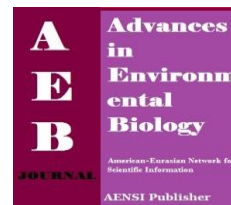




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The Most Important Types of Complaints from Educational Health Centers in Kermanshah Province

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ABSTRACT

Introduction: Despite numerous scientific advances in the diagnosis and treatment of diseases, the number of complaints against physicians and medical team is increasing. The aim of the present study is to investigate the most important types of complaints of health centers in Kermanshah Province in 2012. **Methods:** This is a cross-sectional retrospective study to investigate the most important reasons of complaints (written-oral- phone) in 7 educational health centers in Kermanshah in 2012. The data was collected through the forms sent from hospitals to the Kermanshah University of Medical Sciences. The collected data was analyzed using SPSS18. **Results:** According to results, 1245 complaints were recorded from 690982 inpatient and outpatient people. Of this, 80% was complained by patients or their families and the remaining was complained by others. Fifteen cases (1.5%) were resolved in the wards, 1169 cases (93%) in the hospitals and 70 cases (5.5%) were referred to higher authorities. The subject of most complaints (42.5%) was the quality of care service in the health centers. **Conclusion:** According to the results of this study and other studies in Iran, the health providers should be further trained in terms of proper patient selection, theoretical knowledge, academic skills and good emotional communication skills with patients. This could be an effective step to reduce the failure rate and grievances and complaints against health providers.

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INTRODUCTION

In the modern public and private organizations, accountability is among the most important processes with a crucial role in retaining customers. It also plays an important role in improvement of organizational position. Nowadays, complaints by customers are not considered as a negative phenomenon, but are gifts dedicated to an organization by customers. Since a positive approach to complaints leads to an organizational reform based on customer comments, complaint is considered as an appropriate feedback and a tool for more interactions between organizations and clients [3].

Hospital is the integral part of the medical and social organizations. Hospitals provide proper health care for the public. They are also considered as training centers for healthcare staff. Patients have critical needs like other healthy people. The patient's needs should be recognized to select more effective ways to help patients. The recognition of patient's needs provides a useful framework for required healthcare services. Patient satisfaction is one of the characteristics of effective services. It is necessary to observe patients' rights to achieve patient satisfaction [6].

Complaint is a tool to indicate annoyances. Complaints should be addressed. However, complaints reflect only a small proportion of dissatisfaction with the health care system and perhaps show the peak of an iceberg. All preventable adverse events do not lead to complaints. All legal claims and poor outcomes may not lead to

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compensation. It is believed that the reason of most complaints is that the patients want to be heard to be apologized [5]. Due to the availability of modern information systems and improved public education level, the participation of patients and their families in the care process and treatment has increased with an active role in clinical decision-making. As a result, the complaints about the quality of health care services has increased dramatically [8].

Medical malpractice occurs when the following three conditions exist: 1- The person should be the doctor's patient, i.e. the doctor should be responsible for medical treatment, 2- the doctor's action is not in accordance with medical standards, 3 - the patient may suffer from a mental or physical injury as a result of medical measures [7]. The increased number of complaints is a universal phenomenon, but the severity of this problem is highly variable in various countries. In United States, specialized medical attorneys are employed due to high frequency of medical malpractice cases. According to statistics, the number of complaints against doctors in USA increased from 8% in 2007 to 27% in 2011 [4]. In 1987, 1000 complaints were recorded from six million inpatients and nineteen million outpatients in England [10].

However, we should be aware of positive aspects of patients' complaints of the healthcare community. This can serve as a safety valve to increase the quality of care, the attention of physicians and their knowledge as well as higher quality of new skills. This can be effective in creation of a more friendly communication with patients, reducing high diagnosis and treatment costs as well as preservation and promotion of the sanctity of the medical community [15].

