



Department of Health
Government of Western Australia

Report on Complaint Data Collected by Country 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

Area 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 Western Australian 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 on a quarterly basis from the following Health Service Regions administered by the WA Country Health Service in WA:

- Goldfields and South East Health Region (G&SEHR)
- Great Southern Health Region (GSHR)
- Kimberley Health Region (KHR)
- Midwest and Murchison Health Region (M&MHR)
- Pilbara and Gascoyne Health Region (P&GHR)
- Wheatbelt Health Region (WHR)

For comparative purposes, this report includes complaint data provided by South West Area Health Service, even though the South West Area Health Service is a separate reporting entity to the six Health Regions that make up the WA Country Health Service.

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 services 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 (between 1 July 2003 and 30 June 2004), a total of **650** complaint issues were received by the WA Country Health Service. The highest number of complaint issues were recorded at: Pilbara & Gascoyne Health Region (n=214, 32.6%), Goldfields and South East Health Region (n=196, 30%) and Midwest and Murchison Health Region (n=95, 14.6%).

South West Area Health Service received 125 complaints in financial year 2003-2004.

Figure 1 provides a comparative breakdown of quarterly complaint issues recorded by Country Health Services in Western Australia between 1 July 2003 and 30 June 2004.

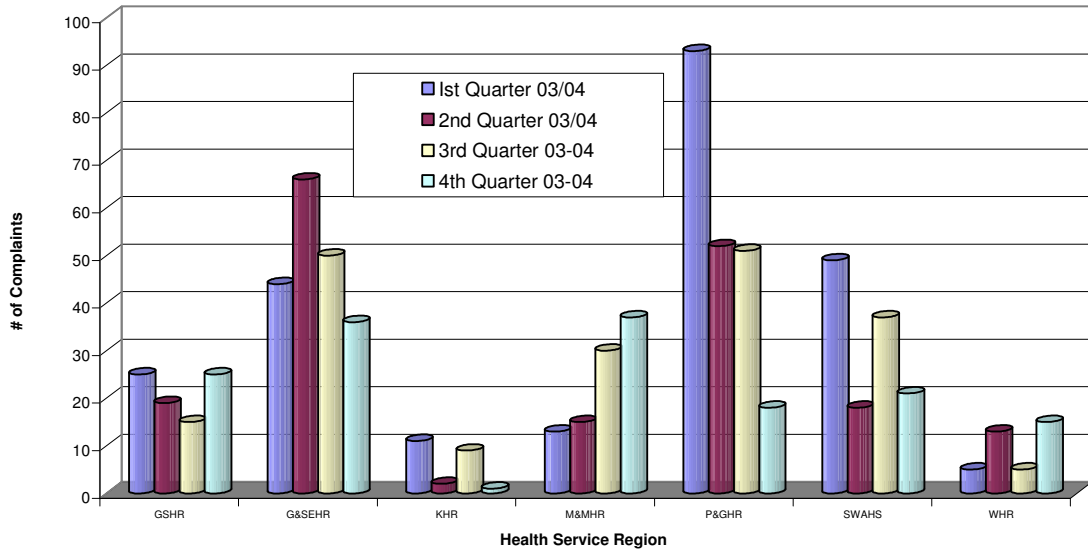


FIGURE 1: Comparative Breakdown of Complaints by Country Health Services in 2003-2004

New Complainants

In financial year 2003-2004 there was a total of **386** new complainants to the WA Country Health Service and 125 new complainants to the South West Area Health Service. Figure 2 provides a comparative breakdown of new complainants recorded by each Country Health Service Region in Western Australia between 1 July 2003 and 30 June 2004.

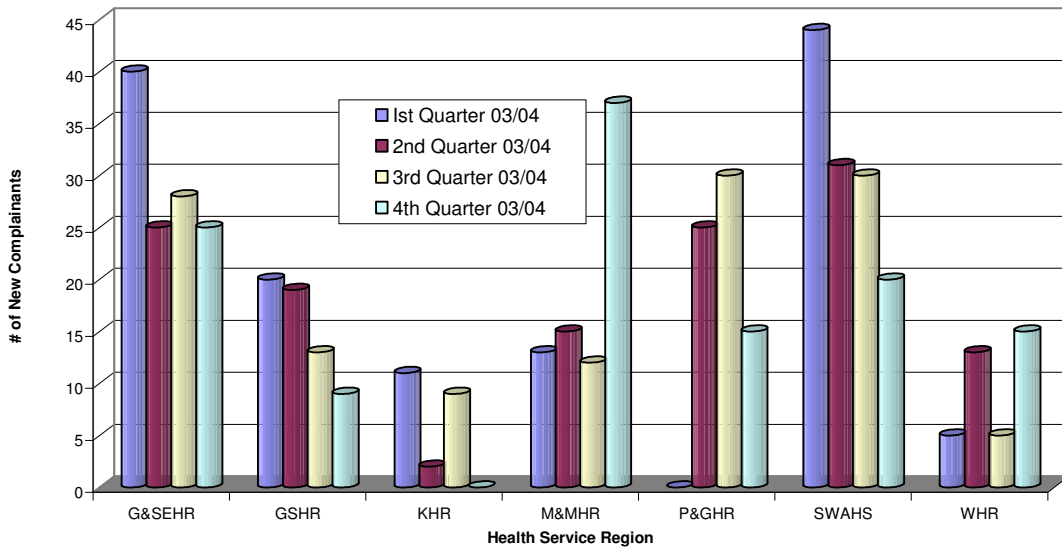


FIGURE 2: Comparative Breakdown of New Complainants by Country Health Service Region in 2003-2004

Principal Complaint Categories

In financial year 2003-2004, the top five complaint categories were: 'Access' (n=201, 25.9%); 'Quality of Care' (n=157, 20.2%); 'Communication' (n=132, 17%); 'Rights, Respect and Dignity' (n=124, 16%); and 'Corporate Services' (n=96, 12.4%). Figure 3 shows provides a breakdown of complaint issues by major complaint category in financial year 2003-2004.

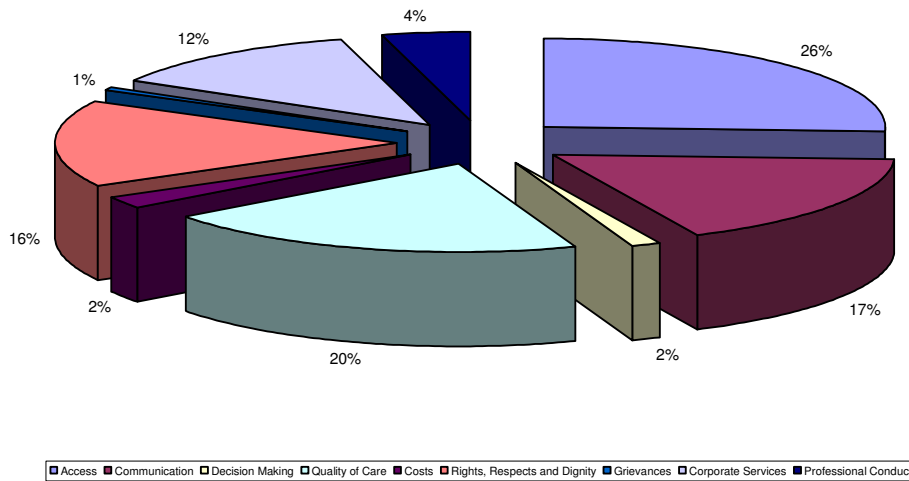


FIGURE 3: Breakdown of complaint issues by major complaint category in financial year 2003-2004

Principal Complaint Categories by Health Service Region

Figure 4 shows provides a breakdown of the major complaint categories by Health Service Region in financial year 2003-2004.

