You will receive a written explanation about any such decisions and actions taken by the Commissioner.

Formal investigation

In a small number of cases, the Commissioner may decide to conduct a formal investigation. A formal investigation that is quite straightforward may be able to be completed within six months, while other, more complex investigations may take closer to 18 months to complete. If your complaint is formally investigated, your complaint will be assigned to an Investigator who will become your primary point of contact. If this occurs, you will receive further information about the investigation process from us. It is important to note, however, that not all issues that are investigated lead to a finding that there has been a breach of the Code of Rights. Sometimes, even after investigation, it is still not clear what happened and no further action is taken.

Financial compensation

The Commissioner does not have any power to award compensation or require a provider to give you a refund. Some people who have suffered a personal injury from their treatment may be entitled to ACC compensation.

If you have any concerns about our process, please contact us and we will talk to you about your options. Our toll-free number is 0800 11 22 33 or you may email us at hdc@hdc.org.nz



PO Box 1791, Auckland
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Our Complaints Assessment Process

What you can expect now that the Commissioner has received your complaint

Communication with us

Your Complaints Assessor

A Complaints Assessor has been assigned to your complaint. Their name and contact details are included in our letter to you. Your Complaints Assessor is responsible for the day-to-day management of your complaint. If you have any questions about your complaint, please contact your Complaints Assessor.

Contact with other staff

While most contact will be from your Complaints Assessor, it may sometimes be necessary for you to be contacted by another member of the Commissioner's staff, for example, another Complaints Assessor, an Administrative Assistant, an Investigator or a Legal Advisor. You can also expect to receive correspondence from the Commissioner and/or one of the Deputy Commissioners. Generally, decisions that may be made by the Commissioner may also be made by the Deputy Commissioners.

The complaints assessment process

There are a number of steps involved in assessing a complaint and those steps may vary depending on the circumstances. We will usually do one (or more) of the following:

- Assess your complaint to determine whether it is something that the Commissioner can look at (that is, whether the Commissioner has jurisdiction).
- Send a copy of your complaint to the provider of health or disability services (the person and/or organisation you are complaining about) and ask them for a response.

- Ask you and/or other relevant people and/or organisations for additional information, for example, we may ask the relevant District Health Board for a copy of your relevant medical records.
 Sometimes a number of requests for additional information are necessary.
- Ask an independent expert to review your file and advise the Commissioner about clinical aspects of the services you received.

If you have additional information that you think may be relevant to your complaint, it would be helpful if you could contact your Complaints Assessor to discuss this now.

If you think you may like to work with an advocate in resolving your concerns, please also discuss this with your Complaints Assessor, as this is an option that can be helpful to consider.

The complaints assessment process may take anywhere from a few days to a number of months, depending on the complexity of your complaint (such as whether it is about several different providers) and the issues that arise during our assessment.

In most cases, this part of our process will be completed within six months. Your Complaints Assessor will keep you updated about progress in assessing your complaint. You can expect to hear from us at least once every two months during this time.

Possible outcomes

At any time during the complaints assessment process, the Commissioner may decide to do a number of things. Most commonly, the Commissioner will do one (or more) of the following:

- Send the complaint to an advocate to assist you with resolving your complaint.
- Send the complaint to the provider of health or disability services to resolve.
- Send the complaint to another agency, such as the Ministry of Health, a registration authority (such as the Medical Council of NZ), the Privacy Commissioner, or a Mental Health District Inspector.
- Formally investigate your complaint.
- Take no further action on your complaint (if, for example, the provider has already addressed the issues, the events occurred a long time ago, or someone else could deal with it better).

The Commissioner may also make recommendations to the provider, such as that the provider apologises to you and/or changes the way that they do things. The Commissioner may also suggest to you other things you could do to try and resolve your complaint (for example, going to the Disputes Tribunal to recover money you may be owed).

