

Queensland Health Standard

Purpose

This standard identifies the mandatory requirements for reporting non-consumer complaints data which will be used as a monitoring tool for identifying and improving the quality of our services and processes.

Standard #<insert number here>

Complaints Reporting (Non-Consumer Complaints)

1 Scope

This standard applies to all Queensland Health employees in relation to Non-Consumer Complaints, as defined in Section 9 of the *Queensland Health Policy Complaints Management (Non-Consumer Complaints)*.

This standard is not intended to conflict in any way with any Award provisions, legislative, contractual or other Queensland Health policy/directive requirement for the management of particular types of complaints.

2 Definition of Terms

All key terms used in this Standard are detailed in Section 9 of the *Queensland Health Policy Complaints Management (Non-Consumer Complaints)*.

3 Supporting Documents

3.1 Authorising Policy

- Queensland Health Policy Complaints Management (Non-Consumer Complaints)

3.1.1 Associated Standards

- Queensland Health Standard Requirements for Complaints Systems (Non-Consumer Complaints)
- Queensland Health Standard Self Audit of Complaints Systems (Non-Consumer Complaints)

3.2 Procedures or Guidelines

- Guide for the resolution of informal complaints at the local level
- Making decisions: A guide to decision-making processes and tools



3.3 Related Policy or documents

- Office of the Public Service Commissioner Directive 13/06 *Complaints Management Systems*
- Queensland Ombudsman's *Effective Complaints Management Fact Sheets* series
- *Public Service Act 2008*
- *Industrial Relations Act 1999*
- *Queensland Anti-Discrimination Act 1991*
- *Crime and Misconduct Act 2001*
- *Health Service Act 1991*
- *Whistleblowers Protection Act 1994*
- *Workplace Health and Safety Act 1995*
- Directive 11/07 Grievance Resolution
- IRM3.5 - Grievance Resolution
- IRM3.1-2 - Workplace Harassment
- E1 - Code of Conduct 2006
- E2 - Anti-Discrimination
- E5 - Sexual Harassment
- E9 - Official Misconduct
- I5 - Public Interest Disclosure (Whistleblowers)

4 Review

This Standard is due for review on: 1 July 2010

5 Requirements

5.1 Complaints Management Report

All Districts, Statewide Services and Corporate Office Divisions that manage non-consumer complaints are required to submit a quarterly Complaints Management Report to the Staff Complaints Liaison Office (SCLO).

The Complaints Management Report is not intended to impose excess workloads on staff. Most, if not all, information required for this report should be captured in each District's, Statewide Services and Corporate Office Divisions complaints register in accordance with requirements of the *Queensland Health Standard Self Audit of Complaints Systems (Non-Consumer Complaints)* and the Queensland Ombudsman's *Effective Complaints Management Fact Sheet Series*.

5.1.1 What is the purpose of the complaints management report?

The purpose of the Complaints Management Report is to:

- provide quarterly Complaints Management Reports to SCLO and the Executive Management Team (EMT)
- provide data for the inclusion with the Queensland Health's performance reporting requirements, as required
- identify any recurring problems and system-wide problems
- to monitor improvements in complaints processes.

5.1.2 What are the reporting requirements?

The Complaints Management Report must contain the following information in relation to every Reportable Complaint that is finalised* in the quarter to which the Report relates:

- The complaint's unique file or tracking number;
- Type** of complaint;
- Facility and Unit to which the complaint relates;
- Overview of complaint;
- Timeframe projected to the complainant to finalise the matter;
- Actual time taken to finalise the matter;
- Action(s) taken to try to resolve complaint;
- Summary of the outcome;
- Summary of any service / system improvement resulting from the complaint;
- Summary of any appeals or disputes lodged regarding the complaint.

* For the purposes of the Report, a matter is considered to be 'finalised' when outcome advice is provided to the complainant(s) and respondent(s). It is recognised that during a grievance process there may be more than one outcome advice (e.g. at Stage 2 and at Stage 3) and that this may result in a complaint being 'finalised' and reported twice.

** Types of reportable complaints are: General Employment/HR Issues, Employee Conduct (not harassment), Workplace Harassment, IR (EB Interpretation Issue), Official Misconduct (not harassment or employee conduct), Sexual Harassment, Workplace Health and Safety (not including incident reports), Freedom of Information, Privacy, Administrative Decisions, Policy Decision, Other Staff Complaints (Non-Clinical), and Other Non-Staff Complaints (Non-Clinical).

5.1.3 What complaints are reportable?

The following matters are required to be reported in the Complaints Management Report:

- Grievances lodged under OPSC Directive 04/03 (11/07) or relevant award;
- Other written or verbal complaints from staff that cannot be resolved at the workplace level or are managed by senior management and/or HR staff;
- Written or verbal complaints from members of the public that are not clinical or consumer complaints that are governed by the *Queensland Health Consumer Complaints Management Policy*; and
- Complaints referred from the Director-General, Minister, Member of Parliament, regulatory authority, trade union or other outside body not related to a clinical matter or consumer complaint.

