



NSW GOVERNMENT RESPONSE

Review of the Health Care Complaints Commission's 2021-22 and 2022-23 annual reports

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INTRODUCTION

The Health Care Complaints Commission (HCCC) acts to protect public health and safety by resolving, investigating and prosecuting complaints about health care. It is an independent body set up under the [Health Care Complaints Act 1993](#).

The HCCC has a central role in maintaining the integrity of the NSW health system, with the overarching aim of protecting the health and safety of individuals and the community. The HCCC deals with complaints about all health services and providers in NSW.

NSW Health and the HCCC meet regularly regarding complaints trends and issues, and collaborate on recognising and responding to emerging health and regulatory issues, together with stakeholders and co-regulators.

In the period of 2021-22 and 2022-23 covered by these reports, the complaint experience of the HCCC saw a return to pre-COVID levels and issues.

There is a continued focus on some enduring issues for the HCCC as well, and these are reflected in the observations and recommendations of the Committee on the HCCC.

There remains a strong focus on the need for engagement with all communities of NSW to support their access to the HCCC, especially for First Nations and culturally and linguistically diverse communities. There is an ongoing focus on managing complaints in a trauma-informed manner, and with an active approach to managing the impact on practitioners. Improving management of complaints with support of up-to-date case management technology is a major project for the HCCC.

The NSW Government thanks the Committee on the HCCC for its review of the annual reports and welcomes the recommendations of the report. This response outlines the Government's response, with 2 recommendations supported, 6 supported in principle and 3 noted. A brief response to each recommendation is outlined in the following sections.

RESPONSE TO RECOMMENDATIONS

RECOMMENDATION 1

That the Health Care Complaints Commission evaluate its new case management system within the first 6 months of implementation to determine whether the new system is achieving its anticipated benefits.

Position	Supported in principle
Brief justification for position	<p>The HCCC will review and evaluate the realisation of the anticipated benefits from the implementation of the new case management system - Complaints Handling and Management Program (CHAMP).</p> <p>Evaluation of benefits will begin immediately after implementation and will continue beyond the first 6 months. While some impacts may start to be reflected in quarterly monitoring and reporting of performance in the first 6 months, it is likely that the initial period will be predominantly one of learning and adjustment to the new system for HCCC staff members and co-regulators.</p> <p>Benefits are expected to be more notable and able to be evaluated after the first 12 months.</p>

RECOMMENDATION 2

That the Health Care Complaints Commission develop key performance indicators regarding:

- *consumer experience and satisfaction, and*
- *the frequency of the Commission's communication with both complainants and practitioners.*

Reporting on these indicators should commence in the 2024-25 annual report.

Position	Supported in principle
Brief justification for position	<p>Customer experience and satisfaction feedback methods and metrics will be considered as part of the broader engagement strategy of the HCCC.</p> <p>It is not feasible for to include these metrics in the next annual report covering the current period of 2024-2025. The HCCC will consider this for inclusion in future annual reports.</p> <p>The HCCC is focusing on continuously improving the approach to communication and engagement with complainants, practitioners and health facilities.</p>

Given the range of different engagements the HCCC may have with parties and facilities throughout the life-cycle of a complaint (i.e. during assessment, during investigation or resolutions, and through legal proceedings) it is unlikely that introducing and reporting on numerical KPIs of frequency would provide a meaningful indicator of the quality of communication and interactions.

The HCCC will consider whether reporting capability in the new case management system will enable reporting of communication frequency.

RECOMMENDATION 3

That the Health Care Complaints Commission implement accessible, trauma-informed options to support complainants who may not have the capacity to provide complaints in writing. This should include dedicated assistance for those who would prefer to make a verbal complaint.

Position	Supported
Brief justification for position	<p>The HCCC has re-focused and re-located its Enquiry Service within its Complaints Intake Team, in the Assessment Division. The service was formally moved in 2024.</p> <p>The HCCC recognises that people who have been through difficult and deeply affecting experiences, including birth trauma, may require support making a complaint in writing.</p> <p>The Enquiry Service is often a complainants first point of contact with the HCCC. Enquiry officers provide information about how members of the public can make complaints and answer questions about health services in general. The relocation of the service within the Complaints Intake Team was aimed at assisting vulnerable complainants to make a complaint with the assistance of trained intake staff. Intake staff then facilitate sensitive handover of case management to assessment teams.</p> <p>In the 10 months since this transition (in April 2024), the Enquiry Service has assisted approximately 75 members of the public to put their complaints in writing. This represents an increase in HCCC-assisted complaints of more than 800%.</p>

RECOMMENDATION 4

That the NSW Government consider providing additional funding for the Health Care Complaints Commission to establish a dedicated First Nations liaison/navigator position to provide a culturally

safe and accessible service for Aboriginal people lodging a complaint and/or practitioners subject to a complaint.

