

Policy Reference OPOL-001	Complaints Management Policy and Procedure
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Applies to: The Board, CEO, employees, volunteers, contractors and consultants	Version: 1.2
Specific responsibility: Board, CEO and Managers	Date approved: 05 May 2021
	Next review date: 05 May 2024

Policy context: This Policy relates to the following	
Standards or other external requirements	NDIS Quality and Safeguarding Framework
Legislation or other requirements	<i>Child Protection Act 1999 (QLD)</i> <i>Disability Services Act 1986 (Cth)</i> <i>Disability Services Act 2006 (QLD)</i> <i>Humans Rights Act 2019 (QLD)</i> <i>NDIS Act 2013 (Cth)</i> UN Convention on the Rights of Persons with Disabilities (CRPD) UN Convention on the Rights of the Child (UNCRC)
Contractual obligations	Service Agreements
Organisational context	Your Best Life Disability and Health Services Ltd includes: <ol style="list-style-type: none"> 1) Community Services including Children’s and Teens’ Therapy Services (CATTs), Mindcare Mental Health Services (MMHS), The Allied Health Collaborative (TAHC), and WorkFit and Wellness 2) Your Choice Plan Management (YCPM) 3) LevelUp Independent Living (LUIL) 4) CFO and Corporate and Commercial Services (CCS)

1. Definitions

Term	Description
Complaint	An expression of dissatisfaction made to or about an organisation regarding its CEO, employees, volunteers, contractors, consultants, services or products that warrants response or resolution.
Complainant	An employee, volunteer, contractor, consultant, client, advocate, entity or member of the public who expresses their dissatisfaction about an organisation to either the organisation itself or an external body
Escalation	The process of reporting complaints to the National Disability Insurance Scheme if the complainant is not satisfied with the outcome of their complaint.

2. Policy

Your Best Life Disability and Health Services (YBLDHS) are committed to ensuring that any person or organisation using YBLDHS or affected by its operations has the right to lodge a complaint or to appeal a decision of the organisation. All concerns that are raised will be addressed in ways that ensure access and equity, fairness, accountability and transparency.

The organisation will provide a complaints and appeals management procedure that:

- allows any person to make a complaint or provide feedback
- facilitates complaints by cultivating a supportive environment in which they can be made
- is simple, accessible and easy to use
- is effectively communicated and promoted to all clients and stakeholders
- is proportionate to the size of the organisation and the services it provides
- ensures complaints or appeals are fairly assessed and responded to promptly
- is procedurally fair and follows principles of natural justice
- complies with legislative requirements

Your Best Life Disability and Health Services (YBLDHS) will:

- ensure that all clients, their families, carers and advocates are encouraged and supported to raise any concerns they have about the service or organisation;
- consider all complaints it receives regardless of whether or not the complainant is a client of the organisation;
- treat all complainants with respect, recognising that the issue of complaint is important to the complainant;
- maintain confidentiality of parties involved, keeping any information private to those directly involved in the complaint and its resolution (information will only be disclosed if required by law, or if otherwise necessary);
- ensure support and advocacy is available to clients who make a complaint and require support;
- resolve complaints, where possible, to the satisfaction of the complainant;
- clients, families and advocates have access to the organisation's *Complaints Management Policy and Procedure* ;
- deal with all complaints in a timely manner, and aim to provide a formal response to the complainant **within 5 working days** of the complaint being received;
- keep parties to the complaint appropriately involved and informed of progress of the complaint;
- ensure that the Board, employees, volunteers, contractors and consultants are given information about the complaints procedure as part of their induction and are aware of procedures for managing client feedback and complaints;
- ensure all service users, stakeholders and members are aware of the complaints policy and procedures;
- ensure that all complainants are aware of and understand how to escalate their complaint to the National Disability Insurance Scheme (refer to [What is the NDIS Quality and Safeguards Commission and what is its role?](#) which is also included in the Welcome Pack on the website)
- ensure that a complainant is not penalised in any way or prevented from use of services during the progress of an issue;
- ensure that feedback data (both positive and negative) is considered in organisational reviews and in planning service improvements; and
- review and evaluate the accessibility and effectiveness of the complaints management system and continually improve its processes.

