

Scoping Review

Best practice for complaints management processes and evaluation

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Executive Summary

Purpose

The Patient and Family Experience Office are developing an Evaluation Framework for Complaints Management at Monash Health. A literature review was requested to identify current best practice for complaint management systems as well as processes of evaluation within the healthcare setting.

Objectives

1. What is current best practice for complaint management systems/frameworks/processes in healthcare?
2. What is best practice in evaluating a complaint management framework?

Identifying Evidence

A search of Google, Google Scholar and Health related websites was undertaken using a snowballing technique. Combinations of the terms consumers, patients, carers, family members, complaints management, processes, systems, frameworks or evaluation were used to identify relevant evidence from 2009 to present.

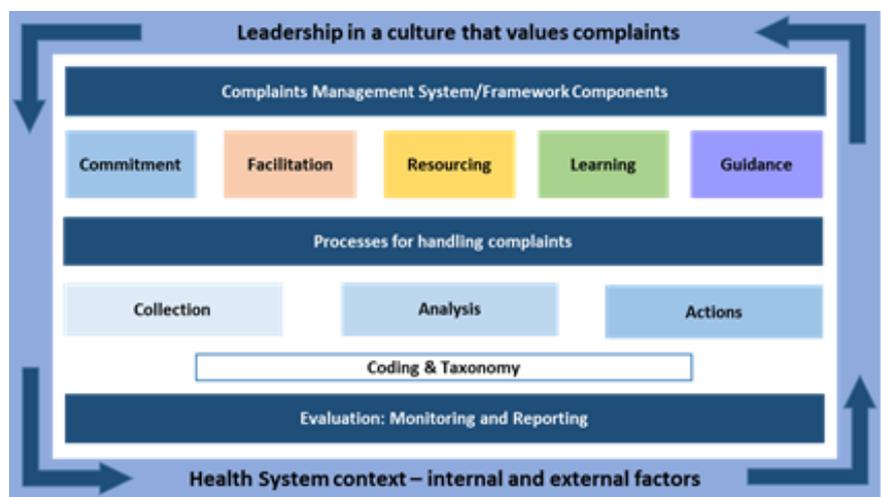
Summary of Results

This review identified 15 items of literature [1-15] that provide insights into what best practice includes.

The review outlines the following aspects of an effective complaints management systems

- Best practice for complaints management systems
- Best practice for complaints management processes
- Effective interventions to strengthen patient complaint systems/processes
- Evaluation Frameworks

Key components of a patient complaint management system in healthcare are described in Figure 1.



A management system is embedded with an organisational culture that values complaints. Commitment, facilitation, resourcing, learning and guidance are critical components

Specific processes of complaints management include :

- **acknowledging** complaints promptly
- **assessing** complaints and assigning them priority
- **planning** an investigation if one is needed
- **investigating** the complaint to determine the facts and options for resolution
- **responding** to the complainant, including by keeping them informed of progress and providing a detailed response
- **providing** a remedy where appropriate
- **advising** on options for internal and external review if the complainant remains dissatisfied
- **considering** if there are any systemic issues that warrant attention

Elements to consider when developing the Evaluation Framework for Complaints Management have also been detailed in the full report.

Conclusion

Effective patient complaint management systems constitute a crucial component of well-performing health systems. Providing a valuable source of insight into safety-related problems within healthcare organisations, patient complaint data can provide unique patient-centred insights into aspects of care that may not be easily captured through traditional quality and safety metrics. In order to best utilise complaints data for improvements the organisation should have a well-documented complaints management framework which incorporates the key components identified in the literature around commitment, facilitation, resourcing, learning and guidance.

Utilisation of consistent complaint coding and taxonomy is crucial in collecting, analysing and actioning for improvement. Evaluation frameworks can assist in developing consistent approaches and comprehensive evaluations that are useful, feasible, ethical and accurate. Examples of components and questions are provided in this review to assist Monash Health to build a successful framework for evaluating the complaints management system and processes.

To develop a culture that values complaints, it is critical that the organisation promotes complaints as a valuable source of feedback on the organisation's systems, services and staff – and actively implement changes to services, systems, practices, procedures and/or products if weaknesses are identified through managing and analysing complaints.

Purpose

The Patient and Family Experience Office are developing an Evaluation Framework for Complaints Management at Monash Health. A literature review was requested to identify current best practice for complaint management systems as well as processes of evaluation within the healthcare setting.

