

<b>Disability Service Standard 4</b>
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Kids are Kids! Therapy & Education Centre Inc.

## **Policy 4.1 – Feedback and Complaints**

Last Amended:

Date Ratified:

Next Review:

Review Responsibility: Board of Management

Documents Attached:

- PR4.1 – Feedback and Complaints Procedure
- PS4.1 – Feedback and Complaints Practice and Performance Standards

Chairperson's Name: Wayne Revitt

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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## Policy 4.1 – Feedback and Complaints

### **Policy Statement:**

This Policy is about hearing from the people we support and their families and support networks about the work we do, and what we do with this information.

A **complaint** is a formal expression of unhappiness or dissatisfaction about a specific incident or situation, where it is expected that the situation is investigated and fixed.

**Feedback** is information from clients or their families, carers, or members of the public about anything to do with Kids Are Kids! and their experience of Kids Are Kids! Feedback can be positive or negative, or it might be a suggestion or a concern. A **serious complaint** is where the issue raised relates to a staff members' actions or inactions that has caused or may cause harm (such as actual or alleged abuse, neglect, theft or exploitation) or is about an illegal action.

Positive and negative feedback and complaints are welcomed by Kids Are Kids! as it helps us to monitor and improve our services. Kids Are Kids! staff and management encourage feedback and complaints, so that we know that our services meet the needs and expectations of our clients and relevant practice standards.

**Enquiry** is the process used to find out more about a complaint or feedback so that a decision about the outcome is based on facts and information. An enquiry involves staff asking questions to understand the matter from the point of view of all the people involved in the complaint. Enquiry is used when the complaint is not serious or does not have significant or long-term consequences.

Investigation is the process used to look at all details of a complaint very carefully. It includes considering the facts about a serious or significant complaint, or something that has happened a number of times. An investigation is completed by an Executive Officer or delegate.

Procedural fairness: is an approach that treats all parties involved in a complaint with fairness and respect. Practically this means-

- Letting each person involved know what the complaint is about.
- Giving each person the opportunity to describe their version of the matter and making sure it is understood.
- Letting the person/s know how the inquiry/investigation will happen and how long it will take.
- Basing the final decision on the facts and without bias.

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- Letting the person making the complaint know the outcome in the format the person would most understand and prefer.

### **Scope**

This policy and its procedure apply to all staff and Board who may receive feedback or complaints from our clients, their families and/or carers, advocates, and other parties.

### **Guiding Principles**

1. Kids Are Kids! is committed to:

- Making information available about the right to complain and the different ways to do this.
- Encouraging clients, their families or carers and other stakeholders to provide feedback or complain.
- Ensuring there is no impact on a person's services or the way they are treated because they have made a complaint.
- Supporting clients and their families/carers to raise complaints or give feedback or supporting them to access advocacy services to provide support.
- Making sure staff know their responsibilities in relation to feedback and complaints.
- Investigating and managing complaints to closure in a fair, effective, efficient and timely way with procedural accountability.
- Keeping the person/s who make a complaint or about whom the complaint is made informed about what we are doing, any actions taken and the reasons behind decisions that are made.
- Keeping private information confidential, sharing it only with the people involved or who need to know, wherever possible.
- Meeting any legal obligations to report to the police or other authorities any serious complaints about harm to someone.
- Acting on the basis of facts and evidence gathered during an investigation process and making decisions in good faith and based on these facts and evidence.
- Regularly reviewing the feedback and complaints we receive and using this information to improve services including quality improvement activities.

