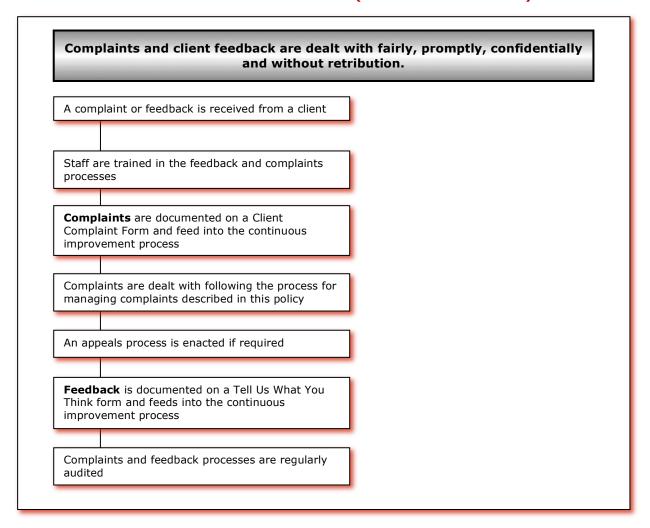


COMPLAINTS AND CLIENT FEEDBACK (INTERNAL POLICY)



16.1 Client Complaints

A complaint is serious dissatisfaction with some aspect of Rubies Nursing service provision. Clients are encouraged to express their complaints to enable us to improve the quality of our support. Rubies Nursing inform participants the right to make a complaint (where relevant) to the Ombudsman about the provision of services under the Community Services (Complaints, Review and Monitoring) Act 1993 (NSW).

Clients are made aware, of their right to complain without fear of retribution, the complaints process and their right to use an advocate in making a complaint. This information is explained to clients at the time of assessment and review.

Clients can expect complaints to be dealt with fairly, with transparency and promptly and for staff to take steps to ensure that clients feel comfortable to continue accessing the service after making a complaint.

All feedback is used to improve our service delivery and forms part of our continuous improvement processes which underpin all of our services and operations. Our complaints handling approach reflects our vision, objectives and philosophy outlined in our Corporate Governance.

16.1.1 PROCESS FOR MANAGING COMPLAINTS

Step		Timeline
1.	A complaint is received via a Disability Support Worker or directly from a client/representative via letter, email, face to face or telephone.	On day complaint is received
2.	A <u>Client Complaint Form</u> is created by the person receiving the complaint and the complaint is reported to their Team Leader	
3.	The complaint is reviewed by the Team Leader and relevant information and proposed action is recorded	Within 2 working days of receipt of complaint
4.	The Team Leader contacts (by telephone or letter) the client to advise: the complaint is being assessed the process that is followed including confidentiality the timeline their right to an advocate and advocacy agency support who their contact person is and details on how to contact them and when they will be contacted again.	Within 4 working days of receipt of complaint
5.	The Team Leader forwards the complaint to the Coordinator	Within 5 working days of receipt of complaint
6.	The Coordinator 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
7.	The Coordinator forwards the complaint to the Manager	
8.	The Manager is updated about the progress to action the complaint at the next Manager Coordinator Meeting and the proposed action/plan is agreed. Investigation principles include: impartiality, confidentiality, transparency and timeliness.	Within 15 working days of receipt of complaint
9.	Action is carried out including providing an apology to the complainant if appropriate. 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	
10.	The client is advised of the actions taken to address the issues raised and the outcome of the complaint in a letter	
11.	If the client is not satisfied with the outcome they are advised of the complaints appeal process.	
12.	If the client wishes to appeal, the complaint is reviewed by the	Within 25 working days of receipt of

Step		Timeline
	Manager, whose decision is final	complaint
13.	The client is advised of the Manager's decision and of their option to go to an advocacy agency. These include: NSW or ACT Human Rights Commission; NSW or ACT Disability and Community Service Commission; NDIA; NSW or ACT Ombudsman and Office of Quality, Complaints and Regulation.	
14.	When the complaint is finalised a staff person is identified by the Team Leader and/or Coordinator to make sure that the client feels comfortable to continue accessing the service and to obtain feedback on the complaints procedure. The complaint is then closed out.	

16.1.2 EXTERNAL COMPLAINTS

If a client chooses to complain to an external agency they are free to do so and our organisation will support them as required.

16.2 Client 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 client 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.

16.2.1 FORMAL FEEDBACK

Formal feedback is given with the intention of providing feedback such as a client completing a <u>Tell Us What You Think</u> form or specifically informing a staff person about their dissatisfaction with day centre activities.

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 Tell Us What You Think Form is followed.

16.2.2 INFORMAL FEEDBACK

Informal feedback is made in the course of interaction, for example, a client quipping to the bus driver that the outing location was unsatisfactory.

Informal feedback is recorded by the staff person on a Tell Us What You Think form. The procedure outlined in Tell Us What You Think Form is followed.

16.2.3 DISPUTES BETWEEN CLIENTS AND SUPPORT WORKERS

Rubies Nursing Support Workers are required to report immediately to their Team Leader any dispute with clients, regardless of how small. Disputes are reported verbally in the first instance. All our staff are trained to handle specific complains in a certain way. The Team Leader then decides:

- Whether the client 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 Team Leader may offer the client the opportunity to make a formal complaint. If the client accepts this offer the Team Leader completes a <u>Client Complaint Form</u> with them and the complaints process is followed.

16.2.4 USE OF AN ADVOCATE AND

Clients are advised that they can use an advocate at any point in the feedback or complaints process or if they feel their feedback or complaint was not satisfactorily resolved. They are also advised of relevant agencies and contact details.

16.3 People with Special Needs

Where clients may have special needs, such as people from culturally and linguistically diverse (CALD) backgrounds or Aboriginal and Torres Strait Islander people, the Team Leader and Coordinator 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 or the support of an interpreter may be required.

The Team Leader/Coordinator also ensures 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.

16.4 Confidentiality of Complaints and Disputes

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

16.5 Monitoring the Complaints and Client Feedback Process

Feedback and complaints processes and systems are regularly audited as part of our audit programme and staff, clients and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made. This drives the continuous improvement of our policies.