

# COMPLAINTS MANAGEMENT POLICY AND PROCEDURES

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## COMPLAINTS MANAGEMENT POLICY AND PROCEDURES

### POLICY STATEMENT

*The following policy and procedures have been developed and will be implemented to meet the requirements of:*

- *NSW Disability Inclusion Act 2014 and the NSW Disability Services Standards 2016;*
- *NDIS Quality and Safeguarding Framework 2018*
- *NDIS Complaints Management and Resolution) Rules 2018*
- *NDIS – Effective Complaints Handling Guidelines for NDIS Providers*
- *The Privacy Amendment (Enhancing Privacy Protection) Act 2012*

### POLICY

It is the policy of Central Coast Living Options (CCLO) to create an environment where complaints and concerns, compliments and suggestions (feedback) are welcomed and viewed as an opportunity for acknowledgement and improvement. This is to ensure that individuals have the right to make comments and complaints and are encouraged to exercise their right in blame free, resolution focused culture respecting an individual's right to privacy and confidentiality. It is acknowledged that such comments and complaints are vital to review internal performance and processes and to seek continuous improvement of services as we seek to achieve our care commitment.

CCLO will provide Participants with information about how to make a complaint and information on external agencies in a manner that is specific to their individual communication needs. Participants are supported to access external advocates if requested.

All Employees will undergo training in complaint handling and associated policies and procedures.

CCLO will take a risk management and continuous improvement approach to complaint management, ensuring they are documented and managed effectively.

### DEFINITIONS

- **Complaint:** An expression of dissatisfaction with support or service, including how a previous complaint was handled, for which a response or resolution is explicitly or implicitly expected.
- **Complainant:** the person making a complaint
- **Procedural Fairness:** acting fairly in administrative decision making

CCLO and all of its employees have a responsibility to ensure that they are delivering safe and quality services to the participants. Feedback from participants is an important indicator of whether this responsibility is being fulfilled.

## **PROCEDURE**

### **Complaints Officer**

It is the responsibility of CCLO Operations Manager, nominated as the Complaints Officer, to ensure:

1. all participants and employees (through induction and ongoing training) are made aware of:
  - a. the complaint procedure,
  - b. their rights and responsibilities in relation to making complaints
  - c. the range of options they have to pursue complaints and complaints outside the service.
2. information about the complaint's procedures are prominently displayed at all workplaces.
3. all participants are given encouragement, support, and training to make complaints, provide feedback and access advocates and support people as requested
4. discussions are held with the complainant to determine the nature of the action to be taken, e.g. the outcome desired by the complainant.
5. complaints are handled in accordance with procedural fairness principles
6. the Police are notified if an illegal act has occurred where the complaint requires Police intervention; the complainant and the person against whom the complaint has been made to receive adequate support in talking with the Police, if Police intervention is necessary. This would also constitute an Incident
7. complaint records are maintained confidentially, actioned in a timely manner and analysed for service improvements
8. The complaints system is regularly reviewed for its effectiveness in complaint handling

## **Informing Participants about Complaints**

The House Manager is responsible for informing participants about ways to make a complaint at any time. Specifically, information about complaints is provided through:

1. the Participant Service Agreement
2. the Participant Handbook (also in easy to understand handbook)
3. CCLO complaints brochure (also in easy to read)
4. During a transition to a new provider
5. Service cessation letter where appropriate

In addition to providing hard copy information about CCLO's complaint handling process, the process is to be explained at:

- Intake
- Assessment
- Support Reviews
- Cessation
- When a complaint is raised
- Through Participant information sessions
- At any time requested by any person

## **Complaint Process**

Complaints and feedback can be made through:

