



Commissioner for Complaints

Quarterly Report

Statistical Data

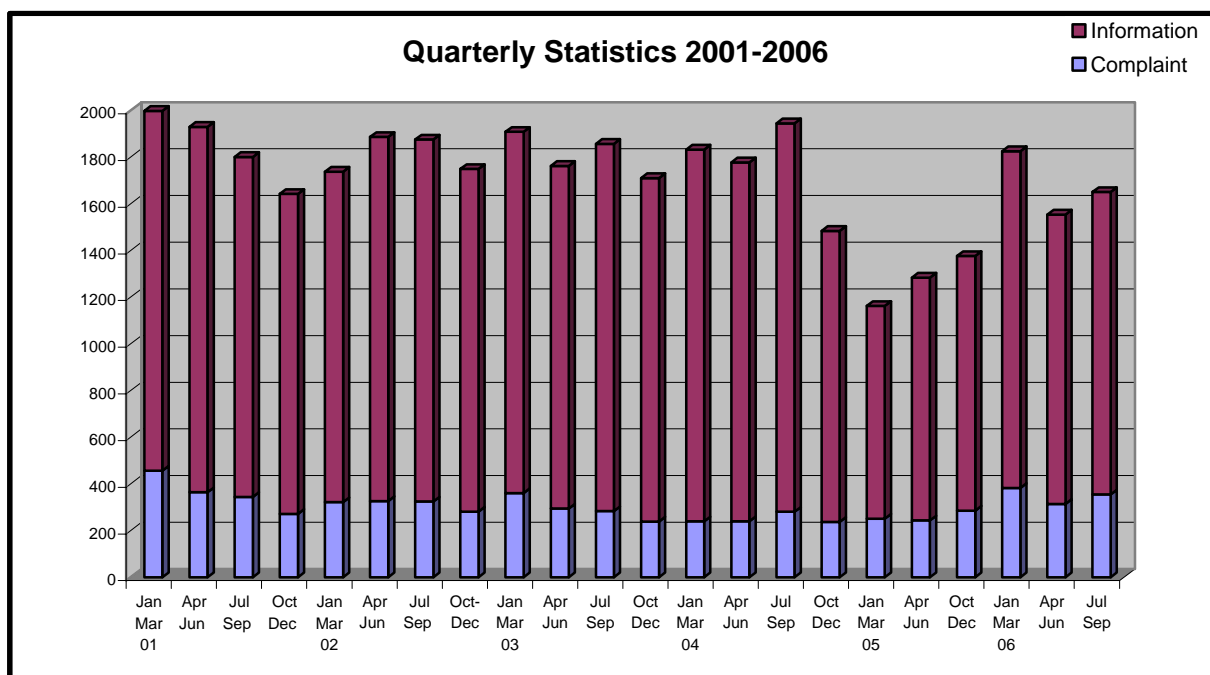
1 July 2006 – 30 September 2006

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National Statistics

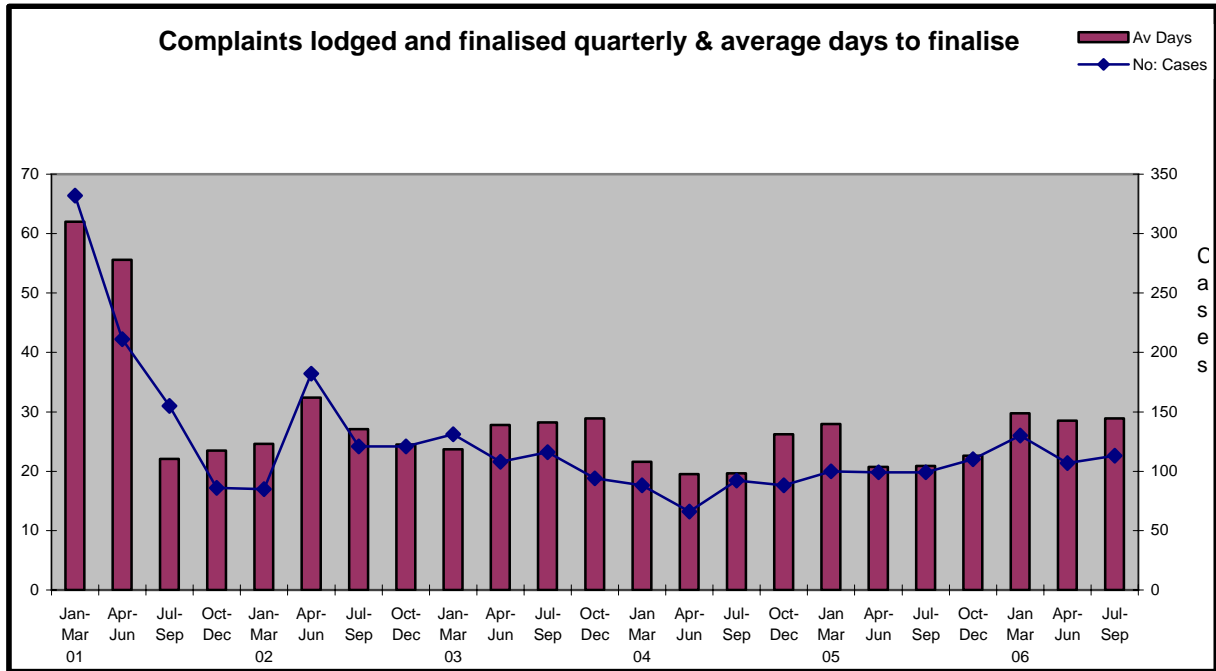
The data show that the number of complaints and information calls recorded each quarter is proportionately similar. The data show that, during the current reporting quarter, the number of complaints and information calls was greater than that recorded in the previous quarter. This increase is thought to be due to continued media interest in aged care.



