

Approved By:	Director	Date Approved:	October 2022
Review Date:	October 2024	Version:	2.2

Policy

Ability Health Solutions is committed to an effective and fair complaints system and supports a culture of openness and willingness to learn from incidents including feedback and complaints. The complaints process is linked to the risk management process.

In line with the focus on participant / client rights and person-centred care, Ability Health Solutions encourages feedback or complaints through multiple mechanisms including conversations with Allied Health Professionals (AHP), phone calls, emails, formal complaint, websites and third parties such as funding bodies.

Information on how to make a complaint is provided before services commence and reinforced during support delivery.

The clients/ participants and their families are provided with the opportunity to provide feedback or make a complaint at the time of reviews but also at any time during service delivery.

Workers are informed on this policy and procedures at time of induction and then annually.

Other providers and external stakeholders are informed on how to make a complaint via engagement letters and contracts.

All feedback, both positive and negative, is used by Ability Health Solutions to evaluate services and to make changes to ensure everyone is safe and satisfied.

Outcome

Everyone is aware of how they can provide feedback or make a complaint.

Everyone has their concerns satisfactorily addressed, feels supported through the feedback and complaints process and is kept informed of progress with their own issue and of any changes made.

All feedback and complaints are documented and changes made, as required, to improve service delivery and procedures to improve participant / client satisfaction.

Ability HS will take immediate action where there appears to be a high risk of harm, neglect or abuse.

Definition

Complaint

Is a statement that something is unsatisfactory.

NDIS Commission "A complaint is an expression of dissatisfaction made to or about an organisation, related to its products, services, staff or the handling of a complaint, where a response or resolution is explicitly or implicitly expected or legally required."

NDIS Quality and Safeguards Commission: Complaints Management and Resolution Guidance, Version 2.1 - September 2019 p8



Feedback

Information about reactions to a service, a person's performance of a task, a product etc. which is used as a basis for improvement.

Feedback can be positive or negative.

Complaints Management Principles

Clients/ participants / representatives are encouraged to provide suggestions, compliments, concerns and complaints and are involved in feedback on the complaints process

All complainants are treated with respect, sensitivity and confidentially and underpinned by complaints principles. All complaints are handled without prejudice or assumptions about how minor or serious they are. The emphasis is on resolving the issue.

All complaints are managed fairly, equitably and as efficiently as possible.

Clients/ participants/ representatives and staff can make complaints on a confidential basis or anonymously if they wish, and be assured that their identity will be protected.

All staff are to provide assistance to clients/ participants who have special needs, such as those who do not speak English well (from culturally and linguistically diverse backgrounds) or have a disability, so that they can provide feedback or follow up a complaint.

Staff are expected to attempt resolution of complaints and concerns at the point of service, wherever possible and within the scope of their role and responsibility.

Personal information in individual complaints is kept secure with restricted access and confidential and is only made available to those who need it to deal with the complaint.

Related Policies, Documents & Legislation:

Internal

- Complaint & Feedback Form
- Complaint Record Form
- Privacy and Information Management Policy
- Risk Management Policy and Procedures
- Risk Management Register
- Person Centred Practice Policy
- Incident Management Policy and Procedures

External

- Disability Act 2006
- Privacy Act 1988
- NDIS Quality and Safeguards Commission Standards
- NDIS Quality and Safeguards Commission: Complaints Management and Resolution Guidance, Version 2.1 - September 2019
- NDIS Effective Complaint Handling Guidelines for NDIS Providers includes a valuable approach to managing complaints extracted from <u>Victorian Disability Services Commissioner</u> booklet 'Everything you wanted to know about complaints...', - refer to Appendix.



Procedures

Making Clients/ Participants Aware that Feedback, including Complaints, are Welcomed

- a) Clients/ Participants are provided with information on how and where to provide feedback / make a complaint before services commence through provision of information:
 - Website information
 - NDIS Service Agreement (NDIS Participants)
 - Referral Information
 - Clinicians and staff inviting feedback and comments.
 - Requesting copy of 'Complaints & Feedback Policy'
- b) Clients/ Participants have the opportunity to provide feedback / make a complaint at any time and more particularly at the time of reviews and client/ participant surveys
- c) Feedback or complaints can be made in many ways:
 - Directly with the therapist
 - Calling Ability Health Solutions 9569 9941
 - Email admin@abilityhealthsolutions.com.au
 - Filling in an Ability Health Solutions 'Complaint form'
 - For serious complaints or urgent matters a complaint can be made directly to Ability Health Solutions Director, Stephen Jones.
 - o Phone: 0457 003 774 Email: stephen@abilityhealthsolutions.com.au
- d) NDIS Participants can also complain directly to the NDIS Quality and Safeguards Commission:
 - o via phone 1800 035 544 (free from landlines) or TTY 133 677 interpreters can be arranged.
 - o by filling in an online complaint form.
 - o Visiting their website www.ndiscommission.gov.au
- e) Any client/ participant can alternatively complain to the **Health Complaints Commissioner:**https://hcc.vic.gov.au/public/about-complaints.
- f) **Use of an independent advocate**: any client/ participant can also use an advocate to assist in making a complaint. This may be a family member, friend, trusted decision-maker or appropriate advocacy service. Ability Health Solutions can assist the participant to access an advocate as required by referral to appropriate service. Options for advocacy services include:
 - Disability Advocacy Victoria: http://www.disabilityadvocacyvic.org.au/ 9489 2999
 - Additional advocacy services can be found via:
 - Disability Advocacy Finder
 https://disabilityadvocacyfinder.dss.gov.au/disability/ndap/
 - Disability Advocacy Resource Unit: http://www.daru.org.au/organisations



Making Workers Aware that Feedback, including Complaints are Welcomed

- a) Workers are provided with information at induction on how to provide feedback or make a complaint and then through annual training.
- b) Workers have the opportunity to provide feedback or make a complaint at any time and do not need to wait till formal reviews / supervision.
- c) In the event the complaint is about the Client/ Participant, the Worker will report to their direct manager.
- d) In the event the complaint is about internal grievances the Worker should refer to Managing a Grievance in the Human Resource Management Policy and Procedures.