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- Enabling any complaints by clients or families/carers about an Executive Officer's actions to be raised directly at Board level.
2. While Kids Are Kids! works hard to provide quality services and meet expectations, we recognise that mistakes can occur, and we value being informed of these instances and the chance to learn from these to improve service delivery.
  3. Kids Are Kids! will keep a register of complaints and feedback, which will be maintained and reviewed by Executive Officers and reported to the Board on a monthly basis.
  4. All complaints will be investigated with procedural fairness and accountability. This protects the rights and interests of the person/s making the complaint and the person/s who the complaint is about during the enquiry/investigation of the matter. This means that all people involved have equal opportunity to present their version of events and give any relevant supporting information. The person investigating the complaint will not favour any person or pre-judge in any way. The person investigating the complaint will clearly explain the process of investigation to all parties. A different manager to the investigator will seek feedback from the client or their family around their experience of the complaint process and how this could be improved.
  5. All people involved in a complaint will be involved in the resolution of the complaint, kept informed of the progress of the complaint and any action taken. They will be informed of the reasons for decisions made and will have the option to have any decisions reviewed if not satisfied with the outcome.
  6. There are several ways for complaints or feedback to be provided to Kids Are Kids! These include:

In person to any Kids Are Kids! staff

Phone: 9313 6566

Website: [www.kidsarekids.org.au](http://www.kidsarekids.org.au)

Email: [info@kidsarekids.org.au](mailto:info@kidsarekids.org.au)

[lisah@kidsarekids.org.au](mailto:lisah@kidsarekids.org.au)

[teresab@kidsarekids.org.au](mailto:teresab@kidsarekids.org.au)

In writing Complaints

26 Parry Avenue

Bateman WA 6150

Anonymously Via the suggestion box at the Bateman centre

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or through link on website (To insert when website updated).

Clients or their families can also lodge a complaint about their service directly to the Health and Disability Services Complaints Office (HaDSCO). HaDSCO is an independent statutory authority providing an impartial resolution service for complaints relating to health or disability services provided in WA.

If clients are accessing services with Kids Are Kids! through the NDIS, they can complain to the National Disability Insurance Scheme Quality and Safeguarding Commission via their website <https://www.ndiscommission.gov.au/about/complaints> by calling 1800 035 544 (free call from landlines) or TTY 133 677. Interpreters can be arranged.

7. Kids Are Kids! management team will review complaints and feedback trends every six months to ensure that they lead to service improvement where possible.

**Procedures:**

Procedures will be implemented to enable Kids are Kids! Therapy and Education Centre Inc to meet its policy objective PR4.1 – Complaints and Feedback Procedure

**Performance Standards:**

Performance Standards will be met to ensure that the procedures specified are implemented effectively. PS4.1 – Complaints and Feedback Practice and Performance Standard

**Legislative Base/Authority:**

National Disability Insurance Scheme Act 2013 – (Cth)

National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018

NDIS Code of Conduct

NDIS Quality and Safeguards Commission: Effective Complaint Handling for NDIS Providers

**Related Policies:**

[5.4 Service Exit](#)

6.3.3 Grievance Resolution Procedure

6.3.8 Code of Conduct Employees, Volunteers, Contractors and Consultants

6.4.1 Incident Management Policy

1.1 Promoting and Protecting Rights Policy

1.3 Privacy and Confidentiality Policy

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### **Review of the Policy**

This policy will be reviewed on a bi-annual basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy shall be reviewed immediately and amended accordingly. This policy may also be updated using feedback from complaints investigations.

