



FEEDBACK, COMPLIMENTS AND COMPLAINTS POLICY AND PROCEDURE

<b>Policy Code</b>	<b>CFP001.01</b>
<b>Person Responsible</b>	<b>Director</b>
<b>Status (Draft/Released)</b>	<b>Released</b>
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**1.0 PURPOSE AND SCOPE**

This policy and procedure sets out how any person can provide feedback and make complaints about any aspect of AMPEY PTY LTD operations and the process of addressing or responding to feedback and complaints.

This policy and procedure applies to the Director, staff, students, contractors and volunteers and all potential and existing participants, their family members and other supporters. The policy also applies to other service providers, government agencies and members of the community.

This policy and procedure is based on Commonwealth of Australia (Department of Social Services) data.

**2.0 DEFINITIONS**

**Compliment** - an expression of praise, encouragement or gratitude about an individual staff member, a team or a service.

**Complaint** - an expression of dissatisfaction made to or about an organisation, related to its products, services, staff or the handling of a complaint, where a response or resolution is explicitly or implicitly expected.<sup>6</sup>

For the purpose of this policy and procedure, a complaint is defined as an issue of a minor nature that can be resolved promptly or within 24 hours, and does not require a detailed investigation. Complaints include an expression of displeasure, such as poor service, and any verbal or written complaint directly related to the service (including general and notifiable complaints).

**General complaint** - addresses any aspect of the service e.g. a lost clothing item or the service's fees. The complaint must be dealt with as soon as is practicable to avoid escalation of the issue.

**Grievance** - a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature e.g. the service is in

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breach of a policy or the service did not meet the care expectations of a family.



### 3.0 POLICY

- Compliments, complaints and other feedback provide:
  - valuable information about participant satisfaction; and
  - an opportunity to improve upon all aspects of its service.
- AMPEY Pty Ltd records and handles feedback effectively in order to:
  - identify areas for improvement;
  - coordinate a consistent approach to complaint resolution;
  - reduce the potential for future complaints; and
  - allow for reporting and efficient allocation of resources.
- AMPEY PTY LTD feedback, compliment and complaint handling system addresses the principles of:
  - visibility and accessibility;
  - responsiveness;
  - assessment and investigation;
  - feedback;
  - continuous improvement; and
  - service excellence.
- AMPEY Pty Ltd seeks to build a responsive, efficient, effective and fair complaint management system. Resolving complaints at the earliest opportunity in a way that respects and values the person's feedback can:
  - aid in recovering the person's confidence about AMPEY PTY LTD services;
  - help prevent further escalation of the complaint.
- AMPEY PTY LTD approach to feedback, compliments and complaints management ensures:
  - people understand their rights and responsibilities;
  - information on the feedback, compliment and complaint management process is easily accessible;
  - increased satisfaction of participants in the management of their compliments and complaints;
  - the recording of data to identify existing or emerging trends or systemic issues;
  - staff demonstrate an awareness of AMPEY PTY LTD feedback, compliments and complaints management processes;
  - staff develop the range of skills and capabilities required to manage compliments, complaints and feedback; and
  - an organisational culture that is focused on effective, person-centred complaints resolution and utilising feedback for continuous improvement.



## 4.0 PROCEDURE

- Ampey Pty Ltd will promote best practice, continuous improvement and an open, supportive, respectful culture that encourages and supports staff, participants and other stakeholders to make complaints and report concerns without fear of retribution.
- AMPEY PTY LTD *Participant Charter*, *Welcome Pack* and a *Feedback, Compliments and Complaints Brochure* provide participants, their families and carers and all other stakeholders with information about this policy and procedure, in an easy to understand format. This will include information on how feedback and complaints will be addressed and who to contact to provide feedback and complaints to external agencies, including external advocacy and support agencies. Information will be clearly displayed and provided by staff when requested.
- Information about providing feedback and making complaints will be provided in a variety of formats where appropriate, including in Easy English and alternative languages. Interpreters and referrals to advocates can be provided.
- AMPEY Pty Ltd will provide all participants, their families and carers with this policy and procedure when they first access the service and, throughout service delivery, remind them of the policy and their right to make a complaint without fear of affecting their service.
- All personal information AMPEY Pty Ltd collects to manage feedback or complaints will be handled in accordance with privacy legislation and the *Privacy and Confidentiality Policy and Procedure*. Feedback and complaints will be dealt with in a confidential manner and will only be discussed with the people directly involved. All information regarding feedback and complaints will be kept securely in accordance with the *Records and Information Management Policy and Procedure*.
- Complaints and feedback can be lodged by a third party on behalf of another person, if their consent has been provided.
- The Director will track and analyse feedback and complaint data to identify any ongoing issues and opportunities for service improvement.

