

A quick guide to complaints



MPS



Putting members **first**

Advice correct as of September 2016

Overview

- Be aware that a complaint can be raised verbally or in writing. If received verbally the discussion should be recorded in writing and agreed with the complainant.
- Check who is making the complaint – if it is not the patient, make sure you have consent to contain the patient's health information in your response, or that consent is not required in the circumstances.
- Aim to do a coordinated response in multi-doctor/ multi-agency complaints.

What to Do

- Acknowledge the complaint within five working days; offer to discuss with the complainant how the complaint will be handled.
- Undertake your investigation into the complaint.
- Draw up a written response to the complaint.
- You should respond as soon as practicable. At 10 working days following acknowledgement of the complaint you should either have responded, or considered how much more time you will require. If the additional time required is 20 working days or more then you must notify the complainant of the reasons for this.

Written Responses

- Be mindful when preparing your response that it may be read by more than the complainant, for example passed on to authorities such as the Health & Disability Commissioner.
- Include a sympathetic opening paragraph placing the complaint in context.
- Include an apology and acknowledgement of distress (condolences) if appropriate.
- Explain how the matter has been investigated and summarise the issues raised in the complaint.

- Make sure you include a clear chronological account of the events in question, with an explanation of what happened and why.
- Answer all the questions raised in the complaint or explain why you cannot answer a point.
- Draw conclusions and advise of any improvements or change in practice that have been made as a result.
- Offer an invitation to meet or to provide further information.
- Provide details of the Independent advocates provided under the Health and Disability Commissioner Act, and the Office of the Health and Disability Commissioner.

How Medical Protection Can Help

Complaints are unpleasant for all concerned and can be very time-consuming. Medical Protection assists members in responding appropriately to a complaint with the aim of resolving the matter quickly, effectively and at the lowest level possible.

Our experienced team of advisers can advise on how to handle a difficult complaint and/or review your draft written response. If you would like further Medical Protection assistance it would speed up our advice to you if you could please forward the following information to us:

- Copies of all the relevant complaint documentation to date
- Any relevant background information, including the dates on which you interacted with the patient/s (if relevant)
- A draft of your response to the current complaint
- Details of where and how you would like us to reply (including telephone/fax numbers, email addresses etc)
- Whether the complaint can be discussed with anyone in your absence?

Note: Members should ensure that all information sent to Medical Protection is sent in a secure manner. Please do not send in any patient notes at this stage; Medical Protection will advise if these are required.

Contact Us

Email the above required information to:
advice@mps.org.nz or fax to 0800 677 329.

For medicolegal advice please call us on:

0800 2255 677 (0800 CALL MPS)

Overseas: +64 4 909 7190

or email us at: advice@mps.org.nz

Membership enquiries

T 0800 2255 677 (0800 CALL MPS) – toll free within New Zealand

E membership@mps.org.nz

This factsheet provides only a general overview of the topic and should not be relied upon as definitive guidance. If you are an MPS member, and you are facing an ethical or legal dilemma, call and ask to speak to a medicolegal adviser, who will give you specific advice.

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