## Appendix 1 – Procedure

### PR4.1 – Feedback and Complaints

#### **It is the responsibility of all Kids Are Kids! staff:**

- To understand that feedback and complaints are a valuable opportunity to review and improve our services and procedures.
- To encourage and actively facilitate clients and their families/carers to raise feedback or complaints in a way that suits them.
- To support clients and families/carers to make a complaint or provide feedback, including to external agencies such as NDIS Commission or HaDSCO. This includes supporting a client to access an independent advocate if requested.
- To respond politely and respectfully to any person raising feedback or wishing to make a complaint about any aspect of our services, behaviour or procedures.
- To ensure that complaints are dealt with directly and quickly at the point of service where possible or escalated to a line manager, program coordinator or executive officer when necessary. This escalation is clearly explained to the person making the complaint. If the matter can be resolved immediately it needs to be recorded in the clients' notes and program coordinator informed verbally or in writing. The program coordinator will document the complaint in the complaints register and seek feedback from the client or their family regarding satisfaction with the outcome.
- To immediately escalate to Executive Officer any complaint where there is risk to the safety, health or wellbeing of the client or person with a disability. If staff are unsure if a risk is present, they escalate the complaint to their line manager or management team on day the complaint is received. Complaints vary in severity and serious complaints such as relating to abuse or neglect, misappropriation of money, drug use or other matters that have the potential to cause harm to clients or staff should be reported to the executive team immediately. If the staff member is in doubt whether a complaint fits this urgency they should report immediately and let the executive officer decide the severity.
- To safeguard clients and families against retribution or unfavourable treatment if they make a complaint or wish to make a complaint by continuing to provide services unless the client/family requests services to pause or cease.
- Document the complaint or feedback in Salesforce including who made the complaint/feedback, when and how they raised the issue, what the issue is as

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described by the person, what outcome the person raising the complaint wants to occur if known. Email marked urgent or phone contact with line manager, senior staff or executive needs to occur on the day of receiving the complaint.

- Understand staff all have a responsibility to receive, respond to and forward complaints and that all people involved will be treated fairly.
- To respect the privacy and dignity of the person making the complaint and to keep information about the complaint confidential to those not involved as far as possible but making sure it is raised with program coordinator or executive so that a proportionate enquiry or investigation can be planned. To protect privacy of staff involved in complaint, basic information only may be entered in Salesforce with note to refer to complaints and feedback register, and more detailed documentation included in complaints register.
- To explain to clients/families the need to communicate serious complaints to senior staff or executive as part of a transparent and responsive process and an integral part of our quality assurance process. If serious complaint has been made an Executive Officer must be immediately verbally informed and they will manage the investigation or external reporting requirements.
- Where a matter is resolved immediately it should still be documented in client notes and put in writing to program coordinator so that all complaints and feedback can be considered as part of quality improvement and kept in the complaints and feedback register.
- If the feedback is a compliment, thank the person for sharing this and let the staff involved know the details of the compliment and share with team through email/staff meeting as appropriate. Kids Are Kids! promotes a culture of quality improvement and values positive and negative feedback as an integral part of this process.
- Staff failure to comply with this policy will be treated seriously and may result in disciplinary action.
- Serious breach of policy may be considered as serious misconduct and could result in termination of employment.

**All line managers, senior staff, executive or Board members to whom complaints are made or escalated to must treat all people involved with procedural fairness and accountability.**

- All clients will be encouraged to deal directly with the employee with whom they have the issue, where appropriate. If clients or families prefer, they can register

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the complaint with a program manager, executive officer or any other staff member.

- The staff member managing the complaint/feedback should be independent to the complaint issues and will talk with the person who raised the issue as soon as possible.
  - a. Let the person know of their right to have an independent support person during the process if they wish. This can be a friend or family member or a professional advocate.
  - b. Confirm details of the complaint by repeating them back to the person to ensure accurate understating.
  - c. Ask the person what they would like done about the complaint or the outcome they are seeking.
  - d. Acknowledge the complaint and apologise if appropriate. Assure the person their feedback/complaint is taken seriously.
  - e. Document in the client notes including outcome and follow up.
  - f. Inform program coordinator or Executive Officer in writing and verbally if serious who will record in the complaints and feedback register including outcome and follow up.
  - g. If you are not able to resolve the matter in a timely way or it is outside of your authority contact the Executive Officer.

All clients will be advised of this policy and their rights, at the point of commencement of services or if there is a change to the policy.

Kids Are Kids! will provide access to this policy on its website and will provide a copy in a preferred format on request. Regular communications via social media or the e-newsletter will promote Kids Are Kids! policy to welcome and act upon complaints and feedback received, and to provide information on how to raise complaints or feedback.

Kids Are Kids! will ask our clients if they feel comfortable and know how to approach Kids Are Kids! with a complaint in our annual consumer survey. Consumer satisfaction/feedback surveys will be sent to all NDIS clients annually.

