



# VetPartners

## Operational Policy

## CLIENT COMPLAINTS AND CONCERNS Australia & New Zealand

### Document Control and Version History

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## A. POLICY - Overview

### A.1 Why is this important?

This document has been written to ensure that client complaints and concerns are handled in a consistent and professional manner.

### A.2 When does this apply?

This document applies to those handling client complaints and concerns related to clinical practice or services provided by VetPartners hospitals and clinics.

### A.3 Whom does this apply to?

This policy applies to all VetPartners Employees and Contractors.

### A.4 What we expect?

VetPartners is committed to providing an exceptional level of customer service, in order to do so, it is imperative that all client complaints or concerns are handled in an efficient, consistent and professional manner by all team members and reported in a timely manner.

It is important that all team members are trained and aware of the client complaint policy to ensure that all concerns are handled in a professional and timely manner.

### A.5 Our Complaint Management Principles

- We are committed across the whole of VetPartners- to hearing and acting on client complaints
- We are responsive and ensure resources are available to resolve client complaints thoroughly
- We actively improve through learning from client complaints.
- We are transparent in handling client complaints. We are committed to open disclosure- identifying and reporting clinical incidents and proactively communicating with our clients.
- We do not tolerate abuse, harassing, violent or threatening behaviour in any circumstance from anyone in relation to any client complaint.

### A.6 What do the terms mean?

<b>Employee</b>	A person employed by VetPartners under which ever employment instrument.
<b>Team member</b>	Any Employees, locums, volunteers, contractors or partners working for a VetPartners business unit
<b>Complaint/Concern</b>	A complaint or concern, for the purposes of this document, is defined as an expression of dissatisfaction regarding the level of service or care afforded to the client by VetPartners or its team members.
<b>Manager</b>	Line manager of an Employee of VetPartners.
<b>Regional Manager (RM)</b>	Manager overseeing a Region of veterinary practices within VetPartners.
<b>Veterinary Manager (VM)</b>	Manager overseeing the veterinary operations within a region for VetPartners.
<b>Practice Manager (PM)</b>	Manager overseeing the overall veterinary practice operations.
<b>Clinical Leader (CL)</b>	Person responsible for overseeing the delivery of clinical care within a practice.
<b>Clinical Review Committee (CRC)</b>	The purpose of the Clinical Review Committee (CRC) is to provide independent, objective, non-judgemental, clinical review and recommendations to support our Veterinarians, Regional Managers, clinics and hospitals. The CRC is purely a supportive body not a regulatory or punitive one.

<b>Veterinary Surgeons Board (VSB)</b>	The VSB has the legislative responsibility in Queensland for the regulation of veterinary science.
<b>Veterinary Practitioners Board (VPB)</b>	The object of the VPB is to regulate the provision of veterinary services in NSW to ensure that acceptable standards are required to be met by veterinary practitioners.
<b>Veterinary Council of New Zealand (VCNZ)</b>	VCNZ are responsible for protecting the public interest by ensuring vets are competent to practice.

## B. PROCEDURE - How it works in practice

### B.1 The Complaints and Adverse Events portal

VetPartners has an online portal that allows all clinical incidents and complaints to be lodged, however small. (Please note you still need to record any information relevant to the incident in your clinical records). Some examples of incidents include:

- Adverse patient events
- Client complaints where clinical expectations are not met
- Medical or surgical misadventure
- Unexpected patient death
- Zoonosis or WH&S hazards leading to adverse patient outcome
- Customer service complaints
- Near misses

Depending on the severity of the incident, the complaint will be escalated to the appropriate team members along with tips and guidance on how to handle the complaint at each stage. (See escalation chart in B.2). **The responsibility for handling the complaint will still be with the team members involved** at the hospital or clinic, but depending on the severity, you can expect a greater level of support from your Regional Manager (RM) or Veterinary Manager (VM).

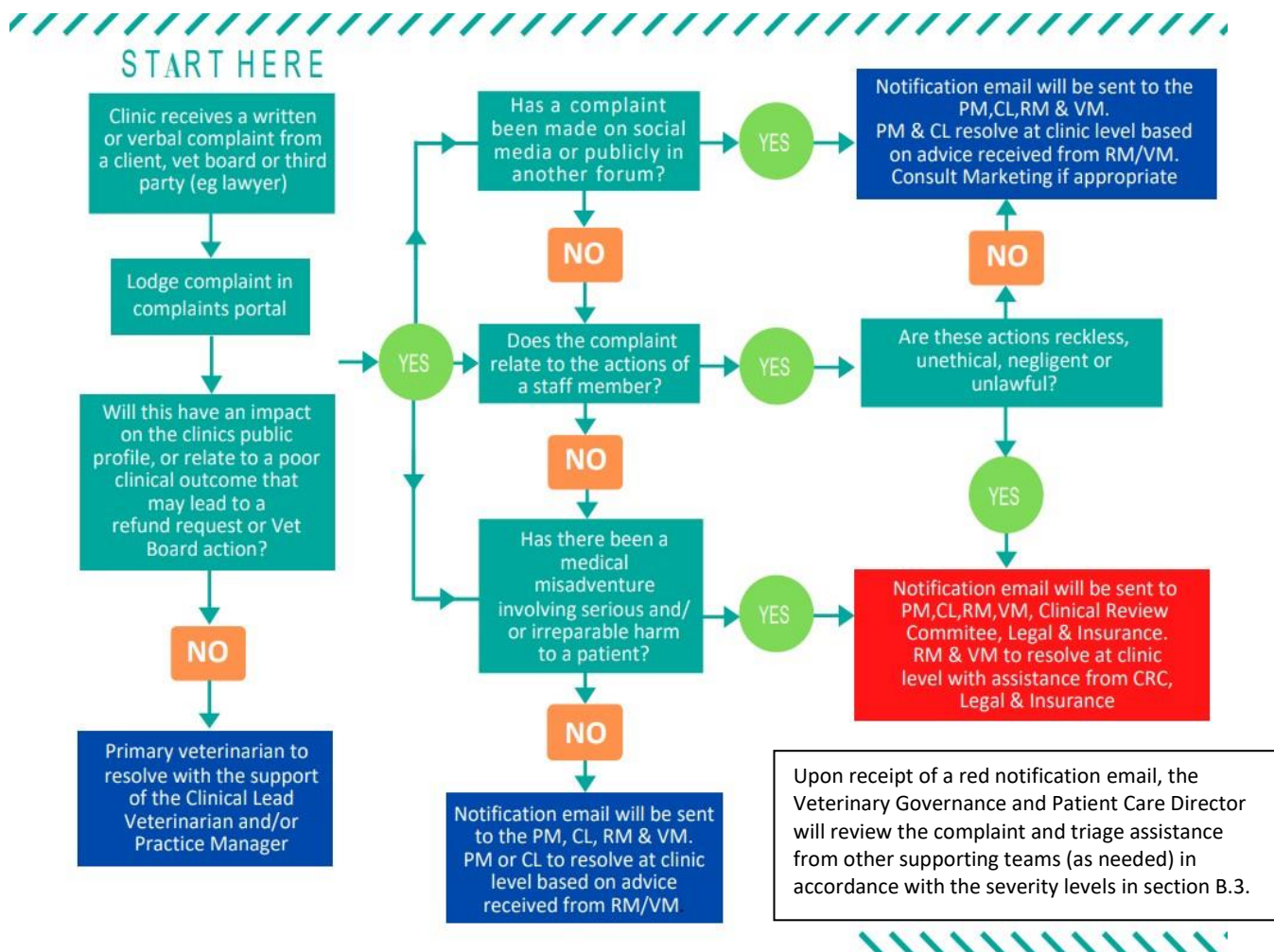
Complaints and incidents that are likely to go to the VSB/VPB or VCNZ and those that might result in legal action will automatically be escalated to our 'Clinical Review Committee' and our legal and insurance team. The Clinical Review Committee consists of senior veterinarians from across the business who have experience in dealing with the VSB/ VPB/ VCNZ and in some cases have actively been involved with those regulatory bodies.

The purpose of the Clinical Review Committee (CRC) is to provide independent, objective, non-judgmental, clinical review and recommendations to support our Veterinarians, Regional Managers, clinics and hospitals. The CRC is purely a supportive body not a regulatory or punitive one. The CRC's role is not to arbitrate a resolution to any client complaint, or to adjudicate on the merits of a complaint, or to determine whether a particular set of clinical circumstances should have resulted in a different patient outcome.

