

## CORPORATE OFFICE

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26 October 2021

Michael Vaughan

Email: [fyi-request-16802-906337e6@requests.fyi.org.nz](mailto:fyi-request-16802-906337e6@requests.fyi.org.nz);

Dear Michael Vaughan

### RE Official Information Act request CDHB 10727

I refer to your email dated 19 September 2021 to the Ministry of Health which they subsequently transferred to us on 30 September 2021 requesting the following information under the Official Information Act from Canterbury DHB. Specifically:

#### 1. What is the Covid-19 treatment protocol for hospitalised cases?

We have recently responded to a similar question regarding triage protocols used for Covid cases in hospital (CDHB 10713). This response is available on our website (see link below). We are therefore declining a response to this question pursuant to section 18(d) of the Official Information Act i.e. “...the information requested is or soon will be publicly available”.

[https://www.cdhb.health.nz/about-us/document-library/?\\_sft\\_document\\_type=official-information-act-response](https://www.cdhb.health.nz/about-us/document-library/?_sft_document_type=official-information-act-response)

#### 2. Are some DHB's following different treatment protocols from others?

Canterbury DHB follows the national agreed protocols and guidance published on the Ministry of Health website (refer to link below).

<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-information-health-professionals/covid-19-advice-all-health-professionals>

3. Are DHB's free to make decisions about treatments for individuals with Covid-19?
4. To what extent are patients able to participate in decision-making about their treatment programmes?
5. If a patient requests a blood test for Vitamin D and/or the administration of high dosage Vitamin C, are hospital staff able to provide these?
6. Do hospital staff have the right to refuse a patient's request and, if so, is there a process for a patient to appeal the decision?

Treatment by necessity needs to be individualised, and that is a decision made between the treating team and the patient. When appropriate for all patients we check vitamin D levels and give supplements. We do not offer vitamin C unless part of a clinical trial for unproved treatments.

As we are responsible for our prescribing, we do have a right to refuse to give unproven treatments such as hydroxychloroquine and vitamin C.

The Canterbury DHB has a Consumer Complaints Management Policy, please find attached as **Appendix 1**, and a patient, or their family, are welcome to complain to the DHB or provide feedback on their care verbally, in writing or via the CDHB website. <https://www.cdhb.health.nz/about-us/contact-us/>

I trust that this satisfies your interest in this matter.

You may, under section 28(3) of the Official Information Act, seek a review of our decision to withhold information by the Ombudsman. Information about how to make a complaint is available at [www.ombudsman.parliament.nz](http://www.ombudsman.parliament.nz); or Freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the Canterbury DHB website after your receipt of this response.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Tracey Maisey', with a long horizontal flourish extending to the right.

Tracey Maisey  
**Executive Director**  
**Planning, Funding & Decision Support**

## Purpose

To uphold consumer rights by using a systematic inclusive approach to investigating and resolving Complaints in accordance with the Code of Health and Disability Services Consumers' Rights ("The Code of Rights") and associated legislation.

The Canterbury District Health Board's (CDHB) and West Coast District Health Board's (WCDHB) complaints management process is a part of the quality and risk management system.

## Policy

- CDHB/WCDHB continuously strives to deliver quality services. CDHB/WCDHB invites and welcomes feedback from Consumers, family and the public on performance and experiences of using its services. Feedback processes will be accessible to the public, with Consumers informed of their rights, how to make a Complaint and the ability to access independent support when using services.
- CDHB/WCDHB will facilitate in a respectful manner, the fair, simple, speedy and efficient resolution of Complaints in accordance with the Code of Rights and associated legislation. This must include an acknowledgement of the concerns raised and open disclosure, as well as an apology if warranted. CDHB/WCDHB will in good faith endeavour to achieve resolution of any issues that arise.
- Making a Complaint will not detrimentally affect the quality of care provided to that individual or anyone whose care is the subject of a Complaint.
- CDHB/WCDHB teams participate in the investigation and resolution of Complaints. In responding to an investigation, they can expect to be treated fairly and be given a meaningful opportunity to participate in the complaints resolution process. The resulting information is used to continuously improve services.
- If the Complainant is dissatisfied with an outcome, he or she will be advised of the options available to them including complaining directly to the relevant statutory office such as the Health and Disability Commissioner. The office of the CDHB/WCDHB CEO can review the complaint resolution process and outcome.
- CDHB/WCDHB will maintain operational and technical governance of an electronic complaints management system based on an approved taxonomy which enables record keeping for all Complaints inclusive of dates, correspondence, and actions taken.

