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The Complaints and Disciplinary Process in New Zealand  
and the Effect of Complaints on Doctors.

*Wayne Kenneth Cunningham*

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## ABSTRACT.

New Zealand society assumes that the medical complaints process enhances the delivery of medical care, although the literature suggests that complaints may impact negatively on doctors, and their ability to practice.

This thesis examines the impact of the complaints process on doctors in New Zealand. It considers the practice of medicine from the viewpoints of the epistemology of medicine; the doctor-patient relationship; and the notion of professionalism.

It presents the results of research methods investigating New Zealand doctors using focus groups; a cross sectional questionnaire based survey; and in-depth semi-structured interviews.

Findings include:

- One in three doctors has received a complaint. The annual rate of complaint is 5.70%, 15% of complaints are upheld.
- Complaints impact negatively on the person of the doctor, the doctor-patient relationship, and doctors' ability to practice.
- The purposes of a complaints system include: the maintenance of trust and professional standards; being a voice for patients; and learning from mistakes and errors.
- Doctors' attitudes are consistent with notions of professionalism.
- Defensive medicine is an adverse outcome of the complaints process.
- Doctors suggest a Complaints Tribunal as a single point of entry into the complaints process.
- The current complaints process is not improving the delivery of medical care to New Zealand society.

New Zealand doctors are aware of both the biomedical and bio-psychosocial paradigms underlying modern medicine, and the results confirm the importance of the self of the doctor and the doctor-patient relationship in medical practice. The emergence of defensive medicine indicates that doctors may respond to complaints by practicing in a way that is not in their patients' best interests, but which serves to protect doctors themselves. Defensive medicine risks being unrecognised and becoming normalised into mainstream medical practice. The negative impact of complaints on doctors' values and beliefs indicate an erosion of values based professionalism.

This thesis suggests that an appropriate model for considering medical professionalism is as a state of *relationship* between doctors and society. Appropriate change to the complaints process may enhance the doctor-society relationship and ultimately enhance the delivery of medical care in New Zealand.

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