

Complaints Management

Summary This Policy Directive is to ensure fair and effective management of complaints across NSW Health.

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Author branch Legal and Regulatory Services

Branch contact (02) 9391 9606

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Audience All Staff of NSW Health

COMPLAINTS MANAGEMENT

POLICY STATEMENT

This Policy Directive is intended to assist people working in NSW Health to effectively manage complaints made by patients, carers and members of the public. The Policy establishes a standard approach to complaint handling across NSW Health to support timely, efficient and fair management of complaints.

SUMMARY OF POLICY REQUIREMENTS

NSW Health is committed to:

1. Respectful treatment of people making complaints
2. Providing people wishing to make a complaint with access to information about the complaints process
3. Good communication with people making a complaint
4. Taking ownership of the way complaints are managed and ensuring people managing complaints are supported
5. Timeliness with respect to acknowledgment and resolution of complaints
6. Transparency about the complaints management process.

Staff at all levels of NSW Health will be committed to fair and effective complaint management in accordance with the following principles:

- Complaints are acknowledged and responded to promptly and with sensitivity
- Complaints are assessed and dealt with fairly and effectively
- People making complaints are provided with information about the outcome of their complaint
- People making complaints will not suffer any detriment because a complaint has been made by them or on their behalf.

REVISION HISTORY

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ATTACHMENTS

1. Complaints Management: Procedures.

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1 INTRODUCTION

1.1 Background

Complaints provide an important opportunity to identify problems and improve service provision across NSW Health.

NSW Health is committed to managing complaints fairly, efficiently and effectively. These procedures are intended to:

- Enable health staff to respond to complaints in a timely and effective manner
- Improve service delivery and strengthen relationships
- Provide a standard approach to complaints handling including performance indicators to enable monitoring of policy compliance
- Ensure NSW Health staff are aware of their responsibilities and are empowered to manage complaints.

These procedures are intended to provide a framework for management of complaints across NSW Health. They apply to complaints by patients and members of the public about NSW Health, NSW Health services or the handling of a complaint by a NSW Health organisation.

NSW Health has a number of policy directives and guidelines to support the management of particular complaints (for example, the policy for management of a complaint or concern about a clinician). The focus of this document is managing complaints and resolving issues which do not fall within those other policies. This Policy Directive should be read in conjunction with other relevant policies as outlined in s2.3 below. More than one policy may apply to a complaint.

1.2 Key definitions

AHPRA – the Australian Health Practitioner Regulation Agency, the organisation responsible for national registration and accreditation of registered practitioners.

Apology – An expression of feelings or wishes that can include sorrow, sympathy, remorse or regret as well as an acknowledgement of fault, a shortcoming or a failing.

Carer – an individual who provides ongoing unpaid support to people who need help because of disability, mental illness, chronic or terminal illness, dementia or frail age. Relatives and friends who provide such care, support and assistance are carers.

Clinician – any health practitioner or health service provider (whether or not registered under the National Law) working in NSW Health.

Complaint - An expression of dissatisfaction or feedback made to or about NSW Health, related to its products, services, staff or the handling of a complaint where a response or resolution is expected or required.

Closed Complaint – A complaint is considered closed when interaction between the organisation handling the complaint and the person making the complaint has ceased; or

- i. All reasonable action has been taken, including (where appropriate) a letter of response from the organisation to the person making the complaint; **and**
- ii. It is anticipated that no further action will take place in relation to the complaint.

Feedback – Opinions, comments and expressions of interest or concern made directly or indirectly, explicitly or implicitly to or about NSW Health, its services, staff or its handling of a complaint.

Grievance - a problem, concern, issue or incident raised by a staff member who believes he / she is the subject of unreasonable treatment from the organisation or another person(s) in the workplace

Incident – An unplanned event resulting in, or with the potential for, injury, damage or loss, including a near miss.

Incident Management System - IIMS or ims+ - The clinical incident reporting system used in the NSW public health system which will be progressively transitioning from IIMS to ims+.

NSW Health organisation – NSW Health organisation means the NSW Ministry of Health, a local health district or statutory health corporation as defined in the *Health Services Act 1997*, an administrative unit of the Health Administration Corporation (including NSW Ambulance Service, HealthShare NSW, NSW Health Pathology and Health Infrastructure), or any other entity under the direction or control of the Minister for Health or Secretary NSW Health.

