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## 6.1 FEEDBACK AND COMPLAINTS GUIDE

### 6.1.1 CONSUMER OUTCOME<sup>1</sup>

*"I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints; and appropriate action is taken."*

### 6.1.2 ORGANISATION STATEMENT<sup>2</sup>

Regular input and feedback from consumers, carers, the workforce and others, is sought and used to inform individual and organisation-wide Continuous Improvements.

### 6.1.3 OUR POLICY<sup>3</sup>

CHNC:

- Encourages and supports consumers, family, friends, carers and others to provide feedback and make complaints.
- Ensures consumers are made aware of and have access to advocates, language services and other methods of raising and resolving complaints.
- Ensures appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.
- Reviews feedback and complaints and uses them to improve the quality of care and services.

### 6.1.4 RESPONSIBILITIES

- Management develop, maintain, promote and monitor processes and procedures that ensure that consumers are encouraged and supported to make complaints and provide feedback and that these are effectively responded to. Open disclosure is the basis of our approach to managing complaints and feedback.
- Staff follow policies and procedures, participate in development opportunities and encourage and support consumers in making complaints, providing feedback and resolving issues. Staff utilise complaints and feedback to identify ways to improve care and services.
- Consumers and/or their representatives make complaints and provide feedback whenever they feel it is necessary and advise management if they feel they are not encouraged or supported to do so.

### 6.1.5 MONITORING THE COMPLAINTS AND CONSUMER FEEDBACK PROCESS

Feedback and complaints processes and systems are regularly audited as part of our audit program and staff, consumers and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made (see [Corporate Calendar](#) in Forms/Governance Documents and 8.9 Continuous Improvement).

<sup>1</sup> Australian Government Aged Care Quality and Safety Commission, [Guidance and resources for providers to support the Aged Care Quality Standards](#) (September 2022). Website accessed May 2023

<sup>2</sup> Ibid., p.104. Note that Ibid means 'in the same source last referenced in the footnote above.'

<sup>3</sup> Ibid., p.104.

## 6.2 CONSUMER COMPLAINTS

Consumers (including family, friends and others) are encouraged to express their complaints to enable us to improve the quality of our support. We utilise the [Better Practice Guide to Complaints Handling in Aged Care Services](#)<sup>4</sup> to guide our management of complaints and to ensure staff understand the complaints process from the consumers' perspective.

We have also adopted the Australian Open Disclosure Framework<sup>5</sup> principles and processes to support the effective and inclusive management of complaints (including complaints that may be a result of an adverse event or incident related to care and services).

Consumers are made aware of their right to complain and are encouraged to make a complaint if they are not happy with CHNC. This is explained to consumers at service commencement, at reviews, when they wish to make a complaint and whenever appropriate, including at meetings with consumers and representatives. Information on consumers' right to complain without fear of retribution, the complaints process and their right to use an advocate in making a complaint, is included in the Consumer Handbook.<sup>6</sup>

We provide to all our consumers the Aged Care Quality and Safety Commission brochure; "Do you have a concern?"<sup>6</sup>, in a range of languages and offer assistance if they wish to make a complaint and provide information and assistance on advocates.

Consumers can expect complaints to be dealt with fairly, with transparency and promptly and for staff to take steps to ensure that consumers feel comfortable to continue receiving services after making a complaint.

All complaints are reviewed by the Management Committee to identify improvements to services and processes that underpin all our services and operations (see 8.9.6 Continuous Improvement Forms/Consumer complaint form). Our complaints handling approach reflects our vision, objectives and philosophy outlined in Section 8: Organisational Governance.

All staff involved with consumers receive information on their responsibility to encourage and support consumers to make complaints and to support them through the complaints process.

Consumers are encouraged to talk to us before raising a complaint with an external complaint agency, but consumers can choose to raise their complaint with an external agency at any time and with our assistance if they like. Details of external complaints agencies are detailed in 6.4 Advocates.

### 6.2.1 OPEN DISCLOSURE AND OTHER PRINCIPLES IN MANAGING COMPLAINTS

CHNC adopts the Open Disclosure Principles and the principles from the Aged Care Quality and Safety Commission, in managing complaints<sup>7</sup>.

