

Portfolio:	Fellowship Engagement	Ref. No.	REG-3005
Department:	Complaints		
Title:	Complaints Handling		

1. PURPOSE

The purpose of this policy is to describe the approach used by the Royal Australasian College of Surgeons (RACS) to address, manage and resolve complaints about the conduct of Fellows, Trainees and International Medical Graduates and in addition any complaints arising in relation to the operation of projects under the RACS Global Health Program.

In dealing with complaints RACS will focus on remediation processes to resolve disputes. It is intended that remediation will provide the most productive outcome for all parties concerned.

Where possible RACS will collaborate with other health institutions and regulatory bodies to address complaints.

2. SCOPE

This policy applies to the following people: -

- Fellows, Trainees, International Medical Graduates (IMGs).
- A person with whom RACS Global Health works to deliver its international programs including local partners, organisations, national governments and local participants
- Members of the Australian public i.e. volunteers, participants
- Supporters, donors, trusts and foundations

3. BODY OF POLICY

3.1. Applications

This policy applies to complaints about the conduct of Fellows, Trainees or IMGs during the course of training and assessment, clinical practice, medical research and while acting on behalf of RACS as part of a Committee. It also applies to complaints made against RACS Global Health or against one or more of its Directors, employee, volunteer, partners or anyone else acting officially on its behalf, where the organisation has allegedly failed to meet a requirement or legitimate expectation. Disputes arising in the context of commercial dealings are not considered by RACS.

This policy does not apply to complaints regarding employees of RACS. Complaints regarding RACS employees are to be directed to the RACS People and Culture Team.

3.2. Legislative Framework and Standards

RACS will manage all complaints responsively and fairly and will meet the following minimum standards:

Complaints will be treated respectfully and without prejudice irrespective of age and gender.

Approved By: Deputy CEO/COO

Document Owner: Complaints Lead

Page 1 of 5

Original Issue: September 2016

Version: 3

Approval Date: February 2020

Review Date: February 2023

Portfolio:	Fellowship Engagement	Ref. No.	REG-3005
Department:	Complaints		
Title:	Complaints Handling		

All information provided will be treated with the strictest confidentiality and any sharing of information will be made only with the permission of the parties involved.

All complaints will be acknowledged as soon as possible, ideally within one business day

All parties will be kept informed of any actions being taken and the progress of the complaint, subject to applicable legislation and legal advice.

All complainants will receive a response giving the outcome of their complaint as soon as possible and ideally within thirty business days of receipt. If the matter is more complex further acknowledgement will be sent explaining what further action is required to resolve the complaint and the likely timeframe.

All complaints will be recorded on a Complaints Data Base. All data recorded is held on a confidential basis in accordance with the RACS Privacy of Personal Information Policy.

For the purposes of the operations of Global Health, RACS is as signatory to the ACFID Code of Conduct and is committed to recognising the importance and value of listening and responding to concerns complaints in a safe and confidential manner. (Commitment 7.3.3. ACFID Code of Conduct).

3.3. General Principles

Confidentiality

The complaint shall be dealt with as far as possible on a confidential basis subject to the requirements of procedural fairness.

A person making a complaint to RACS can choose to be identified, maintain confidentiality or specify anonymity. If an anonymous or confidential complaint is made RACS will note the issue but may determine not to proceed with the complaint due to procedural fairness.

Procedural Fairness

Any Fellow, Trainee or IMG against whom a complaint is made is entitled to receive sufficient details of the nature and circumstances of the allegations to allow them to fully respond to the allegations. This may necessitate the disclosure of the identity of the complainant. The identity of the complainant will only be disclosed with the complainant's consent.

Timelines

RACS encourages timely lodgment of complaints to maximise the opportunity to resolve the complaint to the benefit of all parties concerned.

Approved By: Deputy CEO/COO

Document Owner: Complaints Lead

Original Issue: September 2016

Version: 3

Approval Date: February 2020

Review Date: February 2023

Portfolio:	Fellowship Engagement	Ref. No.	REG-3005
Department:	Complaints		
Title:	Complaints Handling		

For this reason, RACS can determine not to accept complaints involving incidents that occurred in excess of 12 months prior to lodging the complaint.

