Introduction
International experience tells that patient and community feedback is important for setting service direction and improving service delivery, and effective complaints management helps identify and rectify system risks and deficiencies whilst reinforcing public confidence in the hospital system. Since its establishment in 1991, the Hong Kong Hospital Authority (HA) has set up a two-tier complaints system: the first tier at individual public hospitals and the second at the Public Complaints Committee (PCC) of the HA Board. All complaints are handled first by the hospital(s) concerned, and complainants are informed of the available appeal mechanism at the PCC. Although satisfactory resolution of individual cases is important, it is also essential to discern whether there are trends or systemic problems in the healthcare system.

Objectives
In the past two decades reporting of complaints and feedback data was done manually. The information collected was inevitably in piecemeal and demanded significant manpower for data analysis. The experience gained from a pilot project of a 3-year case audit(1) has facilitated the development of a more systematic, standardized and efficient way to conduct prospective monitoring of complaints and feedback received for quality and risk management purposes.

Methodology
Construction of an on-line Complaints & Feedback Management System (CFMS) was started in 2011. Through engagement and concerted efforts of complaint management officers of its 7 hospital clusters (41 public hospitals), the CFMS (targeted to commence phase 1 commissioning in 1Q 2015) upon full implementation would be able to provide a comprehensive overview of the range of issues that have been raised in the complaints received, or of the characteristics of the patients, factors
associated with or reasons for complaints, specialties/departments, and hospitals that have been involved in the complaints. The system would allow on-line input and reporting of statistics on complaints and feedback (the total number of cases annually in the region of over 2,000 and 14,000 respectively) and thus enabling generation of timely reports for meaningful analysis. By linking complaint data with the incident reports, CFMS would have a great potential to enhance interface between complaints and risk management for synergistic effect in quality improvement, facilitating long-term surveillance and analysis of particular systemic trends or problems.

**Result**

Given the diversity, complexity, and rising volume of patient activities in public hospitals, complaints by patients and members of the public are expected. It is envisaged that the CFMS will be a timely, cost-effective and sensitive system which has a great potential to enhance triage management and prospective monitoring of complaints, enabling early detection, diagnosis and monitoring of potential systemic problems for timely intervention, containment and prevention, thus minimizing the recurrence of similar complaints. In other words, allowing the hospitals the opportunity to effect “system change” and trigger or alert to the healthcare managers about possible system flaws that need to be dealt with. (1) The evolution of complaint management in the Hong Kong Hospital Authority. Part 1: Complaints management—a tool for system change? Hong Kong Med J Vol 10 No 4 August 2004.