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HEALTH SERVICES (CONCILIATION AND REVIEW)
ACT 1995

**HEALTH SERVICES
(CONCILIATION AND REVIEW)
REGULATIONS 2010**

Western Australia

Health Services (Conciliation and Review) Regulations 2010

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Health Services (Conciliation and Review) Act 1995

Health Services (Conciliation and Review) Regulations 2010

Made by the Governor in Executive Council.

1. Citation

These regulations are the *Health Services (Conciliation and Review) Regulations 2010*.

2. Commencement

These regulations come into operation as follows —

- (a) regulations 1 and 2 — on the day on which these regulations are published in the *Gazette*;
- (b) the rest of the regulations — on the day after that day.

3. Prescribed time (s. 75(1))

For the purposes of section 75(1) of the Act, the prescribed time is 31 days.

4. Prescribed providers and classes of providers (s. 75(1))

- (1) For the purposes of section 75(1) of the Act, each of these is a prescribed provider —
 - (a) the chief executive officer of the department of the Public Service principally assisting in the administration of the *Prisons Act 1981*;

Health Services (Conciliation and Review) Regulations 2010**r. 5**

- (b) the chief executive of St John Ambulance Australia (Western Australia) Inc.
- (2) For the purposes of section 75(1) of the Act, each of these is a prescribed class of providers —
 - (a) the class comprising boards constituted under the *Hospitals and Health Services Act 1927* (including the Minister responsible for the administration of that Act in relation to any public hospital controlled by him or her under section 7 of that Act);
 - (b) the class comprising the people who manage or are the chief executives of the private hospitals listed in Schedule 1.

5. Return, form of (s. 75(2))

For the purposes of section 75(2) of the Act, the prescribed form is Form 1 in Schedule 2.

Health Services (Conciliation and Review) Regulations 2010
Private hospitals **Schedule 1**

Schedule 1 — Private hospitals

[r. 4(2)(b)]

1. Attadale Private Hospital
2. Bethesda Hospital
3. Glengarry Private Hospital
4. Hollywood Private Hospital
5. Joondalup Health Campus
6. Mercy Hospital
7. Mount Hospital
8. Peel Health Campus
9. St John of God Hospital, Bunbury
10. St John of God Hospital, Geraldton
11. St John of God Hospital, Murdoch
12. St John of God Hospital, Subiaco

Health Services (Conciliation and Review) Regulations 2010
Schedule 2 Form

Schedule 2 — Form

[r. 5]

1. Annual return of complaints information

<i>Health Services (Conciliation and Review) Act 1995 s. 75</i>		
Annual return of complaints information		
The information in this return must relate to complaints received by the provider in the year ending on the previous 30 June (whether or not the complaints were resolved in that year).		
This return must be given to the Director of the Office of Health Review by 31 July each year.		
Name of provider	[name]	
Return year (e.g. 2009/2010)	[year]	
General information about complaints		
Total number of complaints received	[number]	
Total number of complaints referred to another organisation	[number]	
Who made the complaints (the complainants)	People who were users	[number]
	People who were acting on behalf of users	[number]
	Unknown	[number]
Information about users who were complainants or on whose behalf complaints were made		
Gender	Male	[number]
	Female	[number]
	Unknown	[number]
English	First language	[number]
	Not first language	[number]
	Unknown	[number]

Health Services (Conciliation and Review) Regulations 2010Form **Schedule 2**

Aboriginal or Torres Strait Islander	Yes	<i>[number]</i>
	No	<i>[number]</i>
	Unknown	<i>[number]</i>
Age (years)	0-9	<i>[number]</i>
	10-19	<i>[number]</i>
	20-29	<i>[number]</i>
	30-39	<i>[number]</i>
	40-49	<i>[number]</i>
	50-59	<i>[number]</i>
	60-69	<i>[number]</i>
	70-79	<i>[number]</i>
	80-89	<i>[number]</i>
	90+	<i>[number]</i>
	Unknown	<i>[number]</i>
Residential postcode	6000-6199	<i>[number]</i>
	6200-6299	<i>[number]</i>
	6300-6399	<i>[number]</i>
	6400-6499	<i>[number]</i>
	6500-6599	<i>[number]</i>
	6600-6699	<i>[number]</i>
	6700-6799	<i>[number]</i>
	Other or unknown	<i>[number]</i>
Information about complainants who were acting on behalf of users		
Gender	Male	<i>[number]</i>
	Female	<i>[number]</i>
	Unknown	<i>[number]</i>

Health Services (Conciliation and Review) Regulations 2010
Schedule 2 Form

English	First language	<i>[number]</i>
	Not first language	<i>[number]</i>
	Unknown	<i>[number]</i>
Aboriginal or Torres Strait Islander	Yes	<i>[number]</i>
	No	<i>[number]</i>
	Unknown	<i>[number]</i>
Age (years)	18-29	<i>[number]</i>
	30-39	<i>[number]</i>
	40-49	<i>[number]</i>
	50-59	<i>[number]</i>
	60-69	<i>[number]</i>
	70-79	<i>[number]</i>
	80-89	<i>[number]</i>
	90+	<i>[number]</i>
	Unknown	<i>[number]</i>
Residential postcode	6000-6199	<i>[number]</i>
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	6300-6399	<i>[number]</i>
	6400-6499	<i>[number]</i>
	6500-6599	<i>[number]</i>
	6600-6699	<i>[number]</i>
	6700-6799	<i>[number]</i>
	Other or unknown	<i>[number]</i>

