

Tip: Handling Patients' Complaints Properly

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 physician office practices should have a policy or protocol in place to address patient complaints.

Recommendations:

1. One individual should be identified and consistently used as the primary person to address patient 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 that person. This should, at a minimum, include:
 - written or verbal complaints regarding medical care;
 - billing or payment issues that involve concerns about the clinical care; and
 - 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.
 - Express concern for the patient's condition and wellbeing.
 - Never be adversarial or defensive.
 - Be an active listener and ask questions when appropriate.
 - Avoid judgmental comments about patients and their families, or negative remarks about staff, physicians, or other providers.
 - Investigate complaints and follow up as indicated.
4. Conversations with patients should be documented in the medical record. It is appropriate to quote the patient when documenting their concerns.
5. Keep letters of response to complaints concise and simple. A copy of the written response should be kept in the patient's medical record.

6. When complaints involve clinical issues or are complex, physicians or other providers should be involved in addressing the situation.
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 when presented with unusual or difficult situations. MLMIC staff is available to assist insureds with handling complaints, formulating responses, and determining potential exposure to claims of malpractice.
9. Never document any contact with MLMIC or your attorneys in the patient's medical record.

OFFICE POLICY AND PROCEDURE

CHECKLIST

HANDLING PATIENT COMPLAINTS PROPERLY

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 physician practices should have a policy or protocol in place to address patient complaints.

	YES	NO
1. One individual has been identified and consistently used as the primary person to address patient complaints. This is often the office manager.	<input type="checkbox"/>	<input type="checkbox"/>
2. All staff know to whom complaints should be addressed, as well as what information constitutes a complaint that requires attention or intervention by that person. This, at a minimum, includes: <ul style="list-style-type: none"> • Written or verbal complaints regarding medical care • Billing or payment issues that involve concerns about the clinical care and • Letters of complaint from third party payors, IPRO, NYS Department of Health, or other regulatory entities. Counsel is retained for assistance in formulating written responses to such agencies. 	<input type="checkbox"/>	<input type="checkbox"/>
3. Effective communication skills are essential when addressing a patient complaint: <ul style="list-style-type: none"> • Concern for the patient’s condition and wellbeing is expressed • Never are adversarial or defensive • Active listening is used, and questions are asked when appropriate • Judgmental comments about patients and their families are avoided • Negative remarks about staff, physicians, or other providers are avoided • Complaints are investigated and follow up is performed as indicated 	<input type="checkbox"/>	<input type="checkbox"/>
4. Conversations with patients are documented in the medical record. The patient is quoted when documenting their concerns.	<input type="checkbox"/>	<input type="checkbox"/>
5. Letters of response to complaints are concise and simple. A copy of the written response is kept in the patient’s medical record.	<input type="checkbox"/>	<input type="checkbox"/>
6. When complaints involve clinical issues or are complex, physicians or other providers are involved in addressing the situation.	<input type="checkbox"/>	<input type="checkbox"/>



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HANDLING PATIENT COMPLAINTS PROPERLY (continued)	YES	NO
7. Attorneys' requests for records may be an indication of a patient's unhappiness. The patient's medical record is reviewed in conjunction with these requests in an effort to assess the potential for medical malpractice litigation.	<input type="checkbox"/>	<input type="checkbox"/>
8. Guidance is considered when presented with unusual or difficult situations. MLMIC staff is available to assist insureds with handling complaints, formulating responses, and determining potential exposure to claims of malpractice.	<input type="checkbox"/>	<input type="checkbox"/>
9. Contact with MLMIC or your attorneys is never documented in the patient's medical record.	<input type="checkbox"/>	<input type="checkbox"/>

The attorneys at Mercado May-Skinner* are available to assist you in the proper handling of a patient complaint. They may be reached at **(844) MMS-LAW1** (844-677-5291).

*The attorneys of Mercado May-Skinner are employees of MLMIC Insurance Company