



ASUM

Standards of Practice

Promoting ultrasound excellence

Guidelines, Policies and Statements

ASUM Complaint Management Policy

Approved 12 November 2022

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Table of Contents

1. Introduction	3
1.1 Purpose and Scope	3
1.2 Objectives	3
1.3 Principles	3
2. Roles and Responsibilities	4
3. Steps in the Complaint Management Process	5
3.1 Receiving Complaints	5
3.2 Registering and Acknowledging Complaints	6
3.3 Initial Assessment	6
3.4 Information Collection	7
3.5 Response	7
3.6 Complaint Resolution	8
4. Framework for Complaint Management	8
4.1 Point of Service Complaints	8
4.2 Escalation Process	8
4.3 Referral to an External Body or Agency	9
5. Progress Reports for Complaints Exceeding 30 Days to Resolve	9
6. Unresolved Complaints	9
7. Version History	9

1. Introduction

The Australasian Society for Ultrasound in Medicine (ASUM) is a multidisciplinary society with a vision to ensure quality health outcomes when using ultrasound.

ASUM promotes and values feedback and is committed to providing quality management of complaints. This ensures effective management of risks and resolution of issues, enabling all stakeholders involved with ASUM to participate in service improvement.

1.1 Purpose and Scope

This policy defines the complaint management process, including the systematic recording of issues, risks, complaints, and their outcomes; achieved through use of the Quality Management System (QMS).

This policy applies to all complaints made regarding ASUM by members or the public.

Where complaints relate to academic misconduct investigations for all ASUM formal educational programs, candidates are expected to have first utilised the appeal process in the ASUM Academic Misconduct Policy.

1.2 Objectives

The objectives of the complaints policy are to:

1. Ensure fair, timely, and effective management of complaints.
2. Provide a standard approach to complaints handling and guidance on the key principles of the complaints management process.
3. Ensure that ASUM staff are aware of their responsibilities and are equipped to manage complaints.

1.3 Principles

The Complaint Management Policy is underpinned by the following principles:

1. ASUM is committed to its members and to quality improvement by promoting a culture that values feedback, including complaints.
2. ASUM members and members of the public are encouraged and enabled to provide feedback on services, policies, processes, and staff.
3. All complaints are acknowledged and responded in a timely and sensitive manner, utilising effective communication throughout all stages of the complaint management process.
4. Complaints are assessed with integrity and impartiality by considering risk factors, known facts, the complainant's wishes, and accountability of ASUM's staff and volunteers.
5. All complaints are dealt with in a manner that is effective, complete, fair, and provides objective outcomes.
6. Complaint information is openly communicated while protecting confidentiality and personal privacy.
7. All complaints are recorded, analysed, and reported to assist with continuous improvement.

2. Roles and Responsibilities

All ASUM staff are supported in understanding and working in accordance with this policy. The responsibilities of ASUM stakeholders with a direct role in handling complaints are as follows:

2.1 Chief Executive Officer (CEO)

The CEO is responsible for:

- Encouraging an environment where complaints are handled seriously and thoroughly.
- Ensuring an effective complaint management system is developed and in place.
- Ensuring appropriate resources are available and utilised for effective complaint management.
- Ensuring appropriate actions are implemented to reduce the risk of similar problems from occurring.
- Managing the process of officially lodged written complaints in line with this policy.

2.2 ASUM President

The ASUM President is responsible for:

- Taking over the CEO's role in the complaint management process where there is a real or perceived conflict of interest, or where the complaint relates directly to the CEO.

2.2 ASUM Board of Directors

The ASUM Board is responsible for:

- Reviewing and evaluating the implementation and effectiveness of the complaint management policy.
- Reviewing reports provided by the relevant ASUM secretariats on complaint data and trend analysis.

2.2 ASUM Staff

All ASUM Staff are responsible for:

- Being familiar with and able to communicate the complaint management policy principles and procedure.
- Understanding their responsibility in relation to complaints and assisting other members of staff in handling complaints according to the principles of this policy.

3. Steps in the Complaint Management Process



3.1 Receiving Complaints

Complaints may be received in person, over the telephone, or in writing. Staff at all levels must accept complaints and know what action they can take to resolve them.

All complainants will be treated with respect and professionalism. It is expected that in turn, staff are treated in the same manner; any behaviour that is abusive, aggressive, violent, or disrespectful will not be tolerated.

Complaints that are received verbally should be dealt with as follows:

- Provide a calm explanation of what happened if aware of the circumstances and reasons behind the situation.
- Offer an apology, if warranted.
- Seek resolution without escalation as appropriate but know when referral is required.
- Encourage the complainant to discuss their concerns with the relevant staff member.
- Advise the complainant of the complaint management process.
- Comprehensively record the discussion with details of concerns.
- If the complainant would like to escalate the matter, provide them a copy of the formal ASUM Complaint Form.
 - All complaint forms must be returned to the ASUM CEO: ceo@asum.com.au
 - Where a complaint relates to the CEO directly, the complaint form must be returned to the ASUM president via president@asum.com.au

3.2 Registering and Acknowledging Complaints

Upon receipt of a written complaint:

- The CEO or ASUM President will assess the complaint and assign an appropriate delegate to coordinate the management process
- The complaint must be registered in the QMS
- Acknowledgement of receipt must be provided in 2 working days and should include:
 - Explanation of the complaints process
 - Contact details of the delegate responsible for handling the complaint
 - Expected timeframes and any further information required from the complainant

3.3 Initial Assessment

3.3.1 Purpose of the Assessment Process

- Classify the complaint to determine appropriate action
- Ensure the process is commensurate to the severity of the complaint and issues raised
- Ensure fairness to all parties involved

3.3.2 Steps of the Assessment Process

3.3.2.1 Identify Issues Raised

- Identify the issues for resolution, which includes the key concerns raised by the complainant, as well as any other issues that arise or are identified by ASUM
- If any or all the issues are unclear, before progressing the matter, clarify them with the complainant.

