

Working together to improve the consumer healthcare complaints experience

Final report

August 2024

Project overview

The problem p4

How can we help improve the consumer health complaints experience?

Ahpra and the Commission wanted to get a better understanding of the barriers that consumers face when making a healthcare complaint. We wanted to discover what our organisations can do to support consumers.



What we heard p7

- There is a huge weight of responsibility that rests on the consumer to understand how the system works.
- Consumers want a streamlined, consistent process that is focused on their needs rather than the system's structures.
- System complexity is a challenge for both consumers and health providers.
- There are barriers to providing feedback or making a complaint.



The project p6

- Investigate the problem.
- Engage with consumer and professional groups.
- Consult people with lived experience.

What we found p10

- It is important to promote making a complaint with the health provider as a first step as this is often the quickest and easiest way for a concern to be resolved.
- Clearer, simpler guidance about the health complaints system is needed.
- To improve health complaints management, better support, information and resources are needed for consumers and practitioners.

What we've done p11

- Updated information on the Ahpra website about [how to raise a concern about a practitioner](#).
- Developed [three animations](#) to give clear information to the public about how and where to make a health complaint.
- Developed a [checklist for practitioners handling feedback and complaints](#).



What's next? p13

Evaluation and ongoing work for the Commission and Ahpra and the National Boards

Appendix p14

Who we spoke to

About us

The [Australian Health Practitioner Regulation Agency](#) (Ahpra) works with the [15 National Boards](#) to help protect the public by regulating registered health practitioners. We work to ensure the community has access to a safe, capable and respectful health workforce across the 16 professions registered under the National Registration and Accreditation Scheme. Ahpra's role includes managing safety concerns (called 'notifications') raised about registered health practitioners, students and unregistered people claiming to be health practitioners.

The [Australian Commission on Safety and Quality in Health Care](#) (the Commission) works to contribute to better health outcomes and experiences for all patients and consumers, and improved value and sustainability in the health system by leading and coordinating national improvements in the safety and quality of healthcare. The Commission provides guidance and information about consumers' healthcare rights, as outlined in the [Australian Charter of Healthcare Rights](#), which includes a consumer's right to provide feedback or make a complaint. The Commission also develops and maintains national safety and quality standards, which include specific actions on feedback and complaints-handling processes for healthcare services.

In 2021, Ahpra and the Commission began a project to better understand the experience consumers have when making a complaint or raising a concern. We wanted to identify what further actions we can take to support consumers and to support practitioners managing complaints. We initiated this work together because we are both agencies working across the health system with governance frameworks that support consultation with all jurisdictions in Australia.

Terms we use

Complaint

While Ahpra is a regulator not a complaints organisation, we use the term 'complaint' broadly in this report to refer to any type of complaint or concern or notification raised by a healthcare consumer. This is because we heard from consumers that this is the terminology that makes the most sense to them, and when they have a complaint about their healthcare they just want to know where to go (rather than learn the different terminology used by organisations).

Consumer

A person who has used or may use health services, or who is a carer for a person using health services.

Healthcare provider (also health practitioner or healthcare worker)

An individual who practises a profession relating to the provision of healthcare. Healthcare providers may be required to be registered with a National Board under the National Registration and Accreditation Scheme or may be self-regulated, depending on their profession. A healthcare provider may also be referred to as a health practitioner or clinician, or by a profession-specific description such as doctor or dentist.

