

FEEDBACK AND COMPLAINTS POLICY

ACQS 6 – FEEDBACK AND COMPLAINTS



1. Purpose

To provide clear guidelines to staff and volunteers responding to all compliments, suggestions, complaints and feedback.

2. Scope

This policy applies to:

- a) All Northside staff and volunteers to provide clear guidelines and processes when responding to complaints;
- b) All Northside clients and/or their carers, parents, guardians, external stakeholders and members of the public for their information when providing compliments, suggestions and feedback or wishing to lodge a complaint; and
- c) External advocates, case managers, agencies and service providers for the purpose of advising a Northside client who wishes to lodge a complaint.

3. Policy

Northside values compliments, suggestions and feedback and supports the right of individuals to raise any problems, concerns or complaints that they may have regarding Northside facilities, services, personnel, policies, procedures or practices. Northside is committed to promptly and fairly resolving such issues in a conciliatory, non-threatening, respectful and confidential manner.

At all points during a service engagement, Northside;

- Encourages and supports individuals, family, friends, carers and others to provide robust feedback and make complaints.
- Ensures individuals are made aware of and have access to advocates, language services and other methods of raising and resolving complaints.
- Ensures appropriate action is taken in response to complaints and an open discourse process is used when things go wrong.
- Regularly reviews feedback and complaints and uses them to improve the quality of services.

Feedback

Feedback can be positive and negative. Negative feedback is defined as minor dissatisfaction or a minor issue that can be easily resolved and/or the client does not want to make a formal complaint. For example, feedback on an occasion of late service provision or dissatisfaction with a provided meal. Positive feedback is a compliment or praise regarding service delivery, staff or the organisation. Feedback can be formal or informal.

Informal Feedback

Document Type: Policy	Doc Ref No.: COM-POL-011	Distribution:
Version No.: V3	Due for Review: 23/07/2023	All Staff, All Clients.

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Informal feedback is made in the course of interaction, for example, a consumer mentioning to the bus driver that the outing location was unsatisfactory. Informal feedback is recorded by the staff person using the online notification tool.

Formal Feedback

Formal feedback is given with the intention of providing feedback such as a consumer completing a Client Feedback form or specifically informing a staff person about their dissatisfaction with a component of the service.

When feedback is not written on a client feedback form, the staff person receiving it completes an online notification tool and provides enough information for a follow up or action to occur.

Formal Complaints

Formal complaints are complaints received from a client, stakeholder or staff members in which a stated concern is expected to be addressed, investigated and responded to through a formal processes. Formal complaints are stated as such and can be submitted online, phone call, face to face meeting or in writing. Formal complaints must be directed to and managed by a member of the Community Service management team.

An effective complaint handling process is fair, accessible, responsive, and efficient and contributes to ongoing quality improvement in service delivery.

Northside Community Service adopts the following principles, from the Aged Care Quality and Safety Commission, in managing complaints and ensuring open disclosure. If an open disclosure meeting is to be held, the Senior Manager will prepare and conduct the meeting/s with the client/representative. We consider these principles in the management of complaints and open disclosure meetings (where an adverse event may have occurred with harm or potential harm to consumers is evident). The specific details of how complaints are managed are included in Complaints Management Process Table detailed in the Procedure section of this policy.

1. Be open and timely

If things go wrong in the provision of care and services to a client (including adverse events or incidents) we communicate and provide information in a timely, open and honest manner. We provide ongoing information until the complaint or issue is resolved.

2. Acknowledge

The person managing the complaint will:

- Acknowledge all complaints quickly.
- Repeat what you've heard in your own words. This creates a shared understanding and establishes empathy.
- Express regret using the words 'I/we are sorry and understand your concern', but do not admit liability or apportion blame.
- Tell the complainant what happens next with their complaint and provide contact details for the staff member handling the complaint.
- Reassure all parties that confidentiality is respected.

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- Give an estimate of how long the process may take.
- Invite those involved to participate in the resolution process; engage the consumer.
- Complaints that are straightforward with low risk can be resolved on first contact.

