


Name of Procedure:	Complaints and Suggestions from clients While written to cover complaints received from clients the general process is also applicable to complaints or suggestions from stakeholders.	
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Ratified by:	Manager, Client Services	Signed:
Ratification Date:	August 2014	
Review Date:	August 2017	
Compliant with Policies:	Client Services, Planning & Quality	
Purpose of procedure:	To guide the collection and processing of complaints and suggestions	

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Description of procedure

This procedure contains flowcharts and notes that outline the collection and processing of complaints and suggestions.

Complaints

Despite the best intentions, complaints may arise. These need to be dealt with in a courteous and understanding manner. Perceptions of what is reasonable and fair can change when patients are unwell or anxious

Written or emailed complaints

- Client complaints are reported in writing to the CEO
- All complaints must be entered into the Complaints, Grievances, Incidents and Near Miss Register (Q:\Register) by the CEO or EA
- All complaints must be acknowledge in writing
- It is at the discretion of the CEO whether the complaint is tabled at the Senior Management Meeting or at the Board of Management.

- Those meetings decide if any response or change is required and whether that such action should be added to the Continuous Improvement Register.
- The CEO must inform the complainant of the outcome of the complaint.
- Patient complaints and their outcomes will be discussed with relevant staff, to enable staff to understand the nature of the complaints received and the outcomes

Verbal complaints

The following procedure is to be adopted by staff when dealing with verbal complaints:

- Listen to the complaint. Be understanding. Acknowledge the complaint.
- Staff must not admit responsibility for complaints of a serious nature
- Staff must consult with, and pass the client onto their senior manager. The SM should encourage the client to put their complaint in writing. Generally, it is advisable to request all serious complaints to be written
- In the case of a complaint against a doctor, staff should not become involved in the detail but rather encourage the patient to agree to a meeting with the Manager, Client Services or, if unavailable, the CEO to discuss the grievance
- The CEO should be made aware of any incident involving a complaint as soon as possible.

If the complainant is not satisfied with the outcome of the complaint process at PLAHS , they are entitled to forward their complaint to the Health & Community Services Complaints Commissioner (HCSCC) Ph. 1800 232 007.

