



Practice Guide: Feedback and Service Complaints

Foundations Care is committed to the efficient and fair resolution of complaints. All complaints will be handled equitably, objectively and in an unbiased manner, and confidentiality, along with respect for all parties, will be upheld at all times. Complaints are to be encouraged and seen by everyone in the organisation as an opportunity for continuous improvement and to improve services.

The term 'complaint' is used to refer collectively to any enquiry, comment or dispute raised by a person expressing dissatisfaction to particular circumstances or a situation related to our services. It is any expression of dissatisfaction, either written or verbal. A person includes, but is not limited to, applicants, clients, parent/ carers, member of the public, tenants, suppliers, landlords, partners and regulators. A person may be classified as an individual, organisation or a representative of an organisation.

Informing Service Users of the Right to Complain

At the time of intake to any service, staff will discuss the complaints process with the new client and their nominated decision maker, and/ or parent/ carer:

- The new client is provided with an information sheet on feedback and complaints. The staff member conducting the intake will make note of the date this was provided to the client
- The staff member conducting the intake is also responsible for verbally discussing with the new client the complaints process, to ensure they understand the process and to provide an opportunity to ask questions regarding the process
- Clients are also advised that they can lodge a complaint via the company's website, using the online 'contact us' portal
- Clients are then periodically reminded of their right to provide feedback or make a complaint during individual plan and goal reviews, or implementation/ review of individual service agreements, and details are included in newsletters and other communication issued by the organisation
- Clients and their nominated decision maker/ parent/ carer are offered contacts with external advocates and support systems to further assist them with the complaints process

When required interpreters may be arranged to facilitate understanding of the complaint procedure.

Clients and their nominated decision maker or parent/ carer have a right to complain and at no time will suffer negative consequences as a result of exercising that right. Clients are to be reassured that feedback and complaints are viewed as opportunity for continuous improvement and that finding a resolution is paramount.

Complaints are referred to the CEO when requiring urgent attention and/ or external notification, or in instances where they are unable to be resolved to the satisfaction of the Complainant.

Where the complaint alleges criminal or corrupt actions, the client is made aware that relevant authorities, such as the police, will be advised. In circumstances in which a criminal/ police investigation is undertaken that has arisen from a complaint made, the organisation will cease to investigate the events of the complaint, and will take direction from the delegated authorities.

Complaints from Children and Young people

The company's complaint system for children and young people is accessible, easy to locate and as clear as possible. Accessibility involves making sure children and young people are aware of their right to complain, who to complain to and how to complain, and to ensure the company can accept complaints through a variety of avenues.

Supporting Children and Young People to make a Complaint

When a child or young person, or their advocate, expresses a concern or complaint about a carer, staff member or any aspect of the companies activity, the person receiving the complaint must, as a first priority, determine if the matter relates to:

- an allegation of harm or risk of harm to a child or young person, or
- an action that is, or may be, inconsistent with the standards of care.

If the matter relates to possible harm, adhere to the procedures for reporting and responding to **incidents and allegations immediately**.

If the person receiving the complaint establishes that dealing with this complaint will cause a conflict of interest or potentially impair the child/ young person from making or continuing the complaint process, they are to discuss this with complainant and seek consent to escalate the complaint to the next level within the company. This discussion will not deter the complainant, and reassurance will be given that there will not be any negative repercussions for the complainant.

If assisting a child or young person to record a written complaint:

- use the child's or young person's own words and read the content back to them for their affirmation or signature, if appropriate
- encourage the child/young person to include details about what they are seeking as an outcome
- record the details of the complaint on the appropriate/ relevant form

Foundations Care recognises the importance of listening to children and young people. As many of the children and young people supported by the company find difficulty in expressing their concerns, carers must work to ensure that they feel able to voice their opinions. Similarly, the company is committed to carers recognising their rights, being provided with the opportunity to be heard and obtaining resolution of their grievance in a readily accessible, easily understood process.

Children and young people must be advised upon commencement into placement and reminded from time to time about their right to provide feedback and to complain about internally and externally delivered services. It is also important they are informed about external avenues for advocacy and support.

All reportable incidents (e.g. where a child/young person has been harmed or is at risk of harm) are to be responded to according to the procedures for reporting harm and other incidents.