5.1.4 What complaints are not reportable?

The following matters are **not** to be reported in the Complaints Management Report:

- Complaints involving a Public Interest Disclosure/Whistleblower;
- Occupational Workplace Health and Safety Incident reports;
- Any matter that is reported in PRIME (in the first instance);
- Complaints and/or grievances that are resolved at the workplace level i.e. matters that are not referred to senior management and/or HR staff for resolution (unless the complaint has been referred from the Director-General, Minister, Member of Parliament, regulatory authority, trade union or other outside body);
- FOI or any other applications lodged in accordance with existing policies; and
- Any clinical or consumer complaints that are governed by the *Queensland Health Consumer Complaints Management Policy*.

5.1.5 Report Due Dates

The Complaints Management Report must be produced and forwarded to the SCLO (StaffComplaints@health.qld.gov.au) on a quarterly basis, with the first report due on 14 October 2009. The due dates are provided in the table below as follows:

Quarterly period	Due Date
1 January – 31 March	14 April
1 April – 30 June	14 July
1 July – 30 September	14 October
1 October – 31 December	14 January

5.1.6 Submission of Report

The SCLO is required to submit a collated Queensland Health Complaints Management Report to EMT. These reports will be considered at each EMT meeting on the 4th Monday of the month immediately following the end of the quarter.

The SCLO is required to submit these reports to the EMT Secretariat (EMT@health.qld.gov.au) by COB the Tuesday prior to the respective EMT meeting.

5.1.7 Analysis of Complaints Reports

The Complaints Management Report will be the primary tool for the collection and analysis of complaints data. This data will provide a means to assist Queensland Health to improve its systems and services.



All Districts, Statewide Services and Corporate Office Divisions are responsible for identifying any recurring or system-wide problems for continuous improvement. To assist District's, Statewide Services and Corporate Office Divisions analyse complaints data, the SCLO will also examine the Complaints Management Reports, and may request further information from the Districts, Statewide Services and/or Corporate Office Divisions for analysis.

The SCLO is required to report any non-compliance with this standard and associated standards to the Executive Management Team.

6 Roles and Responsibilities

Position	Responsibilities	Performance Criteria
Executive Management Team (EMT) members	<ul style="list-style-type: none"> Reviewing complaints management reports quarterly and ensuring that Queensland Health manages complaints in accordance with its obligations and best practices. 	Complaints Management Reports are reviewed in accordance with the requirements of this standard.
District Chief Executive Officer, Chief Executive Officer Clinical and Statewide Services, Chief Information Officer, Chief Health Officer	<ul style="list-style-type: none"> Ensuring an effective complaints management system is developed and in place for the Health Service District, Statewide Services and Corporate Office Divisions, specifically ensuring quarterly reporting is completed in accordance with the provisions outlined in the standard. Ensuring systems are modified to prevent reoccurrences of similar issues raised in previous complaints. Nominate a staff member within the health service District, Statewide Services and Corporate Office Divisions (Complaints Coordinator) who is responsible for the overall implementation of the policy, standard for the District, Statewide Services and Corporate Office Divisions. 	<p>Department-wide policy is implemented within the District, Statewide Services and Corporate Office Divisions and reporting is completed in accordance with the provisions outlined in the standard and associated standards.</p> <p>Local action taken in a timely manner.</p> <p>Staff member is nominated within the Health Service District, Statewide Services and Corporate Office Divisions and communicated to all relevant areas.</p>
Complaints Coordinator (Non-Consumer Complaints)	<ul style="list-style-type: none"> Coordinating and implementing the policy, standard and local procedures that support staff to meet the requirement of reporting. Collating and reporting District, Statewide or Corporate Office Divisions trended complaints data every quarter to the Staff Complaints Liaison Office and other relevant groups. Reporting concerns or issues to management and/or SCLO regarding local complaints management systems. 	<p>District, Statewide Services and Corporate Office Divisions systems comply with the provisions outlined in this standard and associated standards.</p> <p>Complaints Management Reports are collected and reported in accordance with the provisions outlined in the standard.</p> <p>District, Statewide Service and Corporate Office Divisions work instructions are current.</p> <p>Concerns or issues are reported in a timely</p>

		manner.
Staff Complaints Liaison Office	<ul style="list-style-type: none"> Assisting Health Service Districts, Statewide Services and Corporate Office Divisions to ensure that complaints processes within their area comply with OPSC Directive 13/06, in particular, Reporting Requirements. Collecting and reporting quarterly Complaints Management Reports from Districts, Statewide Services and Corporate Office Divisions. Reporting Complaint Management Data to the Executive Management Team for regular performance reporting. 	<p>Department-wide policy is implemented within the District, Statewide Services and Corporate Office Divisions and compliance reported where required.</p> <p>Complaints Management Reports are collected and reported in accordance with the provisions outlined in the standard.</p>
All employees	Are to comply with requirements of this policy and standard.	Staff meet compliance requirements in department-wide policy and local work instructions where relevant.

7. History

<i>Date of new / revised policy</i>	<i>Amended to.....</i>
May 2009	Standard amended/ new template
September 2009	Bracket included pg 3

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Approved Date:

