



Queensland Government
Queensland Health

Bundaberg Health Service District COMPLAINT REGISTRATION FORM

This form is to be completed the staff member who is registering the complaint.

Complaint Identifier: 0803-11 Office Use Only

Type of Complaint: Written Verbal Telephone

Name of person handling complaint: Darren Keating DMS
Name and Designation of Staff handling the complaint

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| Facility: | <u>Bundaberg</u> | Childers | Gin Gin | Mt. Perry |
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| Source of Complaint | <input checked="" type="checkbox"/> Patient/Client | <input type="checkbox"/> Relative/Carer | <input type="checkbox"/> Friend/Advocate |
| | <input type="checkbox"/> Staff Member | <input type="checkbox"/> Volunteer | <input type="checkbox"/> Anonymous |
| | <input type="checkbox"/> Other - Please specify - MP | | |

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| Complainant Details | Name: <u>P 464</u> | | UR: <u>113074</u> |
| | Election Status: | | Admission Status: |
| | Gender: <u>A</u> | DOB: | Post Code: |
| | Complainant Name <small>If different to above:</small> | | |

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| Complaint referred by: <small>If from an external source</small> | <input type="checkbox"/> Ministerial | <input type="checkbox"/> Local MLA | <input type="checkbox"/> Other QH Department |
| | <input type="checkbox"/> HRC | <input type="checkbox"/> MP | <input type="checkbox"/> Staff Referral |
| | <input type="checkbox"/> Response to Survey | <input type="checkbox"/> Other | <input type="checkbox"/> Not Known |

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| Complaint Handling Details <small>Please provide the date each action was completed</small> | Complaint submitted: <u>27/08/03</u> | | Complaint registered: <u>09/09/03</u> |
| | Acknowledgement: <u>28/08/03</u> | | First progress report: |
| | Date of Resolution/Closure: <u>28/08/03</u> | | |

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| Complaint Issue <small>See Complaint Categories and Description</small> | Category 1. <u>Access to Services</u> 2. <u>Communication</u> 3. Consent 4. Corporate Services 5. Cost 6. Grievances 7. Privacy/discrimination 8. Professional Conduct 9. Treatment | Description |
| Service Type | Location of Incident: <u>Specialist Clinic</u> | |
| Staff Category | Staff involved in the complaint: <u>Doctor</u> | |

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| Severity of Complaint | Level One: Trivial, misconceived, subject matter not warranting acceptance for investigation |
| | Level Two: Complainant could have resolved complaint easily with support from staff involved |
| | Level Three: Legitimate consumer complaints, especially about communication or practice management, but no lasting detriment |
| | Level Four: Significant issues of standards, quality of care, or denial of rights, complaints with clear quality assurance implications |
| | Level Five: Long-term or severe damage, including death, serious adverse outcome, professional misconduct |

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| Complainant Objective What does the complainant want to happen? | <input checked="" type="checkbox"/> Register concern | <input type="checkbox"/> Receive explanation | <input type="checkbox"/> Obtain apology |
| | <input type="checkbox"/> Obtain refund | <input type="checkbox"/> Access service | <input type="checkbox"/> Change procedure |
| | <input type="checkbox"/> Change policy | <input type="checkbox"/> Compensation | <input type="checkbox"/> Disciplinary action |
| Please provide details: | | | |

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| Resolution Mechanism/ Outcome By what means was the complaint resolved? | <input checked="" type="checkbox"/> Concern registered | <input type="checkbox"/> Explanation given | <input type="checkbox"/> Apology provided |
| | <input type="checkbox"/> Costs refunded | <input type="checkbox"/> Services provided | <input type="checkbox"/> Procedure/practice change |
| | <input type="checkbox"/> Policy change | <input type="checkbox"/> Compensation received | <input type="checkbox"/> Disciplinary action taken |
| | <input type="checkbox"/> No action taken | | |
| Please provide details: | | | |

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| Recommendation/ Action taken What action has been taken as a result of this complaint? | <input type="checkbox"/> Staff member/contractor counselled | <input type="checkbox"/> Training/education of staff provided |
| | <input type="checkbox"/> Duties changed | <input type="checkbox"/> Dismissal/ termination of contract |
| | <input type="checkbox"/> Quality improvement activity initiated | <input checked="" type="checkbox"/> No action taken |
| Please provide details: | | |
| Darren rang and provided clearer picture of diagnosis, apologised for any embarrassment and explained lack of communication | | |

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| Adverse Outcome | |
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| Narrative | Please provide a brief summary of the complaint P464 rang feeling very uncomfortable with examination by Doctor in Specialist Clinic |
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| Office Use Only Performance indicators | Acknowledgement letter – 3 days | Progress report – 21 days | Resolution – 35 days |
| | Date | | |
| Reported in trends analysis | | | |

28/8/03 - DQDSU ✓



Queensland Government
Queensland Health

Bundaberg Health Service District NOTIFICATION OF COMPLAINT

This form is to be completed by either a staff member or the person lodging the complaint.

Date: 27.08.2003

Time: 3.40pm

Name of Facility: Bundaberg Childers Gin Gin Mt. Perry

Complainant: Patient Visitor Other (please state) _____

Name: P 464 UR Number: 118074

Address: _____

Phone: 41-547548

Details of Complaint (attach additional information if necessary):

Has been to specialist clinic today, suffering soreness/pain in her left breast. Does not know the name of the doctor who saw her, but he had dark skin, dark hair and a moustache. The doctor spent about an hour with her, and then told her to get dressed, as he was going to get someone else to examine her, as he didn't know what was wrong with her. When the doctor returned, he didn't have anyone else with him, and asked her to again undress and proceeded to examine (play with) her breasts for about another half hour. _____ said she felt very uncomfortable with him, and with the examination that took 1.5 hours. If he didn't know what was wrong with her, he should have brought someone else in for another opinion. He also asked her if he could examine the lower part of her body, but she refused this request, as she was there because of a sore breast. She also indicated that the doctor's pants were wet, and this also made her feel very uncomfortable. She ended up leaving the clinic, without a diagnosis being made

28/8/03

- Dr. Dr. Quishi - Shocked by complaint. Acknowledged error + aimed to be thorough.
- Believes he acted in professional manner, included examination + re-examination to confirm ~~diagnosis~~ initial clinical findings.
- Denies explicit undressing 2nd time, when asked checked.
- Accepted that he didn't fully explain before exam/re-exam to patient.
- Did seek advice from Dr. Vignolo; Dr. Vignolo unable to examine patient.
- Counseled Dr. Quishi about prior explanation, being complete in examination + not prolonging examination unnecessarily + requirement for closure.

Dr. P 464

- Happy to explain + follow-up. Provided clearer picture of likely diagnosis + confirmed requirement for FIVE GP. Explained lack of communication; accepted
- Signature: Joan Dooley Date: 27.08.2003 Designation: Executive Support Officer by Mt.
(of person documenting the complaint) (if staff member)

- Praised her for making up + assured her BSH takes situation seriously.
- Apologised for any embarrassment; assured her that Dr. Quishi will be monitored.
- NPA.

[Handwritten signature]
28/8/03