

1. Policy Statement

The West Coast District Health Board (WCDHB) will facilitate in a respectful manner, the fair, simple, speedy and efficient resolution of complaints in accordance with The Code of Health and Disability Services Consumers' Rights ("The Code of Rights") and associated legislation.

Note: This Procedure complies with NZS 8134.1.1 Consumer Rights.

2. Purpose

All complaints are investigated so that the rights of both the complainant and complainee are respected throughout the investigation process.

The information acquired from the receipt, investigation and resolution of complaints will be used as a source of improvement opportunities within the WCDHB.

3. Application

This Procedure applies to:

- all WCDHB staff; in both inpatient and community settings
- agency staff, volunteers, honorary staff members and visiting health professionals;
- students (work experience, polytechnic, university etc.)

4. Definitions

For the purposes of this Procedure:

Complaint - any expression of dissatisfaction relating to a specific episode of care of an individual about the service offered or provided which has not been resolved to the complainants' satisfaction at the point of service for which WCDHB has responsibility. A complaint may be received in a number of ways such as verbal, written, electronic or through a third party including an advocate.

Consumer any user or potential user of a WCDHB health service;

Complainant an individual or advocate who makes a complaint;

Resolved a full and thorough investigation has been undertaken with an appropriate

Response provided to the complainant

5. Informing Consumers about making Complaints

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Consumers are informed of the WCDHB Complaints Procedure through the following means:

- Pamphlet, poster (consumer rights) and leaflet (complaints procedures) displays
- Information booklets/pamphlets given to consumers and family/whanau
- WCDHB staff and the Feedback/Complaints electronic form Tell us what you think
- WCDHB website
- Information provided on Consumer Surveys
- Advocacy Services

6. Responsibilities

The Quality & Patient Safety Manager (QPSM) has ultimate accountability for the Complaints Management System.

Complaints process is managed in partnership with the General Manager.

The Quality and Patient Safety Manager will:

- Delegate authority to the Quality Patient Health & Adverse Event Facilitator (QPH & AEF) to manage the complaints process;
- Report four weekly to the Executive Management and Quality, Finance, Audit & Risk Committee (QFARC) on relevant issues;
- Discuss with Corporate legal services and the General Manager of any potential risk to WCDHB arising from a consumer complaint;

The Quality Patient Health & Adverse Event Facilitator will:

- Confirm complaint details with the complainant
- Enter the complaint onto Safety 1st Feedback
- Enter details from each individual complaint into the WCDHB Complaints spreadsheet and confirm a copy of the complaint has been sent to the appropriate Quality Facilitator
- Ensure time frames are adhered to for complaints completion and where appropriate address delays with the relevant staff member/s completing the complaint review;
- Where and when relevant advise the Quality & Patient Safety Manager without delay;
- Establish and maintain a confidential digital copy file in pdf format for each complaint received;
- Ensure a WCDHB "Tell us What you think" poster is displayed alongside the WCDHB feedback box and where possible the Health and Disability Commissioner "Code of Rights" poster in all areas of the WCDHB including Primary Health;
- Provide a monthly report of complaint themes to:
 - o the Quality & Patient Safety Manager
 - o the Clinical Quality Improvement Team Grey / Westland and Buller
 - o the Executive Management Team

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• Complete an annual Complaints Survey to establish Consumer Satisfaction with the process

The Quality Patient Health & Adverse Event Facilitator in conjunction with the Quality & Patient Safety Manager, Director Allied Health, Operations Manager, Director of Nursing and/or relevant Clinical/Operations Manager will:

- Delegate such staff as are required to ensure that the complaints investigation and resolution process is not delayed by the absence of an individual with responsibilities under this procedure;
- Investigate and draft responses to consumer complaints relating to the service they are responsible for;
- Consider how best to resolve each consumer complaint;
- Consider how best WCDHB can learn from each consumer complaint;
- Maintain a register of changes to services or work practices that have resulted from investigation of consumer complaints

WCDHB Staff Members will:

- Familiarise themselves with the Health and Disability Code of Rights
- Attend de-escalation training
- Ensure they are familiar with this Procedure; and adhere to the time frames and documentation identified in the Procedure and Complaints Flow Chart
- Encourage and welcome consumer feedback on WCDHB services in both verbal and written formats
- On receipt of verbal complaints enter the details into the *Please tell us how we are doing electronic form* and check with the complainant that the information recorded is accurate
- On receipt of written complaints, forward the original written consumer complaint to the QPH & AEF within 24 hours

