



Health and Disability Commissioner
Te Toihau Hauora, Hauātanga

Office of the
Health and Disability Commissioner

Te Toihau Hauora, Hauātanga

Statement of Intent

2020–2024

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Foreword

The Health and Disability Commissioner (HDC) is an independent and impartial watchdog for the rights of people who use health and disability services. It is an important role, not only resolving people's individual complaints, but also protecting the rights of all New Zealanders who use our health and disability system.

As an organisation, we view every complaint as an opportunity for the system to learn, ultimately contributing to a reduction in preventable harm and improved experiences and outcomes. So often people tell us they complain because, "I don't want what happened to me to happen to somebody else." We cannot undo what has been done, but we can help individuals, and the organisations and systems in which they work, to learn from complaints, improve their practices, and better protect the rights of people in future.

This document sets out what I believe is required to be a sustainable and effective organisation. This includes the adaptations we have made, and will continue to make, to respond effectively and compassionately while the country and especially the health sector respond to COVID-19, and to respond to ongoing increases in complaint volumes while developing ways to shorten the time it takes to resolve those complaints. It also includes tailoring engagement, resolution pathways, and communications to improve equity by better reflecting New Zealand's diversity and the needs of less advantaged consumers. We will work closely with Māori consumers and their whānau, and providers to ensure that our complaints resolution processes are responsive to the cultural needs of Māori while continuing to uphold our role as an independent watchdog.

We will also work closely with the Initial Mental Health and Wellbeing Commission to ensure the seamless transfer of the Mental Health Commissioner's monitoring and advocacy role in relation to mental health and addiction services. This role will transfer to the new Mental Health and Wellbeing Commission following the coming into force of the Mental Health and Wellbeing Commission Act 2020 no later than 9 February 2021. HDC will retain jurisdiction for complaints about mental health and addiction services.

I am supported by a very able team. We have agreed on the following priorities for HDC for 2020–2024:

1. Responding sustainably to growing demand and increasing complexity of complaints
2. Continuously improving the way we operate
3. Strengthening our focus on equity
4. Enhancing the strategic impact HDC has on the health and disability system.

Anthony Hill
Health and Disability Commissioner

28 August 2020

Our organisation

The Health and Disability Commissioner promotes and protects the rights of people who use health and disability services, primarily by resolving complaints about infringement of those rights. The rights are set out in the Code of Health and Disability Services Consumers' Rights (the Code):

1. Respect
2. Fair treatment
3. Dignity and independence
4. Appropriate standard of care
5. Effective communication
6. Full information
7. Informed choice and consent
8. Support
9. Teaching and research
10. Right to complain

HDC is an independent Crown entity, established by the Health and Disability Commissioner Act 1994. New Zealand's unique no-fault accident compensation scheme for medical error creates a medico-legal environment where HDC is the only practicable independent way for people to ask for a provider's actions to be reviewed, and for that provider to be held to account for his or her actions. In that context, HDC's independence — from consumers, providers, and government policy — is critical to enable it to be an effective watchdog.