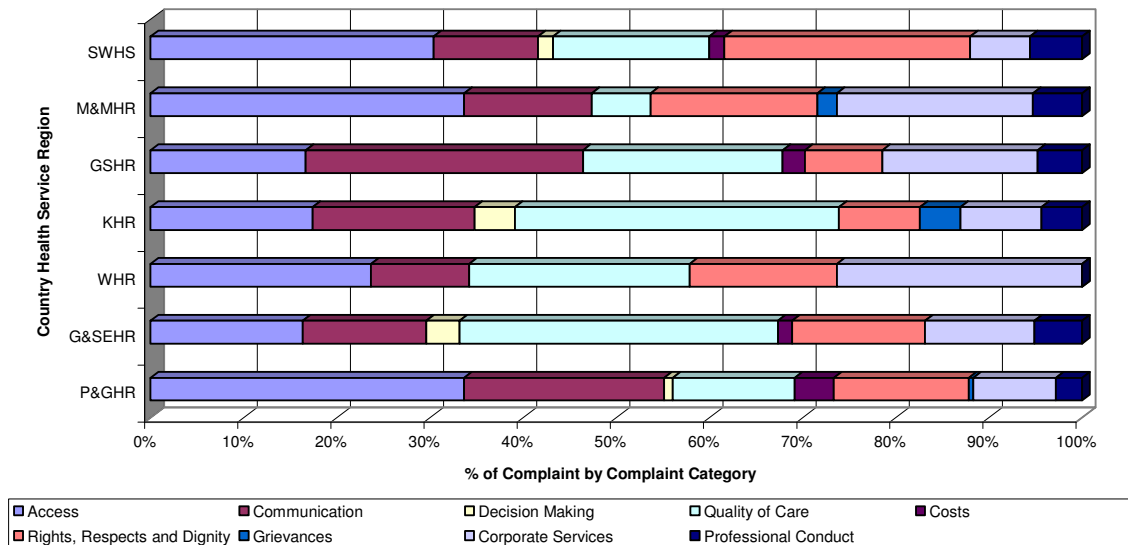


FIGURE 4: Overview of Complaint issues by Principal Complaint Category in 2003-2004

Top 22 complaints received as a proportion of each major category

A breakdown of the top 22 complaint issues recorded by Health Services is provided below. The top 22 complaint issues refer to those complaints scoring more than 10% of the overall complaint issues recorded in each of the major complaint categories.

Access

Complaint Issue	Total Complaints	%
Delay in Admission/Treatment	45	22.4
Inadequate or No Service	76	37.8

Quality of Clinical Care

Complaint Issue	Total Complaints	%
Inadequate Diagnosis/Observation	20	12.6
Inadequate Treatment/Therapy	58	36.9
Poor Coordination of Treatment	17	10.8

Communications

Complaint Issue	Total Complaints	%
Misinformation or Failure in Communication	27	20.4
Inadequate Communication	26	19.7
Inappropriate Verbal/Non Verbal Communication	47	35.6

Rights, Respect and Dignity

Complaint Issue	Total Complaints	%
Inconsiderate Service/Lack of Courtesy	55	44.3
Absence of Caring	25	20.1
Breach of Confidentiality	20	16.1

Corporate Services

Complaint Issue	Total Complaints	%
Administrative Practice	37	38.5
Facilities	22	11
Catering	17	17.7
Cleaning	12	12.5

Costs

Complaint Issue	Total Complaints	%
Inadequate Information about Costs	4	25
Unsatisfactory Billing Practice	4	25
Lost Property and/or Reimbursement	5	31

Professional Conduct

Complaint Issue	Total Complaints	%
Unprofessional Conduct	32	96

Decision Making

Complaint Issue	Total Complaints	%
Failure to Consult Patient/Client	5	41.6
Public/Private Choice	5	41.6

Grievances

Complaint Issue	Total Complaints	%
Inadequate Response to a Complaint	4	100

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 were 201 (25.9%) 'Access' complaint issues recorded by Country Health Services. The most common complaint issues related to 'Inadequate or No Service' (n=76, 37.8%) and 'Delay in Admission/Treatment' (n=45, 22.4%). Figure 5 provides a breakdown of 'Access' complaint issues recorded in financial year 2003-2004.

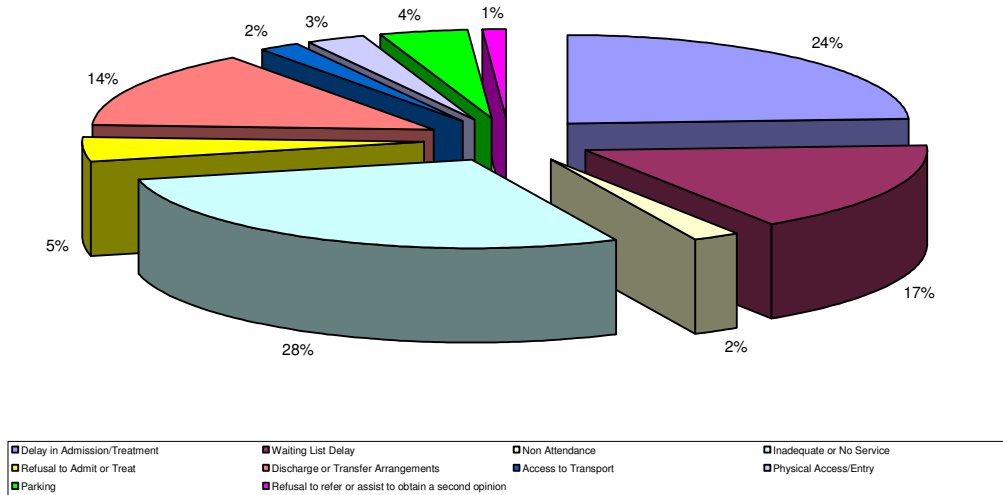


FIGURE 5: Breakdown of 'Access' complaint issues recorded in 2003-2004

Breakdown of 'Access' complaint Issues by Country Health Service Region

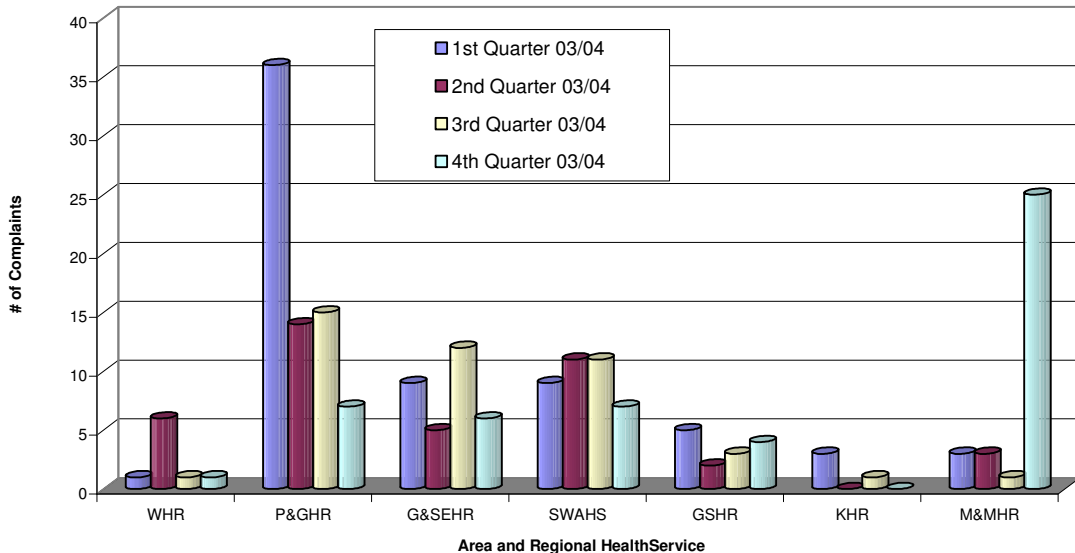


FIGURE 6: Number of 'Access' complaint issues recorded by Health Service in 2003-2004