Public interest disclosure – A report about serious wrongdoing made by a public official that meets the requirements of the *Public Interest Disclosures Act 1994*.

Serious or complex complaint – see paragraph 2.4.3

Unreasonable conduct – behaviour by a current or former complainant which, because of its nature or frequency, is vexatious and/or raises substantial health, safety, or resource issues for the person or organisation managing the complaint.

Unresolved complaint – Where interaction with a person making a complaint has not ceased following finalisation of the complaint and the person who made the complaint remains dissatisfied.

2 COMPLAINT MANAGEMENT FRAMEWORK

2.1 Commitment to effective Complaint Handling

The complaint management framework for NSW Health is underpinned by the following commitments, endorsed across the whole of NSW Government:

2.1.1 Respectful Treatment

NSW Health staff will treat people who make a complaint with courtesy and respect and in accordance with this Policy. It is expected that people making complaints will treat NSW Health staff with courtesy, fairness and respect.

NSW Health will protect the identity of people making complaints where practical and appropriate. Personal information that identifies individuals will only be disclosed or used by NSW Health as permitted by relevant privacy laws.

People who make complaints will not suffer any detriment as a result of having made a complaint. Further guidance is available from the NSW Ombudsman factsheet: [The importance of respect in effective complaint handling](#)

2.1.2 Information and Accessibility

NSW Health will make it easy and accessible for people to make a complaint and provide assistance with the complaint process where required. NSW Health provides clear information about the right to complain, how to make a complaint, and how complaints will be managed.

Patients, carers and members of the community are encouraged and enabled to provide feedback about their experience with NSW Health, including complaints.

NSW Health recognises that some individuals face additional barriers to making complaints and will take a person-centred approach to complaint management to support all people wishing to complain, including people with disabilities or from culturally and linguistically diverse backgrounds. Further guidance on accessible complaint handling is provided in the NSW Ombudsman Factsheet: [Tips for Accessible Complaint Handling](#)

2.1.3 Good Communication

NSW Health will acknowledge complaints as soon as possible, and within 5 days of receipt of the complaint.

NSW Health will keep people informed about the status of their complaint at regular intervals and will provide information about the outcome of the complaint.

2.1.4 Taking Ownership

NSW Health will provide a person making a complaint with contact details for a contact person or team, who is responsible for management of the complaint. If the complaint is transferred to another person or team, the person making the complaint will be notified of the new complaint manager's contact details.

2.1.5 Timeliness

NSW Health will manage complaints as quickly as possible, recognising differing levels of seriousness, urgency and complexity of complaints. If there are delays in the process, NSW Health will provide information to the person making the complaint about the delays.

NSW Health will aim to resolve complaints within 35 days from the date the complaint is received.

2.1.6 Transparency

Records of complaints are kept by those dealing with them, to enable review of individual cases, to identify trends and risks and to report on aggregated complaint information. This data will be regularly reviewed at a local level to identify areas for improvement in service and in complaint management.

Complaints records may be subject to review by the NSW Ministry of Health or external agencies to audit compliance with policy requirements relating to complaint management.

2.2 National Safety and Quality Health Service Standards

NSW Health is committed to the National Safety and Quality Health Service Standards (*version 2*), developed by the Australian Commission on Safety and Quality in Health Care.

These standards aim to protect the public from harm and improve the quality of health services provided across Australia. The standards include relevant requirements highlighting the importance of effective complaint management to monitoring and improving the quality of health service provision (see Standard 1 – *Clinical Governance for Safety and Quality in Health Service Organisations* and Standard 2 – *Partnering with Consumers*).

2.3 NSW Policy framework

NSW Health has a policy framework for managing complaints, depending on the nature and circumstances of the complaint. More than one policy may apply to a particular complaint.

This Policy Directive is intended to assist in management of complaints which are not covered by another NSW Health policy, and which are made by patients, carers or members of the public about NSW Health.

All complaints are required to be managed in accordance with the relevant legislation and Policy Directive. Where there is a difference between this Policy and a specific NSW Health policy which applies to the complaint, the specific policy is to be followed.

