



Department of Health
Government of Western Australia

Report on Complaint Data Collected For Metropolitan Health Services Under the WA Complaint Management Policy

1 July 2003 to 30 June 2004

*Office of Safety and Quality in Health Care
December 2004*

Introduction

Health Services in Western Australia are accountable for ensuring the delivery of safe and quality health care to the Western Australian community.

In November 2001, a Statewide Clinical Governance Framework was introduced in the Western Australian health system. This Framework provides a 'systematic and integrated approach to assurance and review of clinical responsibility and accountability that improves quality and safety resulting in optimal patient outcomes'.¹

Complaint management is an integral component of the WA Clinical Governance Framework and is linked to other elements of the Clinical Governance framework and quality improvement – including continuing professional development, audit, risk management and incident monitoring and reporting.

In July 2003, the Department of Health released the Western Australian Complaints Management Policy: Driving Quality Improvement by Effective Complaints Management. The Policy was developed to assist Area Health Services to improve their complaint management processes and to ensure a consistent method of complaints management, and monitoring and reporting across the WA health system. The WA complaints management system has two primary objectives:

- ◆ The **effective management of individual complaints** – to ensure that all complaints are effectively resolved in a consistent and just manner; and
- ◆ The **facilitation of service improvements** – to ensure that the information gathered via complaints is being systematically recorded, reported and utilised to improve the deliver of services to customers and to prevent recurring problems.

In financial year 2003-2004 the Office of Safety and Quality in Health Care collected and analysed aggregated Statewide complaints data from the following Health Services in WA on a quarterly basis:

- Armadale Health Service (AHS)
- Bentley Health Service (BHS)
- Breast Screen WA (BSWA)
- Dental Health Service (DHS)
- Fremantle Hospital and Health Service (FHHS)
- Graylands, Selby-Lemnos Health Service (GSLHS)
- Kalamunda Health Service (KHS)
- Osborne Park Hospital (OPH)
- Peel and Rockingham Kwinana Health Service (PARK)
- Royal Perth Hospital (RPH)
- Sir Charles Gairdner Hospital (SCGH)
- Swan Health Service (SHS)
- Women's and Children's Health Service (W&CHS)

This report provides an aggregated summary of complaints made to WA public hospitals between 1 July 2003 and 30 June 2004. The aggregated Complaint data has been categorised into nine major categories; **Access, Communication, Decision Making, Quality of Care, Costs, Rights, Respect and Dignity, Grievances, Corporate Services, and Professional Conduct.**

The Office of Safety and Quality in Health Care thanks each of the contributing health service for their contribution to the development of this report.

¹ Department of Health (2003). Introduction to Clinical Governance – A Background Paper.
<http://www.health.wa.gov.au/safetyandquality>

RESULTS

Total Complaints

In financial year 2003-2004 Metropolitan Health Services recorded a total of **3,564** (82%) complaint issues. This represents a 9.4% increase on the **3,257** complaint issues they recorded in financial year 2002/2003. Figure 1 provides a comparative trend of complaint issues received by metropolitan health services between financial years 1999-2000 and 2003-2004.

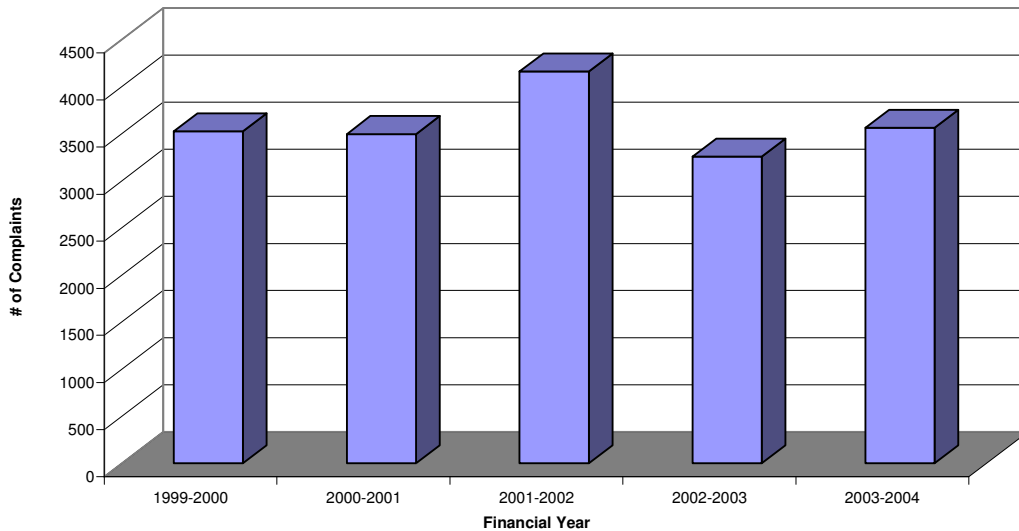


FIGURE 2: Total complaint issues in Metropolitan Area Health Services, 1999/2000 to 2003-2004

Breakdown of Complaints by Metropolitan Area Health Services

Of the **3,257** complaint issues recorded by Metropolitan Health Services in financial year 2002/2003, the top 5 complaint issues were recorded at: Royal Perth Hospital (n=752, 21%), Sir Charles Gairdner Hospital (n=671, 18.8%), Women's and Children's Health Service (n=651, 18.2%), Fremantle Hospital and Health Service (n=350, 9.8%) and Peel & Rockingham Kwinana Health Service (n=320, 8.8%).

Of the 320 (8.8%) complaints recorded by Peel & Rockingham Kwinana Health Service, 100 related to the redevelopment of the Emergency Department at Rockingham District Hospital. Since completion the complaint rate has reduced significantly (n=111 ytd 2004/2005, only 9 of which relate to redevelopment of health care facilities).

Figure 2 provides a quarterly breakdown of complaint issues by complaint category for each Metropolitan Area Health Service between 1 July 2003 and 30 June 2004.

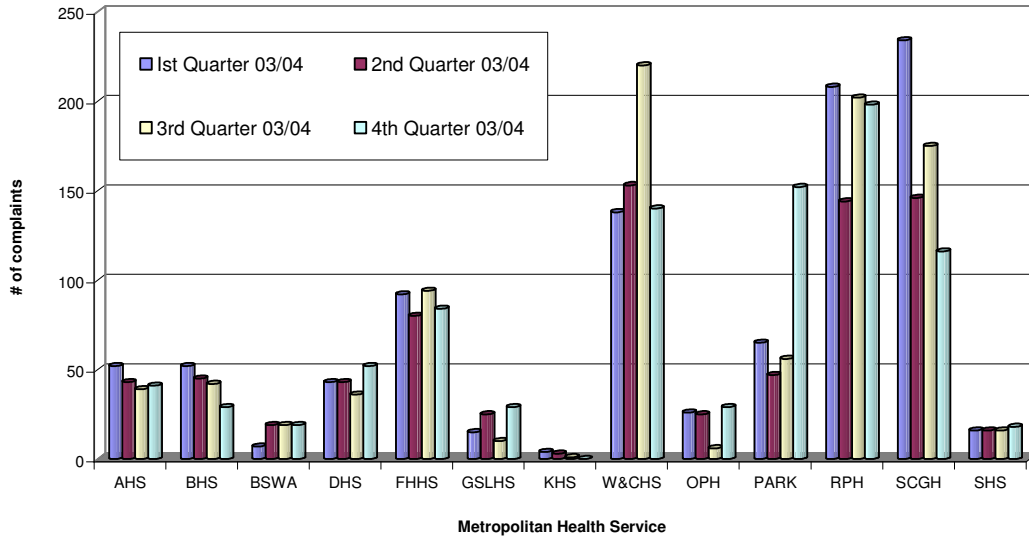


FIGURE 2: Comparative Breakdown of Complaints by Metropolitan Health Service in 2003-2004

New Complainants

In financial year 2003-2004 there was a total of **2,492** new complainants to the Metropolitan Health Services. Figure 3 provides a comparative breakdown of new complainants recorded by each Metropolitan Health Service between 1 July 2003 and 30 June 2004.

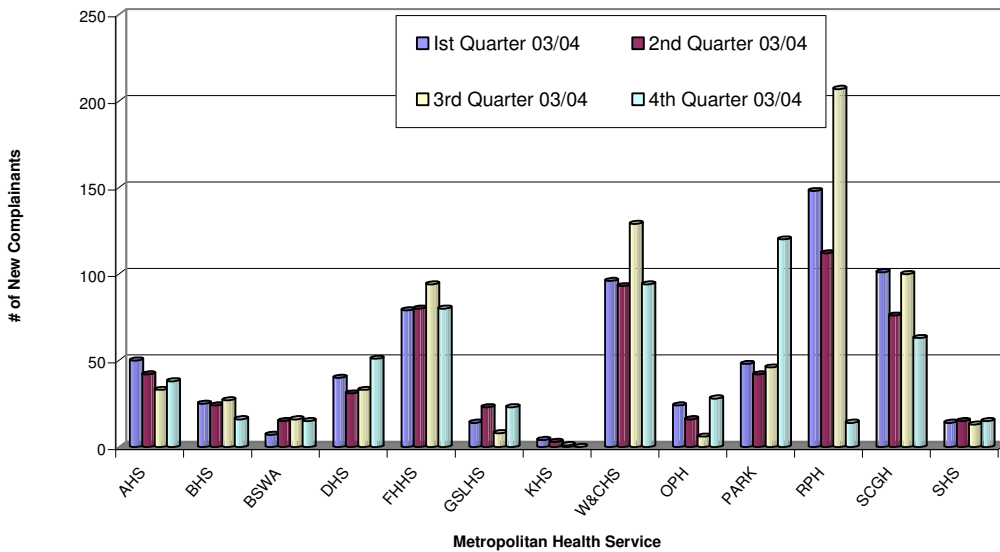


FIGURE 3: Comparative Breakdown of New Complainants by Metropolitan Health Service in 2003-2004

Principal Complaint Categories

In financial year 2003-2004, the top five complaint categories were: 'Quality of Care' (n=874, 24.5%); 'Access' (n=811, 22.7%); 'Rights, Respect and Dignity' (n=697, 19.5%); 'Communication' (n=590, 16.6%); and 'Corporate Services' (n=321, 9%). Figure 4 shows provides a breakdown of complaint issues by major complaint category in financial year 2003-2004.

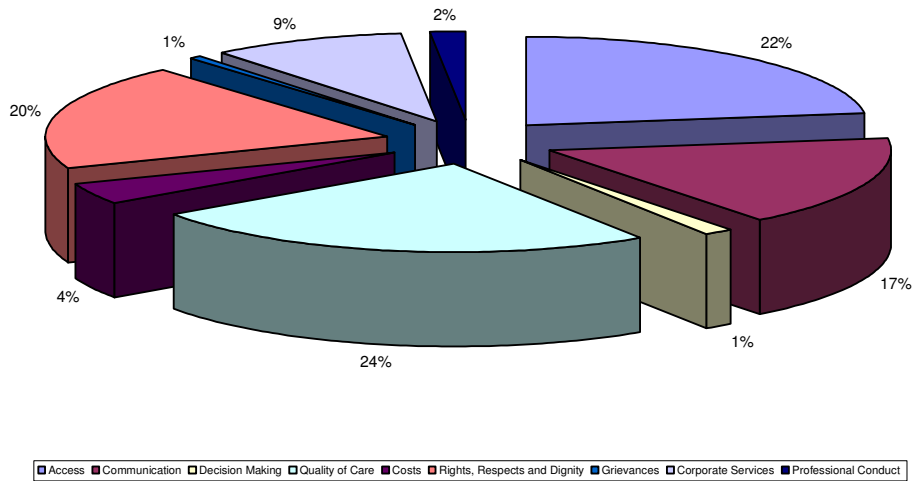


FIGURE 4: Breakdown of complaint issues by major complaint category in financial year 2003-2004

Principal Complaint Categories by Health Service

Figure 5 shows provides a breakdown of the major complaint categories by Health Service in financial year 2003-2004.

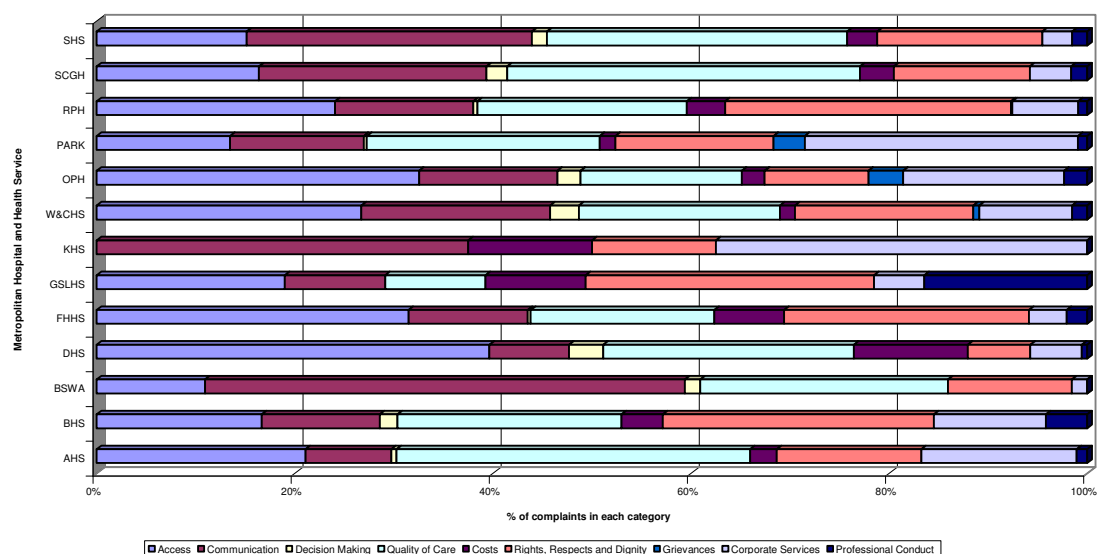


FIGURE 5: Overview of Complaint issues by Complaint Category in 2003-2004

Top 23 complaints received as a proportion of each major category

A breakdown of the top 23 complaint issues recorded by Health Services is provided below. The top 23 complaint issues refer to those complaint issues scoring more than 10% of the overall complaint issues recorded in each of the major complaint categories.

Quality of Clinical Care

Complaint Issue	Total Complaints	%
Inadequate Diagnosis/Observation	212	24.3
Inadequate Treatment/Therapy	296	33.9

Access

Complaint Issue	Total Complaints	%
Delay in Admission/Treatment	201	24.7
Waiting List Delay	149	18.4
Inadequate or No Service	209	25.8
Discharge or Transfer Arrangements	122	15

Rights, Respect and Dignity

Complaint Issue	Total Complaints	%
Inconsiderate Service/Lack of Courtesy	336	48.2
Absence of Caring	198	28.4

Communications

Complaint Issue	Total Complaints	%
Misinformation or Failure in Communication	173	29.3
Inappropriate Verbal/Non Verbal Communication	126	21.3
Failure to Listen to Patient/Carer/Family	96	16.2

Corporate Services

Complaint Issue	Total Complaints	%
Administrative Practice	92	28.6
Facilities	163	50.7

Costs

Complaint Issue	Total Complaints	%
Amount Charged	19	13.9
Lost Property and/or Reimbursement	78	57.4

Professional Conduct

Complaint Issue	Total Complaints	%
Inadequacy of Records	14	21.5
Unprofessional Conduct	24	36.9
Alleged Assault	12	18.4

Decision Making

Complaint Issue	Total Complaints	%
Failure to Consult Patient/Client	23	45
Public/Private Choice	8	15
Consent Not Informed	8	15
Consent Invalid	8	15

Grievances

Complaint Issue	Total Complaints	%
Inadequate Response to a Complaint	17	94.4

Quality of Care

'Quality of Care' relates to the assessment, planning, implementation and evaluation of clinical care by health professionals.

In financial year 2003-2004, there was a total of 874 (24.5%) 'Quality of Care' complaint issues received by Metropolitan Health Services. This represents an increase of 23% from financial year 2002-2003. The most common complaint issues related to 'Inadequate Treatment/Therapy' (n=296, 33.8%), 'Inadequate Diagnosis/Observation' (n=212, 24.2%), 'Pain Issues' (n=67, 7.6%), 'Medication Issues' (n=66, 7.5%) and 'Poor Co-ordination of Treatment' (n=63, 7.2%). Figure 6 provides a breakdown of 'Quality of Care' complaint issues recorded in financial year 2003-2004.

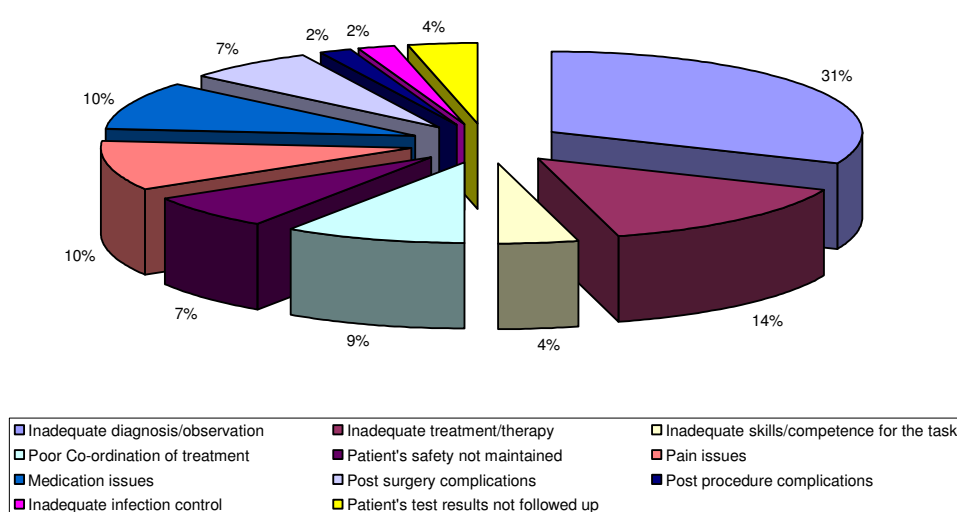


FIGURE 6: Breakdown of 'Quality of Care' complaint issues in 2003-2004

Breakdown of 'Quality of Care' Complaint issues by Metropolitan Health Service

The five Metropolitan Health Services that recorded the highest 'Quality of Care' complaint issues in financial year 2003-2004 were Sir Charles Gairdner Hospital (n=239, 27.3%), Royal Perth Hospital (n=159, 18.2%), Women's and Children's Health Service (n= 132, 15.1%), Peel and Rockingham Kwinana Health Service (n=75, 8.5%) and Fremantle Hospital (n=73, 8.3%). The most common 'Quality of Care' complaint issues recorded by the above Health Services related to:

The increase in the number of complaint issues recorded by Women's and Children's Health Service in the 3rd quarter of 2003-2004 was attributable to concerns being raised about the quality of care at King Edward Memorial Hospital, following the establishment of an Inquiry in February 2004. The complaint policy at Women's and Children's Health Service treats each expression of concern or comment received from the community as a complaint issue.

Complaint Issue	SCGHS		RPH		W&CHS		PARK		FHHS	
	N	%	N	%	N	%	N	%	N	%
Inadequate Diagnosis/Observation	50	20.9	32	20	47	35.6	23	30.6	16	21.9
Inadequate Treatment/Therapy	84	35	37	23	33	25	28	38.3	32	43.8

Figure 7 and Figure 8 provide a breakdown of 'Quality of Care' complaint issues received by Health Services in 2003-2004.

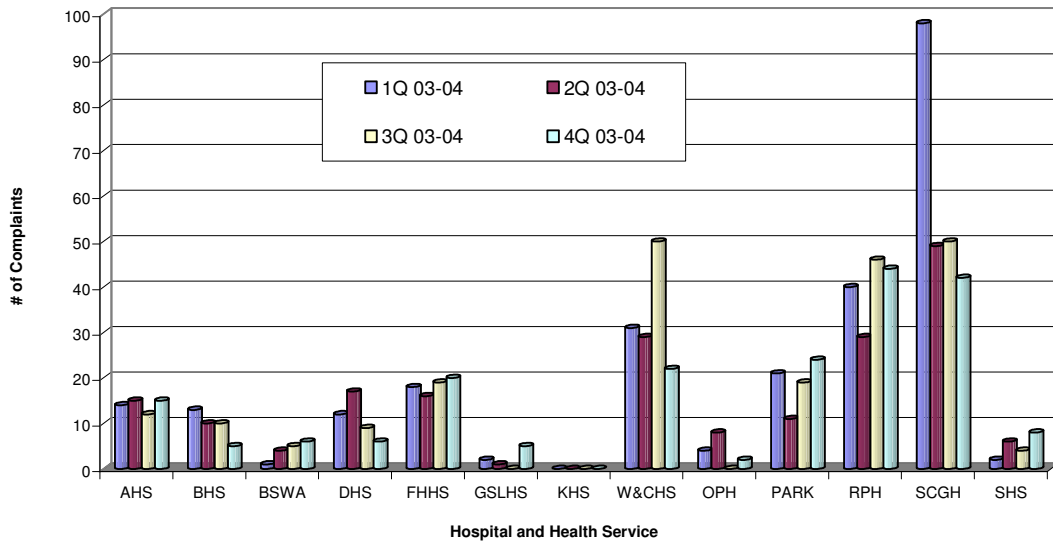


FIGURE 7: Number of 'Quality of Care' complaint issues recorded by Metropolitan Health Services in 2003-2004

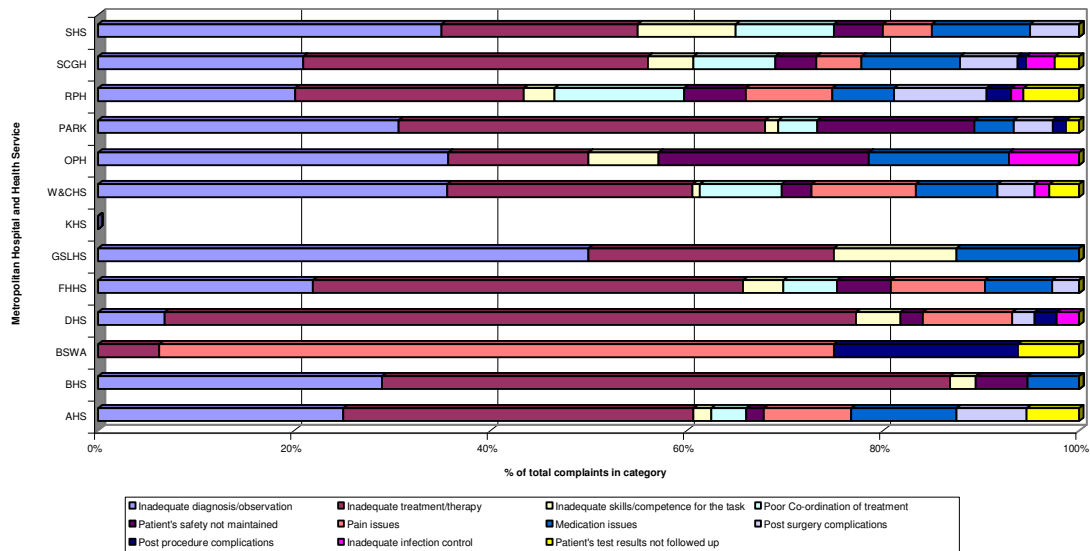


FIGURE 8: Breakdown of 'Quality of Care' complaint issues by Health Service in 2003-2004.

Recommendations:

It is recommended that Chief Executives review and update guidelines and procedures to address complaints in the following 'Quality of Care' areas: 'Inadequate Treatment/Therapy'; 'Inadequate Diagnosis/Observation'; 'Poor Co-ordination of Treatment'; 'Pain Management'. Area Health Service Clinical Governance Units should monitor and review the implementation and effectiveness of any policy or procedural changes as part of their clinical audit process.

Access

'Access' refers to the availability of services in terms of location, waiting times and other constraints that limit the delivery of health care services to the community.

In financial year 2003-2004, there was a total of 811 (22.7%) 'Access' complaint issues. This represents an increase of 20% on financial year 2002-2003. The most common complaint issues related to 'Inadequate or No Service' (n=209, 25.7%), 'Delay in Admission/Treatment' (n=201, 24.8%), 'Waiting List Delay' (n=149, 18.4%) and 'Discharge or Transfer Arrangements' (n=122, 15%).

Figure 9 provides a breakdown of 'Access' complaint issues recorded in financial year 2003-2004.

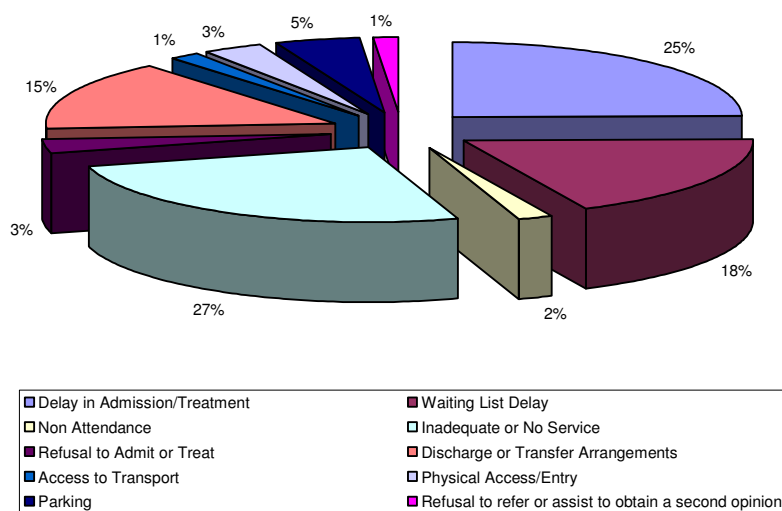


FIGURE 9: Breakdown of 'Access' complaint issues recorded in 2003-2004

Breakdown of 'Access' Complaints by Metropolitan Health Service

Of the 811 (80%) 'Access' complaint issues received by Metropolitan Health Services in financial year 2003-2004, 181 (22.3%) were received by Royal Perth Hospital; women's and Children's Health Service (n=174, 21.4%); Sir Charles Gairdner Hospital (n=110, 13.6%) and Fremantle Hospital (n=107, 13.2%). The most common 'Access' complaint issues recorded by the above Health Services relate to:

Complaint Issue	RPH		W&CHS		SCGH		FHHS	
	N	%	N	%	N	%	N	%
Discharge/Transfer Arrangements	36	19.8	2	1.1	43	39	22	20.5
Delay in Admission/Treatment	30	16.6	34	19.5	22	20	40	37.3
Waiting List Delay	37	20.4	18	10.3	29	26	30	28
Inadequate or No Service	63	34.8	83	47.7	4	3.6	22	4.6

Figure 10 and Figure 11 provide a breakdown of 'Access' complaint issues recorded by Health Service.

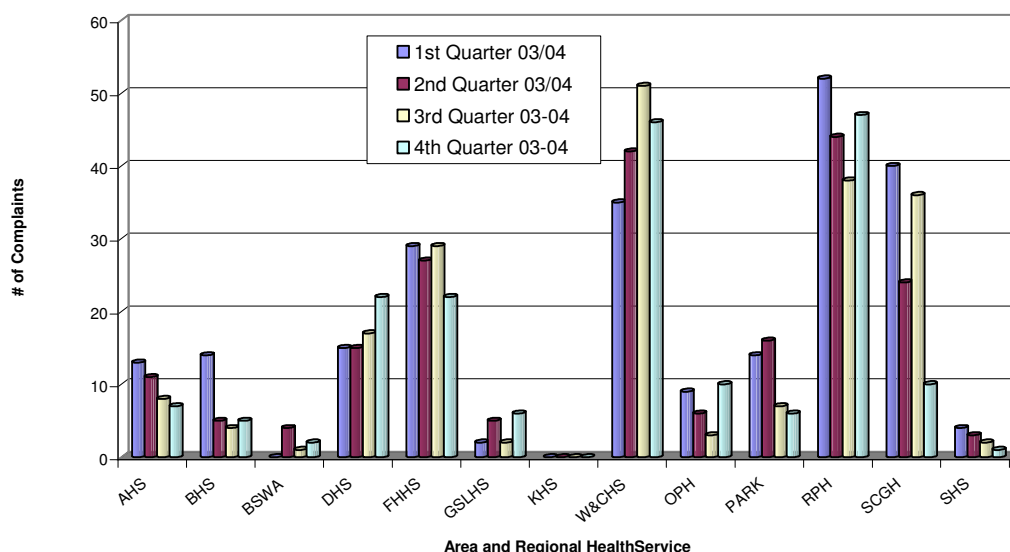


FIGURE 10: Number of 'Access' complaint issues recorded by Health Service in 2003-2004

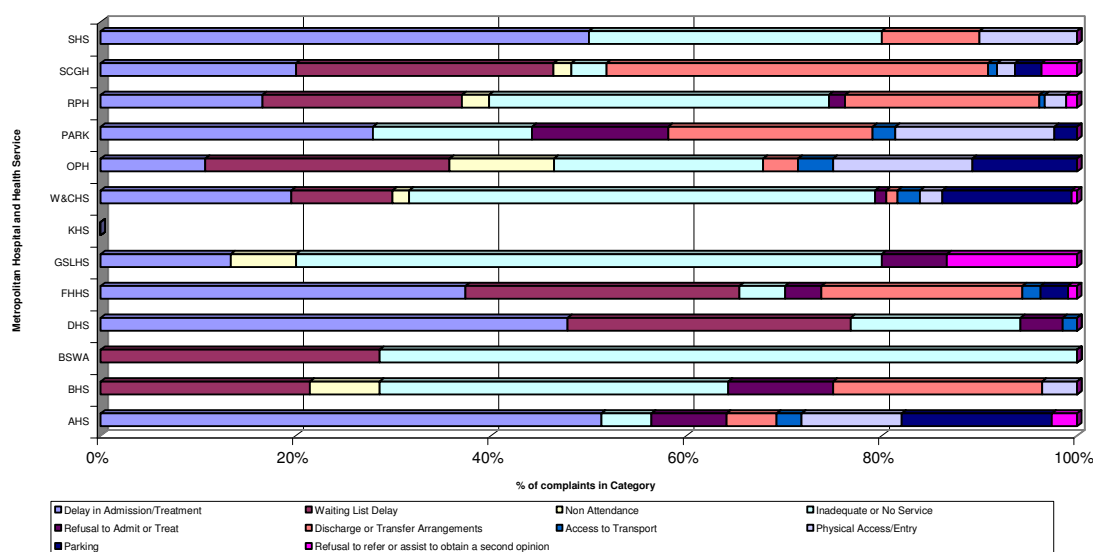


FIGURE 11: Breakdown of 'Access' complaint issues by Health Service in 2003-2004.

Recommendations:

It is recommended that Area Health Services review their policies, protocols and communication processes to address complaint issues related to: 'Delay in Admission/Treatment'; 'Wait List Delays'; 'Discharge or Transfer Arrangements'; and 'Inadequate or No Service'. Area Health Service Clinical Governance Units should monitor and review the implementation and effectiveness of any policy or procedural changes as part of their clinical audit process.

Rights, Respect and Dignity

'Rights, Respect and Dignity' refers to the patients/client's legislated human and health care rights.

In financial year 2003-2004, there were 697 (19.6%) 'Rights, Respect and Dignity' complaint issues received by Metropolitan Health Services. The most common complaint issues related to 'Inconsiderate Service/Lack of Courtesy' (n=336, 48.2%), 'Absence of Caring' (n=198, 28.4%), 'Breach of Confidentiality' (n=57, 8.1%) and 'Failure to Ensure Privacy' (n=48, 6.8%).

Figure 12 provides a breakdown of 'Rights, Respect and Dignity' complaint issues recorded in financial year 2003-2004.

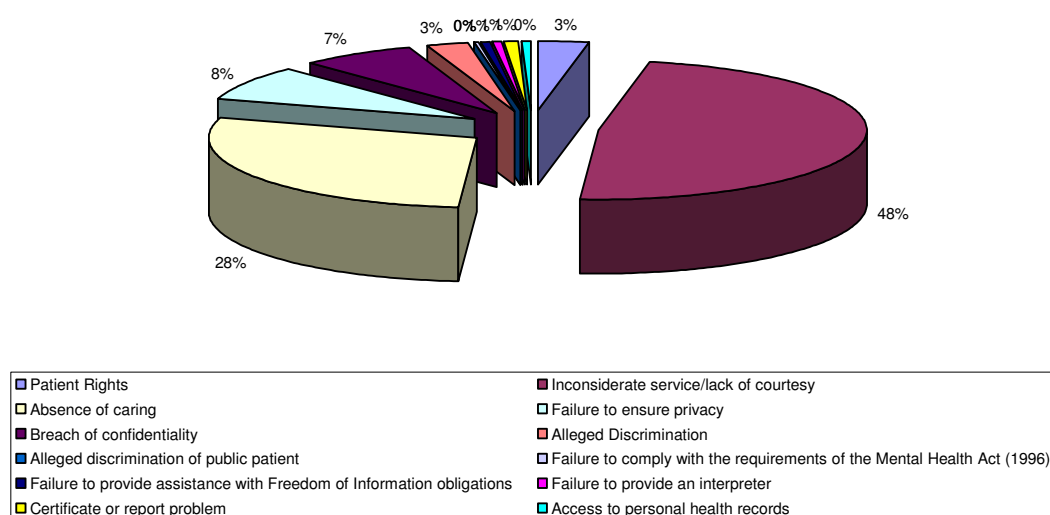


FIGURE 12: Breakdown of 'Rights, Respect and Dignity' complaint issues recorded in 2003-2004

Breakdown of 'Access' Complaint Issues by Metropolitan Health Service

Of the 697 (19.6%) 'Rights, Respect and Dignity' complaint issues recorded by Metropolitan Health Services in 2003-2004, the highest number of complaint issues were received by Royal Perth Hospital (n=217, 31.1%), Women's and Children's Health Service (n= 117, 16.7%), Sir Charles Gairdner Hospital (n=92, 13.2%) and Fremantle Hospital (n=84, 12%). The most common 'Rights, Respect and Dignity' complaint issues recorded by the above Health Services related to:

Complaint Issue	RPH		W&CHS		SCGH		FHHS	
	N	%	N	%	N	%	N	%
Inconsiderate Service/Lack of Courtesy	122	56	53	45.3	51	55	44	52
Absence of Caring	62	28.6	41	35	30	32	24	28.6

Figure 13 and Figure 14 provide a breakdown of 'Rights, Respect and Dignity' complaint issues received by Health Service in financial year 2003-2004.