Quarterly statistics January 2001 – September 2006

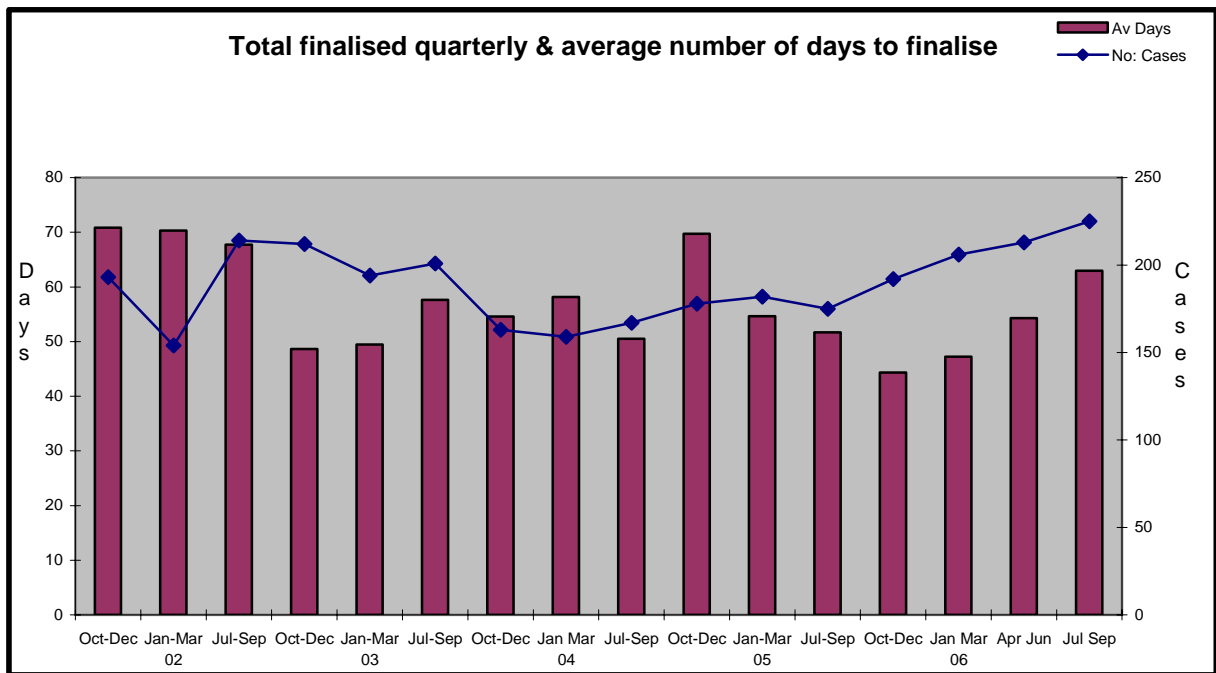
The following figure shows the average number of days taken to finalise complaints accepted during all reporting periods from the January–March 2001 quarter. The data show that the number of complaints lodged and finalised during this quarter are a little lower than those recorded in the January-March quarter and slightly more cases were resolved this quarter than were finalised in the previous quarter. The average number of days taken to finalise complaints has risen.

