# Appendices

## AHPRA register of national boards and professionals

|  |  |  |
| --- | --- | --- |
| **National Board** | **Profession** | **Division** |
| Aboriginal and Torres Strait Islander Health Practice Board of Australia | Aboriginal and Torres Strait Islander Health Practitioner |  |
| Chinese Medicine Board of Australia | Chinese Medicine Practitioner | Acupuncturist Chinese herbal medicine practitioner Chinese herbal dispenser |
| Chiropractic Board of Australia | Chiropractor |  |
| Dental Board of Australia | Dental Practitioner | Dentist Dental therapist Dental hygienist Dental prosthetist Oral health therapist |
| Medical Board of Australia | Medical Practitioner |  |
| Medical Radiation Practice Board of Australia | Medical Radiation Practitioner | Diagnostic radiographer Nuclear medicine technologists Radiation therapist |
| Nursing and Midwifery Board of Australia | Midwife and Nurse | Registered nurse (Division 1) Enrolled nurse (Division 2) |
| Occupational Therapy Board of Australia | Occupational therapist |  |
| Optometry Board of Australia | Optometrist |  |
| Osteopathy Board of Australia | Osteopath |  |
| Pharmacy Board of Australia | Pharmacist |  |
| Physiotherapy Board of Australia | Physiotherapist |  |
| Podiatry Board of Australia | Podiatrist |  |
| Psychology Board of Australia | Psychologist |  |

