



## **ABSTRACT**

Grievance Redressal System in the State Introduction of grievances redressal system in Government Hospitals - Utilizing the existing Control Room with 4 digit toll free number 1056 in the Districts - orders - Issued.

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Health and Family Welfare (E1) Department

G.O. (Ms) No.90

Dated: 17.3.2008.

Thiruvalluvar Aandu 2039,

Sarvajith, Panguni-4

Read:

From the Director of Public Health and Preventive Medicine, Chennai. D.O. Letter No. 44434 / Plan-I/07/A1 dated 12.12.07.

### **ORDER:**

Tamil Nadu is the only state in the country where Government is the dominant provider of the health services for the public. The Government health system in Tamil Nadu delivers the services through well laid network of Health Sub-Centres, Primary Health Centres, Government Hospitals and Medical College Hospitals. The availability of trained human resources, good quality drugs, and easy accessibility to the Government health institutions are the important factors for the steady increase in the utilization of Government health services. In addition to the achievement of quantitative health indicators, there is an urgent need to focus more on quality of health care. It is difficult to improve the quality of health services unless the views and perception of the clients are taken into consideration. More over the health functionaries have lot of useful suggestions to offer to improve the health system. There is no proper system to collect their views. Corruption is one of the important reasons for the delay in provision of care. To improve the quality of care in the health institutions, multipronged approach is needed. To improve the accountability of the service providers the best way is to get the feed back from the beneficiaries of the health institutions. The then Honourable Minister for Health has also announced in the Tamil Nadu Legislature during the budget session 2006-2007 that vigilance cells will be formed to weed out the corruption in the hospitals. Accordingly, the Government have proposed to introduce Grievances Redressal System in all Government Hospitals in the State.

2. The objectives of the Grievances Redressal Systems are:

To give an opportunity to the users of the Government health institutions to air their grievances to the appropriate authorities.

To reduce the delay in the provision of care by prompt response to the grievance of the users.

To encourage the general public and the users of the Government health institutions to offer their suggestions for the better functioning of their institutions.

To analyze the grievances and suggest appropriate changes in the functioning of the Government health institutions and to monitor the improvement in the performance of the institutions.

To create awareness among the public about the services available in the Government health institutions and sensitise their rights to use the Government health institutions

3. The Director of Public Health and Preventive Medicine has sent a proposal for launching of 'Hospital Grievance Redressal System in the State' to help the poor to get quality health care without delay and to bring accountability among the service providers. The details of the proposals are as follows;

The proposed grievances redressal system in the Government Hospitals in the State which would not only help the poor to get good quality care without delay but also bring in a sense of accountability among the service providers.

The prompt response to the grievances of the public would encourage the public to air their grievances through this mechanism. In addition to grievances, this system should also encourage the general public and users of the hospitals to give their suggestions for the better functioning of the hospitals.

Initially the offenders who are responsible for the lapses should not be punished but only warned. The repeated offences by the same individual in the hospital warrants serious disciplinary action.

The conduct of verbal autopsy of maternal deaths during the last 3 years in which the relatives of the deceased narrate the events leading to the death of the mother have improved the accountability of the service providers and the quality of maternal care improved manifold in Government health institutions.

The Grievances Redressal system would cover the functioning of, Health Sub-Centres, Primary Health Centres all Government Hospitals and Medical College Hospitals and their attached institutions and will function round the clock on all days.

No separate staff need be sanctioned for this intervention. The services of existing supervisory staff, district level and state level officers will be entrusted to implement this intervention.

The existing ambulance control room will be used to receive the grievances and suggestions thro the toll free number 1056.

The control room will maintain a register to record the grievances/suggestions and record all grievances in the computer.

A soft ware will be developed with the help of NICNET which will help to group the different types of grievances and suggestions. Some of the grievances need immediate attention and some may need more time to solve. The software will analyze the grievances and pinpoint the deficiencies in the health system.

If the EMRI system becomes operational the grievances Redressalsystem will become part of the EMRI.

4. The Director of Public Health and Preventive Medicine has also suggested the following steps for the implementation of this intervention:-

To form a task force and the task force to prepare guidelines for the implementation of the grievances redressal system to sensitise all categories of staff including the district managers and State programme Officers.

All categories of staff including the supervisory staff, district and State Programme officers should undergo one day sensitization training. It should be made clear to all the staff that the purpose of this system is only to improve the efficiency of the Government health institutions and not to punish any individual Government functionary except in cases of corruption and proved negligence of care.

The existing district control room would be used to receive the complaints and suggestions from the public. The public and the beneficiaries of the hospital can call the toll free number 1056 and register their complaints and suggestions. The system would function 24 hours on all days.

