

Policy Title: Policy on Complaints Management
Approved By: Board of Management
Originated: 20th November 2019
To Be Reviewed: 20th November 2021

POLICY ON COMPLAINTS MANAGMENT

Purpose of this policy

The purpose of this policy is to outline the expectations for the management and resolution of complaints concerning HOPES' services

Scope

This policy applies to all employees (including volunteers) and Board members.

Review

This policy will be reviewed every two years.

Rationale

Where a client, family member, carer, service provider or regulator makes a complaint, it is important that the substance of the complaint is properly investigated, and the matter resolved to the satisfaction of all parties. All feedback – both positive and negative – presents opportunities for improvement and the outcomes of investigations into complaints should be treated as an opportunity for improving services. Fostering an organisational culture that values and learns from complaints is vital to improving the quality of our services.

HOPES also understands that effective complaints' management system is part of the NDIS practice standards and Code of Conduct and is a condition of registration for NDIS providers. We take this responsibility and expectation seriously.

Definitions

A Concern is a notification that a person is worried that something is not working or has gone wrong and wants to bring it to the attention of those responsible.

A minor, informal complaint is an incidental complaint made to another staff member or Board member about an incident involving a paid or voluntary staff member or board member. Examples of complaints about minor matters may include momentary abruptness or lack of attention and concern.

A serious complaint or grievance is a formal, written complaint provided to another staff member or Board member involving serious misconduct such as behaviour that falls short of professional standards. Examples of conduct that may constitute unsatisfactory professional conduct or professional misconduct include:

- Lack of communication;
- Incompetence;
- Acting in a conflict of interest;
- Doing something illegal; or
- Misleading conduct.

Policy Statement

HOPES' welcomes substantiated complaints from people with disability, families, carers, service providers and regulators to ensure that people are treated fairly and in accordance with HOPES principles and values when they use HOPES' services.

HOPES is committed to being accountable for actions and decisions and resolving complaints, objectively, courteously and fairly. Clients and other stakeholders have the right to have their complaints heard and actioned appropriately.

HOPES' aims to have a complaints management system that reflects:

1. NDIS requirements outlines in *Effective Complaints Handling Guidelines for NDIS Providers 2018*; and
2. Elements and approaches to procedural fairness as outlined in the *National Disability Insurance Scheme Procedural Fairness Guidelines 2018*.

Principles

HOPES is committed to handling complaints according to the following principles:

1. The person making the complaint, and any person with disability affected by the issues raised in the complaint should be included throughout the process to the extent possible;
2. Our complaints management system will be proportional to the scale of our organisation (HOPES' Incorporated) and our response to the complaint will be proportional to the complaint;
3. The process for making a complaint will be easy and accessible and our residents and clients will understand and know how to make a complaint, including making an anonymous complaint;
4. All employees, volunteers and Board members will be aware of; receive training in; and comply with our complaint policy;
5. Appropriate support and assistance from staff family or an advocacy service will be provided to any person who wishes to make or has made a complaint, and no-one will be adversely affected by making a complaint;
6. Complaints will be dealt with directly and quickly unless further investigation is required;
7. There will be a simple clearly documented process for receiving and resolving complaints, including wall charts on display (attachment 2);
8. Our processes and policy for complaints management will be reviewed regularly;

9. HOPES will keep and maintain records of all complaints received, any action taken; and the outcome of any action; and
10. HOPES procedures for complaints management and resolution will take into account the elements of and approach to procedural fairness described in *National Disability Insurance Scheme Procedural Fairness Guidelines 2018* (Attachment 1)
11. Residents and clients will be assisted and supported to make a complaint directly to the NDIS commission, upon request.

Goals

It is intended that:

1. Minor, informal complaints will be handled by staff as they arise and resolved as quickly and directly as possible and with as little formality as proper consideration of the complaint allows;
2. Written complaints, serious or unresolved complaints will be progressed to the Board for investigation and resolution;
3. Complaint trends and outcomes will be monitored by the Board as part of a process of continual improvement;
4. Residents and clients will be assisted and supported to make a complaint directly to the NDIS commission, upon request, especially if they are unsatisfied with HOPES' processes.

