

## SECTION 6: FEEDBACK AND COMPLAINTS

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## **6.1: Overview**

### **6.1.1 CLIENTS/PARTICIPANTS OUTCOME**

*"Clients/participants feel safe, encouraged and supported to give feedback and make complaints. Clients/participants engage in processes to address feedback and complaints; and know that appropriate action will be taken."*

### **6.1.2 ORGANISATION STATEMENT**

Regular input and feedback from clients/participants, carers, the workforce, and others, is sought and used to inform individual and organisation-wide continuous improvements.

### **6.1.3 OUR POLICY**

Charlestown Caring Group:

- Encourages and supports clients/participants, family, friends, carers and others to provide feedback and make complaints.
- Ensures clients/participants 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.
- Reviews feedback and complaints and uses them to improve the quality of care and services.

### **6.1.4 RESPONSIBILITIES**

- Management develop, maintain, promote, and monitor processes and procedures that ensure that clients/participants 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 clients/participants in making complaints, providing feedback, and resolving issues. Staff utilise complaints and feedback to identify ways to improve care and services.
- Clients/participants 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.

### 6.1.5 MONITORING THE COMPLAINTS AND CLIENTS/PARTICIPANTS FEEDBACK PROCESS

Feedback and complaints processes and systems are regularly audited as part of our audit program and staff, clients/participants and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made (see 8.3.5 Corporate Calendar and 8.9 Continuous Improvement).

### 6.1.6 REFERENCES

- Australian Commission on Safety and Quality
- Australian Government Aged Care Complaints Commissioner [Better Practice Guide to Complaints Handling in Aged Care Services](#)
- Australian Government Aged Care Complaints Commissioner [The Complaints Journey](#)
- Australian Government Aged Care Complaints Commissioner [The Stages of Complaint Handling](#)
- Australian Government Australian Aged Care Quality Agency [Aged Care Quality Standards Draft Guidance](#)
- Australian Government Department of Health [Aged Care Quality Standards](#)
- Australian Government Department of Health [Charter of Rights and Responsibilities for Home Care](#)
- NDIS Quality and Safeguards Commission
- NDIS Core Modules Guidelines

### 6.1.7 DEFINITIONS

1. **Advocate:** A person who, with the authority of the clients/participants, represents the clients/participants' interests.
2. **Complaint:** A dissatisfaction with the care and services provided.
3. **Clients/participants:** Refers to the clients/Participants and their guardian and/or their representatives nominated by them.
4. **Feedback:** Positive or negative information regarding care and services that is not serious enough to warrant a complaint.
5. **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 client/participant that occurs during an episode of care.
6. **Open disclosure:** An open discussion with a client/participant about an incident(s) that resulted in harm to that client/participant when receiving care. 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 client/participant 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.<sup>1</sup>

- 7.** Support Worker refers to unregulated healthcare workers.
- 8.** Support Staff refers to all staff involved in delivering services and care to clients/participants.

## **6.2 Clients/Participants Complaints**

Clients/participants (including family, friends, and others) are encouraged to express their complaints to enable us to improve the quality of our support. We utilise the Better Practice Guide to Complaints Handling in Aged Care Services<sup>2</sup> as well as guided by the NDIS Quality and Safeguard Commission to guide our management of complaints and the complaints journey card to ensure staff understand the complaints process from the clients/participant's perspective. We have adopted the Australian Open Disclosure Framework<sup>3</sup> principles and processes to support the effective and inclusive management of complaints (including complaints that may be a result of an adverse event or incident related to care and services).

Clients/participants are made aware of their right to complain and are encouraged to make a complaint if they are not happy with Charlestown Caring Group. This is explained to clients/participants at the initial assessment visit, at reviews, newsletter or website, when they wish to make a complaint and whenever appropriate. Information on their right to complain without fear of retribution, the complaints process, and their right to use an advocate in making a complaint, is included in the clients/participants handbook.