### **Feedback**

- Feedback can be provided to AMPEY Pty Ltd at any time in any way by any stakeholder, including through:
  - AMPEY PTY LTD public email address; ampey@ampeyou.com
  - mail; Shop 11, 210 The Entrance Road ERINA NSW
  - phone contact; 0411 919 805
  - Feedback and Complaint Forms;
  - participant forums;
  - staff collection of participant feedback after each major interaction with the service (e.g. initial assessment and planning; reviews; exit);
  - annual participant service delivery and satisfaction surveys. All participants will be asked to complete these surveys; and



- Where feedback is provided verbally, the receiving staff member will transcribe the feedback onto a *Feedback and Complaint Record*.
- Provision of feedback through any of AMPEY PTY LTD channels is voluntary.

### **Complaints management process**

AMPEY PTY LTD complaints management process can be simplified into five steps:

- Receive;
- Record;
- Acknowledge;
- Resolve; and
- Communicate resolution.

#### **1. Receive**

To lodge a complaint, individuals are encouraged to speak directly to a staff member first, in an attempt to resolve the matter without recourse to the complaints and grievances procedures.

Staff will:

- *Listen* – openly to the concerns being raised by the complainant.
- *Ask* – the complainant what outcome they are seeking.
- *Inform* – the complainant clearly of the complaint process, the time the process takes and set realistic expectations.
- *Be accountable* – and empathic towards the affected person and action all commitments made.
- *Assess* – situations that pose an immediate threat or danger, or require a specialised response.

All complaints and grievances will be referred to the relevant supervisor (or Director) for resolution.

The relevant supervisor will discuss minor complaints directly with the party involved as a first step towards resolution.

If the complaint cannot be resolved promptly or within 24 hours, the Director will treat it as a grievance (advising the individual of their right to lodge a grievance if they have not already done so, with the assistance of a support person or advocate if they wish).



All participants making a complaint will be encouraged to use an advocate of their choice to act on their behalf if they wish. The advocate may be a family member or friend, or sourced (with the assistance of a staff member if required) through the National Disability Advocacy Program.

If a complaint alleges actual or possible criminal activity or abuse or neglect, it will be referred to the Director immediately. The Director will follow the *Incident Management Policy and Procedure*, reporting the complaint and working with the relevant authority to investigate the allegation.

- Staff will take all reasonable steps to ensure a complainant is not adversely affected because a complaint has been made by them or on their behalf.

### 2. Record

The Director will:

- Record – all information that is relevant to the compliment or complaint, in its original and simplest form, in the *Complaints Register*.
- Store and protect – the *Complaints Register* in a secure file, accessible only to the Management Team.

The Complaints Register will record:

- complaints,
- investigation progress and outcomes,
- how the outcomes have been communicated to stakeholders.

### 3. Acknowledge

The Director will:

- Acknowledge – receipt of the grievance within 2 working days to build a relationship of trust and confidence with the person who raised the complaint.
- Provide anonymity – a person may request to remain anonymous in their lodgement and therefore contact may not be possible or expected.
- Seek desired outcomes – provide realistic expectations and refer the matter to other organisations where identified as being more suitable to handle.
- Avoid conflict of interest – by appointing a person unrelated to the matter as an investigator if necessary.
- Provide timeframes and expectations – to the complainant where possible.

### 4. Resolve



In resolving a complaint or grievance, the Director will:

- Involve the complainant – keep them informed of the progress of the complaint and discuss any disparities identified in the information held;
- Request additional information – when required but apply a timeframe that limits when it is to be provided by;
- Consider extensions – only where necessary and always communicate any additional time requirements to the complainant with an explanation of the need;
- Record all decisions or actions of the complaint investigation in AMPEY PTY LTD Complaints Register; and
- Focus on the identified complaint matters only. A complaint is not an opportunity to review a whole case.
- Investigation of complaints will not be conducted by a person about whom a complaint has been made. If required, the Management Team will determine the appropriate person to undertake the investigation.

### 5. Communicate resolution

AMPEY Pty Ltd will respond to all complaints and grievances as soon as possible and within 28 days from acknowledgement.

If a complaint or grievance cannot be responded to in full within 28 days of acknowledgement, an update will be issued to the complainant. The update will provide the date by which a full response can be expected. The update should be provided verbally in the first instance then confirmed in writing.