3. Procedure

3.1 Information for clients and stakeholders

YBLDHS complaints and appeals procedure will be documented for clients and stakeholders in the *Complaints Management Policy and Procedure* which is made available on the website, as well as in waiting rooms and at the Receptionist's desk.

All clients will be informed of their rights and responsibilities with regards to complaints and appeals at the earliest possible stage of their involvement with the organisation.

The *Complaints Management Policy and Procedure* will contain information on the following:

- how to make a complaint or lodge an appeal, including an anonymous complaint;
- contact person for lodging a complaint or appeal;
- how the organisation will deal with the complaint or appeal, the steps involved and the timelines;
- the rights of the complainant to an advocate, support person or interpreter;
- how the person will be informed about the outcome of their complaint or appeal; and
- how to make a complaint to an external body, including contact details.

3.2 Training procedures

Employees, volunteers, contractors and consultants will be trained on the complaints management procedure during their induction, and as part of ongoing refresher training.

Management will undergo training for complaints management and resolution to support clients to throughout the complaint process and appropriately respond to complaints in an empathetic manner. This will include open communication strategies such as acknowledging the grievance without being defensive and making apologies while accepting responsibility for what occurred.

3.3 To whom to make the complaint

A person wishing to make a complaint about an employee, volunteer, contractor, consultant, a service or an operational matter, may do so in writing or verbally to:

- the employee, volunteer, contractor or consultant they were dealing with at the time;
- the manager of that person;
- the Corporate Services Manager
- the CEO; or
- by completing a Feedback, Compliments and Complaints Form located at Centre Reception.
- Through our websites ybl.org.au; mindcare.org.au, levelupil.com.au, ycpm.com.au, catts.ybl.org.au
- By calling (07) 5293 9002

A person wishing to make a complaint about the CEO or a strategic matter, may do so in writing to the Company.secretary@ybl.org.au

3.4 How to make the complaint

The Feedback, Compliments and Complaints Form is available in hard copy from Reception, and online from www.ybl.org.au website.

Submit written complaints on a completed Feedback, Compliments and Complaints Form via:

- *Submit* to Centre Coordinators at Reception
- *email* to the corporateservices@ybl.org.au
- *post* to the Corporate Services Manager, Your Best Life Disability and Health Services Ltd, PO Box 5253, SCMC, Nambour, Qld, 4560 who will be responsible for receiving this correspondence and directing it to the appropriate person.

Verbal complaints via telephone may be made to the Corporate Services Manager on 07 5293 9002

Complainants can request an advocate to negotiate on their behalf if they do not feel comfortable raising the complaint themselves.

3.5 Dealing with complaints

If the complaint is about:

- a manager, an employee, volunteer, contractor or consultant, the complaint will normally be dealt with by the CEO;
- the CEO, the complaint will normally be dealt with by the Board.

3.6 Lodging an appeal

Clients or their advocates may lodge an appeal if they disagree with a decision made by the organisation.

An appeal should be made in writing and submitted to the CEO or the Board.

3.7 Procedure for complaints and appeals management

Any employee, volunteer, contractor or consultant may be a recipient of a complaint, and is responsible for receiving the complaint by:

- listening to the complainant, acknowledging the concern raised, and explaining the next steps to the complainant; and;
- depending on the type and severity of the complaint, either discussing with the complainant an agreed upon resolution (for smaller matters), or, within 24 hours, referring the complaint on to the CEO for further investigation and action.

The person managing the complaint, i.e. the CEO or the Chair of the Board, will be responsible for:

- processing the complaint or appeal by:
 - registering the complaint or appeal in the Complaints Register; and
 - informing the complainant that their complaint or appeal has been received and providing them with information about the process and time frame;
- investigating the complaint or appeal by:
 - examining the complaint within 24 hours of the complaint or appeal being received;
 - investigating the complaint and deciding how to respond;
 - informing the complainant within 48 hours of the complaint being received and of what is being done to investigate and resolve it, and the expected time frame for resolution.

Timeframe for investigating complaints and appeals

- As far as possible, complaints or appeals will be investigated and resolved within 5 working days of being received.
- If this time frame cannot be met, the complainant will be informed of the reasons why and of the alternative time frame for resolution.

