NSU Complaints Management Policy (NSU 02)

|  |  |
| --- | --- |
| IntroductionPurposePolicy OwnersScopePrinciplesPolicy Statement | This policy applies to all complaints involving NSU screening programmes and aims to provide clear direction on receipt, response management and monitoring of complaints.  The NSU values complaints as important feedback on programme performance and quality of service provision. This policy outlines the management process of all complaints in accordance with the Code of Health and Disability Services Consumers’ Rights and the rules about Health Information as set out in the Privacy Act 1993 and the Health Information Privacy Code 1994.  Complaint Response  There are two complaint response processes outlined in the policy and they are;   1. Complaint received involving a (or more) contracted NSU service provider.   **NSU will be notified of any major complaint as outlined in the Complaint Classification Matrix:** refer to*Appendix One*  **The provider will lead the complaint response process for all complaints using open communication with the consumer and in compliance with the Code of Health and Disability Services Consumer’s Rights 1996 and NSU Complaints Management Policy. NSU may provide support to a provider if indicated:** refer to *Appendix Two*  The basis of a complaint may lead to a serious adverse event (SAC 1 or 2); it will require a formal review as outlined in the NSU Adverse Event Policy.   1. A complaint arises within the NSU which involves administrative and support functions to the national screening unit in its central agency role.   **NSU will inform the relevant stakeholders of the complaint and will lead the complaint response process using open communication with the consumer and in compliance with the Code of Health and Disability Services Consumer’s Rights 1996 and NSU Complaints Management Policy:** refer to *Appendix Three*  The basis of a complaint may lead to a serious adverse event (SAC 1 or 2) which will require formal review as outlined in the NSU Adverse Event Policy.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  The purpose of the policy is to ensure complaints are impartially investigated to determine whether there has been a breach of the consumer’s rights under the Code of Health and Disability Services Consumers’ Rights 1996. Complaints are to be managed using the agreed processes. The specific timeframes are to be met in acknowledgment and response to any complaint(s) received.  Complaints may be received verbally, in writing or electronically.  This policy is to provide clear direction on the complaint response process and monitoring of complaints that will ensure:   * All complaints are impartially investigated * Acknowledgement and responses occur appropriately and within specified timeframes * The best possible outcome for the complainant and the organisation is achieved * Confidentiality and privacy of all involved individuals is respected * Monitoring of the process and outcome of complaints occurs * Potential and actual risks are identified * Compliance with legislative requirements are met * Cultural preconception is mitigated * Outcomes and trend data is shared with the appropriate staff and the wider programme, and is used to inform quality improvement opportunities and risk mitigation plans   **This policy excludes complaints made by an employee against another employee/s. These are managed by the respective Human Resources Department as the employer of the staff.**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   * National Screening Unit Group Manager * Clinical Director Screening   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   * This policy applies to all NSU staff and contractors * This policy applies to all NSU service providers.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  The national screening programmes are delivered by many screening service providers. The NSU and national screening programme providers have a joint responsibility to ensure that all people who are part of the screening pathway receive high quality care where the risk of harm is minimised.  The NSU and screening programme providers will ensure a principle-based approach to the complaint management process:   1. Open communication with consumers, their families and whanau in a culturally appropriate manner 2. Transparency is achieved so that open disclosure and the discussion on the complaint is conducted in a transparent and open manner with consumer and participating staff 3. Timely investigation is required, and reporting of screening programme related complaints to ensure earlier identification of any wider system issues or risk of recurrence 4. Fairness – staff, consumers and support people involved in complaints are entitled to fair treatment and with a ‘just culture’ approach 5. Systems approach is taken in reviewing complaints and identifying improvements 6. Quality improvements actions are implemented to improve NSU and provider systems, processes and to reduce risk of recurrence 7. Monitoring of agreed corrective actions arising from complaints will be conducted by the NSU to measure progress and the risk of recurrence 8. Lessons learned are shared with the sector to reduce the possibility of recurrence 9. Support and professional advice maybe sought by staff during the investigation of a complaint   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Complaints may be received verbally, in writing or electronically.  All complaint investigation and responses will consider ‘The Code of HDC Services Consumers’ Rights’.  The Code of HDC Services Consumers’ Rights (Right 10) specifies the time frames for communicating with the complainant from when a complaint is received until it has been resolved, however does not specify the timeframe for resolution.  Complaints must be acknowledged in writing (this can be done via email) within **5 working days** of receipt, unless they have been resolved to the satisfaction of the consumer within that time frame.  If the complaint response is unable to be sent within **20 working days** of giving written acknowledgment of receipt, the organisation must determine how much more time will be needed to investigate the complaint.  If more than the initial **20 working days** is needed to prepare the response, the complainant must be informed of the reason for the additional time and the due date of the response.  The complainant must be given updates on the progress of their complaint at intervals no greater than monthly until it is resolved.  Complainants have the right to a health advocate at any stage during the complaints process and have the right to access the Health & Disability Commissioner or Health & Disability Advocacy Service. |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Guidance**   |  |  | | --- | --- | |  |  |  DefinitionsProcess | The following points will assist in the interpretation and use of the NSU complaint management policy.   * This policy is to inform the response actions and responsibilities of NSU staff, contractors and NSU providers at the time a complaint has been received * The policy outlines what and when a service provider will notify to NSU if a complaint involving the NSU has been received * The policy does not outline the detail of the service provider response as the provider’s response actions will be guided and conducted according to the provider complaint management policy and procedures * The provider complaint management policy must adhere to the *New Zealand Health & Disability Services Standards*, *National Adverse Events Reporting Policy 2017*, *Privacy Act 1993, Health Information Privacy Code 1994 and Health and Safety at Work Act 2015* * In the first instance the affected consumer/s name will not be required and only shared on a ‘need to know’ basis. Other consumer demographic information and NHI will be required to avoid duplication of effort or confusion throughout the investigation and complaint resolution process * NSU and NSU providers will strive to ensure that the HDC recommended timeframes for a complaint response are met wherever practical * It will be an ‘exception to the rule’ that a request for a time extension will be made to the HDC office relating to a HDC complaint * In accordance with the NSU Quality Framework active and closed complaints are a learning opportunity and are valued as a measure of the effectiveness of the NSU systems and process * The NSU provider ‘moderate’ and ‘minor’ complaints will be reported to NSU in the regular contract relationship reporting mechanism * All provider notifications of a complaint involving the NSU will be referred to NSU according to timeframes in the policy. If the provider is uncertain then they can contact NSU to seek advice * Lessons learnt will be used to inform quality improvement activity for each programme and within NSU * The response to a complaint should be prepared with the following points in mind: * A complaint response must be timely, impartial, transparent, sensitive, and accurate. * Cultural appropriateness must be maintained. * Complaints will be investigated by the appropriate / delegated person/s and resolved at the lowest level possible. * An important factor in resolving complaints is to identify what the consumer wants to happen because of their complaint. * The response is to acknowledge the consumer perspective in the complaint including any distress and the impact of the situation they are describing in the complaint.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  The following definitions apply to this policy, unless otherwise stated.   |  |  | | --- | --- | | Word or phrase | Definition | | **Active Complaint** | A complaint that has been received by NSU or NSU provider or Health and Disability Commissioner (HDC); the investigation/ response is underway, and a final resolution has not been reached. | | **Closed Complaint** | A complaint that is either resolved to the satisfaction of the Complainant (as evidenced by no notification to the contrary) within 10 working days of receiving the complainant receiving the response  OR  A complaint where the Complainant has been referred to the Health and Disability Commissioner (HDC) and resolved to the satisfaction of the complainant with contribution from NSU and or the provider. | | **Complaint** | A complaint is any expression of dissatisfaction or unhappiness about a particular action, service or decision that is received from an external source, and that requires a response from NSU and or HSU provider. Complaints are managed in accordance with the Code of Health and Disability Services Consumer’s Rights (1996). | | **Consumer** | For the purposes of this policy a consumer can also be a client, patient or resident. It is the person who uses/receives health and disability services, or their representative. | | **Just Culture** | A system of natural justice that reflects what we know of socio technical system design, free will, and our inescapable human fallibility. | | **Open communication** | A timely and transparent approach to communicating with and supporting health consumers when a complaint is received. This included a factual explanation of what happened, an apology, and actions that deal with the actual and potential consequences of the event.  An important aspect of open disclosure is explaining to the consumer how the incident has been reviewed, and what systems will be put in place to make sure similar incidences will not happen again. | | **Representative** | A person to which the consumer has given their permission to make a complaint or represent them on their behalf:  Where the consumer is under 16, the parent or a guardian, or any person authorised in writing by the parent or guardian to act on behalf of the patient.  Where the consumer is deceased, the executor or administrator of the estate  Where the consumer is alive, over 16 and is unable to give consent, a person acting on the patient’s behalf. (This could be someone authorised in writing by the patient or family to act on behalf of the consumer). | | **Response to**  **complainant** | The primary communicator will ascertain how the complainant would like to be updated, ascertain their wishes around resolution or outcome, and how they would like to receive the response. This may include a meeting in person, or in writing, and/or include a health advocacy service. | | **Review** | A review is another name for a formal investigation process that is carried out by NSU or the service provider to analyse an adverse event arising from the complaint. There are a variety of review methodologies such a root cause analysis (RCA) applied to conduct a review. The findings may lead to may lead to corrective actions and changes to organisation wide systems and processes. | | **SMART (mnemonic)** | **S** ~ specific  **M** ~ measurable  **A** ~ achievable/ assignable  **R** ~ relevant/ realistic  **T** ~ time bound | | **Unresolvable** | Where efforts to resolve the complaint to the complainant’s satisfaction have been exhausted. The complainant may be advised of the option of contacting the office of the Health and Disability Commission for independent review. |   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  All service providers contracted by NSU are required to have their own complaint management process. In the first instance consumers should be directed to the relevant service provider and or the Office of the HDC.  Should the complainant decline to contact the relevant service provider directly or they are dissatisfied with the outcome of the service provider’s investigation then the complaint may be formally directed to NSU. If this occurs the complaint will be managed in accordance with the attached NSU Complaint Management Process flowchart 2.  There are two process flow charts aligned to the   1. NSU Provider Major Complaint Response Process - **refer to Appendix Two** 2. NSU Complaint Response Process - **refer to Appendix Three** 3. The process flow charts are colour coded; **blue** for providers and **green** for NSU.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Related NSU Policies & StatementsReferences | | | NSU Adverse Event Management Policy (NSU 01)  NSU Open Communication Policy (NSU 03)  NSU Quality Framework 2015  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Ministry of Health, New Zealand Health and Disability Services Standards, NZS 8134:2008  Health & Disability Commissioner, Guidance on Open Disclosure Policies  Health & Disability Commissioner, Complaint Guidelines  Health and Disability Commission (Code of Health and Disability Services Consumers’ Rights) Regulations 1996  Health Quality Safety Commission National Adverse Event Policy 2017  Privacy Act 1993  Health Information Privacy Code 1994  Public Records Act 2005  Principles of the Treaty of Waitangi | |

