



**For information
on 22.9.2022**

HAB-P327

Hospital Authority

Annual Report on Public Appreciation, Feedback and Complaints Management 2021/22

Advice Sought

Members are invited to note the Annual Report on Public Appreciation, Feedback and Complaints Management 2021/22 (the Annual Report) at the **Annex** for the period from 1 April 2021 to 31 March 2022 for information and comment, if any.

Background

2. Trustful doctor-patient partnership helps improve clinical outcome, satisfaction of the healthcare team and performance of the organisation. An effective feedback and complaint management system constitutes a crucial component in sustainable patient relations development. Over the years, Hospital Authority (HA) has set up an established structure and system to collect and handle public feedback, appreciation and complaints. To support the provision of people-centred care, HA has been striving to promote a positive culture towards public feedback and complaints.

3. As part of the ongoing efforts to enhance organisational transparency and public accountability, HA publishes an annual report to set out the key components of its public feedback and complaint system and the related works of the year for public access. This paper summarises the Annual Report 2021/22 covering two main aspects, which are the HA Complaint and Feedback Management and HA's promotion of positive complaint and feedback culture for service enhancement, with details provided in the Report at the **Annex**.

The HA Complaint and Feedback Management

(Part II of the Report, Pages 3 to 21)

A. Two Levels of Complaint Handling

4. Since its inception, HA has established a two-level system to handle public complaints. The system aims to provide a readily accessible mechanism to deal with all complaints received from the public. All first-time complaints are handled by the respective hospitals/clinics. Very often, complaints may arise from queries or unmet expectations on

certain aspects of the medical treatment or administrative procedures. The “complainants” in these situations may be seeking clarifications or assistance to navigate in the public hospital system. Local resolution, with appropriate assistance to be provided to patients and complainants as far as possible, is therefore the main emphasis in the first-level handling.

5. Complainants who are dissatisfied with the outcome of their complaints can appeal to the Public Complaints Committee (PCC) for a review of their cases. In addition to its role as the final appeal body within HA, PCC also assists HA in ensuring effective governance and credibility in complaint management.

B. Highlights of Appreciation, Feedback and Complaints in 2021/22

6. During the year, HA and its hospitals/clinics received in total 37 739 appreciation¹, 18 560 feedback², 1 637 complaints³ and 20 223 request for assistance cases. For appreciation cases received, both the number and rate per 10 000 attendance were significantly higher than those of complaints for most of HA services, indicating that the majority of patients were satisfied with the HA services they received.

7. In 2021/22, HA faced many unprecedented challenges under the “Emergency Response Level” of COVID-19, including the intermittent service adjustments. In comparing with the previous year, a decrease of 4% in appreciation received by hospitals was noted, primarily due to a sharp drop during the fifth wave of COVID-19 pandemic in the first quarter of 2022, whereas the increase of 6% in complaint cases was on par with the change in service volume in inpatient and specialist outpatient services. Similar to the previous years, medical services, staff attitude and administrative procedures remained the top three natures of complaint cases received by hospitals. Meanwhile, there was a significant increase in feedback received (27%), largely on administrative procedures related to COVID-19 contingency measures and special mode of service delivery, such as rescheduling of appointments, drug refill service, vaccination related issues and visiting and accompany labour arrangement.

C. Work of the Public Complaints Committee

Workload and Performance

8. In 2021/22, PCC held 16 meetings, processed 256 appeal cases and concluded 237 cases. Majority of cases (93%) could be completed within the target response time of six months. The trends and categories of all PCC cases, i.e. appeal cases, were monitored. Relevant data on the categories of complaints over the past five years are shown on page 15 of the Report.

¹ Appreciation – an expression of gratitude

² Feedback – an expression of opinion

³ Complaint – an expression of dissatisfaction

9. For all the appeal cases, PCC conducted a fundamental review of all the facts and issues, and enlisted views from independent medical experts if required. In most cases, PCC found that the subject matters of the complaints had been properly dealt with by the hospitals concerned. Out of the 237 concluded cases, three were substantiated and 18 partially substantiated. PCC identified areas for improvements in individual cases for which recommendations were made to prevent future occurrence. Follow-up improvements were noted in areas such as enhancing documentation in medical records, reinforcing staff compliance with prevailing guidelines, strengthening communication with patients and families, stepping up monitoring of patient's condition after significant changes in prescription or treatment plan and improving complaint investigation and handling.

10. On the unsubstantiated cases, detailed analysis and PCC's observations made in the course of complaint handling are set out on page 17 of the Report. These complaints arose mainly because of lack of understanding regarding medical care and unmet expectations regarding HA services.

