**Division:** All Mercy Health

Approved by: Executive Director, Quality Safety and Innovation



## **Purpose**

At Mercy Health, individuals have the right to expect quality care and services. If we fail to meet the expectations of the community we care for (patients/residents/clients), they, along with their representatives have the right to provide and have their complaint, suggestion, or enquiry handled in a prompt, effective, respectful, and courteous manner.

Feedback (complaint, suggestion, enquiry, or compliment) provides us with an opportunity to examine how we can improve the quality, safety, and efficiency of our service delivery. Mercy Health encourages and supports the community we care for and the workforce to report complaints. Effective management of complaints can prevent issues from escalating, and further enhance satisfaction and experience. We are also committed to use feedback to inform improvements for individuals and the organisation.

Complaints may be received relating to historical concerns and must be investigated in alignment with divisional procedures in place at the time the complaint is received. There is no time limit for individuals to raise concerns.

It is the responsibility of all staff to help resolve issues as quickly and effectively as possible. Attempting resolution as soon as an issue is raised is referred to as local resolution. All staff must assess complaints against Mercy Health's high risk criteria. There are escalation structures in place to ensure the most appropriate person is involved in managing the issue raised, including when local resolution has not been successful.

# Staff complaints

If a complaint is received from a staff member and is not made on behalf of a patient, resident or client, refer to the Employee Grievance Resolution Procedure.

### **Child Complainants**

Where an initial review indicates that an allegation is credible or there is an indication of apparent misconduct, or that the matter involves a child-related allegation, charge or conviction, appropriate action must be taken to address the matter in accordance with the relevant state legislation and organisation policies and procedures. This includes historic matters where the alleged victim may now be an adult. All staff and volunteers must cooperate with law enforcement processes and directives. Staff and volunteers should be aware that potential disciplinary action (including being redeployed or stood down) in situation where a complaint of child sexual abuse is plausible, and there is a risk that the person may come into contact with children, the person be stood down from their role while the complaint is investigated.

Staff and volunteers should refer to Mercy Health's <u>Protection of Children Policy</u> and relevant state procedures or the Safeguarding Coordinator for further guidance conduct related to children. Divisional feedback management procedures contain detailed information about roles, responsibilities and accountabilities of relevant individuals, positions and committees.

# **Who Must Comply**

All staff, students, contractors and volunteers.

### **Policy**

- All Mercy Health facilities will implement the feedback management and handling process as outlined in the Mercy Health Feedback Framework
- All facilities will manage feedback in line with Mercy Health's guiding principles of complaints management being (1) quality improvement (2) open disclosure (3) commitment (4) accessibility (5) responsiveness (6) transparency and accountability (7) privacy and confidentiality and (8) objectivity and fairness
- The Mercy Health Feedback team is available for assistance and advice

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 All complaints received must be assessed against Mercy Health's high risk criteria by the receiving staff member to enable appropriate escalation

- Each division will maintain an electronic feedback data system to record and manage feedback
- Categories and themes of complaints are outlined in each division's feedback management procedure
- The criteria for recording outcomes of complaints is outlined in each division's feedback management procedure
- Requirements for recording feedback are outlined in each division's feedback management procedure
- Roles and responsibilities, as well as escalation processes are outlined in each division's feedback management procedure
- The process for external notification and liaison with external bodies is outlined in each division's feedback management procedure
- At times, individuals may require/request an advocate, interpreter or communication device/s to assist with understanding information and/or assistance with the feedback process.

### Roles and responsibilities

Everyone at Mercy Health has a role to play in the provision of quality care, inclusive of the management of feedback. Safety and quality roles and responsibilities are outlined in employee position descriptions management of consumer feedback. It is the role of all staff to support their colleagues to focus on the needs of the individual and work together to facilitate the timely closure of complaints. This is achieved by the positive actions of staff, supported by effective feedback management systems.