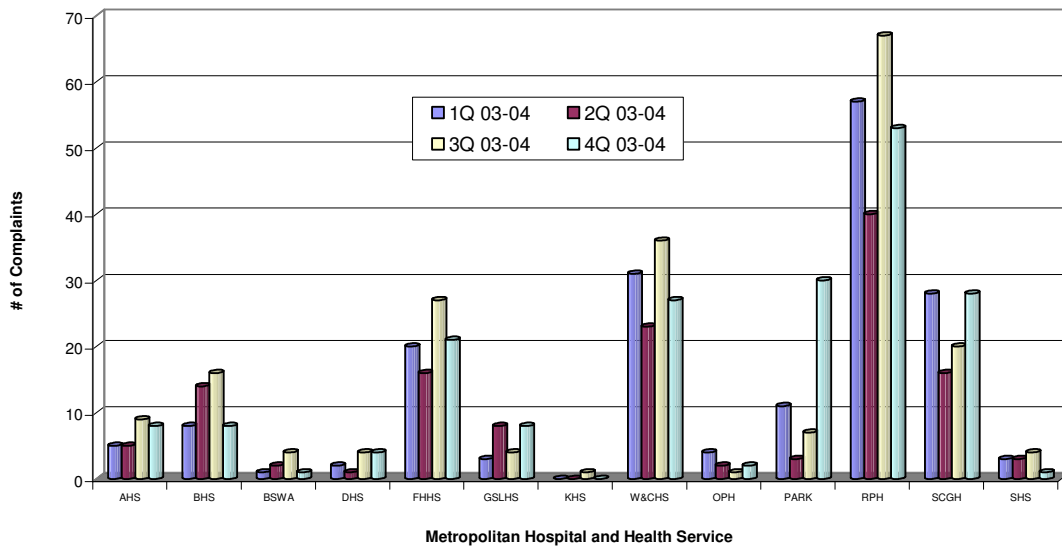


FIGURE 13: Number of 'Rights, Respect and Dignity' complaint issues recorded by Health Service in 2003-2004

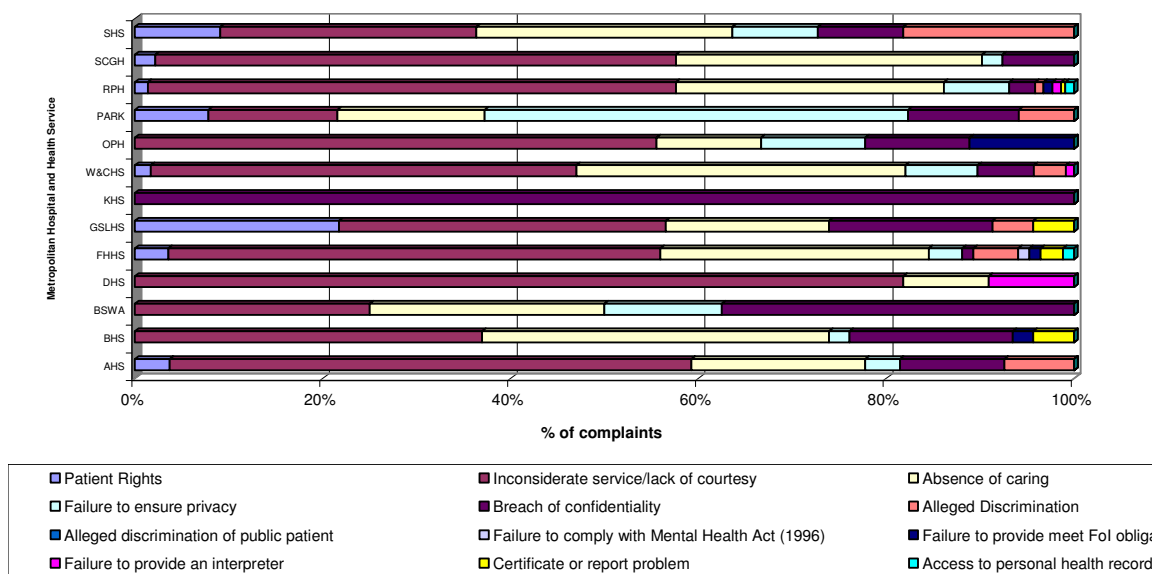


FIGURE 14: Breakdown of 'Rights, Respect and Dignity' complaint issues by Health Service in 2003-2004.

Recommendations:

A patient's/client's right 'to be treated with respect and dignity' is enshrined in the WA Medicare Public Patients' Hospital Charter and the WA Public Service Code of Conduct. The survey results highlight considerable concern regarding the courtesy and conduct of health care professionals across the health system. Compliance with the Code of Conduct should be monitored and enforced by Heads of Departments and Area Health Service Executive Teams.

Communication

Communication relates to the quality, quantity, appropriateness and delivery of information provided about services, diagnostic tests and treatment. 'Communication' issues (n=590) accounted for 16.6% of all complaints in financial year 2003-2004. The most common 'Communication' complaint issues related to 'Misinformation or Failure in Communication' (n=173, 29.3%), 'Inappropriate Verbal/Non Verbal Communication' (n=126, 21.4%), 'Failure to Listen to Patient/Carer/Family' (n=96 (16.3%) and 'Inadequate Communication' (n=68, 11.5%).

Figure 15 provides a breakdown of 'Communication' complaint issues received in 2003-2004.

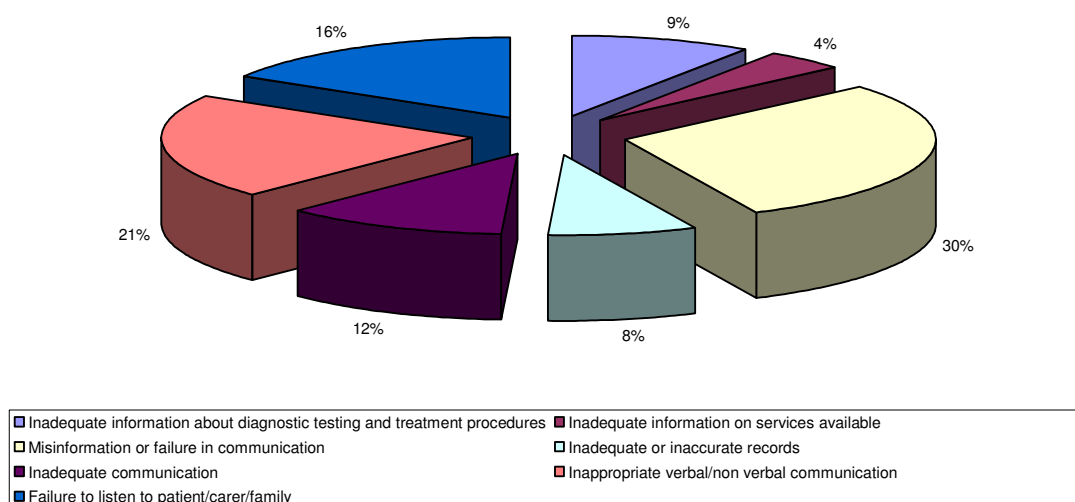


FIGURE 15: Breakdown of 'Communication' complaint issues in 2003-2004

Breakdown of 'Communication' Complaint Issues by Metropolitan Health Service

Of the 590 'Communication' complaint issues received by Metropolitan Health Services in financial year 2003-2004, the highest number of complaint issues were recorded by Sir Charles Gairdner Hospital (n=154, 26.1%), Women's and Children's Health Service (n=124, 21%), Royal Perth Hospital (n=105, 17.7%), Peel and Rockingham Kwinana Health Service (n=43, 7.2%) and Fremantle Hospital (n= 41, 6.9%). Most complaints related to:

Complaint Issue	SCGH		W&CHS		RPH		PARK		FHHS	
	N	%	N	%	N	%	N	%	N	%
Misinformation or Failure in Communication	64	41.5	36	29	25	23.8	5	11.6	23	56
Inadequate Communication	16	10.3	4	3.2	15	14.3	14	32	1	2.4
Inappropriate Verbal/Non Verbal Communication	20	12.9	25	20	17	16.2	20	46	5	12
Failure to Listen to Patient/Carer/Family	28	18.2	28	22	23	21.9	1	2.3	3	7.1

Figure 16 and Figure 17 provide a breakdown of 'Communication' complaint issues received by Health Service in financial year 2003-2004.

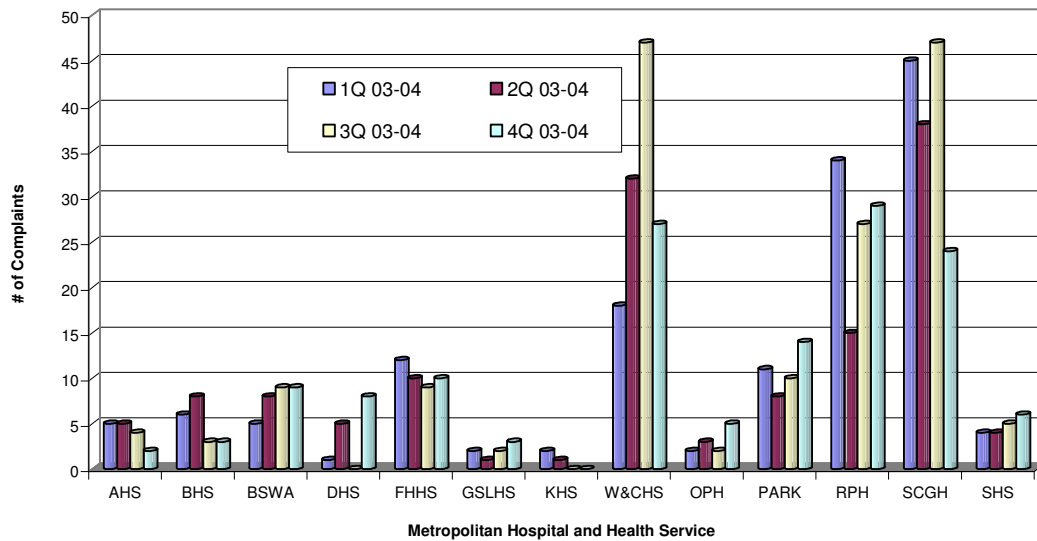


FIGURE 16: Number of 'Communication' complaint issues recorded by Health Service in 2003-2004