Initiatives to Improve Handling of Appeal Cases

11. In addition to the handling of appeal cases, PCC had implemented/continued various initiatives to improve its credibility and effectiveness in complaint management:

- (i) Strengthened monitoring of recommendations made from complaint cases to prevent recurrence of similar complaints for service improvement, including review of follow-up actions reported by clusters/hospitals and HA by PCC. HA senior management also received regular progress reports for promoting lessons learnt from complaints among hospitals. In the Annual Report (pages 19 to 21), three cases were selected as illustrations to demonstrate HA's efforts in striving continuous service improvement arising from complaint cases;
- (ii) Monitored first-level complaint handling by regularly reviewing the case handling, performance and issues in patient relations and complaint management of clusters/hospitals;
- (iii) Enhanced transparency and credibility of PCC by reporting its work to HA Board, uploading the Annual Report covering the work of PCC on the HA website to facilitate public access, and engaging Patient Relations Officers (PROs) and clinical leaders to attend PCC meetings to strengthen mutual understanding and collaboration between hospitals and the Committee; and
- (iv) Conducted the annual self-assessment on its work, having regard to its terms of reference. In response to comments on the mix of membership, the size and composition of PCC were reviewed with the appointment of five new members of different professions to fill the vacancies left by five retiring members. There was also membership rotation amongst the Case Panels to ensure a balance of expertise and experience in complaint assessment.

HA's Promotion of Positive Complaint and Feedback Culture for Service Enhancement

(Section III of the Report, Pages 22 to 31)

12. Feedback, both positive and negative, from patients, their families and the community is a valuable source of recognition to our staff and service as well as a driving force for our continuous improvement. Over the years, HA has been striving to promote a positive culture towards feedback and complaints for service enhancement. The initiatives taken in 2021-22 are as follows:

A. Patient Experience Surveys (PES)

13. In accordance with the HA's PES Service Plan⁴, a PES on Specialist Outpatient Service originally scheduled for 2020, was postponed to August 2021 due to the COVID-19 pandemic. Data collected was being analysed and the results would be released in late 2022.

14. Structured mechanisms are in place to drive improvement actions to enhance the information giving process identified in previous PESs. The Patient Discharge Information Summary (PDIS) project was piloted in the medical and geriatric wards to provide a clear and concise summary of important medical advice to facilitate patients and care givers for better self-care. With the positive responses received, PDIS was rolled out to other specialties and incorporated in mobile application HA Go. With a view to providing more user-friendly channels for gaining feedback from the public, HA's website was revamped, and QR codes and electronic forms were provided at some hospitals. HA would further explore the use of its HA Go for receiving public feedback and appreciation.

15. PES serves as an important platform to enhance patient engagement throughout the care process. In taking forward, HA will work in collaboration with stakeholders and take reference of the development of other healthcare systems in planning future cycles of PES and developing new specialties/diseased-based PESs.

B. Enhancing Capacity and Staff Competencies in Conflict Resolution

16. With HA's increasing service volume and complexities, and public awareness of the right to complain, demands on complaint handling personnel service/support to mediate disputes are on the rise. There is also an increasing trend in the complexity and severity of complaint cases with involvement of high-powered complaint redress organisations requiring intensive coordination and collaboration across hospitals/clusters. In the face of these challenges, a multi-pronged approach is adopted to enhance capacity and staff competencies in conflict resolution. Details are given as below:

- (i) Building a cluster-based Patient Relations Office (PR Office) structure
 - Under the corporate direction of building a cluster-based PR Office structure to enhance the cluster governance structure and capacity in

⁴ HAB Paper No.196 on "Hospital Authority Patient Satisfaction (Experience) Survey" discussed on 26 September 2013

complaint management, PR Offices were established at five clusters. Further implementation in the two remaining clusters was planned for 2022-23.

(ii) Launching Training and Development Programmes for Complaint Handling Staff

- While classroom training was suspended due to COVID-19 pandemic, HA leveraged on the use of information technology and online platform to launch a monthly webinar series named 「5:00 拆彈大本營」 to share strategies and smart tips in patient relations and complaint management.
- Under the Staff Development Rotation Programme, PROs and Complaint Managers at clusters/hospitals and Head Office were provided with the opportunities for rotation to enhance their exposure and experience and facilitate succession planning for the complaint management service.

(iii) Launching Cluster Partnership and Attachees Programme on Complaint Management

- To foster staff's understanding of HA's complaint management work and share the common value that having good patient relations is the responsibility of every staff, cluster/hospital staff of different disciplines, including PROs, clinical leaders and managerial staff were invited to attend PCC meetings.

C. Promoting Positive Patient Relations and Conflict Resolution to Different Stakeholders

17. HA continued to promote positive patient relations and conflict resolution to other parties. Training and sharing on patient relations and complaint management were organised for working partners such as patient groups and students of a Nursing Diploma Programme of The Chinese University of Hong Kong. In support of the Government's promotion of mediation, HA shared its use of mediation skills in conflict resolution in hospitals in the Department of Justice's annual mediation promoting event. As a recognition of HA staff's exemplary complaint handling and customer services, one clinical leader and one PRO received the Ombudsman Awards 2021.