

1. Policy

It is the aim of the Waiheke Health Trust to provide services which are of the highest standard, and that are responsive to the needs and circumstances of individual consumers. This complaints process will help to maintain and improve standards and services. Service users will be informed of this policy via publication on the website and in reception.

2. Scope

All recipients of Waiheke Health Trust services.

3. Responsibility

The Board is responsible for evaluating and responding appropriately to complaints that are elevated to them from the CEO.

The CEO is responsible for ensuring that this policy is implemented and maintained, and for elevating complaints to the Board as appropriate.

Staff, contractors, students, and volunteers have responsibility for receiving complaints in the first instance, providing appropriate explanations and reassurances as they are able, and assisting people through the complaints process as required.

4. Standards

Code of Health and Disability Services Consumers’ Rights:


- (1) Every consumer has the right to complain about a provider in any form appropriate to the consumer.
- (2) Every consumer may make a complaint to –
 - (a) the individual or individuals who provided the services complained of; and
 - (b) any person authorised to receive complaints about that provider; and
 - (c) any other appropriate person, including-
 - (i) an independent advocate provided under the Health and Disability commissioner Act 1994; and
 - (ii) the Health and Disability Commissioner.

Nga Paerewa Health and Disability Services Standard NZS8134:2021:

“My right to make a complaint shall be understood, respected, and upheld by my service provider. I shall be informed about and have easy access to a fair and responsive complaints process that is sensitive to, and respects, my values and beliefs. My complaint shall be addressed and resolved in accordance with the Code of Health and Disability Services Consumers’ Rights. I am informed of the findings of my complaint.”

5. Procedure

- 1. Service users and/or their representatives should be encouraged to discuss concerns regarding their clinical care with the person responsible for their care in the first instance. When people express concerns directly to the providers involved with their care they are to be listened to sensitively, being treated as active partners in improving our service, and


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- given appropriate explanations and reassurances. People will be advised where to direct their complaint if their concern is regarding a third-party provider, funder, or other agency.
2. If the person is dissatisfied with the explanation given, or if they prefer, they should be encouraged to write, phone or email the CEO regarding their concern without any obligation to lay a formal complaint. People should be advised that they can be supported by a Health and Disability Commission (0800 555 050) or other advocate. Interpreters may be required, and it may be appropriate for cultural or other support persons to assist the complainant. A service user and/or their representative may choose to make a complaint on a confidential basis or anonymously and should be assured that their identity will be protected.
 3. Any staff, contractors, students, volunteers or board members receiving a formal complaint are to pass it on to the CEO (or the Board Chair in their absence) prior to the end of the day in which it was received.
 4. Formal complaints will be responded to and reported on in accordance with the Code of Health and Disability Services Consumers' Rights time frames.
 5. All formal complaints and the complaints investigation are to be documented on the Incident Form and recorded on the Incident, Complaints, Compliments Summary register. Complaints against identified provider(s) are to be made known to the provider(s) concerned by the CEO at the commencement of their next working day. The CEO will notify the Board Chairperson as soon as possible where the complaint may potentially involve legal or other risk to the business of the Trust.
 6. Where a formal complaint is made regarding a specific Waiheke Health Trust provider or providers, arrangements will be made for continuation of essential services by an alternative Waiheke Health Trust provider where possible, or if necessary, redirection to an alternative service while the matter is being resolved.
 7. Complaint investigation must be driven by fact and established circumstances, rather than assumptions. If complaint investigation cannot be completed due to compromised impartiality or the need for additional expertise, the CEO will advise the Board, who will arrange for the investigation to be carried out by a third party.
 8. Complaint updates, including any reason for delay, will be reported in writing to the service user and/or their representative in a timely manner.
 9. Complaint outcomes will be communicated in writing. The response will inform the complainant of the reasons for any identified failure in the service and steps taken to prevent a recurrence. The response should contain an apology where appropriate. Where necessary a translation will be provided.
 10. Complaints involving a breach of the Health and Disability Service Consumer's Rights can be escalated to the Health and Disability Commissioner if the complainant is not satisfied with the complaint outcome. Complaints regarding privacy may be escalated to the Privacy Commissioner. Complaints regarding health practitioner competence may be escalated to the relevant registration board.

6. Related Documents:

Code of Health and Disability Services Consumers' Rights
 Nga Paerewa Health and Disability Services Standard NZS8134:2021
 Health Practitioners Competence Assurance Act 2003
 Incident Form
 Incident, Complaints, Compliments Summary register

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