During the period where a complaint is unresolved and still under investigation it is important to keep all parties involved informed as to progress on a weekly basis or at times mutually agreed.

All complaints should be resolved in four weeks from receipt of complaint. If this is not possible due to complexity of complaint or investigation, it needs to be escalated to the Executive Officer.

A client or family/carer does not need to expressly state that they wish to make a complaint to have their feedback dealt with as a complaint. Regardless of whether it is a big or small issue, if it is treated seriously, it helps us show the person that their input is valued, and we try to always improve the services we provide.

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**Responsibility of Senior/Management Staff**

Where an employee is the subject of a complaint, they need to be informed about the nature of the complaint and the process to investigate and resolve the complaint by the person investigating the complaint. Their line manager needs to be informed in all feedback or complaints to ensure multiple complaints or feedback are monitored, and the appropriate responses occur to prevent similar complaints or feedback in the future.

Senior staff and Executive Officers are responsible for documenting all complaints in the Complaints and Feedback Register at the time of the complaint and updating and closing when the matter is resolved. This includes complaints managed by them directly or those communicated through direct reports.

Where a single complaint or feedback, or a pattern of complaints or feedback result in a need to change a procedure, policy, or other aspect of our service, this will be registered on the quality improvement register and be communicated to all staff, without specific details of original complaints to protect personal information and the privacy of staff and clients/families.

All complaints, resolved and unresolved, will be recorded in the confidential complaints and feedback register, accessible only by management and executive team. A non-identifying summary of complaints and outcomes will be tabled at each Board meeting. The complaints register will be used to identify improvements to the service and these recommendations will be tabled with the summary of complaints to the Board meeting.

All complaints and feedback will be reviewed a minimum of every six months by the management team and Executive Officer to ensure compliance with policy, review of analysis for trends or systemic issues, including feedback from the person making the complaint about the complaints process. This will ensure the complaints system is effective. Any areas identified for improvement will be registered on the quality improvement register including delegated responsibility and timeframes for completion.

If the proposed resolution is unacceptable to the client or their family/carer, the matter may be forwarded to the Executive Officer if they have not already been involved, or the Executive Officer will advise the client/family of their right to raise the matter with the appropriate external agency and offer support to be able to access complaints processes external to Kids Are Kids!

**Responsibility of Executive Officers and Board**

A Board member receiving a complaint about Kids Are Kids! operations will inform Executive Officers and table it at the monthly Board meeting. If the complaint is about an Executive Officer, they will inform the Chairperson who will conduct any necessary enquiry or investigation. The Chairperson will manage all complaints relating to the

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actions of the Executive Officers in line with procedural guidelines that apply to all staff. Any staff can facilitate clients or families to make a complaint about the executive officers directly to the Board without retribution.

The Executive Officers have responsibility to ensure that staff and clients/families are encouraged to make suggestions to improve complaints or feedback. It is the Executive Officers' responsibility to ensure protocols for handling feedback and complaints are designed, implemented and maintained and continually improved in accordance with legislative and government requirements through consultation, monitoring and review. Executive Officers must promote a positive culture of 'speaking up' amongst clients, families/carers and staff.

It is the Executive Officer's responsibility to ensure the NDIS Quality and Safeguarding Commission is notified of any complaints or allegations regarding harm which meet the definition of reportable incident as determined by the Commission.

Complaints and feedback data will be audited by Executive Officer and management team, reviewed and analysed on a six-monthly basis to identify trends or systemic issues as an opportunity to improve Kids Are Kids! service quality. These processes will be documented as part of the internal audit schedule and on the quality improvement register. Any risks identified will also be discussed at Executive Officer meetings and with the Board if the complaint relates to an organisation risk. The complaints and feedback internal audit findings will also be reported to Board.

The Executive Officers are responsible for managing responses to media enquiries and liaising with external complaints handling bodies, government departments and statutory bodies in relation to complaints and allegations of abuse, harm or neglect.

