

7.15.01b External Feedback and Complaints



Approval Authority	Executive Leadership Team
Policy Owner	General Manager, Strategy and Growth
Policy Author	Senior Quality and Improvement Officer
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1. Governing Policy/Framework

This procedure relates to the Risk Management Policy and Procedure.

2. Background/Context and Purpose

Carers Queensland welcomes all feedback, recognising that feedback is an invaluable source of information about an individual's experience of the quality and/or cultural safety of the services and associated processes offered by Carers Queensland. This information is integral to the organisation's continuous quality improvement processes.

3. Scope

This procedure applies to complaints or feedback relating to the Corporate Services, Strategy, Your Caring Way Program, Registered Training Organisation (RTO), Human Resources and the Carer Program business units.

Exclusion: Feedback relating to NDIS Local Area Coordination services are assessed, managed and reported in accordance with NDIS guidance. Refer to the QuEST (Quality, Enabling, Sustainability) Team for guidance.

4. Glossary

- a. **advocate:** chosen by the individual to provide emotional support and/or assist with the communication processes
- b. **anonymous complaint:** these allegations provide information about trends and specific issues and, where possible, are assessed against the same criteria as any other complaint; noting that insufficient evidence or the inability to fact check, may impact on the ability to fully investigate anonymous complaints.
- c. **appeal/review:** is a systematic analysis of a completed investigation process, the evidence reviewed and how the outcome determined. Appeals and reviews employ the same assessment criteria as the initial complaint investigation.
- d. **client/s:** refers to those individuals of any age (carers, RTO students, people with disability,) in receipt of services from Carers Queensland.
- e. **complainant:**
 - is an individual who is dissatisfied or aggrieved and lodges a formal notice of their dissatisfaction or grievance and is seeking a resolution to their complaint.
 - a complainant can be a child under 18 years of age
- f. **complaint:** an expression of dissatisfaction about a service, policy, process, public information, employee member or volunteer or the handling of a complaint where a response or resolution is explicitly or implicitly expected or legally required (AS/NZ 10002:2014).

- g. **complaints register:** confidential register capturing the circumstances and details, response times, and the outcome/s, complaint status etc.
- h. **compliment:** a positive comment or opinion.
- i. **dispute:** an unresolved complaint escalated either within or outside of the organisation.
- j. **escalation:** refers to the process of escalating the complaint to a higher risk rating (e.g. from a Level 1 risk to a Level 2 or a Level 2 to a Level 3 risk) and referring the matter to the appropriate officer immediately.
- k. **fairness:**
 - decisions are fair and seen to be fair and based on what is regarded as contemporary practice in the social care sector
 - information relevant to the complaint is kept confidential to the those relevant to the investigation, unless the law requires disclosure
 - client or their representatives can use a universal complaints commission or agency
- l. **feedback:** opinions, comments and expressions of interest or concern, made directly or indirectly, explicitly or implicitly, to or about the organisation, about our services or complaint handling where a response is not explicitly expected or legally required.
- m. **investigation:** is the process whereby the allegations or issues are tested and assessed against organisational policy and procedures, legislation and relevant external charters of rights and responsibilities.
- n. **just outcome:** the action taken to resolve a complaint should be appropriate and respond to the needs of the complainant as far as possible (e.g. an explanation; apology etc.)
- o. **natural justice:**
 - the technical term for the rule against bias and the right to a fair hearing
 - requires that the individuals involved and implicated in the allegation know the substance of the allegation
 - all parties involved can provide information relevant to the complaint and their views are considered without bias or prejudice
 - all parties are informed of the final decisions and the reason/s for those decision
- p. **risk potential:** the likelihood of a harmful or negative consequence (harm or loss of life or livelihood; damage to the organisation's reputation, loss of funding, litigation) that may result when exposed to a particular situation or environment.
- q. **unreasonable complainant behaviour:** for behaviour to be considered unreasonable, it must clearly extend beyond the norm of the situational stress relevant to the complaint issue.

