Hospital**

The size of the national hospital requires different arrangements.

A Quality Assurance Unit is responsible for the management of complaints, compliments and suggestions. Complaints, compliments and suggestions are received at different points by different persons:

- In a complaint office at the entrance of the hospital;
- At the quality assurance unit

- At the public relations and customer care unit
- By so called block managers at their blocks
- By the so called “ask me” people, who can be approached by clients for questions as well as for positive and negative feedback
- Suggestion boxes

Six employees with medical background are trained for complaint, compliment and suggestion management, which is their only responsibility. They report to the public relations officer and are members of the QIT.

All complaints are collected on a daily basis by the Quality Assurance Unit, which is responsible for handling the necessary procedures for complaints management.

### **Relation of complaint management structure to other structures of the hospital and the community**

To be able to work effectively the complaint, compliment and suggestion management system should be integrated into the functions of the health facility and be considered as an integral part.

The complaint officer should be well connected to the health facility management and quality improvement structures. Being well connected to the management ensures the continuous understanding, commitment and support of the leadership. The relation to quality improvement structures allows the use of clients’ feedback for continuous quality improvement.

This should be achieved by the following arrangements:

- The complaint, compliment and suggestion officer is a co-opted member of the health facility management team and takes part in their meetings.
- The monthly report is always discussed in the health facility management meeting
- He/she is a member of the QIT and through this well connected to the Work Improvements Teams (WITs) and the departments
- He/she participates quarterly in the Facility Governing Committee/ Hospital Advisory Board and, in this way, relates continuously to the community.



.....

Signature of person lodging the complaint,  
compliment or suggestion

Signature of patient

For complaint officer only to complete  
Reference number:

## Annex 2: Complaint Register

### FOR INTERNAL AND EXTERNAL CLIENTS

Date complaint was lodged: .... / .... / ....

Reference number: .....

Gender: M  F

Name of the Complaint Officer: .....

Internal client:  External client:

Name of the complainant or representative: .....

Age of complainant or representative: .....

Contact of the complainant:

Physical address:

Cell phone number:

Email address:

Way the complaint was lodged:

Name of the department, unit or person to whom the complaint(s) is directed:

.....  
.....

Explanation of what happened:

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

Category of complaint (see Annex 7):

Severity of complaint: very urgent  urgent  normal procedure

Measures that have been taken to resolve the complaint(s):

.....  
.....  
.....  
.....

What responses have there been from the department, unit or person to whom the complaint or opinions were directed to:

.....  
.....  
.....

Feedback to the complainant:

.....  
.....  
.....

Feedback given: Face-to-face  by mobile phone  by letter

Complaint resolved: resolved  not resolved

Date the complaint was resolved: .....

Date feedback was given: .....

Degree of satisfaction with the resolution: very satisfied  satisfied  not satisfied

Total number of days taken to resolve the complaint: .....

Complaint referred to: .....

### Annex 3: Compliment Register

#### FOR INTERNAL AND EXTERNAL CLIENTS

Date compliment was lodged: .... / .... / ....

Reference number: .....

Gender: M  F

Internal client:  External client:

Name of the person giving the compliment: .....

Contact of the person giving the compliment:

Physical address:

Cell phone number:

Email address:

Name of the department or unit the compliment relates to:

.....

Summary description of the compliment:

.....  
.....  
.....  
.....  
.....  
.....  
.....

Information on action taken:

.....  
.....  
.....  
.....  
.....

## Annex 4: Suggestion Register

### FOR INTERNAL AND EXTERNAL CLIENTS

Date suggestion lodged: .... / .... / ....

Reference number: .....

Gender: M  F

Internal client:  External client:

Name of person making the suggestion: .....

Contact of the person making the suggestion:

Physical Address:

Cell phone number:

Email address:

Name of the department or unit the suggestion relates to

.....

Summary description of the suggestion

.....

.....

.....

.....

.....

.....

.....

.....

Information on action taken

.....

.....

.....

.....

.....







## Annex 6: Reporting Form

Reporting period: ..... To ..... Number of complaints received: .....