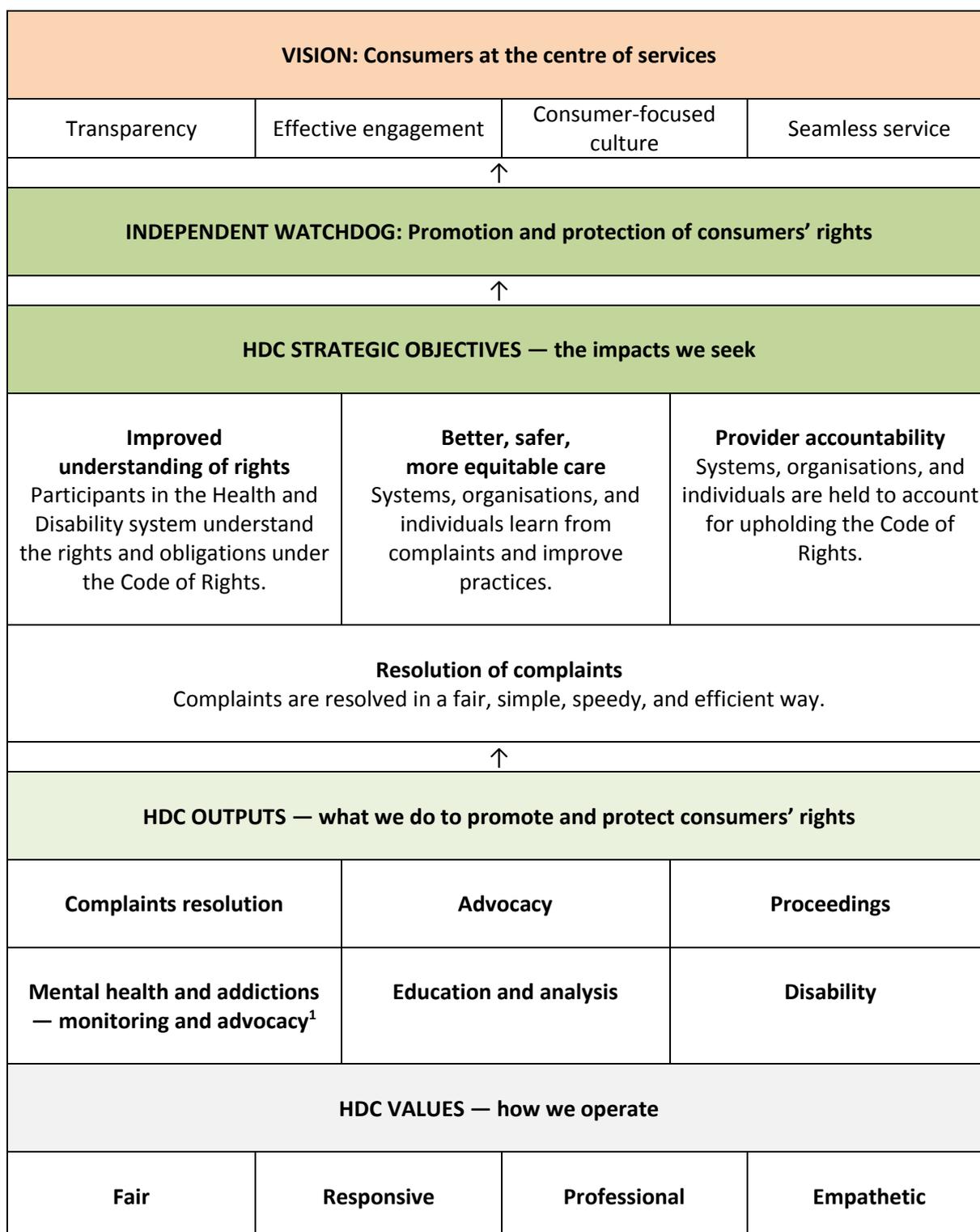
HDC also addresses the inherent power imbalance between consumers and providers by funding an independent Nationwide Health & Disability Advocacy Service (the Advocacy Service) to support people to raise their concerns directly with a provider where appropriate.

In addition to resolving complaints and holding providers to account, HDC encourages learning from complaints to improve the quality of health and disability services in New Zealand and grow people's understanding of their rights and responsibilities under the Code.

Our objectives and approach

HDC's vision for the health and disability sector is to have a consumer-centred system where people are fully engaged in their own care, consumers and their whānau are listened to, providers work effectively and respectfully together at all levels, and coordination within and between services is seamless. In a consumer-centred system the Code is upheld.

HDC has four strategic objectives that outline the impacts we seek to make. Together these objectives help to achieve our purpose of promoting and protecting the rights of health and disability services consumers. The objectives operate at an individual level, responding to specific issues, and improve the wider system so that it works more effectively next time, reducing preventable harm and improving experiences and outcomes for people who use health and disability services.



¹ This output will transfer to the new Mental Health and Wellbeing Commission following the coming into force of the Mental Health and Wellbeing Commission Act 2020 no later than 9 February 2021. HDC will retain jurisdiction for complaints about mental health and addiction services.

To help to promote and protect people’s rights under the Code, HDC carries out six core functions:

- **Complaints resolution**
HDC’s central function is to assess and resolve complaints. There are a number of options for resolving complaints, focusing on fair and early resolution.
- **Advocacy**
HDC contracts the Nationwide Health & Disability Advocacy Service to support people to resolve their complaints directly with providers, and to promote the Code through local networking and community-based education.
- **Proceedings**
HDC can refer a provider found in breach of the Code to the Director of Proceedings (an independent, statutory role), who will decide whether or not to take proceedings against that provider.
- **Mental health and addictions — monitoring and advocacy**
The Mental Health Commissioner monitors and advocates for improvements to mental health and addiction services. The Mental Health and Wellbeing Commission Act 2020, which will come into force no later than 9 February 2021, provides for the monitoring and advocacy function to transfer to the new Mental Health and Wellbeing Commission. HDC will retain responsibility for complaints about these services.
- **Education and analysis**
HDC uses the insights gained from complaints to influence policies and practice, including through submissions and strategic engagement. HDC delivers education and training initiatives to improve providers’ knowledge of their responsibilities under the Code. This work is complemented by the community-level education initiatives led by the Advocacy Service on behalf of HDC.
- **Disability**
The Deputy Commissioner, Disability has a particular focus on promoting awareness of, respect for, and observance of, the rights of people who use disability services.

HDC’s jurisdiction covers quality of care, and does not extend to funding issues or service entitlement.

Our values

HDC’s values — to be fair, responsive, professional, and empathetic — guide how we approach our work and our interactions, both internally and externally.