The Director (or delegate) will:

- Discuss the outcome – where possible, verbally with the complainant before providing written advice and allowing them the opportunity to make further contact following receipt of the written advice.
- Include information on recourse – further action available to the complainant at the conclusion of the complaint investigation. An action of recourse may be to escalate the matter further with an external agency or for a further review within the organisation.
- Provide a further review – to enable the first investigation to be reviewed for soundness and allow additional information not available in the first complaint to be included.
- Identify opportunities – relay complaint outcomes to the appropriate area within the organisation for action to improve service delivery.
- Seek Feedback – from the complainant regarding their experience of the complaints process.

Support will be provided to assist complainants understand correspondence

regarding complaints and grievances where required (e.g. interpreters, referral to advocates, etc.).

### **Actioning resolutions**

Options for actions responding to a complaint include but are not limited to:

- explaining processes;
- rectifying an issue;
- providing an apology;
- ongoing monitoring of issues; and
- training or education of staff.

The Director (or delegate), in consultation with the complainant, will develop an action plan for all actionable resolutions, including:

- what will be done
- who will do it
- when it will be done by
- how the progress of the complaint and outcomes will be communicated to the person making the complaint and the participant, and
- how the progress of the complaint actions and implementation will be oversighted.

### **Procedural Fairness**

The precise requirements of procedural fairness can vary from one situation to another. The required steps can differ according to:

- the nature of the matter being dealt with;
- the options for resolving it;
- the time-frame for resolution;
- whether facts in issue are in dispute;
- the gravity of possible findings that may be reached; and
- the sanctions that could be imposed based on those findings.
- Sometimes a quick, informal and consultative procedure will be sufficient – but on other occasions procedural fairness may require a more formal, structured or arms-length procedure.
- Procedural fairness reflects a common expectation people have when their interests are directly and adversely affected by the actions of government agencies, employers and other organisations. In essence, people expect that before adverse action is taken against them under legislation.





- they will be advised of any prejudicial matters that have been raised against them;
- they will have an opportunity to express their view and to refute any prejudicial information on which the adverse action may be based;
- any adverse action will be based on relevant facts and circumstances;
- the decision-maker will be impartial and even-handed; and
- an adverse decision will be explained.
- AMPEY Pty Ltd will accord or support procedural fairness in regards:
- complainants – treating them with respect and supporting them to make a complaint or to seek the help of an advocate;
- staff against whom complaints or allegations are made – ensuring their privacy and confidentiality while investigations are conducted;
- the NDIS Commission – assisting the Commission to operate most effectively in its dispute resolution role.
- AMPEY PTY LTD complaint management process will include:
- timely and proportionate responses;
- open and two-way communication where possible;
- fact-based and impartial investigation and decision making; and the
- recognition of the rights of all involved.

Procedural fairness does not imply that, in investigating allegations, the investigator must disclose the reason for investigating. (See also below, **Privacy and Confidentiality**)

### **Risk Assessment**

AMPEY Pty Ltd will manage complaints proportionately:

- staff will resolve minor issues immediately where possible (without neglecting to fulfil reporting requirements);
- the Director (or delegate) will investigate more serious complaints in an appropriate manner (and report appropriately).
- A *proportionate* response will be determined by an assessment of the risk posed to the participant, staff and/or the organisation, including:
- the seriousness of the accusation in terms of participant safety, health and wellbeing;
- the possibility that the complaint represents a deeper or more wide-spread problem;
- the likely degree of difficulty in reaching a satisfactory and timely resolution;
- the impediments to procedural fairness raised by each mode of a management;
- the risk to participant confidentiality posed by an investigation.



## ***Privacy and Confidentiality***

AMPEY Pty Ltd will respect participant and staff privacy in managing complaints and grievances.

- Investigations will be sensitive to the personal trauma allegations may cause to:
- complainants;
- accused parties;
- associated parties – i.e., other participants or staff members.
- Complaints may be submitted anonymously.
- The Director will consider de-identifying complaints prior to:
- each stage of an investigation;
- discussion at Management meetings;
- presenting data or analysis of reviewed complaints.
- Stored complaint records must be protected from unauthorised access.

## **Grievances and Complaints Escalation**

### ***Grievances***

If a complainant remains dissatisfied with the outcome of their complaint or grievance they will be provided with the details of other agencies they can use to assist them to achieve a resolution.

