Complaints Management Policy

ASES Standards	 Standard 8: Consumer Outcomes Requirement 8.1 Consumer and Community Engagement Standard Requirement 8.2 Consumer Feedback and Complaints Standard 	
Contractual Obligation(s)	NSW DCJ Specialist Homelessness Services Funding Agreement: Lead Entity and/or Joint Working Agreements	
Related Policies	Charter of Client Rights and Responsibilities Client Advocacy Client Feedback Responding to Allegations of Abuse of Clients Service Access Staff Induction Strategic Planning	

1. SCOPE

The scope of this policy applies to complaints that have been received from clients and external stakeholders in relation to their dissatisfaction with WUNH.

This policy does not apply to feedback received from any person that included allegations of abuse or neglect of a client. If such information is received, the Responding to Allegations of Abuse and Neglect Policy should be followed.

2. PURPOSE

The purpose of this policy is to outline the processes that must be applied when a person or organisation makes a complaint against WUNH.

3. POLICY

WUNH considers complaints an opportunity to strengthen services and review the organisation's systems, processes and practices, so that WUNH can achieve its strategic goals and provide a responsive, high-quality service to clients.

WUNH has established a complaints management system that:

- is easy to understand
- is communicated to all clients and stakeholders
- ensures that complaints are assessed fairly and in a timely manner
- ensures that the principles of natural justice are followed
- complies with legislative requirements.

WUNH's priority, whenever possible, is to seek a positive resolution to complaints. When WUNH receives a complaint, the complaint will be documented in the Complaints Register. This information will be used to track the complaint's processing and inform the strategic planning and continuous quality improvement processes of the organisation.

WUNH's complaints management system is informed by the NSW Ombudsman's, *Effective Complaint Handling Guideline*.¹ When a complaint is received, the following steps are taken:

- receive and record the complaint
- acknowledge the complaint
- assess the complaint
- plan the complaint investigation
- implement the complaint investigation plan
- provide a response and resolution
- advise of appeals and reviews
- undertake a practice review.

All permanent and part-time staff receive complaints management training during the induction process, and anytime after that when WUNH considers it a requirement.

[Insert any other processes specific to the complaints management process of WUNH.

WUNH maintains a current Complaints Register, which tracks the progress and timeliness of responding to the complaint. [Insert Position Title] is responsible for maintaining the register and for ensuring that all complaints are responded to in accordance with this policy and in a timely manner.

Complaints are a standard item on the Board's agenda. The [Service Manager/Manager/EO] is responsible for providing a summary report of complaints, which is based on the complaints register to the Board at every meeting.

Any complaint of a serious nature (that involves a high level of client-related or organisational risk) is monitored and subsequently reported to the Board in detail. The Board is regularly updated on the progress and outcomes of serious complaints.

4. PROCEDURE

1. Receive and record the complaint

Clients and stakeholders can lodge a complaint verbally or in writing via the Complaints Form (or a document/form that collects similar information). Complaints can be lodged in person, by post, by email, through an advocate, by the contact form on the organisational web page or through any other method that is preferred.

To assist a client with making a complaint, WUNH should provide support as needed. This may include

- assisting the client with writing the complaint
- referring the client to an advocacy service
- talking with the client about what assistance he or she might require to complete the complaint process and to follow up on any suggestions.

Complaints made verbally, face to face or via phone should not be assumed to be 'informal' nor of not needing to be recorded. Rather, all negative feedback and complaints should be recorded and a response should be developed based on the content and seriousness of the issue rather than on the method by which it was reported.

Negative feedback about a service, which can be and is easily resolved, does not need the full planning and investigation process outlined in the latter part of this policy. For example, if a client has complained about a staff member being late for appointments, and the issue is raised and resolved through a discussion with the staff member, then this does not require any further action. However, the complaint (although only made verbally) does need to be recorded on a Complaints Form and entered onto the Complaints Register, with the action taken and the resolution status recorded.

