

**REVIEW OF INQUIRY INTO COMPLAINTS HANDLING IN  
NSW HEALTH**

**Organisation:** Royal College of Nursing, Australia  
**Name:** Ms Rosemary Bryant  
**Position:** Executive Director  
**Telephone:**  
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**Subject:**

**Summary**



10 July, 2006

Mr Stephen Frappell  
The Director  
General Purpose Standing Committee No. 2  
Legislative Council  
Parliament House  
Macquarie Street  
Sydney NSW 2000

Dear Mr Frappell

**Response to Review of Inquiry into Complaints Handling in NSW Health**

Thank you for the opportunity to comment on the *Review of Inquiry into Complaints Handling in NSW Health*. As the peak national professional organisation for nurses in Australia, Royal College of Nursing, Australia (RCNA) places high importance on critical consideration of all matters that impact on nursing in Australia. Because of this, RCNA has taken a close interest in complaints handling procedures throughout the health sector in Australia, including putting forward a submission to the original Inquiry into Complaints Handling within NSW Health conducted by the General Purpose Standing Committee No. 2 in March 2004.

While inquiries are often conducted and recommendations made, this does not necessarily mean that reforms will be seen out to their conclusion. RCNA applauds the NSW Government for conducting this investigation into the implementation of the recommendations which are vital to a safer and high quality health sector. As identified in our attached submission RCNA believes that there are still a number of areas where recommendations were made, that have not been implemented or addressed. The areas we have identified in this submission are those that we believe will make a difference, so we are keen to see them come to fruition.

Yours sincerely

*Rosemary Bryant*

Rosemary Bryant FRCNA  
**EXECUTIVE DIRECTOR**

Encl: Response to Review of Inquiry into Complaints Handling in NSW Health

*Australia's Peak Professional Nursing Organisation*



## **ROYAL COLLEGE OF NURSING, AUSTRALIA**

### ***Response to Review of Inquiry into Complaints Handling in NSW Health***

#### **1. Introduction**

Royal College of Nursing, Australia (RCNA) welcomes the opportunity to provide comment to General Purpose Standing Committee No. 2 (GPSC No.2) regarding the implementation of the recommendations of the Committee's 2004 report into Complaints Handling within NSW Health.

#### **2. RCNA – Background**

RCNA is the peak national professional organisation for Australian nurses. The College was established in 1949 and until the early 1990s was a provider of formal ongoing education for nurses who wished to gain higher qualifications in nursing. Following the completion of the transfer of nursing to the higher education sector in 1993, RCNA refocused its functions to encompass continuing professional development and policy analysis and development.

The College represents nursing across all areas of practice throughout Australia and has members in all States and Territories of Australia, and internationally. RCNA is a not-for-profit organisation, providing a voice for nursing by speaking out on health issues that affect nurses and the community. With representation on government committees and health advisory bodies, RCNA is recognised as a key centre of influence in the health policy arena in Australia. When health policy decisions are made, RCNA presents a professional nursing perspective, independent of political allegiance.

#### **3. RCNA Response**

RCNA has taken a close interest in complaints handling procedures throughout the health sector in Australia, including putting forward a submission to the original Inquiry into Complaints Handling within NSW Health conducted by the GPSC No.2 in March 2004. In this current submission, RCNA focuses only on making comment on the

recommendations where we have specific knowledge of the situation. These comments are made below:

**3.1. Recommendation 3:** That Area Health Service boards formally adopt the principles of open disclosure via performance agreements with NSW Health and affirm their commitment to the full implementation of the Open Disclosure Standard developed by the Australian Council for Safety and Quality in Health Care.

The College was closely involved with the development of the Open Disclosure Standards, having had a member represent our organisation on the Standards development committee. RCNA fully supports the tenets of this recommendation, and encourages NSW health services to utilise the Standards and ensure their staff have appropriate training. RCNA looks forward to the results of the Open Disclosure Pilot Project of the Australian Health Ministers' Conference set to report in December 2006.

