How to turn complaints into *compliments*

In the first of three extracts from the upcoming second edition of his book, **Michael R. Young**¹ explains how to manage patient complaints.

No matter how well you think you are caring for your patients you are likely at some time to get complaints. Whatever the current protocols are for handling complaints under the NHS, or those from private patients under the Dental Complaints Service, it is good practice to have your own very robust complaints policy and procedure.

What is a complaint?

Basically it is an expression of dissatisfaction that requires a response. What do patients complain about? Basically, anything and everything. They will complain about:

- Treatment
- Service: cost, pain (continuing, or being ignored), conduct (including rudeness), getting access or not getting access to treatment, giving or not giving consent
- Communication: lack of it is usually at the heart of most complaints. Most complaints are about dentists, but some are about other members of the dental team.

at the outset. An apology is not an admission of liability or guilt, so don't feel that you should never apologise.

People often want an explanation and want to know:

- What happened?
- Why did it happen?
- What will be done to put things right?
- What action will be taken to resolve the matter?

'WHAT DO PATIENTS COMPLAIN ABOUT?'

BASICALLY, ANYTHING AND EVERYTHING...'

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What are people looking for when they make a complaint?

It might simply be an apology. There is anecdotal evidence that some complaints escalate because someone did not say 'Sorry'

- What is being done to stop this happening again?

You have an ethical duty and an obligation to address any complaint, no matter

how unfounded you think it may be. Notwithstanding these obligations, your practice complaints procedure must be rigorous, transparent and fair.

What should you do when a patient makes a complaint?

The first thing you must *not* do is treat it as if it is trivial and therefore not important. Your natural reaction might be one of anger and disbelief, but you must curb your feelings and remain objective. You might decide to categorise complaints as being either 'minor' or 'major', but I think that this can be misleading and potentially confusing. It is better to regard all complaints as serious.

I heard of a dentist who had so little regard for their patients that whenever they received a letter of complaint they used to throw it in the bin. I am not sure what happened to this particular practitioner, but this sort of behaviour is unacceptable.

If the complaint is initially made verbally, ask to have it in writing (you need a permanent record for your file). If it is not clear exactly what the complaint is about ask for clarification. You do not, after all, want to resolve the wrong complaint. You should always set out to try to resolve complaints within the practice ie achieve local resolution.

Acknowledge receipt of the complaint in writing. You should state your interpretation of the complaint (this will preclude possible misunderstandings later), what you are going to do next and when they can expect to hear from you again. Your initial 'holding letter' (Fig. 1) should be sent as soon as possible and certainly within no more than five working days. Tell them that you will respond fully in no more than ten working days. However, if you feel that you will need longer then ask if they would mind if you extended this period. Always set time limits and stick to them. Nothing will infuriate the complainant more if you don't.

The next step is to investigate the complaint and to gather all relevant information. Do not conduct a witch-hunt or pre-judge.

Hold this thought: it is a sad fact that in any given event there are always three sides to the story: yours, theirs, and somewhere in between, the truth.

You must not be selective with your evidence gathering. Keep meticulous notes of all conversations you have with other practice members about the complaint.

Once you have completed your fact-find you can either report back to the patient in writing or, and this should always be your

Fig. 1 Holding letter

Your letter acknowledging the complaint need be no more than this.

[insert the patient's name, address, and the date of your letter]

Dear [insert name of person making the complaint]

I acknowledge receipt of your letter of complaint dated [insert date].

My understanding is that [insert outline of complaint]. If this is not correct please contact [name of person and their contact details] as soon as possible.

I am currently investigating the circumstances surrounding your complaint and you will hear from me again no later than [insert date].

Thank you for letting me know of your concerns, and for your patience while I explore this matter fully.

If you have any questions concerning this letter, or would like to discuss the complaint further, please contact [name of person and their contact details].

Yours sincerely

[insert name and job title].

preferred option, at a face-to-face meeting. It is best to have, say, your practice manager or senior receptionist present to take notes. Suggest to the patient that they bring along a relative or a friend for support. This meeting could be crucial to the outcome of the complaint so it is important that you show the complainant that you are sympathetic to their point of view.

Hold this thought: the art of complaint resolution is conciliation, not conflict.

It is at this stage that you have the opportunity to show them that you are totally professional, reasonable and unbiased, which hopefully will impress them, and this then may greatly influence their opinion of you in the future. Conducting yourself well at this stage could not only help to (re-) build their trust in you as a dentist, but could also win their respect for you as a person.

End the meeting by agreeing what is going to be the next step. This may be the end of the matter or you may have to give an undertaking to change certain aspects of your practice's procedures so that the same thing does not happen again. You may choose to report any changes you make back to them. You may even want to thank them for drawing any shortcomings to your attention. Confirm in writing the main points of the discussion and any action points that arise.

Hold this thought: when responding to a complaint you must always address every point raised by the complainant.

The objectives of your practice-based complaints handling system should be:

- To enable your patients to express

comments, suggestions and complaints to the practice whenever they feel dissatisfied with the service they have received

- To provide them with an explanation of what has happened and, where appropriate, an apology and an assurance that the practice has taken steps to prevent the problem recurring.