During the April-June quarter, the average number of days to finalise 107 complaints was 28.53 days compared with the current reporting quarter where the average number of days taken to finalise 113 complaints was 28.90 days.



Cases lodged and finalised during each quarter

Each quarter the Scheme finalises a number of complaints that were accepted prior to the beginning of the current reporting period. The figure below depicts the total number of complaints finalised in a period and the average number of days to finalise all complaints resolved during the period. Between 1 July 2006 and 30 September 2006 the Scheme finalised a total of 223 complaints; 110 of those complaints were lodged prior to 1 July 2006. This figure includes complaints finalised via negotiation, mediation, determination as well as complaints that were not accepted, withdrawn or where the Scheme made a decision to cease to deal with the matter.

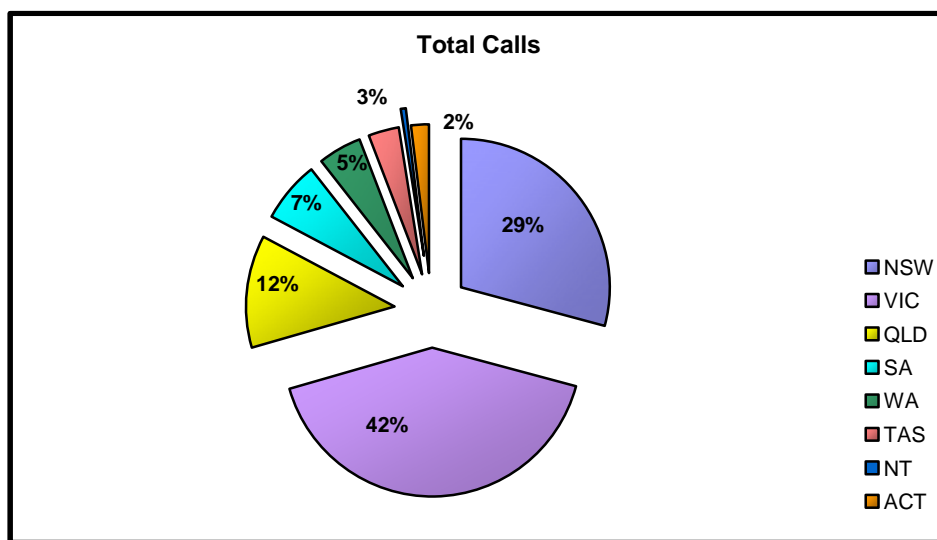


Total number of complaints finalised during the quarter and average days to finalise

The following data is derived from various reporting elements of the Scheme's database and provide information relating to the operation of the Scheme during the reporting period 1 July –30 September 2006. Care should be taken when interpreting these data as changes to the database continue to be made in order to enhance the capacity to capture, identify and report on information collected. Statistics provided here should be regarded as indicative as opposed to definitive information.

Total Number of Calls

During this reporting period the Scheme dealt with a total of 1,650 calls. The following figure shows the breakdown of calls recorded in each jurisdiction, that is the number of complaints and information calls, shown as a percentage of the total number of calls recorded nationally.