Informing children and young people

Inform children and young people in a way that they are able to understand, through:

- talking with them and providing written information at the commencement of the placement. This includes being provided with a generic business card, detailing a phone number and an email address feedback@fdc.csg.ngo they can contact to get in touch with Foundations Care
- providing each child/young person with a prepaid envelope to encourage anonymous feedback, along with a feedback form for them to complete
- providing reminders from time to time, for example, when a child/young person expresses dissatisfaction with services or a decision that has been made on their behalf

Caseworkers are to explain to children and young people that they can make suggestions and express any concerns or complaints about Foundations Care or other service providers by:

- telling a Caseworker or other staff member during day-to-day activities, during Case Plan reviews and meetings, and at home visits
- asking a Caseworker, or other staff member, to make a complaint on their behalf or provide the with assistance to make a complaint
- telling someone from an external agency

- contacting the Caseworker or other staff member after they have transitioned from Foundations Care.

Informing Staff of Service Users Right to Complain

All new staff to the company are made aware of the service complaints process during induction. Staff are directed to the Digital Workplace, which holds all current Policies, Protocols and Practice Guides, including those specifically related to complaints and feedback. All staff have a responsibility to read and understand the organisations service complaints and feedback processes.

Any variances to the complaint process specific to the type of service being delivered is communicated to staff at the time of program induction, by the relevant line manager.

Informal Response and General Feedback

Where possible, complaints from clients are best handled and resolved at the point of service delivery by front line staff in a timely and responsive manner. The clients feedback/ concerns and actions taken are recorded in the clients electronic file. General feedback, both positive and negative, is also managed and documented at local level.

Formal Response

The following process is to be followed when formal complaints are unable to be resolved by front line staff at the local level. It should be noted that in most instances, the delegated staff member appointed to oversee the management and investigation of the complaint will be the Complaints Manager:

Step 1: Complaint received

- Person receiving the complaint ensures it has been lodged in line with *Practice Guide: Submitting Feedback, Requests and Complaints* and *Practice Guide: Lodging a Service Complaint*
- The complaint will be assigned to delegated staff member within the company. At this time, the CEO is also notified, who is responsible to report the complaint to the Board (where required)
- Within **24 hours** of receiving complaint, the delegated staff member is to verbally acknowledge the complaint with Complainant
- Within **5 business days** of receiving the complaint, the delegated staff member is also responsible to send an Acknowledgement Letter to the Complainant, along with the complaints information sheet, for their information

Step 2: Complaint investigation

- Complaint investigation to be completed within **20 business days** of receipt of complaint. Whilst overseen by the Complaint Manager/ delegated staff member, the

investigation of the complaint remains the responsibility of the relevant program Manager

- If investigation is taking longer than 20 business days, a courtesy call is to be made to the complainant by the appointed staff member investigating the complaint/ Manager
- Investigation steps must be documented and captured in a Complaint Case Note. The case note must be communicated to relevant staff by the investigating staff member. The Complaint Case Note is generated by the Complaints Manager, and issued to the staff member appointed to conduct the investigation

Step 3: Complaint outcome

- Within **5 business days** of concluding an investigation, a Complaints Outcome Letter is to be sent to the complainant by the Complaints Manager
- All relevant documentation is to be filed with the Investigation report

Step 4: Complaint closed

- The complaint will then be closed by the Complaints Manager
- Feedback following the resolution of a complaint, both positive and negative, will be used as a source of ideas for improving services and other activities
- The Complaint Action Plan must also be closed at this time, pending the completing of action items

Where a resolution fails to be achieved, a referral is made the **following business day** to the CEO. If following the involvement of the CEO the complainant is still unsatisfied with the outcome, the complaint is then escalated by the CEO to the Board Chair for resolution. The complaint will be placed on the next Board Meeting agenda, for discussion.

If the situation is not resolved within **15 business days** from the referral, the Board Chairman will contact the complainant and recommend the issue is referred to an external agency for resolution.

Referral to External Agency or Organisation

Where resolution fails to be achieved through the organisations complaints management mechanisms, a referral may be necessary to an external agency or organisation for advice/assistance, or alternate dispute resolution. Such agencies and organisations may include, but are not limited to, Legal, Human Resource and Industrial Relations Advisers, Advocacy organisations and agencies, and mediators.