The CRC's discussions, recommendations and processes are for the benefit of our clinical practice teams and to perform a continuous improvement role. For these reasons, the results of any CRC review remain confidential to VetPartners and will not be disclosed to any third party, including a client, without the prior consent of the veterinarian(s) involved in the particular complaint.

The information collected through the portal will be collated and will help us provide general information in an anonymous manner, to help mitigate risk around similar complaints through our quarterly newsletter the Prognosis. It will also be used to provide feedback to the Veterinary Advisory Committee (VAC), who will look to use this information to help develop minimum standards of care and inform future training initiatives.

## B.2 Complaints Flowchart



## B.3 Complaint Levels

Complaint Level	Indicator of Complaint Level	Complaint Actions
Level 1 No adverse effect	<p>Verbal or written complaint made privately to the clinic concerning:</p> <ul style="list-style-type: none"> <li>- Amount(s) charged on an invoice to client (e.g. incorrect or unexpected charges)</li> <li>- Service provided by clinic staff (e.g. lack of communication, minor concern regarding a clinical standard of care or perceived lack of customer service)</li> <li>- Refund requests less than the amount charged to the client</li> </ul> <p>Complaints at Level 1 involve:</p> <ul style="list-style-type: none"> <li>- Issues raised by a client which have minimal impact to the clinic's public profile and can be resolved through a conversation (or series of conversations) with the client.</li> </ul>	<p>Complaint must be lodged in the complaints &amp; adverse events portal.</p> <p>PM and CL are notified via email.</p> <p>Complaint should be resolved directly by the primary case clinician after discussion with the PM or lead veterinarian/CL.</p> <p>Any refund or payment to the client or a third party must be approved in accordance with the</p>

		authorities set out in section B4 of this policy.
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<p><b>Level 2</b> Minor or severe adverse effect</p>	<p>Verbal or written complaint made privately to clinic concerning:</p> <ul style="list-style-type: none"> <li>- The outcome(s) of treatment not as expected (e.g. pet was ill after their clinic visit)</li> <li>- An expected standard of clinical care did not meet the expectations of the client</li> <li>- The actions of a staff member that are perceived as unprofessional or below the standards that should be reasonably expected of the clinic</li> </ul> <p>OR</p> <p>Complaint about the clinic made publicly (e.g. through social media)</p> <p>Complaints at Level 2 involve:</p> <ul style="list-style-type: none"> <li>- Impact to the clinic's public profile</li> <li>- Full refund requests</li> <li>- Concerns regarding a clinical standard of care that justify additional support from the management team</li> <li>- Where VSB/Vet Council action could eventuate</li> </ul>	<p>Complaint must be lodged in the complaints &amp; adverse events portal. PM and CL are notified via email, together with your RM and VM.</p> <p>Complaint should be resolved by the clinic with support of the RM/VM, or be escalated to the Clinical Review committee, Legal, Marketing and/or Insurance teams as needed (triaged by Veterinary Governance and Patient Care Director).</p> <p>Any refund or payment to the client or a third party must be approved in accordance with the authorities set out in section B4 of this policy.</p>
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<p>Level 3 Severe adverse event</p>	<p>Complaint about the clinic received through an external source (e.g. VSB, consumer tribunal, client's legal representative)</p> <p>OR</p> <p>Incident involving serious, life-threatening or unrepairable injury to a pet, or death where VSB/Vet Council is a strong possibility</p> <p>OR</p> <p>Actions of a staff member that are suspected as being reckless, unethical, negligent, willful or unlawful</p> <p>Complaints at Level 3 involve:</p> <ul style="list-style-type: none"> <li>- Claims or requests from a client for refunds and payments above the amount charged for the service (i.e. compensation for loss)</li> <li>- Potential significant impact to clinic's reputation</li> <li>- High likelihood of VSB/Vet Council action against the veterinarian or clinic and/or legal action against the clinic</li> </ul>	<p>Complaint must be lodged in the complaints &amp; adverse event portal.</p> <p>PM and CL are notified via email, together with your RM and VM, the Clinical Review Committee, Legal and Insurance teams.</p> <p>Complaint must only be managed by the clinic with the direct support of the VM/RM after consultation with the Veterinary Governance &amp; Patient Care Director.</p> <p>Any refund or payment to the client or a third party must be approved in accordance with the authorities set out in section B4 of this policy.</p>
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#### B.4 Authority Levels

CFO	ED – Ops or Spec	GM	RM	PM/CL
>\$50,000	<\$50,000	<\$20,000	<\$5,000	<\$500

All payments, regardless of the amount, made with the intention that the client will not make any further claim(s) against the clinic in relation to the treatment or procedure, must be accompanied by a signed release letter from the client and approved by the Legal team.