Management of a Complaint

- a. If a client/ participant is making the complaint confirm if they wish to use an independent advocate to assist in making the complaint. This may be a family member, friend, trusted decision-maker or appropriate advocacy service. If / as required, assist the participant to access an advocate as required by referral to appropriate service. Advocacy services can be found via: Disability Advocacy Finder search engine or Disability Advocacy Resource Unit (links outlined above section).
- b. It is critical that the complainant (client/ participant or their family member, Worker or other provider) feels the complaint has been adequately acknowledged and they are given time to express how it has affected them and what actions they would like to see taken.

c. Verbal feedback or complaint:

If the complaint is made verbally, the staff member receiving the complaint will:

- Listen to what the person must say and take it seriously.
- Ensure the person that there are no repercussions for expressing their concern.
- Obtain as much detail as possible about what happened and why the complaint has been made.
- Will talk fairly, sensitively and confidentially to the person making the complaint in a way which reflects their individual, cultural and linguistic needs.
- Ensure the complaint is kept strictly confidential.
- Encourage (and assist if necessary) in relating the complaint in writing.
- Serious complaints that require immediate elevation include:
 - Staff or volunteer conduct.
 - An alleged breach of: A participant's right or responsibility; Duty of Care;
 Participant/ Client or staff safety; Privacy & Confidentiality; An alleged incident
- Record and report the complaint on 'Complaint Record Form'

d. Written Feedback or Complaint:

When a verbal complaint is elevated, or a written complaint is received:

The written complaint is forwarded to the correct Team Leader or Director, within 24 hours of a serious complaint being made, or 5 working days of a routine complaint.



- e. Staff member who receives the complaint is to:
 - Complete a 'Complaint Record form' and provide this to the Director. The report must include all necessary factual details, immediate actions that have been taken and any identified / planned follow-up actions.
 - Discuss complaint with Director who will then contact the complainant as soon as practically possible, but at least within 24 hours.
- f. The complaint is recorded in the Ability Health Solutions Complaints Register by the Director. Access to the register and any completed forms must be limited to senior staff only.
- g. The Director will, in collaboration with the complainant, decide on the course of action. The actions should include / address:
 - How to resolve the complaint. This could include acknowledgement, an apology, answers and / or action
 - Where appropriate, seeking feedback from others e.g. other clients / Participants, workers
 - When, how & through whom (e.g. advocate) complainant will be kept informed of progress
 - How to improve the service if / as required. This could include:
 - Further training of staff / others involved
 - Reviewing and enhancing policies and / or procedures
 - Change of personnel
 - Changes to the environment / delivery mode for AHP services.
- h. If the complaint is of a serious nature (eg mandatory reporting required, could lead to litigation),
 a formal incident investigation will be conducted (use the *Incident Investigation* form) to explore
 what led to the complaint and if any steps are required to prevent it occurring again.

 Note: If police are involved in the incident, no internal investigation is to commence until the
 - police investigations are complete
- i. Start implementing agreed actions, keeping the complainant informed.
- j. Actions will be monitored by the Director and updates on progress will be added to the register until the incident is satisfactorily concluded
- k. If the complainant is not satisfied with the outcomes of the initial discussions, a third party (e.g. colleague, HR professional) will be called in to assist with discussions.
- I. If the complainant is still not satisfied with the way the complaint has been handled or the outcomes achieved, they can contact the <u>NDIS Quality and Safeguards Commission, National Disability Neglect & Abuse Hotline</u> and /or the Health Complaints Commissioner. https://hcc.vic.gov.au/public/about-complaints. Contact details will be provided to the client/participant.





- m. Complaints reports and all related documents are to be kept for 7 years.
- n. External Notification: The Director will inform or consult with external agencies in the following circumstances:

Issue	External Agency		
Complaint has not been resolved directly	Health Complaints Commissioner / NDIS Quality &		
with complainant	Safeguards Commission		
Offence under privacy laws, privacy breach	Office of the Federal Privacy Commissioner / State Privacy		
amounting to breach of professional	Commissioner		
standards	Health Professional registration body		
Unsafe care or inappropriate behaviour by a	Health Professional registration body		
health practitioner			
Reportable deaths under the Coroners Act	State Coroner		

An incident that could possibly result in a complaint or claim is notified to the insurers.

Training Workers on Feedback and Complaints Management

All staff will receive initial and refresher training on Feedback and Complaints Management. This is to include examples of how to assure participants that feedback is welcome, what may constitute a 'complaint' and tips on being open to feedback. Refer to *Annual Training Plan*.

Reporting

The Director will review and prepare yearly reports on the number and type of complaints, the outcomes of complaints, recommendations for change and any subsequent action that has been taken. The reports are provided to staff.

Monitoring and Evaluation

The Director annually reviews the complaints management system to evaluate if the complaints policy is being complied with.

Formal complaints are acknowledged in writing or in person within 24 hours.

The acknowledgment provides contact details for the person who is handling the complaint, how the complaint will be dealt with and how long it is expected to take.

Practice improvement changes occur as a result of complaints and suggestions.

Feedback and Complaints is a standing agenda item on staff Team Meetings