

## Auckland PHO Complaints Procedure

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### PURPOSE

- I. To outline procedures Auckland PHO Management, Board and Clinical Governance will undertake when dealing with complaints.
- II. To facilitate fair and efficient resolution of complaints in accordance with The Code of Health and Disability Services Consumers' Rights

### NATURE OF COMPLAINTS

Auckland PHO may receive complaints relating to business functions, clinical activities or conduct of employed or contracted health professionals;

A complaint may relate to an issue within the jurisdiction of the Health and Disability Commissioner or the Privacy Commissioner;

Right 10 of the Code of Health and Disability Services Consumers' Rights Regulation 1996 ("the Code") outlines how any complaint received from a consumer must be dealt with;

Where, however, a complaint raises issues of clinical competence or fitness to practise, there are additional obligations under the Health Practitioners Competence Assurance Act, 2003.

### CONSUMERS TO BE INFORMED OF RIGHT TO COMPLAIN

Right 10(6) (b) of the Code requires that consumers are informed of any relevant internal and external complaints procedures;

All Auckland PHO Practices and Contracted Providers who provide health and disability services to consumers should display in publicly visible place information which provides consumers with advice on their right to make a complaint and where and how such complaints may be made.

### COMPLAINTS PROCEDURES

#### **Complaints Regarding Delivery of Health Services including Primary Mental Health Services**

1. Right 3 of the Code requires that every provider must facilitate a fair, simple, speedy and efficient resolution of complaints;
2. Each member practice should have a person designated as the Complaints Officer who receives all complaints. Every complaint should be entered into a Complaints Register. Actions taken with respect to the complaint should also be documented in the Complaints Register;
3. Where a consumer wishes to make a complaint about any matter, they should be asked to put the complaint in writing. If there is some impediment to the complainant personally putting the complaint in writing, the complaint should be documented by the person receiving the complaint and then managed in the same manner as a written complaint
4. If Auckland PHO receives a complaint about a provider in a member practice or a M2M Provider, the Auckland PHO Complaints Officer will record the complaint in

the Auckland PHO Complaints Register and forward the complaint to the Practice or M2M Manager for investigation and resolution;

5. Each member practice will be responsible for resolving complaints concerning their organisation, irrespective of the nature of the complaint, in accordance with their own internal complaints policies which will comply with all legal requirements.
6. Any complaint must be acknowledged in writing within 5 working days of receipt, unless resolved within that timeframe;
7. Within 10 working days following such acknowledgement, the Practice/PHO must determine if the complaint is accepted as justified or not. If more time is required to investigate, and such time will be in excess of 20 working days, the complainant must be advised that more time is required to make a decision and the reason more time is required.
8. The Practice must inform the complainant of progress in determining the complaint at intervals of not more than one (1) month.
9. Upon a decision having been reached about the complaint, the Practice/PHO must inform the complainant of:
  - the decision;
  - the reasons for the decision;
  - any actions the organisation proposes to take as a result of the decision;
  - any appeal procedure the organisation has in place; and
  - the right to make a formal complaint to the Health Advocacy Service, the Health and Disability Commissioner or the Privacy Commissioner.
10. If a member practice receives notice of a serious complaint (e.g. involving clinical competence or fitness to practice which poses a serious risk of harm to the public, or involves fraud), the assistance of Auckland PHO may be sought. In the first instance the Complaints Officer of the affected Practice should request such assistance via the CEO who will take the concern to the Board Chair and Clinical Governance Committee who may refer on to the Health and Disability Commissioner or Privacy Commissioner.

## **NON-CLINICAL COMPLAINTS**

### **CEO**

The Board Chair deals with complaints against the CEO;

### **Board Members**

Complaints against Board Members are referred to the Board Chair;

Complaints against the Board Chair are referred to the Finance, Audit and Risk Committee Chair;

### **PHO Staff**

Complaints against employees and in matters of staff discipline and competence are dealt with in accordance with the provisions contained in the employee's employment agreement and manual;

All other complaints are dealt with by the CEO/Complaints Officer and Clinical Governance Committee.

## **NON-CLINICAL COMPLAINTS PROCEDURE**

1. Auckland PHO has a designated Complaints Officer who receives complaints. Every complaint should be entered into a Complaints Register. Actions taken with respect to the complaint should also be documented in the Complaints Register;
2. Where a person wishes to make a complaint about a matter, they should be asked to put the complaint in writing. If there is some impediment to the complainant personally putting the complaint in writing, the complaint should be documented by the complaints officer and then managed in the same manner as a written complaint;
3. Any complaint must be acknowledged in writing within 5 working days of receipt, unless resolved within that timeframe;
4. Within 10 working days following such acknowledgement, the Complaints Officer/designated person will determine if the complaint is accepted as justified or not. If more time is required to investigate, and such time will be in excess of 20 working days, the complainant must be advised that more time is required to make a decision and the reason more time is required;
5. The Complaints Officer/designated person will inform the complainant of progress in determining the complaint at intervals of not more than one month;
6. Upon a decision having been reached about the complaint, the PHO must inform the complainant of:
  - the decision;
  - the reasons for the decision;
  - any actions the organisation proposes to take as a result of the decision;
  - any appeal procedure the organisation has in place.

