

Record of Review

Review Date	Led by	People consulted
1/07/2022	Operations Director	All Staff Operations Leadership Team Board

Legislation

- ≡ Privacy Act 1988 (Cth)
- ≡ Ombudsman Act 1974
- ≡ National Disability Insurance Scheme Act 2013

Reference

- ≡ NDIS Quality and Safeguards Commission – Effective Complaint Handling Guidelines for Providers

Why is this policy important?

Everyday Independence is committed to the rights of all stakeholders to provide feedback about any aspect of the operations or administration, and for any feedback in the form of a complaint to be handled with fairness.

Everyday Independence encourages an organisational culture of actively seeking customer feedback to strengthen public confidence, better inform planning and continually improve programs and services.

Our Legislative Requirements

We are required to operate a complaints system which complies with the Disability Act 2006, Privacy Act 1988 and NDIS Quality and Safeguards Commission Standards.

What is the scope of this policy?

1. Participants or their family who has a complaint has the right to raise the complaint and expect that every effort will be made to resolve it in accordance with this policy, without prejudice or fear of reprisal or victimization.
2. All complaints are managed fairly, equitably and as efficiently as possible. It will encourage the parties to approach the complaint with an open mind and to resolve problems through discussion and conciliation. Where a complaint cannot be resolved through discussion and conciliation, Everyday

Independence acknowledges the need of an independent person to mediate between the parties. The parties will be given the opportunity to formally present their case to the independent person.

3. Confidentiality is to be maintained throughout the process of making and resolving complaints. Everyday Independence seeks to protect the rights and privacy of those involved and to facilitate the return to an amicable and productive environment.
4. Participants, parents and guardians may raise any matters of concern relating to health, wellbeing or safety of their child or themselves, as well as the program and operational aspects, as well as other serious issues which may arise.
5. All feedback is handled at the appropriate staff level per complexity. Less serious issues will be dealt with on a day to day basis by the therapist or direct Supervisor, in consultation with the team leader or Director.
6. When handling complaints and feedback, each staff member and volunteer will:
 - a. Consider situations from all perspectives and respond in a manner which promotes an environment conducive to collaborative problem solving.
 - b. Ensure the person making the complaint is aware of our process and is supported to make the complaint this may include providing a support person or an advocate.
 - c. Resolve, where possible, complaints to the mutual satisfaction of those involved.
 - d. Use fairness and equity when dealing with disputes, complaints and complainants.
 - e. Comply with all legislative and statutory requirements.
 - f. Keep confidential, where practicable, the information provided by any person involved with a complaint.
 - g. take all reasonable steps to ensure that a person with a disability, the person who made the complaint and any person on whose behalf the complaint was made, is not adversely affected because a complaint has been made.
 - h. Ensure the person making the complaint is aware of the opportunity to escalate the complaint to the NDIS if needed.

How to Translate this Policy into Practice

Responsibilities

Everyday Independence Board is responsible for ensuring:

- ≡ that the Complaints and Grievance process is understood and followed by staff and contractors.
- ≡ contact details of external bodies for the handling of complaints is available, such as NDIA, DHHS or Ombudsman.
- ≡ this policy and procedure is easily accessible to staff, participants, parents and carers.
- ≡ That contact details of an Everyday Independence Director in the event of a complaint are made available in the participant service agreement
- ≡ That complaints are reported to the board in a transparent manner and that complaints are reviewed on a regular basis
- ≡ That specific details of complaints made to NDIS are immediately escalated to the managing director / CEO

- That complaints relating to a Director or escalated from service users, staff or stakeholders are responded to

Everyday Independence Staff and Contractors are responsible for:

- Ensuring all participants have the opportunity to provide feedback and to treat all complaints seriously and as an opportunity for improvement
- Assisting participants to resolve complaints to the best of their ability
- Informing the complainant of the Complaints Policy and Procedure.
- Complying with Everyday Independence Privacy Policy in regards to all meetings, discussions or negotiations in relation to the complaint.
- Standing aside from participation in the management of the complaint if personally involved or there is a conflict of interest.
- Reporting complaints as per our process

Grievance Methods

The Concerns and Complaints process will be provided over a wide variety of communication mediums and be easily accessible for customers. Common ways will be Customer Feedback Forms, Incident Report Form, email, and typed or written letter.

For those with communication difficulties, Everyday Independence supports the following methods:

- Use of visual techniques to lodge a complaint (e.g. video)
- Via an advocate or staff member
- Or use of any other form they find necessary that will help them lodge a complaint and be understood.
- Toll-free or local call facilities for making complaints.
- Special arrangements and/or support available for complainants with specific needs (including availability of interpreters and cross-culturally trained staff).

Complaints Procedure

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.
- ≡ Ensure the complaint is kept strictly confidential.
- ≡ Endeavour to find a solution to the concern, if possible. The complainant is to be notified of any decisions made and strategies taken regarding the resolution of the complaint within 5 working days. The decision is to be recorded (in Lumary)
- ≡ Ensure all parties talk it over in a calm and sensible way.
- ≡ Encourage (and assist if necessary) in relating the complaint in writing.
- ≡ If complaint needs to be escalated, inform the direct Supervisor. Serious complaints that require escalation include:
 - ≡ Staff or volunteer conduct.
 - ≡ Participant or staff serious injury
 - ≡ An alleged breach of:
 - A participant's right or responsibility
 - Duty of Care
 - Participant or staff safety
 - Privacy and Confidentiality.
 - An alleged incident of harassment or sexual abuse

Record and report the complaint on an Incident Report Form on Lumary. Seek advice from managing director re the NDIS reporting obligations.