Healthcare service

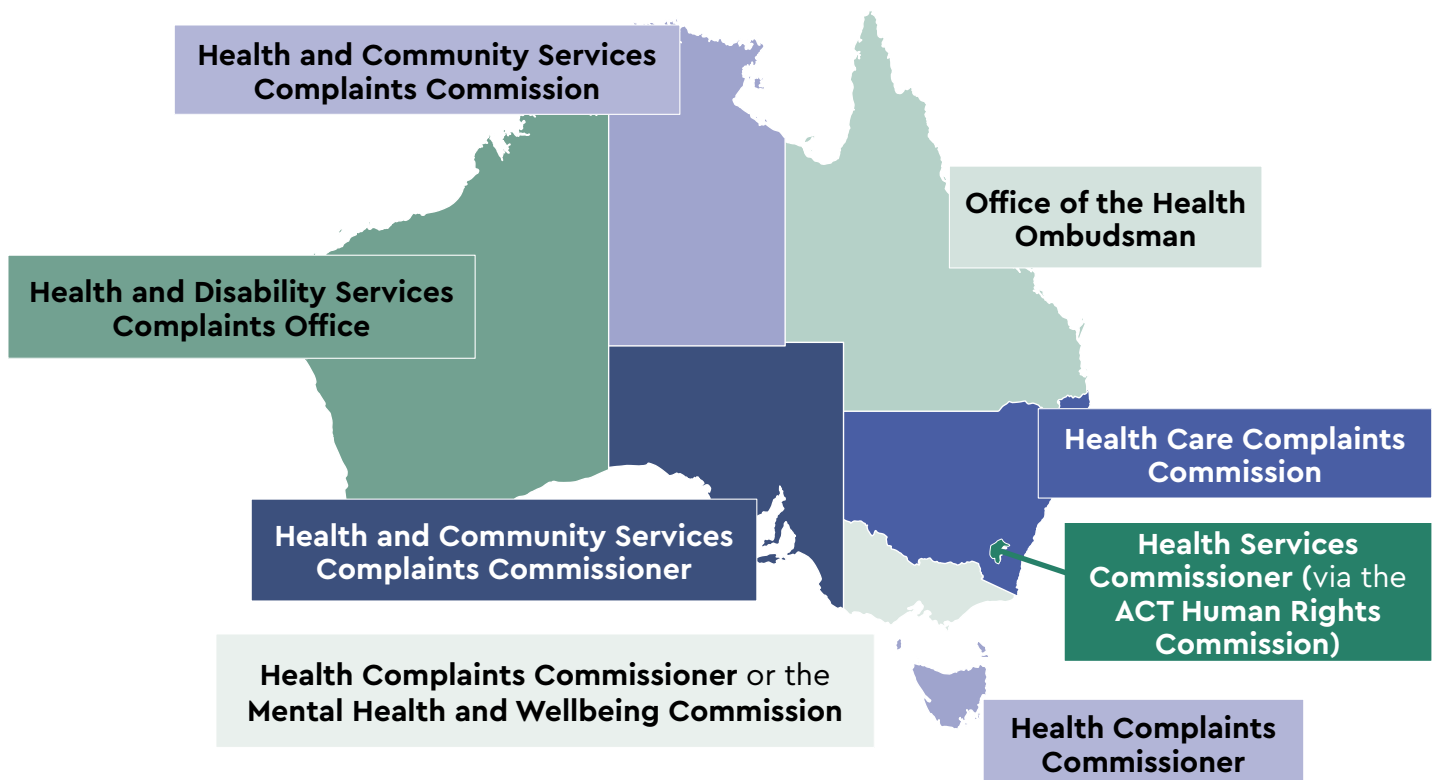
An organisation that provides healthcare to patients, such as a pharmacy, clinic, outpatient facility, hospital, community healthcare practice or clinicians' rooms.

Why did we start this project?

Consumers who have concerns about their healthcare have a range of places to make a health complaint. However, comparing these options can be challenging, and identifying the best place for making a complaint is not always clear.

Finding the best place to raise a concern can depend on the state or territory the practitioner works in, what the concern is about, what type of health practitioner they are (for example, a doctor or a dietitian) and even the type of care provided (for example, aged care or disability services). The map below shows some of the national, state and territory organisations where health complaints can be made.

State/territory organisations



There are also state-based organisations that handle complaints about disability services.

National organisations

Aged Care Quality and Safety Commission – complaints about aged care

National Disability Insurance Scheme – complaints about disability services

Ahpra and National Boards – safety concerns about registered health practitioners