Of the 201 'Access' complaint issues recorded in financial year 2003-2004, the largest number were received by Pilbara Gascoyne Health Region (n=72, 35.8%), Goldfields and South East Health Region (n=32, 15.9%) and Midwest and Murchison Health Region (n=32, 15.9%). South West Health Service recorded 38 (18.9%) 'Access' complaint issues in financial year 2003-2004. The most common 'Access' complaint issues received by the above Health Services related to:

Complaint Issue	P&GHR		G&SEHR		M&MHR		SWAHS	
	N	%	N	%	N	%	N	%
Delay in Admission/Treatment	15	20	7	21	4	12	9	23
Inadequate or No Service	16	22	11	34	23	71	20	52

Figure 7 provides a breakdown of 'Access' complaint issues recorded by Health Service Region.

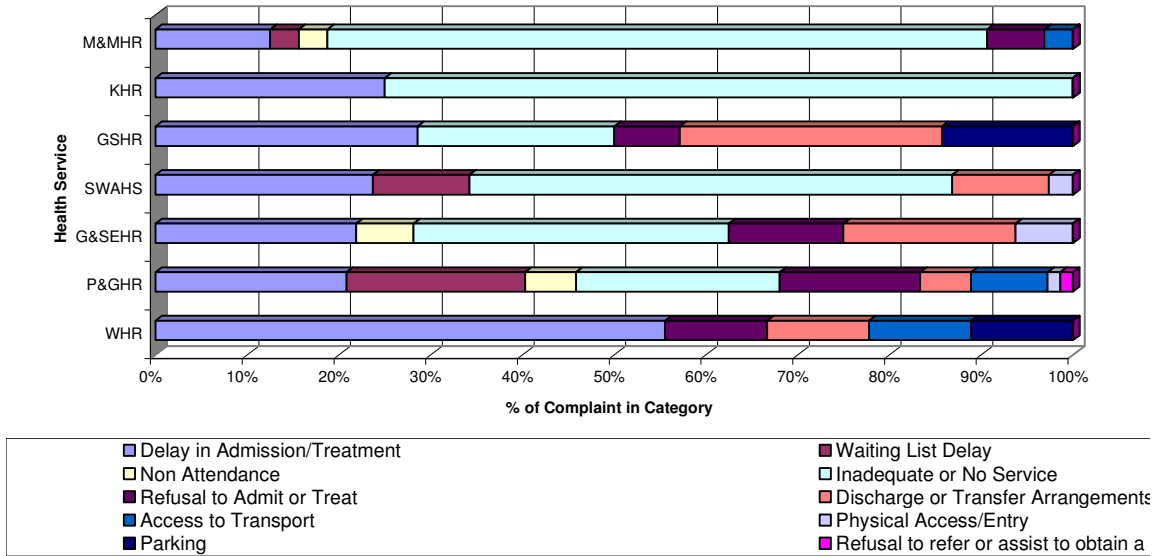


FIGURE 7: Breakdown of 'Access' complaint issues by Health Service in 2003-2004.

Recommendations:

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

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 157 (20.2%) 'Quality of Care' complaint issues received by Country Health Services in Western Australia. The most common complaint issues related to 'Inadequate Treatment/Therapy' (n=58, 36.9%) and 'Inadequate Diagnosis/Observation' (n=20, 12.7%). Figure 8 provides a breakdown of 'Quality of Care' complaint issues recorded in financial year 2003-2004.

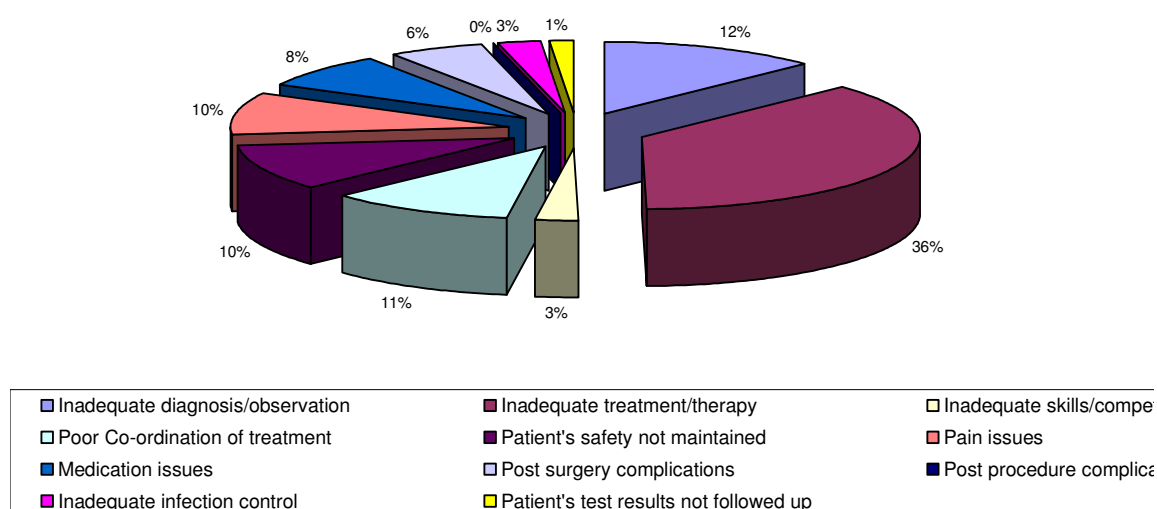


FIGURE 8: Breakdown of 'Quality of Care' complaint issues in 2003-2004

Breakdown of 'Quality of Care' Complaint Issues by Health Service Region

The WA Country Health Service received 136 (86.6%) of 'Quality of Care' complaint issues in financial year 2003-2004.

The three WA Country Health Service Regions with the highest 'Quality of Care' complaint issues in financial year 2003-2004 were Goldfields and South East Health Region (n=67, 42.6%), Pilbara Gascoyne Health Region (n=28, 17.8%) and Great Southern Health Region (n=18, 11.5%). South West Area Health Service recorded 21 (13.4%) of 'Quality of Care' complaint issues in financial year 2003-2004.