## Specific complaint issue raised in a complaint about a health service

The table below details the number of times a specific complaint issue[[1]](#footnote-1) was raised in a complaint about a health service. The individual complaint issues are grouped by overarching issue category. Within each issue category, the proportions detailed in the table will sum to 100%.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Complaint category and issues** | **2015-16** | | **2016-17** | | **2017-18** | |
| **#** | **%** | **#** | **%** | **#** | **%** |
| **Treatment** | | | | | | |
| Attendance | 6 | 0.6% | 7 | 0.7% | 7 | 0.6% |
| Coordination of treatment | 78 | 7.9% | 109 | 10.4% | 63 | 5.8% |
| Delay in treatment | 59 | 6.0% | 53 | 5.1% | 38 | 3.5% |
| Diagnosis | 42 | 4.3% | 62 | 5.9% | 110 | 10.1% |
| Excessive treatment | 25 | 2.5% | 20 | 1.9% | 27 | 2.5% |
| Experimental treatment | 1 | 0.1% | 3 | 0.3% | 4 | 0.4% |
| Inadequate consultation | 147 | 14.9% | 139 | 13.3% | 130 | 11.9% |
| Inadequate treatment | 207 | 21.0% | 272 | 26.0% | 351 | 32.2% |
| Infection control | 15 | 1.5% | 18 | 1.7% | 20 | 1.8% |
| No/inappropriate referral | 31 | 3.2% | 24 | 2.3% | 30 | 2.7% |
| Public/private election | 2 | 0.2% | 1 | 0.1% | 3 | 0.3% |
| Rough and painful treatment | 35 | 3.6% | 28 | 2.7% | 21 | 1.9% |
| Unexpected treatment outcome/complications | 278 | 28.3% | 255 | 24.3% | 206 | 18.9% |
| Withdrawal of treatment | 21 | 2.1% | 20 | 1.9% | 26 | 2.4% |
| Wrong/inappropriate treatment | 37 | 3.8% | 37 | 3.5% | 55 | 5.0% |
| **Total** | **984** | **100%** | **1,048** | **100%** | **1,091** | **100%** |
|  | | | | | | |
| **Communication & information** | | | | | | |
| Attitude/Manner | 226 | 51.8% | 215 | 53.9% | 270 | 50.7% |
| Inadequate information provided | 97 | 22.2% | 66 | 16.5% | 85 | 15.9% |
| Incorrect/misleading information provided | 69 | 15.8% | 70 | 17.5% | 125 | 23.5% |
| Special needs not accommodated | 44 | 10.1% | 48 | 12.0% | 53 | 9.9% |
| **Total** | **436** | **100%** | **399** | **100%** | **533** | **100%** |
|  | | | | | | |
| **Fees and costs** | | | | | | |
| Billing Practices | 234 | 59.2% | 200 | 48.9% | 181 | 50.6% |
| Cost of treatment | 82 | 20.8% | 91 | 22.2% | 108 | 30.2% |
| Financial consent | 79 | 20.0% | 118 | 28.9% | 69 | 19.3% |
| **Total** | **395** | **100%** | **409** | **100%** | **358** | **100%** |
| **Complaint category and issues** | **2015-16** | | **2016-17** | | **2017-18** | |
| **#** | **%** | **#** | **%** | **#** | **%** |
| **Access** | | | | | | |
| Access to facility | 7 | 3.1% | 5 | 1.7% | 5 | 1.7% |
| Access to subsidies | 2 | 0.9% | 9 | 3.0% | 7 | 2.3% |
| Refusal to Admit or Treat | 98 | 43.6% | 84 | 28.0% | 84 | 28.1% |
| Remoteness of Service | 3 | 1.3% | 0 | 0.0% | 3 | 1.0% |
| Service Availability | 63 | 28.0% | 132 | 44.0% | 115 | 38.5% |
| Waiting lists | 52 | 23.1% | 70 | 23.3% | 85 | 28.4% |
| **Total** | **225** | **100%** | **300** | **100%** | **299** | **100%** |
|  | | | | | | |
| **Medication** | | | | | | |
| Administering medication | 16 | 14.3% | 37 | 20.6% | 53 | 23.2% |
| Dispensing medication | 15 | 13.4% | 19 | 10.6% | 34 | 14.9% |
| Prescribing medication | 74 | 66.1% | 116 | 64.4% | 132 | 57.9% |
| Supply/security/storage of medication | 7 | 6.3% | 8 | 4.4% | 9 | 3.9% |
| **Total** | **112** | **100%** | **180** | **100%** | **228** | **100%** |
|  | | | | | | |
| **Inquiry service only** | | | | | | |
| Request for information - HaDSCO | 18 | 17.8% | 8 | 11.8% | 23 | 16.5% |
| Request for information - Complaint mechanisms | 45 | 44.6% | 28 | 41.2% | 46 | 33.1% |
| Request for information - Health Service | 20 | 19.8% | 27 | 39.7% | 49 | 35.3% |
| Request for information - Other | 18 | 17.8% | 5 | 7.4% | 19 | 13.7% |
| Resources | 0 | 0.0% | 0 | 0.0% | 2 | 1.4% |
| **Total** | **101** | **100%** | **68** | **100%** | **139** | **100%** |
