

TITLE: CONSUMER FEEDBACK AND COMPLAINTS

Document Type:	Procedure	Approved by:	District Director Medical Administration
Department:	G4QS	Section:	Governance for Quality and Safety
Author/Prepared by:	Catherine Riordan	Position:	Consumer Participation Coordinator

OBJECTIVE/EXPECTED OUTCOME:

Colac Area Health (CAH) actively pursues excellence in service and encourages consumer feedback through a responsive comments and complaints system. CAH welcomes feedback from consumers, family members who care for them and from staff about the safety and quality of care we provide. We are committed to an effective and fair complaints system and support a culture of openness and willingness to learn from feedback, including complaints. We are also committed to ensuring all complaints are managed in a sensitive, effective and independent manner.

Colac Area Health is committed to using feedback to drive continuous improvements in standards of care and the consumer experience.

SCOPE:

All staff, CAH wide embracing all consumers (patients, residents, clients and their carers and family members)

PRINCIPLES:

- To provide a service that meets the needs of our consumers, carers and their families
- We strive for a high standard of care and services
- We support a safe and just culture of openness and willingness to learn from incidents, including complaints
- We actively encourage feedback from consumer's, carer's and their families, and CAH staff about the safety and quality of care we provide with written information on the feedback mechanism provided.
- We are committed to an effective, fair and transparent feedback system
- We manage all complaints, without judgement or influence about resolution
- To record and monitor all complaints to achieve a satisfactory solution and continuously improve our processes and systems
- All complainants are treated with respect, sensitivity and confidentiality
- We strive to ensure consumers are well informed
- To ensure staff are informed of the comments/complaints processes on a continuous basis

PROCESS:**Feedback Mechanisms**

Consumers may provide feedback to the service through a variety of mechanisms including:

- Voicing their feedback to the staff member/manager providing the direct care
- By phone to the Governance, Quality and Safety Unit
- In writing to:
 - Governance, Quality and Safety Unit

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- Chief Executive Officer
- Relevant Director

- Via the CAH Website
- Completing the Tell Us your Experience [Form](#)
- Through participation in the Victorian Healthcare Experience and/or other consumer surveys

Aged Care Complaints

In accordance with the Aged Care Quality Standards, Colac Area Health is committed to ensuring residents, their families and carers are encouraged and supported to give feedback and make complaints.

Colac Area Health has processes in place to ensure appropriate action is taken to review and resolve Aged Care Services complaints.

Colac Area Health promotes and prioritises the following in accordance with the Aged Care Quality and Safety Standards:

- residents, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints;
- residents are made aware of and have access to advocates, language services and other methods for raising and resolving complaints;
- appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong;
- feedback and complaints are reviewed and used to improve the quality of care and services.

Reporting to the Aged Care Quality and Safety Commission

Please refer to the link provided:

[**Aged Care Quality and Safety Commission complaint information**](#)

Complaint rating

The following complaint rating is a guide for staff in the management and resolution of consumer complaints. All feedback is to be registered on RiskMan using the Feedback component.

The three levels of feedback are:

1. Informal – straightforward matters that staff, line managers and/or Governance, Quality and Safety Unit can resolve at this point of service. All complaints received and resolved by staff are registered on RiskMan ensuring that line managers are aware of complaints issues within their unit. Details of actions are added to RiskMan journal entries.

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2. Formal – more complex matters that may need to be referred to the Manager and/or Director for resolution.
3. Serious and unresolved – complaints that may require notification to external bodies such as insurers or regulatory bodies are to be referred to the relevant Director and Chief Executive Officer. A case review may be commissioned by the Director or CEO – the brief completed and forwarded to relevant parties and/or as per legislative reporting requirements

NB *Complainants whose feedback is registered on RiskMan will receive formal notification from Governance, Quality and Safety Unit acknowledging receipt of complaint and intent of follow up within 2 days. Where applicable the complainant will be notified again once the investigation has been completed.*

- We refer complaints unable to be resolved internally to external agencies for resolution
- We provide consumers families and significant others with information relating to internal and external complaints processes
- We provide complaints information to the Health Services Commissioner and the Department of Human Services, the Commonwealth Department of Health and Ageing and National Disability Insurance Service (NDIS) in accordance with regulations

Please refer to Appendix 1 – Escalation Flowchart

Responsibility

All staff shall encourage consumers and their families to provide feedback about the service and their experiences, including complaints, concerns, suggestions and compliments. All staff will attempt to resolve complaints and concerns at the point of service, wherever possible and within the scope of their role and responsibility.