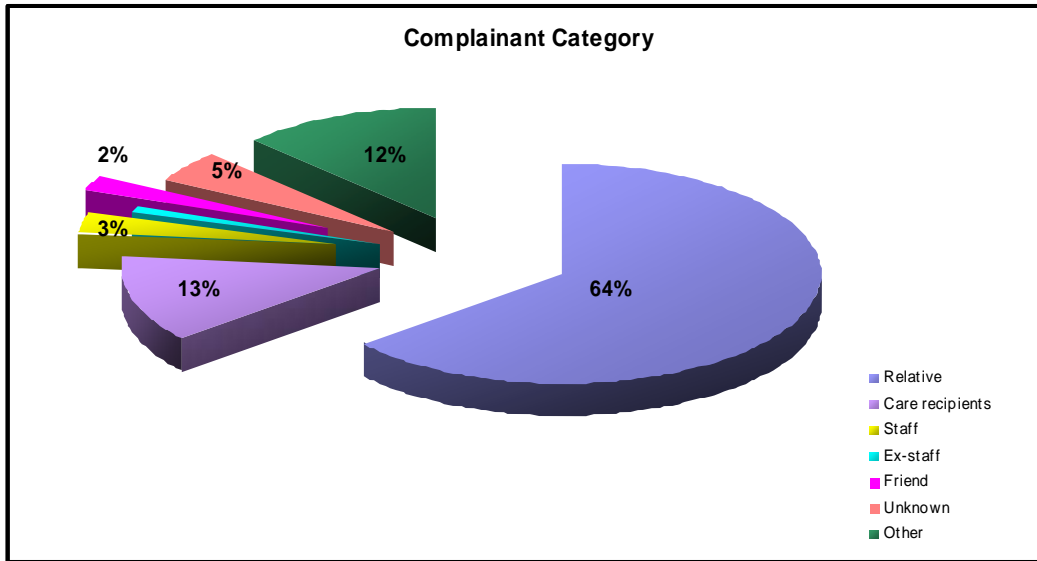
Total Number of Calls by Jurisdiction

Of the 1,650 calls recorded, 354 (21 per cent) were registered as complaints and 1,296 (79 per cent) were registered as information calls.

Recorded Complaints

The majority (95 per cent) of the 354 complaints recorded during the reporting period related to aged residential care services. Seven complaints (two per cent) related to Community Aged Care Packages (CACPs) and nine complaints (three per cent) related to flexible care services. The increase in complaints related to flexible services is a trend not previously identified.

As in previous reports, the relatives of residents lodged the majority of complaints recorded nationally (64 per cent). Across Australia, care recipients lodged 13 per cent of complaints, staff lodged three per cent, friends two per cent and ex staff lodged one per cent. Five per cent of complainants were registered as 'unknown' and a further 12 per cent of complainants were recorded as 'other'.