|  | | | | | | |
| **Medical records** | | | | | | |
| Access to/transfer of records | 58 | 68.2% | 104 | 75.4% | 55 | 66.3% |
| Record keeping | 18 | 21.2% | 23 | 16.7% | 22 | 26.5% |
| Records management | 9 | 10.6% | 11 | 8.0% | 6 | 7.2% |
| **Total** | **85** | **100%** | **138** | **100%** | **83** | **100%** |
|  | | | | | | |
| **Professional conduct** | | | | | | |
| Assault | 3 | 2.1% | 3 | 2.2% | 5 | 6.4% |
| Boundary violation | 3 | 2.1% | 3 | 2.2% | 4 | 5.1% |
| Breach of condition | 2 | 1.4% | 0 | 0.0% | 2 | 2.6% |
| Competence | 89 | 61.8% | 77 | 57.5% | 41 | 52.6% |
| Discriminatory conduct | 13 | 9.0% | 20 | 14.9% | 8 | 10.3% |
| Emergency treatment not provided | 4 | 2.8% | 0 | 0.0% | 2 | 2.6% |
| Illegal practice | 1 | 0.7% | 1 | 0.7% | 1 | 1.3% |
| Impairment | 0 | 0.0% | 4 | 3.0% | 2 | 2.6% |
| Inappropriate disclosure of information | 23 | 16.0% | 19 | 14.2% | 10 | 12.8% |
| Misrepresentation of qualifications | 3 | 2.1% | 5 | 3.7% | 2 | 2.6% |
| Sexual misconduct | 3 | 2.1% | 2 | 1.5% | 1 | 1.3% |
| **Total** | **144** | **100%** | **134** | **100%** | **78** | **100%** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Complaint category and issues** | **2015-16** | | **2016-17** | | **2017-18** | |
| **#** | **%** | **#** | **%** | **#** | **%** |
| **Discharge and transfer arrangements** | | | | | | |
| Delay | 3 | 5.2% | 8 | 14.8% | 3 | 4.6% |
| Inadequate discharge | 38 | 65.5% | 40 | 74.1% | 54 | 83.1% |
| Mode of transport | 5 | 8.6% | 3 | 5.6% | 4 | 6.2% |
| Patient not reviewed | 12 | 20.7% | 3 | 5.6% | 4 | 6.2% |
| **Total** | **58** | **100%** | **54** | **100%** | **65** | **100%** |
|  | | | | | | |
| **Environment / management of facilities** | | | | | | |
| Administrative processes | 28 | 40.6% | 14 | 16.9% | 10 | 18.9% |
| Cleanliness/hygiene of facility | 15 | 21.7% | 24 | 28.9% | 13 | 24.5% |
| Physical environment of facility | 17 | 24.6% | 36 | 43.4% | 21 | 39.6% |
| Staffing and rostering | 5 | 7.2% | 6 | 7.2% | 6 | 11.3% |
| Statutory obligations/accreditation standards not met | 4 | 5.8% | 3 | 3.6% | 3 | 5.7% |
| **Total** | **69** | **100%** | **83** | **100%** | **53** | **100%** |
|  | | | | | | |
| **Reports / certificates** | | | | | | |
| Accuracy of report/certificate | 13 | 28.3% | 19 | 33.3% | 21 | 43.8% |
| Cost of report/certificate | 2 | 4.3% | 3 | 5.3% | 3 | 6.3% |
| Refusal to provide report/certificate | 11 | 23.9% | 12 | 21.1% | 12 | 25.0% |
| Report written with inadequate / no consultation | 3 | 6.5% | 4 | 7.0% | 1 | 2.1% |
| Timeliness of report/certificate | 17 | 37.0% | 19 | 33.3% | 11 | 22.9% |
| **Total** | **46** | **100%** | **57** | **100%** | **48** | **100%** |
|  | | | | | | |
| **Grievance processes** | | | | | | |
| Inadequate/no response to complaint | 45 | 91.8% | 25 | 89.3% | 29 | 80.6% |
| Information about complaints procedures not provided | 2 | 4.1% | 0 | 0.0% | 4 | 11.1% |
| Reprisal/retaliation as result of complaint lodged | 2 | 4.1% | 3 | 10.7% | 3 | 8.3% |
| **Total** | **49** | **100%** | **28** | **100%** | **36** | **100%** |
|  | | | | | | |
| **Consent** | | | | | | |
| Consent not obtained or inadequate | 17 | 60.7% | 14 | 82.4% | 13 | 54.2% |
| Involuntary admission or treatment | 4 | 14.3% | 0 | 0.0% | 3 | 12.5% |
| Uninformed consent | 7 | 25.0% | 3 | 17.6% | 8 | 33.3% |
| **Total** | **28** | **100%** | **17** | **100%** | **24** | **100%** |
|  | | | | | | |
| **Carers Charter** | | | | | | |
| Failure to consider needs of carer | 2 | 12.5% | 5 | 23.8% | 1 | 9.1% |
| Failure to consult carer | 9 | 56.3% | 11 | 52.4% | 7 | 63.6% |
| Failure to treat carer with respect and dignity | 2 | 12.5% | 4 | 19.0% | 1 | 9.1% |
| Unsatisfactory complaint handling | 3 | 18.8% | 1 | 4.8% | 2 | 18.2% |
| **Total** | **16** | **100%** | **21** | **100%** | **11** | **100%** |

