

Intended for healthcare professionals



## Careers

# Understanding patient complaints

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## Abstract

“Sorry” may be all that a patient wants to hear, say **Wedad Abdelrahman** and **Abdelrahman Abdelmageed**

All doctors are likely, at some point in their careers, to be involved in dealing with a complaint.

Some complaints, such as missing medical records or car parking issues, we, as clinicians, will not directly have any influence over. Others will be directed at us, though this doesn't always mean that substandard care has been delivered.

Complaints may be a way for patients to express their anger or frustration, or they may be the result of breakdown in communication. They are also often made without an understanding of how the healthcare system really works, or without an awareness of the factors that can influence the quality of care delivered.

Nonetheless, it is patients' right to tell clinicians what they think of them and what they think of the standard of care they have received. As such, the process of making a complaint should be pointed out to patients.

Between 2013 and 2014, the number of reported written complaints made to the NHS reached 174 900—equivalent to 480 per day.<sup>1</sup> Certain factors, such as a doctor's gender and specialty, influence the likelihood of receiving a complaint. Figures indicate that men are more likely to receive complaints than women, while psychiatrists, GPs, and surgeons attract a higher complaint rate than those in other specialties.<sup>2</sup>

## Communication breakdown

Most complaints are secondary to poor communication. In the UK, the three most common complaints to the GMC are related to concerns with investigations and treatment, problems with communication, and a perceived lack of respect for the patient.

The GMC states that doctors must listen to patients, consider their views, and respond to their concerns with honesty. Arrangements must also be made so that patients' language needs are met.

Effective communication is recognised as a vital attribute for healthcare professionals. This is important not only between doctors and patients, but also between doctors and other healthcare professionals.

There is increasing evidence that poor communication and lack of empathy are major causes of adverse events, patient dissatisfaction, and, therefore, complaints.<sup>3</sup> Challenges in communication can arise between doctors and patients from different backgrounds. Moreover, at least 25% of doctors practising in the UK don't have English as their first language, and the language barrier in these circumstances creates an additional obstacle.<sup>4</sup>

## Learning opportunities

Complaints are stressful and time consuming. Depending on how they are received, they can be taken personally and seen as criticism of one's clinical acumen. As difficult as it may be, complaints should represent an opportunity to learn, reflect, and improve your skills.

You should walk away from a complaint acknowledging why it was made; what went wrong; what you did wrong; ways it could have been prevented; and what could be done differently next time. It is important to engage in the process—not react defensively—and provide a rational response within the timescale provided.

The NHS Complaints Regulations require a complaint to be acknowledged within three working days and responded to within agreed timescales.<sup>5</sup> Certain health and social care trusts run complaints awareness training—healthcare professionals should avail themselves of this learning opportunity.

The House of Commons Health Committee recently said that most people who complain about NHS services don't seek financial retribution. They do so because they want their concerns and experiences understood so that others don't suffer the same avoidable harm.<sup>6</sup> Doctors are human beings, and human beings make mistakes.

Remember, if a complaint is a result of poor communication or even delivery of substandard care, all the patient may be looking for is reassurance that failings are acknowledged, and mistakes aren't repeated. Better communication with patients and better management of their expectations can avoid escalation of simple problems. "Sorry" may be all that a patient wants to hear.

### ***Improving care***

Complaints help to improve local policies and guidelines, highlight deficiencies in healthcare provision, and improve overall patient safety.

The Francis report was published in 2013 as a result of a public inquiry into 1200 unnecessary deaths that occurred over a three year period at Mid Staffordshire NHS Foundation Trust.<sup>7</sup>

The report found that written patient complaints, over the time period in question, had raised concerns about poor care at the trust. Deficiencies in complaint handling, however, meant that critical warning signs were missed.<sup>8</sup>

## Footnotes

- We have read and understood BMJ's policy on declaration of interests and declare that we have no competing interests.

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