

Policy No: 06

Policy Title: Feedback and Complaints Policy

Review Date: December 2021

1. Purpose

BCYF acknowledges that feedback and complaints are a valuable form of client participation and provide an opportunity to learn and improve the quality of the services to clients and the broader community.

The purpose of this policy is to:

- ensure a standardised feedback and complaints process through which the organisation actively seeks, responds to and manages feedback and complaints received from clients and external stakeholders
- ensure feedback and complaints are handled in a fair, sensitive, respectful and timely manner
- outline the standards and principles for the management of feedback and complaints within BCYF.

2. Scope

This policy applies to all BCYF Board Directors, non-Director Board Committee members, employees, contractors, volunteers, carers and students on placement, referred to throughout this Policy as **'Workplace Participants'**.

Initial enquiries or complaints from Past Care Leavers about their time in care and/ or in relation to the National Redress Scheme will be responded to under this Policy. Such enquiries shall be notified to and/ or escalated to the Office of the CEO to determine the appropriate pathway for response.

Matters not considered applicable to this policy are:

- internal staff complaints (refer to BCYF's Grievance Procedure)
- reporting (and disclosure) of conduct related to the operations of BCYF that may be illegal, unethical, cause harm to individuals, financial or non-financial loss to BCYF, and/or damage to BCYF's reputation (refer to BCYF Whistleblowers Policy)
- reporting (and disclosure) of allegations of client abuse (refer to BCYF *Responding to Disclosures, Allegations and Suspicions of Abuse Policy*)

3. Policy

BCYF will actively encourage clients and external stakeholders to provide feedback or make a complaint.

BCYF will ensure that all clients and external stakeholders understand their rights and the process for providing feedback, making a complaint and/or appealing a decision of BCYF.

BCYF will ensure all feedback and complaints are responded to in a fair, sensitive, respectful and timely manner and are managed through a standardised process based on the principles of access, equity, privacy, procedural fairness, accountability and transparency.

BCYF acknowledges that feedback and complaints may be of a sensitive nature. BCYF will ensure clients and external stakeholders right to privacy and confidentiality is upheld during the feedback and complaints process. Any information relating to feedback or a complaint will be distributed on a need to know basis.

All complaints will be resolved as close to the source as possible and in the shortest possible timeframe.

4. Definitions

Advocacy – is a process of supporting and enabling people to:

- express their views and concerns
- access information and services
- defend and promote their rights and responsibilities
- Explore choices and options.

Allegation – a claim or assertion that someone has done something illegal or wrong, typically one made without proof.

Balance of Probability – is a legal term that applies to administrative investigations and unlike court decisions is not burdened by proof but rather that it is more likely to have occurred than to have not.

Corrective action - addressing an ongoing systemic issue to eliminate the root cause of the problem to prevent recurrence.

Complaint - an expression of dissatisfaction about the service or action of BCYF, or its workplace participants by a person or organisation that is directly affected by the service or action.

Complaint Severity Rating – the guide used by BCYF to determine the level of impact/potential impact of the complaint and the appropriate response. BCYF Complaint Severity Ratings are: Low, Medium, High and Extreme (Refer to Appendix 2- BCYF Complaints Severity Rating).

Complainant – any person, or external stakeholder making a complaint. Where a complaint is made on behalf of someone else, the person making the complaint will need to demonstrate that they have authorisation to make the complaint.

Complaints Officer (CO) - the person that will assist the complainant throughout the formal complaints process. The CO's role is to gather the facts regarding the complaint, and to ensure that each complaint is responded to in a fair and timely manner.

Compliment - an explicit expression of satisfaction or praise in relation to the organisation or workplace participant working on behalf of BCYF.

External stakeholder – refers to clients' family members/carers/significant others, client support person/advocate, representatives of organisations/bodies and general members of the public.

Feedback - information given by a client or external representative in relation to the organisation or service provided. Feedback may be in the form of a compliment, suggestion or complaint.

Formal Complaint - a complaint made to the Complaints Officer, CEO or Board Chair which is of high or extreme severity and requires a formal investigation or where a complainant elects to have a lower severity complaint managed by the Complaints Officer.

Grievance - an actual or supposed circumstance regarded as just cause for complaint.

Informal Complaint –a complaint which is received by a staff member/supervisor that is of low or medium severity and can be managed at the program level. The complainant does not wish to make a formal complaint to complaints officer.

National Redress Scheme - has been established to support people who were sexually abused as children while in the care of an institution. The establishment of a National Redress Scheme was recommended by the Royal Commission into institutional responses to child sexual abuse. The Scheme commenced on 1 July 2018 and will run for 10 years.

Past Care Leaver – any person who has been in the care of Glastonbury Community Services, Time for Youth, Barwon Youth and/or any of their founding agencies.

