

## MLMIC Risk Management Tips

### Tip #13: The Proper Handling of Patient Complaints

**The Risk:** Patient satisfaction is an integral part of providing healthcare, regardless of the clinical setting. Dissatisfaction with medical care may be a harbinger of medical malpractice litigation. When you receive a complaint about care, how you handle the situation may directly impact the potential for any future litigation. All medical office practices should have a policy or protocol in place to address patient complaints based upon the following recommendations:

1. One individual should be identified and consistently utilized as the primary person to handle complaints. This is often the office manager.
2. All staff should know to whom complaints should be addressed, as well as what information constitutes a complaint that requires attention or intervention by the appropriately designated person. This should, at minimum, include:
  - a. Either written or verbal complaints regarding medical care;
  - b. Any billing or payment issues that involve concerns about the clinical care; and
  - c. Any letters of complaint from third party payors, IPRO, NYS Department of Health, or other regulatory entities. We recommend that you retain personal counsel for assistance in formulating written responses to such agencies.
3. Effective communication skills are essential when addressing a patient complaint. These should include:
  - a. Expressing concern for the patient's condition and wellbeing;
  - b. Being an active listener, and asking questions when appropriate;
  - c. Investigating complaints and following up as indicated; and
  - d. Discussing solutions to patients' issues and their available options.
4. Convey concern, avoid judgmental comments about patients and their families, staff, physicians and other practitioners, and never be adversarial or defensive.

5. Keep letters of response concise and simple. A copy of any written response relevant to the patient's care should be kept in the patient's medical record.
6. Conversations with patients can, and should, be documented in the medical record. It is appropriate to quote the patient when documenting their concerns.
7. Attorneys' requests for records may be an indication of a patient's unhappiness. The patient's medical record should be reviewed in conjunction with these requests in an effort to assess the potential for medical malpractice litigation.
8. Consider seeking guidance for unusual or difficult situations. MLMIC staff is available to assist insureds with handling complaints, forming responses, and determining potential exposure to claims of malpractice.
9. Never document any contact with MLMIC or your attorneys in the medical record.