

Section	Quality
Policy and Procedure Title	Feedback and Complaints Management Policy and Procedure

1 POLICY STATEMENT

ConnectGV is committed to fostering an organisational culture that values and learns from complaints and feedback to meet participant's needs and continuously improve the service provided.

ConnectGV promotes people's right to speak up and are committed to ensuring that people feel sufficiently confident to express any concerns. All concerns that are raised will be addressed in ways that ensures access and equity, fairness, accountability, and transparency.

2 PRINCIPLES

ConnectGV will:

- ensure that ConnectGV staff are given information about the feedback and complaints management procedure as part of their induction and are aware of procedures for managing feedback received.
- ensure that each participant is provided with information on how to give feedback or make a complaint, including avenues external to ConnectGV and their right to access advocates.
- ensure that participants, and their families, carers and advocates are encouraged and supported to raise any concerns they have about the service or organisation.
- consider all complaints it receives regardless of whether the complainant is a participant of the organisation or not.
- treat all complainants with respect, recognising that the issue of complaint is important to the complainant.
- maintain confidentiality of parties involved, keeping any information private to those directly involved in the complaint and its resolution. Information will only be disclosed if required by law, or if otherwise necessary.
- ensure support and advocacy is available to participants who make a complaint and require support.
- resolve complaints, where possible, to the satisfaction of the complainant.
- deal with all complaints in a timely manner.
- keep parties to the complaint appropriately involved and informed of progress of the complaint.
- ensure that all complainants are aware of and understand how to escalate their complaint to the NDIS Commission or other agencies.
- ensure that a complainant is not penalised in any way or prevented from use of services during the progress of an issue.
- ensure that feedback data (both positive and negative) is considered in organisational reviews and in planning service improvements.

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3 OBJECTIVES

Participants and or their families/advocates/guardians have a right to complain about the service they are receiving without fear of retribution and can expect their complaints to be dealt with promptly.

When commencing with ConnectGV participants are made aware of their right to provide feedback or complain and are provided with an Easy English 'Feedback' document. This document explains how to make a complaint including avenues external to ConnectGV and the participants right to access advocates.

Ongoing support to understand the complaints procedure is provided by ConnectGV staff.

4 DEFINITIONS

Feedback: Information received about a person's experience of ConnectGV services. Feedback may be in the form of complaints, compliments or suggestions for improvement.

Complaint: A complaint is an expression of dissatisfaction that arises out of the provision of a disability service for which a response or resolution is explicitly or implicitly expected. A complaint may also be about how the complaint was handled, where the complaint is that a disability service has not properly investigated, or not taken proper action, upon receiving a complaint.

Compliment: Positive feedback about a person's experience of ConnectGV services.

Complainant: Person making the complaint.

5 CONTEXT

ConnectGV recognises the importance of a positive organisational culture and prioritises learning from feedback and complaints to enhance services and ensure the organisation is meeting the needs of participants. ConnectGV has a commitment to promoting a culture where individuals feel empowered to voice their concerns, knowing that they will be addressed fairly and transparently.

6 RESPONSIBILITIES

- All staff employed or engaged by ConnectGV.
- Manager Quality & Safety is responsible for ensuring this procedure is reviewed at least every three years, or sooner if required. Is also responsible for tabling monthly feedback reports to the agenda of the Senior Leadership Team meeting for review.
- ConnectGV staff are responsible for ensuring they have read this procedure and understand the process to follow when they receive feedback. Where necessary they are responsible for assisting participants to provide feedback, or for logging the feedback themselves into the COSMO system / Complaints Compliments page.

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- Service Leaders / Managers are responsible for ensuring that all feedback received is logged through the COSMO system / Complaints Compliments page, and is assessed and / or investigated, with appropriate actions taken and documented.
- Executive Manager/s are responsible for reviewing complaints, compliments and feedback received and ensuring actions taken have been appropriate to address any issue/s raised.
- Senior Leadership Team are responsible for appropriate governance oversight of complaints raised and any resulting corrective actions taken, within their monthly meeting.

7 PROCEDURE

Information for participants and stakeholders

- Induction and staff training
- All staff are advised of the organisations feedback and complaints management procedure and understand the processes they must follow for reporting feedback and complaints to the organisation.

Receiving Feedback

ConnectGV welcomes information and feedback from participants, families, carers and community which will enable us to improve the quality of services we provide.

- Feedback (both complaints and compliments) may be received by:
 - Telephone
 - In person (face to face)
 - Via the ConnectGV website
 - By email
 - Via Post
 - By requesting a staff member assist them to complete the Feedback form in the back of the Easy English 'Feedback' document
 - By raising an issue at a participant meeting as per the Participant Meeting Agenda / Minutes document

When providing feedback or making a complaint, the person providing the feedback can expect to:

- Be treated with respect, dignity and consideration for their privacy
- Have complaints treated as genuine and properly investigated
- Be given appropriate and easily understood information regarding the complaint process in the form of the Easy English 'Feedback' document
- Be asked what outcome they are seeking from the complaint, to reach resolution
- Have their complaint issues adequately addressed
- Participate in decisions about the management of their complaint
- Have personal information remain confidential within the complaint management process.