Requirements

The following strategies and actions are required to achieve goal 1 (Minor, informal complaints will be handled by staff as they arise and resolved as quickly as possible and with as little formality as proper consideration of the complaint allows);

- The process for making a complaint will be accessible and understood by all residents and clients and people with disability making a complaint will be offered support either from within HOPES or through an independent advocate;
- Staff members will acknowledge any legitimate concerns expressed by the resident and make appropriate restitution as quickly as possible;
- Any of our residents or clients with disability affected by the issues raised in the complaint will be included throughout the process to the extent possible;
- Staff members will display tolerance and professional objectivity in relation to complaints recognising the circumstances and antecedents likely to be involved;
- Where a resident makes numerous informal complaints that appear to out of proportion to incidents, the resident should be encouraged to make a more formal complaint in writing; and
- Where a resident is dissatisfied with the outcome of an informal complain they should be encouraged to make a more formal complaint in writing.

- 1. The following strategies and actions are required to achieve goal 2** (Written complaints, serious or unresolved complaints will be progressed to the Board for investigation and resolution)
- The process for making a complaint will be accessible and understood by all residents and clients and people with disability making a complaint will be offered support either from within HOPES or through an independent advocate;
 - Staff members will acknowledge any legitimate concerns expressed by the resident and make appropriate restitution as quickly as possible;
 - Any of our residents or clients with disability affected by the issues raised in the complaint will be included throughout the process to the extent possible;
 - Staff members will display tolerance and professional objectivity in relation to complaints recognising the circumstances and antecedents likely to be involved;
 - All complaints received will be formally acknowledged by the Board in writing;
 - Every effort will be made to resolve complaints within two weeks of the complaint being received by the Board;
 - Principles of procedural fairness (attachment 1) for all parties involved should be incorporated into the process, in proportion to the nature of the matter being dealt with and the possible consequences for those involved;
 - All responses to complaints will be provided in writing (in addition to any face to face feedback with the resident) to ensure consistency and completeness;
 - All complaints will be treated confidentially unless investigation of the complaint makes it impossible to respect the request for confidentiality
 - Clients will be entitled to involve an independent advocate if they wish to do so;

- All complaints will be investigated objectively and fairly to the satisfaction of the client and their independent advocate if the client chooses to involve an advocate;
- An investigating officer/s appointed by the Board may undertake investigations. This officer may be a member of the Board or an external authority according to the nature of the complaint;
- If the complaint refers to a member of the board, the Chair of the board will undertake investigations with the support of an external investigating officer if deemed necessary;
- If the complaint refers to the chair of the board, the deputy chair and another Board member will undertake investigations, with support of an external investigating officer if deemed necessary;
- Any allegation of illegal or criminal activity will be referred to the appropriate authority (such as the police) for investigation;
- The investigating officer/s will provide a written report to the Board;
- The Board has the authority to dismiss the complaint if it is satisfied that no professional misconduct or unsatisfactory professional conduct has occurred. The employee and the complainant will be informed of this decision by the Board in writing;
- If the complaint is found to be upheld, disciplinary or remedial processes will be instigated with the staff member on the recommendation of the board;
- The outcome of a complaint's investigation will be recorded in the files of both the client and of the employee concerned;
- Appropriate remedies to justified complaints will be undertaken quickly and efficiently with every effort made to restore good relationships between the employee and the client; and

- The complainant will be supported to refer their complaint to the NDIS commission if they are not satisfied with HOPES processes and management of their complaint.

3. The following strategies and actions are required to achieve goal 3 (Complaint trends and outcomes will be monitored by the Board as part of a process of continual improvement)

- All complaints will be documented, and a record kept of all complaints received and the actions taken;
- The Board will monitor complaints and their resolution on a regular basis through regular reports from the Chair;
- The Board will assess any trends associated with particular clients or members of staff or the board and seek to provide more sustained solutions;
- The Board and staff will build a culture that welcomes complaints as an opportunity for continuous improvement and safeguarding people with disability.

4. The following strategies and actions are required to achieve goal 4 (Residents and clients will be assisted and supported to make a complaint directly to the NDIS commission, upon request)

- Processes for making complaints to the NDIS Commission will be accessible to clients and families and given coverage in newsletters, websites, social media and residents meetings, posters in communal areas, and included in the information pack for new residents; and
- Residents will have access to a board member or independent advocate to assist them in making a complaint to the NDIS commission, upon request.

