



GOVERNMENT OF
WESTERN AUSTRALIA



Our reference:
Your reference:

7 November 2022

Hon Dr Sally Talbot MLC
Legislative Council Committee Office
Parliament House
4 Harvest Terrace
WEST PERTH WA 6005

Dear Hon Dr Sally Talbot

SUBMISSION – INQUIRY INTO CHILD DEVELOPMENT SERVICES

Thank you for the opportunity to provide a submission to the Inquiry into child development services in Western Australia (Inquiry).

The Health and Disability Services Complaints Office (the Office) is an independent Statutory Authority providing an impartial resolution service for complaints relating to health, disability and mental health services in Western Australia and the Indian Ocean Territories, covering the public, private and not for profit sectors. This submission is provided in the context of the role of the Office and enabling legislation.

The Office is established by the *Health and Disability Services (Complaints) Act 1995* (the HaDSC Act) and has responsibilities for the complaint functions under Part 6 of the *Disability Services Act 1993* and Part 19 of the *Mental Health Act 2014*.

The main functions under these Acts are to:

- Deal with complaints by negotiated settlement, conciliation or investigation.
- Review and identify the causes of complaints.
- Provide advice and make recommendations for service improvement.
- Educate the community and service providers about complaint handling.
- Inquire into broader issues of health, disability and mental health care arising from complaints received.
- Work in collaboration with the community and service providers to improve health, disability and mental health services.
- Publish the work of the Office.
- Perform any other function conferred on the Director by the HaDSC Act or another written law.

PO Box B61, Perth, Western Australia, 6838

Complaints and enquiries: (08) 6551 7600 Administration: (08) 6551 7620 Facsimile: (08) 6551 7630

Email: mail@hadsco.wa.gov.au Website: hadsco.wa.gov.au ABN: 67 123 349 587

The Office collects data throughout the process of resolving complaints, which provides thematic information about service delivery across the health, mental health and disability sectors. The data provided in the attachment to this submission are intended to inform the Inquiry with respect to complaints received in the area of child development services.

The data attached to this submission are specific to consumers known to be aged younger than 18 years at the time of the service provided, in the period 1 July 2019 to 27 October 2022. During this period, a total of 9,320 complaints were received, of which 332 where the consumer was aged under 18, representing 3.6% of total complaints received. Of those 332 complaints, 18 (5.4%) were related to child development services.

The child development services complaint issues were primarily classified as access, communication or costs. Nine of the complaints were known to come from the metropolitan area, seven from regional areas, and 2 were not provided.

If you or your staff would like clarification or require any additional information, please do not hesitate to contact Mr Michael Farquhar, Project Officer on (08) 6551 7646.

Yours sincerely



SARAH COWIE

DIRECTOR

HEALTH AND DISABILITY SERVICES COMPLAINTS OFFICE

Enc. Attachment – Child development services



Child Development Services Complaints

Submission to the Inquiry into child development services in Western Australia

**Prepared by the Health and Disability Services Complaints Office
November 2022**



Child development services complaints

There were 18 complaints related to child development services received from 1 July 2019 to 27 October 2022, by or on behalf of consumers aged younger than 18 years. Figure 1 shows the total volume of these complaints received across health, mental health, and disability services.