3. Assess

- Assess the complaint and prioritise against other complaints the service is handling.
- Clarify the concerns and issues raised by the complainant.
- Determine the level of risk to the consumer, other consumers and the service.
- Ask the consumer and complainant how they would like to see the complaint resolved.
- Show a positive, professional attitude and thank the complainant for bringing the matter to your attention.
- Plan (if required).

4. Respond

- Apologise using the words ‘I/we are sorry’. It can improve your relationship with the complainant.
- Respond to the complainant with a clear decision and explain your reason for the decision.
- Written responses may be more suitable for complex matters.
- Communicate outcomes promptly.
- Recognise that it may take several meetings to come to a resolution.

5. Follow up

- Check if complainant is satisfied with the resolution.
- Ask complainant for feedback.
- Outline alternative options available to the complainant.
- Reviews should be carried out by staff who haven’t been previously involved.
- Complaints are evaluated and discussed at the relevant committee e.g. improvement, clinical governance meeting (with consideration to confidentiality).

6. Consider

Northside encourage relevant staff and teams to evaluate the outcome for the complainant and reflect on improvements that could be made to the process, the service or the knowledge or skill of staff.

4. Procedure

Formal Complaints Management Process and Timeline

Step	Timeline
1. A complaint is received via support staff or directly from a consumer/representative via letter, email, face to face or telephone	On day complaint is received

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<p>2. A notification of the complaint is created by the person receiving the complaint and submitted in the notification tool. The complaint is reported to the line manager.</p>	
<p>3. The notification tool alerts all Community Service Managers and Senior Management of the complaint.</p> <p>In face to face or telephone contact the person receiving the complaint encourages the person and assures them it is OK to make the complaint, that it is taken seriously and that it helps us improve our care and services. With written complaints the consumer is contacted by telephone or face to face.</p> <p>Complainant is offered a copy or link to the organisations Feedback and Complaints process.</p>	
<p>4. The complaint is reviewed by the Line Manager and relevant information and proposed action is recorded.</p>	<p>Within 2 working days of receipt of complaint</p>
<p>5. The Line Manager contacts (by telephone or letter) the consumer to advise:</p> <ul style="list-style-type: none"> ▪ the complaint has been received and is being assessed ▪ the process that is followed including confidentiality ▪ the timeline ▪ their right to an advocate and advocacy agency support (see Advocacy Policy) ▪ who their contact person is and details on how to contact them ▪ when they will be contacted again ▪ how to access a copy or link to the organisation’s Feedback and Complaints process 	<p>Within 2 working days of receipt of complaint</p>
<p>6. The Line Manager reports follows up and proposes action to the Senior Manager.</p>	<p>Within 3 working days of receipt of complaint</p>
<p>7. The Senior Manager reviews the complaint and decides level of risk, the action to be taken and who takes it and a plan for resolution.</p>	<p>Within 10 working days of receipt of complaint</p>
<p>8. The Senior Manager reports medium and high level risk, complaints action and plan for resolution to the Executive Director.</p>	

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<p>9. The Senior Manager updates the Line Manager about the progress to action the complaint and commences investigation/action/plan. If the complaint involves low level risk the action and investigation is led by the line manager. Medium and High Level risk complaint processes are led by the Senior Manager in consultation with the Executive Director. Investigation principles include: impartiality, confidentiality, transparency and timeliness. Meetings are held with the complainant if necessary.</p>	<p>Within 15 working days of receipt of complaint</p>
<p>10. Action is carried out including providing an apology to the complainant. Person/s affected by the complaint are fully informed of all facts and given the opportunity to provide further information and contribute to the solutions.</p>	
<p>11. The complainant is advised of the actions taken to address the issues raised and the outcome of the complaint in a letter.</p>	
<p>12. If the complainant is not satisfied with the outcome they are advised of the complaints appeal process.</p>	
<p>13. If the complainant wishes to appeal, the complaint is reviewed by the Senior Manager or, in cases where the Senior Manager is the investigating Manager, the CEO, whose decision is final.</p>	<p>Within 20 working days of receipt of complaint</p>
<p>14. The client is advised of the Senior Manager’s (see above) decision and of their option to go to an advocacy agency.</p>	
<p>15. When the complaint is finalised a staff person is identified by the Line Manager or Senior Manager to make sure that the client feels comfortable to continue accessing the service and to obtain feedback on the complaints procedure. The complaint is then closed following evaluation of the complaint. Evaluation includes documentation of the actions taken, the satisfaction of the complainant with the outcome and validation that appropriate education, training and staff support processes have been implemented to prevent the issue recurring.</p>	