The most common 'Quality of Care' complaint issues recorded by the above Health Services related to:

Complaint Issue	G&SEHR		P&GHR		GSHR		SWAHS	
	N	%	N	%	N	%	N	%
Inadequate Diagnosis/Observation	4	6	4	14	2	11	6	28
Inadequate Treatment/Therapy	32	47	5	18	7	38	6	28
Poor Coordination of Treatment	3	4	7	25	2	11	2	9
Patient's Safety not Maintained	9	13	1	3	3	16	2	9

Figure 9 and Figure 10 provide a breakdown of 'Quality of Care' complaint issues received by Health Services in 2003-2004.

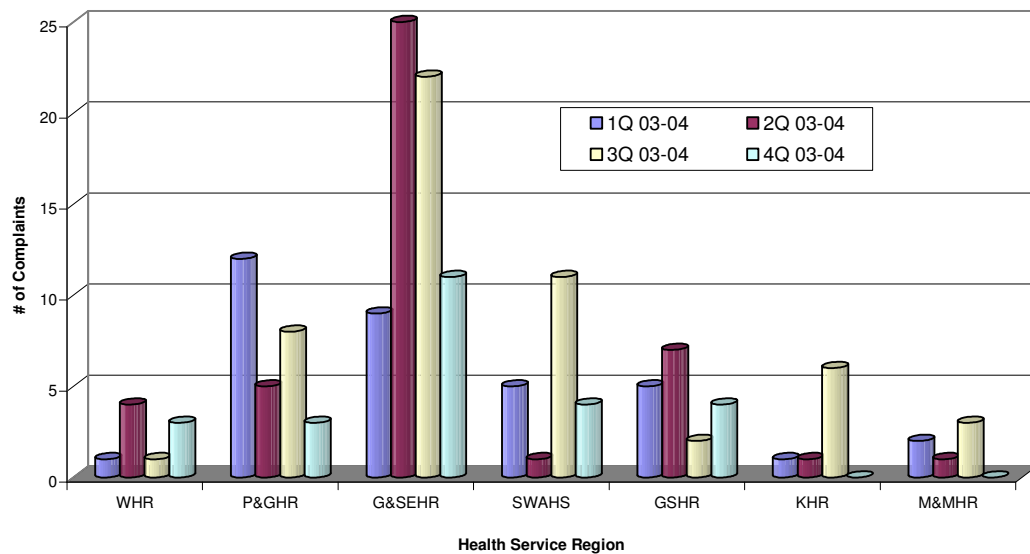


FIGURE 9: Number of 'Quality of Care' complaint issues recorded by Health Services in 2003-2004

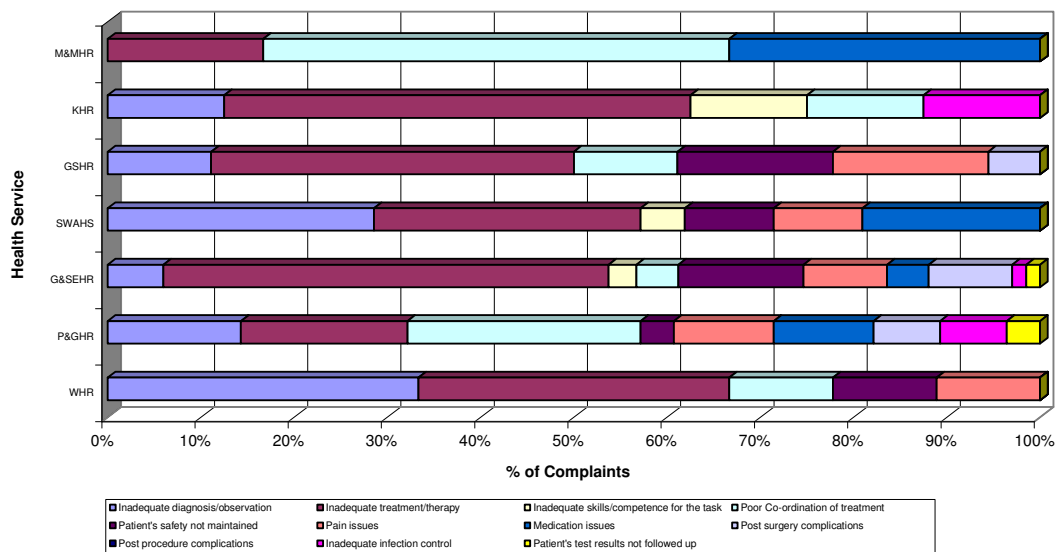


FIGURE 10: Breakdown of 'Quality of Care' complaint issues by Health Service in 2003-2004.

Recommendations:

It is recommended that the Chief Executives of the above Area Health Services 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'. The Area Health Services should also monitor and review the implementation and effectiveness of any policy or procedural changes as part of their clinical audit process.

Communication

Communication relates to the quality, quantity, appropriateness and delivery of information provided about services, diagnostic tests and treatment. 'Communication' issues (n=132) accounted for 17% of all complaints issues in financial year 2003-2004. The most common 'Communication' complaint issues related to 'Inappropriate Verbal/Non Verbal Communication' (n=47, 35.6%), 'Misinformation or Failure in Communication' (n=26, 19.6%), and 'Inadequate Communication' (n=26, 19.6%). Figure 11 provides a breakdown of 'Communication' complaint issues received in 2003-2004.

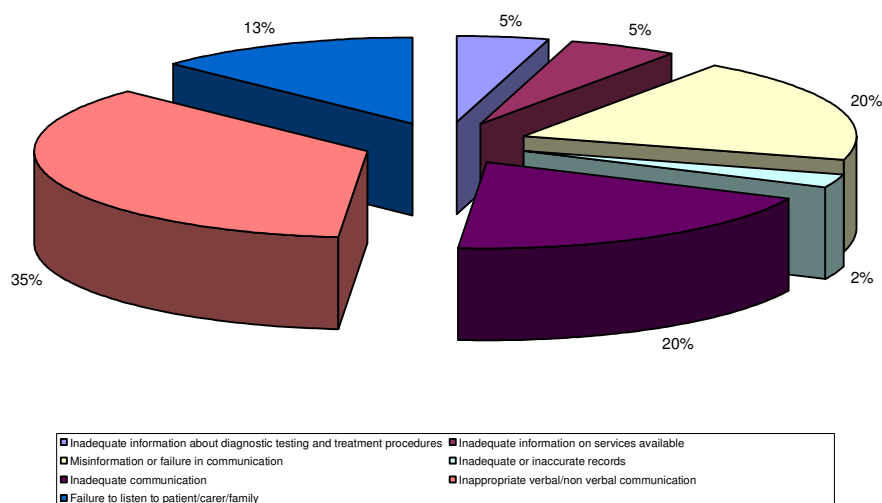


FIGURE 11: Breakdown of 'Communication' complaint issues in 2003-2004

Breakdown of 'Communication' Complaint Issues by Health Service Regions

Of the 132 (18.2%) 'Communication' complaint issues received by WA Country Health Service in financial year 2003-2004, the highest number of issues were recorded by Pilbara Gascoyne Health Region (n=46, 34.8%), Goldfields and South East Health Region (n=26, 19.7%) and Great Southern Health Region (n=25, 18.9%).

South West Area Health Service recorded 14 (10.6%) 'Communication' complaint issues.