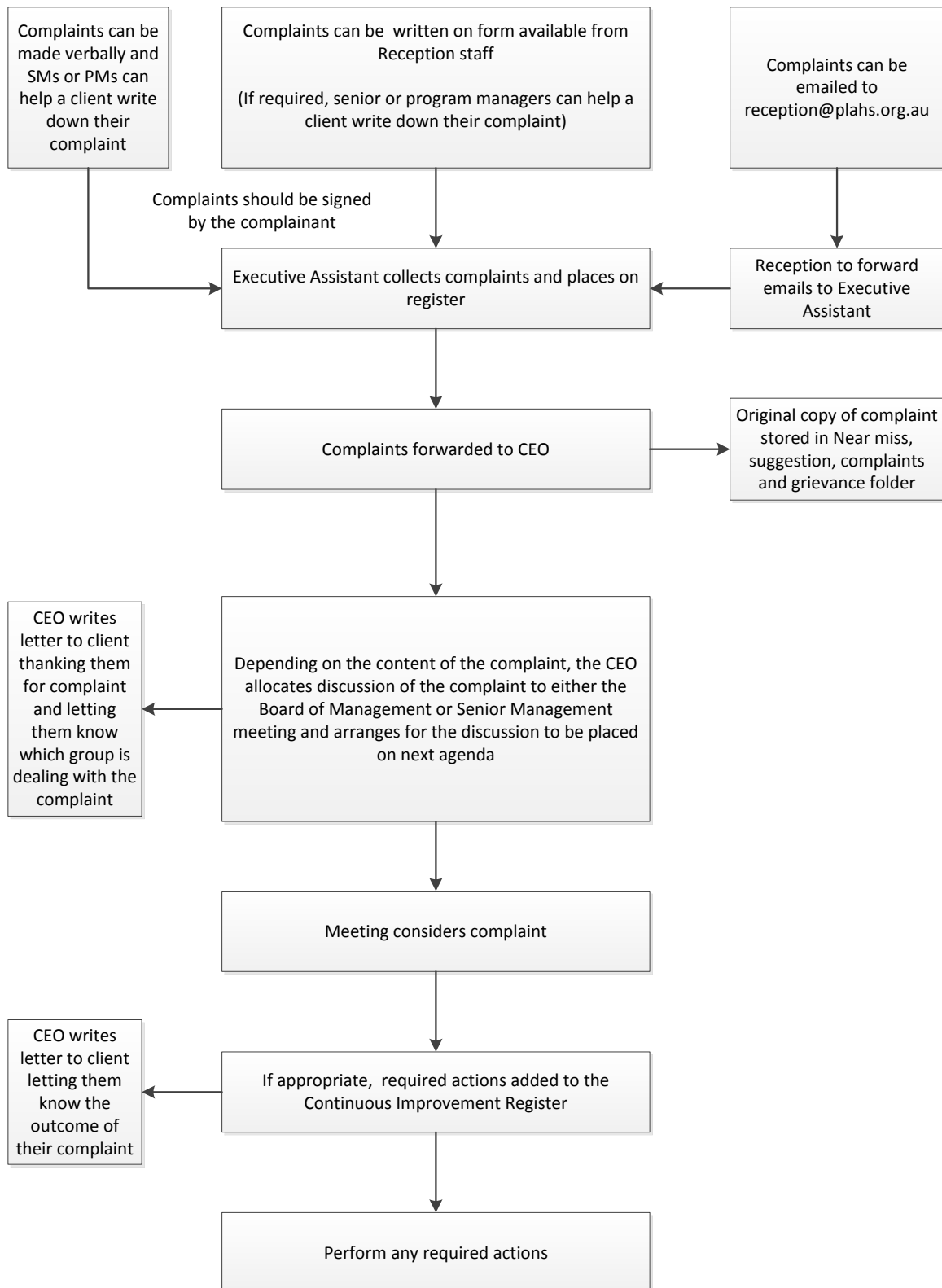
If the complaint is in regard to a privacy or confidentiality issue and it is not resolved at PLAHS the client must be informed that they can take their complaint to Office of the Australian Information Commissioner. (Ph: 1300 363 993, email enquiries@oaic.gov.au)