Complaints per category				Complaints unresolved per category	
Complaints of external clients	Number of complaints	Percentage of specific external complaint out of all external complaints	Percentage of specific external complaint out of all lodged complaints	Number of unresolved complaints	Percentage of unresolved external complaints out of all lodged complaints (unresolved/total)*100
Staff attitude/behaviour					
Access to information					
Physical access					
Waiting time					
Treatment issues					
Patient care					
Availability/accessibility of medicine					
Safe and secure environment					
Hygiene and cleanliness					
Treatment costs					
Corruption					
Others					
<b>Category total</b>					
Complaints of internal clients	Number of complaints	Percentage of specific internal complaints out of all internal complaints	Percentage of specific internal complaint out of all lodged complaints	Number of unresolved complaints	Percentage of unresolved internal complaints out of all lodged complaint (unresolved/total)*100
Inadequate salaries					
Promotion and re-categorization					
Corruption					
Shortage of working tools					
Shortage of staff					
Allowances and other Statutory payments					
Staff development and training					
Safe and conducive environment					
Staff attitude/behaviour					
Unfair treatment					
Availability/accessibility to medicine					
Other					
<b>Category total</b>					
<b>Total (all categories)</b>					



Proportion of resolutions, which have taken longer than recommended .....  
Proportion of cases with delayed information to clients about resolution reached .....  
Proportion of clients satisfied with the resolution offered ..... Not satisfied .....  
Reasons for not being satisfied .....  
.....  
.....  
Number of compliments made ..... Proportion related to complaints lodged .....  
Number of suggestions made ..... Proportion related to complaints lodged .....  
Action taken after compliment and suggestion .....  
.....  
.....  
.....  
Trends in the number and categories of complaints, compliments and suggestions over time  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

## **Annex 7: List of Categories of Complaints**

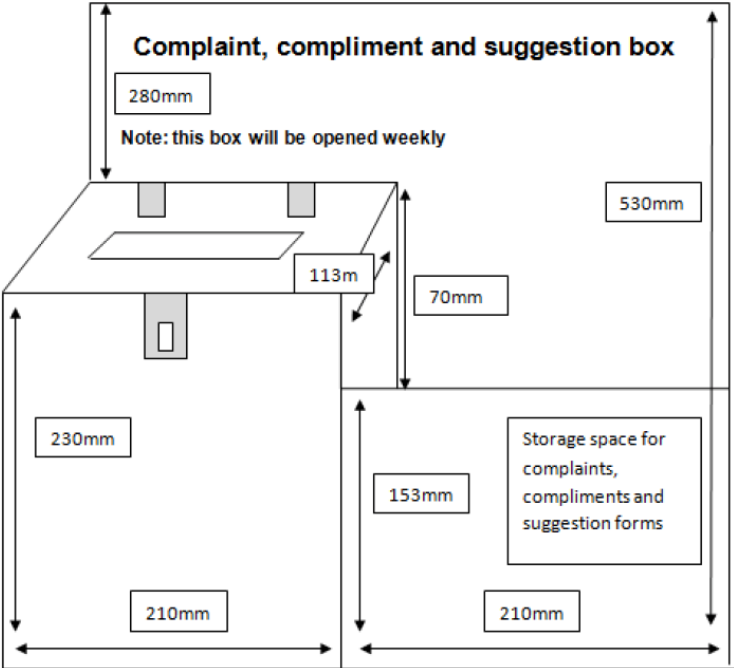
### **a) Complaints of external clients**

1. Staff attitude/behaviour
2. Access to information
3. Physical access
4. Waiting time
5. Treatment issues
6. Patient care
7. Availability/accessibility of medicine
8. Safe and secure environment
9. Hygiene and cleanliness
10. Treatment costs
11. Corruption
12. Others

### **b) Complaints of internal clients**

1. Inadequate salaries
2. Promotion and re-categorization
3. Corruption
4. Shortage of working tools
5. Shortage of staff
6. Allowances and other Statutory payments
7. Staff development and training
8. Safe and conducive environment
9. Staff attitude/behaviour
10. Unfair treatment
11. Availability/accessibility of medicine
12. Other

### Annex 8: Guidance for Constructing a Complaint, Compliment and Suggestion Box



**Specifications**

Material	Weather resistant material like wood
Colour	HMT to decide
Hinges and hook and eye	Stainless steel
Label	in colour as determined by the HMT  Text "Complaint, compliment and suggestion box" – Arial 72  "Note: this box will be opened weekly"
Lock	Lock with number sequence to lock
Mounted	Mounted onto the wall, 1.2m above the ground