

ACM_POL006 FEEDBACK AND COMPLAINTS

1. Purpose of Policy

The purpose of this policy is:

- To outline SydWest's commitment to encouraging and supporting consumers [Ref.docx](#) and other stakeholders to provide feedback and make complaints
- To document the key components and underlying principles of SydWest's approach to encouraging feedback and the making of complaints as a means of resolving issues and improving the delivery of care services
- To ensure that SydWest's commitment to encouraging feedback and making of complaints is embedded in the organization's culture and practices

2. Policy Statement

We are committed to ensuring that consumers who receive services and care provided by or through the SydWest have the right to lodge a complaint or to appeal a decision that affects them and to having the concerns of consumers addressed in ways that ensure access and equity, fairness, accountability and transparency.

3. Principles

SydWest has adopted the Australian Open Disclosure Framework¹ principles and the principles contained in the Complaints Handling in Aged Care Services Aged Care Quality and Safety Commission in the management and resolution of complaints.

SydWest believes that the complaint mechanism not a process to apportion blame but to provide valuable learning opportunities as to why something has happened and how services can be improved for the complainant and other consumers. Underpinning our complaints mechanism is continuous improvement approach that:

- Encourages regular, ongoing feedback from consumers and their representatives about the quality of service and care they receive
- Uses a collaborative approach with complainants to find timely resolutions to complaints through open communication and transparent processes
- Learns from complaints by considering these in the development of risk management, service delivery and staff development systems.

Feedback obtained through the complaint's mechanism provides SydWest with valuable information about how the service and care are perceived along with the opportunity for consumers to raise and resolve issues or grievances.

¹ Australian Commission on Safety and Quality in HealthCare Australian Open Disclosure Framework 2013

All aged care complaints are reviewed by the CQI Committee ²to identify improvements to services and processes that underpin all operations and services.

SydWest further recognizes that its complaint system must be flexible to resolve minor issues without invoking a formal grievance procedure where this will facilitate timely adjustments being made to the satisfaction of the consumer. In this regard consumers are encouraged to speak directly to the relevant staff member responsible for arranging the performance of the relevant care and services.

4. Information provided to consumers

Consumers are made aware of their right to complain and are encouraged to make a complaint if they are not happy with SydWest. This is explained to consumers at the initial point of contact and assessment, and at reviews of care plan. Information is also provided to consumers regarding the complaints' process and on their right to use an advocate in making a complaint, is included in the Consumer Handbook.³

We provide to all our consumers the Aged Care Quality and Safety Commission brochure; "The Complaints Service We Offer You⁴" and Commission fact sheets, in a range of languages We also offer assistance if they wish to make a complaint and provide information about advocates.

5. Support to make complaints

SydWest will support consumers in the process of making a complaint, including the right of the consumers to have an advocate involved in the process.⁵ Staff will actively promote the availability of a complaints and grievance procedure by providing all consumers with written information on service standards and consumer grievance procedures provided to consumer during consumers intake/reviews and in the Consumer Information Sheet.

SydWest supports the right of consumers to make their complaint to the Aged Care Quality and Safety Commission (as per the Aged Care Quality and Safety Commission Act 2018 and Rules) and to other Government agencies. We will provide consumers with information regarding the lodgment of complaints the Commission and other relevant Government Agencies.

SydWest has developed a complaints and appeals management procedure that:

- Is simple and easy to use;
- Is effectively communicated and promoted to all Consumers and stakeholders;
- Ensures complaints or appeals are fairly assessed and responded to promptly;
- Is procedurally fair and follows principles of natural justice;

² See Policy 8 at 8.9

³ Australian Government Aged Care Quality and Safety Commission [Charter of Aged Care Rights](#) (Effective 1 July 2019)

⁴ Australian Government Aged Care Quality and Safety Commission [Resource Library](#)

⁵ See Policy12

- Complies with legislative requirements.

6. Making a complaint

A person wishing to make a complaint may do so in writing or verbally to:

1. The staff member they were dealing with at the time;
2. The supervisor of that staff member;
3. The CEO;
4. The BOD;
5. An advocate of their choice;
6. The relevant external complaints agency.