Our funding

HDC is funded under the Monitoring and Protecting Health and Disability Consumer Interests Appropriation in Vote Health. This appropriation is intended to protect the rights of people who use

health and disability services, including addressing the concerns of whānau, and appropriately investigating alleged breaches of consumers' rights.

Our partners

HDC works with a number of other agencies that have responsibilities for quality and safety. HDC refers complaints as appropriate, shares what can be learnt from complaints, and makes recommendations to those agencies.

In particular, HDC has a close relationship with the Health Quality & Safety Commission (HQSC), liaising about matters of concern, and supporting the development of systems that reduce variation and improve safety.

HDC receives valuable input from a Consumer Advisory Group, made up of disability, health, Māori, and Pacific consumer advisors.

How we contribute to health sector priorities

New Zealand Health Strategy

The Health and Disability Commissioner Act 1994 requires the Commissioner to take account of the New Zealand Health Strategy and the New Zealand Disability Strategy, so far as they are both applicable.

The work of HDC contributes to the current Health Strategy in the following ways:

Health Strategy theme	HDC contribution
People-powered	HDC provides a vehicle for the consumer voice to be heard, and for people’s complaints to be investigated and resolved independently. By making recommendations to rectify and avoid breaches of the Code, HDC helps to ensure that the system learns from the experience of consumers and continues to improve. Through promotion of the Code, HDC helps people to understand their rights and responsibilities, and supports people-centred policy and practice.
Closer to home	HDC contracts community-based advocacy work, delivered by the Nationwide Health & Disability Advocacy Service, which provides people with support closer to where they are based.
Value and high performance	HDC holds providers to account for their performance by assessing and investigating complaints, and taking legal proceedings against providers when necessary. HDC uses its insights to highlight emerging issues and to reveal underlying causes of problems. HDC makes recommendations for change on hundreds of complaints each year, and in this way holds the provider and system to account for learning and taking preventative action.
One team	HDC’s work in assessing and investigating complaints identifies gaps that prevent an integrated health system from operating seamlessly for people who use it. Based on these findings, HDC makes recommendations about how parts of the system can work together more effectively, to produce better, safer, and more equitable care.
Smart system	HDC’s monitoring, analysis, and reporting on complaint trend data contributes to systemic learning and improvement.

New Zealand Disability Strategy and Action Plan

The work of HDC contributes to disabled people achieving the health and well-being outcome in the New Zealand Disability Strategy 2016–2026, with a focus on ensuring that:

- Access to mainstream services is barrier-free and inclusive
- Services that are specific to disabled people, including mental health and aged care services, are high quality, available, and accessible

- All health and well-being professionals treat disabled people with dignity and respect
- Decision-making on issues regarding the health and well-being of disabled people is informed by robust data and evidence.

In addition to the health and well-being outcome, the work of HDC supports all eight outcomes of the Disability Strategy, which are interconnected.

HDC's work contributes to New Zealand's Disability Strategy by:

- Promoting disabled people's rights under the Code through educational initiatives
- Producing accessible disability related resources
- Providing a complaints process that allows disabled people's voices to be heard and providers to be held to account
- Making recommendations for improvements to services
- Funding the Nationwide Health & Disability Advocacy Service, which focuses on vulnerable consumers, including disabled people who may want additional support to raise concerns and make a complaint.

In its work, HDC takes into account the New Zealand Disability Action Plan 2019–2023, which sets out work programmes and actions for government agencies to deliver on the Disability Strategy's eight outcomes. The plan emphasises the involvement of disabled people in decision-making, and refers to improving access to quality health care and health outcomes, and reducing the use of seclusion and restraint as two of the outcomes for delivery. HDC also has regard for Whāia Te Ao Mārama 2018 to 2022: The Māori Disability Action Plan, which provides a culturally anchored approach to supporting Māori with disabilities, and their whānau, and should be read alongside the New Zealand Disability Action Plan. Improving outcomes for tangata whaikaha and their whānau remains an important priority.

Letter of Expectations of 23 March 2020

Well-being and equity underpin the Minister of Health's priorities for the health system, which include:

- Improving child well-being
- Improving mental well-being
- Improving well-being through prevention
- Better population outcomes supported by a strong and equitable public health and disability system
- Better population health and outcomes supported by primary care.

HDC contributes to better, safer, more equitable health and disability care, and thereby improved consumer experiences and outcomes, by resolving complaints, sharing lessons from complaints, and promoting the Code of Rights. Through its monitoring and advocacy function in relation to mental health and addiction services, HDC takes a particular interest in improving services' contribution to mental well-being. Our organisational priorities include a strong focus on equity in the health sector, and working with Māori to ensure that our complaints resolution processes are responsive to cultural needs while continuing to uphold our role as an independent watchdog.

