

Health Consumers Queensland

... your voice in health

Mr Trevor Ruthenburg MP
Chair
Health and Community Services Committee
Parliament House
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Dear Committee

Health Ombudsman Bill 2013

Health Consumers Queensland appreciates the opportunity to provide feedback on the *Health Ombudsman Bill 2013*.

About Health Consumers Queensland

Health Consumers Queensland's (HCQ) mission is to support the voices of Queensland consumers to achieve better health outcomes. HCQ aims to strengthen the consumer perspective in health policy development and system reform and development. HCQ believes consumers should be central to all decisions that impact on their health care options and advocates for consumer involvement in health policy, planning and service delivery at local, state and national levels.

HCQ defines consumers as people who use, or are potential users, of health services including their family and carers. Consumers may participate as individuals, groups, organisations of consumers, consumer representatives or communities. The Carers (Recognition) Act 2008 in Queensland defines a carer as an individual who provides, in a non-contractual and unpaid capacity, ongoing care or assistance to another person who, because of disability, frailty, chronic illness or pain, requires assistance with everyday tasks.

Health Consumers Queensland's Response

It is critical that the Complaints system be designed with the consumer in mind. There should be a single access point for complaints. Managing complaints through a single health complaints entity would enable improved communication with both the complainant and the healthcare provider. Consumers and the provider should be fully informed about the process, possible timeline and outcome and kept informed of progress throughout the process.

Its important that the complaints management system be transparent whilst respecting the confidentiality of those involved. We understand that the current complaint process which involves both HQCC and AHPRA has resulted in lengthy delays resulting in the complainant becoming even more frustrated and stressed.

Nevertheless HCQ recognises that there is an inherent tension between resolving complaints within deadlines and ensuring appropriate consumer outcomes. Sometimes because of the complexity of the complaint it is not easy to produce an outcome within a definite period. Provided all parties have the ability to track and monitor progress of their complaint this should alleviate some of the current concerns.

There are five elements of effective complaint handling:

1. **Culture:** Complaints should be viewed in a positive light and as a tool to identify issues with an individual and/ or the system and to enable remedial action to be undertaken to prevent similar harm to consumers in the future;
2. **Principles:** an effective complaint handling system must be modelled on the principles of fairness, accessibility, responsiveness, efficiency and integration;
3. **People:** complaint handling staff must be skilled and professional;
4. **Process:** the seven stages of complaint handling - acknowledgement, assessment, planning, investigation, response, review and consideration of systemic issues - should be clearly outlined; and
5. **Analysis:** information about complaints should be examined as part of a continuous process of review and improvement.

A strong complaint handling system is built on all five elements.

Health Consumers Queensland (HCQ) supports the main objects of the Act:

- to protect the health and safety of the public;
- to promote professional, safe and competent practice by health practitioners;
- to promote high standards of service delivery by health service organisations: and
- to maintain public confidence in the management of complaints and other matters relating to the provision of health services.

HCQ would further recommend the inclusion of *oversight and review of, and improvement in, the quality of health services*, as is currently in the HQCC Act.

An important part of the HQCC's work in recent years has been the recommendations for healthcare safety and quality improvements. Consumers have had the opportunity to feed into this through the HQCC's Consumer Advisory Committee.

HCQ believes the Bill is inadequate in ensuring that experienced consumer and clinical advice be sought to inform the Ombudsman's decision making. The Bill implies that this will be at the discretion of the Ombudsman. A strength of the current HQCC has been that the importance of consumers have been recognised through the appointment of an Assistant Commissioner Consumers and a Consumer Advisory Group.

HCQ also believes that the Health Ombudsman must be statutory officer, independent from the Minister, reporting directly to Parliament. The wording in sections 18, 27 and 28 appear to be contradictory and may lead to confusion.

Please do not hesitate to contact our office to discuss our response to this important Bill.

Yours sincerely

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Chair
Health Consumers Queensland

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