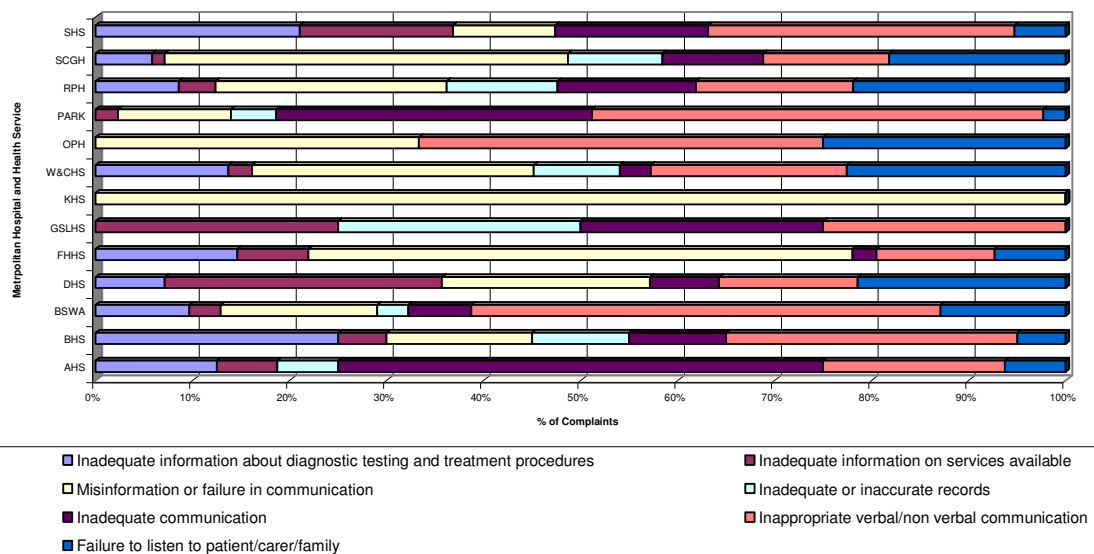


FIGURE 17: Breakdown of 'Communication' complaint issues recorded by Health Service in 2003-2004.

Recommendations:

Area Health Services should provide appropriate human factors and communication training programs to staff, as part of their orientation and professional development programs, to improve staff interpersonal, verbal and written communication skills.

Corporate Services

'Corporate Services' provided the fifth highest number of complaint issues in 2003-2004 (n=321, 9.1%). The most common 'Corporate Service' complaint issues related to 'Facilities' (n=163, 50.7%), 'Administrative Practice' (n=92, 28.6%) and 'Catering' (n=31, 9.6%).

Figure 18 provides a breakdown of 'Corporate Service' complaint issues recorded in financial year 2003-2004.

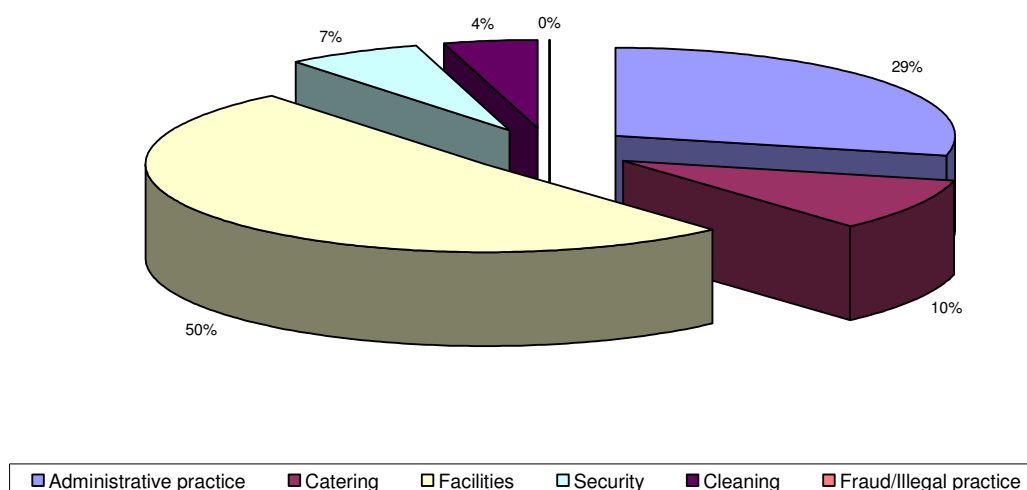


FIGURE 18: Breakdown of 'Corporate Services' complaint issues received in 2003-2004

Breakdown of 'Corporate Service' Complaint Issues by Metropolitan Health Service

Of the 321 'Corporate Service' complaint issues recorded by Metropolitan Health Services in 2003-2004, the highest complaint issues were recorded at Peel and Rockingham Kwinana Health Service (n=88, 27.4%), Women's and Children's Health Service (n=61, 19%), Royal Perth Hospital (n=50, 15.5%), Armadale Health Service (n=29, 9%) and Sir Charles Gairdner Hospital (n=28, 8.7%). Most complaints related to:

Complaint Issue	PARK		W&CHS		RPH		AHS		SCGH	
	N	%	N	%	N	%	N	%	N	%
Administrative Practice	4	15	36	59	13	26	0	3.4	15	53.5
Catering	0	0	7	11.4	6	12	0	17.2	5	17.8
Facilities	81	92	8	13.1	30	60	12	62	6	21.4

92% of the corporate service complaint issues recorded by Peel & Rockingham Kwinana Health in the 4th quarter of 2003-2004 related to communication issues arising from the installation of windows in the Triage Reception area at Rockingham District Hospital. Focus group meetings with key stakeholders has resulted in the reconstruction of the area with a new design. The issue is now resolved, with complaints in this area reduced to 6 in the first half of 2004/2005.

Figure 19 and Figure 20 provide a breakdown of 'Corporate Service' complaint issues received by Health Services in financial year 2003-2004.

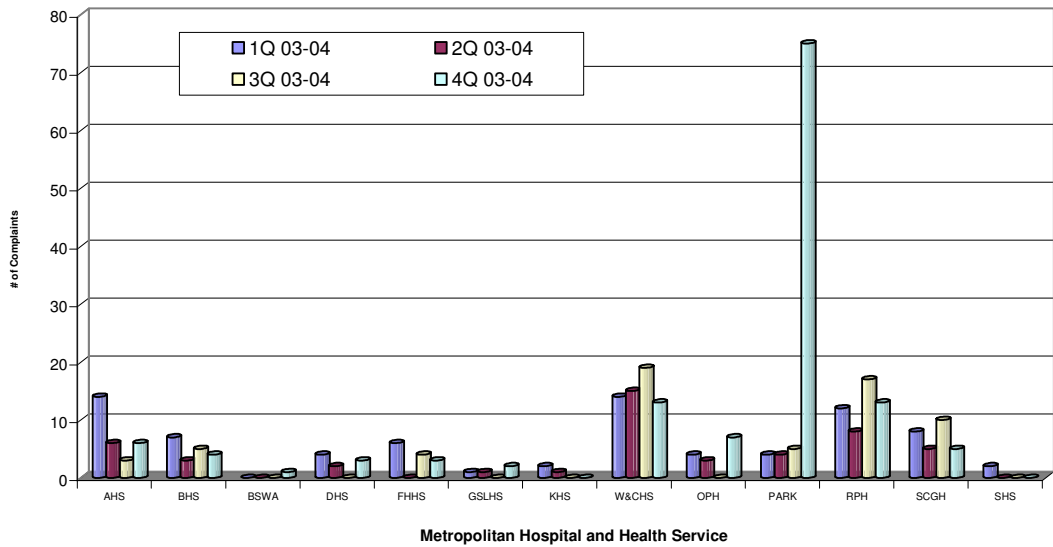


FIGURE 19: Number of 'Corporate Services' complaint issues recorded by Health Services in 2003-2004

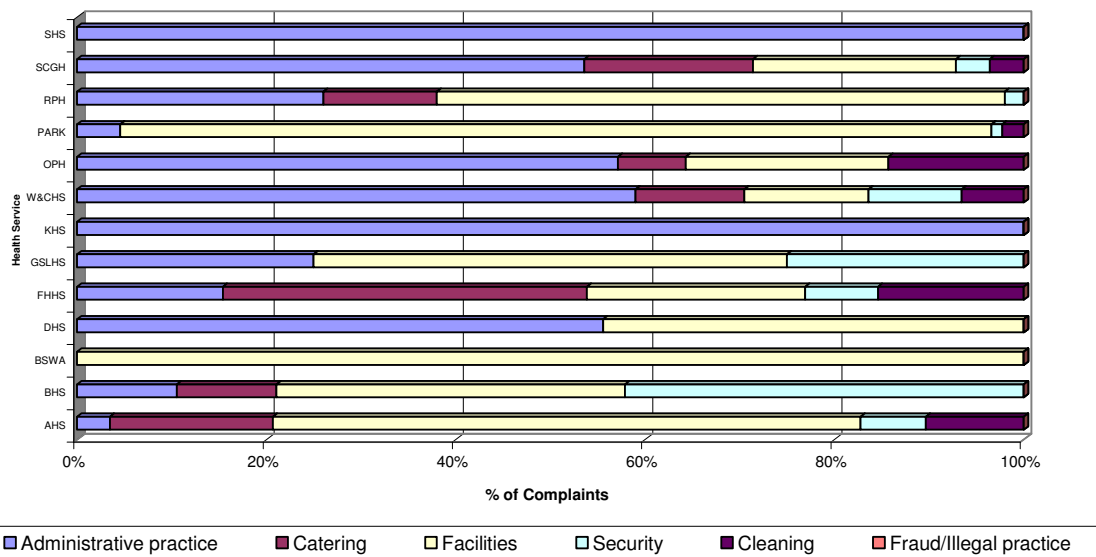


FIGURE 20: Breakdown of 'Corporate Services' complaint issues reported to Health Services in 2003-2004.