Our priorities

Our priorities respond to the context in which we operate. This includes the impact of COVID-19 on our organisation and our response to it; increasing complaint volume and complexity; changing expectations for complaint resolution; inequity in our health and disability systems; and the levers HDC has to influence positive change. As a team, we have agreed on the following priorities for HDC for 2020–2024, to bring focus to how we deliver our core business and respond to government expectations:

1. Responding sustainably to growing demand and increasing complexity of complaints
2. Continuously improving the way we operate
3. Strengthening our focus on equity
4. Enhancing the strategic impact HDC has on the health and disability system.

Responding sustainably to growing demand and increasing complexity of complaints

There continues to be a steady rise in the number of complaints to HDC. This ongoing trend has become the standard environment within which HDC works. Between 2014/15 and 2019/20 there was a 27% increase in demand with a 15% increase in funding and, given financial constraints, the ongoing impact of this, compounded by the impact of COVID-19 on our complaint profile, is expected to be felt over the timeframe of this Statement of Intent.

Complaint volumes are expected to continue to increase, as they have been doing in similar complaints agencies internationally, and HDC anticipates ongoing growth of 2–8% per year. A number of factors may explain why complaint numbers are increasing, including improved accessibility of the complaints process, increasing public knowledge of people’s rights, and increasing health service activity. HDC, like similar complaints agencies, has also observed an increasing complexity of complaints, including complaints relating to multiple providers, that raise issues of vulnerability or that interplay with system-wide issues.

It is too early for HDC to model any likely increase in complaints arising from COVID-19, although these complaint trends are being monitored closely. HDC is also anticipating an increase in both complaint volume and complexity arising from the Abortion Legislation Act 2020 and the End of Life Choice Bill, should it be enacted.

HDC continually adapts to become more efficient in response to growing complaint volumes. We responded quickly to the challenges of the COVID-19 pandemic, continuing to deliver our essential services remotely during the lockdown period and maintaining a high level of output. We introduced new initiatives such as an electronic complaints process, more efficient complaints resolution pathways for referrals, and operation of the HDC 0800 number and a rapid response process through the Advocacy Service. These initiatives are now being embedded as a new normal in an environment of continuous improvement.

Complaints were addressed in a flexible and proportionate manner during the COVID-19 emergency response, ensuring public health and safety risks were responded to while being mindful of the pressures on the system. Despite the challenges presented by the COVID-19 pandemic and the

lockdown period, HDC resolved the highest number of complaints in Quarter 4 2019/20 compared to any other quarter.

Growing complaint volumes, however, balanced with the need to maintain quality, continue to put pressure on the time it takes to assess, investigate, and resolve complaints. HDC's targets for volumes of complaints closed and timeliness of closure are ambitious. However, failing to resolve complaints in a timely way impacts on the fairness of our decisions and the ability to deliver on HDC's purpose of promoting and protecting the rights of consumers. Over the period of this SOI, we will need to expand our capacity and be innovative and open to new ways of working in order to further increase efficiencies, while maintaining quality and enhancing HDC's impact on the health and disability system.

Continuously improving the way we operate

Public expectations for engagement and complaints resolution, technology, and ways of working evolve over time. HDC is committed to continuous improvement to respond to changing public expectations for complaints resolution and how we operate. This includes:

- Seeking feedback from consumers and providers in order to improve their experiences of engaging with us
- Strengthening processes and practices to make them more culturally appropriate for Māori and Pacific consumers, and more engaging and empowering for people less able or inclined to advocate for themselves
- Simplifying our language and making our website more accessible.

HDC is committed to reducing barriers to engagement with our complaints process. The role of Deputy Commissioner, Disability has a specific focus on increasing disabled consumers' awareness of their rights as set out in the Code, and ensuring that HDC is accessible and responsive to all consumers, including those who are less able or willing to speak for themselves.

In addition, we are collaborating with the Advocacy Service and consumer and whānau representatives to identify ways to reduce barriers to our complaints process for people accessing mental health and addiction services. This includes strong representation from Māori, and provides insight into barriers to engagement for Māori more generally, and opportunities for overcoming them.

There is also a recognised need to keep pace with changing technology, including people's preferred means of communication, and opportunities to become more environmentally sustainable. HDC and the Advocacy Service's remote-working responses to COVID-19 have accelerated changes, including greater use of virtual meetings, a transition to paperless offices, and providing all callers to HDC's 0800 number with the opportunity to talk through their options with an independent advocate.

Strengthening our focus on equity

People in New Zealand have differences in health that are not only avoidable but are unfair and unjust, with Māori as a population group experiencing the poorest health outcomes. HDC affirms Te Tiriti o Waitangi and the importance of working with Māori to achieve equity. As well as broader engagement with Māori, HDC's Consumer Advisory Group specifically includes three iwi positions (of 11 members). This helps to ensure that Māori perspectives are understood and taken into account on all issues, and expands HDC's connections into Māori communities, supporting a two-way flow of information.

