RESPONDING TO CONCERNS GUIDELINE



Scope

This guideline outlines the process for responding to concerns and complaints received by the South Australian Medical Education and Training (SA MET) Unit regarding Trainee Medical Officer (TMO) education, training, supervision, welfare or patient safety. The process allows anyone to raise instances of non-compliance of safety, health and welfare within their workplace, protecting their safety and that of others in their care.

Introduction

Feedback received by the SA MET Unit is categorised into two categories - a concern or a complaint.

- A concern is any issue that a TMO considers may affect their welfare or their patient's welfare or safety, their education and training and the subsequent requirement to meet the Accreditation Standards (affiliated to accreditation matters).
- > A **complaint** is an expression of concern, dissatisfaction or frustration with the quality, or delivery of patient care and/or TMO welfare (affiliated to operational matters).

Concerns and complaints can manifest in several different ways. Some examples are listed below.

- Issues relating to the education and training provided to TMOs, for example TMOs consenting or being asked to consent patients without appropriate training.
- Issues relating to TMO supervision, for example TMOs receiving inadequate levels of supervision, as defined by the SA MET Unit's Supervision Guideline or TMOs being asked to undertake procedures they have not been adequately trained in.
- Issues relating to TMO wellbeing (any real or potential issue that could result in a TMO coming to physical or professional harm), for example TMOs working excessive amounts of overtime, leaving them fatigued and prone to errors.
- > Issues relating to **patient safety** (any real or potential issue relating to a TMO that could compromise patient care), for example TMOs prescribing unfamiliar or inappropriate medication.

Patient safety and TMO wellbeing concerns are not mutually exclusive; an issue which endangers patient safety will often endanger TMO safety and vice versa.

Concerns and complaints can be raised with the SA MET Unit through different sources, including TMOs or their advocates, other healthcare staff, Local Health Network (LHN) management or anonymously. Concerns and complaints can be received via the SA MET Unit website, email, phone, during an accreditation visit or through the accreditation survey process.

It is most likely that issues will be discovered in face-to-face meetings with TMOs. Due to the numbers of TMOs in certain rotations, an individual's anonymity may be compromised by the reporting of a patient/trainee safety concern. If this is likely, the accreditation team will inform the TMO of this and determine if they wish to proceed.

The SA MET Unit's Manager Accreditation will allocate a risk rating to the concern or complaint received. An assessment will indicate whether the feedback is extreme, major, moderate, or minor. The meanings for each of the risk ratings are noted within the definitions.

The SA MET Unit will progress all concerns and complaints via the process outlined within this document.

Consent to Disclose Information

Information identifying a complainant TMO, or information related to their complaint or concern must not be disclosed without their consent as per Section 93 of the *Health Care Act 2008*.

If the complainant does not provide permission to the SA MET Unit to disclose information and the matter is of an **extreme or major risk**, the SA MET Unit has a duty of care to report and escalate the matter to appropriate channels as per the Responding to Concerns Flowchart depending on the severity of complaint/concern. Where a TMO has not provided consent for disclosure of their personal information, the information may nevertheless be disclosed if one or more of the following exceptions apply:

- > where disclosure is required or authorised by or under law; or
- > where disclosure is reasonably required to prevent a serious threat to the life, health or safety of a person or a serious threat to public health or safety; or
- > where disclosure is limited to what is reasonably required in connection with the management or administration of the Department, an attached office, a hospital or SAAS.

Personal information can be disclosed where disclosure is reasonably required to prevent a serious threat to the life, health or safety of a person or a serious threat to public health or safety. This is a high threshold which is dependent on the circumstances, and it may be that very few complaints reaching this threshold would be addressed by the TMO complaints process, as these very serious threats may have already been addressed by other forms of immediate action.

In practice, it is preferable that the consent of the TMO be obtain before personal information is disclosed, or that conversations are held with the TMO to agree to what extent any unidentifiable information may be disclosed in an effort to resolve the concern or complaint.