Objectives

1. What is current best practice for complaint management systems/frameworks/processes in healthcare?
2. What is best practice in evaluating a complaint management framework?

Identifying evidence

A search of Google, Google Scholar and Health related websites, such as Medline, was undertaken using a snowballing technique.

Inclusion Criteria

Population	Consumers (patients, carers, family members)
Concept	Complaints management processes or systems or frameworks or evaluations
Context	Healthcare setting only
Types of information	Peer reviewed literature, grey literature
Timeframe	2009 - current

Results

Fifteen pieces of evidence from Australia and the UK have been included in this scoping review.

Complaints management systems

Effective patient complaint management systems constitute a crucial component of well-performing health systems [1]. A key lesson from recent reviews has highlighted that patient complaints should be part of an integrated system that ensures feedback is responded to and always acted upon [1].

An accepted measure of patient-provider relationships and patients' satisfaction with services they receive, patient complaints data can contribute towards improved patients' engagement in health services, improved quality of health services, management and development of staff, improved accountability, assured compliance with standards and improved overall health systems performance [1].

Providing a valuable source of insight into safety-related problems within healthcare organisations, patient complaint data can provide unique patient-centred insights into aspects of care that may not be easily captured through traditional quality and safety metrics [2].

This review organises the summary of evidence of best practice for complaints management by:

- Best practice for complaints management systems
- Best practice for complaints management processes
- Effective interventions to strengthen patient complaint systems/processes
 - The importance of coding and taxonomy for analysing patient complaints
- Evaluation
 - Evaluating the complaints management system/processes
 - Integrating the complaints system into the work of the whole organisation
 - Monitoring and reporting of complaints for improvement

Best practice for complaints management systems

To ensure Australian healthcare organisations align with best practice standards the Australian Commission on Safety and Quality in Healthcare provide specific actions under Clinical Governance for feedback and complaints management [3]. The actions state that health service organisations:

- Have processes to seek regular feedback from patients, carers and families about their experiences and outcomes of care
- Have processes to regularly seek feedback from the workforce on their understanding and use of the safety and quality systems
- Use complaints management data to improve safety and quality systems [3].

The standards also highlight that organisation-wide complaints management systems:

- Encourage and support patients, carers and families, and the workforce to report complaints
- Involve the workforce and consumers in the review of complaints
- Resolve complaints in a timely way
- Provide timely feedback to the governing body, the workforce and consumers on the analysis of complaints and actions taken
- Use information from the analysis of complaints to inform improvements in safety and quality systems
- Record the risks identified from the analysis of complaints in the risk management system
- Regularly reviews and acts to improve the effectiveness of the complaints management system [3].

While the standards serve as a good starting point, state [4-7] and commonwealth [8] ombudsman offices as well as departments of health [9-12] provide comprehensive outlines for best practice principles and requirements for complaints management frameworks and processes.

Essential components [5, 11] of an effective complaint management system include: Commitment, Facilitation, Resourcing, Learning and Guidance. The key principles associated with these components are outlined in Table 1.

Best practice for complaints management processes

Best practice for complaints management processes are widely reported and include the following:

- **acknowledging** complaints promptly [4, 6-8, 10]
- **assessing** complaints and assigning them priority [4, 6-8, 11, 13]
- **planning** an investigation if one is needed [4, 6, 8]
- **investigating** the complaint to determine the facts and options for resolution [4, 6-8, 13]
- **responding** to the complainant, including by keeping them informed of progress and providing a detailed response [4, 5, 7, 8, 11]
- **providing** a remedy where appropriate [4, 6-8, 10]
- **advising** on options for internal and external review if the complainant remains dissatisfied with the agency's response [4, 6-8, 11]
- **considering** if there are any systemic issues that warrant attention [4, 6, 8, 11]

Effective interventions to strengthen patient complaint systems/processes

Mirzoev and Kane (2018) recently undertook a review of the literature to synthesize existing evidence and provide practical options of effective interventions to strengthen patient complaint systems to inform future policy and practice as well as identifying key outstanding gaps in the existing literature to inform agenda for future research [1].

Their summary of effective interventions [1] highlights three key areas of the complaints process, collection of complaints, analysis of complaint data and action on complaints, as well as overarching directives. These are outlined in Table 2.