2.3.1 Identifying relevant policies

- In relation to a complaint about a clinician, the NSW Health policy on [Managing complaint or concern about a clinician](#) must be followed. This Policy applies to the management of serious complaints or concerns about a specific clinician or clinicians that indicate a potential risk to patient safety and if found to be substantiated could result in disciplinary and/or remedial action and/or a notification to the Australian Health Practitioner Regulation Agency (AHPRA) and/or to the relevant NSW Health Professional Council. This includes complaints and concerns involving alleged or suspected serious performance related issues.
- For corporate or clinical incidents, the NSW Health [Incident Management](#) policy must be followed – including where the organisation becomes aware of the incident as a result of a complaint. This policy includes directions on determining the SAC rating and whether a Root Cause Analysis is required.

- For incidents involving patients (including where a complaint provides information indicating that an incident has occurred), in addition to applying the Incident Management Policy, the [Open Disclosure](#) policy must be followed.
- For managing a complaint involving alleged misconduct by a staff member, the NSW Health Policy on [Managing Misconduct](#) must be followed, including:
 - notifying the NSW Police if there is alleged criminal conduct
 - consulting the NSW Health Policy [Service Check Register for NSW Health](#) for any requirements to create a Service Check Register record
 - complying with the NSW Health Policy on [Medication Handling in NSW Public Health Facilities](#) in the case of alleged theft or misappropriation of medication, prescription pads, or alleged drug register tampering
- For child related allegations, charges or convictions (where the matter relates to an under 18 year old) the NSW Health Policies on managing [Child Related Allegations Charges and Convictions](#) in conjunction with [Managing Misconduct](#) must be followed -
 - this includes making a report to the Child Protection Helpline where there are concerns that a child or young person or a class of children is at risk of significant harm
- For complaints involving alleged abuse of an older person, the Policy on [Identifying and responding to abuse of older people](#) may apply
- For bullying allegations, the NSW Health Policy on [Bullying](#) must be followed in conjunction with the NSW Health Policy on [Managing Misconduct](#). For complaints about bullying and unacceptable behaviour arising from the junior medical workforce, the NSW Health Policy [Prevention and Management of unacceptable workplace behaviours – JMO module](#) should be consulted
- For workplace grievances between staff members, the NSW Health Policy on [Resolving Workplace Grievances](#) should be followed
- For complaints about privacy issues, the [NSW Health Internal Review Guidelines](#) and the [Privacy Manual for Health Information](#) must be followed
- For complaints about serious wrongdoing by public officials the [Public Interest Disclosures Policy](#) may apply
- Where a complaint indicates that corrupt conduct has, or may have occurred, the NSW Health Policy for [Reporting corrupt conduct to ICAC](#) must be followed
- For complaints about a recruitment process within NSW Health, the [Recruitment and selection of staff to the NSW Health Service](#) policy applies
- Where a complaint alleges misconduct relating to research, the Guideline for [Research Governance in NSW Public Health Organisations](#) should be consulted

2.4 Pathway for complaints management within NSW Health

Not all complaints require an investigation. The level of response required will depend on factors including the nature of the complaint.

In all cases, the aim will be to resolve the matter quickly, efficiently and to preserve the relationship between the person making the complaint and the health organisation. Ideally, most complaints will be dealt with directly and quickly at the point where the problem arises.

Complaints can be managed:

- By frontline staff
- By a line manager, facility manager, patient support/liaison officer or senior complaint manager within the organisation
- By the Chief Executive or a member of the Executive team for the organisation
- By the Ministry of Health, where the complaint requires escalation beyond the organisation receiving the complaint.

2.4.1 Complaints to be managed by frontline staff

Any staff member could receive a complaint during their daily activities.

Dealing with complaints from members of the public is part of providing health services to members of the public. All staff are to assist in improving the services provided by NSW Health by dealing with complaints which are within the scope of their role.

Staff are to receive appropriate training to develop skills in resolving complaints. Where staff have the skills, experience and authorisation to resolve complaints at the first point of contact, escalation of complaints can be avoided.

A person receiving a complaint aim to manage the complaint at the point of first contact, and to resolve the concern in the same interaction where possible. Many straightforward complaints can be resolved by:

- an acknowledgment of the person making the complaint's perspective
- an explanation or the provision of further information, and
- the person making the complaint indicates their satisfaction with the resolution of the matter.

Where a complaint can be quickly resolved, it may be possible to do so during the first interaction. In some circumstances, further contact may be required, either in writing or by telephone.

If a person making a complaint requests to speak to a manager, staff must assist the complainant to speak to an appropriately senior person. Staff should assist people to make their complaint, particularly in circumstances where a person requires additional support with communication. Frontline staff are to be adequately trained to provide this information and assistance.

