

## COMPLAINTS AND FEEDBACK MANAGEMENT

### 1. Purpose and Scope

This policy is intended to ensure all complaints are handled fairly, efficiently, and effectively. In the resolution of complaints, they will be consistent with a rights-based principle which is fundamental to the United Nations Convention on the Rights of Persons with Disabilities.

It provides the foundation for all other components of a quality complaints management and resolution framework. It applies to all our services and will guide our workers and clients who may wish to make a complaint or provide feedback.

The complaint and feedback management system intends to:

- provide a well-handled system which values the client's opinions, and takes all feedback seriously, with the intent to improve the relationship between our organisation and our clients.
- empower all workers and clients to feel free to voice their complaint or provide feedback.
- allow us to respond to issues raised by individuals making complaints in a timely and cost-effective way.
- boost client confidence in our administrative processes.
- seek a resolution that meets all parties' expectations, where possible.
- provide AT HOME CARE with information that will help us deliver quality improvements in our services, roles, and complaints handling process.

For the purpose of this policy the following definitions will apply:

Term	Definition
<b>Complaint</b>	an expression of dissatisfaction made to or about the business, related its services/supports, employees or the handling of a complaint, where a response is explicitly or implicitly expected.
<b>Compliment</b>	an expression of praise, encouragement or gratitude about an individual employee, team, or service/support.
<b>Resolution</b>	an official decision to solve or end a problem or contentious matter. A resolution includes finding a way to improve a difficult situation.
<b>Procedural Fairness</b>	a principle that requires a fair and proper procedure to be used when making a decision.

### 2. Policy Statement

AT HOME CARE is committed to a positive complaints culture within our organisation, from the highest management levels to our frontline workers and takes seriously all complaints, compliments, and feedback about its services and requests for service improvements.

We will create an environment where complaints, concerns, compliments, and suggestions are welcomed and viewed as an opportunity for acknowledgement and improvement.

This philosophy will mean individuals have the right to make complaints and are encouraged to exercise their right in a blame-free and resolution-focused culture, respecting an individual's right to privacy and confidentiality.

It is acknowledged all comments and complaints are viewed as a vital contribution to our internal review of performance and processes which assists in developing the continuous improvement of our services, as we work towards achieving our care commitment.

A person does not necessarily have to expressly state that they wish to make a complaint to have the issue or concern dealt with as a complaint. Regardless of whether an issue is big or small, it will be treated seriously, and we will ensure the person is advised on how valuable their opinion is to our organisation. We will use such information to continuously improve our service delivery.

Clients, families, advocates, or other stakeholders may submit complaints and feedback in various forms including but not limited to email, phone, our feedback form or via our website, regarding our services, staff, or contractors. If required clients can be provided information in easy read format.

Where necessary any meeting directly with the complaint and our offices will be in an environment which is fully accessible for those with mobility issues.

It is our policy to follow the principles of procedural fairness and natural justice and comply with the requirements under the National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018 and NDIS (Procedural Fairness) Guidelines 2018 including:

- informing a person if their rights or interests may be adversely or detrimentally affected in a direct and specific way.
- giving notice of each prejudicial matter that may be considered against them.
- giving a reasonable opportunity to be heard on those matters before the adverse action is taken.
- putting forward information and submissions in support of an outcome that is favourable to their interests.
- ensuring that the decision to take adverse action should be soundly based on the facts and issues that were raised during that process, and this should be apparent in the record of the decision.
- ensuring all decisions are unbiased and maintain an unbiased appearance.

It is important all complaints and feedback are managed effectively. This will be achieved through:

- implementing an open and transparent complaint handling system.
- observing the principles of natural justice and compliance with relevant mandatory reporting under Australian law.
- committing to the right of stakeholders to complain either directly or through a representative.
- undertaking procedural fairness to reach a fair and correct decision.
- taking reasonable steps to inform the complainant of the NDIS commission complaints process, including the use of various communication means, e.g. oral and written.
- maintaining complete confidentiality and privacy.
- abiding by the NDIS Code of Conduct.
- educating and informing our workers in our complaint process and the rights of all stakeholders to complain.
- considering all complaints seriously and respectfully.
- advising clients and workers of their right to complain.
- guidance regarding the complaint process is outlined in the welcome information provided to our clients.
- provision of support for people who may need assistance to make a complaint.
- protection of complainants against retribution or discrimination.
- prompt investigation and resolution of complaints.