Figure 1: Child development complaint volume

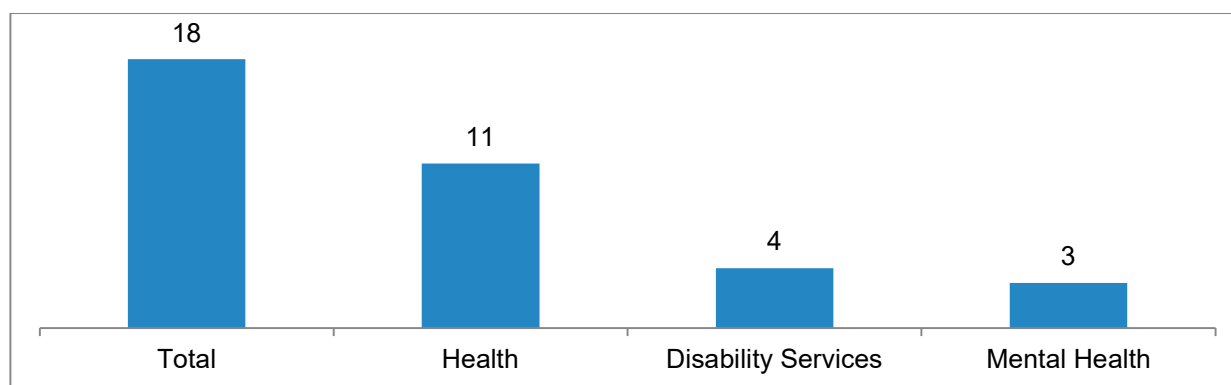


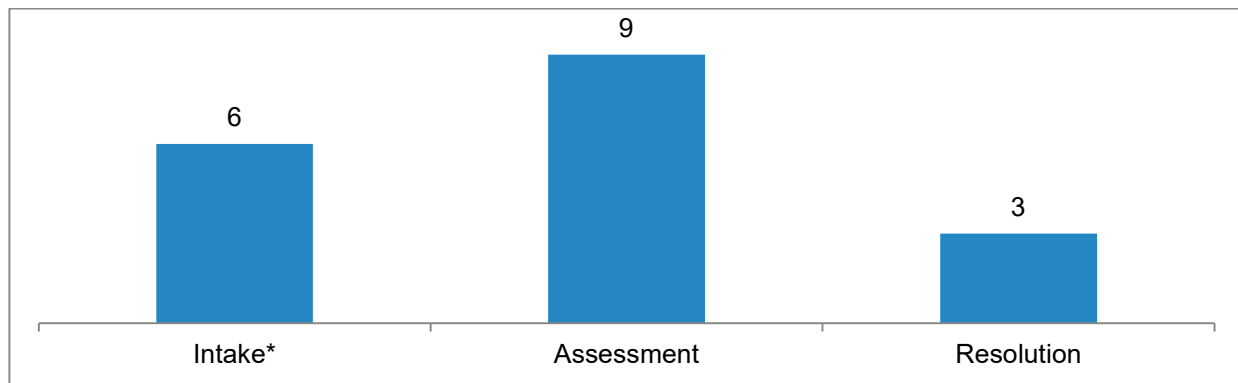
Table 1: Summary of HaDSCO complaints received from 1 July 2019 to 27 October 2022

Financial year complaint received	Volume complaints – Age is known and consumer younger than 18	Total complaints received (health, mental health, disability services)	Percentage complaints received where consumer is younger than 18
2019-20	81	2,629	3.1%
2020-21	86	2,806	3.1%
2021-22	132	2,996	4.4%
2022-23 Year-to-date (27 Oct 2022)	33	889	3.7%
TOTAL	332	9,320	3.6%

The 18 child development services complaints account for 5.4% of complaints received where the consumer's age is known, and the consumer is younger than 18 years of age.

Figure 2: Stage closed

Of these complaints, 17 were closed and 1 remains open. Figure 2 shows the stage closed of these complaints.



* Open complaint in intake

HaDSCO complaint process definitions

Intake: provision of information about HaDSCO's complaints process and advice about raising a complaint with the service provider (to allow for resolution in the first instance). If the complaint is outside of HaDSCO's jurisdiction information is provided about an alternative complaint body that may be able to assist. Information may also be provided to individuals about advocacy services that may be of assistance.

Assessment: the process to determine if a complaint is 'accepted', 'rejected' or 'referred', in accordance with the provisions of the *Health and Disability Services (Complaints) Act 1995* (the HaDSC Act), Part 6 of the *Disability Services Act 1993* or Part 19 of the *Mental Health Act 2014*.

Resolution: may be categorised as one of three outcomes:

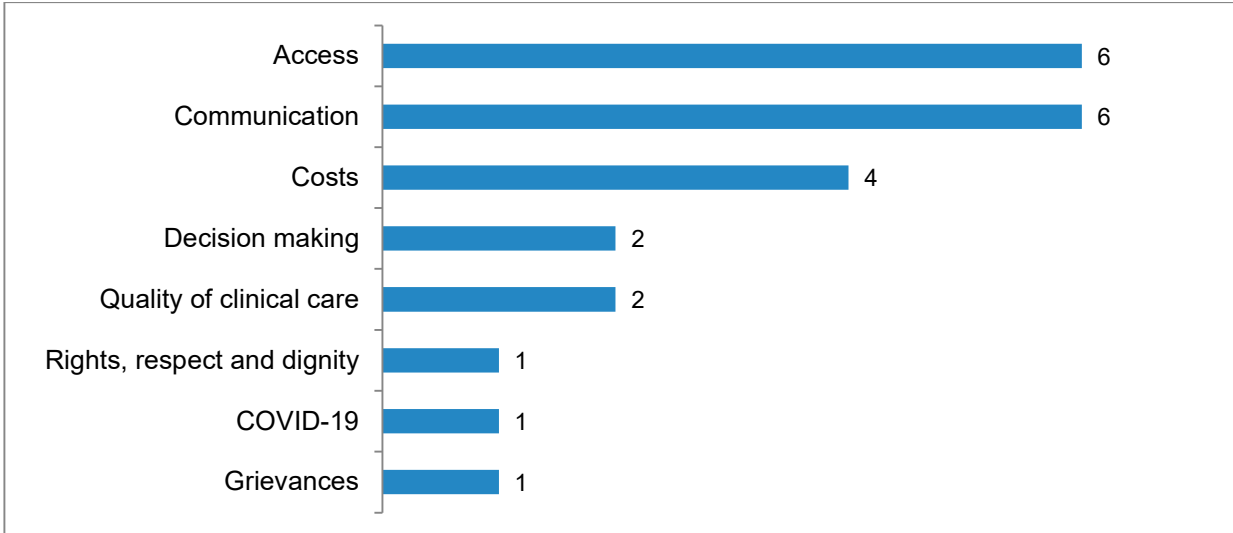
- 1) **Negotiated settlement:** generally a paper based approach where HaDSCO facilitates the exchange of information between the parties to assist in resolving a complaint by negotiating an outcome acceptable to both the individual and the service provider.
- 2) **Conciliation:** generally involves a face-to-face meeting facilitated by HaDSCO to encourage the settlement of the complaint. HaDSCO staff will arrange for the service provider and the individual who made the complaint to hold informal discussions and assist them to reach an agreement.
- 3) **Investigation:** an investigation is undertaken to determine whether any unreasonable conduct occurred in providing a health or mental health service.

All complaints closed in the intake stage were done so because the complainants wanted time to consider the information provided, there was insufficient information provided by the complainant, and one complaint was referred back to the provider.

Most (7 of the 9) complaints closed at the assessment stage were 'rejected' for a number of reasons, including: being referred back to the provider; being dealt with by a court; withdrawn by the complainant; not compliant with the HaDSC Act; or not warranting further action.

Each complaint reaching resolution was done so via the negotiated settlement process, with one complaint resulting in the provider reviewing their processes to minimise any confusion of charges related to their service agreement.

Figure 3: Complaint issues



Across the 18 complaints, there were 23 issues identified. Note that some complaints had multiple issues. Of these issues, access, communication, and costs are the most common.

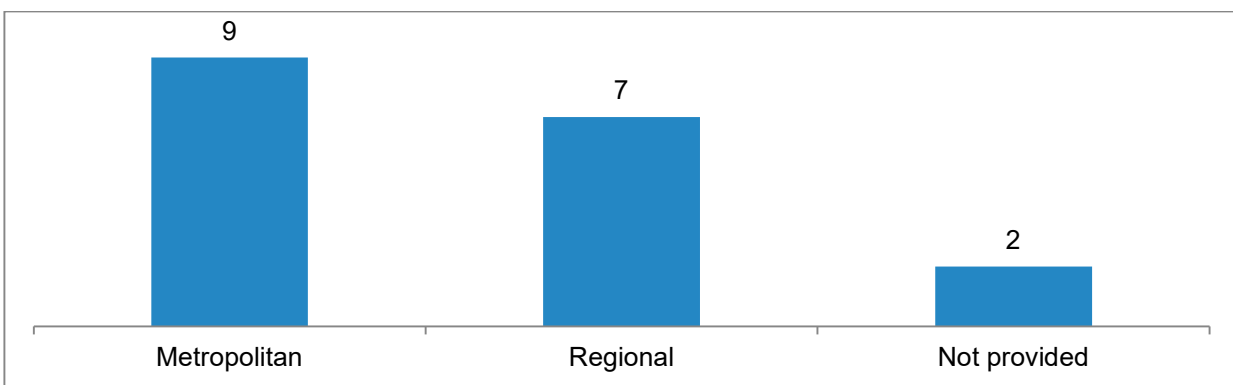
Access issues included lack of appropriate referrals, inadequate resources or lack of service, or waiting list delays.

Communication issues included inappropriate communication, inadequate medical information, or a failure to communicate (not failure to consult).

Cost issues were mostly with respect to failure to provide adequate information about costs.

Figure 4: Metropolitan and regional complaints

Figure 4 shows the number of complaints from the metropolitan and regional areas.



Complaints in regional areas were mostly related to access issues, where complaints in the metropolitan area were about communication or costs.