## Health providers prescribed under s75 of the *Health and Disability Services (Complaints) Act 1995*

|  |
| --- |
| Prescribed entity |
| Abbotsford Private Hospital |
| Albany Community Hospice |
| Attadale Rehabilitation Hospital |
| Bethesda Hospital |
| Department of Justice1 |
| Child and Adolescent Health Service |
| East Metropolitan Health Service |
| North Metropolitan Health Service |
| South Metropolitan Health Service |
| WA Country Health Service2 |
| Glengarry Private Hospital |
| Hollywood Private Hospital |
| Joondalup Health Campus |
| Mount Hospital |
| Ngala Family Services |
| Peel Health Campus |
| Perth Clinic |
| Royal Flying Doctor Service |
| Silver Chain Nursing Association Incorporated |
| South Perth Hospital |
| St John Ambulance Service |
| St John of God Hospital3, 4 |
| Subiaco Private Hospital |
| The Marian Centre |
| Waikiki Private Hospital |

1 Formerly the Department of Corrective Services.

2 Includes Busselton Hospice Care Incorporated.

3 Includes the following St John of God Hospitals: Bunbury, Geraldton, Mt Lawley, Murdoch, Midland (private and public) & Subiaco.

4 St John of God Mt Lawley Hospital was previously known as Mercy Hospital and Mount Lawley Private Hospital.

## Specific complaint issue raised in a complaint about a disability service

The table below details the number of times a specific complaint issue[[2]](#footnote-2) was raised in a complaint about a disability service. The individual complaint issues are grouped by the overarching issue category. Within each issue category, the proportions detailed in the table will sum to 100%.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Complaint category and issues** | **2015-16** | | **2016-17** | | **2017-18** | |
| **#** | **%** | **#** | **%** | **#** | **%** |
| **Service Delivery** |  |  |  |  |  |  |
| Staff conduct | 9 | 22.5% | 9 | 26.5% | 11 | 22.4% |
| No/inadequate service | 6 | 15.0% | 2 | 5.9% | 7 | 14.3% |
| Service delayed | 3 | 7.5% | 1 | 2.9% | 2 | 4.1% |
| Service eligibility | 2 | 5.0% | 1 | 2.9% | 0 | 0.0% |
| Service reduced | 2 | 5.0% | 3 | 8.8% | 8 | 16.3% |
| Service refused | 3 | 7.5% | 3 | 8.8% | 2 | 4.1% |
| Treatment/care | 6 | 15.0% | 4 | 11.8% | 14 | 28.6% |
| Service withdrawn | 2 | 5.0% | 7 | 20.6% | 0 | 0.0% |
| Communication | 7 | 17.5% | 4 | 11.8% | 5 | 10.2% |
| **Total** | **40** | **100%** | **34** | **100%** | **49** | **100%** |
|  |  |  |  |  |  |  |
| **Service Management** |  |  |  |  |  |  |
| Police clearances | 1 | 6.7% | 0 | 0.0% | 0 | 0.0% |
| Physical environment | 1 | 6.7% | 1 | 6.7% | 5 | 13.5% |
| Participation | 1 | 6.7% | 0 | 0.0% | 1 | 2.7% |
| Monitoring performance | 0 | 0.0% | 0 | 0.0% | 3 | 8.1% |
| Roles and responsibilities | 1 | 6.7% | 2 | 13.3% | 1 | 2.7% |
| Staff competence | 4 | 26.7% | 5 | 33.3% | 12 | 32.4% |
| Administration/record keeping | 1 | 6.7% | 1 | 6.7% | 1 | 2.7% |
| Funding | 3 | 20.0% | 5 | 33.3% | 10 | 27.0% |
| Coordinated service delivery | 3 | 20.0% | 1 | 6.7% | 4 | 10.8% |
| **Total** | **15** | **100%** | **15** | **100%** | **37** | **100%** |
|  |  |  |  |  |  |  |
| **Service Costs and Financial Assistance** |  |  |  |  |  |  |
| Cost | 7 | 35.0% | 1 | 6.7% | 4 | 30.8% |
| Financial assistance/funding | 13 | 65.0% | 14 | 93.3% | 9 | 69.2% |
| **Total** | **20** | **100%** | **15** | **100%** | **13** | **100%** |
|  |  |  |  |  |  |  |