5. Objectives and Guiding Principles

Carers Queensland is committed to natural justice and fairness by:

- a. promoting our complaints policy and forms via the website, social media, newsletters and print documents
- b. ensuring the 'how to give feedback or make a complaint' resources are available in plain English and easy-to-read formats
- c. to ensure complaints and feedback are handled efficiently, fairly, effectively, ethically, transparently and consistently
- d. supporting and assisting individuals, including children, to make a complaint or give feedback

- e. arranging at no cost to the client an interpreter, translator and/or cultural facilitator to assist the individual to make a complaint, participate fully in the investigation and resolution processes
- f. arranging at no cost to the client under 18 years, a support worker to assist the young person to make a complaint and participate fully in the investigation or give feedback
- g. assuring the individual that they will not be subject to retribution of any nature - real, implied or threatened - at any stage before, during or subsequent to the complaint investigation and resolution.

PART B PROCEDURES

6. Determining Risk Severity

All feedback is assessed upon receipt to identify the risk severity and likelihood.

LEVEL OF RISK	COMPLEXITY AND/OR ORIGIN OF COMPLAINT	RECEIPT TO RESOLUTION
LEVEL 1 LOW RISK	No harm to client, employees, or visitors. No loss of service. No or minor loss of reputation or client relationship.	7 days
LEVEL 2 MEDIUM RISK	An event that can be managed under normal circumstances. Client has suffered harm but does not require treatment. Employee has been injured and working time lost. Disruption to service, reduced efficiency. Significant financial loss. Loss of client relationship. Heightened and/or significant adverse media coverage.	14 days
LEVEL 3 HIGH RISK	Reduced ability to deliver strategic outcomes. Loss of service capability. Complaint has the potential to threaten ongoing existence of the program. Major or critical financial loss. Serious breakdown of client relationship. Permanent damage to reputation. INCLUDES ALL - Complaints made to the Ombudsman, CEO, Board Directors, and Member of Parliament or complaints reported in the media. Where emergency services (e.g. police, ambulance, crisis mental health teams etc.) has or is likely to be involved. In the event of, or where allegation of, death or serious injury or abuse is involved.	28 days

7. Responsibility for Managing Feedback and Complaints

	Carer Program	YCW Program	RTO	Strategy	Human Resources	Corporate Services
	Officer responsible for directing the investigation					
LEVEL 1 LOW RISK	Any employee as directed by the line manager					
LEVEL 2 MEDIUM RISK	Senior Project Officer	Program Manager	Vocational Services Manager	Manager, Q&A or Manager, MarComms	HR Advisor	Business Unit Manager
	Program Manager	GM S&G	GM S&G	GM S&G	HR Manager	GM CS
LEVEL 3 HIGH RISK	Program Manager	GM S&G	GM S&G	GM S&G	HR Manger	GM CS
	CEO	CEO ** Advise the DSS within 2 working days	CEO	CEO	CEO	CEO

8. Managing Expectations

Establishing at the outset, how the feedback/complaint investigation will proceed is pivotal to an effective process.

Individuals, their representatives, or support person should be made aware:

- of the processes for investigating and resolving feedback and complaints
- of the investigation timeframe
- of the communication frequency, channels, and processes
- of what is expected of the individual or their representative/support person
- that the investigating officer has the authority, skills and knowledge to assess the situation and make appropriate recommendations
- of the appeals processes
- that the details of the feedback or complaint and the individual/s involved, the investigation processes and any other material will remain confidential and stored in compliance with Carers Queensland's record management and privacy policies.

Identifying and Managing Unreasonable Complainant Behaviour

Refer to Appendix A

9. Step 1 - Receiving a Complaint

Safety First

If the individual's mood is elevated, they are very distressed, angry, abusive and/or threatening (harm to others, self and/or the physical environment) obtain the primary/basic contact information and as much of the complaint detail as reasonably possible and close the exchange. If the individual refuses to leave the premises or threatens others in the area, request assistance from another employee to manage the situation. Objectively record all the details of the exchange and immediately inform your direct line manager.

Receiving verbal feedback or complaint over the phone or at the counter

- At the point of receipt, acknowledge the person's concern.
- Advise the individual that the details of their complaint will be recorded
- Record the details of the feedback/complaint as objectively and accurately as possible including:

1. full name	2. address
3. contact details - phone or email	4. date of birth if the individual is a child
5. date, time and location of the exchange and details of other employees present or involved	6. need for: <ul style="list-style-type: none">• interpreter or translator• advocate (child under 18 years)
7. content of the allegation including threats	8. outcome the individual is seeking if known
9. mood: is the individual – conciliatory/angry/aggressive/suicidal or threatening harm to others or property or threatening involvement of the press?	10. attach to the record, any documentation provided by the individual

Other feedback and complaints

Those received via the Corporate Inbox, website feedback form, email, surveys, post, or adverse commentary in social media or the press and those issued directly to a local member (State and/or Commonwealth).