Most 'Communication' complaint issues related to:

Complaint Issue	P&GHR		G&SEHR		GSHR		SWAHS	
	N	%	N	%	N	%	N	%
Misinformation or Failure in Communication	9	19.6	3	11.5	3	12	3	21.4
Inadequate Communication	9	19.6	5	19	6	24	2	14.3
Inappropriate Verbal/Non Verbal Communication	10	21.7	14	53	10	40	9	64
Failure to Listen to Patient/Carer/Family	12	26	2	7	1	4	0	0

Figure 12 and Figure 13 provide a breakdown of 'Communication' complaint issues received by Health Service in financial year 2003-2004.

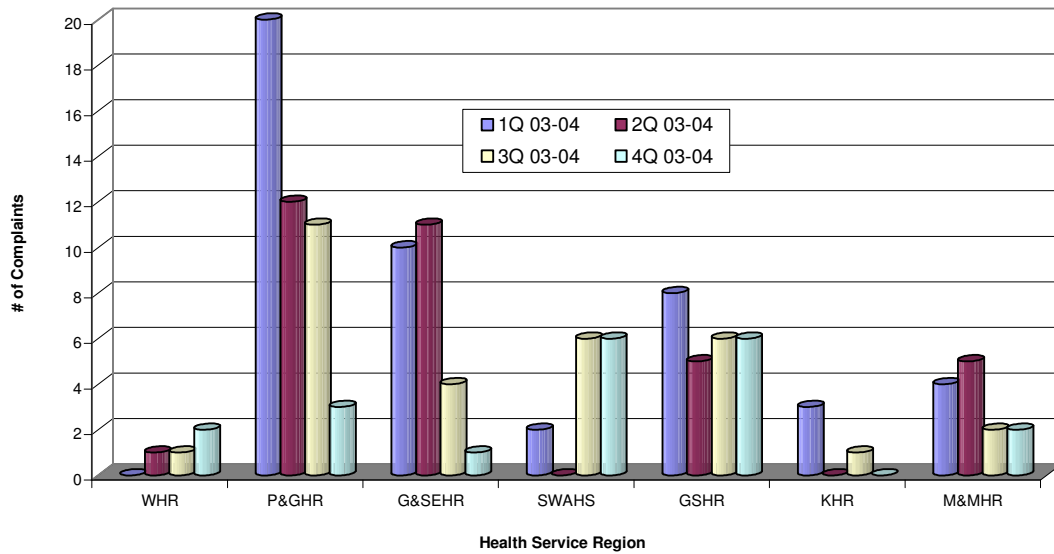


FIGURE 12: Number of 'Communication' complaint issues recorded by Health Service in 2003-2004

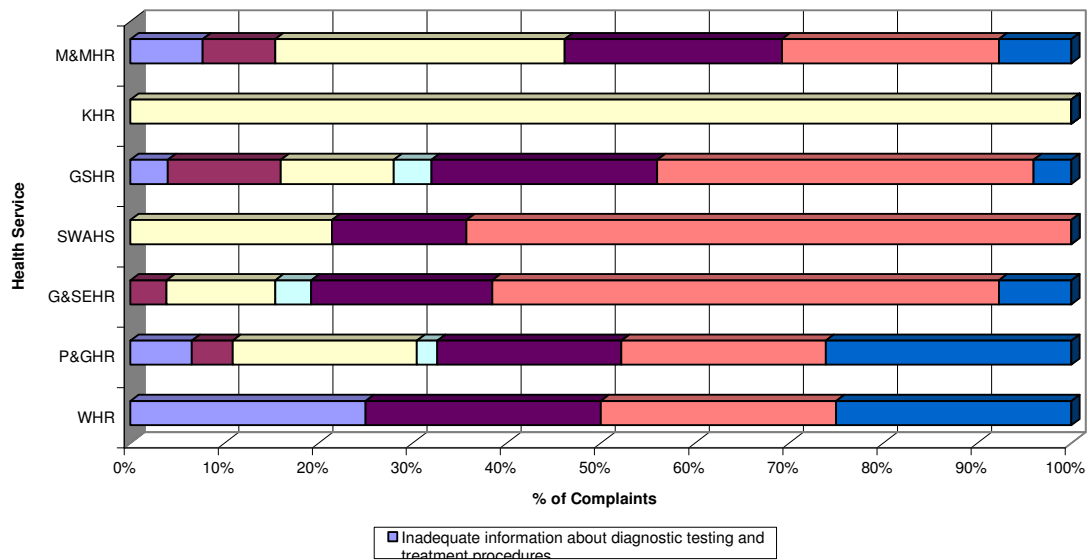


FIGURE 13: Breakdown of 'Communication' complaint issues recorded by Health Service in 2003-2004.

Recommendations:

It is recommended that the above Area Health Services ensure that staff comply with their obligations under the WA Public Service Code of Conduct. The Area Health Services should also 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.

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 124 (16%) 'Rights, Respect and Dignity' complaint issues received by Country Health Services in WA. The most common complaint issues related to 'Inconsiderate Service/Lack of Courtesy' (n=55, 44.4%), 'Absence of Caring' (n=25, 20.2%) and 'Breach of Confidentiality' (n=20, 16.1%). Figure 14 provides a breakdown of 'Rights, Respect and Dignity' complaint issues recorded in financial year 2003-2004.

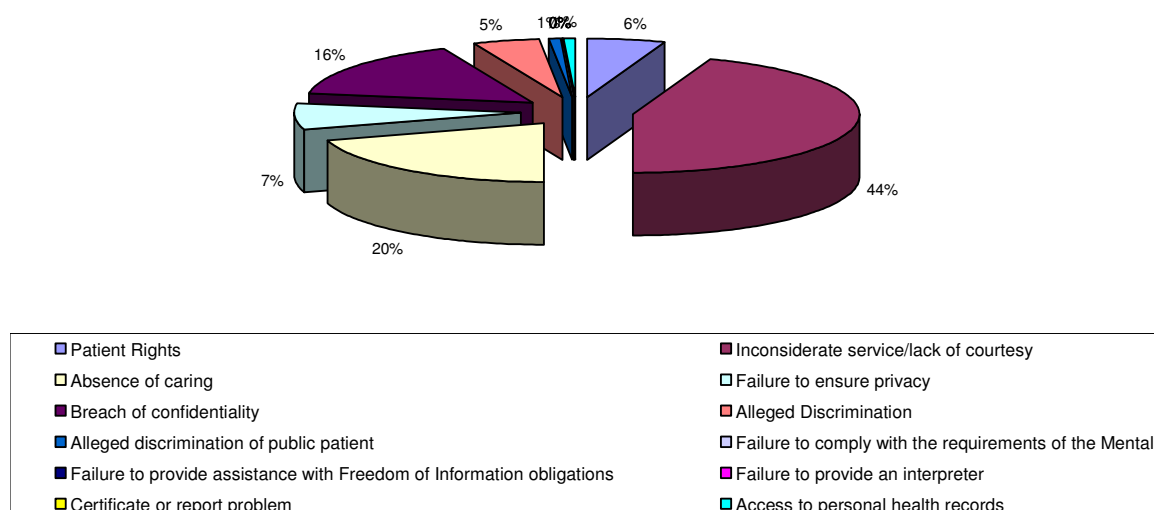


FIGURE 14: Breakdown of 'Rights, Respect and Dignity' complaint issues recorded in 2003-2004

Breakdown of 'Rights, Respect and Dignity' complaint Issues by Country Health Service Region

The three WA Country Health Service Regions with the highest 'Rights, Respect and Dignity' complaint issues in 2003-2004 were: Pilbara Gascoyne Health Region (n= 31, 25%), Goldfields and South East Health Region (n=28, 22.6%) and Midwest and Murchison Health Region (n=18, 14.5%). South West Health Area Service recorded 33 (25.8%) 'Rights, Respect and Dignity' complaint issues in 2003-2004.