All complaints—verbal or written should be documented under the consumer file on software used. They should be updated on the Complaint Register.

7. Dealing with complaints

7.1 Complaints about Staff

If the complaint is about:

- A staff member: the complaint will normally be dealt with by their supervisor/Team Leader manager;
- A Team leader: the complaint will be dealt with by the Aged Care Service Manager;
- The Aged Care Service Manager: the complaint will normally be dealt with by the CEO
- The CEO or a board member: the complaint will normally be dealt with by the Board Chairperson;
- Where the Chairperson is the subject of a complaint, the complaint should be referred to The Secretary.

If the matter remains unresolved, the Chairperson or notified office bearer will raise the matter at the next BOD meeting. Depending on the seriousness of the complaint, the BOD may:

- Deal with the matter at its meeting; or
- Manage this in line with SydWest Multicultural Services' Constitution

7.2 Complaints by specific staff members, students or volunteers

The CEO has delegated responsibility for resolving complaints or disputes involving staff members or volunteers. Where a staff member or volunteer makes a complaint concerning another staff member or volunteer, will be dealt with in accordance with the **Section 5: Human Resource Recruitment and Management: 36: Industrial Grievance.**

7.3 External complaints against staff or volunteer

External complaints by Consumers or stakeholders made against a staff member or volunteer will be managed by the ACSM who will:

- Notify the staff member or volunteer of the complaint and its nature;
- Investigate the complaint and provide the staff member or volunteer with an opportunity to respond to any issues raised;
- Attempt to mediate the dispute (if appropriate) and/or attempt to resolve the matter to the satisfaction of the outside party;
- Take any other action necessary to resolve the issue;
- Formally inform staff member or volunteer about the complaint's outcome.

7.4 Complaints involving SydWest members, the BOD and CEO

Complaints made against a member or BOD will be referred to the Chairperson and, they, or their delegate, will:

- Notify the person about whom a complaint is being made of the complaint, and its nature;
- Investigate the complaint and provide the member with an opportunity to respond to any issues raised;
- Attempt to mediate the dispute (if appropriate) and/or attempt to resolve the matter to the satisfaction of the outside party.

Where the Chairperson is the subject of a complaint, the complaint will be referred to The Secretary.

If the matter remains unresolved, the Chairperson or notified office bearer will raise the matter at the next BOD meeting. Depending on the seriousness of the complaint, the BOD may:

- Deal with the matter at its meeting; or
- Manage this in line with SydWest Multicultural Services' Constitution.

8. Referral of Complaint to ACQSR or another Agency

The contents of the complaint will be considered within 10 working days of being received to determine whether it is a matter for consideration by ACQSC, the Police or other regulatory agency;

Often the subject of a complaint is one that can be resolved through proper communication with the complainant or their representative by providing an explanation as to why a particular course of action has been taken. For example, providing reasons as to why there were changes in staff or changes in the hours that a particular service was provided. Such matters, if properly communicated to

the consumer, can be resolved without the need for an investigation to be conducted.

9. Involvement of the complainant in the complaints process

The involvement of the complainant through on-going dialogue is a key factor to achieving an effective resolution. When responding to a complainant we will:

- Ask the consumer and complainant how they would like to see the complaint resolved.
- Give an estimate of how long the process may take.
- Invite the complainant to participate in the resolution process
- Communicate outcomes of any investigations promptly and consider any responses by the complainant before making a determination
- Provide reasons for our decision
- Use appropriate language to express an apology or regret

10. Follow up with complainant

After communicating our decision, we will:

- Follow up with the complainant as to whether the person is satisfied with the resolution of the complaint.
- Ask the complainant for feedback as to the handling of the complaint and on improvement to.
- Outline alternative options available to the complainant including the lodging of an appeal.

11. Review and Evaluation

Complaints are evaluated and discussed by the Quality Coordinators OR Team Leaders depending on the nature of the complaint. If the complaint is major and needs intervention from senior management, it may further be escalated for actions and suggestion to the ACSM and CEO. All complaints should be reported to QRCM to maintain and keep the Complaint Register updated.