Table 1. Effective complaints management system

Essential components	Guiding principles
<p>Commitment: Develop a culture that values complaints [4-8, 10, 11]</p>	<p>Guiding principles for appropriate culture and organisational commitment:</p> <ul style="list-style-type: none"> • People focus: Be open to complaints from members of the public about standards of service delivery and organisational policies, procedures and practices. Be committed to promoting and implementing an accessible complaints system as a means to address problems with service delivery and to enhance the performance of the organisation and its staff. • Responsiveness: Respond to complaints in a timely manner. Recognise and reward good complaint handling by staff. • Objectivity and fairness: Address each complaint with integrity and in an objective and impartial manner. • No detriment: Take all reasonable steps to ensure that people making complaints are not adversely affected because a complaint is made by them or on their behalf • Openness and Transparency: A positive, open and transparent attitude to receiving, managing and responding to complaints.
<p>Facilitation: Make it easy for people to make complaints to your organisation [4, 5, 8, 10, 11]</p>	<p>Guiding principles for facilitating complaints:</p> <ul style="list-style-type: none"> • Visibility and transparency: Widely publicise information about how and where complaints may be made to your organisation. • Accessibility: Implement a system to manage complaints that is easy to understand and accessible to people who may require assistance. • Supporting: Support and assist people who need help to make a complaint. • Flexibility: Be flexible in how complaints may be made to or about your organisation. Ensure making a complaint is free of charge. • Acceptance: Accept anonymous complaints where they raise significant issues and there is enough information to be able to look into the issues raised.
<p>Resourcing: Appropriately train, empower and adequately resource staff managing complaints [4, 5, 8, 10]</p>	<p>Guiding principles for equipping staff to manage complaints:</p> <ul style="list-style-type: none"> • Training: Provide appropriate training, support and resources to staff who handle complaints. • Recognition: Recognise and reward good complaint handling by staff. • Delegations: Provide staff with appropriate authority and guidance to be able to resolve issues that commonly arise in the handling of complaints. • Empowering: Empower staff to effectively implement the organisation's complaint handling policies and procedures as relevant to their role.
<p>Learning: Analyse complaints and their outcomes to improve systems and processes [4, 5, 8-11, 13]</p>	<p>Guiding principles for learning from complaints:</p> <ul style="list-style-type: none"> • Record keeping: Have appropriate record keeping policies and procedures in place and implemented to ensure that adequate records are made and retained about the receipt, handling and outcomes of complaints. • Monitor trends: Organisations should monitor trends on a regular basis as part of their activities directed at continuous improvement. • Continuous improvement: Regularly analyse, report and review the subject matter and outcomes of complaints to measure the quality of the organisation's service and make system improvements. • Integration: Use information gathered from complaints to review the products, systems, services and procedures or the organisation as a whole.
<p>Guidance: Develop policies and procedures to guide staff in the management of complaints [5]</p>	<p>Guiding principles for the development of policies and procedures for the management of complaints</p> <ul style="list-style-type: none"> • Clarity: Develop policies and procedures regarding how complaints will be received, recorded, managed and reported. • Availability: Ensure policies regarding how complaints will be managed are available and communicated clearly to the public and staff.

Table 2. Summary of effective interventions to improve systems of patient complaints [1].

Collection of complaints	Analysis of complaint data	Action on complaints
<ul style="list-style-type: none"> • Raise public awareness of rights and available complaint channels • Provide dedicated complaints officer, confidential counsellors, patient groups and citizen monitors • Train staff on how to deal with patient emotion, recognise patterns and communicate effectively • Implement user-friendly system of soliciting feedback e.g. telephone, interviewing and follow-up • Carry out outreach to reach vulnerable groups 	<ul style="list-style-type: none"> • Instigate a common database and systematic approach to recording to find patterns • Develop standardised templates for calls and emails • Identify dedicated officers to register complaints • Create separate patient relations department or mediator • Develop structures and spaces for learning within organisations 	<ul style="list-style-type: none"> • Ensure adequate and timely response to each complaint, even if a simple apology or an explanation • Ensure effective communication through training, reflection, mentoring and coaching • Encourage QI at unit or facility levels • Provide peer-support and training to receivers of complaints • Instigate centralised reporting
Overarching directives		
<ul style="list-style-type: none"> • Develop robust policy and regulatory framework • Appoint independent regulator and mediator e.g. ombudsman, committee or inspectorate • Establish risk management team within health facilities • Implement demand-side interventions (e.g. awareness raising) to enhance social accountability • Create partnerships between hospitals and patient advocacy organisations, for example through implementation of hospital governing boards 		

The importance of coding and taxonomy for analysing patient complaints

In order to effectively analyse complaints data standardised coding and taxonomy should be utilised [2]. In a review conducted by Reader et al (2014) they developed a taxonomy for guiding and standardising the future analysis of patient complaints with the purpose being to support research and practice on analysing and using information reported in letters of patient complaints [2].