Mercy Health has the following clearly defined roles and responsibilities for the governance and management of feedback. A comprehensive list of roles and responsibilities relating to quality and clinical governance is articulated in the <u>Quality and Clinical Governance Policy</u>. Staff are required to comply with Mercy Health's <u>Code of Conduct Policy</u> in addition to requirements listed as a registered practitioner (AHPRA) or as a non-registered provider.

### Those we care for and their families are responsible for

Providing their perspective and input to improve the services we offer

#### Volunteers are responsible for

- Creating positive experiences and contributing to Mercy Health quality care by supporting staff and those
  we serve
- Adhering to standards, policies, procedures and protocols

# Community Advisory Committee and other designated Consumer Committees/Groups are responsible for

- Participating in the analysis of themes and issues identified in feedback reports
- Providing a consumer perspective, including opportunities for improvement
- Participating in improvements resulting from feedback data

### All staff are responsible for

- Using the feedback management process outlined in the relevant divisional procedure
- Adhering to the roles and responsibilities for the management of feedback outlined in the relevant divisional procedure
- Being aware of their work area/unit/department performance, including common themes of feedback

### Department/service managers are responsible for

- Ensuring quality, incidents, risk and feedback are discussed, as required, at department or unit meetings
- Leading person centred care and feedback processes for their work area/unit/department

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Quality, Safety and Innovation teams are responsible for

• Ensuring sound governance of the feedback framework, systems and processes

### The executive and leadership teams are responsible for

• Ensuring sound governance frameworks, systems and processes are in place at Mercy Health

Information relating to shared accountabilities and the levels of committee accountability for quality and clinical governance can be found in the <u>Quality and Clinical Governance Policy</u>.

# **Link with Organisational Values**

### Respect

- In articulating an open and inclusive approach to practice, this policy fosters **respect** by recognising the uniqueness of individuals and working in a way that retains dignity and **respect**.
- This policy promotes **respect** for the dignity of each individual through its emphasis on openness, integrity and justice in our practice.

### **Definitions**

Term	Definition	
Complaint	An expression or statement of dissatisfaction made by or on behalf of an individual we care for, their support person, carer or visitor, or a member of our community regarding any aspect of a service provided by Mercy Health. A complaint may be written or verbal. Complaints can be grouped into the following three categories (1) informal complaints; (2) formal complaints that require investigation; and (3) external or unresolved complaints.	
Complainant	A person who makes a complaint or expression of concern regarding any aspect of a service provided by Mercy Health. This can include patients, residents, relatives, clients, friends, carers, visitors, suppliers and health professionals external to Mercy Health.	
Compliment	An expression or statement of satisfaction made by or on behalf of an individual we care for, their support person, carer or visitor, or a member of our community regarding any aspect of a service provided by Mercy Health. A compliment may be written or verbal.	
Consumer	A person (patient, resident, client) who has or may use our services. It also refers to a person's family, friend, carer or other support person/advocate.	
External agency	Regulatory agencies and complaint commissioners	
Feedback	Written or verbal compliments, complaints, enquiries and suggestions.	
Feedback system	The systems used across Mercy Health include:  Health Services  Victoria: RiskMan  New South Wales: Incident Information Management System Plus (IIMS+)	
	Home Care Services StafFISH	
	Residential Aged Care and Retirement Living Local Feedback Registers	
High Risk Complaint	Complaints relating to a serious clinical incident/sentinel event Complainants who have engaged legal representation Complaints relating to a criminal act or serious misconduct	

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Term	Definition		
	Complaints relating to a breach of professional standards		
	Complaints that threaten the physical safety or security of the organisation or employees		
	Complaints that relate to the safety of children or vulnerable adults		
	Complaints that pose a reputational or media threat to the organisation		
	Complaints received from external agencies.		
Suggestion	A recommendation to improve any aspect of a service or product.		
Outcome	The result of the complaint investigation and resolution may include; resolve change in policy or procedure, referred to an external agency, lapsed or withdrawn not upheld		