When WUNH receives a complaint, the information is documented in the Complaints Form. The record of the complaint should identify (whenever possible):

- the contact details of the person making the complaint
- the issues raised
- the outcomes sought
- any other information required to respond to the matter properly
- any additional support the person making the complaint may need
- the person's wishes about having an advocate/support person involved in the complaints management process.

All the information from the Complaints Form is reviewed by [insert Position Title] for an initial assessment, with a plan for further action following.

The [insert Position Title] is responsible for ensuring that all complaints are entered onto the Complaints Register.

2. Acknowledge the complaint

WUNH acknowledges all complaints in a timely manner.

If the complaint was not serious and it was quickly resolved, then the [insert Position Title] follows up with the person by phone or in person and checks that the complainant is satisfied with the outcome. If so, then the [insert Position Title] enters the action and resolution status on the Complaints Register.

If the complaint was not easily and quickly resolved, then the [insert Position Title] sends the complainant an acknowledgement, in writing, that the complaint has been received within five working days. The written acknowledgement includes

- an outline of the complaint when it was made and by who
- how the complaint will be managed
- the time frame for the complainant to receive a response
- a request for a preferred contact method, if this has not been established already.

3. Assess the complaint

The level of response required depends on the assessment and nature of the complaint. Comprehensive assessment of a complaint is essential for effective complaint management. The [insert Position Title] will assess each complaint to determine further action after considering

- if the complaint has been, or can be, resolved at first contact
- whether an alternative and satisfactory means of redress or a more appropriate mechanism for handling the issue is available
- if the complaint requires more information and mediation, or an investigation
- the significance of the issue for the complainant and/or the organisation
- those staff members who possess the appropriate training to handle such complaints
- whether an independent third party (e.g., an investigator or consultant) should be engaged to manage the complaint
- if the complaint pertains to alleged criminal, fraudulent or reportable conduct
- whether the complaint can or must be notified to a relevant government agency
- if the complaint is likely to become subject to litigation
- the time that has elapsed since the alleged events occurred.

The staff member assessing the complaint should seek any further or independent advice that is required (e.g., legal advice) from an Ombudsman, Safe Work Australia and any required specialist advice available from within the organisation.

Any reports required to be made to any government agencies must be immediately actioned.

4. Plan the complaint investigation

Based on the assessment of the complaint, and unless the complaint has already been resolved through discussion with the complainant, a complaint investigation plan should be developed and implemented. The complaint is then allocated to a complaint handler, who can be from within the organisation or an external provider. If the complaint appears to be of a serious nature, then the Manager/EO should discuss the complaint and the investigation plan with the Board Chairperson.

An external investigator should be considered when:

- the organisation does not have the resources required (in terms of time or skills) to undertake the investigation
- the complaint is complex or serious, possibly involving
 - o multiple allegations
 - o serious allegations
 - o multiple alleged offenders
 - o alleged offenders who are senior staff or Board members
 - \circ $\;$ matters likely to escalate into a legal action $\;$
 - $\circ \quad$ a systemic problem within the organisation
 - \circ matters that seriously threaten the organisation's reputation
 - o an alleged breach or breaches of the organisation's contractual obligations.
- The complaint indicates a lack of confidence in the organisation—in this case, an internal investigation is likely to be perceived as not having credibility.

Only the Manager/EO can appoint an external investigator, though this requires the Board's approval.

The complaint handler is responsible for developing a plan that will define

- what is to be investigated
- the steps involved in investigating the complaint and whether further information is required, either from the complainant or from another person or organisation
- an estimate of the time required to resolve the complaint
- the solution that the complainant is seeking, whether the complainant's expectations are realistic (or they need to be managed) and other possible solutions
- any special considerations that apply to the complaint—such as if the complainant has asked for his or her identity to be withheld from others, or if there is sensitive or confidential information that must be safeguarded.