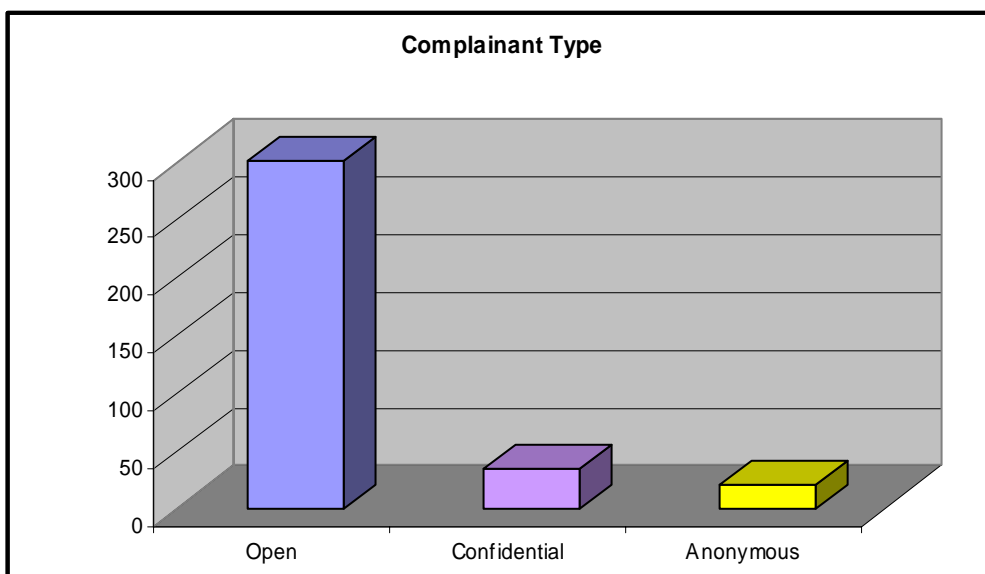
Complainant Category

Site Visits

During the reporting period the database records that officers undertook a total of 74 site visits either as part of the preliminary assessment or ongoing management of the issues raised. A total of 70 facilities were visited and issues relating to 81 individual complaints were discussed.

Complainant Type

Of the 354 complaints recorded nationally during the reporting period, 300 (85 per cent) were registered as open complaints, 34 (10 per cent) as confidential complaints and 20 (six per cent) as anonymous complaints. The number of anonymous complaints recorded increased during this reporting period, however, the relatively small numbers is thought to be a manifestation of recording practices and not a true reflection of the numbers of anonymous complaints. Readers should also note that a proportion of complainants who initially lodge a confidential complaint with the Scheme subsequently amend the status of their complaint and request that the issues being dealt with are managed as an open complaint.



Complainant Type and Volume

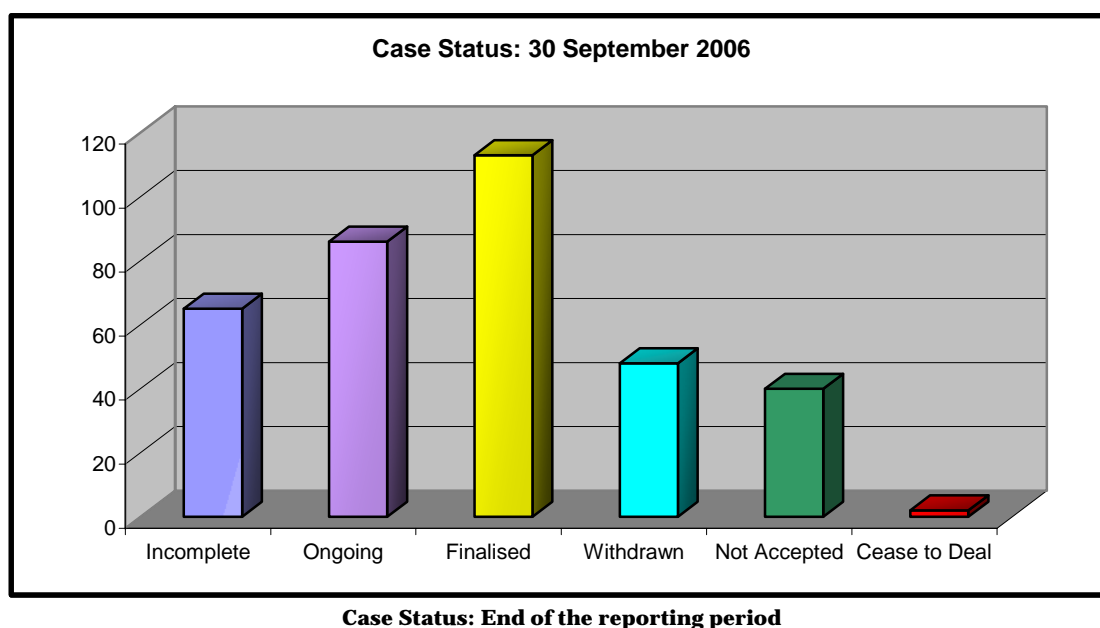
Issue Priorities

Complaint issues are assessed as either urgent or complex. During the reporting period the database identified that from 354 complaints staff prioritised 440 issues. No issues were assessed as urgent.

