



Estelle Borer BHSc(OT), MNZAOT
Director & Occupational Therapist
Mob: 027 533 4885
Email: estelle@srs ltd.co.nz

Sharon Wilson Dip PT, MNZSP
Director & Physiotherapist
Mob: 027 277 7775
Email: sharon@srs ltd.co.nz

CLIENT RIGHTS POLICY and COMPLAINTS PROCEDURE

Issue Date:	April 2017	Review Date:	February 2022
Last Review:	April 2021		
Issued By:	Estelle Borer, Director		

1. Introduction

Background:

Specialist Rehab Services (SRS) Ltd and all staff and contractors employed or contracted to SRS Ltd have responsibility to ensure that client rights are protected.

The principles underpinning this policy are the Health and Disability Commissioner (Code of Health and Disability Services Consumers' Rights) Regulations 1996 :

- Right to be treated with Respect
- Right to freedom from discrimination, coercion, harassment and exploitation
- Right to dignity and independence
- Right to services of an appropriate standard
- Right to effective communication
- Right to be fully informed
- Right to make an informed choice and give informed consent
- Right to support
- Rights in respect of teaching or research
- Right to complain

This policy is also underpinned by the New Zealand Disability Strategy 2016 with a commitment to the Principles on the Convention on the Rights of Personal with Disabilities.

In addition to the above this policy reflects a commitment to Te Tiriti o Waitangi of Partnership, Participation and Protection.

- *Partnership – working together with iwi, hapu, whānau and Māori communities to develop strategies and services to improve Māori health and wellbeing.*
- *Participation – involving Māori at all levels of decision-making, planning, development and service delivery.*
- *Protection – working to ensure Māori have at least the same level of health as non-Māori, and safeguarding Māori cultural concepts, values and practices.*

Objectives and outcomes

SRS Ltd is committed to ensuring all clients/ consumers of their services have their rights upheld and any complaints that are received are processed in a systematic respectful way.

SRS Ltd acknowledges the importance of appropriately managing complaints for the client and to enable the service to continually improve.

SRS Ltd believes the relationship between therapist and client to be one of trust that must never be abused.

2. Scope

This policy applies to SRS Ltd and all staff or contractors employed or contracted to SRS Ltd and clients.

3. References

The following legislation and documentation guides this policy:

- Allied Health Sector Service Standards NZS8171:2003
- Code of Health and Disability Services Consumers Rights
- Health and Disability Commissioner Act 1994/ Amendment Act 2003
- NZ Disability Strategy 2016 - 2026
- Human Rights Act 1993
- Privacy Act 2020

4. Links

Consumers Rights Processes relating documentation

Client rights is not just one process, but a culture within SRS Ltd and is reflected throughout the business through all of the documentation. Below is an outline of what supporting documentation supports each of the client rights within SRS Ltd.

Right 1 – Right to be treated with dignity and respect – all clients will be treated with dignity and respect and respect the clients privacy, ensuring that services take into account the consumers values, beliefs of different cultural, religious, social and ethnic groups, including the needs, values, and beliefs of, Maori.

Supporting documentation: HPCAA, Professional supervision and professional development log,

Right 2 – Right to freedom from discrimination, coercion, harassment and exploitation

Supporting documentation – SRS Code of conduct, Safe client contact practices, Child and Vulnerable client policy and procedure.

Right 3 – Right to Dignity and Independence – All clients have the right to have services provided in a manner that respects the dignity and independence of the individual.

Supporting documentation – Code of conduct, Safe client contact practices, Child and Vulnerable client policy and procedure, HPCAA, Professional supervision and professional development log

Right 4 – Right to services of an appropriate standard – all clients have a right to services that are provided with reasonable care and skill, services that comply with legal, professional, ethical and other relevant standards. All clients have the right to have services provided in a manner consistent with their needs and in a manner that minimises the potential harm to and optimises the quality of life of that client. All clients have the right to co-operation among providers to ensure quality and continuity of services.

Supporting documentation – Quality Management System, Quality Assurance Procedures, Quality improvement procedures, HPCAA, Professional supervision and professional development log

Right 5 – Right to Effective Communication – All clients have the right to effective communication in a form, language and manner that enables the consumer to understand the information provided. All clients have the right to an environment that enable s both the client and provider to communicate openly and honestly and effectively.

Supporting documentation – Pathway to access an interpreter, Cultural competency policy and procedures, HPCAA, Professional supervision and professional development log

Right 6 - Right to be fully informed – All clients have the right to information relating to the services they are receiving including an explanation of his/her condition, and of the options available including an assessment of the expected risks, side effects, benefits and costs of each option, the timeframes for services, to honest and accurate answers to questions including information about the identity and qualifications of the provider, the recommendation of the provider, how to obtain another opinion. All clients have a right to receive on request a written summary of information required.

Supporting documentation – Pathway documents for all services, information sheets about services being provided, code of conduct, informed consent process

Right 7 - Right to make an informed choice and give informed consent – Services will only be provided if the client has provided informed consent, all clients have the right to refuse services, to express reference for service providers.

Supporting documentation - Pathway documents for all services, information sheets about services being provided, code of conduct, informed consent process, and Consent form.

Right 8 - Right to support - All clients have the right to one or more support persons except where safety may be compromised.

Supporting documentation - Pathway documents for all services (all clients are asked if they wish to have support for all services), information sheets about services being provided, code of conduct, informed consent process, Consent form.

Right 9 - Rights in respect of teaching or research –

Supporting documentation - Pathway documents for all services (all clients are asked if they wish to have support for all services), information sheets about services being provided, code of conduct, informed consent process, Consent form.

Right 10 – Right to complain – Every client has the right to complain in any form appropriate to the consumer.

