

Policy

Consumer/Patient Complaints & Compliments Management Policy

Applicable to: Authorised by: Director of Nursing

Whanganui District Health Board Contact person: Manager, patient safety and quality

1. Purpose

To effectively manage complaints and compliments received by patients or their representatives about the services provided by the Whanganui District Health Board (WDHB).

2. Background

Patients have certain rights when they are using a health or disability service. These rights are set out in the Code of Health and Disability Services Consumers' Rights (1994). In this policy this will be called the Code of Rights. We have a duty to uphold these rights. When a patient feels that we have breached one or more of these rights, or they are unhappy about any aspect of our service, they can make a complaint.

Complaints may be made verbally, (in person or by telephone), in writing (by letter or email) or by text message.

3. Policy Statement

All complaints and compliments received by the WDHB will be managed in compliance with the Code of Health and Disability Services Consumers' Rights (1994), and the rules about health information as set out in the Privacy Act (1993) and the Health Information Privacy Code (1994).

4. Scope

This policy applies to all WDHB employees (permanent, temporary and casual), visiting Medical Officers and other partners in care, contractors and contracted providers, consultants and volunteers.

5. Definitions

A complaint is any expression of dissatisfaction by a patient or their representative regarding health or disability services provided by Whanganui District Health Board or by external providers funded by the WDHB, or about issues relating to patient health information. The complaint can be made in any form that the patient feels comfortable with, including in written or verbal form.

A compliment is any expression of satisfaction by the patient or their representative regarding health or disability services provided by Whanganui District Health Board or by external providers funded by the WDHB, or about issues relating to patient health information. The compliment can be made in any form that the patient feels comfortable with, including in written or verbal form.

A patient is defined as any person using services funded by or provided by WDHB.

The complainant is the person making the complaint. They may be the patient themselves or a representative of the patient.

A representative is defined to mean:

- A person to which the patient has given their permission to make a complaint on their behalf
- Where the patient is under 16, the parent or guardian
- Where the patient is deceased, the executor or administrator of the estate
- Where the patient is alive, over 16 and is unable to give consent, a person 'appearing to be lawfully acting on the patient's behalf' (this could be someone nominated by the patient or a family member or friend)

6. Roles and responsibilities

The following roles and responsibilities apply with respect to the Consumer/Patient Complaints/Compliments Management policy.

| Role | Responsibilities/accountabilities | Criteria |
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| Chief executive (CE) | Accountable for the effective management of consumer/patient complaints/compliments | Endorse policy Commission RCA investigations in respect of SAC1 events arising from a complaint. Endorse recommendations from the RCA Respond to complaints from external agencies such as HDC, Privacy Commissioner, Ombudsmen's Office and comply with those agencies' timeframes Comply with national Health and Disability Standards |
| Director of Nursing, Patient Safety and Quality | Signs off letters as per procedure | Sign formal response letter to complainant or delegate responsibility to another senior manager |
| Customer relations and complaints coordinator (CRCC) | Receive, log in Riskman. Triage team rate severity of complaint Notify serious complaints immediately to manager of Patient Safety and Service Quality Acknowledge complaint and maintain contact, through two weekly updates, with complainant Refer SAC3 and 4 complaints to relevant business or nurse manager, or clinical director for investigation Review the draft response and investigation material prior to sending manager patient safety | Comply with Code of Rights, Consumer/Patient Complaints and Compliments Management policy and procedure, and WDHB Clinical Incident Management procedure Comply with external agency response timeframes All compliments will be passed on to the area or department involved including named staff. All compliments will be acknowledged by letter or email and the person making the compliment will be asked if they |