Where RACS decides to accept a complaint, the relevant parties are expected to respond to communications from RACS in a timely manner.

Collaboration

RACS supports the resolution of complaints through established health agency pathways. Where RACS has an established Memorandum of Understanding (MOU) or agreement with another body, RACS will endeavor to collaborate with that other body to address the complaint.

RACS will seek the consent of the complainant prior to engaging in any collaboration, regarding the complaint, with another body.

Complaints Data

All data and complaints received under this policy are collected, used, disclosed and stored in accordance with relevant privacy obligations.

Accountability

Accountability for handling complaints and reporting on the actions and decisions of RACS with respect to complaints handling will be clearly established. All complaints will be recorded through one central point before allocating responsibility to the appropriate person to respond.

Continuous improvement

RACS is committed to the continual improvements of the complaints handling process. This is through collection and classification of complaints trends, analysis and reporting of complaint trends, monitoring of complaints handling processed, auditing/management reviews of the complaints handling process and refining handling in consideration of those reviews.

Organisational commitment to the policy

RACS will ensure that sufficient resources and expertise are provided to handle complaints.

3.4. Acceptance of Complaints

RACS employs an assessment and triage process to determine whether RACS can or should accept a complaint and the identification of the most appropriate pathway to progress resolution of the complaint.

In determining whether the complaint is a matter that is appropriate for RACS to address, the following matters may be considered:

Approved By:	Deputy CEO/COO	Original Issue:	September 2016
Document Owner:	Complaints Lead	Version:	3
		Approval Date:	February 2020
Page 3 of 5		Review Date:	February 2023

Portfolio:	Fellowship Engagement	Ref. No.	REG-3005
Department:	Complaints		
Title:	Complaints Handling		

- 3.4.1 Whether the complaint has already been substantively addressed or investigated by another body.

RACS may decline to deal with the complaint if it has, or is being, substantively addressed or investigated by another body. Notwithstanding that a complaint may have been addressed by another body, due to its severity or the issues involved the complaint may still be considered by RACS.

- 3.4.2 Whether the complaint should be referred to another body.

The powers of RACS to deal with some complaints are, by their nature, limited. Other bodies, with regulatory powers, may be better equipped to deal with some complaints. RACS may refer complaints to such other bodies where appropriate.

Where possible, RACS will endeavour to obtain the consent of the complainant prior to referring the complaint to another body.

Complaints regarding any breach of the ACFID Code of Conduct should be made to the ACFID Code of Conduct Committee. For information on the Code of Conduct and how to make a complaint visit the ACFID website www.acfid.asn.au

- 3.4.3. Whether the complaint should be referred directly to the RACS disciplinary process.

Some complaints may warrant direct referral to the RACS Professional Conduct Committee for consideration.

- 3.4.4. Whether the complaint raises substantive issues which are appropriately supported by evidence.

A complaint should provide sufficient information to identify the relevant conduct where possible and how that conduct may have fallen below expected standards. Where there does not appear to be sufficient supporting information RACS may decline to process the complaint.

Having considered the complaint, RACS may determine to:

- a) decline the complaint;
- b) refer the complaint for Appropriate Dispute Resolution;
- c) refer the complainant, or the complaint, to another relevant body;
- d) refer the complaint to an alternative pathway in accordance with clause 3.7 of this policy,
- e) defer consideration of the complaint pending the outcome of another process.

Portfolio:	Fellowship Engagement	Ref. No.	REG-3005
Department:	Complaints		
Title:	Complaints Handling		

3.5. Complaints Handling Process

Once a complaint is received by RACS, no matter the nature or relevance of the complaint, all reasonable steps will be taken to ensure the gathering of all necessary information for the ultimate resolution of the complaint.

The process RACS follows for the initiation and resolution of complaints is as follows:

a) *Raising complaints with RACS*

People wishing to lodge a complaint with RACS can do so by phone, e-mail, letter and/or in person.