The CEO will contact the complainant within **2 business days** and inform them of the outcome and the agencies which are available to them. Agencies include, but are not limited to:

NDIS Quality and Safeguards Commission	1800 035 544	www.ndiscommission.gov.au
QLD Civil and Administration Tribunal (QCAT)	1300 753 228	www.qcat.qld.gov.au
NSW Civil and Administration Tribunal (NCAT)	1300 006 228	www.ncat.gov.au
WA State Administrative Tribunal (SAT)	1300 306 017	www.sat.justice.wa.gov.au
Office of the Health Ombudsman	133 646	www.oho.qld.gov.au
Health Care Complaints Commission	1800 043 159	www.hcc.nsw.gov.au
NSW Fair Trading	13 32 20	www.fairtrading.nsw.gov.au
QLD Fair Trading	13 7468	www.qld.gov.au
WA Fair Trading	1300 304 054	www.commerce.qa.gov.au
Ombudsman QLD	1800 068 908	www.ombudsman.qld.gov.au
Ombudsman NSW	1800 451 524	www.ombo.nsw.gov.au
Ombudsman WA	08 9220 7555	www.ombudsman.wa.gov.au

Human Rights Commissioner QLD

Under the *Human Rights Act 2019 (QLD)*, any individual can make a complaint when a public entity, in this case being this Organisation, acts or makes decisions inconsistently with the act and is therefore in breach of an individuals human rights.

In order for the Human Rights Commissioner QLD to deal with a complaint under the *Human Rights Act 2019 (QLD)*, the complainant must first raise the complaint directly with the Organisation, and wait at least 45 business days for a resolution before being eligible to escalate the complaint directly with the Human Rights Commissioner.

Complaints must be made in writing to the Commissioner, and are lodged online at the following link <https://www.qhrc.qld.gov.au/complaints/make-a-complaint>.

Complaints Pertaining to the Principal Officer

As with all complaints, the first step is to attempt to resolve the issue directly with the person involved. If the complaint pertains to the Principal Officer, the complainant should contact the Principal Officer first and discuss the issue. If however the complainant is not comfortable to do this, or the issue remains unresolved, the complaint may be lodged via the Executive

Concern page [here](#). The matter will then be managed by the Risk and Compliance Committee directly.

Complaints Pertaining to the CEO

As with all complaints, the first step is to attempt to resolve the issue directly with the person involved. If the complaint pertains to the CEO, the complainant should contact the CEO first and discuss the issue. If however the complainant is not comfortable to do this, or the issue remains unresolved, the complaint may be lodged via the Executive Concern page [here](#). The matter will then be managed by the Risk and Compliance Committee directly.

Complaints pertaining to the Board of Directors

As with all complaints, the first step is to attempt to resolve the issue directly with the person involved. If the complaint pertains to the Board, the complainant should contact the Chairman of the Board first and discuss the issue. If, however, the complainant is not comfortable to do this or the issue remains unresolved, they can discuss the issue with the CEO, who will request that the complaint be put in writing to then be presented to the Board Chairman.

If the complaint pertains specifically to the Board Chairman, the Chairman is removed immediately from the complaint investigation process, and the Vice-Chairman will step in to manage the complaint.

Anonymous Complaints

The company accepts anonymous complaints and will carry out an investigation of the issues raised when sufficient factual evidence is provided. Anonymous complaints will be treated with the same priority as other complaints, and will be investigated as much as reasonably practicable. In such cases feedback to the complainant will not be possible however complaints will be recorded in the relevant register(s).

Complaint Register

The company maintains a Complaint Register which records the details of all complaints relating to the organisation and the actions taken in response. This information includes:

- Complainants name and details
- Substance of the complaint
- Date the complaint was lodged
- Dates of written and verbal communication with the complainant
- Details of actions taken to resolve the complaint
- Outcome of the resolution process
- How the outcome was communicated to the complainant

- Any opportunities identified for continuous improvement within the organisation, as a result of the complaint being submitted and investigated

The Role of the National Compliance Office

The National Compliance Office works to maintain and protect the integrity of the company, and to ensure the company is providing a quality service to all individuals who engage its services, whilst meeting its legal and contractual requirements. The Office will remain direct oversight across all complaints made to, or about, the company. The office is responsible for monitoring the complaints handling process, to ensure its effectiveness, to maintain a level of independence, and to ensure the process remain fair and equitable.

Where required, an external investigator will be engaged to investigate a complaint made, where it is deemed necessary by the Compliance Office. In this instance, the investigator reports directly to the Compliance Office, who will then inform the Risk and Compliance Committee of the matter, the investigation taken, and the outcome. Any potential or perceived risks that have arisen from the complaint are also managed within the Committee.

Refer also to:

- Protocol: Staff Grievance (FDC)
- Practice Guide: Submitting Feedback, Requests and Complaints (FDC)
- Practice Guide: Lodging a Service Complaint (FDC)