**Complaints Policy**

**Procedure**

Patients and others have opportunities to register their complaints, either via our suggestion box in waiting room, letter or verbally. Patients or others are able to complain anonymously if desired.

All members of our practice team are prepared to address complaints as they arise.

When receiving complaints, our practice keeps in mind the following in order to minimise further patient anxiety and hostility:

* Handle all complaints seriously, no matter how trivial they may seem.
* Verbal complaints made in person are addressed in a private area of the practice where possible.
* Use tactful language when responding to complaints.
* Do not blame others; patients may not have all the facts, or they may distort them.
* Address the patient’s expectations regarding how they want the matter resolved.
* Assure the patient that their complaint will be investigated, and the matter not disregarded.
* Offer the person an opportunity to complete a formal complaint form (they may accept or decline).
* Document all complaints and other relevant information and place this in the complaint folder so the person designated to manage complaints is informed of the complaint (even if the matter appears to have been resolved).
* Alert the general practitioner about disgruntled or hostile patients so they can diffuse the situation immediately - often patients are reluctant to make a complaint directly to a general practitioner.
* Always inform the person designated to manage complaints if you become aware of any significant statements made by the patient or significant change in patient attitude.

The practice has appointed ***Dr Damien Zilm and*** ***PSM Country Health Management Team*** with designated responsibility for seeking, collecting, analysing, investigating, resolving and managing all feedback and complaints. Any investigation and resolution of complaints is undertaken using an open disclosure process, incorporating the following:

* Acknowledge the patient’s right to complain.
* Acknowledge receipt of the complaint as soon as possible, but within two (2) working days.
* Respond to all complaints as soon as reasonably practicable, but within thirty (30) days in an open and constructive manner including an explanation and if appropriate an apology.
* If a resolution of the matter is to take longer than thirty (30) days, an update of the resolution activities will be provided to the patient, with an anticipated revised timeframe for resolution.
* Work with the patient to resolve the complaint and communicate the outcome with the patient, including any changes made as a result of the complaint.
* As a routine, contact the practice’s insurer when there is a complaint about a member of the medical or clinical team in order to seek advice on resolving the complaint before any action is taken (refer to **Section 8.7 – Management of potential medical defence claims**).
* Where a complaint is made against a practice team member, provide the team member with an opportunity to discuss the details in a private setting.
* Ensure the complaint does not adversely affect the patient’s care.
* Record the complaint, investigation and actions in the dedicated complaints file and, if related to patient care, include a copy in the patient’s health record.
* Ensure, where appropriate, complaints are reviewed at practice team meetings; analyse trends and discuss the methods of resolution.
* Review other types of patient feedback (i.e. feedback surveys, suggestion box) during practice team meetings.
* Keep a record of improvement(s) made in response to feedback or complaints.
* Where appropriate, inform the patient about practice improvements made as a result of their input.

If the matter cannot be resolved, the patient is advised about how to contact the external health complaints agency for our state/territory.

**Western Australia**

Health and Disability Services Complaints Office (HaDSCO)

Complaints and enquiries line: (08) 6551 7600 / 1800 813 583

Web: [www.hadsco.wa.gov.au](http://www.hadsco.wa.gov.au)

Complaints that relate to privacy issues or concerns that cannot be resolved internally are to be directed to the Office of the Australian Information Commissioner (OAIC).

**Office of the Australian Information Commissioner**

Telephone: 1300 363 992

Postal Address: GPO Box 5218, Sydney NSW 2001

Web: [www.oaic.gov.au](http://www.oaic.gov.au)

Members of the public may make a notification to the Australian Health Practitioner Regulation Agency (AHPRA) - [www.ahpra.gov.au](http://www.ahpra.gov.au) - about the conduct, health or performance of a practitioner or the health of a student. Practitioners, employers and education providers are all mandated by law to report notifiable conduct relating to a registered practitioner or student to AHPRA.

Patient feedback

Policy

Our practice encourages patients and other people to give feedback, both positive and negative, as part of our partnership approach to healthcare. We have specific processes in place for responding to feedback.

In order to respond to patient feedback and make improvements, our practice has appointed a person with primary responsibility for examining issues raised and for facilitating improvements in the practice.

Opportunities are available for patients and other visitors to tell us ‘How we are doing’. We have a ‘suggestion box’ available in the waiting room which allows patients to give us personal feedback on a day-to-day basis. We aim to follow up ideas and acknowledge notes of appreciation where we can.

Patients are encouraged to raise any concerns directly with the practice team and attempts are made for a timely resolution of such concerns within the practice in accordance with our complaints resolution process (refer to **Section 5.13 – Complaints**).

Our practice team seek structured/systematic patient experience feedback at least once every three (3) years and the data collected is analysed and the findings, including any improvements made, are communicated back to our patients.

As part of our risk management activities, a record of incidents, including complaints from patients, is maintained.

* + 1. Procedure

Our practice has appointed Dr Damien Zilm – GP Principal/Director and *the PSM Country Health management team* with primary responsibility for examining issues raised and facilitating improvements in the practice.

At any time, patients can provide feedback or make a complaint. They are advised of the processes for providing feedback through:

* A notice displayed in the waiting room and information on the practice website
* Provision of a ‘suggestion box’ in a common patient area (i.e. waiting room), and
* Adequate training provided to all practice team members to ensure patients of the practice feel confident that any feedback or complaints made at the practice will be handled appropriately.

We seek structured/systematic patient experience feedback at least once every three (3) years, which meets the requirements outlined in the RACGP’s *Patient feedback guide*.

Data collected by our practice is analysed to identify potential opportunities for quality improvement. These findings are communicated back to our patients through a poster in the waiting room, newsletters and via our website, or individually as appropriate.