- A *Feedback and Complaints Form* will be made available to the individual to lodge their grievance, however it is not mandatory that they use the form. The *Feedback and Complaints Form* can be used to make anonymous complaints.
- Escalated complaints will be tracked in the *Complaints Register* in the same manner as other complaints and the same communication processes as outlined above will be applied.
- Grievances can be lodged:
- directly with a staff member, either verbally or by providing a completed *Feedback and Complaints Form*;  
by email: [ampeyou@outlook.com](mailto:ampeyou@outlook.com)  
by phone: 0411 919 805



in writing:

Robyn Black

AMPEY PTY LTD

1, 451 Pacific HWY, Wyoming, NSW, 2250

### **Complaints about the Director**

Participants may have complaints about the Director, or any part of the service, and feel uncomfortable to lodge these complaints through AMPEY PTY LTD internal complaint process. In this case:

- they may lodge the complaint with the NDIS Commission;
- Refer to AMPEY's *whistle blowing policy*
- they may approach a staff member and express their concerns; the staff member should support the participant to:
- lodge the complaint anonymously, or
- lodge the complaint with the NDIS Commission.
- they may approach a staff member to engage an advocate to assist them lodge the complaint.

### **Complaint Escalation**

Where participants feel uncomfortable using AMPEY PTY LTD internal complaints process, or want to complain about the Director or the service in general, they may lodge complaints directly with the NDIS Quality and Safeguards Commission.

- The NDIS Commission accepts complaints about:
- services or supports that were not provided in a safe and respectful way,
- services and supports that were not delivered to an appropriate standard.

Complaints to the NDIS Commission can be lodged via:

web: <https://www.ndiscommission.gov.au/>

email: [feedback@ndis.gov.au](mailto:feedback@ndis.gov.au)

phone: 1800 035 544 (free call from landlines) or TTY 133 677.

Interpreters can be arranged.

Complaints may be lodged with the NSW Ombudsman:

by email to [NSWombo@ombo.NSW.gov.au](mailto:NSWombo@ombo.NSW.gov.au)

by phone on 3005 7000 or 1800 068 908

online at <https://www.ombudsman.NSW.gov.au/about-us/contact-us>

NDIS participants purchasing products and services also have rights and protections under the Australian Consumer Law (ACL), including provisions on customer guarantees and unfair contract terms. NSW Fair Trading provides information and advice and in some cases, dispute resolution services for customer disputes under the ACL.

<https://www.NSW.gov.au/law/fair-trading>

### **Referring Complaints**

- Complaints may raise reporting requirements:
- Where complaints allege abuse, neglect or exploitation they will be managed as a reportable incident.
- Where complaints allege criminal conduct they will be referred to the NSW Police and managed as a reportable incident.
- Where complaints allege child-related abuse AMPEY Pty Ltd must report the allegation through the NSW MRG online reporting system.
- For reporting processes, see the Incident Management Policy and Procedure and Preventing and Responding to Abuse, Neglect and Exploitation Policy and Procedure.

### **Record keeping**

AMPEY Pty Ltd will keep and maintain appropriate records of all complaints received by the provider. This will include, where appropriate:

- information about the complaint
- any action taken to remediate or resolve complaints, and
- the outcome of any action taken.
- Records must be kept for 7 years from the date the record was made.