## **CONFIDENTIALITY**

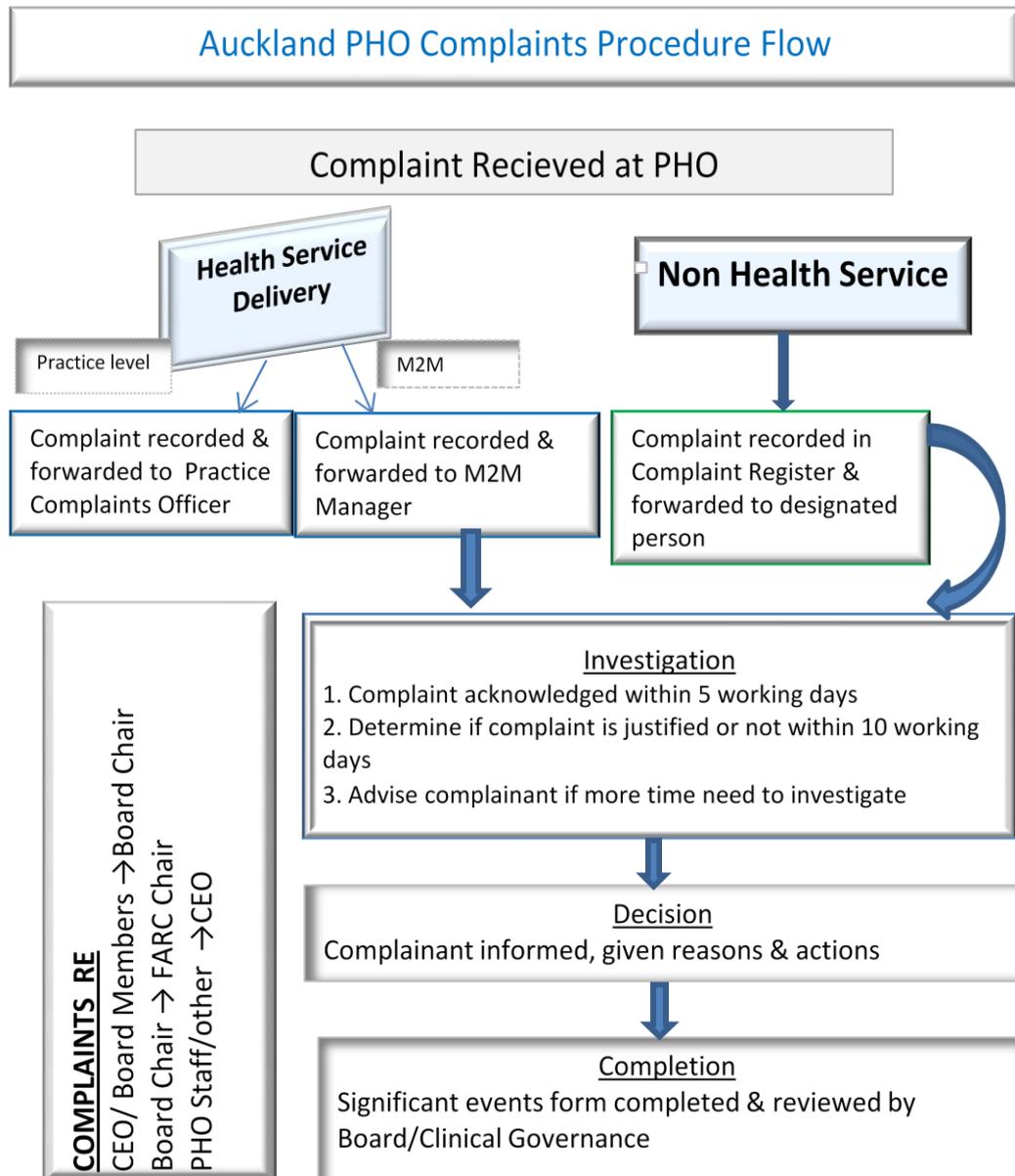
All steps in the complaints process are confidential ;

All documentation is kept in a securely locked file that is password protected or a locked cabinet.

**COMPLETION**

A Significant Events form is completed by the CEO and presented to the Board for review and evaluation;

Policy changes as a result are adopted and implemented.



<b>Document</b>	Quality Manual	<b>Version</b>	1.0
<b>Policy Area</b>	Complaints Procedure	<b>Last Updated</b>	
<b>Date Board Approved</b>	28 <sup>th</sup> September, 2010	<b>Next Review date</b>	September 2013
<b>Signed Chair</b>			
<b>Auckland PHO Board</b>			