The most common 'Rights, Respect and Dignity' complaint issues related to:

Complaint Issue	P&GHR		G&SEHR		M&MHR		SWAHS	
	N	%	N	%	N	%	N	%
Inconsiderate Service/Lack of Courtesy	14	45.2	12	42.8	4	23.5	17	51.5
Breach of Confidentiality'	6	19.4	3	10.7	5	29.4	2	6
Absence of Caring	4	12.9	5	17.8	5	29.4	10	30.3

Figure 15 and Figure 16 provide a breakdown of 'Rights, Respect and Dignity' complaint issues received by Health Service in financial year 2003-2004.

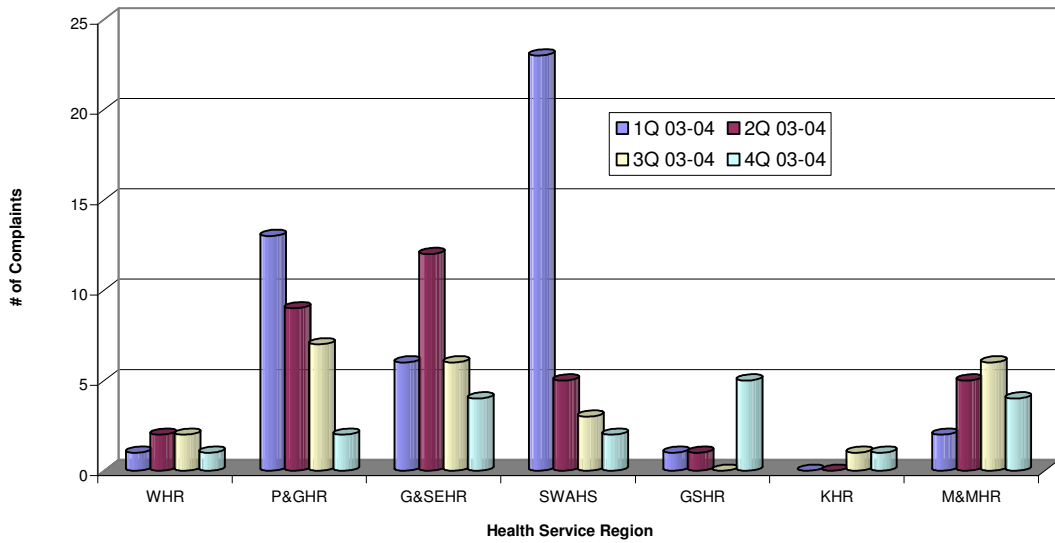


FIGURE 15: Number of 'Rights, Respect and Dignity' complaint issues recorded by Health Service in 2003-2004

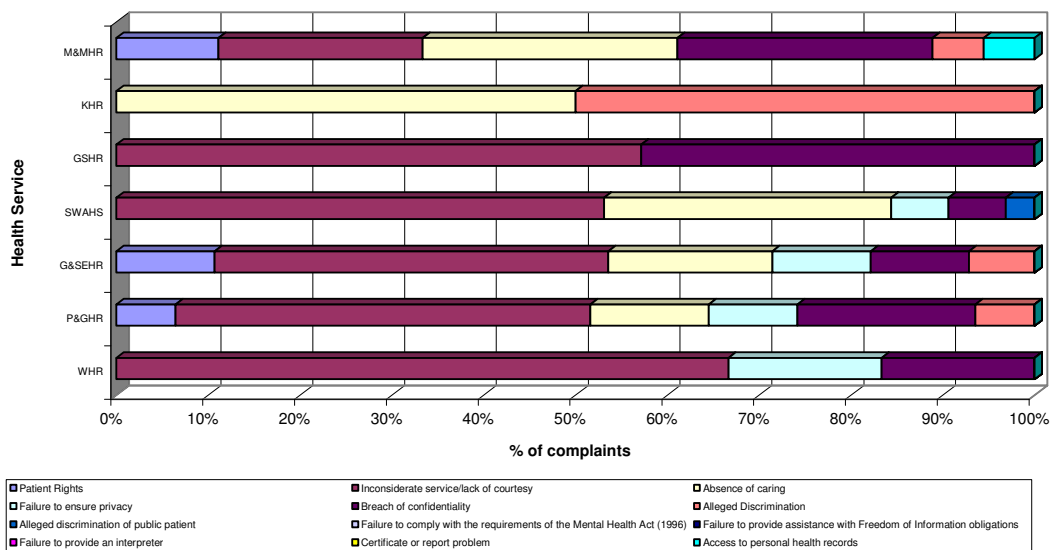


FIGURE 16: Breakdown of 'Rights, Respect and Dignity' complaint issues by Health Service in 2003-2004.

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.

Corporate Services

'Corporate Services' provided the fifth highest number of complaint issues in 2003-2004 (n=96, 12.4%). The most common 'Corporate Service' complaint issues related to 'Administrative Practice' (n=37, 38.5%), 'Facilities' (n=22, 22.9%) and 'Catering' (n=17, 17.7%). Figure 17 provides a breakdown of 'Corporate Service' complaint issues recorded in financial year 2003-2004.

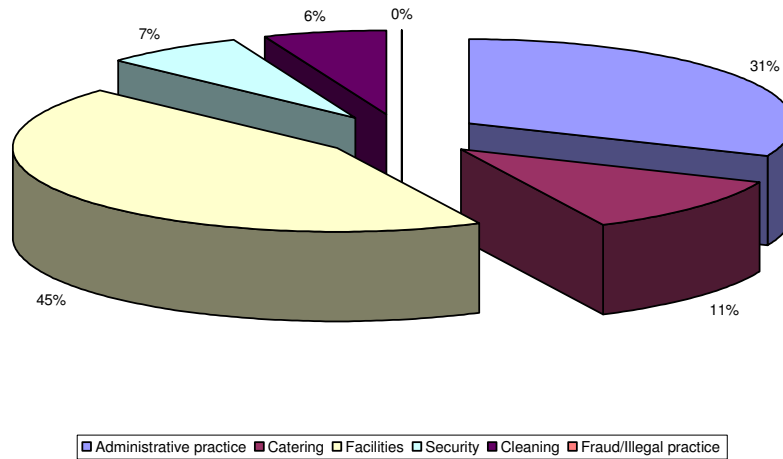


FIGURE 17: Breakdown of 'Corporate Services' complaint issues received in 2003-2004

Country Health Services

Of the 96 'Corporate Service' complaint issues recorded by Country Health Services in 2003-2004, the highest number of 'Corporate Services' complaint issues were recorded at Goldfields and South East Health Region (n=23, 23.9%), Midwest and Murchison Health Region (n=20, 20.8%), Pilbara and Gascoyne Health Region (n=19, 19.8%) and Great Southern Health Region (n= 14,14.6%). South West Area Health Service recorded 8 (8.3%) 'Corporate Service' complaint issues. Most complaints related to:

Complaint Issue	P&GHR		G&SEHR		M&MHR		GSHR	
	N	%	N	%	N	%	N	%
Administrative Practice	13	68.4	10	43.4	2	10	6	42.8
Catering	1	5.2	1	4.3	9	45	3	21.4
Facilities	5	26.3	3	12.5	2	10	3	21.4

Figure 18 provides a breakdown of 'Corporate Service' complaint issues received by Area Health Services in financial year 2003-2004.