5. Implement the complaint investigation plan

The complaint handler will implement the investigation plan. In doing so, he or she will

• perform a fair, transparent and evidence-based process

- ensure that the principles of natural justice are observed—so people have a right to know if allegations have been made against them and a right to reply
- seek solutions that are fair and sustainable
- observe confidentiality to the greatest degree allowed by law
- welcome the complainant's feedback, comments and involvement.

Complaint respondents are provided an opportunity to respond to any issues raised by the complainant, including providing relevant information and supporting documentation at the request of the complaint handler. The complaints handler may (when appropriate) involve the respondent in mediation with the complainant.

The complaint handler will provide a written report that details the findings of the investigation and offers recommendations for resolutions and further action.

The report will be reviewed by [insert Position Title], with a final a decision made regarding whether any recommendation in the report will be accepted. If involving a complex matter, the report will be considered by the Board.

6. Provide a response and resolution

When the investigation is completed, a written response to the complainant will be coordinated by the [insert Position Title]. In some cases, such as in those containing a complex matter, the written response should be delivered in person, with the complainant offered an opportunity to discuss the outcome and ask questions.

The response to a complaint generally includes the following details and information

- complaint details and date of receipt
- the investigator's contact details
- the investigation's results
- the complaint process time frame
- privacy and confidentiality actions
- outcomes
- contact details required to expedite any requests for further information.

Additional information, resolution and actions arising from complaints involving staff, Board members, volunteers and students are managed internally and confidentially.

Once the complaint investigation is completed, the Complaints Register is updated. All electronic documentation relating to the complaint is filed confidentially in a restricted drive, and all paper-based information is filed in a locked and restricted-access filing cabinet.

7. Advise complainant of appeals and reviews

If the complainant is not satisfied with the outcome of a complaint, he or she can request for the matter to be reviewed by the Manager/EO or the Board Chair, if the complaint is about the service manager. The review is to be completed within 14 days of the request and the complainant should be notified in writing of the outcomes of the review. The results of the review are final, as far as WUNH is concerned. However, if the person is still not satisfied, then he or she should be referred to an external advocacy service or the NSW Ombudsman.

8. Undertake a practice review

The complaints register is regularly reviewed, with any themes or systemic issues subsequently analysed and identified to inform service planning and the continuous quality improvement of processes.

To maintain quality services and confirm that complaints processes are effective and regularly monitored, WUNH ensures that the following mechanisms are established:

- the evaluation and number of complaints about a particular matter
- the monitoring of any increase in complaints
- the analysis of complaints characteristics
- any changes in service operations following complaints.

The reports and findings of the complaint management analysis are reviewed by the Manager/EO and Board.

5. **RESPONSIBILITIES**

Responsibility	Delegation
Ensure that all staff receive complaints management training	Manager/EO
Document complaints	Manager/EO
Communicate with complainant	Manager/EO
Ensure complaints management and resolution	Manager/EO
Identify and address systemic issues for quality improvement	Manager/EO, Board

6. LEGISLATION

Australian Human Rights Commission Act 1986 (Cwlth)

https://www.legislation.gov.au/Details/C2017C00143

Privacy Amendment (Enhancing Privacy Protection) Act 2012 (Cwlth)

https://www.legislation.gov.au/Details/C2012A00197

Privacy Act 1988 (Cwlth)

https://www.legislation.gov.au/Details/C2018C00034

7. APPENDICES

Appendix 1: Complaints Form

Appendix 2: Complaints Register

8. **REFERENCES**

 (1) Ombudsman NSW. Effective complaint handling guidelines [Internet]. 2017 [cited 2019, February]. Available from: https://www.ombo.nsw.gov.au/ data/assets/pdf_file/0018/42228/Effective-complaint-handling-guidelines-Third-edition.pdf

9. FURTHER RESOURCES

Australian Human Rights Commission: 'Developing and implementing internal complaints procedures'

www.humanrights.gov.au/employers/

VERSION	APPROVAL	REVIEW DATE
Version 004	Manager/EO	01/11/2021