Costs

In financial year 2003-2004 there were a total of 136 (3.8%) 'Cost' complaint issues received by Metropolitan Health Services. The highest number of 'Cost' complaint issues were recorded by Royal Perth Hospital (n=29, 21.3%), Fremantle Hospital (n=24, 17.6%), Sir Charles Gairdner Hospital (n=23, 16.9%) and Dental Health Service (n=20, 14.7%). Figure 21 provides a breakdown of 'Costs' complaint issues recorded by Health Service in 2003-2004.

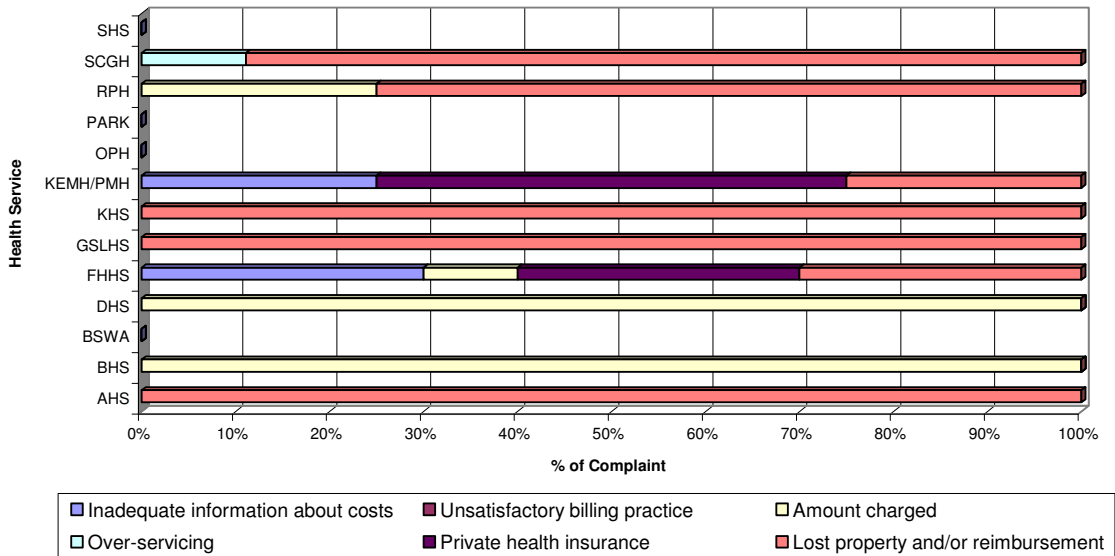


FIGURE 21: Breakdown of 'Costs' complaint issues recorded by Health Services in 2003-2004

Professional Conduct

In financial year 2003-2004 there were a total of 64 (1.8%) 'Professional Conduct' complaint issues received by Metropolitan Health Services. The highest number of 'Professional Conduct' complaint issues were recorded by Graylands, Selby-Lemnos Health Service (n=13, 20%), Sir Charles Gairdner Hospital (n=11, 16.9%) and Women's and Children's Health Service (n=10, 15.4%). Figure 22 provides a breakdown of 'Professional Conduct' complaint issues by Health Service in 2003-2004.

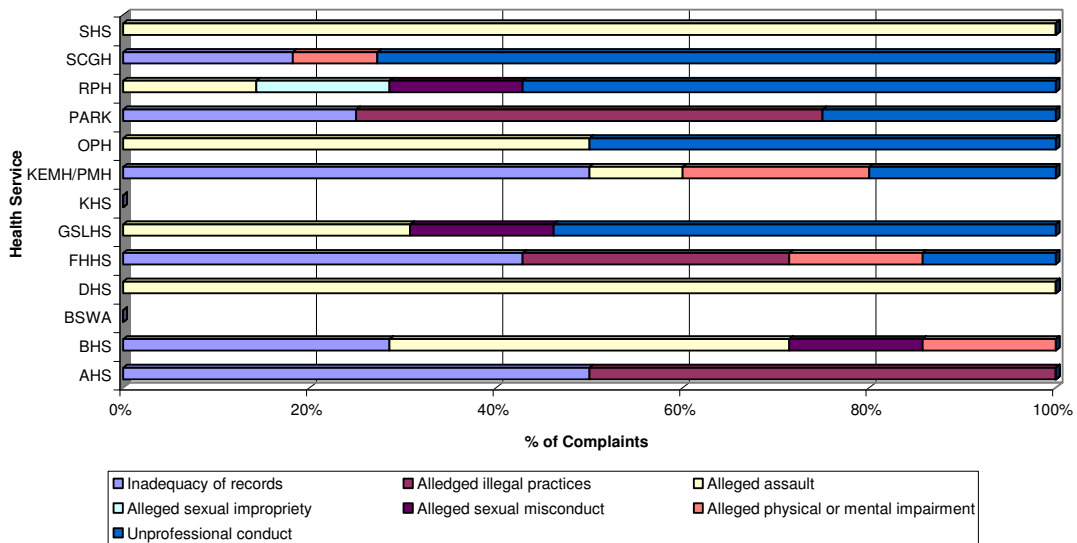


FIGURE 22: Breakdown of 'Professional Conduct' complaint issues recorded by Health Service in 2003-2004

Decision Making

In financial year 2003-2004 there was a total of 52 (1.5%) 'Decision Making' complaint issues received by Metropolitan Health Services. The largest number of 'Decision Making' complaint issues were recorded by Women's and Children's Health Service (n=19, 37.2%), Sir Charles Gairdner Hospital (n=14, 27.4%) and Dental Health Service (n=6, 11.7%). Figure 23 shows the number of 'Decision Making' complaint issues recorded by Area Health Services in 2003-2004.

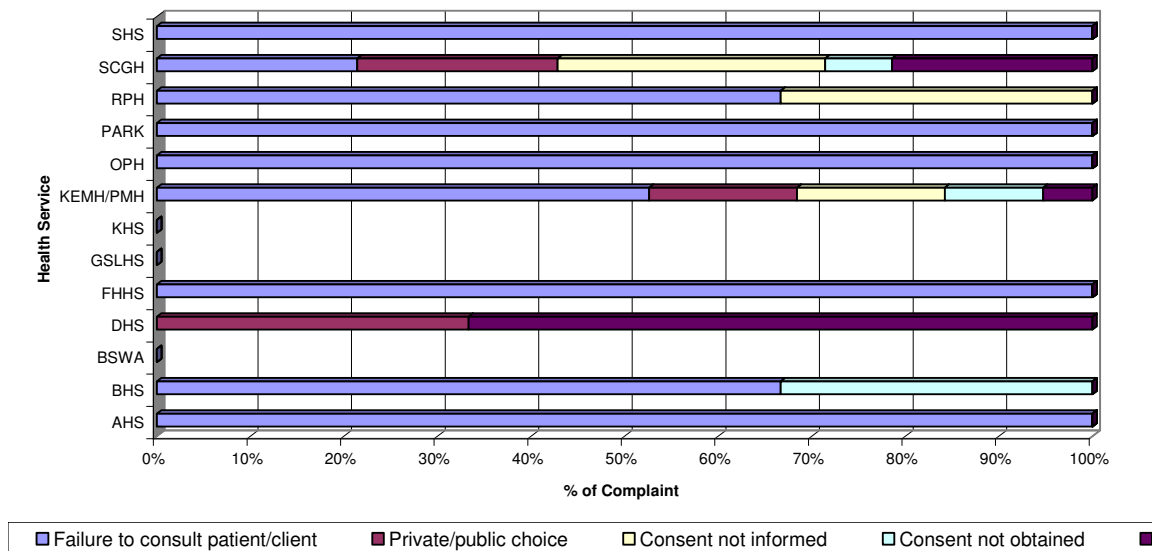


FIGURE 23: Breakdown of 'Decision Making' complaint issues recorded by Health Services in 2003-2004

Grievances

Figure 24 shows the number of 'Grievance' complaint issues recorded by Health Services in 2003-2004. In the 'Grievance' (n=18, 0.5%) category, the most highest number of complaints was received by Peel and Rockingham Kwinana Health Service (n=10, 55.5%).

