

Adelaide Quality Care

Policy 1

Complaints, Compliments & Feedback Policy

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Date	Version	Who Approved	Reason for change

Complaints, Compliments and Feedback Policy

PURPOSE AND SCOPE

To comply with the service provider and brokerage policy for the NDIS funded disability service providers.

POLICY

It is the policy of Adelaide Quality Care to create an environment where complaints and concerns, compliments, and suggestions (feedback) are welcomed and viewed as an opportunity for acknowledgement and improvement. This is to ensure that individuals have the right to make comments and complaints and are encouraged to exercise their right in blame free and resolution focused culture, respecting an individual's right to privacy and confidentiality.

It is acknowledged that such comments and complaints are vital to review internal performance and processes and to seek continuous improvement of services as we seek to achieve our care commitment. Participants, families, and / or other stakeholders may submit compliment, complaint and / or feedback form about Adelaide Quality Care's supports or services, staff, and / or contractors.

It is our policy to follow the principles of procedural fairness and natural justice and comply with the requirements under the National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018 and Aged Care Act 2013.

Adelaide Quality Care maintains that complaints and feedback can be managed effectively through:

- An open and transparent complaint handling system.
- The observation of the principles of natural justice and compliance with relevant mandatory reporting under Australian law.

- Commitment to the right of stakeholders to complain either directly or through their representatives.
- The maintenance of complete confidentiality and privacy.
- Assurance that staff must abide by the Code of Conduct.
- Staff training and a clear documented process.
- Complaints being considered seriously and with respect.
- Informing participants about their right and providing guidance on how to make a complaint during the assessment and orientation process.
- Easily available information for people, about the complaints process.
- The provision of support for those people who may need assistance to make the complaint.
- The protection of complainants against retribution or discrimination.
- The prompt investigation and resolution of complaints.
- Communicating and consulting with participants, family, carers and advocates during the complaint's process, and providing feedback and resolutions.
- Consistent interpretation and application of policies and processes.
- The provision of opportunities for all parties to participate in the complaint's resolution process.
- The acceptance of the Adelaide Quality Care and its employees being accountable for actions and decisions taken as a result of the complaint.
- The commitment to resolve problems at the point of service or through referral to alternatives.
- The commitment to use the complaint as a means of improving the planning, delivery and review of services through our continuous improvement processes, and
- Referring complaints and feedback into continuous improvement policy.

DEFINITION

Complaint - An expression of dissatisfaction or a circumstance regarded as a cause for such expression.

PROCEDURE

COMPLAINT PROCESS

Complaints and suggestions can be made through:

- Utilisation of the Compliments, Complaint / Feedback Form.
- Contacting a member of staff verbally or in writing. The member of staff must offer to document the complaint on behalf of a participant (if required) and refer the matter to the Consumer Care Coordinator.
- Contacting the Consumer Care Coordinator verbally or in writing.
- Responding to questionnaires and surveys.
- Attending meetings / care conferences.
- Contacting external complaint's agencies.

Results are recorded in Complaint Register to allow for input into Continuous Improvement processes.

If a complaint is about:

- **Support or services** - The complaint will be dealt with by the Consumer Care Coordinator
- **A staff member** - The complaint will be dealt with by the Office Manager
- **The Managing Director** - An external person or body may be approached (NDIS

Commission Ph: 1800 035 544 -9 am to 4 pm and Aged Care Complaints Scheme Ph: [1800 951 822](tel:1800951822) (free call))

COMPLAINT AND RESOLUTION STAGES

- Acknowledge all complaints quickly (within one working day where possible) and consult with participant regarding desired outcome. The complainant should be informed of, and supported regarding their right to advocacy, interpreter, stages of decision making, mechanisms to protect privacy, and progress and outcome.
- Complaints will not be discussed with anyone who does not have a genuine responsibility for resolving the issue.

- Where the complainant is a recipient of disability services under the NDIS or consumers under Aged Care Home Care Package, check the participant record for a preferred key contact for complaints or ask the participant if they would like to nominate a key contact from one of the Adelaide Quality Care's persons; assigned to handle complaints.
- If a meeting is required, then it will be held in a safe environment that has been determined by the complainant and at a time relevant to the participant.
- Complainant must be informed at all stages of the status of their complaint.
- Adelaide Quality Care must take into consideration any cultural and linguistic needs of the participant and provide the relevant support mechanism such as interpreters or similar.
- Assess the complaint, give it priority, think about resolution pathway (where required), plan and investigate. Complaints will be investigated and wherever practicable the resolution is attempted at the time the complaint is lodged with the Head Office. It is always Managing Director's responsibility to keep the complainant informed in relation to the complaint. Written responses must be approved by Managing Director prior to being sent out.
- Record keeping;
 - Document the details
 - Identify the issues
 - Investigate adhering to the principles of impartiality, privacy, confidentiality, transparency and timeliness
 - Record the outcome of this process
 - Upload documents including Adelaide Quality Care, Compliments, Complaint / Feedback Forms.
 - Feedback to the complainant
- Respond to the complainant with a clear decision.
- After investigation and a satisfactory response has been documented the Managing Director will ensure that the complaint investigation has been satisfactorily completed.