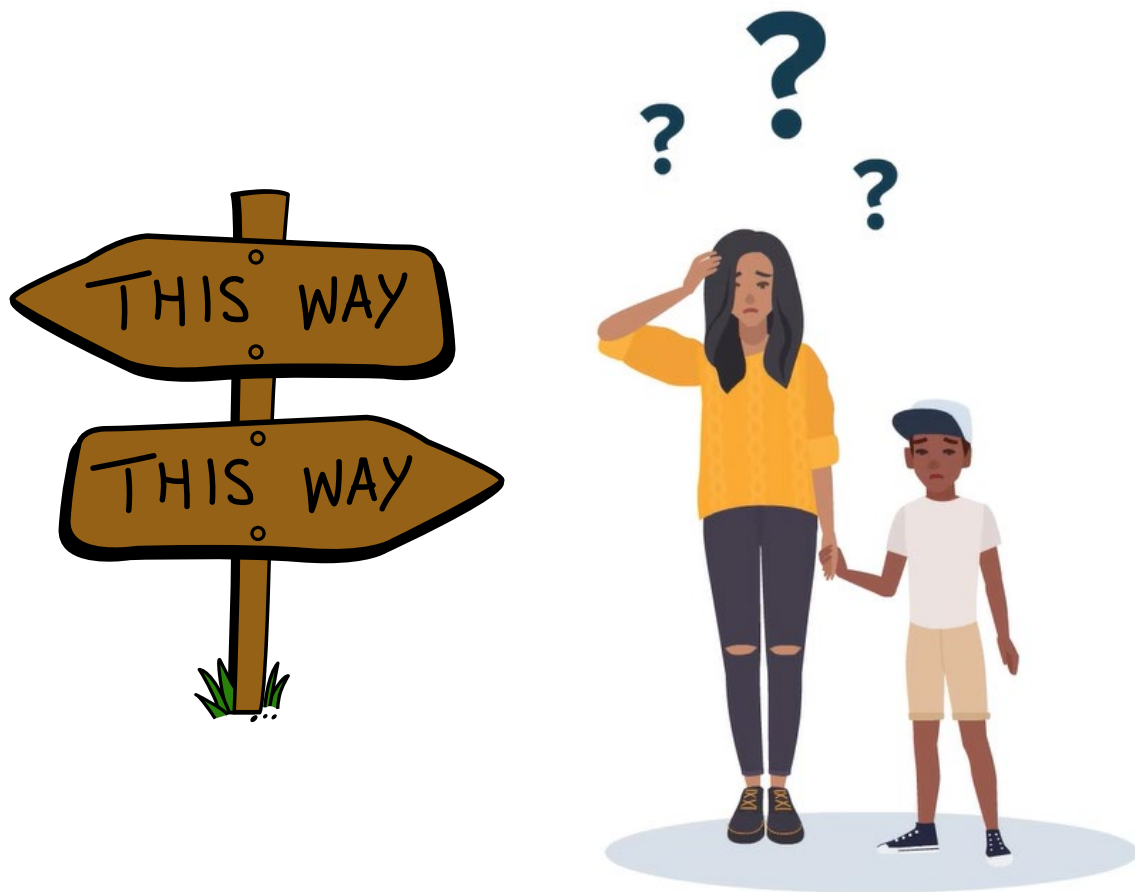
This project responds to feedback provided to Ahpra from consumers who were dissatisfied with the health complaints system. Reasons for the dissatisfaction include:

- difficulty working out where to make a complaint
- long timeframes for resolution
- ending up in the wrong place to get their desired outcome (e.g. an apology or refund)
- being unhappy with the outcome.

Ahpra data from an internal 2017/18 study found that being in the 'wrong place' is probably the single biggest dissatisfaction among people who raised a concern, and that more support was needed to help consumers find the right place for the nature of their concern and to achieve the outcome they were hoping for.

Feedback to Ahpra indicates that a consumer's overall experience of the health complaints system will be heavily influenced by the final outcome of their complaint. When they are unhappy with the outcome they are nearly always unhappy with the management.

A deeper understanding of the consumer experience of the broader health complaint system is needed to help identify ways it can be improved.



Project process

Project governance

In 2021 a reference group was established to provide advice and guidance on the planned work, including the joint project approach between Ahpra and the Commission, stakeholder engagement and potential areas of focus for each organisation. With Ahpra and the Commission as co-chairs, the reference group brought together voices from the consumer and health profession perspectives, and included representation from health consumer organisations, Ahpra's [Community Advisory Council](#) and [Aboriginal and Torres Strait Islander Health Strategy Group](#), health profession associations and the National Boards.