## Scope

Applies to all staff employed (whether permanent, fixed term or casual), honorary staff, agency workers, students, volunteers, contractors and every other person working in CDHB/WCDHB facilities and funded services.

## Exclusions

Compliments and suggestions

Employment Issues

## Definitions

### Complaint

Any expression of dissatisfaction with any aspect of a service which CDHB/WCDHB provide which has not been immediately resolved to the Complainants' satisfaction. This includes all Complaints relating to the quality of care of an individual Consumer and their rights under the Code of Rights.

A Complaint may be received verbally, in writing, online via the CDHB/WCDHB website or through a third party (with the Consumer's knowledge and consent if that Consumer has capacity to make this choice) including an advocate.

A Complaint does not include an expression of dissatisfaction which is anonymous, made by a third party but not supported by the relevant Consumer (if that Consumer has capacity to make this choice), or contains insufficient detail to enable CDHB/WCDHB to respond. Those expressions of dissatisfaction will still be recorded in an alternate section of the complaints management system, communicated to the relevant division, and followed-up by CDHB/WCDHB as appropriate in the circumstances.

### Customer Services Manager/Coordinator

The person fulfilling the role of Customer Services Manager/Coordinator within each division and who has the delegated responsibility for coordinating CDHB/WCDHB's response to Complaints. Their tasks are listed in the responsibilities section of this policy.

### Consumer

Any user of healthcare services or disability services consumer.

### Conflict of Interest

A situation in which a person is in a position or could be perceived to be in a position to derive personal benefit from actions or decisions made in their official capacity or they have a personal connection to the complaint which means that their ability to handle the matter impartially is or could be in doubt.

### Complainant

Person or advocate who makes the Complaint either about their own care or the care of another Consumer (with that Consumer's knowledge and consent if he or she has capacity to make this decision).

### Employment issue

An issue which relates to the performance or conduct of an employee.

### Investigation Coordinator

The person assigned responsibility to investigate and respond to the Complaint in consultation with the Customer Services Manager/Coordinator. The Customer Services Manager/Coordinator may act as the Investigation Coordinator.

### Ministerial Complaints

Enquiries that are received from a Member of Parliament regarding dissatisfaction with any aspect of the CDHB's/WCDHB's services.

## Statutory Complaints

Complaints received directly from the offices of the Health and Disability Commissioner, Privacy Commissioner, Human Rights Commissioner, or the Ombudsman.

## Timeframes

The following timeframes apply to Complaints directly to CDHB/WCDHB about the services we provide:

### 5 working days

All Complaints, (even where they raise an Employment Issue) are acknowledged in writing within five working days of receipt. If resolved within the five days the resolution must be documented in the complaints management system. This timeframe runs from the first working day after receipt of the Complaint.

### 20 working days

All Complaints are responded to in full within 20 working days following the date CDHB/WCDHB acknowledged receipt in writing, or the Consumer is informed in writing of the need for further time and the reason for it. This timeframe runs from the first working day after the Complaint is acknowledged.

### Over 20 working days

The Consumer is given written updates at intervals of not more than 20 working days to provide a clear understanding of the ongoing plan for addressing the Complaint and the time frames for key steps in continuing the complaint resolution process.

## Statutory Complaints

When handling Statutory Complaints, CDHB/WCDHB must meet the timeframes for responses as set by the relevant statutory office such as the Health and Disability Commissioner or the Privacy Commissioner.

## Informing Consumers

Consumers will be informed of their right to complain and be provided with information on how to make a Complaint and the ability to access independent support. This information will be displayed prominently throughout the CDHB/WCDHB using a variety of media such as the CDHB/WCDHB website, pamphlets, response boxes, posters and staff communication. Where possible, this information will be provided in different languages, including Maori, English, and other key languages identified by CDHB/WCDHB as frequently used by our population.