- Utilisation of the Complaint/Feedback Form (**Appendix A**) - forms are located at CCLO main Office and within the house and within the participants information pack.
- Contacting a member of staff verbally or in writing. The member of staff must offer to document the complaint on behalf of a participant (if required) and refer the matter to the House Manager and the Complaints Officer.
- By contacting the House Manager or Complaints Officer, by phone, verbally or in writing or email
  - **Contact number: 4353 2411**
  - **Unit 10c, 1 Bounty Cl. TUGGERAH NSW 2259**
  - **[info@cclo.com.au](mailto:info@cclo.com.au)**
- Responding to questionnaires and surveys
- Attending meetings/care conferences

- Indirectly to or from the NDIS Quality and Safeguard Commission or the Aged Care Quality and Safety Commission
- If a complainant has a complaint specifically about the Chief Executive Officer, these complaints can be addressed to:

### **The Chairman**

#### **Central Coast Living Options**

**Unit 10c, 1 Bounty Cl. TUGGERAH NSW 2259**

Mail addressed to the Board must be provided unopened within 3 business days.

Complaints may be made anonymously via one of the above methods and will be investigated as per the below complaint handling process.

A person who makes a complaint or any person affected by the complaint raised must not be adversely affected at any stage as a result of making the complaint.

If a complaint is received directly from the NDIS Quality and Safeguards Commission or the Aged Care Quality and Safety Commission, the matter will be referred to the Complaints Officer and Chief Executive officer or the Chairman of the Board (whichever is most appropriate for the circumstance). CCLO is required to comply with requests for information in a timely manner and comply with procedural fairness principles throughout the process.

Results are recorded in Complaint Register to allow for input into CCLO Continuous Improvement processes.

### **Complaint Handling and Resolution**

- Acknowledge all complaints quickly (within one working day where possible) and consult with participant regarding desired outcome. The complainant should be informed of and supported regarding their right to advocacy, interpreter, stages of decision making, mechanisms to protect privacy and progress and outcome.
- Complaints will not be discussed with anyone who does not have a genuine responsibility for resolving the issue.

- Where the complainant is a recipient of disability services under NDIS, check the participant record for a preferred key contact for complaints or ask the participant if they would like to nominate a key contact from one of the CCLO persons assigned to handle complaints.
- If a meeting is required, then it will be held in a safe environment that has been determined by the complainant and at a time relevant to the participant.
- Complainant must be informed at all stages of the status of their complaint.
- CCLO must take into consideration any cultural and linguistic needs of the participant and provide the relevant support mechanism such as interpreters or similar.
- Assess the complaint, give it priority, and think about which resolution pathway (where required) plan and investigate. Complaints will be investigated and where practicable resolution attempted at the time the complaint is lodged with the Complaints Officer. It is the Complaints Officer or Chief Executive Officer responsibility to keep the complainant informed in relation to the complaint. Written responses must be approved by Chief Executive Officer prior to being sent out.
- Procedural fairness principles recognise that protection of identity and confidentiality can be important elements of effective complaint handling and dispute resolution. This must nevertheless be balanced against the obligation to provide procedural fairness to a person whose interests may be adversely affected by administrative action, particularly if a sanction may be imposed on a person as part of the resolution of a complaint or allegation. This means that the obligation to provide procedural fairness may override – in whole or in part - the obligation to maintain confidentiality, depending on the circumstances.

### **Procedural Fairness**

In handling, the Complaints Handler is required to ensure:

- a) the person making the complaint is given notice of prejudicial matters that may be considered against them.
- b) the person making the complaint is given a reasonable opportunity to be heard on those matters before adverse action is taken, and to put forward information and submissions in support of an outcome that is favourable to their interests.
- c) the decision to act is soundly based on the facts and issues that were raised during the investigation and assessment process, documented in the complaint outcome and be apparent in the recorded decision, and
- d) they remain unbiased throughout the complaint handling process.

The process of handling a complaint will vary depending upon:

- a) the nature of the matter being dealt with.
- b) the options for resolving it.
- c) the timeframe for resolution.
- d) whether facts associated with the issue are in dispute.
- e) the gravity of possible findings that may be reached; and
- f) the sanctions that could be imposed based on those findings

The person who handles the complaint has an obligation to act with procedural fairness and ensure the process is balanced against the need to ensure that neither a complainant (including a participant) nor a participant are affected by an issue raised in a complaint, or disadvantaged as a result of the complaint being made and resolved. The steps adopted to ensure procedural fairness in any situation must be tailored to ensure that disadvantage is not suffered by the complainant or a participant.