**APPENDIX ONE**

**NSU Complaints Classification Matrix**

|  |  |
| --- | --- |
| **Process 1 ~ Provider Complaint** | **Process 2 ~ NSU Complaint** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Notification**  **to:** | **Response prepared by:** | | **Person signing letter:** | **Severity overview and potential outcomes for complaints** |
| **Major** | **Process 1**  NSU  Programme  Manager  **Process 2**  NSU  Clinical Director    **and**  NSU Group  Manager | **Process1**  NSU Provider  Lead  Investigator  **Process 2**  NSU  Programme  Manager | | **Process1**  NSU Provider  Senior  Leadership  role/s  **Process 2**  National  Clinical Director  **and or**  NSU Group  Manager | **Overview: All major complaints for immediate notification to or by NSU if one or more criterion applies:**  - Received via Members of Parliament, Health and Disability Commissioner, Coroner, Ministry of Health, or media  - Complaints regarding serious adverse events (SAC 1 or SAC 2)  - Provider will conduct an open disclosure process with the affected consumers/s  **Resolution Requirements:**  - Requires formal review/ investigation, a complainant with supporter meeting/s  - May require additional support or expert advice to/ from NSU  **Potential outcomes:**  - High likelihood of ministerial notification  - High likelihood of adverse media attention /high public interest  - Risk to reputation of organisation/ NSU  **Timeframe for notification:**  **Notification as soon as practically possible – up to 2 working days of receipt** |
| **Minor / Moderate** | **Process 1**  According to  NSU Provider  Complaint  Policy  **Process 2**  NSU  Programme Director / Manager | **Process 1**  NSU Provider  Lead  Investigator  **Process 2**  NSU  Programme Lead Investigator | **Process 1** According to NSU Provider Complaint Policy  **Process 2**  NSU  Programme Director / Manager | | **Overview for Moderate and Minor complaints** **if one or more criterion apply:**  - Legitimate consumer concern, especially a concern about communication or provider practice management, but not causing lasting major detriment  - Complaints that meet the criteria for adverse events 3 or 4 (SAC 3 or SAC 4)  - Breach of NSU priorities / values  **Resolution requirements if Moderate:**  - - Requires investigation by health provider prior to resolution and closure  **Resolution requirements if Minor** - Resolution straight forward – with explanation, clarification of policy / procedure, or simple apology  **Potential outcomes for Moderate:**  - Some likelihood of adverse media attention  - Some risk to reputation of organisation/ NSU  - No impact or risk to provision of NSU service provision or programme support  - Easily resolved at frontline  **Potential outcomes for Minor:**  - Minimal/ no likelihood of adverse media attention  - Minimal/ no risk to reputation of organisation/ NSU  **Timeframe for reporting to NSU:**  **Within regular contract monitoring reporting or up to 120 days** |

APPENDIX TWO



APPENDIX THREE