2.4.2 The benefits of offering an apology at an early opportunity

Sometimes a prompt and sincere apology can be very effective. It will often avoid the escalation of a dispute and the significant cost in time and resources that can be involved. The most appropriate form and method of communication of an apology will depend on the circumstances of the particular case, the harm suffered, and what is

hoped to be achieved by giving the apology (for example restoration of reputation, acknowledgement of the wrong done, reconciliation or an assurance that a problem has been addressed or will not recur). Further guidance on apologies is available from the NSW Ombudsman fact sheet: [Apologies](#)

2.4.3 Accessibility for people making complaints

NSW Health is committed to equal access across all areas of health service delivery. Some consumers may require additional support and assistance to provide feedback and make complaints, including people identified as vulnerable, individuals living with a disability or mental illness and individuals from culturally or linguistically diverse backgrounds. Staff are to be aware of consumers who may require assistance to provide feedback or raise concerns and must be able to assist or to refer the consumer to a person who has the requisite skills to facilitate an assisted complaint where required.

2.4.4 Escalation of the complaint within the organisation

Complaints must be escalated to an appropriate person within the organisation if they:

- Require action that is beyond the responsibility of the staff member who receives the complaint
- relate to a peer/colleague – these should be referred to a line manager
- Remain unresolved
- Involve serious consequences or issues
- Involve a serious or complex complaint
- Involve an escalation request by the person making the complaint
- Involve complaints about multiple staff members
- Require escalation or reporting to an external body
- Involve unreasonable conduct by a person making a complaint (see s 4.3).

A complaint is to be escalated to the person or unit within the organisation best suited to managing the complaint. Where a staff member is unsure where to refer a complaint, they are to consult their manager in the first instance. For more serious complaints, the escalation pathway may include

- (1) Initial notification to an Executive, such as the Director of Clinical Governance or the Director of Workforce
- (2) Notification to the Chief Executive or delegate for high risk or serious matters as determined by risk assessment, relevant policy and local procedures (see 2.4.4 below)

2.4.5 Serious or complex complaints

A complaint may be considered serious or complex either because of the issues to which it relates or the process of complaint management itself.

Serious or complex complaints require appropriate notification to a senior manager and careful documentation from the outset.

Examples of serious complaints include:

- Matters of a sexual or criminal nature
- Matters involving allegations of serious performance issues, misconduct or impairment of a staff member
- Complaints about clinical practice or a clinician which may require external notification to the Health Care Complaints Commission, AHPRA or the relevant NSW Health Professional Council.
- Matters relating to incidents where there has been a serious adverse outcome (SAC 1 or 2)
- Concerns about a previous complaint process, requiring a review of the complaint management process or outcome
- Complaints involving multiple agencies or people making complaints
- Complaints where the person making the complaint requires significant assistance
- Complaints involving unreasonable persistence or other unreasonable conduct by the person making the complaint (see s4.3)
- Matters where there has been a breakdown in the management process or communication with the person making the complaint
- Complaints subject to media attention
- Complaints involving legal issues.

2.4.6 Notifications relating to complaints

In addition to internal management and escalation of a complaint, some complaints require notification either within NSW Health or to an external agency.

The following notifications may apply to a complaint:

- Mandatory notification to the NSW Police, if there is alleged criminal conduct (refer to the NSW Health Policy [Managing Misconduct](#))
- Mandatory notification to the NSW Police and [Child Protection Helpline](#) if there is a risk of significant harm relating to a child or a class of children (refer to the NSW Health Policy [Child Protection](#))
- Notification to the NSW Ministry of Health via a Reportable Incident Brief or an In-Brief (refer to the NSW Health Policy [Incident Management](#))
- An entry on the [Service Check Register](#) where there is an allegation or finding of serious misconduct against a staff member and there are significant risks relating to the staff member's ability to undertake their role within NSW Health
- Notification to the Federal Department of Health for issues relating to Aged Care
- Notification to the Children's Guardian in the case of child related allegations, charges or convictions (refer to NSW Health Policy [Child related allegations, charges and convictions against NSW Health Staff](#))

- Notification to the Australian Health Practitioner Registration Agency (AHPRA) if there is a reasonable belief of notifiable conduct by a registered health practitioner, notifiable conduct being defined under the [Health Practitioner Regulation National Law \(NSW\)](#) to mean:
 - practising while intoxicated by alcohol or drugs;
 - sexual misconduct in the practice of the profession;
 - placing the public at risk of substantial harm because of an impairment; or
 - placing the public at risk because of a significant departure from accepted professional standards.
- Notification to the relevant NSW Health Professional Council of any conduct of a registered health practitioner that the Chief Executive suspects on reasonable grounds may constitute professional misconduct or unsatisfactory professional conduct under the [Health Practitioner Regulation National Law \(NSW\)](#).