Understanding the reasons for complaints from medical staff and the efforts to reduce them is an effective step towards higher satisfaction of patients and medical staff [13]. If the health staff want to handle and resolve complaints effectively, they need to have a better understanding of their surroundings. Therefore, the record and handle of complaints received much attention by the Ministry of Health and medical science universities as one of the important areas in Clinical Services Authority. For this purpose, offices are assigned to receive and address complaints in all hospitals. The complaints are monthly reported to the university through a specific form. Since the complaints in the Kermanshah University of Medical Sciences were not previously studied, the present study was designed to investigate the most important types of complaints from health centers in Kermanshah Province in 2012.

MATERIALS AND METHODS

This is a cross-sectional retrospective study to investigate the most common reasons of complaints in 7 educational health centers in Kermanshah Province in 2012. All complaints (written-oral-telephone) were recorded in the complaint office and reported to the Kermanshah University of Medical Sciences. The data was collected from the forms sent from hospitals to the university. The collected data was analyzed using SPSS 18. The form was designed by Kermanshah University of Medical Sciences and distributed among all health centers. All forms sent by the health centers in 2012 were examined.

Results:

All complaints recorded in the complaint offices in 7 educational health centers in Kermanshah Province in 2012 were sent to the Kermanshah University of Medical Sciences through a special form. The received forms were analyzed. The total number of inpatient and outpatient admissions in 7 educational health centers in 2012 was 690,982 people. A total of 1,254 complaints were registered in these centers. Of this, 80% was complained by patients or their families and the remaining was complained by others. Fifteen cases (1.5%) were resolved in the wards, 1169 cases (93%) in the hospitals and 70 cases (5.5%) were referred to higher authorities. As shown in Table 1, the subject of most complaints (42.5%) was the quality of care service in the health centers.

Table 1: The frequency of complaints in terms of subject in 2012.

	Subject	Number of complaints	Percent (%)
1	Service quality	534	42.5
2	Improper behavior	297	24
3	Costs	175	14
4	Handling time	143	11.5
5	Facilities	64	5
6	Other	41	3
7	Total	1254	100

The average time for addressing complaints was 2.2 days. The complained people were divided into four groups including doctors, nurses, administrative and service-guard personnel. Most of complaints (45%) were against doctors and then the nurses so that 31.5% of the total complaints were against the nurses (Table 2).

Table 2: The frequency of complained people.

	Complained people	Number of complaints	Percent (%)
1	Doctors	561	45
2	Nurses	395	31.5
3	Administrative personnel	95	7.5
4	Service-guard personnel	203	16
	Total	1254	100

Discussion and Conclusion:

According to the results, most of the patients complained of the quality of care provided by health providers, particularly doctors in educational health centers in Kermanshah Province. This is consistent with the results of Mirzaaqaei who studied the complaints recorded in the three hospitals affiliated to Tehran University of Medical Sciences from March 2007 to February 2008. According to Mirzaaqaei, the most common reason of complaints was dissatisfaction with health care services as a subset of service quality [5]. Mosaddeghrad examined the complaints collected in Tehran Heart Center during July 2005 to December 2006. The most common reason for complaints was the waiting time to receive services. This is among the factors related to the quality of care [6]. The results of Natangelo on 359 complaints in Milan, complaints in a emergency department in Singapore and the results of Anderson *et al* on complaints collected from patients in a major hospital in Australia during 30 months introduced the inappropriate communication with patient as the most important reason of complaints [1,14,9].

In the present study, most of complaints were against doctors and nurses. This is consistent with the results of Mirzaaqaei *et al* [5]. However, in the study conducted in Tehran Heart Center, most complaints were against nurses [6]. In the study conducted in Singapore, complaints on improper communications of doctors, nurses and support staff were equal, while complaints on the standards of medical care were only against doctors [14].

In the present study, only 1.5 percent of complaints were resolved in the wards and the rest were referred to higher authorities. However, in the study conducted by Mirzaaqaei *et al.*, 61.8% of complaints were resolved in the wards with a simple apology [5]. According to Wong *et al*, 83.9% of complaints were resolved at the place with simple apology [14]. The results of another study on complaints in a ophthalmology hospital showed that 84% of complaints were resolved in the first stage with an explanation or apology [2].

