

## Management of Feedback and Complaints Policy

### Purpose

To provide guidance on the best practice approach South Coastal Health and Community Services (SCHCS) had adopted to the receipt, acknowledgement, response and resolution of all feedback and complaints from clients, carers and others.

### Scope

This policy applies to all staff members, volunteers and contractors of SCHCS. Staff members are to refer to the HR-POL-003 Staff member Grievance Policy for information regarding employees lodging internal complaints.

### Abbreviations and Definitions

<i>Complaint</i>	A statement that something is wrong or not satisfactory.
<i>Compliment</i>	An expression of praise or gratitude.
<i>Feedback or Suggestion</i>	The provision of information about reactions to a service, person, task performance, which is used for the basis of improvement. Feedback – is in response to something that already exists. Suggestion – is in response to something that does not yet exist (perceived or actual)
<i>Lead Investigator</i>	A delegated staff member of SCHCS who is appointed, as the most appropriate officer to respond to the complaint or investigation context.
<i>SCHCS</i>	South Coastal Health and Community Services
<i>Serious complaint</i>	A serious complaint is defined by these three factors: <ol style="list-style-type: none"> <li>1. Complexity: likely to be multi-factorial with potentially several issues of concern raised or the concerns are about multiple people (clients or staff member), services (more than one SCHCS services) or any system or process issues.</li> <li>2. Impact: has impacted on the individual and on the service.</li> <li>3. Risks: high risk of harm or significant negative impact to an individual or to the service (damage to the service reputation, image, negative media attention or legal action against the service).</li> </ol>

## 1 Introduction

- 1.1 This Policy should be read in conjunction with ORG-PRO-0001 Management of Feedback and Complaints Procedure.
- 1.2 All feedback and complaints are considered as an opportunity for improvement and warrant a level of investigation.

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- 1.3 Feedback and complaints are encouraged and welcomed from clients, carers and / or their advocates, and as needed, clients and carers will be supported in their use of an advocate or others support services, including but not limited to interpreters and peak bodies.
- 1.4 Feedback and complaints are encouraged and welcomed from community users and any individuals who have had an experience with South Coastal Health and Community Services.

### 2 Compliments

- 2.1 Compliments can be received verbally or in writing, including via social media posts, surveys and evaluations.
- 2.2 All compliments are reviewed by the relevant program manager, to identify strengths in process, practice or people which can be used as opportunities for improvement across the business.
- 2.3 Where a compliment is received but identifies a staff member breaching policy or protocol, the program manager will refer to the management of this process in line with the relevant Human Resources Policy.
- 2.4 All compliments are recorded on the Feedback and Complaints Register.

### 3 Feedback and Suggestions

- 3.1 Feedback and suggestions can be received verbally or in writing, including via social media posts, surveys and evaluations.
- 3.2 Feedback and suggestions are recorded on the Improvement Register, where they are reviewed and the appropriate action is considered to create sustainable and meaningful change to services, processes and practices.

### 4 Complaints

- 4.1 Complaints are encouraged and promoted in all service contact options e.g. signage, social media, client welcome packs.
- 4.2 Complaints will be dealt with courteously, promptly and without bias.
- 4.3 Complaints will be treated confidentially.
- 4.4 Complaints will be resolved as close as possible to the point of origin of the complaint.
- 4.5 Any complainant may approach the CEO directly.
- 4.6 All parties will be given fair treatment.

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- 4.7 Only matters of fact will be dealt with.
- 4.8 The making of a complaint will not cause disadvantage to the complainant.
- 4.9 A complaint may be withdrawn at any time.
- 4.10 Information regarding the process of making a complaint will be understandable and readily available.
- 4.11 Anonymous complaints will be considered, and included in trend and pattern statistics, noting that an individual may not be contacted to provide additional information or to provide feedback on their resolution satisfaction.
- 4.12 All complaints are recorded on the Feedback and Complaints Register, unless they are of a sensitive and/or confidential nature, at which point, only a reference to a confidential complaint will be recorded on the feedback and complaints register and the complaint information will be securely stored and managed by the CEO or their delegate.

### 5 Feedback and Complaint Escalation

- 5.1 Feedback and complaints are reported via the Governance, Quality and Risk Board Subcommittee at each scheduled meeting, and a biannual report is provided to the Board.
- 5.2 Serious complaints are escalated outside of meeting session(s).

#### END OF DOCUMENT

Cross reference to relevant policy and procedure
<ul style="list-style-type: none"><li>▪ ORG-PRO-0002 Incident Investigations</li><li>▪ ORG-PRO-0001 Management of Feedback and Complaints Procedure</li></ul>



Forms pertaining to this policy and procedure
<ul style="list-style-type: none"><li>▪ ORG-FRM-0001 Feedback and Complaint Acknowledgement Template</li><li>▪ ORG-FRM-0002 Feedback and Complaint Response Template</li><li>▪ ORG-FRM-0003 Feedback and Compliant Investigation Tool</li><li>▪ ORG-FRM-0004 Feedback and Complaint Form</li><li>▪ ORG-REG-0003 Feedback and Complaints Register</li><li>▪ ORG-REG-0004 Continuous Improvement Register</li></ul>