2.4.7 Referral of complaints

Where a complaint has been misdirected or is more suitable for management by another organisation or another agency, it may be referred to that organisation for further management.

The person making the complaint must be contacted and advised of the referral and the appropriate contact person at the agency managing the complaint.

3 COMPLAINTS MANAGEMENT PROCESS

This Policy is for management of complaints to or about NSW Health by patients and other members of the public, about NSW Health services or the handling of a complaint which is not covered by another NSW Health policy.



3.1 Receiving Complaints

NSW Health will accept complaints made in person, in writing, by email, via telephone, made through an online complaints portal or referred by another organisation.

People are entitled to complain anonymously. As far as possible, anonymous complaints will be managed in the same way as other complaints.

People wishing to complain are encouraged to provide contact details so that they can be provided with information on the management of their concerns and details about the complaint can be clarified.

Because a complaint could be made to any staff member, all staff who deal with members of the public are to be able to:

- accept a complaint in a respectful manner
- register the complaint appropriately in the organisation's Incident Management System or Complaint Management System
- provide advice on what action can be taken to resolve a complaint.

When a complaint is received verbally, the person receiving the complaint is to consider whether there is an opportunity for prompt resolution of a complaint. Depending on the nature of the complaint, staff may:

- Offer an apology (further guidance on apologies is available from the NSW Ombudsman fact sheet: [Apologies](#))
- Provide an explanation of the situation
- Encourage the person making the complaint to discuss their concerns with the relevant person (clinician or staff member)
- Speak to the relevant person on behalf of the person making the complaint
- Provide information about the complaint handling process
- Refer the complaint to an appropriate person within the organisation (for example, privacy contact officer, Director of Clinical Governance)
- Make a written record of the conversation and concerns (together with sufficient information for the matter) to be followed up in accordance with the [Incident Management policy](#) or relevant incident management system. If possible, provide a copy of the record to the person making the complaint to ensure the information is accurate.

3.2 Keeping records about complaints

It is important that records about complaints are kept in accordance with local and NSW Health procedures. This serves a number of purposes:

- It enables organisations to accurately measure complaints and evaluate responses

- It enables organisations to review what type of complaints are most commonly received
- It enables complaint history to be tracked.

Generally speaking, minor complaints will require brief documentation. The more serious a complaint, the more extensive documentation required.

The system used for keeping records of complaints will vary across NSW Health. The [Incident Management Policy](#) governs the registration of incidents and complaints for NSW Health Organisations. IIMS (or ims+) is the preferred system for initial registration of a complaint, where available.

NSW Health organisations not using IIMS will keep records of complaints using a case or document management system as determined by local processes. For example, in some organisations, complaints will be registered via the documents management system - HPERM (Hewlett Packard Electronic Records Management).

3.3 Acknowledgment of complaints

3.3.1 Complaints to be acknowledged within 5 days

Complaints must be acknowledged, either verbally or in writing, within 5 days of receipt, even if there is a delay in determining where the complaint should be managed. This means that, where there is a delay, the person who receives the initial complaint will acknowledge the complaint and advise the person making the complaint about the situation.

Prompt acknowledgment of a complaint contributes to effective resolution. Usually, a complaint should be acknowledged in the mode it was received (e.g. a verbal complaint may be acknowledged verbally, an email complaint via email).

If a complaint made verbally is recognised as serious at the outset, as part of a person-centred approach to complaint management, the person receiving the complaint must encourage and assist the person to make their complaint in writing in order to facilitate clear communication during the complaint management process.

3.3.2 Information to be included in acknowledgment of complaint

Where possible, when acknowledging the complaint, the person making the complaint is to be provided with information about:

- Contact details of the person or team managing the complaint
- The issues to be managed
- The complaint management process – including the expected timeframes
- When the person making the complaint is likely to next be contacted.

Where a complaint can be quickly resolved, it may be possible to provide the acknowledgement and resolution of the complaint in the same interaction. In this case, the complaint and its resolution must still be documented, regardless of whether any correspondence is issued in relation to the complaint.