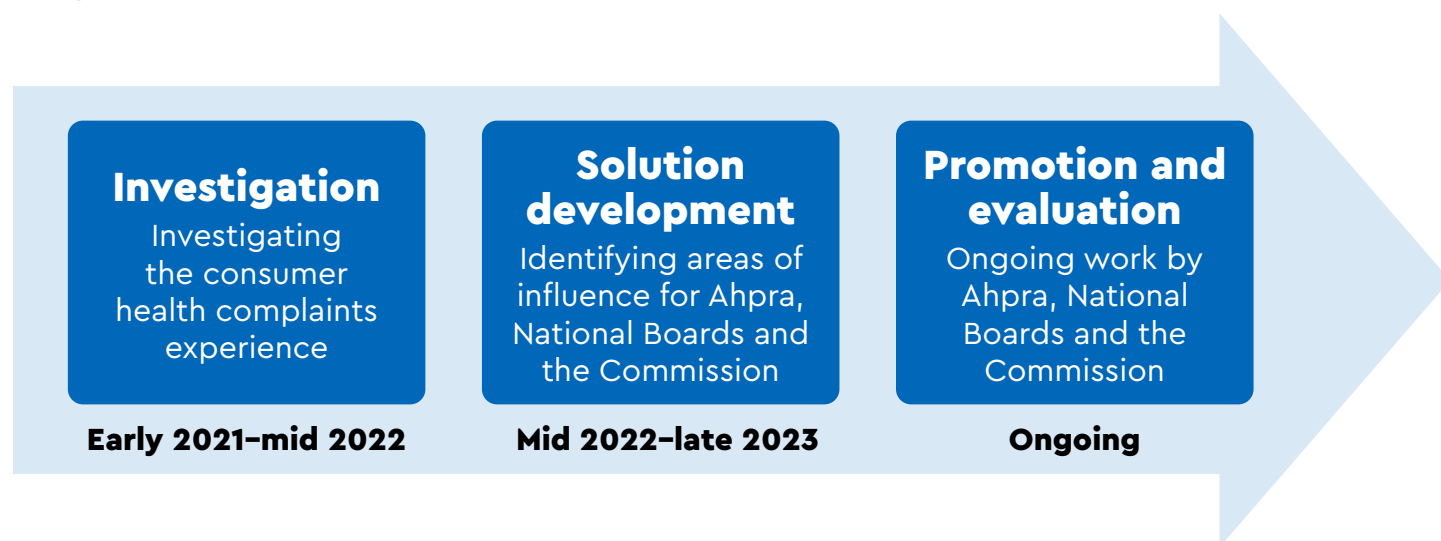
The [terms of reference](#) and a project [communiqué](#) are published on the Ahpra website.

The reference group met online 11 times since July 2021, with the consumer representatives of the group also convening out of session to provide additional guidance on direction and approach.

Recognising that Ahpra is only one of many organisations that manage concerns raised by healthcare consumers, the project team also regularly engaged with health complaints organisations in each state and territory.

The project was supported by a project review team made up of staff from Ahpra and the Commission.

Project phases and timeline



Consultation

The early phase of work involved listening to consumers, service providers and key stakeholders about their experiences with healthcare complaints. As the project progressed, engagement with these groups focused on testing our understanding of the issues, exploring what resources Ahpra and the Commission could develop to improve understanding and experience, and testing the resources as they were being developed.

A full list of stakeholders consulted during the project is in the Appendix.

What we heard

From consumers and organisations that work with consumers

In 2021, the project team engaged with state and territory peak consumer health organisations as well as the Consumers Health Forum of Australia to better understand the consumer experience and challenges in making healthcare complaints. The consultation explored health complaints pathways, potential problems and what is working well, and aimed to identify areas that could be improved by either the Commission or Ahpra. This early work also included desktop research to identify the results of previous consumer consultations relating to healthcare complaints from different states and territories.

To further understand the experiences of consumers, the Commission consulted with people who have lived experience of making a healthcare complaint. This included exploring information or resources that would have been helpful to them during their complaints process.

Below are quotes and outcomes of the consultation with consumers and consumer organisations. Some of the issues that were raised were beyond the scope of this project, but it is still important that they are highlighted.

Clearer pathways and information

Consumers want a system that is easier to navigate and consistent between healthcare service sites, providing more visible, clear information and opportunities to give feedback or make complaints. This includes enabling communication from patients and families through multiple modes, including face-to-face, by phone or through written options such as email. They also called for more support for those giving feedback, including independent support and advocacy. Consumers sought a more personalised and caring response to their feedback or complaints. They also wanted state-by-state information to be available on how to make a complaint.