You can only successfully defend a complaint if you have comprehensive, contemporaneous records to support your case, and these begin with the patient records. A patient's notes or records should always contain comprehensive details about:

- Their personal details
- Their full, up-to-date medical history
- A full dental history
- A social history
- Any current dental complaints
- Treatment plans and the likely cost
- Their consent to any treatment
- What treatment they have received and why
- The type, quantity and location of any local analgesia, general anaesthesia or sedation used
- What treatment they have refused and why
- Any advice they have been given
- Whether or not they accepted the advice
- Information about any referrals
- Details of any unusual discussions or conversations, not just between the clinicians and the patient, but also between the patient and employees
- Financial transactions.

Entries should be made in such a way that any employee reading the records would be able to see instantly what treatment the patient has had done, what is to be done next and why. Your nurse and receptionist should be authorised to make entries in the records when they think it is appropriate, and they should get into the habit of doing so, having first been told that anything they do write can at any time be read by the patient. Sometimes patients will say things to them that they would never say to you.

Poor records will make it more difficult for you to fight off a complaint. Excellent records won't guarantee you'll win, but they will make it less likely you'll lose. There is one message that constantly and consistently comes from the defence organisations, which is 'Keep good records!' It seems so obvious and yet some dentists refuse to heed their advice.

The majority of patient records are nowadays computerised, which may seem convenient, but it brings its own risks as far as litigation goes. The people who produce the computer programmes that allow dentists to hit one key and enter 'Scale and polish' in the patient's records, or hit another key and 'Local, prep, imp, shade' miraculously appear, again, in the patient's records, have no idea about how to write good records. You need to have absolute control over what you write, total flexibility, plus the ability to vary the narrative according to circumstances.

The first thing clinical negligence lawyers and their expert witnesses will home in on are poor clinical records when advising their client in a civil case. Computer generated records that are no more than a scant account, which are unclear, or which are barely comprehensible are the claimant's best friend.

Entries such as 'Exam. Scale and polish' say nothing about whether an examination was carried out or whether it was proposed, and the same goes for the scale and polish. It is better to write too much than too little.

Hold this thought: no records, no defence.

If despite your best efforts to resolve their complaint, the patient ends up leaving the practice, try to identify where you might have gone wrong. Sadly, it might be that the patient was never going to be satisfied with anything you did. If, however, they decide to remain at the practice, then make sure that your attitude towards them does not subtly change, and that there is no animosity, such that they no longer feel welcome. The fact that they have chosen to stay says a great deal about you and your practice.

Handling complaints can sometimes be extremely difficult and is always extremely stressful; this is why you must have a good system. Everyone in your team should be familiar with and understand how the system works.

There is always an expectation on the part of the complainant that something will be done to prevent the same thing from happening again, so see that it doesn't.

'HOW TO HANDLE COMPLAINTS EFFECTIVELY AND EFFICIENTLY SHOULD BE PART OF YOUR CUSTOMER CARE PROGRAMME'

The dentist/patient relationship is not all one-way traffic: don't feel that you can never ask a patient to leave your practice. Don't make your job more difficult than it already is by continuing to deal with people you may never be able to please.

Legitimate complaints identify weaknesses in practice procedures and gaps in staff training. Very serious complaints concerning possibly sensitive professional issues should remain confidential. Less serious ones should be discussed in staff meetings and used as a way of improving the practice. How to handle complaints effectively and efficiently should be part of your customer care programme and every member of your team should receive training in how to identify and diffuse potential complaints.

In all the years I was in practice I was fortunate never to have a complaint against my practice or me. I maintained all the records I needed for audit and conscientiously sent them off each year to the primary care trust, but my practice-based complaints system was never 'tested', and I was curious to see whether or not it would actually work if someone did make a complaint.

Together with my practice manager, we identified a patient, someone who had been with the practice for years, whom we knew was not totally happy with her new lower full denture. She had been back a few times saying that it rubbed her, but the feeling

we had was that she just did not like the denture. We contacted her and encouraged her to make a formal written 'complaint'. We then went through the practice's complaints procedure to see if it worked. It did! The lady got a new denture that she was much happier with. I found out that my complaints system would work if it were ever put to the test. I did have to ask a few patients to leave the practice. I always did this in writing. I simply told them that it had become obvious that my practice was no longer able to meet their expectations. Life's too short to bother with people who you will never please.

How can you turn a complaint into a compliment? By dealing with it professionally, quickly putting things right and making sure that the same thing never happens again.

I've noticed a trend among companies to use the word 'feedback' when describing what is obviously a complaint from a customer. They do this because they don't have to go to all the time, trouble and expense of dealing with and responding to a 'complaint'. All expressions of dissatisfaction are complaints and require a response.

It is an unwritten law that when something goes wrong with one person, things continue to go wrong with that same person. When a business makes one mistake for a customer, they continue making mistakes, compounding the original error. However, smart businesses have latched on to the idea that if, after the first mistake, they can recover the situation and impress the customer by putting things right quickly and without anything else going wrong, the customer will be so impressed that instead of never dealing with the company again, they become converts.

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