3.4 Assessing complaints

A rigorous assessment process is vital to effective complaint management. The complaint is to be assessed and prioritised according to the issues raised. Staff and patient safety must be the foremost consideration when assessing any complaint.

The assessment process must –

- Include a preliminary risk assessment
- Clarify the issues in the complaint to ensure that it is directed to the appropriate area (or areas) for management
- Identify and escalate serious complaints as required

3.4.1 Risk Assessment

The early identification of risks associated with patient safety is imperative. A risk assessment also assists in management of complaints raising significant operational, legal, financial or reputational risks to NSW Health or the public which require attention from senior management.

A documented risk assessment allows risk management strategies to be put in place to manage any risks requiring immediate attention.

The risk assessment must also consider how to offer support to or manage communication with any affected people (staff, patients, other organisations).

3.4.2 Identify Issues

The person assessing the complaint is to clearly identify the issues to be addressed, including concerns raised by the person making the complaint and any other issues arising or identified during the assessment. This may require clarification with the person making the complaint. The person making the complaint ought to be advised if any issues they have raised are unable to be addressed.

The person making the complaint is to be contacted at this stage to ensure all relevant issues have been understood and to advise them of the issues which will be addressed in the complaints management process.

3.4.3 Identify individuals involved

The key people involved in the complaint ought to be identified during the assessment, including all individuals involved in an incident which has been the subject of a complaint. Where an individual clinician is identified in a complaint, this aspect is to be managed with reference to the requirements of the NSW Health policy, [Managing complaints and concerns about clinicians](#).

Complaints may involve multiple individuals or Health organisations. Early communication with all parties is essential to obtain all relevant information to enable effective assessment of the complaint.

It is particularly important to ensure that complaints are managed in accordance with the principles of procedural fairness where adverse comments or findings may be made about an individual.

3.4.4 Consider what policy applies and whether external reporting is required

Where there is a statutory or policy reporting obligation upon the staff member assessing the complaint, they will ensure that the matter is reported in accordance with that obligation. For example, suspected corruption must be reported to the Chief Executive for consideration of whether the matter requires reporting to ICAC.

3.4.5 Obtain consent or authority to disclose information

In order to effectively manage a complaint, it will often be necessary to share information about the person making the complaint with other people, including agencies outside NSW Health. If this is required, consent must be obtained from the person making the complaint (or their guardian) and this is to be appropriately documented in the complaint records.

Where a complaint is made on behalf of another person, their consent is required before NSW Health can share information about the matter with the person making the complaint.

This consent will not be required if the disclosure occurs as part of making a required statutory notification (for example to AHPRA or ICAC).

For further information on the issue of consent to disclose or share information, refer to the NSW Health [Privacy Manual for Health Information](#).

3.5 Addressing the complaint

After assessment, a decision must be made as to how the complaint will be managed. Options may include:

- Providing information, an explanation or an apology to the person making the complaint
- Meeting with the person making the complaint to discuss the matter further
- Gathering additional information in relation to the complaint
- Referring the matter to the appropriate person to deal with that type of complaint
- Investigating the allegations made in the complaint.

3.5.1 Investigating a complaint

Not all complaints will require an investigation. Many complaints can be resolved without an investigation. The process will depend on the nature of the complaint and the relevant applicable policies. Further guidance is available from the NSW Ombudsman [Effective Complaint Handling Guidelines](#) and factsheet: [Investigation of Complaints](#)

Investigations will constitute a fact-finding process in order to determine the facts of the complaint and what action may be appropriate. The steps in the investigation process may include:

- Clarifying issues for investigation
- Determine applicable legislation/policy/standard/procedures

- Prepare investigation plan
- Collect relevant information (medical records, rosters, documentation, policies)
- Identify relevant witnesses and suitable order of interviews
- Develop questions for key witnesses
- Conduct interviews
- Analyse and review information obtained
- Prepare investigation report.

3.5.2 Complaints involving multiple processes

Due to the complexity of the health system and the services provided, some complaints will involve multiple parallel processes. For example, it is not uncommon for a serious incident involving a clinician giving rise to a complaint under this policy to be subject to other policies and processes, such as a root cause analysis, managing a complaint or concern against a clinician or a misconduct investigation.

Communication is essential to effective complaint management in these circumstances – both internally within NSW Health, and with the person making the complaint.