Clients/participants can expect complaints to be dealt with fairly, with transparency and promptly and for staff to take steps to ensure that clients/participants feel comfortable to continue accessing the service after making a complaint.

All complaints are reviewed by the improvement committee to identify improvements to services and processes which underpin all of our services and operations (see 8.9.6 Continuous Improvement Forms/ii) clients/participants complaint form). Our complaints handling approach reflects our vision, objectives and philosophy outlined in Section 1: Corporate Governance.

All staff involved with clients/participants receive information on their responsibility to encourage and support clients/participants to make complaints and to support them through the complaints process.

Clients/participants are encouraged to talk to us before raising a complaint with an external complaint agency, but clients/participants can choose to raise their complaint with an external agency at any time. Details of external complaints agencies are detailed in 6.4 Advocates as well as website and brochures.

### **6.2.1 KEY CONSIDERATIONS IN MANAGING COMPLAINTS**

Charlestown Caring Group adopts the following principles, from the Aged Care Complaints Commissioner, in managing complaints<sup>4</sup> and the Open Disclosure Principles. If an open disclosure meeting is to be held, the General Manager will prepare and conduct the meeting/s with the client/participant/representative. We consider these principles in the management of complaints and open disclosure

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meetings (where an adverse event may have occurred with harm or potential harm to client/participant is evident). The specific details of how complaints are managed are included in Table 6.2.1 Complaints Management Process.

### i) Be open and timely

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

### ii) 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', 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.
- Give an estimate of how long the process may take.
- Invite those involved to participate in the resolution process; engage the client/participant.
- Complaints that are straightforward with low risk can be resolved on first contact.

### iii) 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 clients/participants, other clients/participants and the service.
- Ask the clients/participants 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)
  - Consider the best way to resolve the complaint (e.g., conciliation/mediation with the complainant or investigation).
  - Prepare a short-written plan of how the complaint is to be managed and any information to be collected.
  - Focus attention on the issue to be investigated.

- Remain flexible and adjust as required
- Investigate (if required)
  - Gather relevant information to resolve the complaint.
  - A fair investigation is impartial, confidential, transparent, and timely.
  - Keep written notes of discussions.
  - Allow complainants to present their point of view.

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

#### iv) 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 resolution.

#### v) Follow up

- Check if complainant is satisfied with the resolution.
- Ask complainants 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 meeting (with consideration to confidentiality).

#### vi) Consider

- Evaluate the outcome for the complainant; ask yourself/the team (and document):
  - Are there issues or problems which could be repeated?
  - Was there a delay in resolving the complaint?
  - Can procedures and policies be reviewed to improve the complaints process?

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.

**6.2.2 PROCESS FOR MANAGING COMPLAINTS**

Table 6.2.1 Complaints Management Process

Step	Timeline
<p>1. A complaint is received via support staff or directly from a client/participant/representative via letter, email, face to face or telephone</p>	<p>On day complaint is received wherever possible</p>
<p>2. A client/participants complaint form is created by the person receiving the complaint and the complaint is reported to their supervisor                      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 client/participant is contacted by telephone or face to face.</p>	
<p>3. The complaint is reviewed by the NDIS Manager/Aged Care Manager and relevant information, and proposed action is recorded.</p>	<p>Within 2 working days of receipt of complaint</p>
<p>4. The NDIS Manager/Aged Care Manager contacts (by telephone or letter) the client/participants to advise:</p> <ul style="list-style-type: none"> <li>○ the complaint is being assessed</li> <li>○ the process that is followed including confidentiality</li> <li>○ the timeline</li> <li>○ their right to an advocate and advocacy agency support (see 6.4 Advocates)</li> <li>○ who their contact person is and details on how to contact them and</li> <li>○ when they will be contacted again.</li> </ul>	<p>Within 2 working days of receipt of complaint</p>
<p>5. The NDIS Manager/Aged Care Manager forwards the complaint to the General Manager</p>	<p>Within 5 working days of receipt of complaint</p>
<p>6. The General Manager reviews the complaint and decides 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>7. The General Manager is updated about the progress to action the complaint and the proposed action/plan is agreed. 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>8. Action is carried out including providing an apology to the complainant. Person/s affected by the complaint are fully informed of all facts and</p>	