Using the coding and taxonomy table outlined in table 3, Reader et al (2014) propose that it will allow for healthcare organisations to be compared and for deviations (in comparison with the norm) in particular types of complaint to be identified. The build-up of lower level complaint issues (eg, staff attitudes) within a unit or hospital might be better captured, and used as a potential (or ‘early-warning’) indicator of poor quality care, as shown with near miss data in the medical error literature [2].

Table 3. Patient Complaint Taxonomy [2].

Domains	Categories	Sub-categories
Clinical	Quality	Examinations: <i>Inadequate patient examination by clinical staff</i>
		Patient Journey: <i>Problems in the coordination of treatment in different services by clinical staff</i>
	Safety	Quality of care: <i>Substandard clinical/nursing care</i>
		Treatment: <i>Poor, or unsuccessful, clinical treatment</i>
Management	Institutional issues	Errors in diagnosis: <i>Erroneous, missed, or slow clinical diagnosis</i>
		Medication errors: <i>Errors in prescribing or administering medications</i>
	Timing and access	Safety incidents: <i>Events or complications that threatened the safety of patients</i>
		Skills and conduct: <i>Deficiencies in the technical and non-technical skills of staff that compromise safety</i>
Relationships	Communication	Bureaucracy: <i>Problems with administrative policies and procedures</i>
		Environment: <i>Poor accommodation, hygiene, or food</i>
	Humaneness/caring	Finance and billing: <i>Healthcare-associated costs, or the billing process</i>
		Service issues: <i>Problems with hospital services for supporting patients</i>
Patient rights	Patient rights	Staffing and resources: <i>Inadequate hospital staffing and resource levels</i>
		Access and admission: <i>Lack of access to services or staff</i>
	Confidentiality	Delays: <i>Delays in admissions or access to treatment</i>
		Discharge: <i>Early, late, or unplanned discharge from the hospital</i>
Consent	Referrals: <i>Problems in being referred to a healthcare service</i>	
	Discrimination: <i>Inadequate, delayed, or absent communication with patients</i>	
Discrimination	Discrimination	Incorrect Information: <i>Communication of wrong, inadequate, or conflicting information to patients</i>
		Patient-staff dialogue: <i>Not listening to patients, lack of shared decision-making, and conflict</i>
Discrimination	Discrimination	Respect, dignity, and caring: <i>Rude, disrespectful, or insensitive behaviours to patients</i>
		Staff attitudes: <i>Poor attitudes towards patients or their families</i>
Discrimination	Discrimination	Abuse: <i>Physical, sexual, or emotional abuse of patients</i>
		Confidentiality: <i>Breaches of patient confidentiality</i>
Discrimination	Discrimination	Consent: <i>Coercing or failing to obtain patient consent</i>
		Discrimination: <i>Discrimination against patients</i>

Evaluation Frameworks

It is widely reported that feedback from the workforce, patients and carers can be used to improve safety and quality in healthcare. The Commission on Safety and Quality mandate that an effective complaints management system is in place and used for improvement [3, 13]. In order to understand whether the complaints management system is effective, an evaluation framework can assist in developing consistent approaches and comprehensive evaluations that are useful, feasible, ethical and accurate [14]. Developing an evaluation framework provides a broad overview of the evaluation approach, which can then be linked to the specific activities/outputs, performance measures and timelines to conduct the evaluation via an incorporated or associated evaluation plan [14].

This review of the evidence identified two [5, 10] examples of evaluation frameworks for complaints management. What is presented below is a summary of elements to consider when developing the Evaluation Framework for Complaints Management at Monash Health.

Evaluating the complaints management system/processes

One example of an evaluation for complaints management was identified from the Health Service Executive (HSE) (2018) who conduct their evaluation yearly to assess what works well and where improvements can be made [10]. This involves examining feedback, statistics, trends and policies and asking staff, former complainants and other service users what they think about the system [10].