If a complaint is made by a representative on behalf of a participant, consideration is to be given to providing separate procedural fairness to the participant.

Procedural fairness aims to ensure that a fair process is followed in decision making that could adversely or detrimentally affect the rights or interests of a person. The underlying assumption is that a fair process will lead to better decision-making – and, in this context, better and fairer complaint handling. However, procedural fairness requirements stop short of assessing whether a particular decision or outcome is fair: they address the process to be followed in reaching a decision, but not the substantive merits of that decision.

### **Complaint Handling**

Throughout the complaints process, the person making the complaint and any affected person must be included and communicated with at all steps. It is important to remember that complaints may be raised at any level of an organisation and complaints should be dealt with directly and quickly at the point the complaint is received. Throughout the complaint handling process, Employees are to respectfully acknowledge the person's concerns, maintain confidentiality and ensure the person is not adversely affected in any way.

A person designated to handle the complaint must remain impartial and free of actual or apprehended bias throughout the process. The test for apprehended bias is whether a fair-minded observer might reasonably suspect that the decision-maker is not impartial. Apprehended bias can be inferred from a person's conduct, comments, associations, or other relevant circumstances.

- a. has a conflict of interest or personal stake in the matter to be resolved, or a relationship with one of the parties that casts doubt on the appearance of fairness
- b. displayed hostility or favouritism to one of the parties involved in a matter
- c. made comments that suggest the complaint handler has prejudged a disputed issue and will not approach the evidence with an open mind
- d. was involved at an earlier stage of the process, for example, in making the allegation to be investigated or providing a statement in support of one of the parties.

Actual or apprehended bias of a decision-maker can undermine both the integrity and legal validity of the decision-making process and outcome. The responsibility rests on the complaint handler to ensure there is no actual or apprehended bias, and if necessary, to withdraw from the process and assign the complaint handling responsibility to another person.

Any conflict of interest concerns is to be identified and managed before the process of handing the complaint commences. It is open to the parties involved, once informed of a potential issue, to waive any objection and to allow the complaint handler to continue. A complaint handler should not withdraw merely because one of the parties raises a bias objection: the test of the 'fair-minded observer' should be followed. It is common that the complaint handler will know or work with one or other of the parties, have some familiarity with the issues to be decided, or have expressed a preliminary view on or more of those issues.

If a bias issue arises during the course of an inquiry after evidence and submissions have already been collected, these can generally be made available to the new inquirer/complaint handler, subject to ensuring procedural fairness. Both parties are to be consulted about this before doing so.

### **Receipt and Acknowledgment**

When a complaint is received, details of the complaint are to be provided to the Complaints Officer who is responsible for oversight of the complaint handling process. The Complaints Officer is responsible for undertaking a risk assessment of the complaint received to determine who, where and how the complaint is most appropriately handled with consideration for the circumstances and outcome sought by the complainant.



Regardless of how the complaint is made, all complaints are to be acknowledged upon receipt or within one working day so as to reassure the participant that their complaint is being attended to.

When receiving a complaint, the Complaints Officer will:

- a. Contact the person to acknowledge the complaint has been received and listen to their concerns
- b. Clarify any information that is unclear
- c. Explain the complaint process, including investigation, time frames, etc
- d. provide details of a contact person with and indicate how long it is likely to take to get back to the person
- e. Ask the participant how they would like to see their complaint resolved and what outcome they are seeking
- f. Identify the support needs of the person throughout the complaints handling process and who they would like to be involved in the process
- g. Advise the person that their complaint will be treated in confidence and there will not be any ramifications as a result of them raising concerns
- h. provide the details of the relevant external complaints commission such as the NDIS Quality and Safeguards Commission or the Aged Care Quality and Safety Commission in the event the person would like to raise their complaint externally also.