#### **Links to Related Documents**

- Aged Care Feedback Management Procedure
- <u>Care First: Mercy Health Clinical Governance Framework</u>
- Code of Conduct Policy
- Community Partnerships Framework
- Health Services Feedback Management Procedure
- Home Care Feedback Management Procedure (All Clients)
- Mercy Health Consumer Feedback Framework
- NSW Complaints Management Policy Directive
- Reporting Safeguarding Unacceptable Conduct Procedure
- Feedback resources for managers and staff are available on the Mercy Health intranet here

#### **Evaluation**

A range of tools will be used to evaluate policy compliance. Feedback performance indicators and specific divisional audits will be used to facilitate evaluation of compliance.

#### Risk Rating

Moderate (3 year document review period)

### Key Legislation, Acts, Standards & References (websites accessed 29 June 2021)

- Australian Commission on Safety and Quality in Healthcare, 2010, Australian Safety and Quality
   <u>Framework for Healthcare</u> Australian Commission on Safety and Quality in Healthcare (ACSQH)
   Standards. 2nd ed. 2017
- Mental Health Complaints Commissioner <a href="http://www.mhcc.vic.gov.au/">http://www.mhcc.vic.gov.au/</a>
- Health Complaints Commissioner (Victoria) https://hcc.vic.gov.au/
- Health Complaints Act 2016 No. 22 (Victoria) <a href="https://lawlex.com.au/Legislation/CDHP/155433">https://lawlex.com.au/Legislation/CDHP/155433</a>
- Health Complaints Commissioner Complaint Handling Standards (Victoria)
- Victorian Ombudsman https://www.ombudsman.vic.gov.au/
- New South Wales Ombudsman https://ombo.nsw.gov.au/
- Complaints Management Handbook for Health Services (2005)
- Code of Conduct for General Health Services
- Australian Charter of Health Care Rights (second edition)
- Aged Care Quality and Safety (ACQSC) Commission
- ACQSC Quality Standards
- Aged Care Act 1997
- Complaints Amendment (Other Functions) Principles 2018 amended the Complaints Principles 2015
- National Disability Insurance Scheme Act 2013
- National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018
- Department of Veterans' Affairs Notes for community nursing providers

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Catholic Professional StandardsCharter of Aged Care Rights

# Keywords

Consumer

# **Version History / Author / Contributors**

V.	Date Created	Sections Changed	Created/Amended by
	(MM/YYYY)		(position title)
1	1999		
2	2001		Risk Manager
3	2003		Risk Manager
4	2005		Risk Manager
5	2007	Definitions simplified. Procedural detail removed as facilities develop own procedures. Latest template utilised	Risk Manager
6	2009	Complaints rating changed and reference to HSC warrants included.	Risk Manager
7	2011	Complaints categories and ratings changed. Complaints outcomes added	Compliance & Quality Audit Manager
8	10/2012	Added references to ILU's	General Manager, Quality
9	12/2012	New template	General Manager, Quality
10	07/14	Full review in line with NSQHS. Title change from Complaints Policy to Feedback Policy	Senior Manager Consumer Participation and Experience
11	05/2017	Full review in line with update of Consumer Feedback Framework	Group Manager, Consumer Participation and Experience
12	06/2017	Roles and responsibilities added in line with Mercy Health Quality and Clinical Governance Policy. Updated in line with changes to Mercy Health Consumer Feedback Framework inclusive of high risk assessment of complaints and referral to applicable divisional procedure.	Group Manager, Consumer Participation and Experience
13	07/2019	Added information regarding advocacy, interpreter and communication assistance. Added links to relevant Aged Care and Home and Community Care documents.	Group Manager, Consumer Participation and Experience
14	06/2021	Remove term 'consumer' where applicable, updated in alignment with safeguarding requirements (including a new high risk criteria).	Group Manager, Feedback