Position	Supported in principle
Brief justification for position	<p>The NSW Government considers requests for additional funding from the HCCC through the annual budget process in accordance with NSW Treasury Policy and Guidelines.</p> <p>The HCCC is finalising the organisation's first Reconciliation Action Plan, expected to be launched in the first half of 2025. The Action Plan is a 'Reflect' stage plan recognising that the HCCC is at the beginning of its reconciliation journey.</p> <p>A key focus of the Action Plan is the importance of upskilling the HCCC's staff, empowering them to become champions of reconciliation, and drive meaningful change throughout the organisation.</p> <p>The HCCC will further consider the practicability of using designated staff/positions to assist First Nations clients to better access HCCC services.</p>

RECOMMENDATION 5

That the Health Care Complaints Commission report back to the Committee in early 2025 on actions it intends to take to address the recommendations made by the Select Committee on Birth Trauma, relating to:

- *accessible and trauma-informed support for complainants (Recommendation 40)*
- *the public reporting of complaints data relating to maternity care and birth trauma (Recommendation 43)*

Position	Supported
Brief justification for position	The Health Care Complaints Commissioner provided an update to the Committee on this recommendation in March 2025.

RECOMMENDATION 6

That the Health Care Complaints Commission improve the frequency of its communication with practitioners that are the subject of complaint, and that it implements targets around the frequency of its communication. Progress against these targets should be included in the annual report for 2024-25, as per Recommendation 2 above.

Position	Supported in principle
Brief justification for position	See the responses to Recommendation 2 and Recommendation 8.

RECOMMENDATION 7

That the Health Care Complaints Commission improve its capacity to recognise and report on unfounded and vexatious complaints, and reports on actions it is taking in this regard.

Position	Supported
Brief justification for position	<p>The HCCC has existing practice and procedures for dealing with complaints as expeditiously as possible, including in circumstances where a complaint is 'unfounded' and/or 'vexatious'. These processes are consistent with Section 27 of the <i>Health Care Complaints Act 1993</i>, which provides broad power and discretion for the HCCC to expedite these matters.</p> <p>The earliest stages of complaint assessment provide an opportunity for practitioners to provide input regarding the matters alleged in a complaint, which provides an opportunity to refute or rebut claims in circumstances similar to those examples noted in the Committee's report at paras 3.20 to 3.22.</p> <p>As the 2023-24 Annual Report records, two-thirds (66.3%) of complaints were discontinued in that year. Significant detail is provided in the annual reports (see for example Table A.18) about the outcome of complaint assessment - including discontinuances - by every category of issue identified by complainants.</p> <p>The HCCC is exploring options to further expedite the turnaround of complaints that do not reach a minimum threshold of public health or safety risk or concern.</p>

RECOMMENDATION 8

That the Health Care Complaints Commission develop a program to support health practitioners that are subject to complaint and investigation. This should include the monitoring of, and reporting on, practitioner health and well-being.

Position	Supported in principle
Brief justification for position	<p>The HCCC is continuing to work on the issue of ‘practitioner distress’ and is focusing on improving communication with practitioners who are the subject of complaints, as well as complainants.</p> <p>The HCCC has a critical role in ensuring that practitioners that are the subject of a complaint are continuously informed, sensitively supported throughout the process, and have information and access to skilled and professional supports.</p> <p>It is important that practitioners receive direct support from experts and relevant practitioners, as well as professional and member organisations that are resourced and skilled to provide this support.</p> <p>For the HCCC to implement a more formal scheme of monitoring practitioner well-being, and reporting on wellbeing, would have resource implications, and could have potentially significant privacy and liability considerations.</p> <p>See also the response to Recommendation 2 above.</p>

RECOMMENDATION 9

That the Health Care Complaints Commission publish the findings and recommendations of the comprehensive stakeholder engagement review that was commissioned and completed in 2023 to improve transparency.

Position	Noted
Brief justification for position	<p>Like all organisations, the HCCC has the need from time-to-time to commission expert reports to complement internal knowledge and expertise.</p> <p>The HCCC needs to be able to receive these reports and advice in confidence, with the benefit of full and frank advice.</p> <p>Publishing these management reports and advice will compromise this objective.</p>

If the Committee has an enduring interest in the relevant review report the HCCC will provide a copy in-confidence to the Committee.

RECOMMENDATION 10

That the Health Care Complaints Commission establish a First Nations advisory group, with membership from Aboriginal Community Controlled Health Organisations and senior community leaders, to improve its engagement with First Nations communities.

Position	Noted
Brief justification for position	<p>The HCCC is developing a new external engagement plan for 2025 onwards. Two major focusses of this plan will be lifting and sustaining engagement with Aboriginal communities, Aboriginal health organisations and Aboriginal partners.</p> <p>This action also aligns with commitments in the HCCC's 'Reflect' Reconciliation Action Plan and specifically the Plan's Objective 2 that commits <i>"to building strong, meaningful relationships with Aboriginal and Torres Strait Islander communities. Through these relationships, we will gain insights to better understand and address the health and safety needs of these communities."</i></p> <p>The preferred approach of the HCCC with the resources available is to action these commitments through active outreach and engagement by the HCCC to build connection, trust and recognition, rather than 'in-sourcing' expertise via advisory forums.</p> <p>The planned engagement is proposed to include Aboriginal Community Controlled Health Organisations and senior community leaders.</p>

RECOMMENDATION 11

That the NSW Government consider providing additional funding to the Health Care Complaints Commission for standalone engagement and outreach activities with culturally and linguistically diverse communities.

Position	Noted
Brief justification for position	<p>The NSW Government considers requests for additional funding from the HCCC through the annual budget process in accordance with NSW Treasury Policy and Guidelines.</p> <p>As noted in the response to Recommendation 10, the HCCC is developing a new external engagement plan for 2025 onwards. Two major focusses of this plan will be lifting and sustaining engagement with culturally and linguistically diverse communities and Aboriginal communities.</p>