| **Decision Making and Choice** |  |  |  |  |  |  |
| Policies and procedures | 1 | 11.1% | 2 | 22.2% | 2 | 20.0% |
| Informed choices | 3 | 33.3% | 6 | 66.7% | 4 | 40.0% |
| Advocate | 3 | 33.3% | 0 | 0.0% | 2 | 20.0% |
| Risk management | 2 | 22.2% | 1 | 11.1% | 2 | 20.0% |
| **Total** | **9** | **100%** | **9** | **100%** | **10** | **100%** |
| **Complaint category and issues** | **2015-16** | | **2016-17** | | **2017-18** | |
| **#** | **%** | **#** | **%** | **#** | **%** |
| **Individual Needs** |  |  |  |  |  |  |
| Policies/procedures | 4 | 21.1% | 2 | 28.6% | 1 | 10.0% |
| Reviewing changing needs | 4 | 21.1% | 3 | 42.9% | 4 | 40.0% |
| Facilities and services | 4 | 21.1% | 1 | 14.3% | 0 | 0.0% |
| Support | 6 | 31.6% | 1 | 14.3% | 5 | 50.0% |
| Sensitivity | 1 | 5.3% | 0 | 0.0% | 0 | 0.0% |
| **Total** | **19** | **100%** | **7** | **100%** | **10** | **100%** |
|  |  |  |  |  |  |  |
| **Complaints and Disputes** |  |  |  |  |  |  |
| Policies and procedures | 0 | 0.0% | 2 | 12.5% | 0 | 0.0% |
| Complaint resolution | 11 | 100% | 14 | 87.5% | 4 | 80.0% |
| Privacy | 0 | 0.0% | 0 | 0.0% | 1 | 20.0% |
| **Total** | **11** | **100%** | **16** | **100%** | **5** | **100%** |
|  |  |  |  |  |  |  |
| **Carers Charter** |  |  |  |  |  |  |
| Failure to consider needs of carer | 2 | 25.0% | 2 | 15.4% | 1 | 14.3% |
| Failure to consult carer | 4 | 50.0% | 7 | 53.8% | 3 | 42.9% |
| Failure to treat the carer with respect and dignity | 2 | 25.0% | 3 | 23.1% | 1 | 14.3% |
| Unsatisfactory complaints handling | 0 | 0.0% | 1 | 7.7% | 2 | 28.6% |
| **Total** | **8** | **100%** | **13** | **100%** | **7** | **100%** |
|  |  |  |  |  |  |  |
| **Legal and Human Rights** |  |  |  |  |  |  |
| Policies and procedures | 0 | 0.0% | 0 | 0.0% | 1 | 20.0% |
| Exercise rights | 0 | 0.0% | 0 | 0.0% | 1 | 20.0% |
| Response to allegations of abuse/neglect | 2 | 100% | 4 | 100% | 3 | 60.0% |
| **Total** | **2** | **100%** | **4** | **100%** | **5** | **100%** |
|  |  |  |  |  |  |  |
| **Enquiry Only** |  |  |  |  |  |  |
| Request for information - complaint mechanisms | 5 | 71.4% | 18 | 85.7% | 0 | 0.0% |
| Request for information - disability service | 1 | 14.3% | 0 | 0.0% | 1 | 33.3% |
| Request for information - HaDSCO | 0 | 0.0% | 3 | 14.3% | 0 | 0.0% |
| Resources | 1 | 14.3% | 0 | 0.0% | 2 | 66.7% |
| **Total** | **7** | **100%** | **21** | **100%** | **3** | **100%** |
|  |  |  |  |  |  |  |
| **Privacy, dignity and confidentiality** |  |  |  |  |  |  |
| Consent | 1 | 33.3% | 0 | 0.0% | 1 | 33.3% |
| Consumer rights | 2 | 66.7% | 1 | 100% | 2 | 66.7% |
| **Total** | **3** | **100%** | **1** | **100%** | **3** | **100%** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Complaint category and issues** | **2015-16** | | **2016-17** | | **2017-18** | |
| **#** | **%** | **#** | **%** | **#** | **%** |
| **Service Access** |  |  |  |  |  |  |
| Policies/procedures | 1 | 14.3% | 2 | 50.0% | 1 | 100% |
| Entrance/exit criteria priority | 4 | 57.1% | 1 | 25.0% | 0 | 0.0% |
| Appropriate referral | 1 | 14.3% | 0 | 0.0% | 0 | 0.0% |
| Information sharing | 1 | 14.3% | 1 | 25.0% | 0 | 0.0% |
| **Total** | **7** | **100%** | **4** | **100%** | **1** | **100%** |
|  |  |  |  |  |  |  |
| **Participation and Integration** |  |  |  |  |  |  |
| Community involvement | 0 | 0.0% | 1 | 100% | 0 | 0.0% |
| **Total** | **0** | **0%** | **1** | **100%** | **0** | **0%** |