Responsibilities

Staff will be responsible for:

- Being familiar with and understanding the complaints management process and undertaking any required training required to ensure that they are familiar with and understand the complaints management process;
- Acknowledging any legitimate concerns expressed by a resident and making appropriate restitution as quickly as possible
- Displaying tolerance and professional objectivity in relation to complaints recognising the circumstances and antecedents likely to be involved
- Encouraging and facilitating residents to make formal complaints if the resident is dissatisfied with the outcome of informal complaints or if the resident has made numerous informal complaints
- Cooperating with any formal investigation process related to a complaint
- If the complaint is found to be upheld, cooperating and complying with any disciplinary or remedial processes determined by the Board
- Making every effort to restore good relationships with the resident following a complaint.
- Being familiar with processes for making a complaint to the NDIS commission and regularly reviewing this process with residents and their families.

The Board (and ultimately the Chair of the Board) will be responsible for:

- Being familiar with and understanding the complaints management process and undertaking any required training required to ensure that they are familiar with and understand the complaints management process;
- Formally acknowledging all formal complaints in writing;
- Resolving all complaints within two weeks of the complaint being received by the Board, unless there are reasons for this timeline to be extended;
- Providing all responses to complaints in writing (in addition to any face to face feedback with the resident) to ensure consistency and completeness;
- Treating all complaints confidentially unless the process of procedural fairness makes it impossible to honour a request for confidentiality properly (in which case the person making the complaint should be asked if they wish to pursue the complaint in these circumstances);
- Ensuring that residents or clients involve an independent advocate if they wish to do so;
- Ensuring that all complaints are investigated objectively and fairly to the satisfaction of the resident and their independent advocate if the resident chooses to involve an advocate;
- Appointing an investigating officer/s to undertake investigations. This officer may be a member of the Board or external;
- Receiving a report from the investigator and making a determination related to the complaint;
- Dismiss the complaint if it is satisfied that no professional misconduct or unsatisfactory professional conduct has occurred and informing the employee of this decision in writing;
- Instigating disciplinary or remedial processes with the staff member if the complaint is upheld;

- Making sure the outcome of the complaint and any action taken is recorded in the files of both the resident and of the employee concerned;
- Making sure that appropriate remedies to justified complaints are undertaken quickly and efficiently with every effort made to restore good relationships between the employee and the resident;
- Being familiar with and assisting any resident, client or family to make a complaint to the NDIS commission upon request;
- Regularly reviewing complaints to identify any systemic issues and identifying opportunities for HOPES to continuously improve its services; and
- Strengthening a culture of continuous improvement and safeguarding our residents and clients through a robust complaints management system.

Attachment 1

National Disability Insurance Scheme (Procedural Fairness) Guidelines 2018 (exert)

7 An outline of procedural fairness

(1) As part of the handling of a complaint under the Complaint Rules, procedural fairness must be afforded to a person if their rights or interests may be adversely or detrimentally affected in a direct and specific way. In those circumstances -