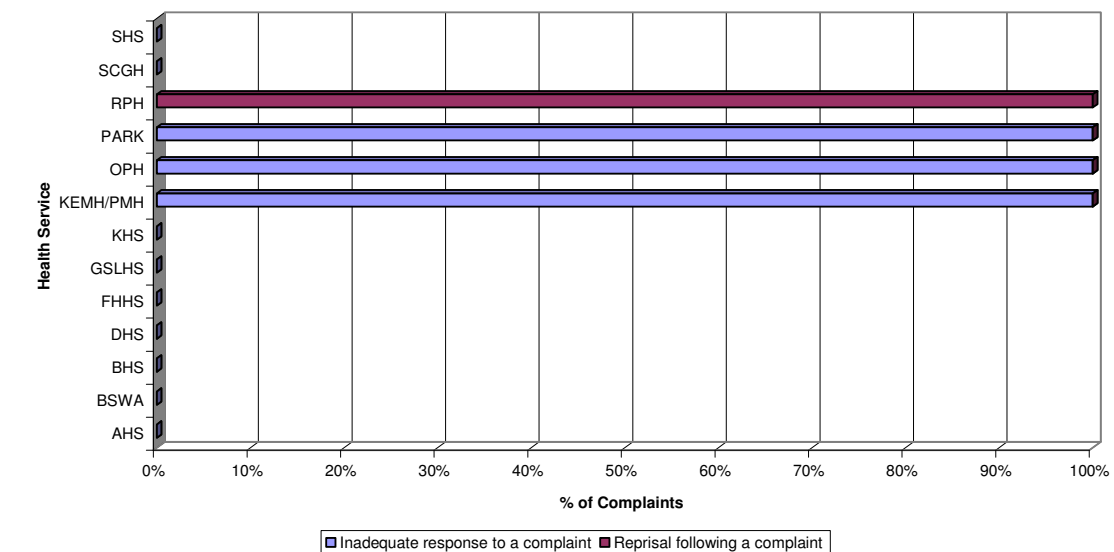


FIGURE 24: Breakdown of 'Grievance' complaint issues recorded by Health Services in 2003-2004

Resolution of Complaints

A timely response to consumers' complaint issues is essential to success of any complaint management system. The Western Australian Complaint Management Policy (2003) requires hospitals and health services in WA to report on the timeliness of their complaints resolution processes.

The response times stipulated by the Western Australian Complaint Management Policy (2003) are: 'Less than 15 Working Days', 'Within 30 Working Days', 'Greater than 30 Working Days', 'Still Active' and 'Referred to Another Agency for Resolution'. 1463 (55%) complaint issues were resolved in 'Less than 15 Working Days', 645 (24.5%) complaint issues were resolved 'Within 30 Working Days' and 153 (5.8%) of complaint issues were resolved 'Greater than 30 Working Days'. 318 (12%) complaint issues were 'Still Active' at the end of 30 June 2004 and only 46 (1.79%) complaint issues needed to be referred to another agency such as the Office of Health Review) for resolution. Figure 25 shows the proportion of complaint issues resolved within each designated response time.

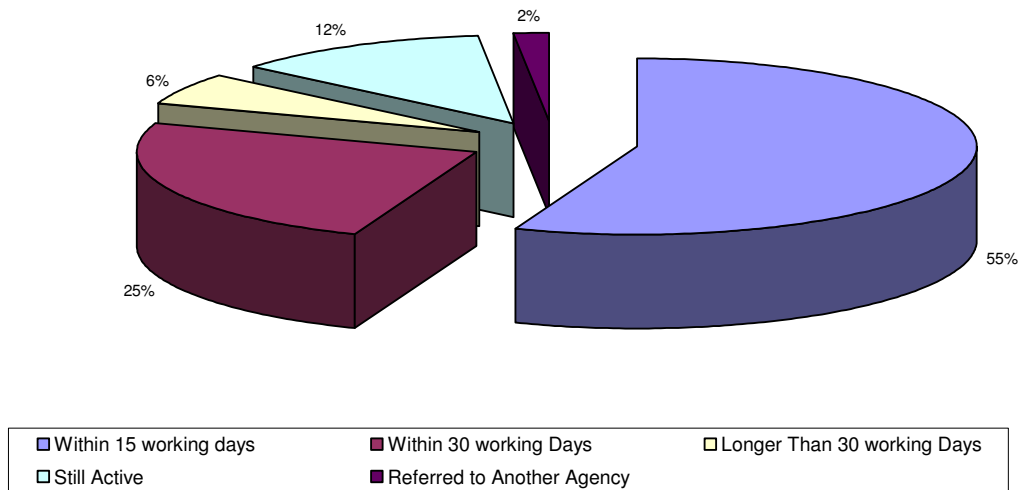


FIGURE 25: Total time taken by Health Services to resolve complaint issues in 2003-2004

Figure 26 shows the proportion of complaint issues resolved by each Health Service within the designated response times between 1 July 2003 and 30 June 2004

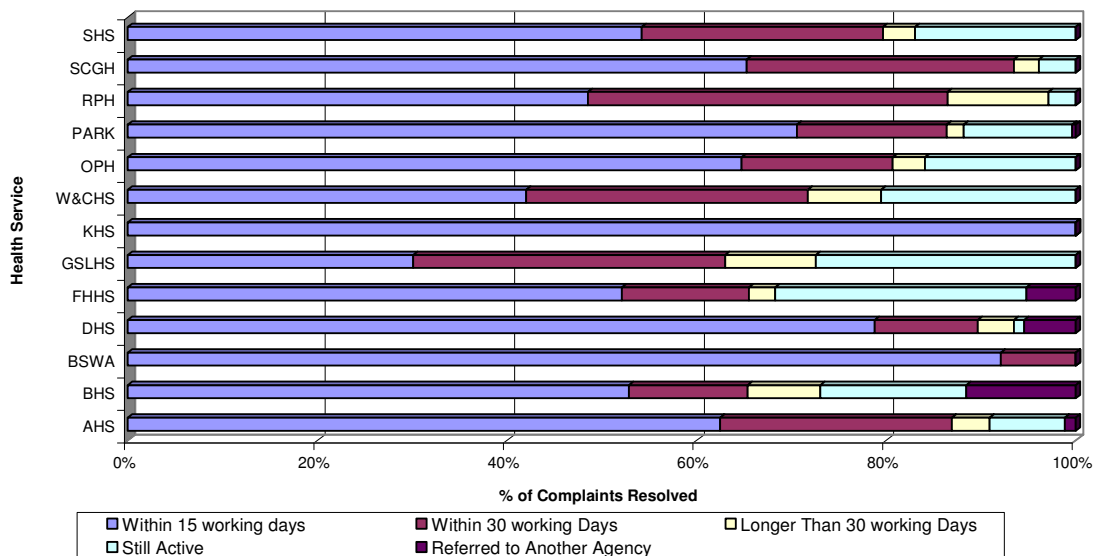


FIGURE 26: Breakdown of time taken by Health Services to resolve complaint issues in 2003-2004

Conclusions

In financial year 2003-2004, the total number of complaint issues received by Metropolitan Health Services in WA was **3,563**. The top three complaint categories that contributed the highest number of complaint issues were 'Quality of Care' (n=874, 24.5%); 'Access' (n=811, 22.8%); and 'Rights, Respect and Dignity' (n=697, 19.6%). Analysis of complaint issues highlighted the following areas of concern for the WA health system: delay in admission and treatment, inadequate or no service, inadequate treatment or therapy, inconsiderate service or lack of courtesy, misinformation and failure to communicate with patients/clients, and poor facilities and administrative practice.

The Department of Health has established a Clinical Governance Implementation Project to implement the clinical governance recommendations of the Health Reform Committee (2004). This includes reviewing and updating the WA Clinical Governance Framework to ensure that it is more robust and promotes increased accountability for patient safety and quality at all levels of the organisation.

As part of the Clinical Governance Implementation Project, Area Health Services will be required to ensure that:

- ◆ organisational responsibility for complaint management is clearly defined and there are clear lines of individual, clinical unit and system accountability for complaint management throughout the organisation including the Area Chief Executive and Health Service Executive Team;
- ◆ complaint management policy and strategy has been incorporated into the organisation's clinical governance structures, which support the organisation's accountability arrangements;
- ◆ appropriate key performance indicators are developed and used at all levels of the organisation to measure and demonstrate the effectiveness of the organisation's complaint management system; and
- ◆ systems and processes are in place to monitor and report action taken to achieve improvements in service delivery.

More work will be done, in consultation with budget holders, on further developing clinical safety and quality initiatives and performance indicators during 2004/2005. However, Area Health Services will be required to report on progress towards establishing effective complaint management systems and processes as part of their regular Clinical Governance reporting to the Department of Health, which will commence in 2004/2005.