Compliments and Feedback

1. All compliments and feedback received verbally or in writing in relation to a staff member, volunteer, program, service or any other aspect of Northside operations will be entered into the electronic Notification Tool located on each staff member’s desktop computer and smart device; and
2. On completion of entering information into the electronic tool, the staff member receiving and documenting the compliment and feedback will provide the compliment to the relevant individual, and advise the relevant manager of the compliment.

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Informal Complaints

1. All informal complaints received (that do not require a formal response) regarding a staff member, volunteer, program, service or any other aspect of Northside operations will be entered into the electronic Notification Tool located on each staff member's desktop computer and smart device;
2. On completion of entering information into the electronic tool, the staff member receiving and documenting the informal complaint will provide details to the relevant manager;
3. As informal complaints generally require no formal investigation but do require a follow up or a response, the Manager, Executive Director or CEO should address as appropriate i.e. speak with relevant staff if the matter is in relation to a performance issue or through quality or service improvement measures; and
4. Where an informal complaint is received from a Northside client, and where deemed appropriate, the relevant manager will make a file note of the informal complaint on the client's hard or electronic file.

Formal Complaints

1. All formal complaints received regarding a staff member, volunteer, program, service or any other aspect of Northside operations will be entered into the Notification Tool located on each staff members desktop computer and smart device;
2. On receipt of a formal complaint, the Manager, Executive Director or CEO will be made aware of the complaint immediately;
3. The individual lodging a formal complaint will be informed of the process and provided a copy of the Complaints and Feedback Policy;
4. A Complaints Investigation Process will be commenced and a report compiled by the relevant Manager, Executive Director or CEO to enable prompt and satisfactory investigation;
5. Where a formal complaint pertains to the CEO, this will be directed to the Chair of the Northside Board;
6. If the formal complaint remains unresolved as a result of the outcome by the relevant Manager, the matter will be forwarded to the relevant Executive Director;
7. If the formal complaint remains unresolved as a result of the outcome by the relevant Executive Director, the matter will be forwarded to the CEO or Chair of the Northside Board;
8. If the formal complaint continues unresolved as a result of the outcome by the CEO or Chair of the Northside Board, the matter will be referred to a relevant external advocacy service;
9. Once a formal complaint has been investigated and the matter resolved, the outcome will be confirmed in writing and forwarded to the Complainant. The outcome will also be recorded in the final Complaints Investigation Report;
10. The general nature of the formal complaint, where appropriate, will be documented on service and continuous improvement plans to enable the organisation to address as part of its commitment to quality improvement; and
11. All formal complaints that have been documented and actioned will be filed in the central 'Formal Complaints

Folder' located within the Human Resources Electronic filing system. Where the formal complaint relates to a Northside client, the investigating Manager will forward copies of the Complaints Investigation Form and relevant documentation to the Line Manager for filing on the clients' electronic or hard copy file.

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Confidentiality of Complaints and Disputes

As far as possible, the fact that an individual has lodged a complaint and the details of that complaint are kept confidential amongst staff directly concerned with its resolution. The individual's permission is obtained prior to any information being given to other parties that it may be desirable to involve in order to satisfactorily resolve the complaint or dispute. Complaints that are sensitive in nature are managed by the Senior Manager.

Working With External Complaints Agencies & Mediation

If Northside receive a request to provide information or input from an external complaints/advocacy agency we provide relevant information as requested. Information provided to external agencies is documented in a complaint form, detailing the information provided and any relevant documentation and filed by the Manager. If Northside are provided with a direction from the Aged Care Complaints Commissioner, Northside will follow that direction and keep a record of the actions taken on the complaint form/file.