Responding to concerns or complaints

SA MET Unit Response (Appendix – 1. Response to Concerns Flowchart)

- > A concern or complaint received by the SA MET Unit will be entered into the Responding to Concerns Register immediately. The Manager Accreditation in conjunction with the Project Officer, Accreditation will identify the issues raised and determine whether the issue is a concern or complaint and the level of risk (minor/moderate, major or extreme – see definitions).
- > If the issue is considered a concern with an **extreme** risk, the Accreditation Manager or Project Officer will immediately inform and seek advice from the Manager, SA MET Unit, Health Advisory Council (Advisory Council) Presiding Member and the Accreditation Committee (AC) Chair and action as per advice, for example:
 - The Accreditation Manager or Project Officer will forward the concern on behalf of the Advisory Council Presiding Member to the LHN's Chief Executive Officer (CEO) and Executive Director of Medical Services (EDMS) immediately, copying in the Director of Clinical Training (DCT). It is expected that the LHN will take responsibility and resolution of the issue.
- If the issue is considered a concern with a *major* risk, the Accreditation Manager or Project Officer will immediately inform and seek advice from the Manager SA MET Unit, Advisory Council Presiding Member and the AC Chair and action as per advice, for example:
 - The Accreditation Manager or Project Officer will forward the concern immediately to the LHN's EDMS, copying in the DCT and Medical Education Officer (MEO). It is expected that the LHN will take responsibility and resolution of the issue.
- If the issue is considered a complaint with an extreme risk, the Accreditation Manager or Project Officer will immediately inform and seek advice from the Manager, SA MET Unit and the Chief Medical Officer (CMO) and action as per advice, for example:
 - The Accreditation Manager or Project Officer will forward the complaint on behalf of the CMO to the LHN's CEO and EDMS immediately, copying in the DCT. It is expected that the LHN will take responsibility and resolution of the complaint.
- If the issue is considered a complaint with a *major* risk, the Accreditation Manager or Project Officer will immediately inform and seek advice from the Manager SA MET Unit and the CMO and action as per advice, for example:
 - The Accreditation Manager or Project Officer will forward the complaint immediately on behalf of the CMO to the LHN's EDMS, copying in the DCT and MEO. It is expected that the LHN will take responsibility and resolution of the complaint.
- If the issue is considered a concern or complaint with a *minor or moderate* risk, the Accreditation Manager or Project Officer will immediately inform the LHN's DCT and MEO. It is expected that the LHN will take responsibility and resolution of the concern or complaint.

- > LHNs are expected to provide the outcome of the concern or complaint back to the SA MET Unit's Accreditation team within the deadline set. When the concern or complaint is resolved, the Accreditation Manager or Project Officer will enter the outcome into the Responding to Concerns Register. A Responding to Concerns report will be tabled as an agenda item at the Advisory Council and AC meetings on a quarterly basis for review by members. This includes an opportunity to review the concerns or complaints received and any actions required.
- > If the concern or complaint is unable to be resolved, the Accreditation Manager or Project Officer will liaise with the Manager SA MET Unit and the AC Chair for advice.
- > The complainant will be contacted by the Accreditation Manager or Project Officer to advise of the outcomes of their complaint or concern.
- > The Accreditation Manager or Project Officer will follow up on any Advisory Council actions. If no actions are required, the concern or complaint will be updated on the Responding to Concerns Register and closed.
- > The SA MET Unit Accreditation team will refer to the Responding to Concerns Register before each accreditation site visit to check whether any incidents have occurred in a domain or unit. Questions may be included in the visit schedule to address the concern or complaint.

Response to Concerns Received via TMO Survey

Responses from TMO survey questionnaires on their experiences within accredited terms, may contain feedback regarding issues which pose risks to patient and/or TMO safety.

When a concern is identified within a survey response, the SA MET Unit will respond as indicated below and will also follow the New Unit Accreditation or Reporting on Accreditation Proviso processes.

SA MET Unit Response (Appendix – 2. Concerns received via TMO survey)