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- Can decide at any stage of the complaint process, to get further help or advice from external agencies
- Staff can assist a participant to complete a Feedback form (and subsequently lodge the feedback on COSMO) if requested to do so or if the participant reports something they are not happy with.

Any staff member may be a recipient of a complaint, and is responsible for:

- **Actively listening to the complainant** – Pay close attention to what the person is saying. Hear them out before asking questions to clarify anything the complainant has said.
- **Acknowledging the concern raised** - Acknowledging the problem does not mean that you agree with what the complainant has to say, it just means that you understand them and respect where they are coming from.
- **Explaining what will happen next** – This may be an immediate resolution or referring the complaint on to your Service Leader / Manager for further investigation and action.

It is important that the person providing feedback feels heard and considered in how the matter is resolved. People need to be treated respectfully, courteously and sensitively. Most complaints can be resolved at the point of service through explanation, clarification and conciliation.

Recording Feedback

All feedback (compliments and complaints) received, must be documented on the Participant Management System (COSMO). Refer to the “Basic Navigation of COSMO” handbook available on the ConnectGV intranet. Once completed ensure that your Service Leader / Manager is notified.

Reviewing Complaints

Service Leaders / Managers are responsible for assessing and / or investigating complaints in a timely manner and deciding how to respond.

The Manager Quality and Safety will oversee and report the actions to the Executive Managers, CEO and Board.

Once an appropriate action has been decided upon, the Service Leaders / Managers will inform the complainant of the outcome of the complaint:

- upheld (and if so, what will be done to resolve it)
- resolved (and how this has been achieved); or
- if no further action can be taken, the reasons for this.

If the complainant is not satisfied with the outcome of their complaint:

- the complainant or their advocate should contact the Executive Manager- NDIS Services to discuss the complaint further.
- If the complaint is still not dealt with satisfactorily / resolved the complainant or their advocate should raise the issue with the Chief Executive Officer
- If this does not resolve the complaint, the Executive Manager - NDIS Services in liaison with the Chief Executive Officer will assist the complainant to contact the NDIS Commission.

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Cooperation in external investigations

If a person makes a complaint about ConnectGV to an external body (e.g. NDIS Commission, Disability Services Commissioner, Ombudsman) the Executive Manager- NDIS Services (in liaison with the Chief Executive Officer), will be responsible for liaising with the body responsible for investigating the issue. ConnectGV will fully cooperate in any investigation which may take place. This includes participating in early resolution, conciliation, and/or reporting to the body about resolution and corrective actions if required.

Record keeping

A register of complaints and appeals is retained in the Participant Management System (COSMO) for a minimum of seven years after the complaint has been made.

Records pertaining to complaints and appeals are retained in the Quality \ Complaints folder.

Records retained are:

- Details of the complainant and the nature of the complaint
- Date lodged
- Action taken
- Date of resolution and reason for decision
- Indication of complainant being notified of outcome
- Complainant response and any further action
- Copies of all relevant correspondence

The complaints register and files are confidential and can only be accessed by the Senior Leadership Team (SLT).

Continuous improvement of the complaints management system

The Manager - Quality & Safety tables a statistical summary of feedback including complaints and appeals for the month to the agenda of the Senior Leadership Team meeting for review. The Senior Leadership Team are responsible for appropriate governance oversight of complaints raised and actions taken, within their monthly meeting.

The complaints register is reviewed periodically to understand trends, address systemic issues and inform improvement activities.

8 REFERENCES

NDIS Practice Standards and Quality Indicators November 2021 Version 4

9 LEGISLATION

- Charter of Human Rights and Responsibilities Act 2006 (VIC)
- Disability Act 2006 (VIC)
- Freedom of Information Act 1992
- Information Privacy Act 2000 (VIC)
- National Disability Insurance Scheme Act 2013

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- Victorian Civil & Administrative Tribunal Act 1998

10 STANDARDS

- NDIS Practice Standards and Quality Indicators
- National Standards for Disability Services (DSS) (Dec 2013)
- Social Service Standards
- National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018
- National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018

11 RELATED POLICIES / DOCUMENTS

- Explanatory Statement, National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018
- NDIS Quality and Safeguards Commission: Effective Complaint Handling Guidelines for NDIS Providers, 2017
- Disability Services Commissioner: Good practice guide and self-audit tool: developing an effective person-centred complaints resolution culture and process, 2nd Edition 2013.
- NDIS Quality and Safeguards Commission: Handling Complaints and Fixing Problems, Information for You (Easy Read Version)
- Incident Management Policy and Procedure
- Continuous Improvement Policy
- Feedback form

Author	Manager Quality and Safety
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Revision History

Version	Approved	Approval Date	Changes Made	Committee / Board	Document Section
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V3	Amended	7 Feb 2020	Management	CPAR	Quality

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V4	Approved	16/11/2022	Management	SMT	Quality
V5		March 2023	Major amendments throughout document. Combines Feedback & Complaints policy and Feedback & Complaint Procedure. Procedure	Senior Leadership	Quality
V6		20/06/2024	Minor changes, updated on to P/P template	Senior Leadership	Quality