

## **POLICY: COMPLAINTS AND FEEDBACK**

### **Legislative Framework**

#### **Policy Statement**

The purpose of this policy is to develop and implement an open, responsive and confidential complaints handling process aimed at resolving complaints and improving quality and safety of service provision.

The organisation endeavours to foster openness in its communication with clients during counselling by being woman-centred, non-judgemental and empathic. Personnel are also encouraged to practice unconditional positive regard in response to all clients and offer support to them should they seek to offer feedback on their service.

The organisation encourages consumers, their representatives and staff to provide suggestions, compliments, concerns and complaints about the services provided to consumers of the organisation's services.

The organisation recognises that feedback provides opportunities to:

- Review service provision;
- Ensure that service delivery is consistent with the organisation's vision and mission statements;
- Identify and rectify areas that need improvement;
- Efficiently and appropriately manage complaints; and
- Acknowledge the performance of staff members.

The organisation is committed to a complaints and feedback process which is:

- fair and open;
- effective and efficient;
- responsive and customer focused; and
- ensures privacy and confidentiality.

Receipt of a complaint will be acknowledged immediately and complaints will be addressed promptly in accordance with their urgency. Where appropriate, staff will attempt to resolve the complaint at point of service in accordance with the complaints handling procedures.

The organisation is committed to continual improvement to the safety and quality of the services it provides and the complaints handling process. The organisation will demonstrate this commitment by seeking feedback from consumers about their satisfaction with the complaint-handling process and outcome, and ensuring that the complaints handling process provides reliable and accurate information to identify trends and eliminate causes of complaint.

Every complaint will be addressed in an equitable, objective and unbiased manner throughout the complaint handling process in accordance with the requirement of procedural fairness. No person making a complaint will have any service withdrawn or limited as a result of making a complaint.

Complaints will be dealt with impartially with emphasis on solving the problem rather than assigning blame.

#### **Responsibility and Accountability**

This policy applies to all personnel, clients and their support people

## Procedures

The organisation encourages clients and other service users to provide feedback on Children by Choice's service delivery by:

1. Ensuring that all clients and support people who attend the organisation for face to face counselling appointments complete a counselling evaluation form.
2. Ensuring that information regarding client's rights and responsibilities are easily accessible in the waiting room.
3. Encouraging clients to reflect on the helpful or least helpful aspects of the counselling service they have received at the organisation, via the telephone and face to face.
4. Providing free, anonymous email contacts and feedback opportunities via the website.
5. Ensuring that attendees at all the organisation education and training courses are encouraged to complete evaluations .
6. Ensuring the complaint management process is open, clear and plainly evident to consumers and staff.

## Charges

Access to the complaint handling process is free of charge.

## Providing feedback

- Feedback can be received by the organisation in person, via the telephone, post or email.
- When offered in person through evaluation forms, these forms never collect or are attached to identifying information.
- When offered via telephone, post or email, services users may have the option of including identifying information, however when stored and collated for use, these comments are de-identified.

## Making a complaint

- The organisation outlines its complaints management process in a "Complaints" page which is made available by a link on the homepage of the organisation website and is available in hard copy by request.
- A complaint may be made to any member of staff or member of the management committee either orally, in person or on the telephone, or in writing by letter or by email.

## Assistance

- Complainants who make an oral complaint will be offered assistance to clarify their concerns and put them in writing if they wish.
- Complainants with a first language other than English will be offered the assistance of a translation and interpretation service for the purposes of communication in relation to their complaint.
- The complainant may be supported by a representative of another organisation or advocate, as they see fit throughout the complaint process.

## Receiving the complaint

- 1 For oral complaints, the staff member/management committee member receiving the complaint will clarify the complainant's issues of concern, the outcomes they are seeking and the complainant's understanding of how the information they provide will be used and will complete the Record of Complaint/Feedback form.
- 2 Where a complaint is made to a member of the management committee, it will be immediately referred to the manager.
  - 2.1 Complaints about the manager will be handled by the president of the management committee.
- 3 A Record of Complaint/Feedback form will be attached to the front of written complaints and hard copies of electronic complaints.

### Assessment of the complaint

- 1 The staff member who receives the initial complaint (or in the case of a complaint made to a management committee member, the manager) will conduct an initial assessment of the issues raised by the complaint to determine the severity of the complaint against the Assessment Criteria contained in the **Australian Standard: Customer Satisfaction – Guidelines for Complaints Handling in Organisations** resource.
- 2 The assessment of this severity will be recorded on the **Record of Complaint/Feedback form**.
- 3 Where complaints relate to discrimination, sexual harassment, victimisation or vilification, complainants will be provided with a copy of the organisation's [Anti-Discrimination Policy](#) and procedures.
- 4 Where complaints relate to privacy and data collection, complainants will be provided with a copy of the organisation's [Privacy Policy](#) and relevant procedures.

