

**Parent document:** UCWB Rules and Regulations

**Document owner:** Chief Executive

**Document category:** Operational – Organisation-wide

## 1. Policy Statement

We welcome and value complaints as well as compliments and have a strong commitment to respond to and resolve complaints. We recognise that the effective management of complaints is critical to the improvement of our services and the organisation.

Complaints provide the opportunity for us to address concerns and issues fairly and build an environment of accountability, transparency and continuous improvement across the organisation.

Compliments provide us an insight into client experiences and allow us the opportunity to continue to build on those positive experiences.

The principles of *AS/NZS 10002: 2018 Guidelines for complaint management in organisations*, guide this policy and the [Complaints Management Procedure](#).

## 2. Purpose

The purpose of this policy is to ensure:

- fair, accountable, transparent and responsive management of complaints
- complaints are handled promptly and as close to the source as possible
- effective monitoring of complaints
- identification and implementation of business improvement opportunities.

## 3. Scope

This policy applies to all staff (employees, volunteers and contractors) and Board members.

This policy does not apply if the subject of the complaint relates to:

- a workplace grievance involving employees
- complaints made under the [Whistleblower Policy](#)
- matters better managed under other regulation, legislation or via criminal investigations.

## 4. Definitions

<b>Complaint</b>	An expression of dissatisfaction with a service and/or decision of the organisation.
<b>Complainant</b>	The person making the complaint (may be the client or another person making the complaint on their behalf)
<b>Complaint manager</b>	The person allocated responsibility for managing a specific complaint.
<b>Compliment</b>	An expression of satisfaction or approval with a service and/or decision of the organisation.

## 5. Accessibility of Complaint Process

This **Complaints Management Policy** is available to the public on the UCWB website via the 'Your Feedback' section which informs clients and others how to provide feedback including complaints.

Information sheets regarding feedback and complaints is also provided directly to clients as part of the service departments on-boarding process.

## 6. Complainant Rights and Responsibilities

### 6.1 Rights

Any person making a complaint can expect that we will:

- Deal with the complainant in a respectful, fair and objective manner adhering to the principles of natural justice in the management of the complaint.
- Provide advice regarding the complaints process.
- Ensure that it is easy to make a complaint and there is support and assistance to enable a person to make a complaint.
- Provide help to those who may have difficulties representing themselves, including arranging access to interpreters, aids or advocates and documenting the complaint in writing where circumstances warrant.
- Advise complainants about external complaints mechanisms such as the Aged Care Quality and Safety Commission, National Disability Insurance Scheme Quality and Safeguards Commission and the Education Standards Board of SA.
- Resolve the issues or concerns as quickly as possible and ensure the complainant is regularly informed of progress.
- When a complaint is not resolved at the first point of contact, the complainant will receive:
  - \* notification of the person investigating within **2 business days**
  - \* an update at least every **5 business days**
  - \* resolution within **2 weeks** where possible.
- Where the complaint is reasonable, ensure an appropriate solution.
- Provide clear information about the action taken and the reasons for that action.
- Provide information about any further avenues for review or appeal when the complaint is not resolved to their satisfaction.

## 6.2 Internal Review

If a complainant is not satisfied with the management or resolution of their complaint, they can request a review of the complaint. This request may be made by phone, in person or in writing.

We will aim to respond to all requests for an internal review **within 10 business days** of the request being made.

The general manager or executive director of the division providing the service the complaint relates to will ensure that internal reviews are conducted in accordance with the **Complaints Management Procedure** and will decide the most appropriate response to the complainant.

## 6.3 Responsibilities

Complainants can assist our staff to resolve their complaint by:

- clearly identifying their issues of complaint and providing all relevant information regarding their complaint
- assisting with any requests for information, enquiries or investigations in the timeframes agreed
- showing respect to our staff as they work to resolve the complaint.

Complaints maybe made anonymously, however, where the information provided is insufficient to allow thorough investigation of the issue, we will be unable to progress the complaint.

## 7. External Complaints

We will take reasonable steps to inform any complainant receiving services that their complaint can also be raised with external organisations.

We will provide support and assistance to the complainant in contacting these external organisations.

## 8. Recording, Monitoring and Reporting

Complaints and compliments are recorded on the **Feedback Form** and in the **Stakeholder Feedback Register** and a comment noting a complaint made may also be recorded in the client's file. Records relating to complaints will be retained for a minimum of seven years.

All complaints and compliments are recorded within the **Stakeholder Feedback Register** and trends reviewed and reported to senior managers, the Executive, Clinical Governance Committee and the Board regularly in accordance with the **Complaint Management Procedure**.

Continuous improvement actions arising from a complaint are recorded within the **Continuous Improvement Register** which is subject to monitoring and reporting in accordance with the **Quality Management Policy**.