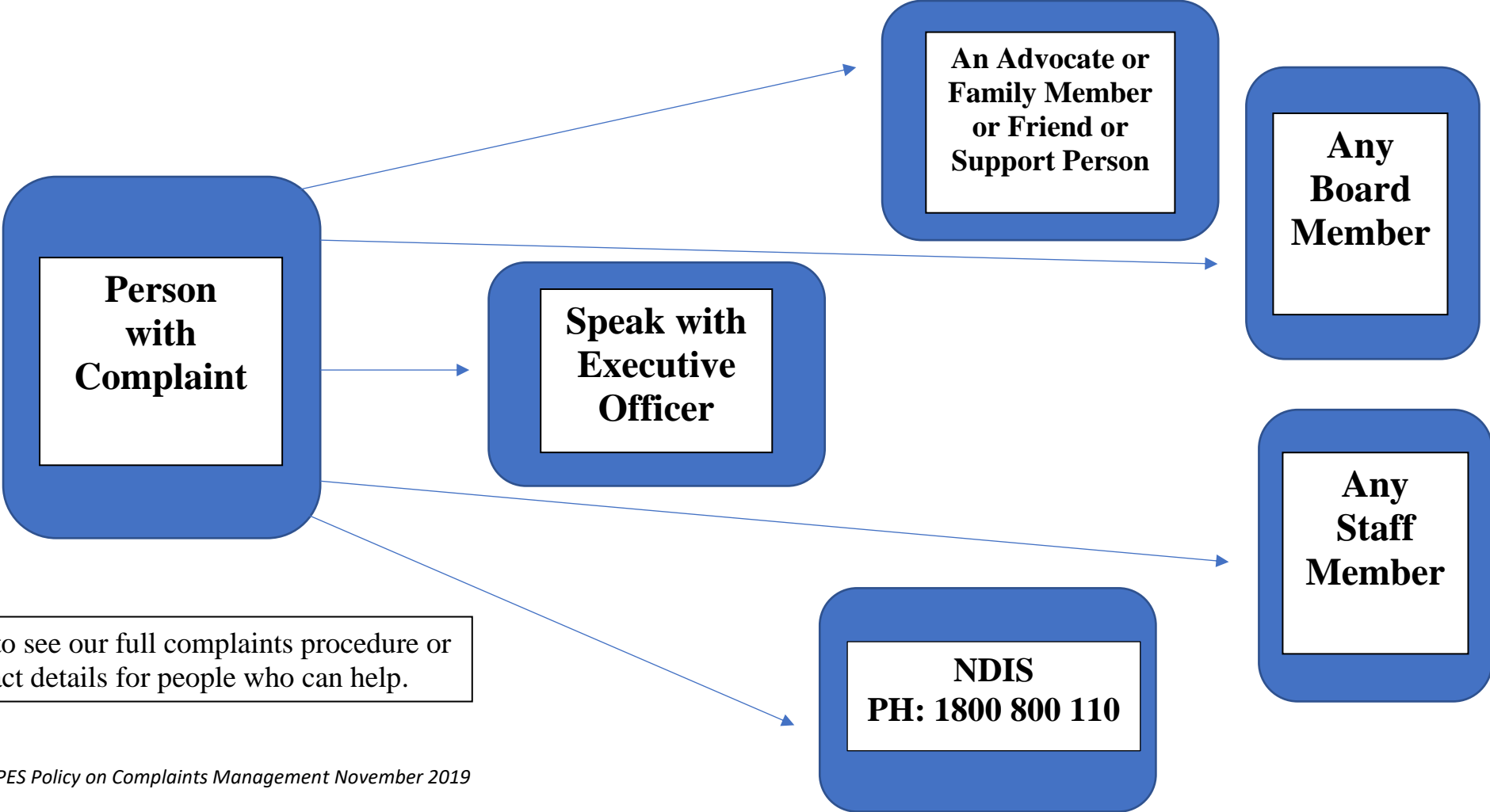
1. (a) the person must be given notice of each prejudicial matter that may be considered against them;
2. (b) the person must be given a reasonable opportunity to be heard on those matters before adverse action is taken, and to put forward information and submissions in support of an outcome that is favourable to their interests;
3. (c) the decision to take adverse action should be soundly based on the facts and issues that were raised during that process, and this should be apparent in the record of the decision, and
4. (d) the decision maker should be unbiased and maintain an unbiased appearance.

(2.) The precise requirements of procedural fairness can vary from one situation to another. The required steps can vary according to:

1. (a) the nature of the matter being dealt with;
2. (b) the options for resolving it;
3. (c) the timeframe for resolution;
4. (d) whether facts in issue are in dispute;
5. (e) the gravity of possible findings that may be reached; and
6. (f) the sanctions that could be imposed based on those findings.

- (3) Sometimes a quick, informal and consultative procedure will be sufficient – but on other occasions procedural fairness may require a more formal, structured or arms-length procedure. A more formal procedure may be required if a complaint involves direct criticism of or an allegation against a worker, or consideration is being given to imposing a sanction on an NDIS provider or worker. Even in those situations, procedural fairness does not preclude the adoption initially of an informal and consultative process that can become more formal at the request of a party or if circumstances require. A transparent procedure should be adopted that ensures that any person whose interests may be directly and adversely affected by a complaint process is given the opportunity to have their views heard and considered in a fair and impartial manner.
- 4) The obligation to provide procedural fairness must be balanced against the need to ensure that neither a complainant (including a person with disability) nor a person with disability affected by an issue raised in a complaint is disadvantaged as a result of the complaint being made and resolved. The steps adopted to ensure procedural fairness in any situation must be tailored to ensure that disadvantage is not suffered by the complainant or person with disability.
- (5) Procedures developed by a registered NDIS provider as part of its complaints management and resolutions system must take into account the elements of, and approach to, procedural fairness described in this instrument.

If you have a complaint the best person to speak with *first* is the Exec officer of HOPES Inc.
If you don't wish to speak with Executive Officer alone – ask a family member, friend or support person to accompany you.
If you prefer not to speak with Executive Officer or the complaint involves the Executive Officer – then you can speak with any Board Member or a member of Staff or NDIS or an Advocate.



Ask to see our full complaints procedure or contact details for people who can help.