#### B.5 Process for responding to Complaints

Steps 1-6 are undertaken by any Team Member interacting directly with the client.

##### B.5.1 Step 1: Initial Presentation

All complaints must be acted upon in a timely manner. All complaints should be acknowledged to the client within 24 hours of being received and responded to within 5 business days of the complaint being raised. (This does not mean that the complaint has to be resolved within 5 days).

If the complaint is made in person or over the phone, politely advise the client you will refer the client to the Practice Manager (PM) or Clinical Lead (CL) Veterinarian (where possible) and notify the client that the complaint may take up to 5 business days to be reviewed.

Record the details of the complaint, including updated contact details for the client in the complaints and adverse events portal.

Also update your clinical records with this information and inform your PM and CL. Clearly document all aspects of the complaint in the clinical record, including any correspondence or discussion with the client.

Once the portal is completed an email will be sent to your PM and CL outlining the complaint so they can help resolve the client's concerns. To expedite the process please upload all relevant documents including: Clinical histories, consent forms, anaesthetic forms and any client communications into the portal. Images can also be uploaded; the maximum file size is 1 MB.

[Compress image by Toolur](#)

##### B.5.2 Step 2: Appropriate Location

If the complaint is raised by the client in the hospital, the client should be taken into a consult room or a quiet area of the clinic to voice their concern(s) in private, without disturbing other clients. Phone calls should be taken in a quiet, private area. Ample time should be allocated to ensure full respect is given to the complaint and it is not rushed.

##### B.5.3 Step 3: Commencement

When dealing with the complaint the PM or CL should aim to discuss the matter directly with the client. Firstly, thank the client for bringing the matter to your attention and reassure them that we take any feedback seriously. It may help to ask the client if they would mind if notes were taken during the conversation to facilitate addressing their concerns. Explain that our primary aim is to provide the best possible care to their pet and that their feedback will help us to deliver that.

##### B.5.4 Step 4: Actively Listen

Do not assume anything, stay calm and acknowledge the client's feelings. It is easy (and human nature) to take a complaint personally, but remember their concerns are often not directed at an individual but a system, event, or miscommunication. Be polite, respectful and listen to the client's



concerns. Listen to understand, not to disprove or defend their claim. It may help to ask open questions to gain further information relating to the complaint and also demonstrate to the client that you are listening to what they are saying. Feeling heard is often the main barrier to resolution for disgruntled clients.

#### **B.5.5 Step 5: Summarise**

Once the client has finished explaining their situation, concisely paraphrase what you believe their complaint to be and ask them whether this is correct. Repeat this process until the client is satisfied that you have understood their concerns.

#### **B.5.6 Step 6: Advise of Process**

Acknowledge the complaint and empathise with the client that you understand why they are frustrated, angry, upset or disappointed.

This does not require agreeing with the client, accepting or placing any blame, or offering any outcomes or refunds to cover any further treatment or procedures. It is reasonable to express your sorrow that the clinic has not met the client's expectations, but **do not admit liability or give any undertaking to meet costs** until the complaint has been appropriately managed via the portal (see step 7 and 8).

Advise that the PM, CL or other managers will be informed of the issue and will be back in contact within 5 business days. Ask how they would prefer future communication – in person, by phone or by email and check their details are correct.

**Steps 7-8 are undertaken by, or with the guidance of, the PM, CL, RM, VM.**

#### **B.5.7 Step 7a: Attempt Resolution**

The first rule of attempting resolution is **not to admit liability** for any event or concern.

Admitting liability may invalidate any professional liability insurance and it is for this reason, that any concerns that are likely to be taken further by the client, or those involving financial requests must be discussed with your RM or VM and lodged into the portal so that the appropriate teams are consulted before any action or resolution is agreed.

Instead of accepting liability, you should try to **empathise** with the client, understand why they are frustrated, disappointed, angry or upset and attempt to address their concerns. If appropriate provide a plan to resolve the problem, without placing blame on any persons involved.