Step	Timeline
<p>given the opportunity to provide further information and contribute to the solutions.</p>	
<p>9. The client/participant is advised of the actions taken to address the issues raised and the outcome of the complaint in a letter</p>	
<p>10. If the client/participant is not satisfied with the outcome they are advised of the complaints appeal process (see 6.4 Advocates).</p>	
<p>11. If the client/participant wishes to appeal, the complaint is reviewed by the General Manager, whose decision is final</p>	
<p>12. The client/participant is advised of the General Manager’s decision and of their option to go to an advocacy agency (see 6.4 Advocates or External Complaints eg Commission – Details are given).</p>	
<p>13. When the complaint is finalised a staff person is identified by the NDIS Manager/Aged Care Manager to make sure that the client/participant feels comfortable to continue accessing the service and to obtain feedback on the complaints procedure. The complaint is then closed out 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>	<p>Within 25 working days of receipt of complaint</p>
<p>14. The Board of Management is updated about all complaints at board meetings as a set agenda item</p>	<p>Next board meeting or sooner if “serious nature”</p>

**6.2.3 DISPUTES BETWEEN CLIENTS/PARTICIPANTSS AND SUPPORT STAFF**

Charlestown Caring Group support staff are required to report immediately to their supervisor any dispute with clients/participants, regardless of how small. Disputes are reported verbally in the first instance. The NDIS Manager/Aged Care Manager then decides:

- Whether the client/participant should be contacted
- If a written report is required
- The format of the report
- Any other action to resolve the dispute as early as possible.

The NDIS Manager/Aged Care Manager may offer the client/participant the opportunity to make a formal complaint. If the client/participant accepts this offer the NDIS Manager/Aged Care Manager complete a client/participant complaint form with them and the complaints process is followed.

#### 6.2.4 PEOPLE WITH SPECIAL NEEDS

Where a client/participant may have special needs, such as people from culturally and linguistically diverse (CALD) backgrounds, LGBTI or Aboriginal and Torres Strait Islander people, the NDIS Manager/Aged Care Manager and Coordinator must ensure that any cultural aspects are considered when reviewing a complaint or dispute and ensures the person feels comfortable in discussing a dispute. The presence of a family member or friend or the support of an interpreter may be required.

Where possible, Charlestown Caring Group uses the resources on the Aged Care / NDIS Complaints Commissioner website<sup>5</sup> to provide information in simple language or in the language of the Clients/Participants.

Charlestown Caring Group also ensures that any actions, interventions, or referrals are appropriate to people from special needs groups. This may require the involvement of organisations with expertise in special needs groups either in providing advice or assisting in actions.

#### 6.2.5 USE OF AN ADVOCATE

Clients/participants are advised in the client/participant handbook and verbally at the time of initial assessment, that if they have a complaint they can use an advocate or external agency at any point in the complaint process or if they feel their feedback or complaint was not satisfactorily resolved. Charlestown Caring Group will provide the client/participant with a list of agencies / contacts and assist them and support them to make contact as required.

Agencies that a client/participant can lodge a complaint with or provide advocacy services are detailed in 6.4: Advocates.

#### 6.2.6 CONFIDENTIALITY OF COMPLAINTS AND DISPUTES

As far as possible, the fact that a client/participant has lodged a complaint and the details of that complaint are kept confidential amongst staff directly concerned with its resolution. The client/participant'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 General Manager only.

#### 6.2.7 WORKING WITH EXTERNAL COMPLAINTS AGENCIES

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

## **6.3 Clients/Participants 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/participant 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.

### **6.3.1 FORMAL FEEDBACK**

Formal feedback is given with the intention of providing feedback such as a client/participant completing an improvement log/form or specifically informing a staff person about their dissatisfaction with day centre activities.