- > When a concern or complaint is received through an Accreditation Survey, it will be entered into the Responding to Concerns Register and allocated the level of risk.
- If the issue is considered a concern or complaint with any level of risk, the Project Officer, Accreditation will follow the New Unit Accreditation or Reporting on Accreditation Proviso processes and additionally follow this responding to concerns document.
- > If the issue is considered a concern with an **extreme** risk, the Accreditation Manager or Project Officer will immediately inform and seek advice from the Manager, SA MET Unit, Advisory Council Presiding Member and the AC Chair and action as per advice (outside of the New Unit or Proviso processes), for example:
 - The Accreditation Manager or Project Officer will forward the concern on behalf of the Presiding Member to the LHN's CEO and EDMS immediately, copying in the DCT. It is expected that the LHN will take responsibility and resolution of the issue.
- > If the issue is considered a concern with a *major* risk, the Accreditation Manager or Project Officer will immediately inform and seek advice from the Manager SA MET Unit, Advisory Council Presiding Member and the AC Chair and action as per advice (outside of the New Unit or Proviso processes), for example:
 - The Accreditation Manager or Project Officer will forward the concern immediately to the LHN's EDMS, copying in the DCT and MEO. It is expected that the LHN will take responsibility and resolution of the issue.
- If the issue is considered a complaint with an extreme risk, the Accreditation Manager or Project Officer will immediately inform and seek advice from the Manager, SA MET Unit and the CMO and action as per advice (outside of the New Unit or Proviso processes), for example:
 - The Accreditation Manager or Project Officer will forward the complaint on behalf of the CMO to the LHN's CEO and EDMS immediately, copying in the DCT. It is expected that the LHN will take responsibility and resolution of the complaint.
- > If the issue is considered a complaint with a *major* risk, the Accreditation Manager or Project Officer will immediately inform and seek advice from the Manager SA MET Unit and the CMO and action as per advice (outside of the New Unit or Proviso processes), for example:

- The Accreditation Manager or Project Officer will forward the complaint immediately on behalf of the CMO to the LHN's EDMS, copying in the DCT and MEO. It is expected that the LHN will take responsibility and resolution of the complaint.
- LHNs are expected to provide the outcome of the concern or complaint back to the SA MET Unit's Accreditation team within the agreed time. When the concern or complaint is resolved, the Accreditation Manager or Project Officer will enter the outcome into the Responding to Concerns Register. A Responding to Concerns report will be tabled as an agenda item at the Advisory Council and AC meetings on a quarterly basis for review by members. This includes an opportunity to review the concerns or complaints received and any actions required.
 - o If the complaint or concern continues with no resolution a site visit may be required.
- > The complainant will be contacted by the Accreditation Manager or Project Officer to advise of the outcomes of their complaint or concern.
- > The Accreditation Manager or Project Officer will follow up on any Advisory Council actions. If no actions are required, the concern or complaint will be updated on the Responding to Concerns Register and closed.

Response to Concerns received during an Accreditation Visit

Accreditation team members undertaking accreditation visits may, in interviews, encounter issues which pose a risk to patient and/or TMO safety.

If an accreditation team encounters a patient and/or TMO safety issue, it has a duty to investigate this to the best of its ability and inform the relevant authorities at the site before the visit concludes.

When a concern or complaint is identified within an accreditation site visit, the SA MET Unit will respond as indicated below and will also follow the accreditation visit process.

SA MET Unit Response (Appendix – 3. Concerns received during an accreditation site visit)

When an accreditation team encounters a *major* or *extreme* patient or TMO safety issue, it should follow the process outlined below to ensure duty of care obligations are fulfilled. Any *moderate* or *minor* concern will be included as a proviso within the accreditation report.

- Team members should ask questions in meetings with TMOs to investigate the issue and gather further information. The issue should then be discussed with the appropriate term supervisor, or escalated to the MEO and/or DCT, to determine the extent of the issue, whether this has been detected by the unit and whether steps have been taken to resolve it. This should then be reported to LHN management either immediately or at the end of day debrief.
- > The Accreditation Manager or Project Officer will enter the concern and actions taken into the Responding to Concerns Register as soon as practicable. The Project Officer will liaise with the Manager Accreditation and the Manager of the SA MET Unit. The concern will be summarised to the Advisory Council Presiding Member and AC Chair.
- > LHN management will be responsible for producing a report detailing how the concern has been resolved, which will be submitted to the SA MET Unit Accreditation team within one week of the visit.
- The Accreditation Manager or Project Officer will liaise with the Accreditation team members, AC Chair and Advisory Council Presiding Member and if satisfied the concern has been fully resolved, the Manager Accreditation will inform the LHN.
- > The Accreditation Manager or Project Officer will enter the outcome into the Responding to Concerns Register, close the matter and report to the AC and Advisory Council as part of quarterly reporting.
- If it has not been possible to fully resolve the concern by the time of submission of the report, the site will be responsible for completing an action plan detailing how and when the concern will be resolved. Monitoring of the action plan will take place outside of the regular accreditation report process; however, the final report may contain provisos relating to the concern.
- > The LHN's action plan will be tabled to the AC and Advisory Council as part of the quarterly reporting.
- > The Accreditation Manager or Project Officer will follow up on any Advisory Council actions. If no actions are required, the concern will be updated on the Responding to Concerns Register and closed.

