



HEALTH & DISABILITY COMMISSIONER
TE TOIHAU HAUORA, HAUĀTANGA

Complaints Management Guide

for
General Practice



Complaints Management

Responding to a complaint



Health and Disability Commissioner
Te Toihau Hauora, Hauātunga

What is the consumer unhappy about?

- Can the practice team identify signs of dissatisfaction from consumers?
- Can the concern be diffused through honest and open communication?
- What is the consumer hoping to achieve by making a complaint?
- Could a misunderstanding have arisen from cultural differences?
- Would the complainant and/or consumer benefit from the assistance of an interpreter?
- Would the complainant and/or consumer benefit from talking to a more senior practice team member?
- Is an apology necessary?

How should the complaint be handled?

- What does the practice's complaints policy require?
- Should the Complaints Officer be advised?
- Is the practice team member aware that a complaint has been made about them?
- Would it be appropriate to involve the team member(s) complained about and/or the senior practice team member in charge of the services provided to the consumer?
- How should the complaint be recorded? Should it be logged on a complaints database, or notified to the practice's Complaints Officer?
- Is a resolution meeting appropriate? How soon can a meeting be arranged?
- Has the consumer and/or complainant been provided with updates about their complaint in accordance with required timeframes outlined in Right 10 of the Code of Health and Disability Services Consumers' Rights?

Training and understanding

- Is HDC information readily available in the practice?
- Are all members of the practice team given training on how to recognise a complaint?
- Does the practice have a complaints policy in place that is well understood by all practice team members?
- Are consumers told that they can make a complaint directly to the practice, and who to speak to?
- Has a Complaints Officer been identified who is responsible for managing and coordinating complaints received?
- Is the Complaints Officer given training on effective complaints management?
- Are all members of the practice team given training on how the practice's complaints policy works?
- Overall, is there a positive and proactive culture among the practice team in respect of dealing with and responding to complaints?
- Do all members of the practice team view complaints as a learning opportunity?

Are effective reporting systems in place?

- Are complaints consistently logged on the practice's system?
- Does the system allow for collation of complaints data, including the number of complaints received and the outcome of complaints?
- Can trends be identified from the complaints data?
- Are any complaint trends used to effect quality improvement?
- Is there a process for learnings from the practice's complaints to be disseminated to other practices eg peer review groups, or the PHO etc?
- Are all members of the practice team periodically provided with the complaints data?
- Is feedback sought from consumers and/or complainants about how they view the practice's complaints management processes?
- Is positive feedback used to reinforce and recognise quality improvement?

RIGHT 10: Right to Complain



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1. Every consumer has the right to complain about a provider in any form appropriate to the consumer.
2. Every consumer may make a complaint to -
 - a) the individual or individuals who provided the services complained of; and
 - b) any person authorised to receive complaints about that provider; and
 - c) any other appropriate person, including -
 - i. an independent advocate provided under the Health and Disability Commissioner Act 1994; and
 - ii. the Health and Disability Commissioner.
3. Every provider must facilitate the fair, simple, speedy, and efficient resolution of complaints.
4. Every provider must inform a consumer about progress on the consumer's complaint at intervals of not more than 1 month.
5. Every provider must comply with all the other relevant rights in this Code when dealing with complaints.
6. Every provider, unless an employee of a provider, must have a complaints procedure that ensures that -
 - a) the complaint is acknowledged in writing within 5 working days of receipt, unless it has been resolved to the satisfaction of the consumer within that period; and
 - b) the consumer is informed of any relevant internal and external complaints procedures, including the availability of -
 - i. independent advocates provided under the Health and Disability Commissioner Act 1994; and
 - ii. the Health and Disability Commissioner; and
 - c) the consumer's complaint and the actions of the provider regarding that complaint are documented; and
 - d) the consumer receives all information held by the provider that is or may be relevant to the complaint.
7. Within 10 working days of giving written acknowledgement of a complaint, the provider must, -
 - a) decide whether the provider -
 - i. accepts that the complaint is justified; or
 - ii. does not accept that the complaint is justified; or
 - b) if it decides that more time is needed to investigate the complaint, -
 - i. determine how much additional time is needed; and
 - ii. if that additional time is more than 20 working days, inform the consumer of that determination and of the reasons for it.
8. As soon as practicable after a provider decides whether or not it accepts that a complaint is justified, the provider must inform the consumer of -
 - a) the reasons for the decision; and
 - b) any actions the provider proposes to take; and
 - c) any appeal procedure the provider has in place.