### Responding to the complaint

- 1 The following action will be taken on the basis of the assessment of severity:
  - **Serious:** immediately referred to the manager (on the day of receipt)
  - **Major:** immediately referred to the manager (within 1 working day)
  - **Moderate:** within the scope of their responsibilities, the staff member receiving the complaint will endeavour to resolve the complaint at point of service. Where the complaint cannot be resolved to the complainant's satisfaction within 2 working days, or the staff member receiving the complaints considers the complaint is unlikely to be resolved within 2 working days, the complaint will be referred to the manager.
  - **Minor/Minimum:** the staff member receiving the complaint will endeavour to resolve the complaint at point of service. Where the complaint cannot be resolved to the complainant's satisfaction within 2 working days, or the staff member receiving the complaints considers the complaint is unlikely to be resolved within 2 working days, the complaint will be referred to the manager.
- 2 Where a moderate or minor/minimum complaint is resolved at point of service, the staff member will take the following steps:
  - 2.1 communicate the outcome of the complaints handling process to the complainant in an appropriate manner (by telephone call, email or in person);
  - 2.2 confirm with the complainant that the complainant is satisfied with the outcome of the process;
  - 2.3 document the action taken and the complainant's satisfaction on the Record of Complaint/Feedback form; and
  - 2.4 forward the completed Record of Complaint/Feedback form with any accompanying documentation to the manager.
- 3 For serious and major complaints and for moderate and minor/minimum complaints that are not/cannot be resolved at point of service, the Record of Complaint/Feedback form and any accompanying documentation will be forwarded to the manager (or if the complaint is about the manager, the president of the management committee).
- 4 Within 2 days of receiving notice of an unresolved complaint, the manager will contact the complainant to:
  - 4.1 confirm their understanding of the complainant's issues and the outcomes sought by the complainant;
  - 4.2 advise the complainant of the next steps to be taken in the complaints handling process;
  - 4.3 provide the complainant with a copy of the Complaint Policy, and Anti-Discrimination Policy if appropriate;
  - 4.4 outline the expected timeframes for considering the matter; and
  - 4.5 if the complaint has been received in writing, acknowledge the complaint in writing.
- 5 The manager will notify the president of the management committee of any serious or major complaints as soon as possible.

### Investigating of the complaint

- 1 The manager will investigate the complaint to identify the events that took place, the causes of the complaint, remedial action that should be taken and improvements that might be made.
- 2 Where a complainant names an individual staff member, the person will be told the nature of the claims made against them and they may be directed to take leave or to alternative tasks without client contact, until the complaint is resolved
- 3 The investigation will be conducted in accordance with the principles of natural justice. The views of the complainant and the staff directly involved will be considered along with other relevant information.
- 4 At the conclusion of an investigation, the manager will provide the president of the management committee with a draft report which outlines the agreed facts, reasons for decisions, the underlying causes of the complaint and recommended improvements.
- 5 The manager will ensure the complainant and any staff directly affected are provided with the agreed facts, reasons for decisions, the underlying causes of the complaint and recommended improvements.
- 6 The conclusions of the investigation will be discussed with the complainant and action that is to be taken by the organisation is agreed. Where action to be taken involves managing an employee's performance or taking disciplinary action, the [Performance Management Policy](#) and associated disciplinary procedures will be complied with.

### Appealing the organisation's response

- 1 If no agreement is reached about what action is to be taken, or the complainant is unhappy with the management committee's response, mediation may be entered into. Additionally, the complainant will be provided with information about relevant complaints agencies including (where applicable):
  - The Office of the Health Ombudsman - phone: 133 646; website: <http://www.oho.qld.gov.au/>
  - The Department of Communities, Child Safety and Disability Services – phone: 1800 080 464; website: <https://www.communities.qld.gov.au/gateway/about-us/customer-service-compliments-and-complaints>

### Complaint Outcomes

1. The organisation has identified three categories of outcomes arising from complaints:
  - i. Outcomes that directly impact on a consumer or complainant such as:
    - a. an apology;
    - b. an amendment to a client record;
    - c. confirmation of information in writing;
    - d. referral to another service.
  - ii. Outcomes that improve safety and/or quality of service provision:
    - a. review and revision of policies and procedures;
    - b. review and revision of systems;
    - c. review and revision of staff performance;
    - d. review and revision of information/publications.
  - iii. Referral of the information arising from the complaint to another agency, including:
    - a. allegations of criminal behaviour: Police
    - b. allegations of breach of professional standards by a registered health practitioner: appropriate registration management committee
    - c. risk to health and safety of a child: the Department of Communities, Child Safety and Disability Services
2. In circumstances where a complaint raises issues of a legal claim against the organisation, information will be referred to the organisation's insurer. The organisation will make every effort to participate in an appropriate mediation or conciliation to address any such claims.

3. On completion of the investigation and subsequent discussions with the complainant, the complaint will be closed. The manager will ensure that the **Feedback and Complaints Register** is updated.

#### Unreasonable complaints

- Where the organisation has concerns that the complainant's actions are unreasonable, the complaints process will be handled in accordance with the Ombudsman's [Managing Unreasonable Complainant Conduct: Practice Manual](#).

#### Anonymous complaints

- 1 Complaints can be made anonymously to the organisation.
  - 1.1 Any complaint made, where there is no information identifying the complainant, will be forwarded immediately to the manager for assessment. The manager will determine the extent to which it is possible and necessary to take action on the complaint.
- 2 A complainant may also wish to make a complaint, but for their details to be withheld. Complainants who wish to have their details withheld will be advised that their complaint will be considered subject to any limitations that arise from the necessity of keeping their details confidential.

