

## Position statement

### Managing Complaints

#### Preamble

Closed claims from medical indemnity organisations confirm that patients expect explanations when they perceive that an adverse event has occurred. Failure to communicate effectively may lead to frustration, anger and an increased likelihood of litigation. The following guidelines are offered to assist members to communicate effectively with their patients and mitigate their patient's concerns.

For advice on resolving fee complaints see the ASA Economic Advisory 03, Responding to a Complaint Regarding Professional Fees.

The relevant medical indemnifier should be notified immediately of any complaints regarding professional services. They may offer further advice.

#### Steps in managing a complaint

1. Accept that the majority of complaints are genuine from the outset. Treat the complaint seriously. It takes more effort and time to make a complaint than not. All complainants want to be heard. People may complain because:
  - a. They want to know what occurred;
  - b. They want an apology or expression of regret for any distress experienced;
  - c. They do not want to see other people facing a similar problem;
  - d. They want to improve the service for themselves or others in the future;
  - e. They want to see a demonstration of accountability.
2. Acknowledge the complaint immediately in an empathetic manner, demonstrating that the concerns have been understood and will be investigated. Establish and advise the process and time line for the response to the complaint. An apology is not an admission of guilt and can be offered from the outset.
3. Develop a standard 'template' to address the complaint. While each complaint is likely to be different, having a process that is simple and familiar to practice staff will limit any escalation. The system should use practical mechanisms by which the complaints are welcomed, received, investigated, documented, resolved and recorded.
4. Assure the patient that their complaint will be dealt without prejudice.
5. Wherever possible resolve the complaint directly with those involved. Utilizing communication skills of asking open ended questions, listening, reflecting on the person's perceptions and understandings and offering an explanation of any misunderstandings may be useful. Allow the complainant to tell their story and avoid interrupting them.
6. If the issue is resolved with initial discussions, confirm the agreed resolution plan in writing.

7. If a resolution is not achievable at this point decide on a strategy to reach a resolution in the near future. Factors to consider include:
  - a. The vulnerability of the patient given their health and the circumstances;
  - b. Potential misinformation from a third party;
  - c. The significance of the matter;
  - d. The ongoing potential impact on all stakeholders;
  - e. Consult a colleague or professional organisation for advice and support.
8. The response to the complaint should be detailed and comprehensive. Avoid:
  - Being dismissive or defensive;
  - Leaving the matter solely to staff to resolve;
  - Releasing information to unauthorised parties.
9. When the complaint has been resolved to the person's satisfaction, provide a written response. The response should include an explanation of the investigation process and acknowledgment of all the areas of disagreement or varying points of view. Include:
  - What happened?
  - How it happened?
  - What actions have been taken to ensure the issue does not happen again?
  - An apology or expression of regret for the issue that occurred as appropriate.

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