

Corec Vision

Standards & Regulation Division Newsletter

“A Snapshot of the Ministry’s Complaint Management System”



“The achievements of a system or program are the results of the combined efforts of each individual.”

-Vince Lombardi-

The Investigation and Enforcement Branch, Standards & Regulation Division extends appreciation to the Regional Health Authorities for its continued support throughout these past two years since the advent of COVID-19.

As part our commitment to strengthening the relationship with you we will be sharing the achievements for the FY 21/22 – FY 22/23, our strategic focus for the next five years and highlighting key take away from the complaint data for 2022/23 financial year.

PERFORMANCE REVIEW

For the period under review with your help we were able to:

- ❖ Audit of **100% of the public hospitals** and **19% of the types 3, 4 and 5 health centres** with respect to the requirements of the Complaint Management System (CMS).
- ❖ **Developed the workplan** for the **Client Relations Management Committee** responsible for reviewing the CMS.
- ❖ Conducted training within St. Ann’s Bay Hospital, St. Elizabeth Health Services, WRHA and SERHA - resulting in **423 staff being trained in the CMS**.
- ❖ **Develop three 2D animation about the CMS** for use on the website and social media platforms for MOHW and the RHAs.
- ❖ **9.5%↑ in cases closed/resolved within lead time** relative to FY 2021/22 (for nonlitigious cases).

This issue

CMS Performance Review **P1**
(FY 21/22 - 22/23)

Strategic Focus **P2**

Managing Expectations **P3**



What did not work well for us?

1. Even with the increase in the number of cases closed/resolved within the lead time we had a **41% ↓ in cases closed/resolved**.
2. We were not able to conduct the scheduled training of all Complaint Handling Officers, Parish Managers, CEOs, and HODs across two RHAs.
3. We were not able to monitor the progress of the measures to address the gaps identified in the audits.
4. Only three (3) of the six (6) sub-working groups of the CRM Committee were active in FY 2022/23.



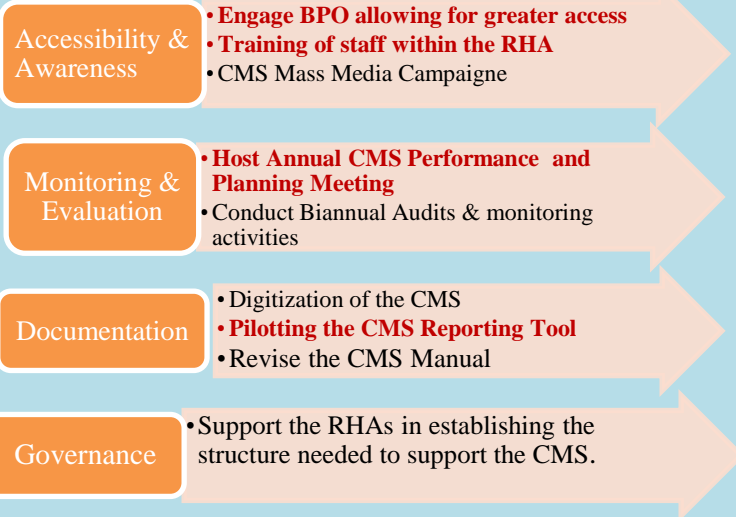
STRATEGIC FOCUS

The optimization of the CMS can be accomplished if the areas illustrated in the diagram are prioritized within the next 3 – 5 years.

Building Awareness & Increasing Accessibility

For the FY 2022/23 the focus will be on training the **complaint handling officers, CEOs, Parish Managers, Senior Medical Officers, Medical Officers of Health and HODs** within the NERHA and SRHA.

This will be a 3 day face-to-face training - 2 days for the complaint handling officers and 1 day for the doctors and nurse and the HODs.



The 2D animations will be disseminated in Q1 of FY 2023/24 for use on social media pages and the websites for the respective RHAs.



For 2023/24 FY the BPO engaged **will receive, refer complaints and follow-up** until they are escalated or submitted for case closure.

Documentation Standardization

The **CMS Summary Reporting Template and Guide** were developed to assure the standardization of the performance reporting by complaint handling officers in the RHAs and to ensure the national complaint data represented the sum total of all complaints.

For FY 2023/24 the aim is to **complete a pilot of the reporting tool** in the **hospitals within SERHA and WRHA** by the end of Q1 and to **fully implement** the tool in all **hospitals** by Q4.



Monitoring & Evaluation

The **Annual CMS Performance Review Meeting** will allow us to track performance, recognize achievements and make plans for improvements. The IEB will report on the progress of the CRMC while each RHA to present on complaint statistics, status of actions to address gaps identified during the audits.



“High achievements always takes place in the framework of high expectations.”
-Charles F. Kettering-

MANAGING EXPECTATIONS

To accomplish these tasks and manage the risks associated each RHA will need to:

1. Attend one of the **45 minutes virtual meetings** scheduled for **17th, 19th, 21st of April 2023** to discuss the expectations below.
2. Provide the **list and contact details** of all complaint handling officers within primary and secondary care. Provide the name and contact details for a **primary and secondary officer** the **BPO will maintain contact** for the referral of complaints and follow up on case status **by the end of March 2023**.
3. Have a **generic email addresses** where client feedback including complaints are sent for hospitals, parish health services (for health centres) and regional offices e.g. patientaffairs@serha.gov.jm.
4. Continue the implementation of actions to remedy gaps identified in the CMS audit and be in a position to present on the plans and the progress made at the **annual CMS performance review and planning meeting** scheduled for the week of **June 30, 2023**.
5. Facilitate the 2 half day virtual training of the complaint handling officers in SRHA and NERHA regarding the CMS Summary Report Tool, scheduled for **July 19- 20, 2023 & July 26 – 27, 2023**.
6. Facilitate the release of Complaint Handling Officers for an **Appreciation and Award Ceremony** during the **week of October 6, 2023**.
7. Facilitate the **3 day face to face training** for SRHA and NERHA, scheduled for **September 4- 8, 2023 & September 25- 29, 2023**, respectively.
8. Complaint Handling Officers to **submit CMS Summary Report** to the RHAs and IEB, **5 working days after each month**.
9. Recommence **Complaint Review Meetings** either at the facility, parish or regional level to **facilitate review of the complaints** - their status, identify gaps, root and apparent causes and required corrective actions.
10. **Post 2D CMS animation videos** by the end of April 2023 **on the RHAs website and social media platforms** and provide analytics upon request.
11. **Manage complaints** in keeping with the **CMS Response Standard**.



The Investigation & Enforcement Branch stands ready to support the RHAs in meeting these expectations.

We welcome your feedback on what you would need from us to support you better.