- communicating and consulting with clients, family, and advocates, where appointed, during the complaints process and providing feedback and resolutions.
- interpretation and application of policies and processes.
- providing opportunities for all parties to participate in the complaint resolution process.
- ensuring that complainant is involved in the resolution of the complaint.
- keeping complainant informed of the progress of the complaint including actions taken, reasons the decisions are made and options to have decisions reviewed.
- ensuring that the decision maker or advocate, where appointed, is included and recognised in the process.
- accepting AT HOME CARE and worker accountability for actions and decisions taken due to a complaint.
- committing to resolving problems at the point of service or through referral to alternatives.
- committing to use complaints as a means of improving planning, delivery, and review of services through our continuous improvement processes.
- referring complaints and feedback into our continuous improvement cycle.
- reviewing the policy regularly.

In the treatment of complaints and feedback our aim is to ensure fairness to both complainant and respondent and that they will be responded to courteously and given high priority for resolution and remediation. At no time will AT HOME CARE act in a retributive manner because of receiving a complaint.

All feedback and complaints will be overseen by the Quality, Risk and Compliance Manager who will work alongside the Head of Client Experience and Development to assess and review the nature of the complaint and feedback so to determine the responsible Management Team member to investigate the complaint.

### **3. Procedure**

#### **3.1 Complaint process**

Complaints and suggestions can be made by:

- phone, email, website or using the Complaints and Feedback Form.
- contacting a member of the Engagement Team, verbally or in writing.
- contacting the Head of Client Experience and Development and/or the Quality, Compliance and Risk Manager, verbally or in writing.
- responding to questionnaires and surveys.
- attending meetings/care conferences.
- contacting external complaint agencies, e.g. NDIS Quality and Safeguards Commission.
- communicating orally, in writing, or any other relevant means.

Complaints may be made by:

- workers.
- clients.
- public.
- advocates.
- family members.
- carers.
- anonymous person/s.

All complaints will be recorded in the Complaint Register via the CMS, which allows for input into our continuous improvement processes. Where identified the Continuous Improvement Register will be used to record improvements that are established after the finalisation of the complaint management process.

If a complaint is about:

- **Support or services including worker issues:** The complaint will be dealt with by the Engagement Manager and/or their delegate with input from appropriate worker (i.e. Engagement Coordinator)
- **Workers:** this will be managed by the Engagement Coordinators in consultation with the appropriate People and Culture Team and Management Team Member.
- **Chief Executive Officer/Manager:** An external person or body may be approached, e.g. NDIS Quality and Safeguards Commission (NDIS Clients) or the relevant State Health and Disability Services Complaints Office (Private Clients)

Clients, their families and/or representatives and workers will be informed about our complaints process in several ways not limited but including:

- client welcome information.
- initial access to supports.
- worker orientation and induction.
- meetings, reviews, and assessments.
- client service agreements.

### 3.2 Complaint management process

The process and investigation must adhere to the principles of impartiality, privacy, confidentiality, transparency, and timeliness. Complaints will not be discussed with anyone who does not have responsibility for resolving the issue.

In managing the complaint, we will also take into consideration any cultural and linguistic needs of a clients and provide the relevant support mechanism, such as an interpreter or similar.

Complainants will be able to access our feedback form which will be available through AT HOME CARE if not already accessible through the services provided such as in the House Document file. The responsible officer, who will generally be part of the Engagement Team, will review the individual's needs and undertake to assist them via the best means appropriate to suit their needs.

The variance between individuals requires a personal approach, but may include:

- offering an advocate.
- providing text telephone (TTY) service to people with a hearing impairment.
- ensuring the meeting site is wheelchair accessible.
- offering independent assistance to read and write to formulate and lodge a complaint.
- seek information from the complainant to determine any special requirements (e.g. access or communication).

The resolution outcomes from a complaint will recognise that people who make a complaint are generally seeking one, or more, of the following outcomes:

- Acknowledgement:
  - genuinely listening without interruption.

- empathising.
  - ensuring the complainant feels comfortable (e.g. being aware that workers may be defensive and consider how this is perceived)
  - acknowledgement of the effect of the situation on the individual.
  - resolving to a good outcome.
  - notifying regularly and promptly on steps undertaken.
- Answers:
    - clear explanations relevant to the issue which is provided ONLY once all the facts are known.
  - Actions (Action Plan):
    - what will be done?
    - who will do it?
    - action plan completion date.
    - how progress will be communicated to all parties involved.
    - oversight of actions.
  - Apology:
    - consider the form of the apology and the managerial level of response.
    - consider timeliness, sincerity.
    - be specific and direct.
    - accept responsibility if appropriate and provide information on the cause and impacts.
    - provide an explanation without excuses.
    - provide a summary of key actions agreed on to move forward and resolve the issue.

