

Consultation paper Complaint Handling Standards (DRAFT)

Revision 2023

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Executive Summary

The powers and responsibilities of the Health Complaints Commissioner (HCC) are established by the *Health Complaints Act 2016* (the Act). Section 132 of the Act requires the HCC to develop standards that Victorian health service providers must meet when handling complaints. This discussion paper is part of a broad consultation process to inform the revision of <u>existing</u> standards.

The Act requires a broad range of health services to meet the new standards, in relation to the size of organisations, types of services and providers, and locations where health services are provided.

We invite your contribution to this consultation

We welcome your response to some or all the consultation questions. You can do this in any of the following ways:

1. Complete this consultation paper and return it via email to:

Lorna Walsh, Communications, Media and Engagement Manager,

Health Complaints Commissioner Level 26, 570 Bourke Street Melbourne VIC 3000

E: lorna.walsh@hcc.vic.gov.au

2. Click on this link to complete our online survey

Our online survey is available until **18 October 2023**. The survey will take about 10 minutes to complete.

Definitions

Complainant The person making the complaint, who may be the person who received the health service or someone acting on behalf of the person who received the service.

Consumer Patient, client, service user or customer.

Service providers Any person or organisation providing a health service. This includes, but is not limited to hospitals, clinics, community health services; registered providers including doctors, dentists and physiotherapists; and general providers including massage therapists, speech pathologists, counsellors and alternative therapists.

Introduction

About the Health Complaints Commissioner

The Health Complaints Commissioner (HCC) deals with complaints about health service provision and the handling of health information in Victoria. Its role also involves conducting investigations and reviewing complaints data. Each year, the HCC receives approximately 8,000 complaints on a wide range of issues, most involved dissatisfaction with:

Issues related to the quality and safety of health care

- Issues related to the facilities or environment where care was provided
- Issues related to the processes such as access to care or costs
- Issues with the way they were treated by their providers (e.g., respect, dignity)
- Issues with communication and involvement in decisions about their care
- Issues with access, privacy and confidentiality of health information.

For more information about the HCC see hcc.vic.gov.au.

The legislation

The HCC's powers are established by the *Health Complaints Act 2016* (the Act). Section 132 of the Act requires that the HCC develop a set of standards to be met by health service providers in handling complaints. The standards must address:

- (a) information about making complaints in an accessible form
- (b) acknowledgement of complaints in a prompt manner
- (c) requirements to resolve complaints promptly
- (d) keeping each complainant informed about the handling of a relevant complaint
- (e) advising each complainant of the outcome of the relevant complaint
- (f) keeping personal information confidential
- (g) keeping records of all complaints, complaint handling and outcomes
- (h) any other matter for or with respect to the handling of complaints by health service providers.

Legislation requires review of the complaint handling standards at least once every 3 years. The complaint handling standards may also be amended or revoked at the Commissioner's discretion.

The process for revising the complaint handling standards

The Commissioner is consulting widely to ensure the complaint handling standards reflect the Victorian community's expectations. A draft of the revised standards was reviewed and approved by our Advisory Council in July 2023.

Feedback received to revise the standards will be evaluated using the following criteria:

- Supports customer focused complaint handling
- Consumer friendly and accessible language and format
- Captures the end-end journey of complaint processes
- Supports clear shared understanding of complaint handling processes for all involved
- Supports self-help by consumers and providers throughout in the complaint process (where suitable and appropriate)
- Supports impartiality and transparency in complaint handling processes
- Protects those who are vulnerable to disadvantage
- Supports early least formal direct resolution of suitable health complaints
- Supports the rapid recognition and escalation of complaints associated with high risk, complexity, public safety or serious concerns to a suitable authority
- Aligns with the Health Complaints Act 2016
- Reflect both best practices and community expectations
- Makes it easy for providers to know and comply with desired behaviours
- Sets clear expectations for desired behaviours
- Supports evaluation of compliance
- Supports education and training

- Supports efficient and effective use of resources
- Fit for purpose complaints management across a wide range of service providers

On completion of the consultation, the revised standards will be ratified by the Advisory Council then forwarded to the Minister for Health for approval. The Governor in Council, on the recommendation of the Minister, may publish the standards and give them effect on the date specified in the Government Gazette.

DRAFT

Consultation Paper

About standards and complaints

Standards

In the health system, standards ensure quality and protect consumer rights, safety and wellbeing. Consumers can feel confident knowing that a service has procedures to address problems if they occur. The revised complaints handling standards will complement other standards to reinforce the importance of person-centred care and listening to consumer's voice when improving service quality.

Complaints

A complaint is an expression of dissatisfaction with:

- the quality of an action taken, decision made, or service provided by an agency or its contractor
- a delay or failure in providing a service, taking an action, or making a decision by an agency or its contractor1.

1 Victorian Ombudsman, 2016

Complaints can be provided in many forms. They may be given verbally or in writing. The complainant may not officially say that they are making 'a complaint'.

