

# CONSIDERATIONS WHEN DRAFTING RESPONSES TO HOSPITAL / HEALTH AUTHORITY COMPLAINTS

The following is intended as general information only on considerations that should typically be given by physicians when responding to a Hospital complaint, when a written response is required. Not all of the points will necessarily be applicable in every case. Moreover, different considerations may be required in responding to specific types of complaints. You are encouraged to consult with the CMPA prior to responding to a Hospital complaint.

# **Before Preparing Your Response**

- 1. Consider the deadline for providing your response. Allow ample time to review the records and complaint documentation and to draft your response.
- 2. Obtain proper authorization prior to accessing medical records. Carefully review all documentation sent by the Hospital Representative (Patient Relations Office / Ombudsman / Medical Examiner) in respect of the complaint, including the summary of the complainant's concerns and all additional documentation and information relevant to the complaint (*e.g.* medical records). Do not alter the existing medical record in any way.
- 3. Review any relevant Hospital policies and bylaws.

### **Preparing Your Response**

#### **General Comments**

- 4. Prepare your draft response on your professional letterhead in business letter format.
- 5. Address your response to the Hospital representative (*e.g.* Patient relations Office / Ombudsman / Medical Examiner) with whom you have been in contact, unless directed otherwise. Do not address your response directly to the complainant. You may wish to consider using one of the following salutations: Dear Dr., Ms., Mr. or Mrs. \_\_\_\_\_ [insert Hospital representative's surname].
- 6. Include the following subject line in your response: **Re: complainant's name, complaint reference / reply number** (if applicable).
- 7. Use a respectful and professional tone. While you may disagree with the complainant's comments with respect to your care and/or conduct, avoid appearing defensive or condescending in responding to the complainant's concerns.
- 8. Refrain from using unnecessary medical jargon or abbreviations in your response. If it is necessary to use such terms, consider offering a definition that laypersons can understand. A copy of your response may be provided to the complainant by the Hospital Representative. It might also be reviewed by others who do not have a medical background.

9. Where appropriate, express sympathy or regret for the patient's concerns.

## **Proposed Outline of Response**

- 10. In the introduction to your response, acknowledge receipt of the materials received regarding the complaint. State clearly how you intend to structure your response (*e.g.* provide a summary of pertinent clinical details followed by specific responses to the concerns raised by the complainant.)
- 11. Briefly discuss your professional credentials, including hospital and/or clinic affiliations, years in practice and current nature/scope of your practice, *etc*.
- 12. Provide a factual summary of the clinical care related to the issues raised in the complaint. Avoid reiterating all of the information in the medical record, but outline important details related to the complaint. Where applicable, reference the relevant history, findings on examinations, diagnoses, treatment plans and follow-up plans. Use direct quotations and specific references to the medical record where appropriate and add explanatory comments where needed. Double-check your records to ensure your comments are accurate.

# Specific Considerations

- 13. Address each of the concerns raised in the complaint, where possible. Pay specific attention to any issues identified by the Hospital representative (Patient Relations Office / Ombudsman / Medical Examiner) in their communications with you.
- 14. For communication-based complaints, consider whether it is appropriate to deny statements or actions that you did not make or to specify if you cannot recall making such statements.
- 15. Describe the nature of the care provided and your rationale for any relevant clinical decisions, where necessary and appropriate. While other health care providers may have been involved in the patient's care, focus on addressing the care you provided to the patient and avoid commenting on the care provided by others.
- 16. Where your care and/or conduct deviated from practice guidelines, consider explaining why and consider referring to literature or practice guidelines that support these clinical decisions.
- 17. Demonstrate insight into the concerns raised by the complainant. More specifically, the Hospital Representative (Patient relations Office / Ombudsman / Medical Examiner) may be interested in knowing whether you have made, or intend to make, any changes and/or improvements to your practice as a result of this complaint.
- 18. Where appropriate, identify and provide contact information for staff members (*e.g.* secretary, nurse) who have knowledge of the matter. Do so under separate cover.

# **Finalizing Your Response**

- 19. Confirm that any references made to the record are accurate.
- 20. Leave yourself enough time to put aside your draft for a day or two. Re-read your draft with a fresh perspective and make any necessary changes.
- 21. Allow sufficient time for review of the draft by the Physician Advisor and their team, and for it to be sent back to you, in advance of the deadline.
- 22. Ensure the document is clearly marked "DRAFT" and forward to the CMPA Physician Advisor, preferably using CMPA web mail. Do not sign the draft version that is sent to the CMPA for review.
- 23. Once the draft has been finalized, and reviewed by a Physician Advisor at the CMPA, you should sign your response using your full name and professional designations.