| | Prepare reports on trends to Risk and Audit Committee, Hospital Advisory Committee, Board, GM, Directors as required Manage complaints received from external agencies such as HDC, Privacy Commissioner, Ombudsmen's Office Manage compliments received | give their permission for their compliment to be published in the staff newsletter |
|---|---|--|
| Manager, patient safety and service quality | Review severity rating of SAC 1 and SAC 2 complaints Notify SAC 1 and SAC 2 complaints immediately to Director of Nursing and Patient Safety and Service Quality and via this role to clinical governance Initiate and oversee investigation into SAC 1 and 2 complaints Oversee management of complaints received from external agencies such as HDC, Privacy Commissioner, Ombudsmen's Office Take oversight role in RCAs and CSAs as required Report SAC 1 and 2 complaints to the relevant committees, HQSC, Board as applicable | Comply with Consumer/Patient Complaints and Compliments Management policy and procedure, and WDHB Clinical Incident Management procedure Sign formal response letter to complainant or delegate responsibility to another senior manager Comply with external agency response timeframes Notify HQSC of adverse reportable events arising from complaints |
| General manager service and business Planning | Manage complaints about non-DHB providers. Serious complaints managed in conjunction with MOH Report on non-DHB provider complaints to MOH | Comply with Consumer/Patient Complaints and Compliments Management policy and procedure, and WDHB Clinical Incident Management procedure |
| Privacy officer | Review all privacy complaints received and severity assessment codes allocated | Comply with WDHB Clinical Incident Management procedure |
| Nurse and business manager / medical director | Review severity rating of complaints received Lead investigation into SAC 3 and 4 complaints Report any delays in the investigation and provide updates to customer relations and complaints co-ordinator Seek approval from relevant GM, CMO or Director if investigation is to take longer than 20 working days Meet with or telephone complainants to discuss findings Draft written response May need to take part in open disclosure Ensure corrective actions identified by | Comply with Consumer/Patient Complaints and Compliments Management policy and procedure, and WDHB Clinical Incident Management procedure |

All staff

Be cognisant of Code of Rights and Consumer/Patient Complaints and Compliments Management policy and procedure

Advise patients about Code of Rights and Advocacy Service Receive and record patient complaints

Notify direct line manager about complaint or clinical incident that might lead to complaint as soon as possible during shift

Refer formal complaints to customer relations and complaints co-ordinator within 24 hours

Ensure that your department has a code of rights poster displayed on walls

Work with Haumoana team to ensure investigations and responses are culturally appropriate

Comply with Code of Rights, Consumer/Patient Complaints and Compliments Management policy and procedure, and WDHB Clinical Incident Management procedure

Complaints about our services and/or patient health records will be managed in a professional, effective and understanding manner and patients will have their complaints dealt with honestly, thoroughly and promptly

WDHB views complaints as an opportunity to improve the quality of services provided to consumers/patients. Patient complaints help us to understand how patients feel about our services and bring to our attention areas that could be improved on.

Staff will welcome and appreciate feedback from patients (and their family/whanau, support persons or appointed spokesperson), on the services we fund or provide. We will actively encourage patients to give us feedback and make a complaint when they are not happy with our services.

Making a complaint will not negatively affect how the patient is treated.

7. Measurement Criteria

The Centre for Patient Safety and Service Quality will monitor the management of complaints against the following criteria and include results in monthly reporting:

- Reporting compliance
- The thoroughness/quality of investigations
- The quality of replies to the complainant number of responses with which patients family are unhappy
- Whether remedial action to rectify the complaint has been taken

The Centre will also undertake regular analysis of complaints to identify trouble spots or trends.

8. Media involvement in a complaint

Any requests from the media for comment on any complaint should be directed to the chief executive and the senior communications advisor. Any responses to media interest in a complaint are to be directed through the chief executive.

9. References

Code of Health and Disability Services Consumers' Rights (1994) Health Information Privacy Code (1994) New Zealand Incident Management System

10. Related WDHB documents

Clinical Incident Management Policy WDHB-2026 Clinical Incident Management Procedure WDHB-3385 Consumer/Patient Complaints Management Procedure WDHB-6021

11. Key words

Complaints incidents adverse event compliment SAC1 SAC2 SAC3 SAC4