#### Open disclosure meetings

If an open disclosure meeting is to be held (where an adverse event may have occurred with harm or potential harm to consumers is evident), the Manager will prepare and conduct the meeting/s with the consumer/representative with consideration to the above principles. This includes the following:

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<sup>4</sup> Australian Government Aged Care Complaints Commissioner [Better Practice Guide to Complaint Handling in Aged Care Services](#) Updated March 2021, Website accessed January 2023

<sup>5</sup> Australian Commission on Safety and Quality in Health Care [Australian Open Disclosure Framework](#) 2014 Website accessed January 2023

<sup>6</sup> Australian Government Aged Care Quality and Safety Commission [Resource Library](#)

<sup>7</sup> Australian Government Aged Care Complaints Commissioner [Better Practice Guide to Complaint Handling in Aged Care Services](#) Updated March 2021, Website accessed January 2023

### Be open and timely

If things go wrong in the provision of care and services to a consumer (including adverse events or incidents) we communicate and provide timely information in a timely, open and honest manner. We provide ongoing information until the complaint or issue is resolved.

### Acknowledge

The person managing the complaint will:

- Acknowledge all complaints quickly
- Repeat what you have heard in your own words. This creates a shared understanding and establishes empathy.
- Express regret using the words 'I/we are sorry', but do not admit liability or apportion blame.
- Tell the complainant what happens next with their complaint and provide contact details for the staff member handling the complaint.
- Reassure all parties that confidentiality is respected.
- Give an estimate of how long the process may take.
- Invite those involved to participate in the resolution process; engage the consumer.
- Complaints that are straightforward with low risk can be resolved on first contact.

### Assess

- Assess the complaint and prioritise against other complaints the service is handling.
- Clarify the concerns and issues raised by the complainant.
- Determine the level of risk to the consumer, other consumers and the service.
- Ask the consumer and complainant how they would like to see the complaint resolved.
- Show a positive, professional attitude and thank the complainant for bringing the matter to your attention.
- Plan (if required)
  - Consider the best way to resolve the complaint (e.g. conciliation with the complainant or investigation).
  - Prepare a short-written plan of how the complaint is to be managed and any information to be collected.
  - Focus attention on the issue to be investigated.
  - Remain flexible and adjust as required
  - Investigate (if required)
    - Gather relevant information to resolve the complaint.
    - A fair investigation is impartial, confidential, transparent and timely.
    - Keep written notes of discussions.
    - Allow complainants to present their point of view.

An effective complaint handling process is fair, accessible, responsive, efficient and contributes to ongoing quality improvement in service delivery.

### Respond

- Apologise using the words 'I/we are sorry'. It can improve your relationship with the complainant.
- Respond to the complainant with a clear decision and explain your reason for the decision.
- Written responses may be more suitable for complex matters.
- Communicate outcomes promptly.

- Recognise that it may take several meetings to come to resolution.

**Follow up**

- Check if complainant is satisfied with the resolution.
- Ask complainants for feedback.
- Outline alternative options available to the complainant.
- Reviews should be carried out by staff who have not been previously involved.
- Complaints are evaluated and discussed at the relevant committee e.g. Clinical Governance Committee (with consideration to confidentiality).

**Consider**

- Evaluate the outcome for the complainant; ask yourself/the team (and document):
  - Are there issues or problems which could be repeated?
  - Was there a delay in resolving the complaint?
  - Can procedures and policies be reviewed to improve the complaints process?

Regular contact with the complainant should be maintained throughout the process. It is important to keep the complainant informed if their issue is taking longer to resolve than first advised.

For specific details on how complaints are managed see Table 6.2.1 Complaints Management Process. See also 1.4.5 Consumer Communication.

**6.2.2 PROCESS FOR MANAGING COMPLAINTS**

**Table 6.2.1 Complaints Management Process**

Step	Timeline
1. A complaint is received via support staff or directly from a consumer/representative via letter, email, face to face or telephone. 2. In face to face or telephone contact the person receiving the complaint encourages the person and assures them it is OK to make the complaint, that it is taken seriously and that it helps us improve our care and services. With written complaints the consumer is contacted by telephone or face to face.	On day complaint is received
3. A Consumer Complaint Form is created by the person receiving the complaint and the complaint is reported to the Aged Care Programs Coordinator and Manager. 4. If the complaint involves a SIRS reportable incident, the staff report to their Manager/Director of Care who will alert the Manager as appropriate. The incident is dealt with as per the procedures in 8.10.9 SIRS Incident Management. The following steps do not apply in this case.	
5. The complaint is reviewed by the Aged Care Programs Coordinator and relevant information and proposed action is recorded.	Within 2 working days of receipt of complaint
6. The Aged Care Programs Coordinator contacts (by telephone or letter) the consumer to advise: <ul style="list-style-type: none"> <li>○ the complaint is being assessed</li> <li>○ the process that is followed including confidentiality</li> <li>○ the timeline</li> <li>○ their right to an advocate and advocacy agency support (see 6.4 Advocates)</li> <li>○ who their contact person is and details on how to contact them</li> <li>○ when they will be contacted again.</li> </ul>	Within 2 working days of receipt of complaint