When feedback is not written on an improvement log/form, the staff person receiving it completes a form and attaches any documentation. The procedure outlined in 8.9.6 Continuous Improvement Forms/(i) improvement log/form is followed.

### **6.3.2 INFORMAL FEEDBACK**

Informal feedback is made during interaction, for example, a client/participant mentioning to the bus driver that the outing location was unsatisfactory.

Informal feedback is recorded by the staff person on an improvement log/form. The procedure is outlined in 8.9 Continuous Improvement (see 8.9 Continuous Improvement Log/Form)

## **6.4 Advocates**

### **6.4.1 USE OF ADVOCATES**

Clients/participants have a right to use an advocate of their choice to negotiate on their behalf. This may be a family member, friend, or advocacy service.

Advocates are accepted by Charlestown Caring Group as representing the interests of the Clients/Participants.

Information on the use of an advocate is included in the clients/participants handbook and is explained at entry to the service, assessments and reviews; our organisation reiterates to the clients/participants/representative, the local advocacy services available and respect the clients/participant's choice of advocate. We also recognise that clients/participants may choose a family member, friend, or other person to advocate on their behalf.

Staff ensure clients/participants are aware of their right to use an advocate and remind them of this option whenever appropriate including if a complaint is lodged.

### **6.4.2 WHAT IS AN ADVOCATE?**

An advocate is a person who, with the authority of the client/participant represents the client/participant's interests.

Advocates may be used during assessments, reviews, complaints, open disclosure meetings or for any other communication between the client/participant and Charlestown Caring Group.

### **6.4.3 APPOINTING AN ADVOCATE**

Clients/participants wishing to appoint an advocate inform our organisation in writing of the name of the person they wish for their advocate using the Authority to Act as an Advocate form.

Clients/participants can change their advocate at any time and inform us in writing using an Authority to Act as an Advocate form. If a client/participant has difficulty in completing the form due to language or literacy, our staff assist them or refer them to an advocacy agency to assist. Our organisation assists and supports people with special needs to access an advocate of their choice by providing whatever support is required.

Completed authority forms are kept in the client/participant's record and noted in the client management system.

#### 6.4.4 GUIDELINES FOR ADVOCATES

Guidelines for advocates are detailed in the Authority to Act as an Advocate form; this is given to the client/participant and explained to them if they wish to appoint an advocate.

#### 6.4.5 ADVOCACY AND COMPLAINTS INVESTIGATION CONTACTS

Services that may advocate on behalf of the client/participant (depending on the issue) or provide advocacy support to the client/participant are shown in table 6.4.1 Advocacy and Complaints Investigation Contacts.

**Table 6.4.1 Advocacy and Complaints Investigation Contacts**

Agency	Contact details
<p><b>Aged Care Quality and Safety Commission</b>                      (Home Care Packages and Commonwealth Home Support Programme services)</p>	<p><b>Ph:</b> 1800 951 822                      Between 9am and 5pm weekdays, leave a phone message and they will get back to you outside of these hours</p> <p><b>Website:</b>  <a href="https://www.agedcarequality.gov.au/making-complaint/lodge-complaint">https://www.agedcarequality.gov.au/making-complaint/lodge-complaint</a></p> <p><b>Email:</b> <a href="mailto:info@agedcarequality.gov.au">info@agedcarequality.gov.au</a></p> <p><b>Letter:</b>                      Aged Care Quality and Safety Commission                      GPO Box 9819, in your capital city</p>
<p><b>Older Persons Advocacy Network (OPAN)</b></p>	<p><b>Ph:</b> 1800 700 600</p>
<p><b>NDIS Quality and Safeguards Commission</b>                      (Website to complete online complaint contact form)</p>	<p><b>Ph:</b> 1800 035 444  <b>Web:</b> <a href="http://www.ndiscommission.gov.au">www.ndiscommission.gov.au</a></p>