- All staff are expected to:
 - Remain calm and reassure the complainant that their concern is taken seriously
 - Provide the option of completing a feedback form (available on PROMPT) to consumers who indicate they would like to register a comment or concern
 - Ask the complainant what is their expected outcome regarding this complaint and document
 - Reassure the person concerned and communicate the issue to the relevant manager and Governance, Quality and Safety Unit.
 - Assist consumers who have special needs, particularly those who have limited English or who may have a disability, so that they can access the complaint /comment feedback system.
 - Forward any written complaint received to Governance for Quality and Safety Unit Manager and Complaints Manager
 - **Document the feedback in the RiskMan database**
- Department Managers are responsible for:
 - a proactive approach to receiving feedback from consumers and staff
 - risk management in consultation with the Governance, Quality and Safety Unit

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- reviewing complaints and following up actions where complaints result in recommendations for change in policy and procedures
- The Governance, Quality and Safety Unit Manager is responsible for:
 - coordinating investigation and resolution of formal complaints
 - conducting risk assessments or referring to Director, where applicable
 - maintaining a register of complaints and other feedback within Riskman
 - providing regular reports to relevant health service committees and monitoring the performance of the complaints procedure
 - determine whether complaint should be tabled at appropriate committees
 - Where complaints are received from family members or carers it is critical to ensure that the consumer involved agrees with the complaint being managed through their nominated representative. This must be documented through RISKMAN
- The Directors and CEO are responsible for ensuring:
 - appropriate action is taken to resolve individual complaints
 - recommendations for improvement arising from feedback is acted upon
 - there is meaningful reporting on trends in complaints to the Board of Directors
 - compliance and review of the consumer feedback procedure
 - notifications to insurers are carried out and Governance for Quality and Safety Unit informed for registering
 - there is consultation with professional registration boards and others where necessary

IF THE COMPLAINT IS NOT RESOLVED

Complaints will be escalated to CEO and/or Director for review and management.

For example:

Complaints are referred to the CEO or respective Director if:

- after attempting to resolve the complaint, the Governance, Quality and Safety Unit believes the complaint requires escalation
- the outcome the complainant is seeking is beyond the scope of their responsibilities
- if the complainant wishes, a meeting with CEO and/or respective Director and relevant staff may be organised following receipt of resolution to discuss their complaint further. This process aids the complainant in feeling heard and their complaint issues respected. This is referred to as Complaint Discussion

ASSESSING RESOLUTION OPTIONS

Complaints are normally resolved by direct negotiation with the complainant, but some complaints are better resolved with the assistance of an independent mediator or conciliator. The CEO or Director of Nursing and Midwifery will consider appointing an independent mediator, or encourage the complainant to take the matter up with Health Services Commissioner if:

- there is a serious question about the adequacy and safety of a health practitioner
- the complaint is against a doctor or manager who will be responsible for investigating the complaint

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- the complaint raises complex matters of jurisdiction or clinical expertise that require external expertise

EXTERNAL NOTIFICATION

The CEO or representative will inform or consult with external agencies in the following circumstances:

- Complaint has not been resolved directly with complainant - refer to Health Complaints Commissioner
- Offence under privacy laws, privacy breach amounting to breach of professional standards – refer to Office of the Federal Privacy Commissioner and/ or Health professional registration body
- Unsafe care or inappropriate behaviour by a health practitioner – refer to Health professional registration body and/or Health Services Commissioner
- Reportable deaths under the Coroners Act - State Coroner, DHS or DoH
- Complaints that allege harm or could possibly result in a claim are notified to the insurer – VMIA

INTERNAL NOTIFICATIONS

The information obtained through the analysis of both feedback and complaints is reviewed by Executive and the Board and is used to improve systems and inform changes in practice.