Step	Timeline
7. The Aged Care Programs Coordinator forwards the complaint to the Manager.	Within 5 working days of receipt of complaint
8. The Manager reviews the complaint and decides the action to be taken and who takes it and a plan for resolution.	Within 10 working days of receipt of complaint
9. The Manager updates the President on complaint progress (serious complaints).	
10. The Manager is updated about the progress to action the complaint and the proposed action/plan is agreed. Investigation principles include impartiality, confidentiality, transparency and timeliness. Meetings are held with the complainant if necessary.	Within 15 working days of receipt of complaint
11. Action is carried out including providing an apology to the complainant. Person/s affected by the complaint are fully informed of all facts and given the opportunity to provide further information and contribute to the solutions.	
12. The consumer is advised of the actions taken to address the issues raised and the outcome of the complaint in a letter.	
13. If the consumer is not satisfied with the outcome, they are advised of the complaints appeal process (see 6.4 Advocates).	
14. If the consumer wishes to appeal, the complaint is reviewed by the Manager, whose decision is final.	Within 25 working days of receipt of complaint
15. The consumer is advised of the Manager's decision and of their option to go to an advocacy agency (see 6.4 Advocates).	
16. When the complaint is finalised, a staff person is identified by Aged Care Programs Coordinator to make sure that the consumer feels comfortable to continue accessing the service and to obtain feedback on the complaints procedure	
17. The complaint is closed out following evaluation of the complaint. Evaluation includes the accessibility of the complaints process for the consumer, documentation of the actions taken, the satisfaction of the complainant with the outcome and validation that appropriate education, training and staff support processes have been implemented to prevent the issue recurring.	

### 6.2.3 DISPUTES BETWEEN CONSUMERS AND SUPPORT STAFF

CHNC support staff are required to report immediately to the Aged Care Programs Coordinator any dispute with consumers, regardless of how small. Disputes are reported verbally in the first instance. The Aged Care Programs Coordinator then decides:

- Whether the consumer should be contacted
- If a written report is required
- The format of the report
- Any other action to resolve the dispute as early as possible.

The Aged Care Programs Coordinator may offer the consumer the opportunity to make a formal complaint. If the consumer accepts this offer the Aged Care Programs Coordinator completes a Consumer Complaint Form with them and the complaints process is followed.

### 6.2.4 PEOPLE WITH SPECIAL NEEDS

Where consumers may have special needs, such as people from culturally and linguistically diverse (CALD) backgrounds or Aboriginal and Torres Strait Islander people, the staff ensure that any cultural aspects are considered when reviewing a complaint or dispute and ensures the person feels comfortable in discussing a dispute. The presence of a family member or friend may be required. An independent interpreter is offered if the consumer is not proficient in English.

Where we can, we use the resources on the Aged Care Quality and Safety Commission website<sup>8</sup> to provide information in simple language or in the language of the consumer.

We also ensure that any actions, interventions or referrals are appropriate to people from special needs groups. This may require the involvement of organisations with expertise in special needs groups either in providing advice or assisting in actions.

### 6.2.5 USE OF AN ADVOCATE

Consumers are advised in the Consumer Handbook and verbally at the time they indicate they have a complaint that they can use an advocate or external agency at any point in the complaint process or if they feel their feedback or complaint was not satisfactorily resolved. We provide the consumer the contact details of OPAN.

Agencies that consumers can lodge a complaint with or provide advocacy services are detailed in 6.4: Advocates.

### 6.2.6 CONFIDENTIALITY OF COMPLAINTS AND DISPUTES

As far as possible, the fact that a consumer has lodged a complaint and the details of that complaint are kept confidential amongst staff directly concerned with its resolution. The consumer's permission is obtained prior to any information being given to other parties that it may be desirable to involve to satisfactorily resolve the complaint or dispute. Complaints that are sensitive in nature are managed by the appropriate Manager.

### 6.2.7 WORKING WITH EXTERNAL COMPLAINTS AGENCIES

If we receive a request to provide information or input from an external complaints/advocacy agency we provide relevant information as requested with consideration to privacy. Information provided to external agencies is documented in a complaint form, detailing the information provided and any relevant documentation and filed by the Manager after review by the President. If we are provided with a direction from the Aged Care Quality and Safety Commission, we follow that direction and keep a record of the actions taken on the complaint form/file.

Information on contact details for external complaints or support agencies is included in 6.4 Advocates.