When complaints are handled well there are many benefits. The person making the complaint will feel heard and respected. A well-managed complaint will build trust in the health service provider and the health system. On a broader scale, effective complaint handling systems lead to changes in practices and processes that builds confidence and trust in the health system, reduces harm or injuries, reduces the need for formal conciliation and litigation, and promotes a culture of continuous improvement and openness.

What health services do the standards apply to?

The complaint handling standards will apply to any person or organisation providing a health service in Victoria.

There are many types of service providers in the Victorian health system with many different models and systems for complaints handling. Some health organisations have large, centralised units with dedicated staff or purpose-built software to deal with complaints, while others have simple or manual procedures.

The complaint handling standards need to cover a broad range of health services, yet still have the rigour and clarity to work as benchmarks for good practice.

What the standards cover:

Acknowledging complaints

- 1. **Prompt response: Respond to complaints in a timely way, acknowledge receipt and provide an estimated resolution timeline.**
- Complaints must be acknowledged in writing within five working days of receiving the complaint.
- The provider sets out expectations about what will happen next and when.

Rationale

The Act uses the term 'prompt' but does not provide a definition such as a specific time limit.

Prompt official acknowledgement and response reassures the complainant by providing evidence they have been heard and that the matter is being considered.

Where possible, early resolution provides the best outcome for complainants and providers.

 Q.1 What does 'prompt response' to a complaint mean to you?

 Click or tap here to enter text.

Effective communication

2. Effective communication: Ensure clear and concise communication with complainants, actively listen to their concerns, and provide relevant updates throughout the resolution process.

- Health service providers have system and procedures that support regular communication with the complainant, in the way they prefer.
- Complainants know what to expect of the complaint process, what they need to do and when, and estimated timeframes for each stage.
- Complainants receive regular updates on the progress of their complaint, explanation for delay, prompt notification when further information is required, and updates on any change.
- It is easy for complainants to contact their provider to give them new information relevant to their current complaint, or to request an update.

Rationale

Effective two-way communication supports shared understanding, sets clear expectations and is crucial for successful complaint handling. Communication in multiple ways and tailored to individual needs supports understanding.

Q.2 What does effective communication throughout the complaint handling process include?

Click or tap here to enter text.

Fair and impartial investigation

3. Fair and impartial investigation: Conduct of a thorough and unbiased investigation into complaints includes gathering all relevant information and considering different perspectives before reaching a resolution.

- Complainants are asked about the outcome they are seeking early in the process.
- Complainants receive details about the information and facts considered when managing a complaint.
- Complaints handling staff are skilled in providing empathetic responses to complainants, including those not happy or dissatisfied with the outcomes.

Rationale

Fair and impartial processes complaint management builds trust.

Understanding expectations helps to clarify outcomes that are possible, manage expectations, correct misunderstandings, and focus discussions on issues important to the complainant.

Q.3 What are good practices for finalising and communicating complaint outcomes?

Transparent resolution

4. Transparent resolution: Provide complainants with a clear explanation of the findings, the reasons behind a resolution decision, and any actions taken to address the complaint.

- Providers monitor progress of a complaint to ensure processes take no longer than necessary.
- Complaints that can be quickly resolved with simple explanation or an apology are dealt with as quickly as possible.
- Health service providers consider urgency and complexity when estimating timeframes and allocating resources to complaint management.
- Complainants receive explanations of the actions taken and decisions made to arrive at the outcome.

Rationale

Complaints vary widely in the time and resources required to achieve an outcome.

Health service providers need to ensure suitable resources are allocated to complaints involving people with specific needs, complex situations, and those requiring detailed consideration of medical procedures, collection of information from multiple health providers or health services, or expert advice.

Q.4 What does 'transparent' mean in resolution of a complaint?

Click or tap here to enter text.

Continuous improvement and record keeping

5. Continuous improvement: Regularly review and evaluate complaint handling processes, identify areas for improvement, implement corrective actions and monitor effectiveness to enhance overall complaint management.

- Complaints are recorded, even if they are made verbally.
- Data from recorded complaints are analysed for trends and used to inform actions.
- Complaint recording and data systems capture, track and code complaint issues in systematic and meaningful way.
- Complaint data provides sufficient evidence for a third party to monitor progress of a complaint, and sound data for analysis and reporting.

Rationale

High quality complaints data supports identification of risk, and guides actions for local and sytem improvement.

Q.5 What does good complaints record keeping include?

Click or tap here to enter text.

Other issues

You may have other issues to raise or suggestions for how the Victorian complaint handling standards should be administered.

Q.9 What would make the standards easy for you to use?
Click or tap here to enter text.
Q.10 What would you change? Click or tap here to enter text.
Q11 What is missing from these complaint handling standards?
Click or tap here to enter text.

Q12 How can compliance be examined?

Click or tap here to enter text.