- Determine if the complainant is satisfied with the outcome.
- Follow-up any concerns.
- Consider if there are any systemic issues.
- Staff, participants and/or person's responsible, visiting health professionals and visitors are informed of the complaints process through:
- Participant Introductory Procedure Adjust; as required
 - Staff Orientation and training
 - Meetings
 - Participant Agreements
 - Signage
 - Contractor Agreements
- Complaint resolution will be monitored according to the audit schedule and feedback will be provided to the complainants personally.

UNRESOLVED COMPLAINTS

- Unresolved complaints will be referred to the Managing Director for investigation and resolution. Should the complaint not be resolved to the complainant's satisfaction, the complaint will be escalated to a person nominated by the complainant (with the complainant's permission).
- When complaints cannot be resolved internally, the complainant may be referred to the external agency, listed below;

NDIS Commission

Ph: 1800 035 544 (free call from landlines) or TTY 133 677.

Interpreters can be arranged.

National Relay Service and ask for 1800 035 544.

Completing a complaint contact form.

<https://forms.business.gov.au/smartforms/servlet/SmartForm.html?formCode=PRD00-OCF>

AGED CARE Complaint Scheme

Ph: [1800 951 822](tel:1800951822) (free call)

Email: audit.feedback@agedcarequality.gov.au

Postal: Aged Care Quality and Safety Commission

GPO Box 9819, in your capital city

<https://www.agedcarequality.gov.au/making-complaint>

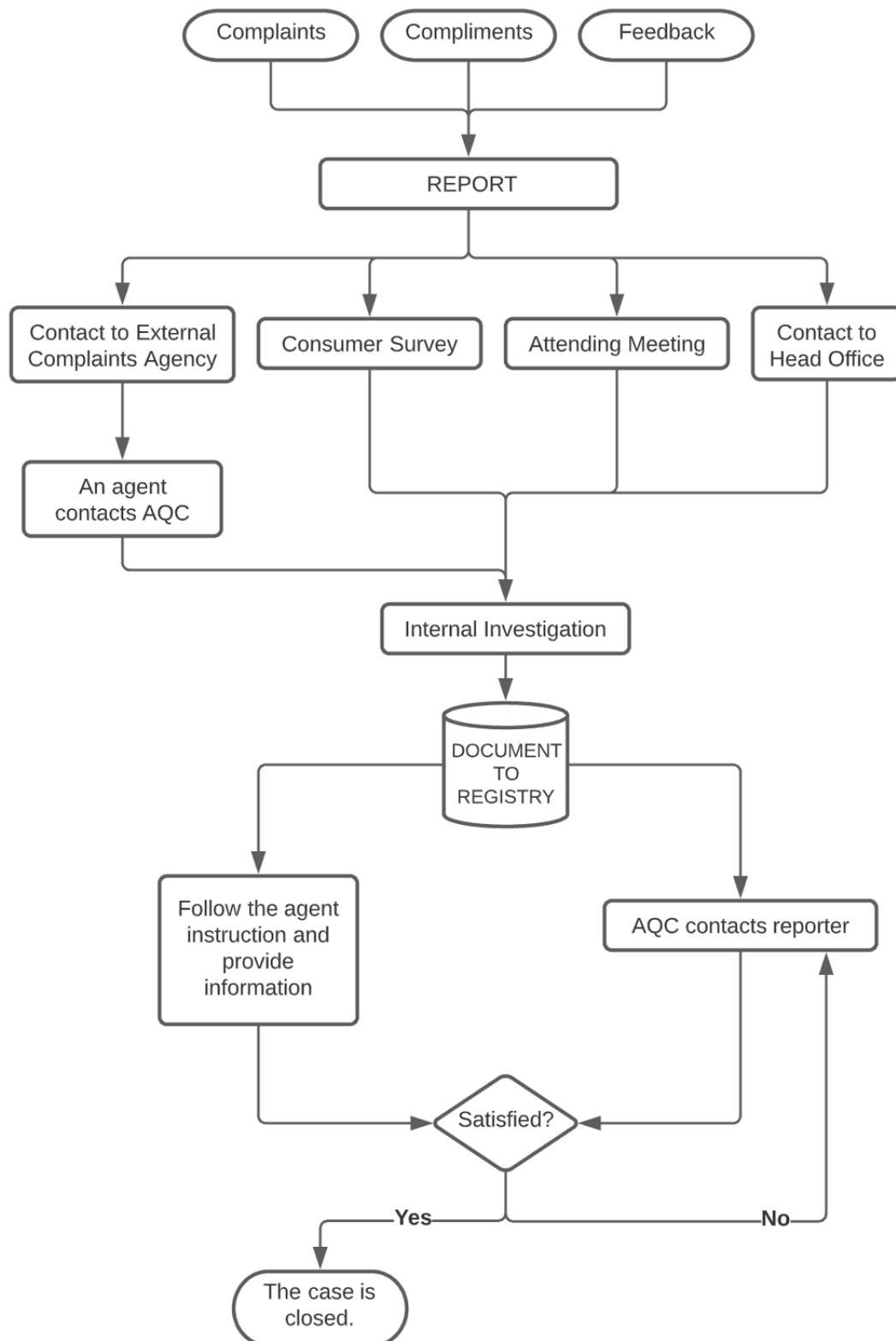
RELATED DOCUMENTS


- Compliments, Complaint & Feedback Form
- Service Agreement
- Code of Ethics and Conduct Policy / Form
- Continuous Improvement Policy
- Incidents, Accidents and Emergencies Policy
- Risk Management Policy

