

Grievance Redress Mechanism in the Ministry of Health Sri Lanka: Concept and implementation strategy

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Abstract: Grievance Redress system is an important mechanism to identify services delivery and fulfilment of needs of the people. It helps to identify gaps of the system and further help to shape the policies. Objective is to study the concept and implementation strategies of Grievance Redress Mechanism in Sri Lanka. A descriptive cross-sectional study was designed. The approach will enable a document assessment of the existing Grievance Redress Mechanism (GRM) within the Ministry of Health and facilitate identification of gaps and areas for improvement. Studying of literature was done to explore opportunities and best practices. Ministry of Health has started GRM on 2018 under the administrative purview of Additional Secretary Medical Services It operate as tier system. People can lodge grievances through QR code display in the institutions can call through hot line 1907 or can email

Strengthening Leadership and governance, Strengthening Human Resource Development Strengthening Inter institutional collaboration and Encourage Research and innovations are suggested to improve the Grievance Redress Mechanism.

Keywords: Grievance, Grievance Redress Mechanism, hot line, four tier system.

I. INTRODUCTION

Systems for resolving grievances are essential to guaranteeing the protection of patients' rights when they seek medical attention. Patient complaint data is a commonly used indicator of patient satisfaction and influences the effectiveness of the health system as a whole (1) It is universally accepted that information from patient complaints – a widely accepted measure of patient – provider relationship, can lead to significant improvement in the quality and performance of health services. Table 1 indicate Important definitions related to Grievances handling (2)

TABLE I: Important definitions in Grievances handling

Term	Definition
Grievance	An issue, concern, problem, or claim (perceived or actual) related to the environmental and social performance that an individual or community group wants addressed by the Government and/or its contractors.
Redress	To correct, remedy, or relief actions associated to a project. These actions may include among others culturally appropriate, provision of information, delivery of services, monetary compensation, etc. depending on the type of grievance and the judicial systems and customary dispute mechanisms.
Grievance Redress Mechanism (GRM)	A formalized way to accept, assess, and resolve community complaints concerning the performance or behaviour of the Government, it's contractors, or employees.

Grievance Redress Mechanisms (GRMs) have emerged as critical instruments for strengthening accountability, transparency, and citizen trust in public administration. (3)

A grievance redress mechanism offers a cost-effective method to report grievances and complaints and provides access to a fair hearing and remedy. Moreover, such a mechanism will also provide means to negotiate and influence health related policies that might adversely affect the public.

Objective

To study the concept and implementation strategies of Grievance Redress Mechanism in Sri Lanka.

Methodology

Study Design

This study will employ a descriptive cross-sectional study design. The approach will enable a document assessment of the existing Grievance Redress Mechanism (GRM) within the Ministry of Health and facilitate identification of gaps and areas for improvement. Studying of literature to explore opportunities and best practices.

Study Setting

The study will be conducted within selected institutions under the Ministry of Health, Sri Lanka,

Data Collection Method

Document review and media and secondary data was done for data collection

Document Review

Relevant policies, circulars, guidelines, institutional records, committee reports, and grievance registers related to the GRM will be reviewed to understand the existing framework and operational procedures

Media and Secondary Data Review

Selected media reports and publicly available information related to complaints or grievances in health institutions will also be reviewed to identify recurring issues and public concerns.

II. RESULT AND DISCUSSION

During the past decade, the Government of Sri Lanka (GoSL) has taken numerous initiatives at policy level to institute a mechanism to allow the public to voice grievances without restraints and address them effectively.

Charter of Patient's Right and Responsibilities, initiated in 2018 by multiple civil organizations and individuals including, the Sri Lanka Medical Association (SLMA) and the Peoples Movement for the Rights of the Patient and the Law and the Society Trust proposed among others, the right to humane treatment, right to information, consent, privacy and confidentiality, right to complaint and compensation as leading areas to be considered. But this charter not became a reality. Recent efforts were seen to establish charter for ensuring patient safety and wellbeing in Sri Lanka and it has been approved by sectoral oversight committee of Ministry of Health in July 2024. This draft also highlighted about the Grievance Redress Mechanism

The subcommittee on Beneficiary Engagement, Gender and Citizen Voice, appointed as a part of the extensive consultative and review process carried out by the Ministry of Health, was unanimous in expressing that 'the health system must increase patient empowerment and engagement in their health and offered a series of recommendations which included establishment of formal mechanism for Citizen Engagement and a Grievance Redress Mechanism'

National Health Performance Framework formulated with the aim of evaluating the health system performance at the national level and to facilitate the achievement of national policy objectives identified patient experience and action taken for complaint (4). Successful outcome of these indicators may be linked to the ability of the patients to voice their grievances in an effective manner

Ministry of Health has started GRM on 2018 under the administrative purview of Additional Secretary Medical Services It operate as 4 tier system. It includes

- National call centre
- Provincial level
- Regional Director of Health Services Level
- Institutional Level

National call centre which is called as Suwasawana is operating in the ministry, Medical officer, Call girls in three languages and development officers are working in the unit.

Grievance receiving channels

People can lodge grievances through QR code display in the institutions can call through hot line 1907 or can email suwasawana@health.gov.lk. Otherwise any case of corruption or fraud people can call to internal affair unit which. Table 2 shows contacts of internal affairs unit. Physical boxes also located in ministry premises and institutional premises for submitting grievance.

Table 2. Contact details of internal affair unit

No	Item	Detail
1	WhatsApp	0705305405
2	Phone	0112665596
3	Email	laumohfs@gmail.com
4	Postal Address	Internal Affairs Unit, Ministry of Health, No. 385, Rev. Baddegama Wimalawansa Thero Mawatha, Colombo 10.

Resolution process

The GRM is designated to resolve issues at the point of services or supervisory institutions.

1. **Initial Contact:** Complaints should first be made to the designated focal point (often a Medical or Nursing Officer) at the specific health facility.
2. **Timeline:** Facilities aim to resolve complaints within **7 days**.
3. **Escalation:** If a complaint cannot be resolved at the facility level, it is referred to higher administrative layers, such as the Regional Director of Health Services (RDHS) or the national Grievance Redress Unit.
4. **Feedback:** Complainants are typically required to sign a closure sheet once a concern is satisfactorily resolved. (5)

Essential features of GRM should (6)

- Positive approach demonstrating sincerity and concern
- Simple and user friendly system to register the grievance,
- A system to track, investigate, resolve and document the complaint
- Follow up and reporting mechanism
- Time bound redressal of grievances
- Mechanism to give feedback to complainant
- Confidentiality of complainants' details.
- One time registration for a grievance i.e. one grievance, one registration to prevent duplicity.

Considering above features there are gaps seen in process in follow up and reporting system and monitoring and evaluation

III. CONCLUSION

Ministry of Health has established Grievance Redress Mechanism and it is functioning with some challenges which need to be addressed. Recommendations are suggested through four thematic areas.

1. Strengthening Leadership and governance
 - Develop Monitoring and Evaluation frame work
2. Strengthening Human Resource Development
 - Recruit dedicated medical officer
 - Conduct training programmes for all staff
3. Strengthening Inter institutional collaboration
 - Regular coordinating meetings with provincial and District level officers/focal points
4. Encourage Research and innovations

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