10. Step 2- Informing All Relevant Parties

Within one (1) working day all communication and evidence should be forwarded to:

- a. The line manager, the Business Unit Manager and Chief Executive Officer and
- b. The Quality and Assurance Team (feedback@carersqld.com.au), who will register the feedback/complaint in the Complaints Register and create a unique file to store relevant documentation.

11. Step 3 – Establish Risk

The direct line manager to review the allegation and the circumstances surrounding the communication and, using the Determining the Risk Severity Chart, ascertain if the feedback/complaint is a Level 1 (Low Risk); Level 2 (Medium Risk) or Level 3 (High Risk) and direct or manage the situation as per **Step 4** and **Step 5**.

12. Step 4 – Managing the Situation

Level 1 Low Risk

- a. If the feedback or complaint is assessed as Level 1, Low Risk and the situation can be appropriately and adequately resolved at the point of contact, the direct line manager is to do so.
- b. Employee to document all aspects of the situation as per **Step 1** and forward to all relevant parties as per **Step 2**.
- c. Line Manager advises the outcome to the Business Unit Manager, Chief Executive Officer and Quality and Assurance (for finalising in the Complaints Register.)

Level 2 Medium Risk

If the complaint cannot be resolved at the point of initial contact or the information is received through a survey, email, post:

- a. The Chief Executive Officer will appoint an employee to lead the investigation.
- b. The directly line manager will advise the individual a review of the situation will be undertaken, and they will receive a response no later than 14 working days from receipt of the complaint.

Level 3 High Risk

- a. If the feedback or complaint relates to the Your Caring Way Program – following discussion and with the approval of the Chief Executive Officer, the General Manager Strategy & Growth to advise the Contract Manager at Department of Social Services within two (2) working days.
- b. The Chief Executive Officer will appoint an employee to lead the investigation
- c. The General Manager Strategy & Growth or the Business Unit Manager will advise the individual a review of the situation will be reviewed, and they will receive a response within 28 working from receipt of the complaint.

13. Step 5 – Investigating the Complaint (Level 2 and Level 3)

The Investigating Officer to conduct Steps 1-5:

Step 1

- a. If requested organise an interpreter, translator, cultural facilitator or for a child under 18 years, a support worker
- b. Coordinate all aspects of the complaint investigation (both named and anonymous complaints)

Step 2 - Acknowledging the individual's concern/s

- c. Acknowledge the individual's concern if possible
- d. Advise the individual they have the right to have a support worker and that their privacy will be respected
- e. Obtain the details of the complaint
- f. Objectively record all aspects of the conversation as soon as possible after the meeting, using where possible, the words of the individual or their representative.

Step 3 - Seeking evidence

- g. Inform employees named or identified in the complaint of the nature of the complaint
- h. Seek from the named/identified employee/s contextual information to support a fair and balanced interpretation of the circumstances including written notes, diary entries, or written personal accounts
- i. If relevant to the outcomes of the investigation, maintain communication with the individual and/or the representative/support worker throughout the process to completion
- j. Objectively record all aspects of all conversations as soon as possible after the meeting, using where possible, the words of the individual or their representative.

Step 4 – Keeping others informed

- k. Keep the relevant manager/s abreast of all facts, including new disclosures (e.g. harm or abuse - real or threatened, fraud etc.) that were not a part of the initial information
- l. Record and report all relevant data and information
- m. Once complete, forward all documentation and other evidence to the nominated manager (Program or General Manager, and Chief Executive Officer).

Step 5 – Outcome determination

The relevant manager, with the Chief Executive Officer, to determine:

- n. The outcome and how that outcome is to be communicated and by whom
- o. As to whether the issue should be raised as a risk to be assessed and controls developed.
- p. Advise Chair of the Organisational Risk Committee and Internal Audit and Evaluation Officer to commence action.