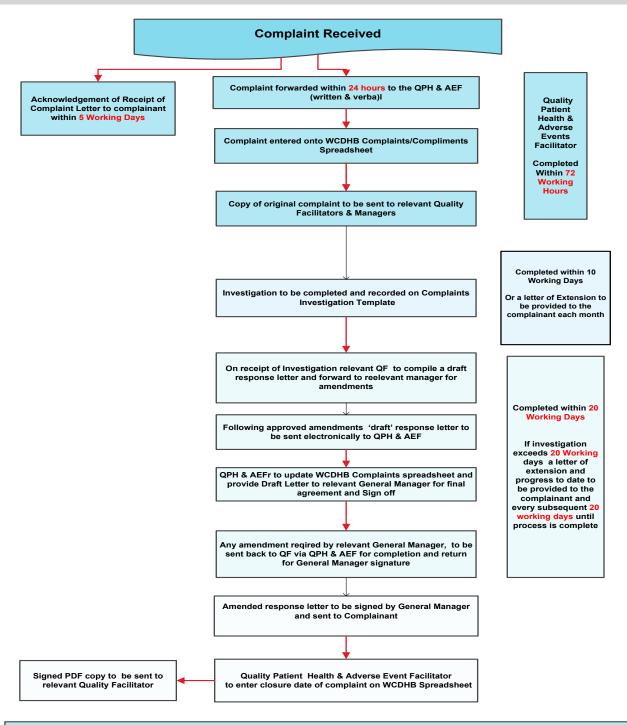
WCDHB Mental Health Consumer and Family Advisor will:

Act as a resource for the investigating team for Mental Health Complaint Investigation.

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7. Complaints Process



If any of the above actions cannot be completed within the designated time frames a letter advising of additional time required for completion of complaint investigation to be generated by QPH & AEF

Original to be sent to complainant and an electronic copy to be sent to the relevant QF;

Time frames above to be adjusted accordingly.

8. Staff Involved in Receiving Complaints Consumer Complaints Procedure Document Owner: Quality & Patient Safety Manager WCDHB-GEN#5 Version 11, Revised: July 2017 Master Copy is Electronic UNCONTROLLED DOCUMENT – WEST COAST DISTRICT HEALTH BOARD



Are encouraged to:

- Listen
- Give no excuses
- Apologise
- Ask complainant what their desired outcome is
- Advise complainant on how to register a complaint or forward the complaint to the QPH & AEF on behalf of the complainant

Avoid the following:

Using blunt or dismissive statements and using negative language, e.g. "we can't, we don't, we won't."

- Being overly emotional, evasive or speculative in your reply.
- Being defensive, e.g. "our staff are highly trained professionals and would not have said/treated you..." or "because we are overworked"
- Trying to apportion blame, particularly against the patient/family) e.g. "because of your refusal to follow the nurse's advice..."
- Using medical/technical jargon that a lay person would find confusing, intimidating or difficult to understand.

9. Legislative Compliance

5 working days

All complaints are acknowledged in writing within five (5) working days of receipt. If resolved within the 5 days the complaint resolution must be documented.

20 working days

All complaints are responded to in full, within twenty (20) working days, or the consumer is informed in writing of the need for further time and the reason for it.

Over 20 working days

The consumer is given written updates at intervals of not more than 1 month if the process takes longer than twenty (20) working days.

10. Non Resolution and Appeal Process

If the consumer is unhappy with an outcome, the consumer is advised of the options available to them:

Internal Options:

- WCDHB QPSM to review the process the complaint followed.
- The Clinical Director of Mental Health for mental health complaints for consumers under the Mental Health Act

External Options:

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- Advocacy Services
- Health & Disability Commissioner
- Mental Health District Inspector

11. Health and Disability Commissioner (HDC) Complaints

The process for handling HDC complaints is as follows:

- The Programme Director's office will copy any HDC letters to the QPSM, QPH &AEF, The Board Lawyer and the Executive Assistant to the CDHB/WCDHB Chief Executive as soon as they are received
- The QPSM logs the complaint on the Master Register
- The QPSM and/or the QPH & AEF co-ordinates the investigation and drafts a response for the Clinical Leads and Corporate Legal team to review. Final approval is provided by the Programme Director prior to the response being sent to the HDC
- The QPSM reports HDC Complaints activity and status to EMT and QFARC four weekly

12. Internal Associated Documents

- How are we doing Feedback Form
- Complaints Findings Template
- Human Resource Procedure



Complaint Findings Template



13. Associated External Documents

- Code of Health and Disability Services' Consumer Rights
- NZS 8134.1.1 Consumer Rights

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