### 3.2.1 Non-investigation complaint process (preferred course of action)

All complaints, where possible, will be managed directly and quickly at the point of service unless the complaint requires investigation (see the procedure outlined below). The non-investigation complaint process is as follows:

1. Determine the type of complaint (i.e. service, worker, or process) and acknowledge the complaint within one working day, where possible.
2. Issue reviewed by the Engagement Team Representative and depending on the type of complaint discussed with the Quality Compliance and Risk Manager or in their absence the Head of Client Experience and Development.
3. The complainant will be consulted, and the issue discussed, to determine actions required to resolve the issue. During this process, if the complainant so desires AT HOME CARE will offer support from an independent advocate to reduce stress and anxiety.
4. All available options will be discussed with complainant and their advocate (if appointed).
5. Where possible, a collaborative decision is finalised (i.e. acknowledgement, answer, action, or apology).
6. The complainant is informed of the decision and the reasons for the outcome.
7. The complainant can seek to have the decision reviewed if they are not happy with the resolution; this may lead to implementing the complaint investigation process.
8. In the event of a complainant seeking a review, a review of the decisions may be resolved quickly by the Chief Executive Officer completing the above points (2 to 5) again.

### 3.2.2 Complaint Investigation Process (where 3.2.1 is not considered appropriate)

#### Step 1. Acknowledge

1. Acknowledge all complaints quickly, within one working day, where possible.
2. As part of this, inform the complainant they can complain directly to either the NDIS Quality and Safeguard Commission (NDIS Client) or the relevant states Health and Disability Services complaints office (Private Clients).

### **Step 2. Review of the complaint**

1. Inform the complainant, before any consultative meeting, they can choose to appoint an advocate or support a person and/or interpreter (if required) to be present throughout the process.
2. Offer to locate an independent advocate for the client, if required.
3. Involve the complainant and their advocate, if appointed, using a consultative process to ensure their voice, views and preferred outcomes are heard and discussed.
4. Determine the type of outcome the complainant is seeking (i.e. acknowledgement, answers, actions, or apology). Information will be used to ensure that the complainant's feedback and requirements are at the core of the complaint investigation and management process.
5. Inform the complainant of:
  - the stages of the complaint management and decision-making process.
  - mechanisms implemented to protect the complainant's privacy.
  - confirm they understand their right to complain to the NDIS Quality and Safeguards Commission at any time.
  - actual progress and outcomes of the investigation.
6. Determine the type of complaint (i.e. service, worker, or process).
7. Notify the complainant and their advocate, if appointed, at each stage of the investigation and seek their feedback.
8. If a consultative meeting is required, it will be held in a safe environment that has been determined by the complainant and at a time suitable to them.

### **Step 3. Assessing the complaint**

1. When assessing a complaint, the responsible Manager must prioritise the complaint and determine a resolution pathway (where required).
2. After the pathway is established, the complaint will be investigated.
3. Feedback from the complainant or their advocate, if appointed, must be used as part of this process (e.g. consultation meeting data).

### **Step 4. Investigation and decision making**

1. When the complaint is lodged, the Responsible Manager should determine if it is practicable to find an immediate resolution (see 3.2.1 non-investigation complaints process).
2. During the investigation and decision-making process, the Responsible Manager will:
  - keep the complainant informed about each stage of the investigation process.
  - consult with the complainant to gather information about the underlying issue/s.
  - analyse antecedents and underlying issues when determining a decision.
  - review and approve all written reports and documents, before them being sent out to all parties.
  - respond to the complainant with a clear decision and any next actions (if any).
  - inform the complainant they have the right to reject the outcome.
  - if the complainant is a NDIS client continue to advise them of their right to make a complaint directly to the NDIS Commission by:

- phoning 1800 035 544 (free call from landlines) or TTY 133 677 (interpreters can be arranged).
- using a [National Relay Service](#) and asking for 1800 035 544.
- completing an online [complaint contact form](#).
- If the complainant is funded either privately or via an alternative funding source (i.e. insurer, State Government) then inform them of their right to make a complaint directly to relevant states Health and Disability Services Complaints Office:
  - Health Complaints Commissioner Victoria [hcc.vic.gov.au](http://hcc.vic.gov.au) 1300 582 113
  - Health and Disability Complaints Office WA [hadsco.wa.gov.au](http://hadsco.wa.gov.au) (08) 6551 7600 or 1800 813 583 (free call from landlines). Using [National Relay Service](#) and asking for 1800 555 660. Completing an online [complaint form](#) email to [mail@hadsco.wa.gov.au](mailto:mail@hadsco.wa.gov.au).
  - Department Disability Services Queensland [Department for Disability Services](#) 1800 491 467.

