

The Complainers

There she was. Sitting in the waiting room with her arms crossed, tut-tutting to herself and shaking her head mournfully every few minutes. We gazed at her from a safe distance while one of the nurses confirmed what we already knew; Mrs Easter was in the clinic. Mrs Easter was an unusual patient. Anxious about her ongoing follow-up in the ranibizumab clinic she had educated herself using both Google and the Daily Mail on the ins and outs of her condition and, although she always gave the impression of deeply distrusting whatever she was told in the clinic, she always paradoxically had a list of questions at each visit.

It then became a dangerous game of Russian roulette as to who would end up with this most interesting of patients. As her fading yellow set of notes made their way inexorably towards the end of the notes trolley the general mood became more despondent and finally the unlucky doctor would become apparent and a stressful half hour of questioning awaited. Mrs Easter was never happy. There were complaints about the wait, about the last injection being so very painful, about her vision being so badly affected and, despite the very best efforts of the hapless junior doctor who ended up seeing her, there was a statistical likelihood of some letter of complaint making its way shortly after the visit to the department. Her presence in the waiting room was akin to a malignant cell that alone might only drain the host of energy and ability to survive and adapt but in greater numbers had the potential to kill the very organism on which its own survival depended.

Sadly, Mrs Easter is not alone. There are three or four Mrs Easters distributed in other clinics and each and every consultant is blessed with their own collection, which due to their demanding and wearing nature tend to travel around the department like peripatetic salesmen desperately doing what they do best in trying to sell their distorted version of the truth to each new consultant they come across.

Perhaps the charitable would say that this failure is due to poor explanation

on the doctor's part; about the ideas, concerns and expectations of the patient not being adequately addressed; or because the structure of the NHS does not allow for more time to be spent with the anxious and for discontinuity in terms of staff to increase the concerns of some already anxious patients.

But this would not be fair. Much effort had been directed towards Mrs Easter and she remained stubbornly unmoved. A health service such as the NHS provides the poor with services they would otherwise be utterly unable to afford, with ranibizumab therapy being a prime example. The Mrs Easters of this world are ironically almost to a person benefitting from the presence of the service they so often are at pains to criticise, often forming ranks of unwitting volunteers for those organisations that seek to undermine and destroy the health system in its present form.

It is part of the human spectrum of diversity that a person every so often will become one of the great Complainers. With each of them being so difficult to placate, managing them is no easy task and other patients usually suffer as a consequence, with so much effort being directed at keeping a handful of patients happy whilst the others are seen quickly to make time to deal with the difficult ones. They are the ones more likely to get double slots, to see the boss at each visit, to go through quickly without waiting and to get home before anyone else, usually in order to write another vitriolic letter of complaint about the fire alarm testing system or the lateness of the ambulance service in picking them up.

Mr Jeffereys was not happy in eye casualty. He had seen a colleague due to flashing lights and floaters but openly questioned the competency of the ophthalmologist that had seen him, citing their race on numerous occasions as a possible contributory factor to his general dissatisfaction. After some time and effort calming this patient, an appointment was made for him to return in the afternoon to see a blonde blue-eyed European eye doctor, and all was well. He even wrote a letter of complaint that, were it not for its UKIP undertones,

might have been comically hilarious. Rather bewilderingly, interactions between the department and these individuals almost always end up with some kind of apology being issued or painful response drafted after depressing everybody involved with the details of the complaint and generally lowering the morale of everybody concerned, to no good end.

There is only one response to the Complainers that serves the dual purpose of boosting staff morale and discouraging others from frivolous complaints about a service they should be only too grateful to receive and taking attention away from real complaints that were they dealt with would result in an improved service. Both Mrs Easter and Mr Jeffereys and the other Complainers should be immolated in the middle of the waiting room using all the collected Daily Mail clippings that they have all collectively brought in over the years, as well as their letters of complaint, along with all the laboriously drafted response letters. Perhaps the staff and other patients could join in by contributing sheaves of printed Wikipedia entries about various eye conditions. But whereas this scenario is obviously not desirable and pretty much impossible anyhow; the consequences of spurious complaints on the hospital, the department and the individual staff members concerned are seldom taken into consideration and there are no 'rights of the wrongly accused ophthalmologist' to which we can refer and be defended by. Perhaps this is something that needs to change.

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