'Some GPs have posters but they are mainly about feedback, which can be very different to complaints. There were no guides on what the process was or how to lodge a complaint – what information to include or how to structure the complaint.'

'There were some flyers somewhere and someone got one for you. Really vague and didn't really talk about the process except send an email to this address.'

Closing the feedback loop

Consumers raised dissatisfaction or frustration with a lack of adequate closure of a complaint they have made. It would be helpful to provide clear guidelines about what consumers should expect and to train complaints staff so that they have a better understanding of their responsibilities towards consumers.

'What I wanted to achieve was learning and recognition that the service had a problem so they could understand the consequences on patients and families.'

Experiences of racism

Aboriginal and Torres Strait Islander consumers in particular noted experiences of racism within the healthcare system, which affected their willingness and approach to providing feedback or making complaints. To support them in making complaints and to address racism, they recommended there be an Aboriginal and Torres Strait Islander complaints officer position in each health service.

'Ensuring that the consumer has the right resources if First Nations, should be First Nations specific... Ask if they need a First Nations person to take over instead. It should be an option.'

Better workforce education and training

Consumers felt that healthcare workers need better education on how to manage complaints. They should be provided with resources to guide their response when a complaint is directed to them or their department by a consumer. In addition, processes should be implemented to support culturally safe and trauma-informed responses to help consumers feel more supported and ensure staff are better prepared. Providing feedback and making complaints can often be an emotional experience for the consumer.

'There is a cultural problem where health staff see complaints and complainers as serial whingers and non-serious.'

'What's needed is organisational culture change through training and provision of a response toolkit for complaints handling by departments/staff.'

Desire for an improved system

Consumers believed that current feedback and complaint mechanisms don't match the system's complexity. They wanted a streamlined, consistent process that focused on their needs rather than the system's organisational structures. They wanted greater accountability through external reviews of complaints and assurance that feedback leads to positive action and change. Consumers expressed the need for an improved health complaints system built on openness and transparency.

'It feels like the hierarchy and bureaucracy is there to protect the organisation. How open are they to feedback and what comes from that, what changes are made, what actions happen?'

'For people who don't have the skills and understanding of the system it's not an easy process to make a complaint. It needs to be made easier to access and understand the process.'

Barriers to providing feedback

Consumers encountered various barriers when attempting to disclose dissatisfaction with a health practitioner or health service. These barriers included difficulties accessing the health system and finding information about how to give feedback or make a complaint, a lack of empowerment, impersonal and unhelpful responses to their feedback, and the emotional toll associated with providing feedback or making a complaint. Certain population groups, including older people, Aboriginal and Torres Strait Islander Peoples and culturally and linguistically diverse people, are less likely to complain due to these barriers.

'You need to support traumatised people. A lot of people don't make complaints because they don't have the emotional ability to do it.'

'For culturally and linguistically diverse communities it's not easy to muster up the courage to make a complaint.'

More consumer-centred resources

Consumers identified a need for more consumer-friendly, accessible tools and resources to inform and educate them about the complaints processes. These resources should guide consumers through each stage of making a complaint, helping to ensure that their complaints are accepted and acted upon by healthcare services.

'We need to know the steps, how to get support through making the complaint and the next steps to resolution.'

'In hindsight I should have taken someone to the meeting with the staff as I didn't respond to it professionally. Someone there to support me would have made it more balanced.'

'An actual human being in the hospital who you can go to and ask, can you listen to me, can you give me some advice and some help. Make me feel listened to and human.'

What we heard

From professional organisations and practitioners

The project team investigated the practitioner experience of consumer health complaints to understand how complaints are being managed at the local level (directly with the health provider) and what the current referral pathways are to a health complaints organisation or regulator.

In 2021, we began targeted consultation with professional and practice management associations, insurers and specialist medical colleges, taking the first step in exploring the professional experience. In mid to late 2022, when the project team was developing resources to address the feedback received, we conducted further consultation with these organisations as well as with individual practitioners and GP accreditation organisations.

Managing complaints can be stressful

For health practitioners involved in a complaints process there can be a stigma about being the subject of a complaint as well as mental health challenges. Negative feedback or a complaint can be confronting and stressful for health practitioners.

'A lot of stigma around complaints that cause negative connotations for members.'

Particular challenges were noted for practitioners in rural and remote areas.