Specific questions to evaluate the feedback process include [10]:

- Asking service users what they know about the feedback process and what they expect.
- Asking service users who have used the feedback process in relation to a complaint what they thought of the process and the outcomes.
- In relation to complaints, using statistical information to check timelines, the number and types of complaints that have been made and how this has changed over time.
- Reviewing the outcomes of individual complaints including a review of recommendations made.
- Using feedback data to determine the learning that has occurred, how this learning has been shared, the changes that have been implemented and how these changes have been monitored.
- Comparing local complaints management data against external standards, and where possible with services of similar size and nature.

The Complaint Management Framework developed by Ombudsman SA (2016) aims to help organisations understand what is involved in establishing a comprehensive and effective complaint management system and provides a self-assessment checklist for each component of such a system [5]. The checklist is presented in Table 4.

Other self-assessment checklists were identified and are similar to that presented in Table 4 [6, 12, 15].

Table 4. Organisation self-assessment checklists to ensure comprehensive and effective complaints management systems

Components	Evaluation Questions - Have we taken appropriate action to ensure that:
Commitment [5]	<ul style="list-style-type: none"> • Staff are aware of our commitment to prompt complaint handling? • We have a system which allows us to record, track and respond to complaints? • All staff understand that if a complaint is made about them, the focus is on rectifying issues and improving systems? • We reward good complaint handling by staff? • People making complaints and/or their representatives are protected from adverse action due to their making of a complaint?
Facilitation [5, 12]	<ul style="list-style-type: none"> • Information about our complaint management system and complaint handling policy is widely publicised to staff and the public? • Information about our complaint management system and complaint handling policy is readily available to the public in languages spoken by significant groups of people who interact with us? • Our complaint management system is easy for the public to understand and access, particularly people who may require assistance? • Staff have knowledge of, and sensitivity to, Aboriginal and Torres Strait Islander cultural issues? • We allow people to make complaints to us in a variety of ways, e.g. telephone, email, in person? (Do we need additional ways given our customer base?) • We regularly consult with and seek feedback from community groups and Non-Government Organisations (NGOs) that advocate for vulnerable members of our client base? • We have an internal review mechanism for people who are dissatisfied with the outcome of their complaint and/or our handling of it? • People wishing to complain about our handling of their complaint are advised of any external review mechanisms available to them?

Components	Evaluation Questions - Have we taken appropriate action to ensure that:
Resources [5, 12]	<ul style="list-style-type: none"> • Staff whose duties include complaint handling have delegation or authority to resolve complaints? • Staff are aware of their delegation or authority to resolve complaints? • Staff whose duties include complaint handling have good communication skills and a desire to resolve issues raised by people making complaints? • Staff whose duties include complaint handling are provided with training and supervision on effective complaint handling? • Staff have knowledge of and sensitivity to young people, people with disability, Aboriginal, Torres Strait Islander people and people from culturally and linguistically diverse backgrounds? • Staff whose duties include complaint handling have adequate resources to manage complaints, including policies and procedures on how complaints should be dealt with? • Staff are rewarded for good complaint handling? • Support is provided to staff managing complaints? • Staff who are not part of the complaint management area provide prompt and appropriate assistance and information to colleagues handling complaints?
Learning [5]	<ul style="list-style-type: none"> • Our policies and procedures emphasise the importance of good record keeping? • Staff whose duties include complaint handling are aware of our policies and procedures concerning record keeping? • We regularly review trends and issues in complaint data? • We regularly analyse systemic issues and outcomes of complaints received? • We use the information gathered from our analysis of complaints to improve our practices, procedures and systems? • We regularly report to the head of our organisation and senior management on our complaint handling (including: the operation of our complaint management system, complaint trends and systemic issues) and recommendations for improvement where appropriate? • We report to staff, our stakeholders and the public on our complaint handling and any actions we have taken in response to issues raised?
Guidance [5]	<ul style="list-style-type: none"> • We have a complaint handling policy and procedures? • Our complaint handling policy and procedures provide guidance to staff on how to manage complaints? • Staff and contracted service providers are aware of our complaint handling policy and procedures? • We provide regular training and feedback to staff managing complaints on their compliance with our policies and procedures? • We have a system to record, track, analyse and report on complaints? • Complaints management policy is readily accessible to consumers, staff and other stakeholders via multiple types of media (ie pamphlets, brochures, web sites, within patient information packs).[12]

Integrating the complaints system into the work of the whole organisation

The complaints management system/framework should be integrated into the work of the whole organisation, meaning that:

- complaints are used to identify gaps in the quality of the service [5, 11],
- regular analysis of complaint issues and trends relating to service quality and associated systems [4]
- investigation of complaints is collaborative [5, 11], and
- information is shared among management teams (including clinicians and quality improvement teams), administrators and consumers [5, 11].