It is essential that a nominated staff member be delegated responsibility for overall co-ordination of the complaint, including regular communication with the person making the complaint.

Staff managing a complex complaint must consider the person making the complaint's perspective in this situation. Parallel processes may cause confusion and contribute to a sense of powerlessness for the person making the complaint. Where multiple processes are underway:

- Additional time is to be spent with the person making the complaint, to explain the way the issues will be managed and the differing timeframes and possible outcomes of each process
- The staff managing each of the processes must cooperate to nominate a single contact person to provide the person making the complaint with regular (fortnightly) updates (by telephone, email or in writing) on the progress of all matters, so that there is a single point of contact for the person making the complaint.

3.5.3 Possible outcomes for complaint process

Depending on the nature of the complaint, the decision about the outcome of the complaint may be made by a manager, senior executive or the Chief Executive of the organisation.

The person managing the complaint will recommend an appropriate outcome after consideration of the available information. Possible outcomes of a complaint process may include:

- Offering an apology

- Offering a face to face meeting for the person making the complaint with relevant people
- Waiving fees
- Making changes to a policy/procedure, process or system where appropriate
- Providing training and education to staff
- No further action.

3.6 Finalising the complaint

Following the consideration of the complaint and any investigation of the issues it raises, the person making the complaint will be advised that the matter has been finalised.

Information about the outcome of the complaint will be provided to the person making the complaint where appropriate and may include:

- An apology
- Any action taken as a result of the complaint
- An explanation of the reason for the decision – or an explanation of why it is not appropriate to comment on a specific matter
- Options for review that may be available to the person making the complaint if they are not satisfied with the outcome.

When communicating with a person making a complaint about the outcome of the complaint, consideration should be given to the provisions of the *Privacy and Personal Information Protection Act 1998* and the *Health Records and Information Privacy Act 2002* prior to sharing any information about the findings of an investigation. For further information, consult the [Privacy Manual for Health Information](#).

3.6.1 Complaints to be finalised within 35 days

The target timeframe for finalising complaints is 35 days from the date of assessment of the complaint. Some complaint issues may require a more urgent response or involve statutory timeframes.

A speedy response can be valuable in gaining acceptance of the outcome of a complaint. Where a complaint is more complex and cannot be resolved within the target timeframe, the person managing the complaint is responsible for providing regular updates (via phone, email or letter as agreed with the person making the complaint).

3.6.2 Complaints to be finalised in writing where appropriate

Except when a complaint is resolved at the first interaction, it is usually appropriate to notify the person who made the complaint about the finalisation of the matter in writing. Less serious complaints may require an email rather than more formal written correspondence. For more serious complaints, the letter must come from an appropriately senior staff member as determined by local procedure. If the correspondence is complex or deals with distressing issues, the complaint manager will offer to discuss the letter with the person making the complaint.

3.6.3 Delays in finalising a complaint

Where a complaint is unable to be resolved within 35 days, regular communication with the person making the complaint becomes important in preserving the person's confidence in the process.

A detailed progress update must be sent, including:

- An apology for the delay
- An explanation for the reasons for the delay
- An expected timeframe for when the complaint will be finalised.

3.7 After the complaint is finalised

It is important to provide feedback to staff about finalised complaints. Participation in feedback ensures staff are aware of issues, and through learning from the experience, can avoid repetition of problems.

The complaint manager must ensure that the actions taken in managing the complaint are appropriately documented and that complaints data is available for reporting to ensure transparency and accountability.

Any systemic issues that arise as a result of a complaint are to be considered, acted upon and shared with other NSW Health organisations if relevant.

4 UNRESOLVED COMPLAINTS

Where a person making a complaint is not satisfied with the outcome of their complaint or the way in which the complaint was managed, sometimes this can be addressed via offering a meeting to discuss their concerns and clarify any outstanding issues or miscommunication.

People making complaints are to be advised of their option to request a review by another senior staff member of the organisation. People who have made a complaint are also entitled to seek an external review, for example by the NSW Ombudsman (for a review of the management of a complaint) or the Health Care Complaints Commission (HCCC) (for a review of care and treatment provided).

These situations can provide valuable information to assist in complaints management and are to be registered in a way which links them to the initial complaint for data collection purposes.

4.1 Review of a complaint

Following an application for a review, the organisation must decide whether a review should be conducted. Reviews may be recommended where:

- It appears that there has been a procedural error in the complaints management process
- It appears that issues were not adequately considered or addressed

- It appears that the decision made may have been unreasonable in the circumstances.