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**Summary procedures for Complaints and Feedback** – to be used in conjunction with Policy and Procedure

**All Staff** (clinical and administration staff, management, executive)

Situation	What to do?	By When?
Complaint is about something which may have caused harm and/or was illegal	Speak to an Executive Officer immediately who will <ul style="list-style-type: none"> <li>- alert the necessary medical, police or other services;</li> <li>- commence incident investigation processes</li> </ul>	Immediately

**All Staff** (clinical and administration staff, management, executive)

Situation	What to do?	By When?
You were told positive feedback or a compliment	Document in Salesforce Email your line manager	On day of complaint/feedback
You've been able to fix the complaint /concern	Document in Salesforce Email your line manager	
You've been told a complaint that you're not able to fix for various reasons	Document in Salesforce Email your line manager, program coordinator or Executive Officer marked urgent or speak to them	
	Tell the person you have escalated the complaint and who has been told	

**Senior Staff and Management Team** – more than one may apply

Situation	What to do?	By When?
You or your team was told positive feedback or a compliment	Report it to Executive Officer in writing (email), enter in complaints register or feedback register.	Within 3 days
You or your team have been able to resolve to concern/complaint		
You haven't been able to resolve a concern/complaint for various reasons	Report it to Executive Officer in writing marked urgent (email), enter in complaints and feedback register. Tell the person who has been told	Before you finish for the day
Complaint is about a staff member	Let the staff member know	By next working day for you both
	Meet with the staff member to follow fair and due process	Within 3 working days

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All complaints escalated to you	Escalate to Executive Officer if may require reporting to external organisation. Document received complaint in the Complaints and Feedback Register	Immediately  Within 3 working days
	Investigate, and either resolve or escalate	Within 4 weeks
	Keep those involved informed and involved	Weekly
	Document resolved complaint in the Complaint Register	Within 3 days of resolution
Positive feedback and compliments	Document in the Feedback and Complaint Register	Within 3 working days

**Executive Officers**

SITUATION	WHAT TO DO ?	BY WHEN ?
Serious/ systemic complaints + positive feedback or where risk identified	Report to Board of Management	Each Board meeting
Internal Audit of complaints process	Seek feedback from service users Complete audit and report to Board	Annually at minimum in survey and after each complaint

**Board Chair**

SITUATION	WHAT TO DO ?	BY WHEN ?
Complaint received about EO actions	Enquire/investigate as required Inform Board of outcome post-enquiry	Within 4 weeks

## **Practice and Performance Standards**

### **PS 4.1 – Feedback and Complaints**

The following performance standards must be met to ensure that the procedures specified are implemented effectively:

All staff are oriented and trained in this policy and any changes are communicated to all staff. This should be done at orientation and regularly in staff development and staff meetings.

All complaints are recorded on a complaints and feedback register including outcomes. This register is audited every six months to ensure compliance with policy, resolution of complaint, feedback from client or family around complaint process and outcome, trends and evidence of service improvements. Results of this audit will be reported to Board. Complaints and feedback will be reported to the Board at each meeting.

All feedback is recorded in clinical records. Reports including all feedback data will be audited every six months in conjunction with complaints data for evidence of change in service provision and monitoring trends that inform quality improvement activities. These records will be kept for minimum of 7 years.

Internal audits evidence that we use feedback and complaints to change our actions, plans, policies or resource allocation.

Staff should ask the client and/or family/carer for positive and negative feedback at least every six months, and this should be included in all goal review processes.

A consumer survey is distributed annually to clients/families/carers to ensure that they are comfortable making a complaint or giving feedback; they know how to make a complaint or give feedback and that they are satisfied with how their feedback or complaints have been addressed if relevant.

Clients or families/carers who make a complaint are contacted within three months of the closing of the complaint to ask them about their satisfaction with the outcome and the process and how we can improve our complaint and feedback process. This process is undertaken by a staff member not involved in the complaint and all feedback/data is recorded in the complaints and feedback register.

All serious complaints are reported to relevant authorities by Executive Staff or their delegate within the required timeframes.