Monitoring and reporting of complaints for improvement

Complaint information can provide a picture of weaknesses in existing programs, policies, and service and program delivery. This is, however, only possible if good records are kept and the information is regularly analysed [4, 8, 13]. Retaining good records should include a register of information including [8]:

- details of complaints
- categories or common issues raised in complaints
- the steps taken to address complaints
- complaint outcomes

- any undertakings or follow up action required to resolve the complaint or issues identified.

Reports on complaints should include the following [4, 5, 8]:

- the number of complaints received and trends in complaints over time
- the outcomes of complaints, including matters resolved at the frontline
- spikes in complaints
- the geographical spread of complaints
- the characteristics of the complainants—for example, whether they are businesses, community groups or individuals and whether they represent a particular demographic background
- Complaint issues, whether occurring just once or more often, that expose a weakness in the agency's processes or that raise questions about integrity or reputation.
- systemic issues identified
- the number of requests received for internal and/or external review

To maximise accountability and improve service delivery, information collection should also include [4]:

- Records about the type of training and instruction that individuals involved in the complaint management system have received.
- The organisation's criteria for responding to requests for records made by a complainant or somebody acting on their behalf – this may include time limits, statutory rights, what kind of information will be provided, to whom and in what format.
- Specifying how and when de-identified complaint data may be disclosed to the public or other organisations to whom the complaint refers.

It is good practice to produce regular reports on complaints for presentation to senior management. The reports should be part of the agency's normal business activity. Information of this nature can help organisations improve services, safeguard their reputation and better prepare for the future [8]. Regular analysis of reports also enable trends to be monitored, the quality of customer service to be measured and improvements to be made [4, 5]. When conducting regular reviews of complaint data, it is important to identify whether there have been any internal or external factors (such as changes to legislation or applicable policies, organisational structures or responsibilities, resources or systems) that could have affected the period under review [4, 5].

Organisations should also continually monitor their complaint management systems to ensure complaints are effectively responded to and resolved, and any deficiencies in the operation of the system are identified and rectified. Monitoring may include the use of audits, complainant satisfaction surveys, and online listening tools and alerts [4].

Regular reports should be made to the head of the organisation and senior management about the operation of the complaint management system, complaint trends and systemic issues, and recommendations for improvement where appropriate. Reports to management should balance the need for comprehensive and thorough information against the need for clarity and brevity [4]. A reporting schedule may help to identify when reports should be submitted to various committees or individuals, to ensure that issues are incorporated into relevant meeting agendas [13].

To develop a culture that values complaints, it is critical that the head of an organisation and senior managers send a clear message to staff that complaints can be a valuable source of feedback on the organisation's systems, services and staff – and actively implement changes to services, systems, practices, procedures and/or products if weaknesses are identified through managing and analysing complaints [4].

Conclusions

Effective patient complaint management systems constitute a crucial component of well-performing health systems. Providing a valuable source of insight into safety-related problems within healthcare organisations, patient complaint data can provide unique patient-centred insights into aspects of care that may not be easily captured through traditional quality and safety metrics. In order to best utilise complaints data for improvements the organisation should have a well-documented complaints management framework which incorporates the key components identified in the literature around commitment, facilitation, resourcing, learning and guidance.

Utilisation of consistent complaint coding and taxonomy is crucial in collecting, analysing and actioning for improvement. Evaluation frameworks can assist in developing consistent approaches and comprehensive evaluations that are useful, feasible, ethical and accurate. Examples of components and questions are provided in this review to assist Monash Health to build a successful framework for evaluating the complaints management system and processes.

To develop a culture that values complaints, it is critical that the organisation promotes complaints as a valuable source of feedback on the organisation's systems, services and staff – and actively implement changes to services, systems, practices, procedures and/or products if weaknesses are identified through managing and analysing complaints.

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