HDC's watchdog role gives us a unique perspective on the health and disability system, and that systemic knowledge, alongside what is learnt from individual complaints, provides a platform for equity issues to be raised and addressed. The Advocacy Service is a key part of HDC's equity approach. Advocacy has a mandate to build strong networks in the community, with a particular focus on connecting with those who are least able to advocate for themselves and whose welfare may be most at risk. This includes people in aged care and disability residential facilities and prisons. Advocates work closely with iwi, Māori consumers and their whānau, Pasifika and refugee-migrant groups, and providers to ensure that the advocacy complaints resolution process is responsive to cultural needs. A proactive approach by advocacy ensures that those who may otherwise find it difficult to raise a complaint or seek the assistance of an advocate are supported appropriately to raise and resolve concerns.

Actions to strengthen our focus on equity include:

- Strengthening HDC's data collection, analysis, monitoring, and reporting of matters relating to equity
- Enhancing training to support cultural safety and responsiveness
- Tailoring engagement and resolution to the needs of Māori and less advantaged consumers
- Developing accessible materials to support consumers of disability services to understand their rights and make complaints
- Focusing on systemic issues for vulnerable populations, including in relation to mental health and addiction, disability, aged care, and people in prisons.

Enhancing the strategic impact HDC has on the health and disability system

HDC has unique powers and insights to identify and leverage systemic change within the health and disability sector. Whether through individual complaints, a pattern of complaints, Commissioner-initiated inquiries, sector engagement, or public and ministerial reporting, HDC has the ability to shine light on areas for improvement, and to make recommendations and advocate for changes to protect consumers' rights. For example, HDC engaged actively and in real time with sector leadership on significant issues arising in relation to the COVID-19 pandemic, including with the Minister of Health, the Director-General, DHB Chief Executives, and Primary Care leadership.

Increasing communications and analytical and policy capacity would enable HDC to proactively investigate, report, and influence decision-makers on areas of significant, ongoing service and system-wide concern.

How we deliver on our objectives

Complaints resolution: *Resolution of complaints is an objective in its own right. It also helps to ensure provider accountability and contributes to better, safer, and more equitable care.*

HDC's central function and primary vehicle for the protection of consumers' rights is the assessment and resolution of complaints. Options for resolving complaints range from direct resolution with the provider through to formal investigation, with a focus on fair, effective, and timely resolution.

When assessing complaints, HDC takes into account the issues raised and the evidence available. Complaints that could be resolved without HDC involvement are referred to the Advocacy Service or the provider for direct resolution between the parties. Both the Advocacy Service and providers are required to report back to HDC on the outcome of these referrals, ensuring that people's concerns have been addressed appropriately. HDC works with providers to strengthen their own complaints management processes, as a means of encouraging early and local resolution.

HDC can also refer complaints to other agencies when the issues raised are more appropriately dealt with by that agency.

Assessment of a complaint by HDC can involve a number of steps, including seeking a response from the provider, obtaining clinical advice, and asking for additional information from other providers involved, and from the complainant or other agencies. HDC listens to each side of the argument, weighs up the evidence, and makes an impartial decision.

The initial assessment may indicate that a provider's actions were reasonable in the circumstances, or that the issues can be addressed appropriately by HDC making recommendations for change. In a small number of cases, HDC will carry out a formal investigation of a complaint, which may result in a provider being found in breach of the Code.

The recommendations for change and the educational comments made by HDC in response to a complaint help to reduce the risk of preventable harm, and to strengthen the system overall. Recommendations can be made at an individual level, for example recommending additional training; at an organisational level, such as recommending that a clinic develop new procedures for staff; and at a systemic level, such as recommendations that the Ministry of Health create consistent national guidelines. HDC's recommendations have a high compliance rate (99% in 2019/20).

HDC will:

- Continue to receive, assess, investigate, and resolve complaints
- Improve its timeliness in the resolution of complex complaints
- Continue to ensure quality and fairness in its assessment and resolution of complaints
- Take a continuous improvement approach to ensure efficiency, improve the responsiveness of complaints processes, and embed positive changes made in response to the COVID-19 pandemic emergency.

Advocacy: *In addition to the resolution of complaints, the Advocacy Service's promotional educational initiatives contribute to improved understanding of the rights set out in the Code.*

The Advocacy Service facilitates early resolution of complaints, supporting people to resolve their concerns directly with their provider. It also promotes the Code through local networking and community-based education.

Advocates are located throughout New Zealand. They guide and support people to clarify their concerns and the outcomes they seek, and this clarity in turn enables providers to respond effectively and directly. Both sides being able to hear each other's stories is an essential part of the advocacy process.