Outcome

In addition, to the above-mentioned processes, should concerns exist the Advisory Council will determine the ongoing suitability of accreditation with the potential accreditation outcomes:

- > Continued accreditation
- > Conditional accreditation with provisos for monitoring
- > Rescinded accreditation

Conditional accreditation with provisos will be managed by the SA MET Unit Accreditation team in conjunction with the medical education staff of the LHN ensuring proviso timeframes are met.

As with other decisions, a unit or facility can appeal in line with SA MET Unit's Internal Review Policy.

Evaluation

An annual performance review survey will be sent to the Advisory Council, Accreditation and Doctors in Training committees as well as LHN staff to provide feedback on the performance of the policy, to reflect on the quarterly reports and note any quality improvements that need to be made.

Related Documents

- > SA MET Accreditation Policy
- > SA MET Guide to Accreditation
- SA MET Guide to Internal Review Policy
- > The Trainee Medical Officer (TMO) Wellbeing Guideline
- > Process for Reporting on Accreditation Provisos
- > Accreditation Evaluation Guideline
- > New Unit Accreditation Process
- > Accreditation Team Member Guide
- > SA Health Roles, Responsibilities and Governance Policy Directive
- > SA Health Governance Accountability and Consultation Framework
- > National Safety and Quality Health Services (NSQHS) Standards
- > SA MET Unit Accreditation Standards
- > Work Health and Safety Act 2021 (SA)
- > Work Health and Safety Regulations 2021 (SA)

Monitoring

The SA MET Unit will periodically review the effectiveness of this process and related documents.

Definitions

Accreditation – a quality assurance process that establishes and monitors the education and training provided for TMOs within facilities to ensure high standards of clinical training for TMOs. Accreditation may be granted to a facility or a new unit for 6 months, 12 months or four years.

Accreditation Standards – accreditation activities are assessed against published accreditation standards. These standards have endorsed by the South Australian Minister for Health and Wellbeing and the Australian Medical Council in 2014.

Complaint - an expression of concern, dissatisfaction or frustration with the quality, or delivery of patient care &/or TMO welfare (affiliated to operational matters).

Concern – any issue that a TMO considers may affect his/her welfare or his/her patient's welfare or safety, his/her education and training and the subsequent requirement to meet the Accreditation Standards (affiliated to accreditation matters).

Extreme Risk- Having, or likely to have a dangerous or excessive impact on TMO welfare, the education and training received by TMOs and the subsequent requirement to meet the Accreditation Standards &/or patient safety e.g. but not limited to; any bullying and/or harassment especially but not exclusively by senior staff, inadequate or no supervision of TMO.

- > **Major Risk -** Having, or likely to have a significant impact on but not considered excessive or dangerous to TMO welfare, the education and training received by TMOs and the subsequent requirement to meet the Accreditation Standards &/or patient safety, e.g. but not limited to; excessive working hours or overtime which may impact patient care, an unresolved dispute with a supervisor.
- Moderate Risk Having, or likely to have a lesser impact on TMO welfare or the education and training and the subsequent requirement to meet the Accreditation Standards received by TMOs and no impact on patient safety. Can be successfully resolved without involvement of the AC or Advisory Council. e.g., but not limited to; inability of TMO to attend education sessions for any reason, inadequate orientation to hospital or unit.
- > **Minor Risk** No impact on or risk to TMO welfare &/or patient safety or the education and training received by TMOs and subsequent requirement to meet the Accreditation Standards. Can be resolved without involvement of the AC or Advisory Council.

Local Health Network – There are ten LHNs in South Australia that manage the delivery of public health services and other community-based health services. The LHNs may comprise a single hospital or a group of public hospitals with a geographic or functional connection.

South Australian Medical Education and Training Health Advisory Council – a Minister for Health and Wellbeing appointed Council incorporated to improve the quality of education, training and welfare for TMOs within South Australia and make recommendations for the accreditation of TMO positions.