Supporting documentation - Pathway documents for all services, complaints policy and procedure.

COMPLAINTS PROCEDURE

Purpose:

- To ensure a client centred process for managing complaints
- To provide a clear process for managing complaints from clients and other sources
- To ensure effective, efficient and timely resolution of complaints

Guiding documentation:

- Allied Health Service Sector Standards NZS8171:2005
- Code of Health and Disability Services Consumers Rights
- Guidance for Performing Root Cause Analysis(RCA) with Performance Improvement Projects (PIPs) Centres for Medicare and Medicaid Services www.cms.gov
- Health and Disability Commissioner Act 1994/ Amendment Act 2003
- NZ Disability Strategy 2016 - 2026
- Human Rights Act 1993
- Privacy Act 2020

Procedure:

SRS Ltd recognizes the importance of managing complaints as an important part of client rights as identified in the Health and Disability Commission Code of Rights. We are committed to ensuring that complaints are recorded, managed and responded to in a timely and efficient manner. It is acknowledged that complaints may be received from the client but also others who interact with SRS Ltd. The process of managing complaints is linked to ongoing quality assurance and improvement. Clients will be treated with dignity and respect at all times throughout the complaints process, SRS Ltd is committed to facilitating a fair, simple, speedy and efficient resolution of complaints.

There will be flexibility at all stages of the complaint handling process in which a range of options to respond to the needs of the complainant can be applied. This takes into account the nature of the issue(s) and the effect it has had on the complainant. Flexibility in the process will allow the complainant (and others involved) to feel they are being heard and treated as an individual and that the complaint will be dealt with on its own merit.

On entry to service all clients shall:

- Have access to the complaints policy on request
- Be presented with a consent form and have this explained to them including the right to complain, the complaints process and that complaints can be received by the clinician, the service or the Health and Disability Commissioner.
- Be provided with a copy of the Health and Disability Commissioner Code of Rights on entry to service

All clinicians receive training on how to present the consent form to clients.

SRS Ltd will utilise the following processes for recording, managing and responding to complaints:

- Complaints can be received in any form. This could be by phone, email, or in writing. A complaints form is available for those wishing to complain in writing and for those phoning in a complaint the recipient of the complaint will complete a complaints form if possible.
- Complaints can be made to any individual providing the service, the managers or any staff of SRS Ltd
- The client is informed of the right to have an advocate or to contact the Health and Disability Commissioner.
- All complaints received shall be acknowledged in writing within 5 working days of receiving the complaint unless the issue is resolved sooner.
- Clients will be kept informed of a complaint that is in process no less than on a monthly basis.
- All complaints are logged in a complaints register that includes complaint, date, resolution options considered and chosen, changes in practice resulting from this, notifications to client/person who complained. Please see complaints register.
- For any complaint received a Manager is allocated to oversee the complaints process

Time Frame	Action	Comments
Within 5 working days	Acknowledge the Complaint in writing	<i>Complaint may be resolved sooner</i>
Within 10 working days	Every effort to resolve the complaint within this time frame	<i>Resolution may include phone calls, meetings, or a letter</i>
Additional time required to investigate/resolve	The person making the complaint will be notified.	<i>Further information may be requested to assist with resolving the complaint.</i>
Monthly basis	The person making the complaint will be kept informed on Monthly basis in regards to the complaint process.	<i>IF additional time is required to investigate and resolve the complaint.</i>
Complaint resolved	The person who made the complaint will be notified of the action/s taken this may be in writing, verbally with supporting written documentation or via a meeting	<i>SRS Ltd will check if the client is satisfied with the resolution.</i>
Complainant dissatisfied with resolution of complaint	Client or advocate may wish to provide additional information which will follow the same pathway.	<i>Alternatively Client or their advocate may wish to contact the Health and Disability Commission</i>
Auditing	Complaints and resulting actions will be Audited Bi-Annually	<i>Audit to be completed by a Consumer Advisor</i>

Closing complaints

Complaints will be considered closed and resolved when one of the following occurs:

- A written response has been provided to the complainant.
- A verbal response has been provided to the complainant and they have confirmed they are happy with the response.
- Agreement on resolution is confirmed by all parties present at meetings held with the complainant and their support person(s); and meeting minutes have been provided to the complainant.
- The complainant withdraws their complaint/concern.
- Confirmation is received from the complainant that his or her complaint is resolved; and/or
- In the absence of any information to the contrary, one month after the last communication with the complainant.

All complaints shall be categorised into areas to help identify if there are any re-occurring themes areas for categorisation can include but are not limited to:

- Clinician interaction
- Timeliness of service
- Lack of information/ confusion about services
- Cultural
- Privacy

Additional categories will be added as required

SRS Ltd may utilise the process of Root Cause Analysis to review Complaints - this will include but not be limited to:

- Identifying the event that lead to the complaint – gathering information from the staff involved and the person making the complaint
- Describing what happened – factual timeline of events leading up to and following the incident
- Consider contributing factors – what else was happening at the time that may have increased the likelihood of the cause for the complaint
- Identify the root cause –this is the underlying faulty process or system issue that led to the event that led to the complaint – there may be several root causes. Digging deeper to find the root cause can be achieved by using questioning techniques such as the “5 whys”
- Design and implement changes to eliminate the root causes – actions can be grouped into strong, immediate and weak – focus on generating as many strong and immediate actions as possible
- Measure the success of the changes – to measure the impact ask the following questions – did the actions get implemented?; are people following them?; did this make a difference – was there less/ no more complaints about this?

Supporting documents:

- Complaints form
- Complaints register
- Management meeting agenda items
- Root Cause Analysis Form (RCA form)