The process often helps people to rebuild relationships, which is particularly important when there will be ongoing contact with a provider. It can also be very effective at teaching self-advocacy skills, so that people become more confident in handling future concerns, and in providing direct and valuable feedback to providers. In some instances, just having the opportunity to talk through the events and to draft a complaint letter with an advocate enables someone to achieve a degree of personal reconciliation, and they no longer need to make a formal complaint.

In addition to complaints resolution, advocates work to ensure that they are accessible and familiar within their communities. This includes visiting services that support people who are least able to self-advocate and whose welfare may be most at risk, like aged residential care or residential disability facilities. Advocates use these visits to provide information and arrange education sessions for residents, whānau/family members, and providers.

HDC will:

- Continue to contract the National Advocacy Trust to provide support for local and early resolution of complaints
- Continue to contract the National Advocacy Trust to provide community-based promotion and education to improve understanding and awareness of the Code
- Liaise with the National Advocacy Trust to develop additional ways to support early complaint resolution and the delivery of Code promotion and education while working remotely.

Proceedings: *The work of the Proceedings team is an important means of ensuring provider accountability and contributes to better, safer, and more equitable care.*

HDC can refer a provider found in breach of the Code to the Director of Proceedings (an independent statutory role), who will decide whether or not to take proceedings against that provider.

The Director can lay a disciplinary charge before the Health Practitioners Disciplinary Tribunal (HPDT) or issue proceedings before the Human Rights Review Tribunal (HRRT), or both. The Director's role is key in ensuring that providers are held to account where appropriate. A successful case sends a strong message, and this work is important in helping to set professional standards and maintain public confidence in the quality and safety of services.

The HPDT hears charges against registered health practitioners, such as doctors, midwives, and dentists. If the provider is not a registered health practitioner, for example a counsellor or

acupuncturist, the Director may file proceedings with the HRRT, which can also hear claims against bodies such as aged residential care facilities or DHBs. Unlike the HPDT, the HRRT can order a provider to pay compensation, although there are limited circumstances when this can occur.

HDC will:

- Continue to refer providers to the Director of Proceedings, where this is considered appropriate
- Continue to take proceedings, where this is considered appropriate.

Education and analysis: *HDC's educational initiatives and analysis of complaint themes and trends help to build understanding of Code rights and contribute to better, safer, and more equitable care.*

HDC uses the insights gained from complaints to influence policies and practice, including through submissions and strategic engagement. HDC delivers education and training initiatives to improve providers' knowledge of their responsibilities under the Code.

By sharing what it learns from complaints, HDC raises awareness of particular matters of concern and encourages learning. It does this in a number of ways, including:

- Publishing its decisions where there has been a breach of the Code
- Giving presentations and delivering education sessions both on the Code and on complaint trends
- Producing reports into complaint trends, both for DHBs and into particular services or matters of concern such as medication error
- Making recommendations to, and working closely with, HQSC and other key stakeholders to effect change from complaints.

As well as providing information on complaint trends, HDC's presentations to provider groups encourage compliance with requirements under the Code — activity that is complemented by the community-level education initiatives led by the Advocacy Service on behalf of HDC. HDC also runs complaints management workshops, which aim to increase the number of complaints effectively resolved by providers themselves, improve satisfaction with providers' responses to complaints, and encourage learning from complaints to improve quality of services.

HDC produces resources for consumers and providers in a number of languages, aimed at raising the general awareness of rights and responsibilities under the Code, including the right to complain.

Every year, HDC responds to 2,000 to 3,000 enquiries from members of the public, providers, and other agencies, helping to improve understanding about people's rights under the Code. Through formal submissions or by engaging with key stakeholders, HDC also advises on the need for better protection of the rights of people who use health or disability services.

HDC will develop new ways of working to provide contactless promotion and education activity as part of our ongoing COVID-19 pandemic emergency response and future resilience. HDC will continue to:

- Work alongside other agencies, including HQSC, to share insights and identify areas for collaboration
- Share with relevant stakeholders what can be learnt from complaints data
- Contribute to professional education, accreditation, and credentialling programmes

- Seek input from a Consumer Advisory Group
- Work with providers to improve their complaints processes.

Disability: *HDC's work specifically for people who use disability services helps to build understanding of their rights under the Code and contributes to better, safer, and more equitable care.*

The Deputy Commissioner, Disability has a particular focus on the rights of people who use disability services, including promoting awareness, respect, and observance of those rights.

This includes work to encourage disabled people and their whānau and support staff to lay complaints, and facilitating and encouraging disability support providers to improve their complaints management processes.

HDC is focused on making its own educational resources and complaints management processes more accessible and building the capability of its staff by providing disability responsiveness training and increasing in-house knowledge and experience of the disability sector.

HDC will:

- Continue to monitor themes and trends in complaints regarding disability services
- Improve understanding of Code rights within disability service users and providers through educational seminars and the development of accessible resources.