This may take the form of reassuring them that you will address the matter with the individuals concerned, review policies or procedures, or escalate the matter if they remain unsatisfied with the outcome.

If as part of this process you believe the client is entitled to a financial credit or refund and it is within your remit to do so, please proceed to offer it by referring to it as “a gesture of goodwill”. Only PM, CL, RM and VM have the authority to offer goodwill gestures (see table in B.4 for authority levels).

Remember, most dissatisfied clients simply wish to be listened to and taken seriously, be understood as to why they are upset and be assured the problem will not occur again where this is practicable. They are not necessarily after financial compensation, and we should not assume that this is the solution to the client's concerns.

#### **B.5.8 Step 7b: Concern Escalation**

If the issue cannot be resolved to the client's satisfaction, or you feel it is beyond your remit to address (see flowchart in B.4), you should escalate the complaint to more senior management. Contact your RM or VM by phone or email as soon as possible to advise of the client's feedback and status of the complaint.

Ensure that all relevant notes, client contact details, history and results (including pathology reports and x-rays) are in the complaints and adverse events portal, to ensure a thorough assessment can be made. Inform the client that the hospital's senior management will be in contact once they have reviewed the information. Give the client a reasonable time-frame 5-10 business days depending on the complexity of the case. Please monitor social media for any comments or bad reviews; if there is any online feedback, please seek advice in managing this from your RM or the Marketing team.

Thank the client for bringing the problem to your attention, assure them that their concerns will be reviewed and where appropriate, measures will be put in place to reduce the risk that the issue will occur again. Aim for the client's final impression to be positive. If appropriate, it may be prudent for a follow-up call/ appointment to be made with the client outlining any actions that have been taken to address the concern raised.

#### **B.5.9 Step 8: Finalise the Matter**

If the client remains unsatisfied after all reasonable attempts have been made by all levels of management, the client can be provided with contact details for the appropriate Veterinary Surgeons/Practitioner Board or Council and advised that the clinic will be fully cooperative with any investigation that they may undertake.

#### **B.6 Angry or Aggressive Clients**

Dealing with frustrated and upset clients is challenging, and it is important to remember these emotions are not directed at you personally, even though it can feel that way. Try to remain calm and open to the client, listen to them and empathise where appropriate. If the client becomes aggressive, abusive, or you do not feel safe, seek assistance from a colleague or move into an area where there are more people. Advise the client that you cannot continue the conversation until they can communicate in a more appropriate manner.

<https://vetpartners.sharepoint.com/sites/Intranet-VetServices/SiteAssets/SitePages/Complaints/Deescalating-conflict.pdf?web=1>

VetPartners will not tolerate abusive behaviour and if the client fails to respond to requests to refrain from such behaviour, then it is acceptable to ask them to leave the clinic and continue the conversation at a later time, when emotions are less intense. Remind yourself that the anger is directed at the system, not you, personally.

[Expected Client Behaviour Guidelines.pdf](#)

#### **B.7 Post-Incident Debriefing**

Client concerns should be professionally discussed with team members in an appropriate forum to gain awareness and understanding of the issue and discuss what steps need to be taken to prevent reoccurrence of the situation. This may take the form of one-on-one meetings with team members involved, or a clinic meeting to discuss and amend protocols.

Morbidity and mortality rounds are also a good way to discuss areas for improvement.

All team members involved in the incident are required to document their dealings with the client, this includes keeping thorough clinical notes, writing transcripts of conversations with the client into the clinical history to achieve a time stamped way of recording when the conversation took place. It is good practice to include the name of the person you spoke with e.g.; Brian Smith. In some cases, a transcript of events may be required and your RM or VM is best to advise you on these cases.

## C. Support

Support can also be gained from VetPartners' Employee Assistance Program provider.

Australia	New Zealand
Assure: 1800 808 374	Assure: 0800 464 387

Employees and Contractors in distress may also seek counselling through independent organisations such as Lifeline (Australia - 13 11 14 or [www.lifeline.org.au](http://www.lifeline.org.au). New Zealand - 0800 543 354 or [www.lifeline.org.nz](http://www.lifeline.org.nz)) or Beyond Blue (Australia - 1300 224 636 or [www.beyondblue.org.au](http://www.beyondblue.org.au)).