Average Time to Resolve Complaints

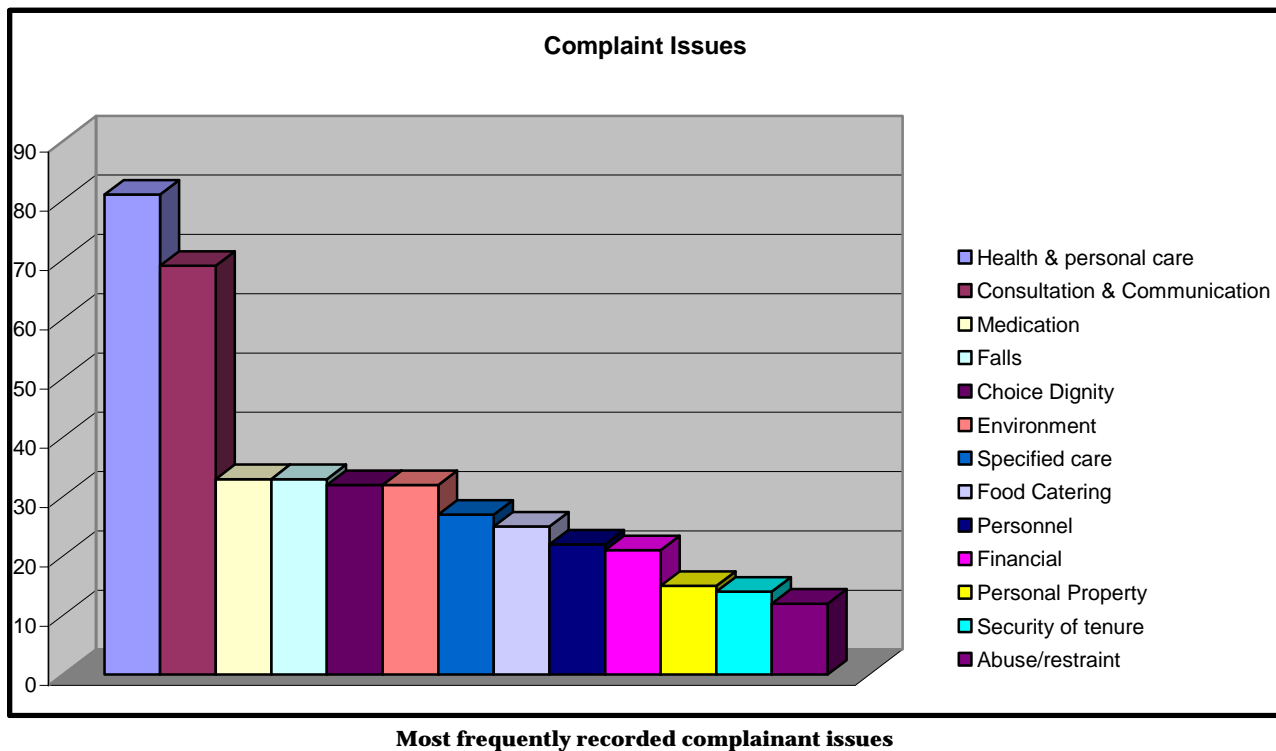
The database provides information regarding new cases both received and finalised within a period. During the quarter the Scheme finalised 113 cases that were lodged during the reporting period. The average number of days to finalise complaints received within the reporting period was 28.9 days. However, during the quarter the Scheme finalised a total of 225 complaints. The average number of days to finalise all complaints, including those lodged prior to 1 July 2006, was 62.92 days. The data show an increase in the number of complaints finalised and in the average number of days to finalise (see Fig 3).

At the end of the reporting period the data show that, nationally, 18 per cent of cases were incomplete, 24 per cent were ongoing, 32 per cent had been finalised, 14 per cent had been withdrawn, eleven per cent were not accepted and the Scheme made a decision to cease to deal with two complaints (one per cent).