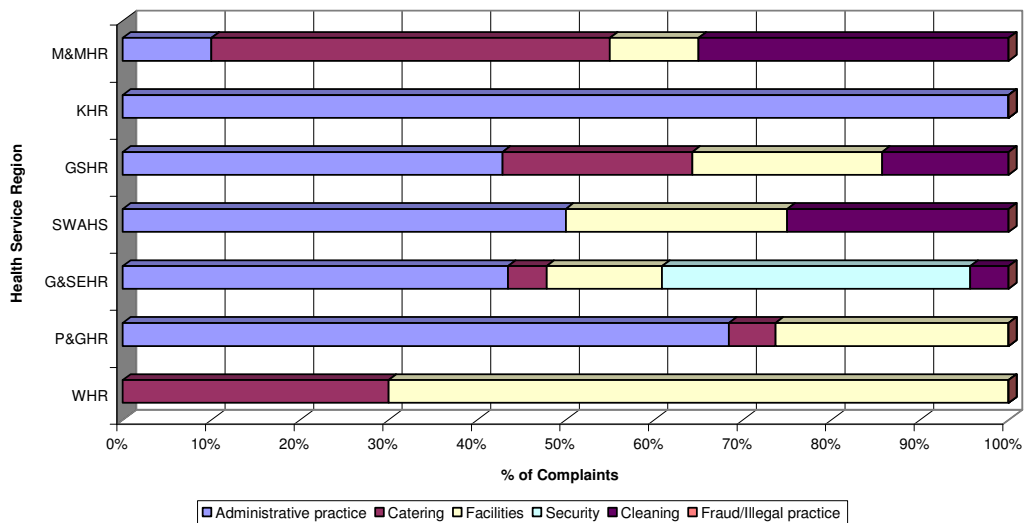


FIGURE 18: Breakdown of 'Corporate Services' complaint issues reported to Health Services in 2003-2004.

Professional Conduct

In financial year 2003-2004 there were a total of 33 (4.2%) 'Professional Conduct' complaint issues received by Country Health Services in WA. The highest number of 'Professional Conduct' complaint issues were recorded by Goldfields and South East Health Region recorded 10 (30%). South West Health Service recorded 7 (21%) 'Professional Conduct' complaint issues. Figure 19 provides a breakdown of 'Professional Conduct' complaint issues by Health Service in 2003-2004.

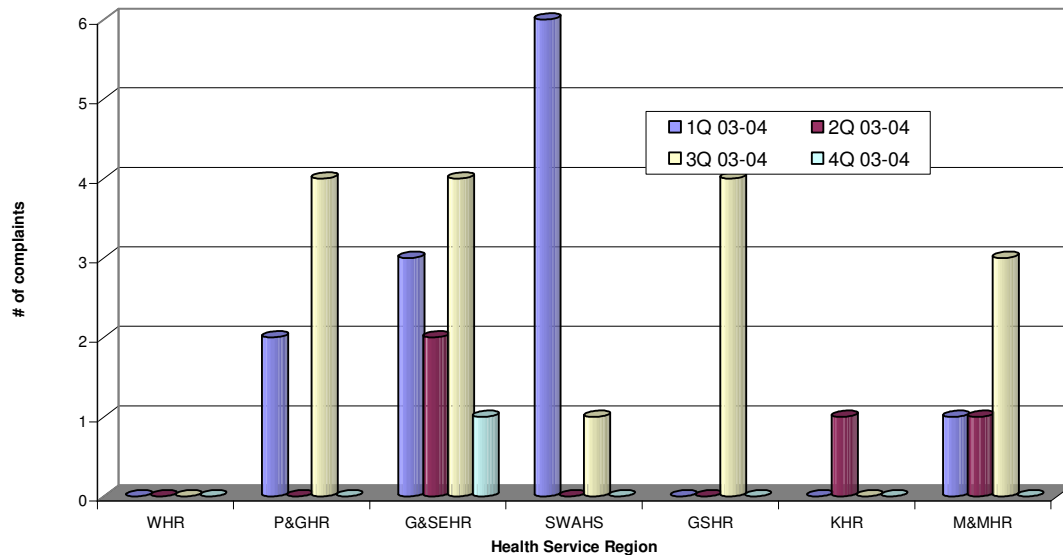


FIGURE 19: Breakdown of 'Professional Conduct' complaint issues recorded by Health Service in 2003-2004

Costs

In financial year 2003-2004 there were a total of 16 (2%) 'Cost' complaint issues received by Country Health Services in WA. The highest number of 'Cost' complaint issues were recorded by Pilbara and Gascoyne Health Region (n=9, 56.3%). Figure 20 provides a breakdown of 'Costs' complaint issues recorded by Health Services in 2003-2004.

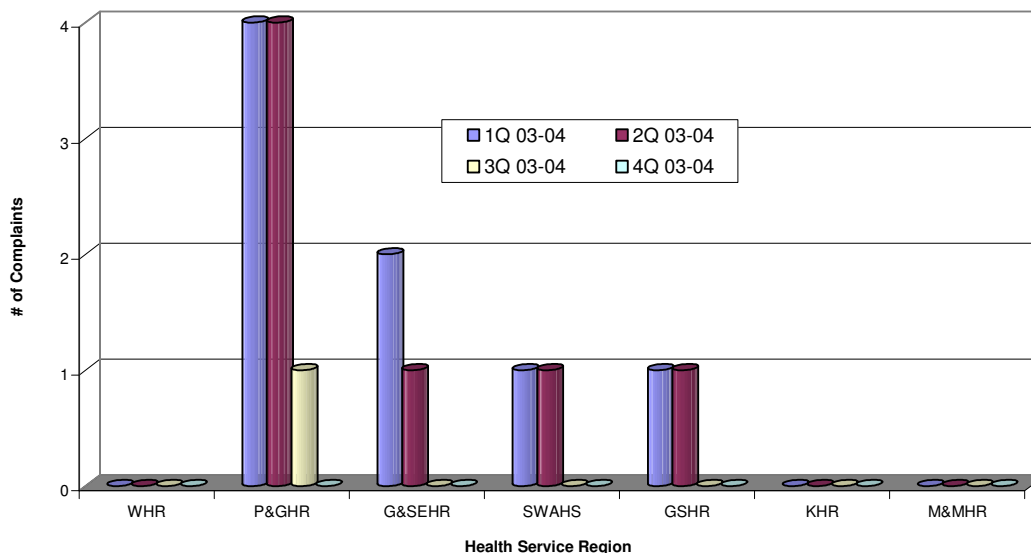


FIGURE 20: Breakdown of 'Costs' complaint issues recorded by Health Services in 2003-2004

Decision Making

In financial year 2003-2004 there was a total of 12 (1.5%) 'Decision Making' complaint issues received by Health Services in WA. The largest number of 'Decision Making' complaint issues were recorded by Goldfields and South East Health Region (n=7, 58.3%). Figure 21 shows the number of 'Decision Making' complaint issues recorded by Area Health Services in 2003-2004.