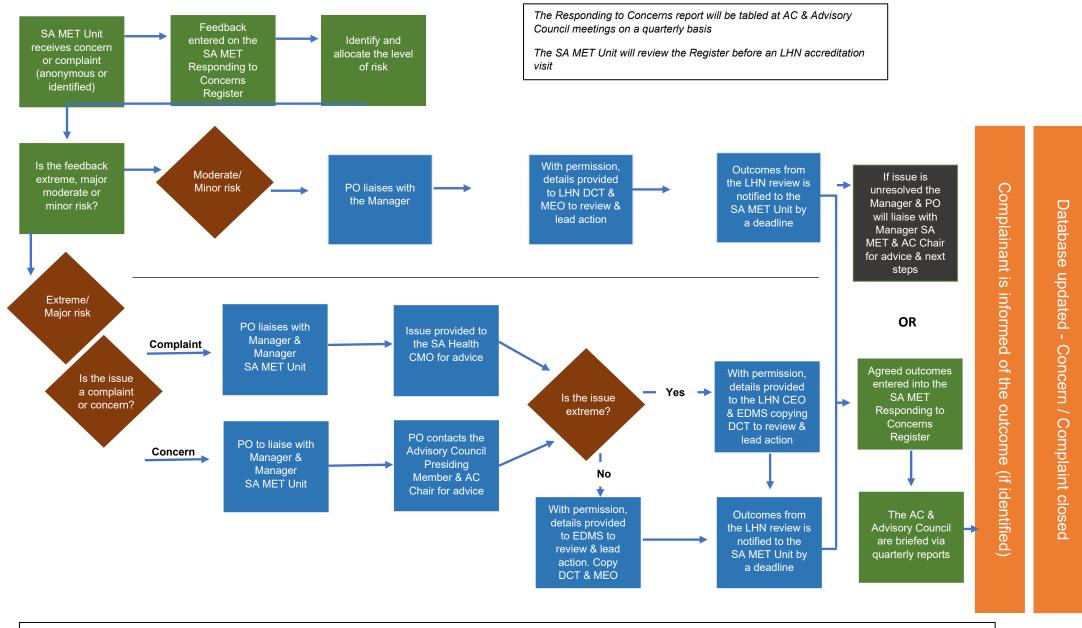
South Australian Medical Education and Training Accreditation Committee – a sub-committee of the SA MET Health Advisory Council that is responsible for an efficient and effective accreditation process considering jurisdictional requirements, national program developments and the needs of TMOs.

South Australian Medical Education and Training Unit: Supports the functions of the SA MET Health Advisory Council and various committees and subcommittees providing advice to the Health Advisory Council. The unit is committed to supporting the education and training of TMOs in South Australia and supports the Health Advisory Council in ensuring an open and transparent accreditation system.

Document History

Date effective	Author/Editor	Approved by	Version	Description
4 April 2012	Senior Project Officer, Accreditation	SA MET Health Advisory Council Accreditation Subcommittee	1.0	Original Document
19 June 2013	Project Officer, Accreditation	Senior Project Officer, Accreditation	1.1	Update process
6 August 2014	Project Officer, Accreditation	Senior Project Officer, Accreditation	1.2	Minor updates
4 February 2015	Project Officer, Accreditation	Senior Project Officer, Accreditation	1.3	Minor update
14 June 2018	Project Officer, Accreditation	Manager Education and Accreditation	1.4	Major Update
27 May 2020	Manager, Education & Accreditation	SA MET Health Advisory Council and SA MET Accreditation Committee	2.0	Major Review
14 February 2023	Manager, Education & Accreditation	SA MET Accreditation Committee and SA MET Health Advisory Council	3.0	Major Review
28/7/2023	Project Officer, Accreditation	Manager Accreditation	3.1	Minor update

Appendix 1: RESPONDING TO CONCERNS FLOWCHART



PO = Education & Accreditation Project Officer Manager = Education & Accreditation Manager AC = Accreditation Committee DCT = Director of Clinical Training MEO = Medical Education Officer Advisory Council = Health Advisory Council EDMS = Executive Director Medical Services CEO = Chief Executive Officer