Public areas such as entrances to facilities and main waiting areas must display the Code of Rights poster and have the following pamphlets available:

- The Code of Rights
- CDHB Your Rights (Ref. 0208)
- Health and Disability Advocacy Service
- CDHB Interpreter Services – Patient Information (Ref. 3264)

## Roles and Responsibilities

### IMMEDIATE RESPONSE

#### Our Workforce

- Inform Consumers of their right to complain, how to make a Complaint and, when required, assist the individual to submit their Complaint as per Right 10 of the Code of Rights.
- Initiate immediate resolution of issues or Complaints where practicable, listening, acknowledging, asking for their desired outcome and considering resolution options. This stage must include open disclosure and an apology if appropriate.
- If a Complaint is addressed immediately at the point of service but nevertheless raises serious issues about the quality of care, notify the relevant clinical leader/manager and, if appropriate, enter it into the incident management system.
- Participate and cooperate in the Complaint investigation process, and provide timely input to help resolve Complaints as requested.

#### Clinical Leaders/Managers

The following roles and responsibilities apply to any staff member with supervisory responsibilities or line management of an area. In addition to the workforce responsibilities above, Clinical Leaders/Managers must:

- Enable staff to access complaint management education and training.
- Support staff to inform Consumers of their right to complain and initiate immediate resolution where practicable.
- Forward Complaints relating to their area to the relevant Customer Services Manager/Coordinator within 24 hours.
- If at any time during a complaint investigation process, an employee issue is identified seek advice from People and Capability to decide what action to take
- Support (offering EAP if required) any staff within their area who are participating in a Complaint investigation process.
- Assist the Customer Services Manager/Coordinator to obtain timely input from relevant staff for a Complaint investigation process.
- When delegated a Complaint to investigate, work collaboratively with others providing all resulting documents to the Customer Services Manager within timeframes.
- Receive notification of other relevant Complaints and investigations from the Customer Services Manager/Coordinator.
- Implement and monitor improvements to processes and systems to prevent similar issues arising in the future.

#### Investigation Coordinator and staff with delegated responsibility for complaints processes

- Follow the process set out in the associated document (Appendix 1) entitled 'Complaint Investigation Process' to investigate and respond to a Complaint.
- Work with relevant Clinical Leaders/Managers and staff to support timely complaints investigation processes.

## Customer Services Manager/Coordinator

- Each division has someone fulfilling the role of Customer Services Manager/Coordinator who is responsible for coordinating the resolution of complaints. If there is a conflict of interest the Quality Manager, or another staff member nominated by the Corporate Legal Team, will coordinate the complaints process.
- Appropriately delegate the investigation of each Complaint and work collaboratively with peers, Clinical Leaders/Managers and others, to ensure Complaints are managed consistently.
- Ensure processes are in place, provide advice, and support the Investigation Coordinator and other staff so all Complaints are acknowledged, investigated and responded to in a timely, appropriate and effective way.
- Ensure there is a process to enter all Complaints onto the electronic complaints management system and in doing so, secure and maintain the integrity of data on Complaints and Complaint management.
- Where a Complaint raises an Employment Issue, the complaint will be passed on to the relevant Clinical Leader/Manager who, together with People and Capability, will decide what action to take.
- Ensure systems for providing complaint management education and training are in place, and orientate new managers.

## Divisional Quality Teams

- Support clinical leaders, managers, Customer Services Managers/Coordinators, Investigation Coordinators and clinical governance committees to:
  - monitor and analyse Complaints for the purpose of quality improvement;
  - effectively problem-solve; and
  - develop appropriate systemic changes to improve outcomes.
- Work with the Customer Services staff to systematically monitor, analyse, and compile divisional reports on Complaint rates, types, trends, recommendation types, and implementation of recommendations, escalating concerns to clinical governance bodies when necessary.

## Corporate Legal Team

- Provide legal advice on Complaints as required.
- Oversee CDHB's/WCDHB's responses and any follow-up for Complaints via Health Disability and Privacy Commissioners through the Investigation Coordinators and Customer Services Coordinators/Managers.

## General Manager

- Take overall responsibility for the operational management of the complaints process within the service.
- Provide timely support, advice and feedback on a Complaint when requested by the Customer Services Manager/Coordinator, Investigation Coordinator or any other staff member.
- Support and monitor Complaint investigation quality, timeliness of response, and implementation of recommendations.
- Support monitoring of changes arising from Complaints to ensure sustainability of improvements.