Complaint Issues

The Scheme uses 13 key words to record complaint issues. Officers apply one keyword to each separate issue and, wherever possible, are encouraged to create one issue per case. That is, officers are asked to choose the one keyword that outlines the principal underlying concern for the case. Current practice is to create second issues only if necessary and only where a different keyword is applied. The following figure shows the most frequently recorded complaint issues during this reporting quarter.



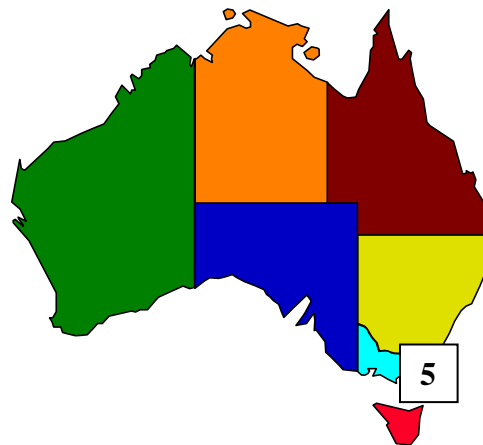
Complaints registered necessarily comprise at least one issue and, given the complexity of complaints, it is expected that the number of issues would exceed the number of complaints. The database report identifies 354 complaints and records 416 identified issues. As in most reporting quarters, health and personal care and consultation & communication are the most frequently recorded complaint issues. Interestingly, the database report also records 46 unspecified issues and in another report 440 issues are identified.

Non acceptance of Complaints and Appeals

Based on *last status change* the database indicates that, across Australia, a total of 51 complaints were not accepted by the Scheme during the reporting period. Twelve of these complaints were received prior to 1 July 2006.

Thirty-nine complaints lodged during the reporting period were not accepted. This equates to 11 per cent of complaints lodged. Of those 27 were not accepted in Victoria, 11 in New South Wales and one in Queensland.

During this quarter, the Commissioner for Complaints was asked to provide advice in relation to five appeals against the non-acceptance of a complaint. This equates to 10 per cent of all non acceptances recorded during the period. All appeals related to complaints lodged in Victoria. The Commissioner also provided advice in relation to one appeal lodged at the end of the previous quarter. Of the five recommendations provided this period, three were to confirm the original decision and two were to partially set aside the decisions made. One appeal recommendation will be provided at the beginning of the next reporting quarter.



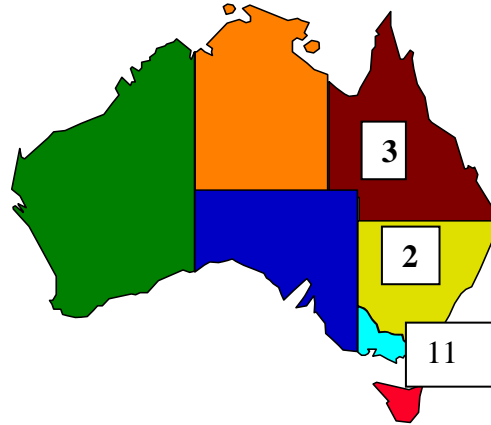
Appeals against Non Acceptance

Reconsideration of a Decision to Cease Dealing with a Complaint

At the beginning of the reporting period the Commissioner was asked to provide advice in relation to an application for reconsideration of a decision to cease to deal with a complaint that had been lodged in the previous quarter. Another application was received during the quarter. Both applications related to decisions made by the Scheme in Victoria. One appeal recommendation was to confirm the original decision the other recommendation was to set aside the original decision.

Referrals and Committee Hearings by State and Territory

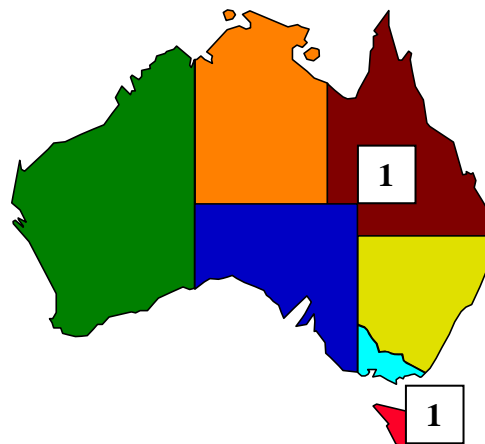
Twelve matters were ongoing and during the reporting period a further 19 complaints were referred for determination. Sixteen hearings were conducted. A total of ten determination reports were provided. The complaints involved a range of issues including communication and consultation, complaints process, nutrition and hydration, medication, behaviour management, clinical care, care planning, infections, falls, physical environment and safety, bonds, fees and charges, access to documentation, security of tenure, wound and pressure care.