Complaints Lead
 Royal Australasian College of Surgeons
 250-290 Spring Street
 East Melbourne VIC 3002
 Phone: +61 3 9249 1120
 complaints@surgeons.org

The member of staff receiving the complaint is empowered in the first instance to deal with the complaint and enact any steps to resolve the complaint at the initial point of contact. All complaints must be logged in the Complaints Data Base.

b) *Receiving verbal and written complaints*

The complainant must always be treated with respect. It is important that the person receiving a complaint clarifies the issues underlying the complaint, listens to what the complainant has to say and makes a brief and accurate written summary of the complaint.

c) *Resolving complaints*

Each complaint will be followed up. The person handling the complaint will establish the facts and gather the relevant information and, if necessary and/or practicable, discuss with those involved.

If, as a result it is felt there is a case to answer, then the appropriate disciplinary and other organisational policies and procedures will be followed.

d) *Responding to a complaint*

Complaints, which are not anonymous, will receive a response outlining the outcome of the complaint or, if it is a complex matter outline the process to be taken. The Complaints Lead will let the complainant know the official response to the complaint within the boundaries of applicable law.

Portfolio:	Fellowship Engagement	Ref. No.	REG-3005
Department:	Complaints		
Title:	Complaints Handling		

3.6 Appropriate Dispute Resolution

If a complaint is accepted, RACS may seek to resolve the complaint through Appropriate Dispute Resolution (ADR).

ADR is a process in which an impartial person assists the parties to resolve the issues between them. ADR will be conducted using Facilitative or Advisory processes.

Facilitative processes

The facilitator assists the parties to identify the issues in dispute, develop options, consider alternatives and endeavour to reach an agreement about some issues or the whole of the dispute. Facilitative processes include negotiation, conferencing and mediation.

Advisory processes

The advisor considers and appraises the dispute and provides advice as to the facts of the dispute, compliance with professional standards and, in some cases, possible or desirable outcomes, and how these may be achieved. Advisory processes include expert appraisal, early neutral evaluation, coaching and mentoring by an appropriately qualified person.

RACS will determine the most appropriate method of ADR and by whom the processes should be conducted.

All parties to a complaint will be expected to participate in ADR in an attempt to expeditiously resolve the complaint.

If it appears that ADR is not appropriate for a particular complaint, ADR is unlikely to be successful or ADR has failed to resolve the complaint RACS may refer the complaint to an alternate pathway as per clause 3.7 of this policy.

3.7 Alternative Pathways

In the event ADR is not appropriate to address a complaint or ADR has not resolved the dispute, RACS may address a complaint in the following ways

3.7.1. Issues regarding excessive or out of scope fees will be considered by the Professional Standards Department. Following assessment, the treating surgeon may be asked to justify the basis of the fees charged. Following the surgeon's response, the matter may be referred to the Professional Conduct Committee or dealt with as RACS deems appropriate.

3.7.2. A complaint against a Fellow may be referred by the RACS CEO or Deputy CEO to the Professional Conduct Committee

3.7.3. In cases where complaints concern Trainees or IMGs the relevant misconduct policies may apply.

Portfolio:	Fellowship Engagement	Ref. No.	REG-3005
Department:	Complaints		
Title:	Complaints Handling		

3.7.4. RACS may determine that certain complaints may be more appropriately dealt with through a formal investigation. An investigation will only occur in exceptional circumstances which warrant RACS gaining further insight into the issues. An investigation will be commissioned by the CEO, or delegate, and be conducted in such manner as they think appropriate

4. ASSOCIATED DOCUMENTS

Complaint Form

Code of Conduct

IMG Misconduct Policy

SET Misconduct Policy

Whistleblower Policy

Fraud Policy

Privacy of Personal Information Policy

Conflict of Interest Policy

Prevention of Sex Exploitation, Abuse and Harassment Policy

Discrimination Bullying and Sexual Harassment Policy

Child Safeguarding Policy

Approver Chair, Executive
Authoriser Council

Approved By: Deputy CEO/COO
Document Owner: Complaints Lead

Original Issue: September 2016
Version: 3
Approval Date: February 2020
Review Date: February 2023