#### Confidentiality

- 1 Personally identifiable information concerning the complainant will be used where needed for the purposes of addressing the complaint within the organisation.
- 2 Where a complaint relates to the actions of specific staff members those staff may be advised of the identity of the complainant if it is necessary to properly assess and/or investigate the complaint.
- 3 No reference to the lodging of a complaint will be made on a consumer's case history record.
- 4 Non-identifying information will be collated for the purposes of monitoring and reviewing the quality and safety of service provided by the organisation and the complaints handling process.

#### Accountability

The manager is accountable for actions and decisions of the organisation with respect to complaints handling, and will provide regular reports on complaints to the management committee.

### ***Record keeping***

#### Feedback

1. Feedback provided through evaluations at training are collated following the course and kept electronically recorded.
  - 1.1 Evaluation forms following face to face counselling sessions are kept separate to client information and collated at the end of each quarter.
2. Evaluation from education and training sessions is consolidated within two weeks of the course by the education and training manager.
  - i. Evaluation feedback provided to the organisation via a training partner is also collated by the education and training manager.
  - ii. This feedback is then reviewed by the manager for action if required.
  - iii. All feedback is reviewed on a yearly basis to inform future community education.
3. Feedback sent via email, made via telephone or provided in person should be sent to the manager by email from the staff member who received the feedback.

Please note that complaints or grievances are dealt with in accordance with procedures below.

## Complaints

1. Each complaint will be given a unique identifier – with the last two digits of the calendar year and a number allocated sequentially ie 06/0001 will be followed by 06/0002.
2. The manager and other staff involved in handling complaints will document activities associated with dealing with a complaint in the form of file notes, telephone notes, emails and correspondence.
3. For each complaint, the manager will enter information into the organisation's Feedback and Complaints Register against the allocated Complaint Number. The following information will be recorded:
  - a. who is documenting the complaint and the date of documentation
  - b. date complaint received, who received the complaint
  - c. complainant profile (client, representative, advocate etc)
  - d. nature of complaint
  - e. summary of complaint issues
  - f. type of action taken on the complaint
  - g. outcome of complaint
  - h. whether the complainant was satisfied with the outcome
  - i. the advice given to the complainant about the outcome of the complaint
  - j. date complaint finalised
4. For moderate and minor/minimum complaints resolved at point of service, documentation forwarded to the manager will be assigned a unique identifier.
5. All documentation relating to all other complaints will be kept in a folder marked with the unique identifier for that complaint and the complainant's surname, which will be called a Complaint File.
6. All complaint files and documentation will be kept in locked filing cabinet accessible to the manager and honorary secretary only. Any complaints made against the manager will be stored in a secure location by the president, who is also responsible for passing these and any other relevant information on to a successor where relevant and appropriate

## *Reporting and continuous improvement*

### Feedback

1. Feedback is collated and aggregate data is reported annually in the organisation annual report.
2. Where feedback requires action by the organisation, it will be reported to the management committee via the manager.
3. Feedback may also be used to verbally provide staff with necessary information about their performance, both informally and formally.
4. The service manager is responsible for conveying information arising from feedback to the appropriate staff members, within an appropriate timeframe.
5. Following the submission of negative feedback, this should be explored with the relevant staff members in order to establish a clearer understanding of the circumstances reported.
  - a. Where necessary, this will be raised and solutions brainstormed at team meetings and management committee meetings.
  - b. Agreed upon solutions will then be decided and implemented in order to improve service delivery.
  - c. Any changes to processes arising from feedback should be reviewed regularly by the service manager.

### Complaints

1. All complaints will be classified and then analysed to identify systematic, recurring and single incident problems and trends.
2. Information arising from complaints will be used to help eliminate the underlying causes of complaints.
3. The manager will prepare reports for the management committee including, but not limited to:

- The number and type of complaints received for the month and the year to date;
  - The average time, the shortest time and the longest time taken to resolve a complaint;
  - A summary of the outstanding complaints;
  - A summary of any serious and major complaints and the action taken or proposed to be taken on those complaints; and
  - An analysis of any systematic or recurring problems or trends arising from complaints data.
- 4 The management committee will receive and consider the reports on a monthly basis under a standing agenda item for committee meetings, and make recommendations to the manager about action required to rectify systemic and recurring problems.
  - 5 The manager will provide additional information or submissions to the management committee as necessary.
  - 6 The management committee will make a record of decisions or action taken.

### ***Staff and management committee skills and development***

1. All new staff and management committee members will be required to be familiar with:
  - a. the role and importance of consumer participation, feedback and complaints;
  - b. the organisation's complaints handling policy and procedures;
  - c. receiving and assessing complaints; and
  - d. record-keeping responsibilities in relation to complaints.
2. The organisation will ensure that one staff member is formally trained in dispute resolution management.

### ***Monitoring the complaints handling process***

The organisation will review, monitor and audit its complaint policy and procedures in accordance with the [Policy Development Policy](#).