## 9. Induction

Staff will be inducted to the complaints management system and the process for managing complaints is also included in the corporate induction session for all new staff members.

## 10. Complaints Management System

Our stakeholder feedback processes form part of our organisations quality management system and we are committed to using the information gained through complaints to continuously improve.

Our complaints management system will be reviewed regularly. Reviews may be included in the **Quality and Compliance Management Schedule** or may be conducted as an internal review within a department or division.

## 11. Delegations

There are no delegations established by this policy.

## 12. Responsibilities

<b>Board</b>	Receive notice of complaints deemed as serious breaches or risk to the organisation Receive an annual data complaints report
<b>Chief Executive</b>	Receive notice of complaints deemed as serious breaches or risk to the organisation Ensure that mandatory notification and/or reporting of complaints to external agencies occurs where required
<b>Clinical Governance Committee</b>	Receive six-monthly complaints data reporting
<b>Executive</b>	Receive six-monthly complaints trend reporting
<b>Senior Manager/Director</b>	Ensure that mandatory notification and/or reporting of complaints to external agencies occurs where required Ensure internal reviews are conducted in accordance with the Complaints Management Procedure Receive and respond to complaints trend reporting
<b>Line manager</b>	Ensure all complaints are recorded on a Feedback Form and in the Stakeholder Feedback Register Ensure continuous improvement actions are recorded on the Continuous Improvement Register
<b>Complaint manager</b>	Manage the complaint in accordance with this policy and the Complaints Management Procedure
<b>Quality team</b>	Ensure complaints trend reports are provided in accordance with this policy and the Complaints Management Procedure
<b>All staff</b>	Follow the Complaint Management Procedure Assist a complainant to make a complaint, when requested

<b>Complainant</b>	<p>Clearly identify their issues of complaint</p> <p>Provide all relevant information about their complaint to the best of their ability</p> <p>Co-operate with any requests for information, enquiries or investigations</p>
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## 13. Relevant Legislation, Policies, Procedures and Other Documents

### 13.1 Legislation

Aged Care Act 1997 (Cth) and User Rights Principles 2014 [Cth] (made under section 96-1 of the Aged Care Act 1997)

Disability Discrimination Act 1992 (Cth)

Education and Early Childhood Services (Registration and Standards) Act 2011 (SA)

Health and Community Services Complaints Act 2004 (SA)

National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018 (Cth)

National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018 (Cth)

National Disability Insurance Scheme Terms of Business for Registered Providers 2016 (Cth)

### 13.2 Policies and Procedures

Complaints Management Procedure

Consumer Services Policy

Quality Management Policy

### 13.3 Other Documents (internal and external)

AS/NZS 10002: 2018 Australian/New Zealand Standard™ Guidelines for complaint management in organisations

Australian Service Excellence Standards

Continuous Improvement Register

Feedback Form

Feedback Information Sheets

Home Care Common Standards

National Disability Insurance Scheme Practice Standards

National Standards for Mental Health Services

Stakeholder Feedback Register

Quality and Compliance Management Schedule

## 14. Document History

Version No.	Version Date	Next Review Date	Approved by	Summary of Changes
4.0	25/5/22	25/5/27	Chief Executive	<p>Changes to document category</p> <p>Language, positions, titles and responsibilities updated</p> <p>Reporting requirements updated to include reporting to the Clinical Governance Committee</p> <p>Policy Principles removed from policy to align with new template</p> <p>Policy updated to include the capturing and recording of Compliments</p>
3.0	22/1/19	22/1/22	EM Corporate Services	<p>Minor review:</p> <p>7.2 - Internal Review added to meet requirement of Australian Service Excellence Standards</p> <p>Responsibilities updated</p>
2.0	16/10/18	16/10/21	EM Corporate Services	<p>3 Scope expanded to include representatives of consumers</p> <p>5 Policy Principles updated to include requirement to refer and notify</p> <p>6 Accessibility of Complaint Process amended to include more specific information about how information on complaints process is provided</p> <p>7.1 Rights amended for contact within 2 business days rather than 5 to be consistent with the Complaints Management Procedure</p> <p>8 National Disability Insurance Scheme (NDIS) Complainants added for compliance with NDIS (Complaints Management and Resolution) Rules 2018</p> <p>Requirement for retention of records added to 10 Recording Monitoring and Reporting to comply with NDIS Terms of Business</p>
				<p>11 Training added for compliance with the NDIS (Complaints Management and Resolution) Rules 2018</p> <p>12 Complaints System Review added for compliance with the NDIS (Complaints Management and Resolution) Rules 2018</p> <p>Legislative references updated and references to relevant quality standards added</p>

Version No.	Version Date	Next Review Date	Approved by	Summary of Changes
1.0	26/2/18	26/2/21	Board	Document created Separates Complaint Management Policy from Quality Management Policy. Supported by Complaint Management Procedure.