Procedural Fairness - a dispute resolution concept which ensures “natural justice” for complaint investigations. It is concerned with the procedures used by the investigator/ review team and decision-panel, rather than the actual outcome reached. It is comprised of three main values:

1. All parties involved in an investigation have the right to be heard and their statements accurately recorded.
2. An unbiased decision maker will decide the outcome, investigator(s) will not determine the outcome.
3. Decisions will be determined by the relevant evidence presented to the decision maker and the decision will be based on the balance of probability.

RiskMan – is BCYF’s centralised online system for reporting, tracking, and investigating incidents, feedback and complaints.

Suggestion - a comment that indicates how BCYF could improve its service delivery. It may be part of a compliment or complaint but may also be offered as standalone information.

5. Responsibilities

The **Board**, through the **Board Quality & Risk Committee** is responsible for:

- monitoring and reviewing reports and data relating to feedback and complaints to ensure BCYF are managing feedback and complaints in line with industry standards, legislative requirements and accreditation frameworks
- managing risk relating to organisational reputation
- responding to complaints relating to the CEO and/or Board members and to High/Extreme or escalated complaints from clients and external stakeholders, as required.

The **CEO** is responsible for:

- the review and oversight of all organisational policies
- overseeing complaints relating to past care leavers
- approving this policy and subsequent revisions, endorsed by the Executive Management Team (EMT)
- ensuring the necessary resources are provided to effectively implement this policy
- ensuring complaints where relevant are notified to the Board and/or relevant Board Committees
- encouraging an environment where feedback and complaints are handled promptly and fairly
- where required, ensuring escalated and unresolved complaints are effectively managed.

The **Executive Director Strategy & Sustainability** is responsible for:

- the development, implementation and review of this Policy
- ensuring the management of feedback and complaints is consistent with this policy
- monitoring the organisation’s performance on feedback and complaints
- ensuring feedback and complaints data is reported to relevant Committees (e.g. Board Quality & Risk Committee and Practice Governance Committee) and considered in organisational system reviews and planning service improvements.

The **Practice Governance Committee** is responsible for:

- reviewing and analysing feedback and complaint data, identifying opportunities and requirements for service and practice improvements
- identifying feedback and complaint trends to enable corrective action and preventable issues from reoccurring.

The **Manager Quality & Risk** is responsible for:

- acting as the Complaints Officer for BCYF
- maintaining BCYF's RiskMan system
- screening all Formal Complaints and in consultation with the relevant Manager/Executive Director and where required the CEO determining appropriate response and investigation. This decision will be based on the severity of the complaint and what attempts (if any) have been made to resolve the matter previously
- reporting significant complaints (deemed to be extreme/high severity) to the CEO
- ensuring all Formal Complaints are responded to and managed in line with BCYF's Feedback and Complaints Procedure and the past care leavers complaint procedure
- ensuring all staff are appropriately trained in the feedback and complaints process and RiskMan
- preparing and submitting feedback and complaints data to the relevant Committees (e.g. Practice Governance Committee, Board Quality & Risk Committee).

Executive Directors/Managers are responsible for:

- ensuring the effective and efficient management of feedback and complaints within their areas of responsibility in accordance with the Feedback and Complaints Policy, Procedure and BCYF Feedback Flow Chart (Appendix 1)
- ensuring complaints are recorded and responded to in accordance with the Feedback and Complaints Procedure
- developing and implementing continuous improvements to services and systems in response to feedback and complaints

The **Client Participation Officer** is responsible for:

- actively promoting the feedback and complaints policy and procedure across BCYF
- strengthening feedback and complaint mechanisms within client services
- supporting staff and Managers to actively seek and respond to client feedback and complaints
- supporting the Complaints Officer in investigating and responding to complaints on behalf of BCYF

Workplace Participants are responsible for:

- actively seeking feedback from clients
- ensuring all clients are provided with information on and understand how to provide feedback or make a complaint
- responding to all feedback and complaints in line with the Feedback and Complaints policy and procedure.

6. Policy Application

This policy is to be applied in line with BCYF's Feedback and Complaints Procedure and the following:

- Clients will not be treated differently or prevented from accessing a service as a result of providing feedback or making a complaint. Every effort will be made to ensure clients feel comfortable to continue to accessing the service after providing feedback or making a complaint.
- All clients must be provided information on how to provide feedback or make a complaint at their first contact with BCYF via the BCYF Client Information Brochure.
- Information on how to provide feedback or make a complaint will be available on the BCYF intranet and website and promoted across BCYF and to all clients and external stakeholders.
- Upon request, information will be provided to clients and external stakeholders in the language of their choice and in a manner that is understandable to them and culturally sensitive.
- Feedback and complaints must be promptly acknowledged and the person providing feedback or making a complaint advised of the process and timelines. All formal complaints are to be

acknowledged in writing as soon as possible and within five business days of receipt and should aim to be resolved within 28 days or in line with any external contractual obligations (i.e. 21 business days for NDIS clients).