Health Services (Conciliation and Review) Regulations 2010Form **Schedule 2**

Categories of complaint		
Access	Delay in admission or treatment	<i>[number]</i>
	Waiting list delay	<i>[number]</i>
	Staff member or contractor unavailable	<i>[number]</i>
	Inadequate resources/lack of service	<i>[number]</i>
	Refusal to provide services	<i>[number]</i>
	Failure to provide advice about transport options	<i>[number]</i>
	Physical access/entry	<i>[number]</i>
	Parking	<i>[number]</i>
	Total	<i>[number]</i>
Communication	Inadequate information about diagnostic testing, treatment procedures and risks	<i>[number]</i>
	Inadequate information about services available	<i>[number]</i>
	Misinformation or failure in communication (but not failure to consult)	<i>[number]</i>
	Inadequate or inaccurate records	<i>[number]</i>
	Inadequate communication	<i>[number]</i>
	Inappropriate verbal/nonverbal communication	<i>[number]</i>
	Failure to listen to patient/client/carer/family	<i>[number]</i>
	Total	<i>[number]</i>

Health Services (Conciliation and Review) Regulations 2010
Schedule 2 Form

Decision making	Failure to consult patient/client	[number]
	Choice regarding admission as public or private patient	[number]
	Consent not informed	[number]
	Consent not obtained	[number]
	Consent invalid	[number]
	Total	[number]
Quality of clinical care	Inadequate assessment	[number]
	Inadequate treatment/therapy	[number]
	Poor coordination of treatment	[number]
	Failure to provide safe environment	[number]
	Pain	[number]
	Medication	[number]
	Complications after surgical procedure	[number]
	Complications after non-surgical procedure	[number]
	Inadequate infection control	[number]
	Patient's test results not followed up	[number]
	Discharge or transfer arrangements	[number]
	Refusal to refer for or assist to obtain a second opinion	[number]
	Total	[number]

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Form **Schedule 2**

Costs	Inadequate information about costs	[number]
	Unsatisfactory billing practice	[number]
	Amount charged	[number]
	Over-servicing	[number]
	Private health insurance	[number]
	Lost property	[number]
	Responsibility for costs and resourcing	[number]
	Total	[number]
Rights, respect and dignity	Patient rights	[number]
	Inconsiderate service/lack of courtesy	[number]
	Absence of caring	[number]
	Failure to ensure privacy	[number]
	Breach of confidentiality	[number]
	Discrimination	[number]
	Failure to comply with the requirements of the <i>Mental Health Act 1996</i>	[number]
	Translating and interpreting service problems	[number]
	Certificate or report problems	[number]
	Denying or restricting access to personal health records	[number]
	Total	[number]
Grievances	Response to a complaint	[number]
	Reprisal following a complaint	[number]
	Total	[number]

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Corporate services	Administrative actions	[number]
	Catering	[number]
	Physical surroundings/environment	[number]
	Security	[number]
	Cleaning (inadequate provision and maintenance of a clean environment)	[number]
	Inaccuracy of records	[number]
	Total	[number]
Misconduct	Fraud/illegal practice of a financial nature	[number]
	Illegal practices (e.g. abortion, sterilisation or euthanasia)	[number]
	Physical or mental impairment of health professional	[number]
	Sexual impropriety (behaviour that is sexually demeaning to a patient/client including comments or gestures)	[number]
	Sexual misconduct	[number]
	Aggression/assault	[number]
	Unprofessional behaviour (e.g. shouting, swearing, inappropriate comments or gestures)	[number]
Total	[number]	
Carers	Failure to consider needs of carer	[number]
	Failure to consult carer	[number]
	Failure to treat carer with respect and dignity	[number]
	Failure to address carer's complaint	[number]
	Total	[number]

Health Services (Conciliation and Review) Regulations 2010Form **Schedule 2**

Information about resolving complaints		
Outcome of complaints	Concern registered	[number]
	Explanation provided	[number]
	Apology provided	[number]
	Costs refunded/reduced	[number]
	Compensation paid	[number]
	Services provided	[number]
	Change in practice/procedure effected	[number]
	Change in policy effected	[number]
	Counselling and/or performance support and development provided to staff member or contractor	[number]
	Complaints withdrawn by complainants	[number]
	Complaints not yet resolved	[number]
Time (days) taken to resolve complaints	0-15	[number]
	16-30	[number]
	31-60	[number]
	61-90	[number]
	91-120	[number]
	121-150	[number]
	151-180	[number]
	181-210	[number]
	211+	[number]

By Command of the Governor,

PETER CONRAN, Clerk of the Executive Council.