Written Feedback or Complaint

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

- ≡ The complaint is offered a copy of How to Make a Complaint Information Handout.
- ≡ 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.
- ≡ An incident report – in client journal section, is made in Lumary.

Management Procedure


Receive the complaint in writing (the staff member to complete a complaint journal in Lumary). The following should be in the initial written complaint:

1. description of the complaint
2. state whether the complainant wishes to verbally present their case.
3. steps they have taken to deal with the complaint.
4. what they would like to happen to fix the problem and prevent it from happening again.
5. The level of the complaint is determined.

6. For serious complaints, the management representative contacts the complainant within 24 hours (or 3 working days for routine complaints) to notify them that the complaint has been received and to discuss the concern or complaint. Any additional details (including this follow-up contact) are recorded on the Incident Report Form. The person making the complaint should be asked for their suggested solution to the problem, although the outcome cannot be guaranteed.
7. If desired or required, a meeting can be organised. This meeting will comprise of the Management representative and the complainant. The complainant may also have a support person or advocate.
8. If the concern or complaint involves another party, this person(s) is to be contacted to discuss the issue as soon as possible (within 2 working days of the initial complaint).
9. The management representative will contact the complainant, outlining any decisions reached and / or actions the organisation has taken, or will take, in response to the complaint. This will occur within 10 working days and will also be placed in writing. A copy of this will be attached to the Incident Report Form.
10. A report is completed (incident report - in Lumary. This can be added in the – . This can be added by following the steps below:

When related to a client:

1. Go to client's files.
2. Go to the *Assessments* tab.
3. Click *New* to the right of *Incident Management*
4. Choose *Complaint*
5. Fill out the form and click *Save*.



When the complaint is not related to a particular client *use 'No Client - Non-billable' record*. (This record has been set up to record any non-client-related non-billable service delivery entries but could also be used for non-client-related complaints.)

These complaints can be gathered in a report and we can use them to address the root cause.

- ≡ Details of the event, incident or complaint
- ≡ The name of the person who initially made the complaint.

- ≧ If relevant, the name of the participant or child concerned and their condition, including where available, a medical or incident report
- ≧ Any other relevant information
- ≧ Contact details of the Management representative.
- ≧ Contact the relevant authorities as required by legislation and funding requirements.
- ≧ If the complainant is not satisfied with the outcome or process of their complaint, the issue will be elevated to the next level of Management or the Chair of Everyday Independence Board.
- ≧ If a solution cannot be reached, a mediator / counsellor may be arranged with both parties, at the discretion of the Board.
- ≧ Any relevant policy or procedure is to be updated within 4 weeks of the outcome.
- ≧ All documentation relating to the complaint/ complaints / appeals will be archived on supportability for audit purposes.

Management must ensure the complaint is kept strictly confidential, including all records wherever possible.

Complaints Involving Staff Members

Complaints involving staff members, excluding the Managing Director should be forwarded to the Managing Director who will coordinate a response to the complaint in conjunction with the staff member's supervisor.

Staff are to be kept informed at all times about any service user complaint involving them.

Complaints by service users about staff will not be seen as negative comments about the staff, but as comments on the service provided by the organisation. Staff play a vital role in supporting service users to complain and will not be penalised for doing so. Staff will be positively recognised for advocating on behalf of a service user, including when the service user makes a complaint. Staff will not be penalised as a result of a service user complaint unless malpractice has occurred.

Responding to the complaint may involve:

- ≧ Investigating the complaint and providing the staff member with an opportunity to respond to issues raised.
- ≧ Attempting to mediate the dispute (if appropriate) and/or attempt to resolve the matter
- ≧ Taking further action necessary to resolve the issue (e.g. external mediation and dispute resolution services)
- ≧ Any disciplinary action against a staff member arising from a complaint will be taken in accordance with the Performance and Development Policy, and

Complaints Involving a Director

Complaints concerning a Director or a member of a Board subcommittee should be referred to the Board Chair. The Chair, or an approved delegate, will attempt to resolve the issue to the satisfaction of the complainant. Where the Chair is the subject of a complaint, the complaint should be referred to another member of the Board.

A response to the complaint may involve:

- Investigating the complaint and providing the Board Director or member of a Board subcommittee with an opportunity to respond to issues raised.
- Attempting to mediate the dispute (if appropriate) and/or attempt to resolve the matter to the satisfaction of the outside party.
- Take further action necessary to resolve the issue (e.g. external mediation and dispute resolution services).
- Raising the complaint at a Board meeting to determine a suitable course of action to resolve the issue, if appropriate.

Fact Sheets

We want to support people to be fully in control and to fully participate in decisions about them. We provide the person using our service with a range of fact sheets (available in easy English format) including:

- About Everyday Independence
- How to make a complaint
- Keeping Appointments
- How to make a complaint about a provider - <https://www.ndiscommission.gov.au/about/complaints>

Reporting

A complaints and grievance report is provided to the Executive Team monthly and Board on a monthly basis.

This report provides an overview of complaints and the status of the complaint.

This information is used to determine the status of each complaint and to also assess and trends within the complaints that would lead to new procedures or staff training.

Strategies to monitor compliance with this policy

- All staff are made aware of their obligations.
- Complaints and Grievances is a standing agenda item on all site staff meetings, Leadership Impact Team Meetings and Board meetings.
- All incident reports are documented in the Executive Team meetings.

Related Documents or Legislation

- Privacy Policy
- Incident Management Policy
- Delegations Policy