

Mount Kuringgai Medical Centre Complaints Policy

1. Purpose of this policy

Mount Kuringgai Medical Centre recognises the right of our patients, family, carers of others, to make a complaint about the care and service they receive from our organisation. This policy outlines our approach to handling those complaints.

2. Definition of a complaint

A complaint is an expression of concern, dissatisfaction or frustration with the quality or delivery of service, a policy or procedure, or the conduct of another person.

3. Principles for the management of complaints

a. Access

This complaints policy and procedure aims to be accessible, simple to understand and well-publicised to ensure ease of use. All staff, clients and stakeholders will be given a copy of this policy on request.

b. Timeliness

Any complaint, whether verbal or in writing, will be handled in a timely manner, taking into account the complexity and seriousness of the issues raised to facilitate a resolution for all parties concerned. All staff are encouraged and supported to actively resolve any complaint or issues raised with them. Staff understand when to escalate matters to more senior staff to avoid unnecessary delay and timely resolution.

c. Confidentiality

The privacy and confidentiality of all parties will be respected as appropriate in keeping with the Australian Privacy Principles.

Accurate and secure records will be kept of each complaint, including recording of reasons for all significant decisions.

d. Resolution

Once an investigation is complete and the circumstances considered, a, fair and reasonable remedy or remedies will be offered where appropriate. Quarterly monitoring, review and reporting of complaints received, and any actions taken will be performed by staff and management. Where appropriate, preventative and corrective action will be undertaken to reduce the likelihood of further complaints, promote quality service delivery and maintain a safe environment for patients, staff and stakeholders.

4. Declining complaints

Our Practice Administrator, in consultation with our medical practitioner may decide not to deal with a complaint if it is:

- a. Frivolous
- b. Vexatious
- c. Not made in good faith
- d. Misconceived
- e. Lacking in substance
- f. Lacking in currency
- g. A legal claim has been commenced (by any party involved in the complaint)
- h. The complaint has been lodged with an external agency and it is more appropriate for the matter to be dealt with by that agency
- i. The organisation has already dealt with the substance of the complaint in the past

5. Process for dealing with complaints

- a. Details of the complaint are taken by the staff member who first speaks with the person making the complaint
- b. Where relevant, the person making the complaint may be asked to provide details in writing. A written complaint will be acknowledged within 48 hours of receipt.
- c. The details are documented by the person receiving the complaint in our complaints record



- d. Any immediate action taken to resolve the complaint are also recorded
- e. Where relevant staff are to escalate a complaint as soon as practicable
- f. If a complaint cannot be resolved immediately, the person making the complaint is to be provided with a time frame in which the matter may be resolved.
- g. The person making the complaint will be kept informed throughout the investigation process, outcomes, time frames concerned and any unexpected delays in the process.
- h. Depending on the nature and / or seriousness of the complaint, the Practice Administrator may directly contact the person making the complaint and discuss the details, how the person wants the complaint handled and outcomes sought.
- i. Medical practitioners are encouraged to speak personally to a person making a complaint should the matter relate to clinical care and service provided.
- j. Written responses to complaints are provided within 48 hours of resolution of the complaint
- k. If a person making a complaint does not want the organisation to deal with their complaint, details of external agencies are to be provided.
- I. Where the complaint implies serious misconduct (for example, serious risk to the health and safety of staff or clients, or a criminal offence), or where mandatory reporting is required, the organisation has an obligation to refer the matter to the appropriate agency as required by law.

6. Complaint Records

Complaint documentation is to be kept separate from patient files. Where a complaint involves a staff member and results in disciplinary action, a note is made in the personnel file with all other documentation relating to the complaint kept in a separate file.

7. Conflict of interest

Individuals who may have a conflict of interest in the matter cannot be involved in the management of a complaint.

8. Responsibilities

The Practice Administrator and medical practitioner/s are responsible for:

- Providing leadership in demonstrating a commitment to the resolution of complaints made to the organisation
- · Ensuring there is an effective, timely, impartial, and just system for dealing with complaints
- · Making final decisions relating to complaints received

The Practice Administrator is also responsible for:

- · Management and monitoring of complaints handling within the organisation
- Exercising primary responsibility for receiving and resolving complaints in a timely and fair way
- Where appropriate, advising people of their right to make a complaint
- Providing advice and assistance to people who have a complaint
- Providing independent, impartial and confidential information to complainants about the procedure for dealing with complaints, including listening to the issues and helping the person clarify the facts
- Providing impartial advice and assistance to staff and medical practitioners who have received and are handling a complaint
- · Conducting internal reviews of complaints regarding process and content
- Identifying systemic issues arising from complaints and making recommendations where necessary People making a complaint are responsible for:
- Providing a clear and honest account of their concerns and their expectations for the outcome of their complaint, including providing all relevant information and documents to assist in the investigation and resolution of the matter
- Engaging openly in the complaint handling process, including participating in discussion with other parties to resolve the concerns
- Responding to requests for information in a timely manner
- Respecting those individuals involved in the complaint handling process Staff directly named or involved in a complaint are responsible for:
- Providing a clear and honest account of their concerns and their expectations for the outcome of the complaint, including providing all relevant information and documents to assist in the investigation and resolution of the matter
- Engaging openly in the complaint-handling process, including participating in discussions with other parties to resolve the concerns



- Responding to requests for information in a timely manner
- Respecting those individuals involved in the complaint-handling process

9. External agencies

Sydney NSW 2001

Details of external agencies to be provided on request are:

Complaint about privacy and confidentiality and access to personal information:

Office of the Australian Information Commissioner Email enquiries@oaic.gov.au Facsimile +61 2 9284 9666 Phone 1300 363 992. Post GPO Box 5218