## SYSTEM MONITORING AND ASSURANCE

### Quality and Patient Safety Team – Corporate

- Responsible for the system's administration, upgrades and staff training for the complaints management system (Safety1st).
- Work with regional partners to maximise full use of functionality while maintaining the integrity of the complaints management system.
- Oversee organisation wide monitoring, reporting and communicate an overview of organisational trends in complaints and systemic improvements following complaints.
- Report to relevant committees including the Serious Adverse Event Review Committee, the Clinical Board, the Hospital Advisory Committee, and the Quality, Finance and Risk Committee (QFARC).

## GOVERNANCE

### Clinical Governance Committees

- Ensure services have adequate clinical governance and complaints management processes in place.
- Provide timely support, advice and feedback on a Complaint when requested by the Customer Services Manager/Coordinator.
- Monitor the implementation of recommendations, evaluation of the effectiveness of changes, and ensure processes are in place to sustain improvement.
- Proactively promote best practice and sharing of learnings.

### CDHB/WCDHB Serious Event Review Committee

- Monitors timeliness of Complaint responses, implementation of recommendations, systemic improvements and closure.
- Ensures lessons learned are shared within and across the organisation.

### Clinical Board

- Use Consumer feedback and knowledge gained from Complaints to assist with its function of overseeing quality systems in all areas of CDHB/WCDHB responsibility.

### CEO and Executive Management Team

- Promote safety, and ensure adequate systems are in place to effectively manage Complaints, share learnings, and maintain privacy as well as the integrity of data arising from Complaints.
- Proactively utilise Consumer feedback and knowledge gained from Complaints in strategies, principles, policies and practices to promote optimal outcomes, well designed patient centred systems, and an environment conducive to respect, safety, teamwork and learning.

### Quality Finance and Risk Committee (QFARC)

- On behalf of the CDHB/WCDHB Board, use Consumer feedback and knowledge gained from Complaints to support, promote and monitor the development and continuance of a quality and safety environment across the CDHB/WCDHB in order to ensure the sustainable provision of patient centred, quality and safety focused,



evidence based and systems minded health care to the population served by the CDHB/WCDHB.

### **Measurement and evaluation**

Reports demonstrate improvement in key performance indicators such as overall trends, completion of improvement actions and meeting required timeframes.

Regular evaluation of Complainant and Consumer experience shows improvement in key performance indicators for Complainant and Consumer experience.

**Associated Documents**

	Type:	Document titles:
<b>Internal</b>	<b>CDHB Process</b>	<ul style="list-style-type: none"> <li>Complaint investigation process</li> </ul>
	<b>CDHB Policies</b>	<ul style="list-style-type: none"> <li>Informed Consent</li> <li>Incident Management</li> <li>Open Disclosure</li> <li>Advocacy Services</li> <li>Privacy</li> <li>Communication</li> <li>Clinical Governance</li> </ul>
	<b>Forms/ pamphlets</b>	<ul style="list-style-type: none"> <li>Your Rights pamphlet (Ref: 0208)</li> <li>Consumer Response Form (Suggestions/Compliments/Complaints) (Ref: 0152)</li> <li>Consumer Complaint Form (Ref: 0488)</li> <li>Complaints Management Process Leaflet (Ref: 0113)</li> <li>What Do You Think of Our Service Poster (Ref: 0487)</li> <li>Interpreter Services -Patient information pamphlet (Ref: 3264)</li> </ul>
<b>External</b>	<b>Forms/ pamphlets</b>	<ul style="list-style-type: none"> <li>Health &amp; Disability Consumers Advocacy Service Pamphlet</li> <li>Employee Assistance Programme (refer to <a href="http://www.eapservices.co.nz/">http://www.eapservices.co.nz/</a>)</li> </ul>
	<b>Key Legislation</b>	<ul style="list-style-type: none"> <li>Health and Disability Commissioner (HDC) Act 1994</li> <li>Human Rights Act 1993</li> <li>New Zealand Bill of Rights Act 1990</li> <li>Privacy Act 1993</li> <li>Mental Health (Compulsory Assessment &amp; Treatment) Act 1992</li> <li>Public Records Act 2005</li> </ul>
	<b>Key Regulations and Standards</b>	<ul style="list-style-type: none"> <li>Health and Disability Commissioner (Code of Health &amp; Disability Services Consumers' Rights) Regulations 1996</li> <li>Health Information Privacy Code 1994</li> <li>Health &amp; Disability Service (Core) Standards NZS 8134.1: 2008</li> <li>Health (Retention of Health Information) Regulations 1996</li> </ul>