Mental health and addictions — monitoring and advocacy: *HDC's work specifically for people who use mental health and addiction services helps to build understanding of their rights under the Code and contributes to better, safer, and more equitable care.*

The Mental Health Commissioner monitors and advocates for improvements to mental health and addiction services.

Currently this role sits within the office of the Health and Disability Commissioner. However, the role, along with the associated responsibility to monitor mental health and addiction services and advocate for improvements to those services, will transfer to the new Mental Health and Wellbeing Commission following the coming into force of the Mental Health and Wellbeing Commission Act 2020 no later than 9 February 2021.

Once this happens, HDC will continue its complaints resolution work in relation to mental health and addiction services, which includes making recommendations for change in response to those complaints to individual providers, professional bodies, and other agencies. HDC will also continue with its analysis of themes and trends emerging from complaints. In addition, HDC will enhance the work it does to promote the Code among consumers and providers of mental health and addiction services, in light of the recommendations in *He Ara Oranga*, and will support the new Commission's work to assess mental health and addiction services.

Until its responsibilities are transferred to a new Commission, HDC will continue its current programme of work to monitor and advocate for improvements to mental health and addiction services. This is done by learning from complaints, engaging with the sector, and assessing service

performance information to create a holistic picture of mental health and addiction services in New Zealand and advocate to Ministers, Select Committees, and others for improvement.

HDC will maintain its focus on these services as areas requiring particular attention, owing to the number of complaints we receive and, often, the vulnerability of consumers by:

- Continuing to assess, resolve, and investigate complaints about mental health and addiction services
- Continuing to monitor themes and trends seen in complaints regarding mental health and addiction services
- Improving promotion of Code rights among consumers and providers of mental health and addiction services
- Supporting the work of a new Mental Health and Wellbeing Commission.

Assessing our performance

HDC will assess its impact through the key measures described below. Other measures are set out in detail in HDC’s Statement of Performance Expectations.

Objective	Performance measure
Resolution of complaints	<p>HDC’s primary vehicle for protecting consumers’ rights is resolving complaints. Resolving complaints holds providers to account, encourages quality improvement, and promotes consumers’ rights. HDC has a statutory obligation to facilitate the resolution of complaints in a fair, simple, speedy, and efficient way. In addition, HDC wants to ensure that its complaints resolution and advocacy processes are responsive and effective.</p> <p>To assess impact in this area, HDC will measure:</p> <ul style="list-style-type: none"> • Timeliness of the process. There is a target number of complaints to close each year as well as a measure of the age of open complaints. • Participants’ experience. The experience of participants (both consumers and providers) will be surveyed so that their insights can help to improve the complaints resolution process continuously.
Improved understanding of rights	<p>HDC aims to improve understanding of the Code and awareness of the right to complain. It does this through its regular interactions with consumers and providers, as well as by providing specific advice, analysis, resources, and educational initiatives.</p> <p>To assess impact on this objective, HDC will measure:</p> <ul style="list-style-type: none"> • Provision of, and satisfaction with, education sessions by HDC and the Advocacy Service • Provision of public statements and reports in relation to matters that affect the rights of consumers
Better, safer, and more equitable care	<p>The work of the HDC aims to improve quality of services both at a local and wider sector level. HDC does this by making quality improvement recommendations and sharing lessons from complaints. In this way, people and the systems in which they work are held to account — individuals learn, systems improve, preventative action is taken, and consumers’ rights are protected.</p> <p>To assess its impact on this objective, HDC will:</p> <ul style="list-style-type: none"> • Monitor compliance with the implementation of HDC’s recommendations • Provide DHBs with six-monthly complaint trend reports, and measure the usefulness of these reports for improving services • Publish complaint trend information

Provider accountability	<p>Providers can be held to account in a variety of ways — the simple fact that accountability mechanisms exist helps to drive change and quality improvement. The recommendations HDC makes hold providers to account for effecting change. For the most serious breaches of the Code, HDC will refer providers to the Director of Proceedings to consider legal action. HDC seeks to ensure that proceedings are taken in circumstances that are well judged, and that the processes we initiate lead to a result that holds providers to account in fact. Accordingly, HDC will measure the extent to which:</p> <ul style="list-style-type: none">• Professional misconduct was found in disciplinary proceedings taken• A breach of the Code was found in the HRRT• An award was made when damages were sought
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Organisational health and capability

Leadership

The Commissioner leads the organisation, supported by an Executive Leadership Team that consists of three Deputy Commissioners, three Associate Commissioners, the Director of Proceedings, and a Corporate Services Manager.