### **Reviews**

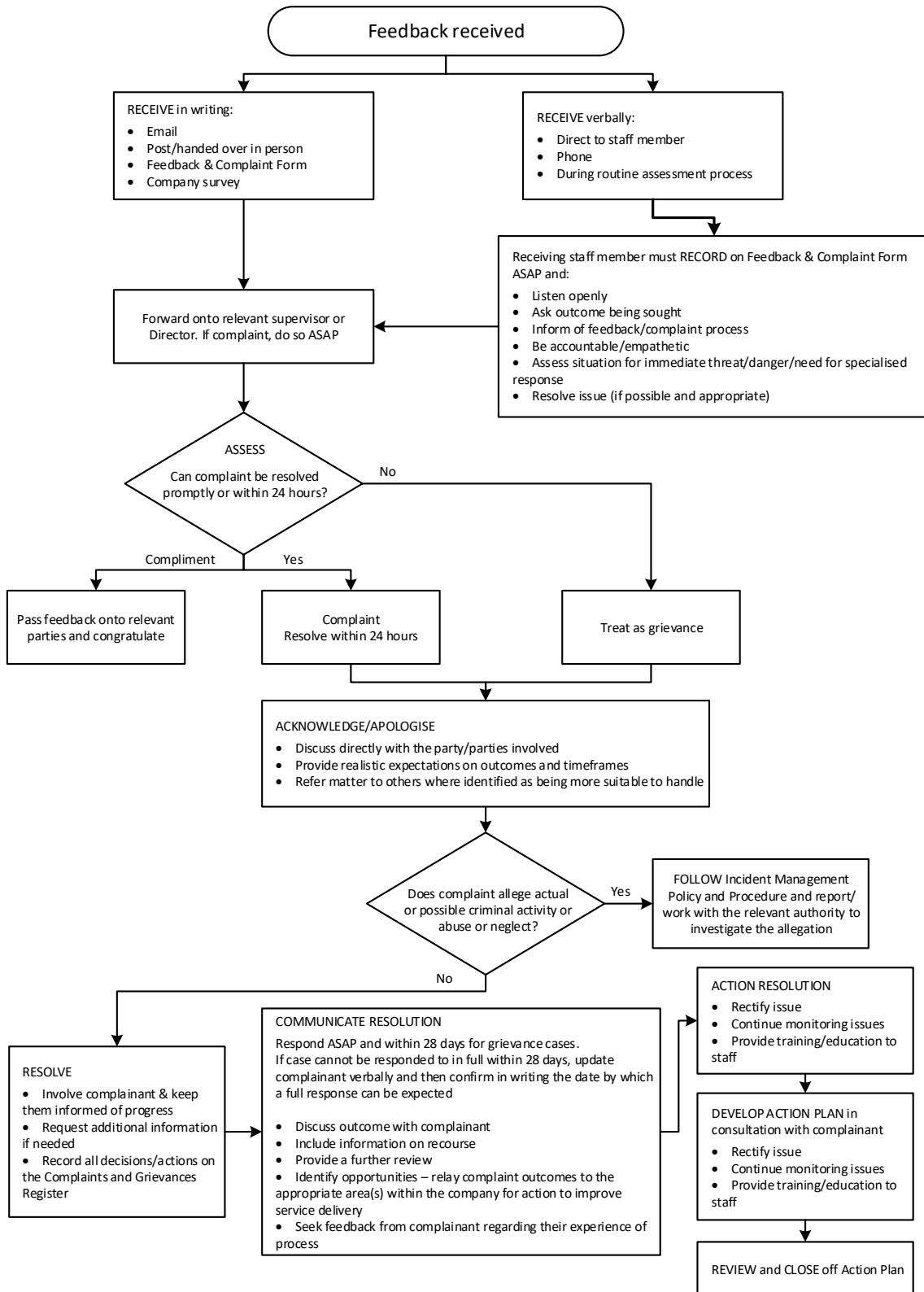
- All complaints will be reviewed proportionately – either formally or informally depending upon the seriousness of complaint.
- Feedback will be sought from the complainant about the resolution of all complaints, and their response to any follow up or implementation of actions.
- Feedback and complaints will be discussed at management meetings as a standing agenda item. The Director will consider de-identifying complaints, where appropriate, in order to preserve the participant's privacy.
- Things to consider in reviewing complaints:



- What was the complaint about? What service, policy or procedure did it call into question?
  - What was the experience for the person who made the complaint, or for any affected participant? Were the issues resolved for them?
  - What information did the complaint provide that will allow you to identify and improve those services, policies and procedures and your organisation as a whole?
  - How effective was the communication with the complainant, any affected participants, affected staff and other stakeholders?
  - Do people using your services, their families, carers and friends require more or improved information about their rights and the complaints process?
  - Does the person who made the complaint feel more comfortable about speaking up in the future?
  - Does anything need to change in your complaints handling system or approach to dealing with complaints?
  - Do staff require further training?
  - Did the handling of the complaint reflect the stated values and expectations for complaint handling? Or, was the complaint perceived as something negative that needed to be dealt with as quickly as possible?
- 
- The Complaints Register will be reviewed annually, as per the Internal Review and External Audit Schedule, in order to:
    - identify and resolve systemic issues raised through the complaints management and resolution process;
    - identify problems within the complaints management process itself;
    - inform the continuous improvement process.
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- Organisation will provide statistical and other information about complaints to the NDIS Commissioner, on request.



## Feedback and Complaints Flowchart





<b>POLICY AMENDMENT RECORD</b>		
<b>DATE</b>	<b>BRIEF DESCRIPTION OF AMENDMENT</b>	<b>AUTHORISED</b>
10/01/2022	Reference to whistle blowing policy added	Jessica Lloyd
12/06/2024	Changing grammar	Kiarne Randall

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*End of policy document. Uncontrolled when printed*

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