In this study, the number of complaints resolved in the wards was very low compared to similar studies. This indicates the need for promoting the apology culture among the medical staffs. In general, the increased referrals to hospitals and increased awareness of patients of their rights increase the number of complaints against medical staff. Most of the complaints were against the low quality of healthcare services. In other words, most of plaintiff's clients believed that they did not receive high quality services. This may be due to failure to observe the principles of good communication with the patient and inappropriate services. Thus, it can be solved with correct communication methods.

In addition, since a small percentage of complaints resolved in the wards, it is necessary to accept the demands of the patients and an apology from the patients in the health centers. Given that most complaints were against doctors, it can be concluded that there is a distrust of this group. This is may be due to the failure to provide adequate explanations to the patient and failure to inform patients of the treatment process. In particular, distrust to students and replacement of doctors with students to perform medical affairs fueled distrust and increased complaints in educational health centers. This aspect of the complaint can be reduced with the organized participation of trainees in medical affairs.

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REFERENCES

- [1] Anderson, K., D. Allan, P. Finucane, 2001. A 30-Month Study Of Patient Complaints At A Major Australian Hospital. *Journal Of Quality In Clinical Practice*, 21: 109-111.
- [2] Chavan, R., C. Porter, S. Sandramouli, 2007. Formal Complaints At An Eye Hospital: A Three-Year Analysis. *Clinical Governance: An International Journal*, 12: 85- 92.
- [3] Dariani, M., 2004. The Role Of Responding To People's Complaints On Establishment Of Public Monitoring. 3rd Conference On Efficient Monitoring. Tehran: General Inspector's Office.
- [4] Gannon, K., 1997. Mortality Associated With Anesthesia. A Case Review Study. *Foren Med*, 46, 962-966.
- [5] Miraqae, F., 2011. The Complaints Recorded In Three Hospitals Affiliated To Tehran University Of Medical Sciences And Effective Factors During March 2007 To February 2008. *Hospital*, pp: 10.

- [6] Mosaddeghrad, A., 2004. The Awareness Of Physicians And Patients Of Patients' Rights And Its Observation In Shahid Beheshti Hospital In Isfahan. *Journal Of Medical Education*, pp: 11.
- [7] Naghibi, K.M.K., Soltani Ssk., 2012. Review Of Medical Complaint Files In The Medical Council Of Isfahan, Iran. *Journal Of Isfahan Medical School*, 29: 1542-53.
- [8] Nasiripour, A., 2011. Factors Related To The Patients Complaints Against Doctors In The Hospitals With The Verdict Of The Medical Council Of Kerman. *Ijme*, pp: 4.
- [9] Natangelo, R., 2007. Clinicians' And Managers' responses To Patients' Complaints, A Survey In Hospitals Of The Milan Area. *Clinical Governance: An International Journal*, 12: 260-266.
- [10] Poloson, G., N. Gee, 1985. *The Essentials Of Forensic Medicine*, Oxford: Pergamon Press.
- [11][11] Roya Bamyar, Shima Kazemi Malekmahmoodi, Hasan Khursha, Mohammad Ali Vakili, 2014. The Cause Of Hospitalization And Its Changes In Hospitals Of Golestan During 2001 To 2010. *Adv. In Nat. Appl. Sci.*, 8(4): 325-329.
- [12][12] Shiva Pejmankhah, Tahmineh Karamzaie, Shida Pejmankhah., Evaluation Level Of Internet Addiction Among Nursing And Midwifery Students In Iranshahr 2012. *Adv. Environ. Biol.*, 8(6): 1601-1606, 2014
- [13][13] Winkler, F., 1993. Complaint By Patients. *British Medical Journal*, 306: 472-3.
- [14][14] Wong, L., S. Ooi, L. Goh, 2007. Patients' complaints In A Hospital Emergency Department In Singapore. *Singap Med.*, J, 48: 990-5.
- [15][15] Wright, J., P. Hill, 2003. *Communication, Documentation And Complaints For The Book Of "Clinical Governance*, New York, Elsevier Publisher.