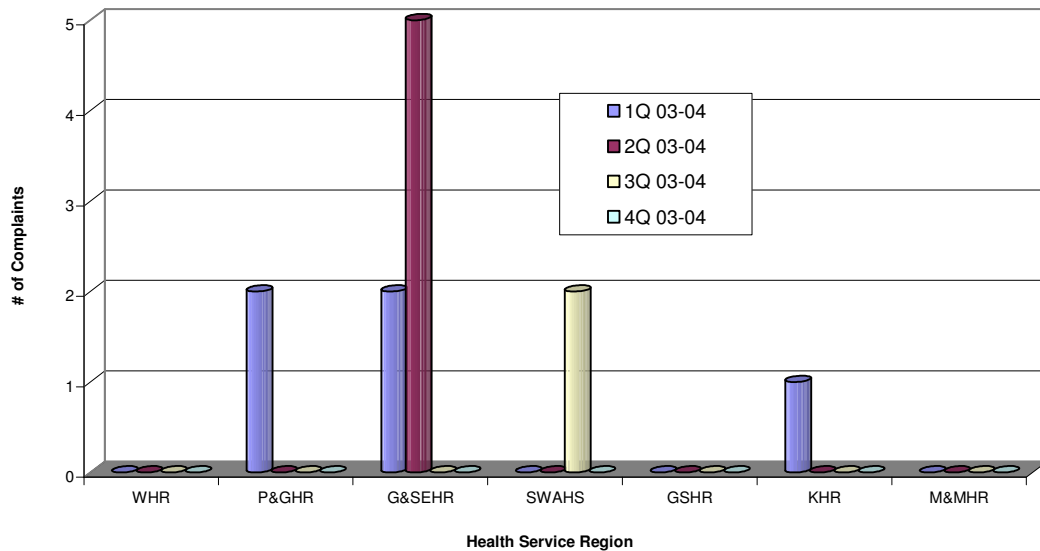


FIGURE 21: Breakdown of 'Decision Making' complaint issues recorded by Health Services in 2003-2004

Grievances

Figure 22 shows the number of 'Grievance' complaint issues recorded by Health Services in 2003-2004. In the 'Grievance' (n=4, 0.5%) category, the most highest number of complaints was received by Midwest and Murchison Health Region (n=2, 50%).

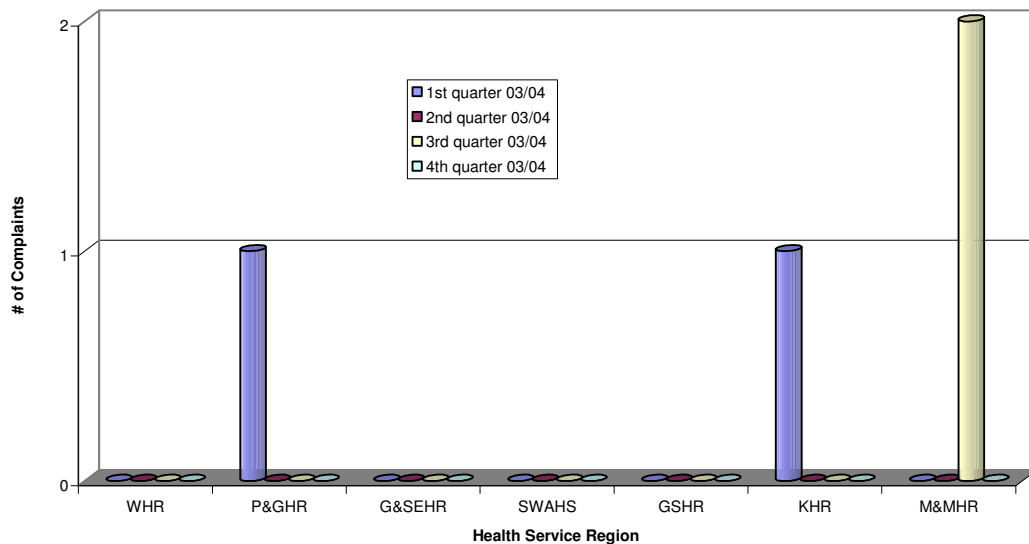


FIGURE 22: Breakdown of 'Grievance' complaint issues recorded by Health Services in 2003-2004

Resolution of Complaints

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

The response times stipulated by the WA Complaint Management Policy (2003) have changed from the timeframes reported in 2002-2003. The revised timeframes are: 'Less than 15 Working Days', 'Within 30 Working Days', 'Greater than 30 Working Days', 'Still Active' and 'Referred to Another Agency for Resolution'.

241 (41.9%) complaint issues were resolved in 'Less than 15 Working Days', 157 (27.3%) complaint issues were resolved 'Within 30 Working Days' and 79 (13.7%) of complaint issues were resolved 'Greater than 30 Working Days'. 84 (14.6%) complaint issues were 'Still Active' at the end of 30 June 2004 and only 14 (2.4%) complaint issues needed to be referred to another agency such as the Office of Health Review) for resolution.

Figure 23 shows the proportion of complaint issues resolved within each designated response time.

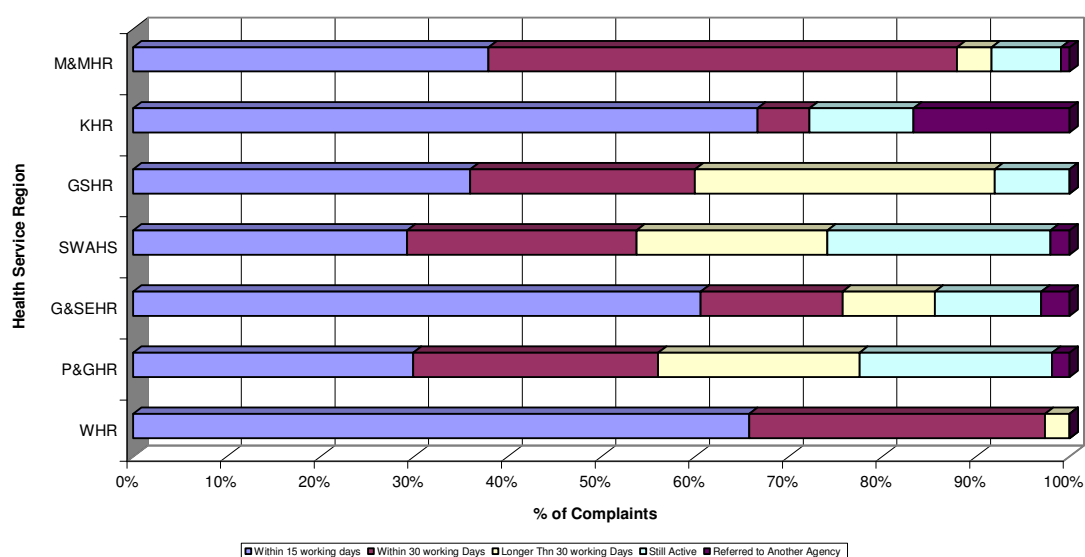


FIGURE 23: Breakdown of time taken by Health Services to resolve complaint issues in 2003-2004

Conclusions

In financial year 2003-2004, the total number of complaint issues received by Country Health Services in WA was 77. The top three complaint categories that contributed the highest number of complaint issues were 'Access' (n=201, 25.9%); 'Quality of Care' (n=157, 20.2%); and 'Communication' (n=132, 17%). 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.

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.