Complaint Investigation Process

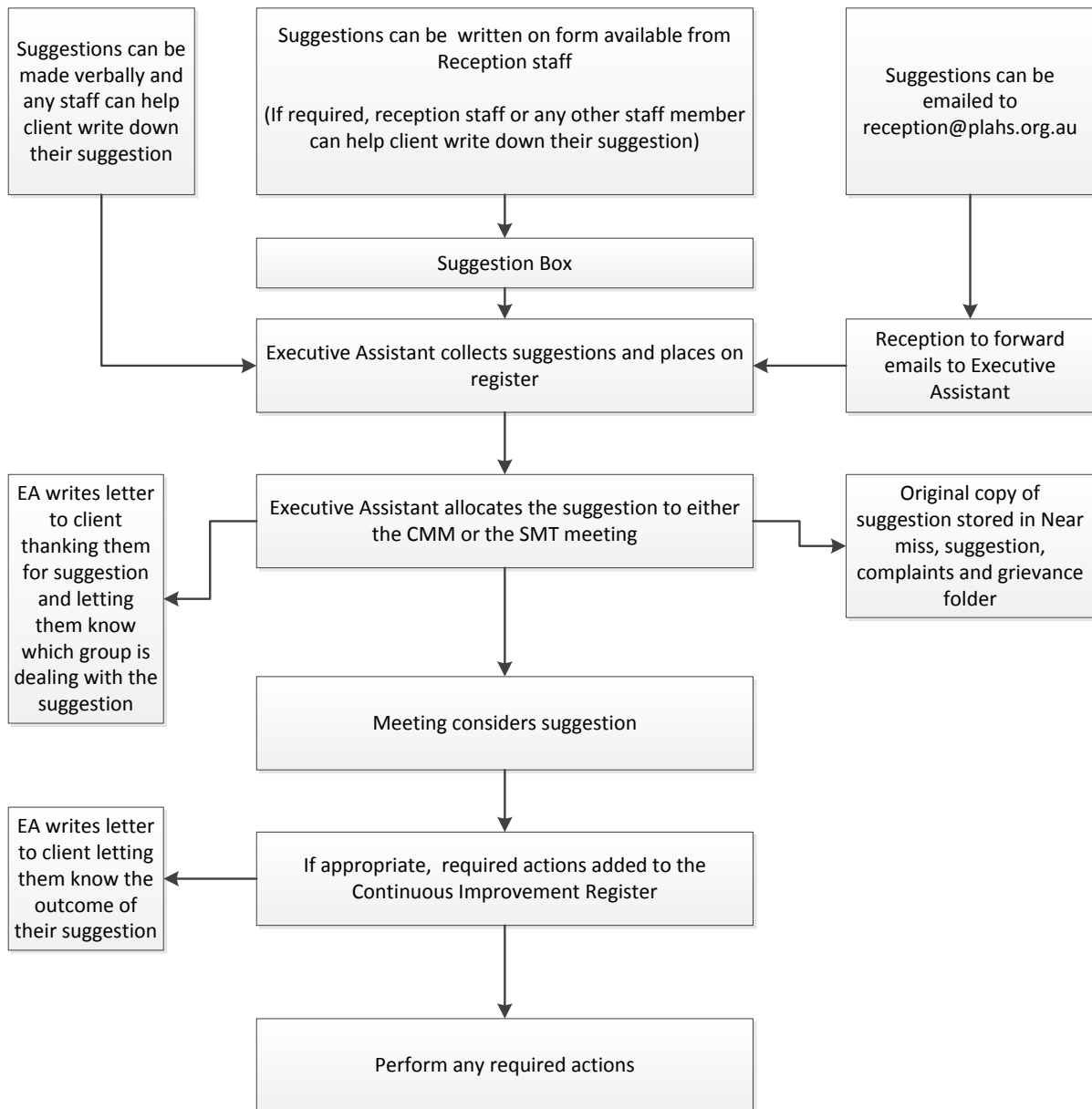
Written complaints made by patients will be dealt with by the relevant Senior Manager and/or CEO. The following steps are to be adopted when investigating a complaint:

Problem Analysis	What (if anything) was done wrong/poorly? What system, procedure or person may have been involved?
Generate Strategy	What can occur to rectify/amend the problem?
Provide Feedback	The client should be informed of <ol style="list-style-type: none"> 1) who is dealing with their complaint and the expected time-frame 2) the outcome of the investigation and any changes planned as a result of the complaint.
Forward Planning	What steps can be taken to prevent future complaints of a similar nature; i.e. how can we learn and improve from this experience?

Complaints Flowchart



Suggestions Flowchart



Procedure Development Notes

Date	Activity
9/9/2013	Collection of existing documents
9/9/2013	Initial consultation with staff
11/9/2013	First draft completed
12/9/2013	Circulated to SMT & RO-P&Q for comments
13/9/2013	Final draft completed
13/9/2013	Ratified
13/9/2013	Added to procedure register
14/07/2014	Version 2.0-Reviewed and edited by RO-P&Q
22/7/2104	A draft circulated to the Combined Managers Group for comment
Aug 2014	Ratified

Procedure Implementation and Communication

When ratified by the Manager of Client Services,

- a copy of this procedure will be made available electronically as a PDF at Q:\Procedures\Planning & Quality and the intranet
- the signed hard copy will be stored in the policy and procedure filing cabinets in the Administration office.
- the working copy will be copied into the following year's working document folder

Staff will be informed at the whole of staff meeting what procedures have been ratified for the month and this should be reflected in the minutes.

As this procedure is of importance to the whole staff, the Manager of Client Services, will go through the procedure at the whole of staff meeting.