## 5.5 Disability providers who are prescribed under S48A of the *Disability Services Act 1993*

|  |  |
| --- | --- |
| Disability service provider | Legal Name |
| Ability Centre | The Cerebral Palsy Association of Western Australia Ltd |
| Activ | Activ Foundation Incorporated |
| Adventist Residential Care Nollamara | Seventh-day Adventist Aged Care (Western Australia) |
| Autism Association of Western Australia | Autism Association of Western Australia Inc |
| Avivo (previously Perth Home Care Services) | Perth Home Care Services Inc. |
| Baptistcare | Baptistcare Incorporated |
| Community Living Association | Community Living Association Inc. |
| Department of Communities1 | Department of Communities |
| Empowering People in Communities (EPIC) | Empowering People in Communities (EPIC) Inc. |
| Enable Western Australia | Enable Southwest Inc. |
| Identitywa | Identitywa |
| Lady Lawley Cottage | Australian Red Cross Society (t/as Lady Lawley Cottage) |
| Lifestyle Solutions | Lifestyle Solutions (Aust) Ltd (Western Operations) |
| Mosaic Community Care | Mosaic Community Care Inc. |
| My Place | My Place Foundation Inc. |
| Nulsen | Nulsen Haven Association (Inc.) |
| Rocky Bay | Rocky Bay Incorporated |
| Senses Australia | Senses Australia |
| Therapy Focus | Therapy Focus Incorporated |
| UnitingCare West | UnitingCare West |