Appendix 1

PROCESSES	TASKS/STANDARD	RESPONSIBILITY
Receive complaint	<p><b>Verbal</b> - Record the complaint and verify the details with the complainant. Forward to the Divisional Complaints Manager/Coordinator within 24 hours of receipt.</p> <p><b>Written</b> - The recorded complaint or letter is forwarded to the Divisional Customer Services Manager/Coordinator within 24 hours of receipt. Record date complaint is received.</p>	Any staff member
Acknowledge complaint	<p>The complaint is registered on the complaints management system as soon as practicable. Acknowledgement letter, information on the CDHB Complaint Management process and relevant pamphlets are sent to the complainant within five working days.</p> <p>If the complaint has been closed, the letter outlines any actions the CDHB proposes to take. Update the complaints management system and close the file.</p>	Divisional Customer Services Manager/Coordinator
Establish Investigation process	<p>Where a Complaint raises an Employment Issue, the complaint will be passed on to the relevant Clinical Leader/Manager who together with People and Capability, will decide what action to take.</p> <p>Discuss with complainant what an acceptable outcome would be. Discuss appropriate support for complainant and staff. Determine who is to investigate the complaint. This person is then referred to as the Investigation Coordinator.</p> <p>Forward a copy of relevant correspondence and any guidance for staff involved in resolving complaint to the Investigating Coordinator as required.</p>	Divisional Customer Services Manager/Coordinator
Investigate Complaint	<p>Investigate the complaint in a way that:</p> <ul style="list-style-type: none"> <li>- is fair and thorough</li> <li>- respects right to privacy</li> <li>- checks the accuracy of information</li> <li>- makes every attempt to resolve the issue</li> <li>- reviews all documentation</li> <li>- consults with all those involved</li> </ul> <p>Obtain input from staff involved as well as relevant divisional leaders, eg. Clinical Director, Director of Nursing, Service Manager. Notify the Divisional Customer Services Manager/Coordinator if the investigation is going to exceed the expected number of days for complaint resolution.</p>	Investigation Coordinator
Has the investigation taken longer than 20 days?	<p>Send progress letter to complainant. Continue to send progress letters every 20 working days until complaint is closed.</p>	Divisional Customer Services Manager/Coordinator
NO	<p>Document all details, including relevant associated correspondence and forward all details to the Divisional Customer Services Manager/Coordinator. Prepare draft letter when agreed in liaison with the Divisional Customer Services Manager/Coordinator. Consult on draft letter with all staff involved and relevant leaders.</p>	Investigation Coordinator
Document	<p>Facilitate meeting and/or sign off the final letter (with prior approval from the Corporate Legal Team for all statutory complaints). If a meeting is held, keep meeting notes and, if appropriate send minutes to the complainant.</p>	Divisional Customer Services Manager/Coordinator
Review and close complaint	<p>Obtain signature of relevant Clinical Leader/Manager on complaint response letter/s where the investigation has shown there has been a significant departure from expected standards, an apology is offered and/or significant recommendations for change and quality improvement have been made.</p>	Divisional Customer Services Manager/Coordinator
Complainant satisfied with results?	<p>Where the complainant is not satisfied with the results of the investigation, advise them of the options available.</p>	Divisional Customer Services Manager/Coordinator
NO		
YES	<p>Update the complaints management system and ensure it is complete. Do not file records of the complaint on the patient's file. Report in summary format to the relevant leaders and staff involved. Update complaints management system.</p>	Divisional Customer Services Manager/Coordinator
Administration		
Monitor trends	<p>Analyse and report on complaint trends. Use data for improvement processes.</p>	Quality & Patient Safety Teams

Owner: Director Quality and Patient Safety Corporate Legal

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