REFERENCES

- Work Health and Safety Act (2011)
- NDIS Practice Standards and Quality Indicators 2018
- NDIS (Complaints Management and Resolution) Rules 2018
- Privacy Act (1988)

Complaints, Compliments & Feedback Procedure Flow Chart



	Adelaide Quality Care COMPLAINT & FEEDBACK FORM	P1 / A / 006 – F 01 - 0001 REVIEWED DATE: MAR 2020 REVIEWED BY: SP

TYPE OF FEEDBACK	<input type="checkbox"/> COMPLAINT	<input type="checkbox"/> COMPLIMENT	<input type="checkbox"/> SUGGESTION
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REPORTER'S DETAILS			
FULL NAME		STATUS	Choose an item.
CONTACT NUMBER			

DETAILS OF EVENT / ISSUE			
DATE	Click or tap to enter a date.		TIME
LOCATION	<input type="checkbox"/> HOME (indoor) Choose an item.		<input type="checkbox"/> HOME (outside) Choose an item.
	<input type="checkbox"/> OFFICE	<input type="checkbox"/> PUBLIC Choose an item.	<input type="checkbox"/> OTHERS:
TYPE OF INCIDENT	<input type="checkbox"/> FALLS		<input type="checkbox"/> SKIN TEAR
	<input type="checkbox"/> MISSING PERSON		<input type="checkbox"/> ELDERLY ABUSE
	<input type="checkbox"/> BURN		FOOD POISON
	<input type="checkbox"/> MEDICATION ERROR		<input type="checkbox"/> OTHERS:
CAUSE OF INCIDENT	<input type="checkbox"/> SLIPPERY FLOOR		<input type="checkbox"/> POOR MANUAL HANDLING
	<input type="checkbox"/> EXISTING MEDICAL CONDITION		<input type="checkbox"/> OTHERS:
ANY INJURY?	<input type="checkbox"/> YES <input type="checkbox"/> NO	WORK COVER REPORT	Choose an item.
BODY LOCATION OF INJURY	Choose an item.		Choose an item.
	Choose an item.		
PAIN	<input type="checkbox"/> YES <input type="checkbox"/> NO	Choose an item.	Choose an item.
DESCRIPTION :			

DETAILS OF RISK / HAZARD			
OBSERVED DATE	Click or tap to enter a date.		OBSERVED TIME
LOCATION	<input type="checkbox"/> HOME (indoor) Choose an item.		HOME (outside) Choose an item.
	<input type="checkbox"/> CAR / VEHICLE	<input type="checkbox"/> PUBLIC	<input type="checkbox"/> OTHERS:
TYPE OF HAZARD	<input type="checkbox"/> RISK OF FALLS		<input type="checkbox"/> SECURITY
	<input type="checkbox"/> PRIVACY & DIGNITY		<input type="checkbox"/> BACK INJURY
DESCRIPTION:			

IMMEDIATE ACTIONS ARE TAKEN		
<input type="checkbox"/> ATTENDED FIRST AID	<input type="checkbox"/> CALLED AMBULANCE	<input type="checkbox"/> TRANSFERRED TO HOSPITAL
<input type="checkbox"/> CONTACTED THE OFFICE	<input type="checkbox"/> COMPLETED PROGRESS NOTE & REPORT	<input type="checkbox"/> OTHERS:

REPORTING PERSON'S FULL NAME		DATE & TIME	
MANAGEMENT ONLY			

	Adelaide Quality Care COMPLAINT & FEEDBACK FORM		P1 / A / 006 – F 01 - 0001 REVIEWED DATE: MAR 2020 REVIEWED BY: SP

INVESTIGATING OFFICER (Full name & Designation)		
RECEIVED DATE & TIME	Click or tap to enter a date.	

	HOSPITALIZATION	FIRST AID ATTENDED	NO INJURY
	LOSS OF BLOOD	INJURY	NO BLOODING
	UNCONCIOUS	LOSS OF BLOOD	NIL CHANGES
	SEVERE PAIN	REMAIN HOME	
	DIFFICULTY OF BREATH	CONCIOUS	
RATE OF SEVERITY	HIGH	MEDIUM	LOW
Is this a notifiable incident that needs to be reported to SafeWork SA or others? Please refer to the Notifiable incident Procedure			<input type="checkbox"/> YES <input type="checkbox"/> NO CASE # _____

WHAT CAUSED THE ACCIDENT/INCIDENT

ACTIONS TO BE TAKEN TO MINIMISE POTENTIAL FOR RECCURENCE / RISKS

ADDITIONAL COMMENTS

Please refer to FORMS for the editable version of this form.