Governance, Quality and Safety Unit will provide collated reports (CAMMS report) for discussion and action at the monthly Consumer Quality and Safety Committee.

Department/Unit Managers are responsible for ensuring information is made available to staff and initiatives to circumvent complaints are implemented. Results and past actions are to be displayed on notification boards – staff and consumer information.

Collated reports on consumer feedback performance indicators and subsequent improvement initiatives will be reported in the following forums:

- a. Board via scorecard report
- b. Consumer Care and Engagement Committee
- c. Community Advisory Committee

RISK ASSESSEMENT

After receiving a formal complaint that has been resolved, the Governance for Quality and Safety Unit reviews matters of systems and processes surrounding the complaint in consultation with staff involved with the complaint, to decide what action should be taken, consistent with risk management procedures.

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All complaints with a rating of 1 or 2 (using the Seriousness Assessment Matrix – SAM) will be registered on the organisations complaint register by the Governance for Quality and Safety Unit. Should any system/process improvements be identified during the investigation the complaint will be tabled at the organisations Quality and Research Committee where progress toward improvements will be monitored.

Refer to: [SERIOUS ASSESSMENT MATRIX \(SAM\) COMPLAINT REGISTER](#)

TIMEFRAMES

- Complaints that are not resolved at point of service level are acknowledged in writing or by phone within **48 hours**. The acknowledgment provides contact details for the person who is handling the complaint.
- Formal complaints are investigated and the aim is to resolve within 30 days.
- If the complaint is not resolved within this time, the complainant and staff who are directly involved in the complaint will be provided with an update.

STAFF TRAINING

Colac Area Health provides on-line training in customer service, dispute management and complaints. Consumer feedback management is included in the orientation program.

RECORDS AND PRIVACY

The Governance for Quality and Safety Unit maintains a complaints and consumer feedback register, with records of informal feedback and formal complaints.

Individual complaints files are kept in a secure filing area in the Governance Quality and Safety Unit office and in a restricted access section of the computer system's file server.

Consumers are provided with access to their medical records in accordance with the FOI and Privacy policies. Family members and others requesting access to a consumer's medical records as part of resolving a complaint are provided with access only if the consumer has provided authorisation in accordance with the FOI and Privacy policies.

REPORTING COMPLAINTS

The Governance, Quality and Safety Unit provides reports on the number and type of complaints, the outcomes of complaints, recommendations for change and any subsequent action that has been taken to relevant hospital committees.

The following information is provided to the public through our Annual report and Quality of Care report.

- the number and main types of complaints received, common outcomes and how complaints have resulted in changes
- how complaints were managed
- how the complaints system was promoted

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- how long it took to resolve complaints (and whether this is consistent with the procedure)
- whether complainants and staff were satisfied with the process and outcomes

STAFF COMPLAINTS

Refer to [CAH Complaint Resolution](#)

REFERENCES: (include relevant Key Legislation, Acts & Standards)

- 1 Health Complaints Act 2016
- 2 Australian Charter of Healthcare Rights - 2019
- 3 Customer Satisfaction – Guidelines for Complaints Handling in Organisations, AS ISO 10002-2018
- 4 National Safety and Quality Health Services Standards (second edition), Partnering with Consumers - January 1, 2019
- 5 Charter of Aged Care Rights – July 1, 2019
- 6 Health Services (Conciliation and Review) Act 1987
- 7 Complaints Principles 2014, Department of Health
- 8 The Aged Care Quality Standards – Standard 6 (links to Standards 1, 7, 8)
- 9 Aged Care Act – 1997
- 10 NSQHS User Guide for Aboriginal and Torres Strait Islander Health – Standard 2.13
- 11 Previous Author; Narelle Melville

DOCUMENT DEVELOPMENT/REVIEW PROCESS**Prepared/Reviewed By**

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Endorsement by

Name	Manager/Chairperson	Date
Narelle Melville	Manager Governance for Quality and Safety	26/8/2019

Final Approval by Executive Director or CEO

Name	Position	Date
Dirir Imran	District Director Medical Administration	27/8/2019

Escalation Flowchart – Appendix 1