### Step 5. After the decision

After investigation and a satisfactory response has been documented, the Responsible Manager will:

- inform the complainant and their advocate, if appointed of the decision, including the reason for the decision, and they will provide options for how the complainant can review the decision.
- ensure that the complaint investigation is satisfactorily completed.
- determine if the complainant is satisfied with the outcome.
- follow-up and consult with the complainant/s about any concerns.
- close out the complaint by liaising with the Head of Client Experience and Development and/or the Quality, Compliance and Risk Manager to ensure the feedback is closed in the feedback register.

### 3.3 Unresolved complaints

AT HOME CARE will aim to resolve all complaints within 2 weeks (14 working days) however should all attempts to resolve the complaint be unsuccessful it shall be referred to the Chief Executive Officer by either the Quality, Compliance and Risk Manager or Head of Client Experience and Development with an overview of the efforts taken to resolve the complaint and the outcomes sought.

When complaints cannot be resolved internally and/or the client does not wish to deal directly with AT HOME CARE they can at any time be directed depending on the funding source to:

#### NDIS Quality and Safeguards Commission (NDIS Clients)

Phone: 1800 035 544 (free call from landlines) or TTY 133 677  
National Relay Service and ask for 1800 035 544.  
Interpreters can be arranged.

An NDIS Complaint Contact Form can be completed online at [business.gov.au](http://business.gov.au)

#### Disability Complaints Offices (Private Clients)

WA - [hadsco.wa.gov.au](http://hadsco.wa.gov.au)

VIC - [hcc.vic.gov.au](http://hcc.vic.gov.au)

QLD - [Department for Disability Services](#)

### 3.4 Review and improvement

A systematic approach will be taken to incorporate a review of all issues raised by a complaint to identify and address any possible systemic issues and determine any continuous improvement actions identified during the complaints process.

The review and improvement process includes:

- ascertaining preventative actions and continuous improvement.
- considering if any systemic issues require addressing.
- recording the information regarding the complaint in the Feedback/Complaint Register via the CMS.
- recording the details of the improvement stemming from a complaint in the Continuous Improvement Register (if required).
- educating workers in any new systems or actions (if required).
- adjusting policies and procedures (if required).
- monitoring the complaint resolution according to the internal audit schedule.
- providing information on feedback received to our Reference Group and seeking their input on the nature of the complaints and any improvements they see would be of benefit.

### 3.4 Documentation

The complaints process is available for clients, families, carers, and advocates via the information provided in our Welcome Park, Complaints Form and through the provision of Easy Read documents (as required).

Documentation of the complaint process is as follows:

- All complaints will be recorded in the Feedback/Complaint Register via the CMS, and information in will include the:
  - complaint details.
  - identified issues.
  - actions are undertaken to resolve the complaint.
  - the outcome of the complaint.
- All documents, including if completed any Feedback Forms and information provided to the complainant, will be uploaded into the CMS.
- All documents are kept confidential, and access is only permitted to employees relevant to the complaint. This will be determined by roles-based access.
- A copy of all complaint documents will be retained in accordance with our Records and Information policy.
- A policy review will occur if there are legislative changes or when determined following an internal audit review.
- Statistical and other information will be reviewed on regularly to ensure there is a:
  - Review of complaints/issues raised.
  - identify and address systemic issues.
  - report information to the Commissioner, if requested by the NDIS Quality and Safeguards Commission.

### 3.5 Staff Education

During onboarding workers will be educated on the importance of feedback and appropriate reporting processes/management including the role of the NDIS Commission and the Code of Conduct. Should practices change due of a complaint or workers indicate they are unfamiliar with any processes further support will be provided.



#### **4. Review of the Policy**

This policy will be reviewed on a two-yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

#### **5. Related Policies Procedures Documents**

Complaint Form (Hardcopy or via CMS)  
Complaint/Feedback Register (via CMS)  
Continuous Improvement Policy and Procedure  
Continuous Improvement Register  
Welcome Pack  
Team Handbook  
Client Handbook  
Risk Management Policy and Procedure  
Records and Information Policy and Procedure  
Privacy and Dignity Policy and Procedure  
Service Agreement  
Easy to Read – Lets Chat

#### **6. References**

NDIS (Complaints Management and Resolution) Rules 2018  
NDIS Practice Standards and Quality Indicators 2021  
NDIS Act 2013 (Commonwealth)  
NDIS (Procedural Fairness) Guidelines 2018  
Privacy Act 1988 (Commonwealth)  
Disability Services Act 1986 (Commonwealth)  
Disability Discrimination Act 1992 (Commonwealth)