### **Record keeping / Confidentiality**

A person making a complaint may request that their identity remain confidential, or private personal information about a third party may be revealed during an investigation

The details of the complaint should be kept confidential by Employees directly concerned with its resolution. The Participant's permission is to be obtained prior to the information being given to other parties who are not directly involved in the complaint.

Information about complaints may only be disclosed without consent if required by law or if the disclosure is otherwise appropriate in the circumstances. Disclosure without the person's consent to any third party must be discussed and approval sought from the Chief Executive Officer who will consider the circumstances using a risk assessment approach and compliance requirements by law.

### Information Recorded

- Document the details
- Identify the issues
- Investigate adhering to the principles of impartiality, privacy, confidentiality, transparency, and timelines
- Record the outcome of this process
- Upload documents including CCLO Complaint / Feedback Forms.
- Feedback to the complainant

### Support with Complaints

People will be supported to make a complaint regardless of whether the complaint is made directly to CCLO or externally to an external complaints body such as the NDIS Quality and Safeguards Commission or the Aged Care Quality and Safety Commission. Support may include:

- assistance to put their concerns in writing on conveying their concerns.
- assistance to access an interpreter, communication support or information provided specifically to the individuals' communication needs
- providing access to an advocate or a third party to provide advice or support
- the provision of information about how to make a complaint and the complaint handling process
- Access to a private space or the use of technology (phone or computer) to make inquiries or contact external bodies or providers in private
- Assistance to contact the relevant external complaint body; either the NDIS Quality and Safeguards Commission or the Aged Care Quality and Safety Commission

At all times the level of support or involvement from CCLO is to be directed by the person making the complaint and/or the Participant of the service.

## **Assessment**

The nature of complaints differs widely. The subject of a complaint might be apparent from the information a complainant provides, or an investigation might be needed to clarify disputed factual or legal matters. Some complaints can be resolved by means of an explanation or apology; others seek reconsideration of a decision or escalation to a more senior employee. The assessment and investigation of complaints should be done in a timely manner, specifically concluded within 3 working days of receiving the complaint. Should the process take longer, this is to be communicated to the person making the complaint with information on the expected timeframe.

## **Resolution**

The purpose of an investigation is to resolve the complaint by reaching a fair and independent view on the issues raised by a complainant and to provide an appropriate remedy.

Effective resolution involves:

- Impartiality. Each complaint should be approached with an open mind, and the facts and contentions in support of a complaint should be weighed objectively
- Confidentiality. A complaint should be investigated in private, and care should be taken when disclosing to others any identifying details of a complaint.
- Transparency. A complainant should be told about the steps in the complaint process and be given an opportunity to be involved throughout the resolution process
- Communication: A complainant should be kept informed of the progress of the complaint, including any action taken, the reasons for decisions made and options for review of decisions made in relation to the complaint
- Timeliness: The time to investigate should be communicated to the Complainant, however, this should take no longer than 3 working days
- Procedure Fairness: as per above Procedural Fairness procedures

Upon investigating a complaint, the complaint handler will ensure that:

- a written record is kept of evidence that is provided orally.
- a complainant is not obliged to substantiate each fact or element in their complaint, although it is reasonable for the complaint handler to ask them to assist the investigation by providing documents (if available) or explaining things they know.
- information obtained from any source is considered

### **Closing Complaints**

Once the investigation of a complaint is completed the complainant should be advised of the particulars of the investigation both verbally and in writing, including any findings or decisions reached. The explanation should be presented in a style the complainant can understand and should deal with each concern or grievance raised in the complaint. If action is to be taken to redress a fault or a wrong experienced by the complainant, this should be outlined.

Options available to the complainant, to seek an internal review of any finding or to pursue the complaint through an external complaint mechanism such as the NDIS Quality and Safeguards Commission or the Aged Care Quality and Safety Commission should be outlined and support offered to access external complaints bodies if required.