- Feedback and complaints must be reported on BCYF's RiskMan Feedback Module.
- Feedback and complaints will be managed in an objective and unbiased manner; conflicting interests should not interfere with or be perceived to interfere with the management and resolution of complaints.
- Feedback and complaints will be addressed in an equitable manner, with each person being treated in the same way no matter who they are.
- Privacy and confidentiality of parties involved will be maintained, keeping information private to those directly involved in the complaint and its resolution.
- Personal information obtained in the feedback and complaints process will only be disclosed or used in compliance with relevant privacy laws (refer BCYF Privacy and Confidentiality Policy).
- Outcomes and decisions made relating to complaints will be appropriately communicated to all parties as appropriate, to ensure the facts and reasoning that formed the basis for the decision are fully understood.
- All parties subject to a complaint will be provided with sufficient information to enable them to understand and respond to the complaint made against them.
- Advocacy is available to clients who make a complaint and require support.
- All Workplace Participants that are subject to allegations of a complaint will be informed of all relevant facts and given the opportunity to respond.
- All feedback and complaints will be investigated by the most appropriate person, depending on the nature of the complaint.
- Complaints relating to a Board Director and/or CEO will be referred to the Board Chair. The Chair, or an approved delegate, will respond to the complaint and where required may, appoint an impartial external party to undertake an investigation. Where the Chair is the subject of a complaint, the complaint should be referred to another member of the Board.

7. Legislation, Acts, Standards

Protected Disclosure Act (2012)

Racial and Religious Tolerance Act (2001)

Ombudsman Act (1973)

Privacy and Data Protection Act (2014)

Equal Opportunity Act (1995)

Disability Act (2006)

Children, Youth and Families Act (2005)

Charter of Human Rights and Responsibilities Act (2006)

Failure to Disclose Crimes Amendment Act (2014)

Failure to Report Crimes Amendment Act (2014)

Racial Discrimination Act (1975)

Privacy Act (1988)

Human Rights and Equal Opportunity Commission Act (1986)

Freedom of Information Act (1982)

Disability Discrimination Act (1992)

Sex Discrimination Act (1984)

QIC Health & Community Services Standards 7th Ed

Human Services Standards

National Quality Framework

Victorian Child Safe Standards

AGPAL Standards

8. Related Documents

BCYF Client Information Brochure
06.01 Feedback and Complaints Procedure
04 Incident Reporting & Management Policy
07 Privacy and Confidentiality Policy
09 Client Participation Policy
10 Child Safe Policy
11 Responding to Disclosures, Allegations and Suspicions of Abuse Policy
16.03 Grievance Procedure
19.02 Client Rights & Responsibilities Procedure
22 Whistleblower Policy