Committee hearings this quarter

Determination Reviews by State and Territory

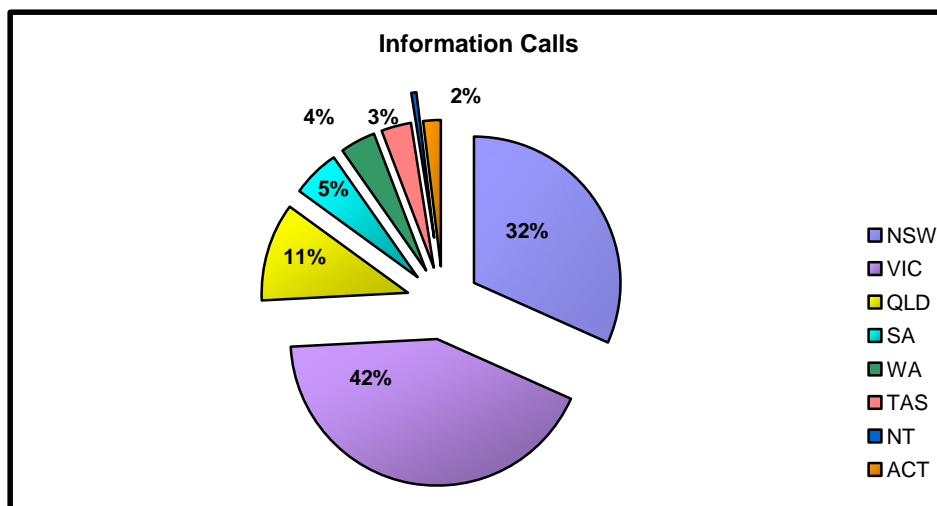
Two Applications for Review were carried over from the previous quarter. The Review Panel is awaiting legal advice in relation to a complaint heard in New South Wales and, in the other case originating in Tasmania, the Panel confirmed the decision of the Committee. Two determinations were appealed during this quarter. In one matter the Application for Review was deemed invalid and was therefore not accepted. The Review Panel has finalised a decision in the second case and this is to be distributed at the beginning of the next quarter.



Determination Reviews conducted.

Information Statistics

During the reporting period 79 per cent of the calls registered by the Scheme (1,296) were recorded as information calls. The following figure shows a percentage breakdown of the total number of information calls received during the period.



Total number of information calls by jurisdiction

The majority of callers (73 per cent) were seeking general information. Twenty-seven per cent of callers (349) sought information outside the jurisdiction of the Scheme. As noted previously Western Australia and Queensland have revised the management and recording of information calls. Whilst complaints officers continue to respond to all information calls, in the main only those relating to matters falling within the Scheme's jurisdiction are recorded on the database.

The Scheme recorded the category of 594 callers (46 per cent) seeking information, that is, the category of 702 callers is unknown. Of the 594 identified callers, twenty-five per cent identified themselves as relatives, four per cent as care recipients, nine per cent as currently employed staff, two per cent as ex-staff, one per cent as friends, one per cent as advocates and six per cent were recorded as 'other'.

The database shows that the time taken to manage information calls was recorded in 981 cases or 76 per cent of all calls taken. Of those recorded, 560 information calls (57 per cent) received by the Scheme nationally were concluded in less than 15 minutes. A further 34 per cent of calls (338) took between 15 and 30 minutes, seven per cent (73) between 30 minutes and one hour and one per cent of calls (10) were concluded between one and three hours.

The database no longer records the nature of information calls.