### **Unresolved Complaints**

- Unresolved complaints will be referred to the Chief Executive Office and (if applicable) the Chairperson of CCLO Board of Management for further investigation and resolution. Should the complaint not be resolved to the complainant's satisfaction the complaint will be escalated to a person nominated by the complainant (with the complainant's permission).
  
- When complaints cannot be resolved internally, the complainant may be referred to the external agency, listed below

### **NDIS Commission**

Ph: 1800 035 544 (free call from landlines) or TTY 133 677.

Interpreters can be arranged.

National Relay Service and ask for 1800 035 544.

Completing a complaint contact form.

<https://forms.business.gov.au/smartforms/servlet/SmartForm.html?formCode=PRDoo-OCF>

### Aged Care Quality and Safety Commission

The Aged Care Quality and Safety Commission can take complaints from participants receiving services under Commonwealth funding in relation to:

- personal care assistance, for example dispensing medication, feeding and mobility
- communication, for example how information is shared with Participants and how questions are responded to, including complaints handling
- Employee roles, for example how they do their job and provide care
- service environment, for example safety, security, and cleaning
- fees and charges in care agreements
- choice and preferences, for example tailored activities.

A complaint can be made to the Aged Care Quality and Safety Commission by:

- Phoning: 1800 951 822 (free call from landlines)
- TTY Phone: 1800 555 677 then ask for 1800 951 822
- Interpreters support phone 131 450
- National Relay Service and ask for 1800 951 822.
- Completing an Aged Care Quality and Safety Commission complaint contact form (<https://www.agedcarequality.gov.au/making-complaintlodge-complaint/online-complaints-form>)
- By mail to: Aged Care Quality and Safety Commission, GPO Box 9819, Sydney NSW 2000

### **Continuous Improvement**

At the conclusion of investigations into complaints, if the areas identified for improvement in service operations, these are recorded on the Continuous Improvement Register in accordance with CCLO Quality Management Policy.

An analysis of the complaints register is managed in accordance with Quality Management to identify trends, skills gaps and process improvements.

Reviewing and approving this policy		
Frequency	Person responsible	Approval
Every 3 years	Management Team CEO and Board – Reviewing and Approving	<i>K Johnston</i>

Policy review and version tracking			
Review Item	Date Approved	Approved by	Next Review Due
1			
2			
3			

**APPENDIX A**

<b>Complaints / Feedback Form</b>	
<b>Fill in the details of the person who is making the complaint/ providing feedback.</b>	
<b>Name of Person</b>	
<b>Address</b>	
<b>Phone</b>	
<b>Email</b>	
<b>My preferred contact method is</b>	

<b>If you are making the complaint/feedback on behalf of another person provide the following details.</b>	
<b>Your Name:</b>	
<b>What is your relationship to the person?</b>	
<b>Does the person know you are making this complaint/providing feedback?</b>	
<b>Does the person consent to the complaint/feedback being made?</b>	

**Who is the person, or the service about whom you are complaining or providing feedback about?**

<b>Name/</b>	
<b>Contact Details (if known)</b>	

**What is your Complaint/Feedback about?**

**Provide some details to help us understand your concerns. You should include what happened, where it happened, time it happened and who was involved.**

**Supporting Information**

**Please attach copies of any documentation that may help us to investigate your complaint/feedback (for example letters, references, emails).**

**What outcomes are you seeking as a result of the complaint/feedback?**



## OFFICE USE ONLY

<b>Complaint received by</b>	
<b>Date received</b>	
<b>Action taken or required</b>	
<b>Date action completed</b>	
<b>Signature</b>	

**APPENDIX B**

**Complaints Register**

No.	Date Received	Complaint Details (Who, what, when, where, why, Policy, amount involved etc.)	Reported to who & when		Investigation details, progress, outcome, changes in procedures, Compliance Issues, training, who resolved complaint and how, participant reaction, resolved in favour of participant/our company or mutual agreement.	No. of Days to Resolve
			Who	Date		