'The additional mental health impacts of professional isolation over and above the stress inherent in any complaints process should be viewed as of utmost importance when addressing complaints in rural and remote communities.'

Lack of resources and education about complaints management

Availability of resources about complaints handling varies among professions and workplaces. Health practitioners based in publicly run services or hospitals will often have access to organisational processes, guidance or other resources about complaints management. Among practitioners working in private practice, larger professions such as medical practitioners have access to a greater range of published guidance through their professional associations and indemnity insurers, whereas smaller professions may have fewer external resources available to them.

'Members may not be aware or have adequate information about complaint management steps.'

Inadequate complaints processes at the health provider level

Health practitioners often do not understand complaints management well enough to support effective resolution of concerns raised directly with them or their employer. Some complaints go straight to Ahpra or a health complaints organisation, rather than the health practitioner or health service, which prevents a practitioner from resolving the concern locally.

System complexity is also a challenge for health providers

The health complaints landscape is confusing for health practitioners, especially in the co-regulation states, New South Wales and Queensland, where a matter might be dealt with by Ahpra or the state-based regulator. A further complication is the different responsibilities of Ahpra and state and territory health complaints organisations. Many practitioners feel they don't have enough knowledge about the complaint options to advise the public effectively about where to raise a concern. There was recognition that guidance should be customised for each jurisdiction.

Key findings

There is opportunity to improve the health complaints experience at the local (health service) level and at the wider (system) level.

Many consumers consider that independent advocacy support services are needed to help them understand where and how to make a complaint.

Consumers need clearer guidance about how to make a complaint.

Targeted guidance for the location (e.g. state) or type of complaint is most helpful.

Clearer information about complaints pathways will also help health providers manage complaints and provide advice to consumers about the complaints system.

Health providers managing complaints need more support and resources about complaints management (especially smaller practices and solo practitioners).

Guidance for health providers managing complaints could support a shift in organisational culture from a defensive approach to viewing complaints as opportunities for quality improvement.

The findings highlighted several areas that Ahpra and the Commission can influence to improve the consumer experience of making a complaint. This includes using consistent language and information across both organisations' websites and resources, as well as further education and guidance to support strengthening the complaints culture and complaints handling processes at the local (health provider) level.

What we heard from consumers and professional organisations also identified several areas for work that are not within our organisations' remits. These included options for investment in independent advocacy; legislated changes in complaints systems to make processes simpler for consumers; and the need for consistent, standardised national processes for health complaints.

What we've done

1. Checklist for health practitioners managing complaints

What we heard

For many health practitioners, particularly those in smaller practices, additional guidance about complaints management is needed at the local (health provider) level.

What we did

We developed a [Checklist for practitioners handling feedback and complaints](#).

Development of the checklist began in 2022 in response to feedback that a resource for health practitioners is needed to help them effectively manage the complaints they receive. We recognise that early resolution of a complaint when it is made directly to a practitioner or health service is often the quickest and easiest way to manage such a complaint, and may lead to better outcomes for consumers and practitioners. The checklist was developed in consultation with practitioners, consumers and professional stakeholders.

We know that receiving negative feedback and complaints can be stressful for health practitioners, so at the start of the checklist we provided links to support services for health practitioners.



2. Video animation for consumers

What we heard

Consumers wanted new resources that provide step-by-step guidance on the process of making a healthcare complaint.

What we did

We developed a video series for consumers that provides practical guidance and tips about the process of making a health complaint in Australia.

Consultation with consumers with lived experience and input from a wide range of stakeholders formed the basis for the content and format of the resources. As a result, we developed three easy-to-understand, concise and visually engaging [video animations](#) that provide consumers with information about the process of making a health complaint. The videos cover where to start, practical advice and tips, and what the consumer can do if they are not satisfied with the response from the healthcare service. We chose to make video animations based on consumer feedback and to provide a more accessible format to people with lower levels of health literacy or with disability.

The animations will be provided to key stakeholders for promotion as well as being promoted through both the Commission and Ahpra communication channels, social media, and a range of e-newsletters with extensive reach across the healthcare sector.



3. Clearer messaging about complaints pathways

What we heard

Consumers and health providers need clearer guidance about and through complaints pathways.

What we did

We improved the information about complaints options on the Ahpra and Commission websites.