- responding to and resolving the complaint:
 - making a decision or referring to the appropriate people for a decision within 5 working days of the complaint being received;
 - informing the complainant of the outcome and the reasons for any decisions made;
 - upheld (and if so what will be done to resolve it);
 - resolved (and how this has been achieved); or
 - if no further action can be taken, the reasons for this;
 - informing the complainant of any options for further action if required;
 - if an apology is in order, ensuring that the appropriate person makes the apology and informs the complainant what the organisation intends to do to avoid further grievance.
- reviewing the complaint:
 - If the complainant is not satisfied with the investigation and proposed resolution of their complaint or appeal, they can seek a further review of the matter by the CEO or the Board within another 5 working days;
- referral to external procedure:
 - a formal external complaints procedure may follow the previous step if the complainant is still not satisfied with the outcome;
 - the complainant will be referred to the National Disability Insurance Scheme and provided information and support to make the complaint externally if necessary.

3.8 Complaints involving specific employees, volunteers, contractors or consultants

The CEO has delegated responsibility for resolving complaints or disputes involving employees, volunteers, contractors and consultants.

Internal complaints, where an employee, volunteer, contractor or consultant makes a complaint concerning another employee, volunteer, contractor or consultant, will be dealt with in accordance with *YBLDHS Disciplinary Policy and Procedure*

External complaints by clients or stakeholders made against an employee, volunteer, contractor or consultant will be managed by the CEO who will:

- notify the employee, volunteer, contractor or consultant of the complaint and its nature;
- investigate the complaint and provide the employee, volunteer, contractor or consultant 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; and
- take any other action necessary to resolve the issue.

Any disciplinary action against an employee, volunteer, contractor or consultant arising from a complaint will be taken in accordance with the procedures contained in the *Discipline Policy and*

Complaints involving the CEO will be managed by the Chair of the Board.

3.9 Complaints involving organisation members or Board members

Complaints made against a member or Board member will be referred to the Chair of the Board.

The Chair of the Board 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 Chair of the Board is the subject of a complaint, the complaint should be referred to other Board members.

If the matter remains unresolved, the Chair of the Board or notified Board members will raise the matter at the next Board meeting.

3.10 Cooperation in external investigations

If any person makes a complaint about YBLDHS to an external body (including police, Ombudsman), the CEO will be responsible for liaising with the body responsible for investigating the issue.

YBLDHS will fully cooperate in any investigation which may take place. This includes participating in early resolution, conciliation, and/or reporting to the body about resolution and corrective actions if required.

3.11 Record keeping

A register of complaints and appeals will be kept on the WHS-drive for a minimum of seven years after the complaint has been made.

The register will be maintained by CEO or their delegate and will record the following for each complaint or appeal:

- details of the complainant and the nature of the complaint;
- date lodged;
- action taken;
- date of resolution and reason for decision;
- indication of complainant being notified of outcome; and
- complainant response and any further action.

Copies of all correspondence will be kept on the WHS-drive.

The complaints register and files will be confidential and access is restricted to the CEO and management.

The Board will be provided with a status report on each complaint at its resolution.

A statistical summary of complaints and appeals will be used:

- for organisational learning, knowledge sharing and staff performance improvement (for this purpose, complaint information may be disseminated to managers and other employees, volunteers, contractors and consultants, however, the identity of the complainant or persons named will not be disclosed);
- to inform service planning by including a review of complaints and appeals in all service planning, monitoring and evaluation activities; and
- to inform decision making by including a report on complaints and appeals as a standard item on staff and management meeting agendas.

4. Continuous improvement of the complaints management system

The complaints management system will be reviewed and evaluated every three years or earlier as required.

This will include:

- review of all complaint and feedback policies and procedures;
- client and personnel feedback about the accessibility and effectiveness of the complaints management system; and
- implementation of a continuous improvement plan based on the review and feedback received.

4.1 Documentation

Documents related to this Policy	
Related policies	NDIS Code of Conduct Professional Code of Ethics and Conduct Policy and Procedure Discipline Policy and Procedure Grievance and Disputes Policy and Procedure
Forms, record-keeping or other organisational documents	FM-012 Compliments and Complaints Form Compliments and Complaints Register Complaint Acknowledgement Letter Template Complaint Resolution Letter Template
Reviewing and approving this Policy	
Frequency	Person responsible
Every 3 years	CEO