Suitable provision is to be made to record all grievances and suggestions automatically thro a recording system.

A soft ware should be developed to group the complaints and suggestions and for the analysis. The task force would assist in the development of software. The NICNET may be requested to develop the software. The State Drug Controller already installed similar system to record the requests for information about the drugs.

5. The Government have carefully examined the proposal of the Director of Public Health and Preventive Medicine and decided to accept it. Accordingly, the Government issue the following directions:-

i) The Hospital Grievances Redressal System be introduced in all Government Hospitals in the State with the following procedures and guidelines:-

#### **PROCEDURES**

The client who wishes to redress any grievance should call 1056 and inform the control room staff. The control room staff will record the grievance / suggestions in the automatic recorder and also enter the grievance in the register and enter also in the computer.

For the grievances which are to be redressed immediately, the control room staff should call the district grievances cell officer over phone who will in turn contact the hospital concerned to solve the problem. It is expected that most of the complaints would be related to delay in the provision of care, the grievances cell officer nominated for the month should be responsive to the calls swiftly and take action. If he notices any delay even after his intervention, he would call the state grievances cell officer who would intervene and sort out the issue.

The suggestions given by the public, health staff including doctors would be classified and would be discussed during the weekly review meeting convened by the District Collector.

A state level task force and district level committee be formed to monitor the performance of the system. The recommendation of the state task force be used to bring out changes in the health system.

Each district should bring out a document annually how the public grievances have been redressed and how their suggestions have been used to bring out changes in the functioning of the health institutions.

If needed the annual document be made available in the Government website.

#### **GUIDELINES:-**

The most important part of this activity is the proper follow up of the action taken for the recorded grievances and the suggestions. Some of the grievances need to be attended immediately and some may need more time to solve the problem.

Some issues can be redressed at the institutional level, some at the district level and some at the state level. All the complaints and grievances need to be grouped according to the level of action to be taken.

Bulk of the complaints usually related to the swift action needed at the institutional level. These complaints are to be attended by the concerned officers immediately which would encourage more beneficiaries to use this facility.

All grievances should be reviewed every week by a committee at the district level and suitable scoring be evolved to rank the districts according to the remedial actions taken.

The review results may be published annually.

For every district a panel of officers be formed. Joint Director of Health Services, Deputy Director of Health Services, District Medical and Child Health Officer, Deputy Director (Medical), Deputy Director(TB), Deputy Director (Leprosy). Each officer should be nominated in rotation as nodal officer for one month and he is responsible for attending the grievances received thro 1056 from the public.

At the state level all the programme officers from Director of Public Health and Preventive Medicine, Director of Medical and Rural Health Services and Director of Medical Education be nominated as State nodal officer for one month in rotation.

If any of the nodal officer goes on leave, he should make alternate arrangements for sorting out the issues.

The Government nominate the Director of Medical Education, Director of Medical and Rural Health Services and Director of Public Health and Preventive Medicine as the Head for the Hospital Grievance Redressal System as far as the Hospitals under their control are concerned and direct them to conduct periodical meeting with Dean, Superintendents, Chief Medical Officers, Joint Director of Health Services and Deputy Director of Health Services for reviewing the redressal of the grievances.

A software for the system be developed by the NICNET in coordination with the working group to finalise the guidelines and the procedures for the recording, documentation and analysis of the grievances and suggestions.

The working Group be entrusted with the task of preparing the guidelines for the sensitization training for different categories of the health functioning and IEC material for the public.

To implement the programme, a State Level Task Force and District Level Committee for each directorate viz. Director of Medical Education, Director of Medical and Rural Health Services and Director of Public Health and Preventive Medicine be formed immediately.

The existing District Control Room and 4 digit toll free number 1056 be utilized.

6. The Director of Medical Education the Director of Medical and Rural Health Services and the Director of Public Health and Preventive Medicine are instructed to adhere the above instructions scrupulously and to ensure that the grievance redressal system in the Government Hospitals functions successfully and effectively.

/BY ORDER OF THE GOVERNOR/

V.K. SUBBURAJ  
SECRETARY TO GOVERNMENT.

To

The Director of Medical Education, Chennai-10.

The Director of Medical and Rural Health Services, Chennai-6

The Director of Public Health and Preventive Medicine, Chennai-6.

The Director of Medical and Rural Health Services (ESI), Chennai - 6.

All the Joint Director Health Services / Deputy Director of Health Services

The Health and Family Welfare (S) Department, Chennai - 6.

Copy to:

All District Collectors.

Sf / Sc.

/FORWARDED BY ORDER/

SECTION OFFICER