3.3.2.2 Identify Parties Involved

- Relevant parties are the key people involved with the complaint plus those involved with the incident that is the subject of the complaint. They may not always be a respondent to the complaint but may be key people in the provision of service under inquiry.
- If individual staff or members are identified in a complaint, they must be advised of the concern.

3.3.2.3 Assess Complaint Severity

The complaint may be rated using ASUM's Risk Management Policy.

The CEO will review the complaint to help determine:

- A delegate to handle the complaint management process
- Internal and external stakeholders that need to be contacted
- The best method to achieve resolution

Assessment results may include, but are not limited to:

- Providing information, reassurance, or an apology for perceived unsatisfactory conduct or service.
- Conducting a face-to-face meeting using facilitated resolution or mediation.
- Investigating using Root Cause Analysis or other investigative methodology.

3.4 Information Collection

3.4.1 Investigate the complaint

All complaints require a fact-finding process to determine cause and required course of action. For each complaint, consider the following:

- What information to obtain
- Where to find this information
- How it should best be collected (interview, site inspection, phone call, e-mail)
- How it is communicated (report, statement)

The CEO should:

- Consider who may be appropriate to provide specialist or expert advice/review
- Consider whether information is needed from external agencies
- Consider whether and what information needs to be secured
- Construct a chronology of events, or flow chart, particularly if the matter is complex
- Identify who may be interviewed and the appropriate order of interviews
- Consider if an interpreter is required
- Consider whether an on-site investigation is appropriate
- Develop questions for the key parties based on the analysis of the issues and information required
- Determine the applicable standards/policies and whether there were deviations

3.4.2 Analysis and review

Information will be analysed and reviewed as it is collected. Analysis includes identifying and determining:

- What is agreed upon
- What is still in dispute
- Relevance and reliability of the information collected
- Whether sufficient information has been gathered to determine if standards have been met, and:
 - Whether there are inconsistencies
 - Whether independent verification has been obtained
 - What systemic and/or performance factors led to the outcome

3.5 Response

Once the information has been analysed, the person managing the complaint makes findings and recommendations for action. Actions taken by ASUM to resolve a complaint must be evidence-based, address any system, process, or practitioner issues, and are informed by the principles of public interest and good clinical governance.

Options for appropriate action may include, but are not limited to:

- Offering an apology
- Waiving fees
- Develop or amend a policy/procedure
- Training/education of staff or members
- Modification of the environment
- Requesting a formal review
- Ongoing monitoring of an issue,
- No action recommended

ASUM must ensure that the outcome and recommendations are clearly communicated to the complainant, staff, and management, and integrated into quality improvement systems through appropriate implementation and subsequent review of effectiveness.

3.6 Complaint Resolution

Complaints are finalised 30 working days from acknowledgement of receipt, with extensions allowable only in extenuating circumstances.

Final responses will be provided in writing from the CEO or their delegate. The final response must be factually correct, and:

- Include an apology
 - Note: In some cases, this may not be accepting blame or fault, but an acknowledgement of the complainant's experience and their feelings.
- Address each of the points the complainant has raised with a full explanation or reason(s) why it is not possible to comment on a specific matter.
- Give specific details about the investigation, i.e., sources of information, what was discovered, with consideration to privacy issues
- Give details of actions taken as a result of the complaint management process
- Provide contact details of the appropriate staff member for further queries/discussion

The final response will be:

- Sent to the complainant
 - Copied to the relevant Board Chair
 - Copied to the relevant Staff Manager
- Sent to the ASUM Board of Directors

4. Framework for Complaint Management

Complaints can be managed:

- At point of service
- Through a staged process
- Through referral to an external body/agency

4.1 Point of Service Complaints

Ideally, most complaints will be dealt with directly and quickly at the point where the problem arises. Escalation of complaints may be avoided where staff have clear authorisation to resolve complaints at first contact.

Often, no changes to procedures are required as many complaints involve an acknowledgement of the complainant's perspective, an explanation of events and validation of the complainant's satisfaction with the explanation.

Complaints should be referred to a line manager if they:

- Remain unresolved
- Involve serious consequences
- Involve complex issues or several staff
- Need action that is beyond the responsibility of the staff at point of service
- Require escalation or reporting to the CEO

4.2 Escalation Process

If a complaint requires escalation, the personnel stages of escalation are:

- Line Manager
- CEO/ASUM President

Referral to a line manager or the CEO may occur at the request of the complainant.

4.3 Referral to an External Body or Agency

Management of a complaint may be referred to an external body or agency if deemed appropriate from initial analysis of the complaint, and at the discretion of the CEO.

5. Progress Reports for Complaints Exceeding 30 Days to Resolve

If a complaint has not been closed after 30 working days; a detailed progress report must be provided and include the following:

- An apology for the delay
- A full explanation of the delay
- Details of the results of the enquiry to date, if possible
- Expected timeframe a full response can be expected

This report should be provided by the CEO, and where possible and likely to be of benefit, the investigating officer should also contact the complainant to discuss the delay and alleviate any anxiety this delay might cause.

6. Unresolved Complaints

If a complainant remains dissatisfied following the CEO's response, they may write directly to the ASUM President.

7. Version History

Version	Date Published	Details
1.0	2014	First adopted.
1.1	2015	Updated to new template.
1.2	2016	Updated to new template.
1.3	Feb 2020	Updated to new template.
2.0	7 May 2022	Updated to new template; updated resolution timeframe to align with other ASUM policies; inclusion of version history.
2.1	12 November 2022	Clarity of process particularly for issues requiring direct access to ASUM President