The Executive Leadership Team monitors HDC's organisational health and performance, including:

- Ensuring that HDC has the right people, capabilities, and capacity to perform its functions effectively and efficiently; that any current or forecast gaps are addressed promptly; and that appropriate plans are in place to develop the capabilities of teams and individuals
- Reviewing progress against priorities and making adjustments as required
- Ensuring specific responsibilities to focus on services needing particular attention, including mental health and addiction, maternity, aged care, and disability services
- Managing finances and assets effectively, including delivery of functions within budget and on time
- Ensuring HDC has the systems, practices, and processes in place to enable effective and efficient delivery
- Managing risks appropriately.

People capabilities and capacity

Our people are our greatest resource. The majority of HDC's staff possess professional qualifications and predominantly come from health, disability, or legal backgrounds. Together they bring to the organisation a wide range of skills in management, training, investigation, litigation, clinical practice, research, information technology, and financial management. This unique combination of skills and qualifications enables us to perform our core functions. To further complement staff skills, HDC uses a number of expert advisors, consultants, and contractors for specific specialist advice and/or projects, as well as its Consumer Advisory Group, which provides input from the consumer perspective.

HDC continues to improve its systems and implement policies that guide and enable staff to do their jobs well. To support a culture of high achievement and learning and a commitment to excellent service, we adhere to the State Services Code of Conduct within HDC and remain committed to our obligations of being a good employer. Members of the Executive Leadership Team will continue to promote whole system improvements within HDC in order to achieve its quality aims.

To ensure that we attract and retain quality people, HDC will continue to promote equal employment opportunities and endorse the seven key elements of a "good employer" as follows:

1. Leadership, accountability, and culture:
 - Provide inclusive leadership, systematic accountability, and a healthy culture
2. Recruitment, selection, and induction:
 - Identify and eliminate barriers to equal employment opportunities
 - Attract and appoint the best people, who have the appropriate skills, values, and attributes to meet HDC's needs, objectives, and strategic direction, in a manner that provides equal

employment opportunity to Māori, women, ethnic or minority groups, and people with impairments

3. Employee development, promotion, and exit:

- Provide opportunities for learning, growth, and development
- Provide opportunities to be innovative and productive through challenging tasks and projects

4. Flexibility and work design:

- Provide flexibility in work design, hours, and working arrangements
- Ensure staff are able to work remotely in an effective and safe manner while New Zealand responds to the COVID-19 pandemic

5. Remuneration, recognition, and conditions:

- Provide fair remuneration, recognition, and good working conditions
- Provide good communication to staff, with regular staff forums and our internal newsletter
- Organise functions to celebrate awareness events, for example New Zealand Sign Language Week, Mental Health Awareness Week, and Māori Language Week

6. Harassment and bullying prevention:

- Apply bullying and harassment prevention strategies

7. Safe and healthy environment:

- Invite employee participation in reducing occupational health and safety concerns
- Provide sponsorship for health and wellness activities
- Provide an Employee Assistance Programme — incident and confidential counselling

Environmental sustainability

HDC works to reduce its impact on the environment and to save money. HDC has a recycling programme, endeavours to buy locally, keeps a close eye on travel, encourages staff use of public transport where appropriate, and purchases environmentally friendly products and services where possible.

Financial sustainability

HDC, with prudent financial management, strives to meet increasing demand for its services, while ensuring the organisation remains financially sustainable. Funding additional resources to meet this increasing demand continues to be challenging in a fiscally constrained environment. The number and nature of complaints drives expenditure across three key areas of the organisation: staff, clinical advisors, and facilities (IT and property). HDC will continue to work with the Ministry of Health to ensure that HDC is resourced appropriately to undertake its purpose effectively.

Technology

Our information systems (information technology, document management, and website) must link to everything we do in order to maximise the accessibility of data and our ability to share information. Mining our own complaints data provides the statistical and evidential information required to support improvements in our own complaints handling processes, and provides insight into areas of potential risk and areas for improvement in health and disability services.

Key technology solutions are reviewed regularly and data is backed up frequently, and the IT disaster recovery plan is tested annually.

We have a rolling programme of work to review and enhance systems to meet the organisation's requirements and enhance staff productivity. We continue to make investments in our technology to support a "paperless" working process and remote working arrangement.

HDC has a secure and reliable internal IT platform. Security of IT systems and data is paramount, and HDC proactively manages its IT security arrangements, using specialised support as required.

Physical assets

HDC continues to manage its assets cost-effectively, and aims to maximise the useful life of its assets. Our governance policies and practices are strong. Our office spaces are well equipped and office equipment is well maintained. The office space is used effectively and teamwork is encouraged through the office layout.

Continuous improvement

HDC's internal continuous improvement approach focuses on identifying and implementing initiatives to further improve HDC's performance. The emphasis is on looking for opportunities to improve the timeliness, efficiency, and responsiveness of the complaints resolution process.

Acquisition of shares or interests in companies, trusts, and partnerships

HDC does not hold any shares or interests in companies, trusts, or partnerships, and does not intend to enter into any arrangement during the period of this document.