**3.2. Recommendation 6:** That the NSW Minister for Health raise with his counterparts on the Australian Health Ministers' Advisory Council the provision of an annual update on the implementation of the Open Disclosure Standard, for the first two years following its incorporation into the Evaluation and Quality Improvement Program conducted by the Australia Council of Healthcare Standards.

RCNA strongly supports the need for follow up to occur with the Open Disclosure Standards. While the development of the Standards was well supported by the Australian Council for Safety and Quality in Health Care, we caution that this needs to stay on the agenda of the newly formed Australian Commission on Safety & Quality in Health Care.

**3.3. Recommendation 8:** that the proposed Clinical Excellence Commission in conjunction with NSW Health undertake an extensive public education campaign to inform the community about:

- Simple steps to make complaints;
- The nature and extent of adverse events on the health care system;
- Realistic expectations of health care; and
- Changes to the regulatory framework for health care complaints and consumers rights.

RCNA is not aware of the Clinical Excellence Commission (CEC) undertaking an education campaign to inform the public about adverse events, and complaints and consumer rights. As RCNA was contacted by CEC to distribute information about their Hand Hygiene Campaign, we would expect that we would have also been made aware of an adverse events / complaints and consumer rights campaign if it were occurring. RCNA has kept a watching brief on the CEC website and has not seen any public information regarding complaints handling. We look forward to this taking place.

**3.4. Recommendation 10:** That the New South Wales Government convene a summit on medical adverse events within the next 12 months.

RCNA is not aware that a summit was convened. In addition, RCNA would like to comment that perhaps the event should be re-named to 'adverse events occurring in the health sector' so that the subject matter can be broad enough to cover all disciplines within the health workforce.

**3.5. Recommendation 15:** That the NSW Clinical Excellence Commission conduct a study on the feasibility of introducing mandatory reporting of all or certain classes of incidents to health service management and to the Department of Health.

While in their response to the GPSC No.2 inquiry into Complaints Handling within NSW Health report 2004, NSW Health suggested that 'There already exist requirements to report incidents and complaints' RCNA believes that research specifically focusing on the implications of 'mandatory' reporting is still necessary. The gaps in knowledge and lack of definitive direction in this area again became apparent with the debate that occurred following the recently reported adverse events occurring in aged care facilities in Victoria. RCNA believes that this issue remains one that needs a particular focus, rather than being swept up in a broad-brush review of incident management and requirements as part of an audit and assessment program of the CEC.

**3.6. Recommendation 16:** That NSW Health ensure that in all area health services each clinical team should have regular review meetings on a protocol set up by management and audited by the Clinical Excellence Commission.

RCNA is yet to see evidence of this occurring. RCNA takes this opportunity to stress that it is critical that 'clinical team' means 'multidisciplinary team' and that all those working within the health sector are involved equally in this process.

**3.7. Recommendation 17:** The *Health Care Complaints Act 1993* and the *Protected Disclosures Act 1994* be amended to protect the identity of whistleblowers when they require it and to provide protected disclosure safeguards for health practitioners, including nurses in both the public and private sectors.

As nurses make up the single largest part of the health workforce and the only healthcare providers to work 24 hours, seven days a week with consumers, they are often in a position to witness adverse events. Protection of whistleblowers is therefore vital for nurses. RCNA was pleased to see changes to legislation to protect whistleblowers and reserve judgment as to the success of these changes, which we believe will become evident as the legislation is tested in the reality of the workplace.

#### **4. Conclusion**

While inquiries are conducted and recommendations made, this does not necessarily mean that reforms will be seen out to their conclusion. RCNA applauds the NSW Government for conducting this investigation into the implementation of the recommendations which are vital to a safer and high quality health sector. As identified above RCNA believes that there are still a number of areas where recommendations were made, that have not been implemented or addressed. The areas we have identified in this submission are those that we believe will make a difference, so we are keen to see them come to fruition.

#### **Contact Details**

Rosemary Bryant FRCNA  
Executive Director  
Royal College of Nursing, Australia

Elizabeth Foley FRCNA  
Director Policy  
Royal College of Nursing, Australia