1 Formerly known as the Disability Services Commission.

## 5.6 Specific complaint issue raised in a complaint about a mental health service

The table below details the number of times a specific complaint issue[[3]](#footnote-3) was raised in a complaint about a mental health service. The individual complaint issues are grouped by the overarching issue category. Within each issue category, the proportions detailed in the table will sum to 100%.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Complaint category and issues** | **2015-16[[4]](#footnote-4)** | | **2016-17** | | **2017-18** | |
| **#** | **%** | **#** | **%** | **#** | **%** |
| **Quality of clinical care** | | | | | | |
| Inadequate assessment | -- | -- | 41 | 21.5% | 61 | 32.1% |
| Inadequate treatment/therapy | -- | -- | 35 | 18.3% | 28 | 14.7% |
| Poor coordination of treatment | -- | -- | 11 | 5.8% | 10 | 5.3% |
| Failure to provide safe environment | -- | -- | 12 | 6.3% | 25 | 13.2% |
| Pain issues | -- | -- | 1 | 0.5% | 2 | 1.1% |
| Medication issues | -- | -- | 54 | 28.3% | 40 | 21.1% |
| Post procedure complications | -- | -- | 1 | 0.5% | 1 | 0.5% |
| Inadequate infection control | -- | -- | 1 | 0.5% | 0 | 0.0% |
| Discharge or transfer arrangements | -- | -- | 33 | 17.3% | 20 | 10.5% |
| Refusal to refer or assist to obtain a second opinion | -- | -- | 2 | 1.0% | 3 | 1.6% |
| **Total** | **--** | **--** | **191** | **100%** | **190** | **100%** |
|  | | | | | | |
| **Communication** | | | | | | |
| Inadequate medical information provided | -- | -- | 14 | 11.4% | 6 | 4.4% |
| Inadequate information about services available | -- | -- | 8 | 6.5% | 6 | 4.4% |
| Misinformation/failure in communication  (not failure to consult) | -- | -- | 14 | 11.4% | 14 | 10.3% |
| Inadequate/inaccurate personal information in a medical records | -- | -- | 3 | 2.4% | 10 | 7.4% |
| Inadequate written communication | -- | -- | 2 | 1.6% | 3 | 2.2% |
| Inappropriate verbal/non-verbal communication | -- | -- | 21 | 17.1% | 32 | 23.5% |
| Failure to listen to consumer/representative/carer/family | -- | -- | 61 | 49.6% | 65 | 47.8% |
| **Total** | **--** | **--** | **123** | **100%** | **136** | **100%** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Complaint category and issues** | **2015-16** | | **2016-17** | | **2017-18** | |
| **#** | **%** | **#** | **%** | **#** | **%** |
| **Rights, respect and dignity** | | | | | | |
| Consumer rights (WA Public Patients Hospital Charter) | -- | -- | 6 | 7.5% | 7 | 9.5% |
| Inconsiderate service/lack of courtesy | -- | -- | 12 | 15.0% | 8 | 10.8% |
| Absence of compassion | -- | -- | 15 | 18.8% | 19 | 25.7% |
| Failure to ensure privacy | -- | -- | 2 | 2.5% | 4 | 5.4% |
| Breach of confidentiality | -- | -- | 8 | 10.0% | 3 | 4.1% |
| Discrimination leading to less favourable health treatment | -- | -- | 4 | 5.0% | 2 | 2.7% |
| Failure to fulfil Mental Health legislation requirements | -- | -- | 19 | 23.8% | 23 | 31.1% |
| Certificate or report problem | -- | -- | 6 | 7.5% | 5 | 6.8% |
| Denying/restricting access to personal health records | -- | -- | 8 | 10.0% | 3 | 4.1% |
| **Total** | **--** | **--** | **80** | **100%** | **74** | **100%** |
|  | | | | | | |
| **Decision making** | | | | | | |
| Failure to consult and involve in decision-making process | -- | -- | 40 | 49.4% | 19 | 38.8% |
| Choice regarding treatment as public/private patient | -- | -- | 3 | 3.7% | 4 | 8.2% |
| Consent not informed | -- | -- | 15 | 18.5% | 6 | 12.2% |
| Consent not obtained | -- | -- | 11 | 13.6% | 5 | 10.2% |
| Consent invalid | -- | -- | 12 | 14.8% | 15 | 30.6% |
| **Total** | **--** | **--** | **81** | **100%** | **49** | **100%** |
|  | | | | | | |
| **Professional conduct** | | | | | | |
| Inaccuracy of records | -- | -- | 5 | 15.6% | 7 | 20.6% |
| Illegal practices | -- | -- | 3 | 9.4% | 1 | 2.9% |
| Physical/mental impairment of health professional | -- | -- | 1 | 3.1% | 0 | 0.0% |
| Sexual impropriety | -- | -- | 0 | 0.0% | 1 | 2.9% |
| Aggression/assault | -- | -- | 8 | 25.0% | 4 | 11.8% |
| Unprofessional behaviour | -- | -- | 15 | 46.9% | 20 | 58.8% |
| Fraud/illegal practice of financial nature | -- | -- | 0 | 0.0% | 1 | 2.9% |
| **Total** | **--** | **--** | **32** | **100%** | **34** | **100%** |
|  | | | | | | |
| **Access** | | | | | | |
| Delay in admission/treatment | -- | -- | 11 | 22.9% | 6 | 17.1% |
| Waiting list delay | -- | -- | 3 | 6.3% | 0 | 0.0% |
| Staff member or contractor unavailable | -- | -- | 1 | 2.1% | 2 | 5.7% |
| Inadequate resources/lack of service | -- | -- | 10 | 20.8% | 8 | 22.9% |
| Refusal to provide services | -- | -- | 21 | 43.8% | 19 | 54.3% |
| Failure to provide advice about transport options | -- | -- | 1 | 2.1% | 0 | 0.0% |
| Physical access/entry | -- | -- | 1 | 2.1% | 0 | 0.0% |
| **Total** | **--** | **--** | **48** | **100%** | **35** | **100%** |

1. Only complaint issues identified in health complaints closed over the past three years are included in Appendix 5.2. [↑](#footnote-ref-1)
2. Only complaint issues identified in health complaints closed over the past three years are included in Appendix 5.4. [↑](#footnote-ref-2)
3. Only complaint issues identified in health complaints closed over the past three years are included in Appendix 5.6. [↑](#footnote-ref-3)
4. Individual complaint issues are not provided, as only 82 of the mental health complaints closed in the 2015-16 financial year recorded issues using the categories in Appendix 5.6 As a result, a significant amount is not available. [↑](#footnote-ref-4)