All the complaints will be classified under categories as Major, Medium and Mild. They will also be actioned and processed as per their respective classification:

Actions	Major	Medium	Mild
Responsible	To be dealt by ACSM & CEO	To be dealt by TL's.	To be dealt by Care Coordinators and Roster Coordinator
Nature of Compliant	Anything to do with Sexual abuse, staff	Staff performance for providing	Roster Management,

	misconduct, neglect and abuse. External reporting made to commission or Regulatory bodies.	basic services as per our service agreement.	Request form Staff Replacement
Documentation of Complaint	To be reported on Complaint form and Software.	On Software, unless suggested by supervisor.	On Software ONLY
Acknowledgment & Closure	Letters to be sent to the Consumer/Family addressed by ACSM or CEO.	Letters to be sent ONLY if required as suggested by supervisor.	No letters required to be sent.
Timeframe	Within 2 working weeks including closure response.	Within one working week	Within 3 working days

Regular contact with the complainant should be maintained throughout the process. It's important to keep the complainant informed if their issue is taking longer to resolve than first advised.

12. Record Keeping

All complaints will be registered in the Complaints Register and information provided to the complainant that their complaint has been received. The register will be maintained by QRCM who will record the following for each complaint or appeal:

- Details of the complainant and the nature of the complaint;
- Date lodged;
- Date reviewed and Action taken;
- Date of resolution and reason for decision;
- Date the consumer and/or representative is notified of outcome;
- Complainant and/or representative response and any further action to be taken;

Copies of all correspondence will be **kept on the consumers file and cross referenced to the register.**

The QRCM will be responsible for preparing a report to the CEO on nature of the complaints received, the process adopted in the investigation of the complaints and outcomes.

A statistical summary of complaints and appeals will also be kept in a Complaints Spreadsheet and maintained by the QRCM who will be responsible for preparing a report on nature of complaints, process and outcomes each 6 months to the CEO.

13. Confidentiality of Complaints

All information supplied by consumers and their representatives will be treated as confidential and will only be discussed within the framework of the complaint procedure process.

The details of all complaints will be kept confidential amongst aged care staff directly concerned with its resolution. The staff member directly involved in the complaint will be granted access when accompanied by their section manager and the CEO

Permission should be obtained from the complainant (and the consumer where they are not the complainant) prior to providing information to other parties as part of the complaint resolution process. This will not apply where the matter is required under the law to be referred to the Police, the Quality and Safety Commissioner or other Government Agency.

Where the subject matter of the complaint involves a reportable assault or other offence, details of the complaint will be provided to relevant authorities in accordance with the requirements of the law⁶

14. Implementation of Policy

SydWest will:

- Ensure that BOD, members, staff and volunteers are given information about the complaint's procedure as part of their induction and are aware of procedures for managing consumers feedback and complaints;
- Ensure all service users, stakeholders and members are aware of the complaints policy and procedures and are encouraged to make complaints regarding the provision of services;
- Ensure that consumers and their representatives are aware of their right to complain to the Commissioner for Aged Care Quality and Safety
- Ensure that feedback data (both positive and negative) is considered in organizational reviews and in planning service improvements.

15. Responsibilities of Aged Care Staff

Line Managers

- It is the responsibility of Line Managers to induct all staff new to SydWest to this Policy during their period of induction and orientation.
- It is the responsibility of Line Managers to ensure that staff are given information about the complaints' procedure as part of their induction and are aware of procedures for managing consumers feedback and complaints;

⁶ Section 63-1AA of the Aged Care Act 1997 provides that where an approved provider receives an allegation of, or starts to suspect on reasonable grounds, a *reportable assault, the approved provider is **responsible for reporting the allegation or suspicion as soon as reasonably practicable, and in any case within 24 hours, to police or to the Quality and Safety Commissioner.**

All Aged Care Staff

- It is the responsibility of all staff to ensure practices comply with this Policy and any future revisions made. It is the responsibility of all staff to ensure they have read, understood and comply with this Policy.

16. Reference to Policies and Procedures

NIL

17. Appendix

NIL

18. Document History

Version	Approved by	Date	Author/s	Reasons for Amendment
1	ACSM	2020	Peter Boland	
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