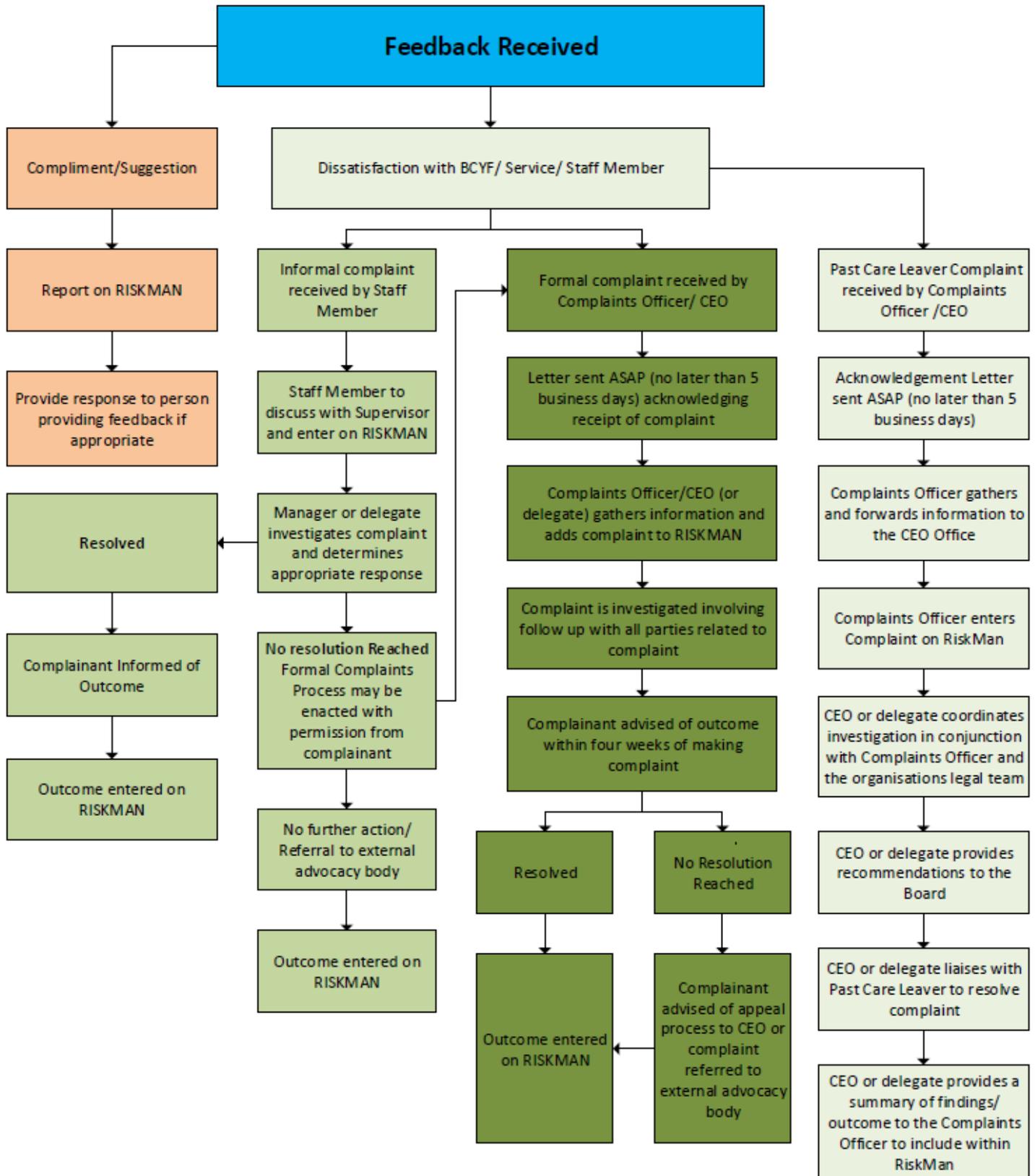
9. Appendices

Appendix 1- BCYF Feedback Flowchart (page 7)
Appendix 2 – Complaints Severity Rating (page 8)

10. Document History

Version Number	Approval Date	Approved By	Brief Description
V1	April 2016	EMT	New BCYF Policy.
V2	Dec 2018	EMT	Revised in line with formal review of Feedback and Complaints Process.
Custodian	Executive Director Strategy & Sustainability		

Appendix 1 – BCYF Feedback Flow Chart



Appendix 2 – Complaints Severity Rating

	Low	Medium	High	Extreme
Description of severity level	<p>A single issue of a minor nature.</p> <p>The problem is easily resolved. There are no ongoing adverse effects on the client, program or BCYF and the matter is now resolved.</p>	<p>The issue relates to a matter that is of moderate concern or where multiple minor issues are raised.</p> <p>The problem is usually able to be resolved at the program level and does not have serious consequences for the client, program or BCYF.</p>	<p>The issue relates to a matter that is of significant concern to the complainant with an adverse impact on the client, program or BCYF.</p> <p>Potential to be escalated to an external regulatory body as a complaint.</p>	<p>Substantial issues are involved generally with a serious adverse impact to client, program or BCYF.</p> <p>A complaint is received by CEO or member of BCYF Board.</p> <p>A complaint is received from funding/ advocacy body.</p>
Examples of severity level	<p>Concerns raised about a single issue such as: lack of communication from staff member to client, client feels that staff member has not provided adequate support/ follow up. Client does not feel that program is meeting their expectations.</p>	<p>There has been a misunderstanding about costs, access to service, multiple minor concerns or an error in practise which does not have serious consequences for the client, program or BCYF.</p>	<p>A client withdraws from the program due to extreme dissatisfaction, or where family relationships breakdown as a result of service provided.</p> <p>Client feels that they have been mistreated or discriminated against by the program.</p>	<p>A client suffers personal injury, raises concern about professional conduct, negligence, unlawful or unethical acts or lack of informed consent.</p> <p>Complainant threatens to sue BCYF.</p> <p>Potential reputational damage to BCYF.</p>
Resolution	<p>Review and response by Supervisor/ Manager. Follow up occurs with complainant either by staff member directly or supervisor.</p> <p>Issues are resolved at the program level through line management processes.</p>	<p>Review and Response by Manager or delegate. Where possible complaint is able to be resolved at program level. If complaint is not able to be resolved at program level or the complainant wishes to make a formal complaint, then it is referred to Complaints Officer.</p>	<p>Investigation required by Complaints Officer or delegate.</p> <p>There may be significant quality assurance implications requiring policy/ practise to be reviewed and changed to prevent recurrence.</p>	<p>Investigation required by Complaints Officer or delegate.</p> <p>CEO is notified via appropriate Executive Director.</p> <p>There may be significant quality assurance implications requiring policy/ practise to be reviewed and changed to prevent recurrence.</p>