LHN = Local Health Network

TS = Term Supervisor CMO = Chief Medical Officer TMO = Trainee Medical Officer

Appendix 2: RESPONDING TO CONCERNS FLOWCHART – TMO Survey Process

All feedback to

be actioned

through New Unit

Accreditation/

Proviso

Processes

Identify &

allocate the level

of risk



LHN is informed of the outcome (if applicable)

If the complaint or concern continues with no resolution a site visit may be

required

OR

Outcomes

entered into the

SA MET

Responding to

Concerns

Register

The AC &

Advisory Council

are briefed via

quarterly reports

Database updated

feedback concern closed



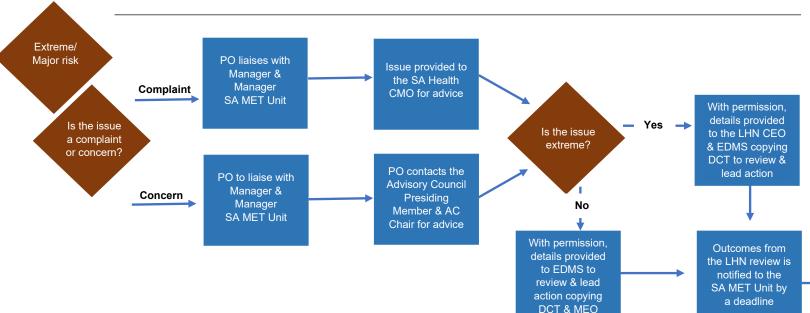
Issue entered on

the SA MET

Responding to

Concerns

Register



Legend

SA MET Unit

receives

feedback from a

TMO survey

(anonymous)

PO = Education & Accreditation Project Officer Manager = Education & Accreditation Manager AC = Accreditation Committee

DCT = Director of Clinical Training MEO = Medical Education Officer Advisory Council = Health Advisory Council

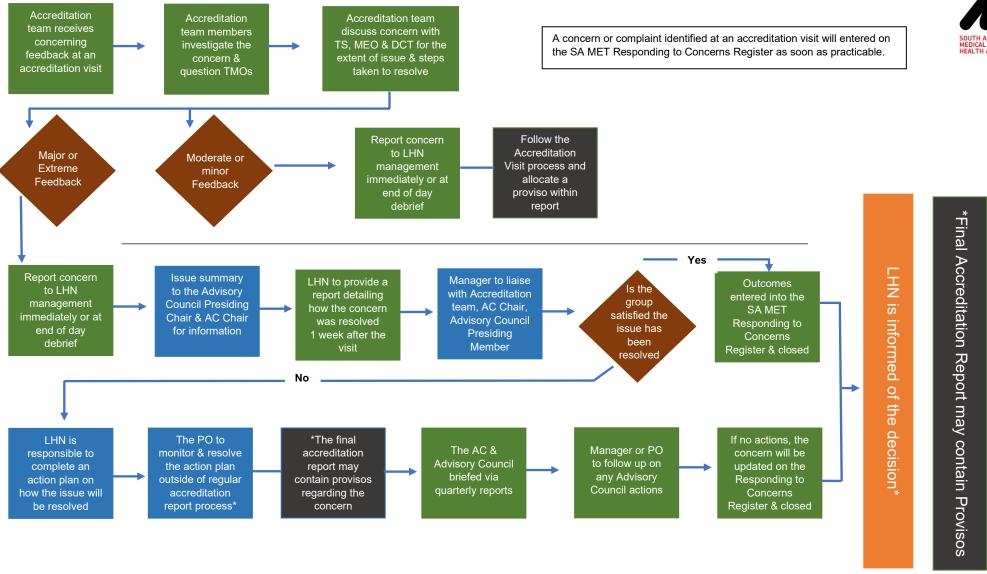
EDMS = Executive Director Medical Services CEO = Chief Executive Officer LHN = Local Health Network

CMO = Chief Medical Officer TMO = Trainee Medical Officer

TS = Term Supervisor

Appendix 3: RESPONDING TO CONCERNS FLOWCHART – During an Accreditation Site Visit





Legend

PO = Education & Accreditation Project Officer Manager = Education & Accreditation Manager AC = Accreditation Committee DCT = Director of Clinical Training MEO = Medical Education Officer Advisory Council = Health Advisory Council EDMS = Executive Director Medical Services
CEO = Chief Executive Officer
LHN = Local Health Network

TS = Term Supervisor CMO = Chief Medical Officer TMO = Trainee Medical Officer