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<sup>8</sup> Australian Government Aged Care Quality and Safety Commission [Website](#) Accessed September 2020



## 6.3 CONSUMER FEEDBACK

Feedback can be positive and negative. Negative feedback is defined as minor dissatisfaction or a minor issue that can be easily resolved and/or the consumer does not want to make a formal complaint. For example, feedback on an occasion of late service provision or dissatisfaction with a provided meal. Positive feedback is a compliment or praise regarding service delivery, staff or the organisation. Feedback can be formal or informal.

All feedback and its importance is acknowledged and the provider is thanked for providing it.

### 6.3.1 FORMAL FEEDBACK

Formal feedback is given with the intention of providing feedback such as a consumer completing a Tell Us What You Think form or specifically informing a staff person about their dissatisfaction with services or care.

When feedback is not written on a Tell Us What You Think form the staff person receiving it completes a form and attaches any documentation. The procedure outlined in 8.9.6 Continuous Improvement Forms/Tell Us What You Think Form is followed.

### 6.3.2 INFORMAL FEEDBACK

Informal feedback is made in the course of interaction, for example, a consumer mentioning to the bus driver that the outing location was unsatisfactory or general dissatisfaction with care or services.

Informal feedback is recorded by the staff person on a Tell Us What You Think form. The procedure is outlined in 8.9 Continuous Improvement (see 8.9.6 Continuous Improvement Forms/ Tell Us What You Think Form.)

## 6.4 ADVOCATES

### 6.4.1 USE OF ADVOCATES

Consumers have a right to use an advocate of their choice to negotiate on their behalf. This may be a family member, friend or advocacy service.

Advocates are accepted by CHNC as representing the interests of the consumer.

Information on the use of an advocate is included in the Consumer Handbook and is explained at entry to the service, assessments and reviews; our organisation reiterates to the consumer/ representative the local advocacy services available and respect the consumer's choice of advocate. We also recognise that consumers may choose a family member, friend or other person to advocate on their behalf.

Staff ensure consumers are aware of their right to use an advocate, and remind them of this option whenever appropriate including if a complaint is lodged.

### 6.4.2 WHAT IS AN ADVOCATE?

An advocate is a person who, with the authority of the consumer, represents the consumer's interests.

Advocates may be used during assessments, reviews, complaints, open disclosure meetings or for any other communication between the consumer and CHNC.

### 6.4.3 APPOINTING AN ADVOCATE

Consumers wishing to appoint an advocate inform our organisation in writing of the name of the person they wish for their advocate using the Authority to Act as an Advocate form.

Consumers can change their advocate at any time and inform us in writing using an Authority to Act as an Advocate form. If a consumer has difficulty in completing the form due to language or literacy, our staff assist them or refer them to an advocacy agency to assist. Our organisation assists and supports people with special needs to access an advocate of their choice by providing whatever support is required.

Completed authority forms are kept in the consumer's record and noted in the Consumer Management System.

### 6.4.4 GUIDELINES FOR ADVOCATES

Guidelines for advocates are detailed in the Authority to Act as an Advocate form; this is given to the consumer and explained to them if they wish to appoint an advocate.

### 6.4.5 ADVOCACY AND COMPLAINTS INVESTIGATION CONTACTS

Services that may advocate on behalf of consumers (depending on the issue) or provide advocacy support to consumers are shown in Table 6.4.1 Advocacy and Complaints Investigation Contacts.

**Table 6.4.1 Advocacy and Complaints Investigation Contacts**

Agency	Contact details
<b>National</b>	
<b>Aged Care Quality and Safety Commission</b> GPO Box 9819 In your Capital City 9.00 am-5.00 pm weekdays.	Ph: 1800 951 822 Web: <a href="#">Online Complaints Form</a> Email: <a href="mailto:info@agedcarequality.gov.au">info@agedcarequality.gov.au</a>
<b>National Aged Care Advocacy Line</b> and <b>Older Person's Advocacy Service (OPAN)</b>	Ph: 1800 700 600 Web: <a href="https://opan.com.au">https://opan.com.au</a>
<b>New South Wales</b>	
<b>Seniors Rights Service</b>	Ph: 1800 424 079 Web: <a href="https://seniorsrightsservice.org.au/">https://seniorsrightsservice.org.au/</a> Address: Level 4/418A Elizabeth St, Surry Hills NSW 2010
<b>Carers NSW</b>	Ph: 1800 422 737 or 02 9280 4744 (9am to 5pm Monday to Friday). Web: <a href="http://www.carersnsw.org.au">http://www.carersnsw.org.au</a> Email: <a href="mailto:contact@carersnsw.org.au">contact@carersnsw.org.au</a> Address: Level 10 / 213 Miller Street North Sydney NSW 2060