Step 6 - Record management

- q. The General Manager or Program Manager to forward all documentation to the Quality and Assurance Team (feedback@carersqld.com.au) to update the Complaints Register and file all communication and evidence.

14. Appeals

Dissatisfied individuals or their representatives are entitled to appeal the outcome of an investigation and/or escalate their concern to the relevant external complaints' agencies. All appeals will be reviewed by senior officers appointed by the Chief Executive Officer to determine:

- a. is the appeal reasonable? Has the individual or their representative provided new evidence to support their ongoing complaint, and will that alter the investigation outcome? or
- b. is the appeal unreasonable, vexatious or malicious?
- c. to recommend how to respond to, and manage, the ongoing allegations

If required, the Chief Executive Officer will appoint a new investigation team to undertake the appeal review.

If appropriate, repeat **Step 5**.

15. Receiving Compliments

- a. Forward compliments (written, verbal, in social media) to the direct line manager, General Manager or Business Unit Manager and the Chief Executive Officer.
- b. Direct line manager to pass the compliment onto the employee/s involved.
- c. If appropriate, thank to individual directly.
- d. Forward all communication to the Quality and assurance Team (feedback@carersqld.com.au) for uploading into the Compliments Register.

16. Related Documents

- 1.15.01a Code of Conduct Policy
- 1.15.04a Whistleblowing Policy
- 1.15.04b Whistleblowing Procedure
- 1.15.06a Child Safety and Wellbeing Policy
- 1.25.01a Risk Management Policy
- 1.25.01b Risk Management Procedure
- 10.10.02b Dealing with the Escalated Client Procedure
- 10.10.03b Safeguarding Children, Young People and Vulnerable Adults Procedure

17. Appendices

Appendix A: Unreasonable Complainant Behaviour

18. Document Control

DOCUMENT REVISION HISTORY				
Version	Approved by	Approval date	Effective Date	Amendments
Original	SMG	Dec 2017	Dec 2017	
V.1.0	ELT	23/09/2019	23/09/2019	
V.1.1	ELT	3/7/2020	3/7/2022	Amendments to bring procedure into line with DSS contractual requirements. Update NDIS and Carer Program references
V.2.0	ELT	2/8/2021	2/8/2021	Removed references to NDIS processes. Reduced complexity of the processes and documentation required.

APPENDIX A: UNREASONABLE COMPLAINANT BEHAVIOUR

19. Unacceptable and unreasonable behaviour includes:

- implied, threatened or real overt anger, aggression, bullying, violence, assault, and intimidation.
- unreasonable persistence
- unreasonable demands
- unreasonable or persistent lack of cooperation
- unreasonable or persistent arguments

When determining if an individual's behaviour is unreasonable the following points should be considered:

- the circumstances of the complaint - does the individual have the intellectual, mental health, health, educational, language, social and financial resources required to cooperate in the complaint investigation? If they do, then more can be expected of them in terms of their cooperation and behaviour.
- proportionality – is the individual's distress/behaviour proportionate to the loss or wrong suffered?
- responsiveness – does the individual respond well to calming measures?
- personal boundaries – does the individual's behaviour or language impinge on the personal boundaries of the investigating officer/s?

Communicating with angry, aggressive individuals:

Carers Queensland is committed to a non-confrontational and non-resistant communication approach that avoids arguments and debates, defensiveness and unnecessary justifications through:

- attentive listening - focusing on what the complainant is saying.
- expressing empathy – giving the complainant some indication that their distress etc. is understood
- acknowledging the individual's point of view – acknowledging that they have a certain view or belief without necessarily agreeing to it.
- apologising appropriately and only where necessary, stating clearly what can and cannot be done.
- when overt anger, implied or actual threats or rudeness occurs confine the communication/interactions to writing wherever possible.

Individual employee responsibilities:

- to establish a firm but polite and respectful communication with the individual or their representative from the outset.
- to remain calm when confronted by distressed, aggressive or unreasonable behaviour.
- to always show respect, no matter the provocation.
- to demonstrate impartiality.
- to maintain professional standards, to behave in an ethical manner.
- to accurately record all aspects of the investigation in a timely manner.
- to honour commitments.

Employee involved in a 'difficult' investigation have access to:

- timely and appropriate support from a senior manager and
- Carers Queensland's Employee Assistance provider.