The Ahpra website was a main focus given that a key audience for the site is consumers who have a concern about their healthcare. In late 2023, Ahpra's [Raise a concern](#) page was launched. It applied key lessons from the project including to encourage consumers to provide feedback and complaints directly to the health practitioner or health service in the first instance as this is often the quickest and easiest way to have concerns resolved. Information about where and how to make a complaint was made simpler and easier to find. The availability of personal navigation to help people through the process was promoted through greater visibility of the Ahpra telephone number and message that it is okay to call for help.

The new page underwent consumer testing before its launch and further testing is planned. When we promote the checklist and animation resources to stakeholders, we will also highlight the updated websites to those who also publish information about complaints pathways (such as professional organisations and government agencies).

Another area that was highlighted during the course of this project was the need to improve the Commission's website to provide information for consumers. A [new webpage](#) was published to provide information about making healthcare complaints, show the animations and provide links to additional resources and contact details for health complaints organisations.



What we are doing next

Evaluation

Our evaluation involves a mix of approaches, including analytics from the resources developed and ongoing engagement with key stakeholders to monitor the use and reach of each resource. Ahpra and the Commission will coordinate evaluation through existing regular engagement, and have planned for targeted evaluation activities at six and 12 months post implementation.

Data, analytics and processes that will support evaluation include several sources from Ahpra and Commission work that are broader and not part of this project including:

- Ahpra notifications data for any changes in referral trends
- data from Ahpra's customer service team and post-notification survey responses about complaints navigation
- website traffic to new resources and links to other complaints organisations
- qualitative assessment of feedback from health consumer peak organisations at biannual meetings with the Commission
- monitoring of the National Safety and Quality Health Service (NSQHS) Standards and Primary and Community Healthcare Standards accreditation data relating to actions with health complaints requirements.

There is potential to explore issues in Ahpra sentiment research which seeks feedback from both the public and practitioners in two separate surveys. In consultation with health complaints organisations we have agreed that it will be useful to review the checklist for practitioners managing complaints at 12 months to refine the tool with the benefit of user feedback. Engagement with health complaints organisations at six and 12 months post full implementation is also planned to assess any trends or changes in issues being raised by consumers.

Ongoing work for Ahpra and the National Boards

Building on the work in this project, in 2024 Ahpra will continue to make improvements to its website and consumer resources. In some states and territories, work is being explored to develop a targeted local resource about complaints options. Ahpra has a broad program of work underway to update its website content and consumer resources including exploring the best approach to translating messages into Easy English, Auslan and other key languages.

Ahpra will continue to promote good practice resources for managing complaints, such as the checklist, to practitioners and professional stakeholders. Opportunities for educating practitioners about complaints management will also be explored, including working with interested professional organisations to explore opportunities to reinforce the value of continuing professional development (CPD) for complaints management.

Ahpra will continue in its commitment to eliminating racism, discrimination and bias in healthcare. [Cultural safety for Aboriginal and Torres Strait Islander Peoples](#) is a commitment of the National Scheme and enshrined in National Law as of October 2022.

Ahpra will also build on what it learnt in this project in its patient safety work, including in its action plan to better protect patients from sexual misconduct in healthcare.

Ongoing work for the Commission

The Commission recognises that consumers felt there was a need to improve current complaints processes and is investigating ways to strengthen complaints processes at the local level. The Commission is consulting with jurisdictions about further guidance for health services on best practice management for healthcare complaints.

The Commission will use the findings from this project to inform the upcoming revision of the NSQHS Standards and improve the information and training available for assessors to support accreditation of the health complaint actions in the NSQHS Standards.

Appendix: Stakeholders we consulted

Consumers and organisations that work with consumers

Consumer representatives on the reference group

Consumers with lived experience of making a complaint

The Commission's Partnering with Consumers Advisory Group

National, state and territory consumer peak organisations

Ahpra's Community Advisory Council

Healthcare Complaints Commissioners

Professional organisations and practitioners

Health profession associations

Practice management associations

Professional indemnity insurers

GP accreditation organisations

Individual health practitioners

Specialist professional colleges

Working together to improve the consumer healthcare complaints experience

A project of the Australian Commission on Safety and Quality in Health Care and the Australian Health Practitioner Regulation Agency

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We acknowledge the Traditional Owners of Country throughout Australia and their continuing connection to lands, waters and communities. We pay our respect to Aboriginal and Torres Strait Islander cultures and Elders past and present.