If it is determined that there is no basis for further review, the person making the complaint must be advised in writing the reason for the decision.

If a decision is made to conduct a review, the reviewer must not be the person who initially managed the response to the complaint. The organisation will determine the best person to conduct the review and the issues to be covered.

The reviewing officer will report to the Chief Executive or delegate, who will notify the person making the complaint of the outcome of the review process, including any further action proposed to be taken.

The review process should not take longer than 35 days from the date of the request for review. As with the complaints process, the reviewer must provide regular updates to the person making the complaint about the progress of the review and the expected time frame. Where there are delays in a review being finalised, the person making the complaint must be provided with advice about the reason for the delay.

External reviews of complaints may be conducted by organisations such as the NSW Ombudsman or the HCCC depending on the nature of the complaint.

4.2 Re-opening a complaint

A complaint may be re-opened, or a related complaint management process commenced, where the person making the complaint has made a second complaint raising additional issues. This is not the same as an unresolved complaint, which relates to substantially the same issues.

It may be necessary to commence an investigation of the new issues. Where a person making a complaint claims to have new issues but is actually reframing the original issues, this will be identified during the assessment process and recorded as an unresolved complaint.

4.3 Unreasonable conduct by a person making a complaint

Unreasonable conduct is behaviour, which because of its nature and frequency, raises substantial health, safety, resource or equity issues for those involved. Using the term 'unreasonable conduct' allows us to focus on the problematic behaviour rather than labelling individuals as difficult, challenging or vexatious.

Unreasonable conduct does not mean that the person making the complaint has not raised a valid issue.

Unreasonable conduct may involve persistence, demands, behaviour, lack of co-operation or arguments which are beyond reasonable expectations. It may involve any combination of the above conduct.

This type of conduct can prove extremely challenging to manage and individuals managing this conduct will require additional support from the organisation. Further information and guidance on managing unreasonable conduct is available from the Ministry of Health Regulation and Compliance Unit ([MOH-](#)

Compliance@health.nsw.gov.au) and the NSW Ombudsman's Office (www.ombo.nsw.gov.au).

Effective complaint management processes are essential to resolving complaints and reducing dissatisfaction from people making complaints. These processes become particularly important when managing people who are persistent in making complaints or who engage in unreasonable conduct.

A person making a complaint has the right to pursue their complaint until it is resolved to their satisfaction. However, there are reasonable limits in terms of dealing with continued contact and correspondence about issues which have been dealt with.

Sometimes a face to face meeting can assist with resolving recurrent concerns, particularly in situations where the person making the complaint is willing to engage in a positive exchange of views about the issues.

5 ONGOING OBLIGATIONS

5.1 Performance Indicators

Organisations must have processes to measure and report organisational performance against the following indicators:

- Acknowledge receipt of each complaint within five calendar days (Benchmark – 100%)
- Finalise the outcome of each complaint and advise person making the complaint of outcome within 35 calendar days (Benchmark 80%)
- Unresolved complaints - the proportion of complaints received where interaction with a person making a complaint has not ceased following finalisation of the complaint, the complainant remains dissatisfied and the matter has been reviewed or escalated.

5.2 File Maintenance and record keeping

Organisations must maintain accurate records about complaints in accordance with NSW Health policies and local procedures, for example [Incident Management Policy](#).

The person managing the complaint is responsible to ensure that appropriate records are maintained during the management of the complaint.

This will include copies of correspondence, memos, briefs and file notes recording telephone conversations and other interactions.

Complaint records will not be kept with a patient's health care record.

Records will be maintained in accordance with the State Records Act.

5.3 Confidentiality

NSW Health staff have ongoing responsibilities to maintain confidentiality about the complaint process, including after the complaint has been finalised. This requires

everyone involved in the complaint to ensure that personal or identifying information about the complaint is restricted to those who genuinely need to know as part of their role. It may not be necessary or appropriate to include details about a complaint in a patient's medical record.

5.4 Continuous improvement

NSW Health is committed to improving the effectiveness of our complaint management system. To support this, NSW Health:

- Facilitates the making of and appropriate resolution of complaints
- Implements best practice in complaint handling
- Regularly reviews complaints data at a local level
- Seeks and provides feedback to people making complaints and staff following a complaint
- May conduct reviews to evaluate complaint handling across NSW Health.