Aged Care Quality and Safety Commission

If an individual is not satisfied with the response following feedback or a complaint, a notification may be lodged with Aged Care Quality and Safety Commission. A response will be provided within 24 to 48 hours after receiving the complaint. If the matter is urgent, free call 1800 915 822.

[Lodge a complaint | Aged Care Quality and Safety Commission](#)

5. Definitions

Northside: Northside Community Service Limited

Client: An individual engaged in a service, also known as a *consumer, service user or care recipient*

Advocate: A person who, with the authority of the client, represents the client's interests.

Complaint: Serious dissatisfaction with the care and services provided.

Feedback: Positive or negative information regarding care and services that is not serious enough to warrant a complaint.

Incident/adverse event: an event or circumstance which could have (near miss) or did lead to unintended and/or unnecessary psychological or physical harm to a consumer that occurs during a service engagement.

Informal Complaint: is more a formal comment, recommendation or smaller issue that does not require a response, e.g. someone just wants to air a concern and ensure that a member of staff is aware of the issue and that it is brought to the attention of the Manager, Executive Director or Chief Executive Officer, with all parties in agreement and satisfied with the outcome.

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Formal Complaint: is an issue that is not resolved at the first point of contact, and needs further investigation. A Complaints Investigation form must be completed by the appropriate Manager, Executive Director or Chief Executive Officer for action.

Open disclosure: is the open discussion that an aged care provider has with people receiving aged care services when something goes wrong that has harmed or had the potential to cause harm to a person receiving aged care service. The elements of open disclosure are an apology or expression of regret (including the word 'sorry'), a factual explanation of what happened, an opportunity for the consumer to relate their experience, and an explanation of the steps being taken to manage the event and prevent recurrence. Open disclosure is a discussion and an exchange of information that may take place over several meetings.

6. Responsibilities – Key roles & responsibilities

Management develop, maintain, promote and monitor processes and procedures that ensure that clients are encouraged and supported to make complaints and provide feedback and that these are effectively responded to. Open disclosure is the basis of our approach to managing complaints and feedback.

Staff follow policies and procedures, participate in development opportunities and encourage and support individuals in making complaints, providing feedback and resolving issues. Staff utilise complaints and feedback to identify ways to improve care and services.

Clients and/or their representatives make complaints and provide feedback whenever they feel it is necessary and advise management if they feel they are not encouraged or supported to do so.

7. Standards, Legislation and Documents

- Aged Care Quality and Safety Commission [Aged Care Open Disclosure Framework](#) 2019
- Australian Government Australian Aged Care Quality Agency [Aged Care Quality Standards Draft Guidance - Full suite](#) 2018
- Australian Government Department of Health [Aged Care Quality Standards](#) June 2018
- Australian Government Department of Health [Charter of Rights and Responsibilities for Home Care](#) (Effective 27 February 2017).

Documents

- Australian Government Aged Care Complaints Commissioner [Better Practice Guide to Complaints Handling in Aged Care Services](#) 2017
- Australian Government Aged Care Complaints Commissioner [The Complaints Journey](#) November 2017
- Australian Government Aged Care Complaints Commissioner [The Stages of Complaint Handling](#) 2017 □
Freedom of Information Act (ACT) 1989
- Access & Equity Policy
- Advocacy Policy
- Confidentiality & Records Policy
- Privacy Policy

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Part 8 – Policy Status and Details

Document Reference:	Community Services – Feedback and Complaints
Status:	Approved
Approval Authority:	Anna Whitty – Acting Chief Executive Officer
Signature of Approval Authority:	
Approval Date:	22 July 2021
Effective Date:	22 July 2021
Review Date:	23 January 2023
Expiry Date:	24 July 2023
Functional Unit:	Community Services
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Part 9 – Revision History

Revision Date	Version No.	Change	Reference Sections
	V1	New policy	
01/2019	V2	ACQS Update and alignment	
23/07/2021	V3	Approval Authority Updated & Minor Revisions	Part 8, Part 6, Part 5

- Withdrawal of Service Policy
- Complaints Investigation Reporting Template
- Incident Notification Tool <https://goo.gl/forms/vdRUmOixiFNI1CAE2>

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