

## Complaints Management Policy

SBH Disability Services is committed to ensuring that any person or organisation using SBH Disability Services' services or affected by its operations has the right to lodge a complaint or to appeal a decision of the organisation. All concerns that are raised will be addressed in ways that ensure access and equity, fairness, accountability, and transparency.

The organisation will provide a complaints and appeals management procedure that:

- allows any person to make a complaint or provide feedback
- facilitates complaints by cultivating a supportive environment in which they can be made
- is simple, accessible, and easy to use
- is effectively communicated and promoted to all clients and stakeholders
- is proportionate to the size of the organisation and the services it provides
- ensures complaints or appeals are fairly assessed and responded to promptly
- is procedurally fair and follows principles of natural justice
- complies with legislative requirements

### RESPONSIBILITIES AND DELEGATIONS

**This policy applies to:** All staff

**Specific responsibilities:** CEO: ensure compliance with policy; manage register; report summaries to the Board

**Policy approval:** Board

### DEFINITIONS

**Complaint:** is an expression of dissatisfaction made to or about an organisation regarding its staff, services or products that warrants response or resolution.

**Complainant:** is an employee, client, advocate, entity or member of the public who expresses their dissatisfaction about an organisation to either the organisation itself or an external body.

**Escalation:** is the process of reporting complaints to the NDIS Quality and Safeguarding Commission (on 1800 035 544) or Anti-Discrimination Commission of Queensland (on 1300 130 670) if the complainant is not satisfied with the outcome of their complaint.

### PRINCIPLES

SBH Disability Services will:

- ensure that all clients, 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 or not the complainant is a client of the organisation
- 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 clients who make a complaint and require support
- resolve complaints, where possible, to the satisfaction of the complainant
- clients, families and advocates have access to the organisation's complaints management policy
- deal with all complaints in a timely manner, and aim to provide a formal response to the complainant within 7 days of the complaint being received
- keep parties to the complaint appropriately involved and informed of progress of the complaint
- ensure that Board members and staff are given information about the complaints procedure as part of their induction and are aware of procedures for managing client feedback and complaints
- ensure all service users, stakeholders and members are aware of the complaints policy and procedures
- ensure that all complainants are aware of and understand how to escalate their complaint to The NDIS Quality and Safeguarding Commission (on 1800 035 544) or Anti-Discrimination Commission of Queensland (on 1300 130 670).
- 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
- review and evaluate the accessibility and effectiveness of the complaints management system and continually improve its processes

## PROCEDURES

### Information for clients and stakeholders

SBH Disability Services complaints and appeals procedure is documented for clients and stakeholders in the Client Service Charter which is on public display in the SBH Disability Services offices and on our website, and in the Privacy Policy, which is also available on our website. Information on feedback, complaints and disputes is also included in the SBH Disability Services Service Agreement. Clients with specific communication needs will be made aware of this information during initial interactions with our therapy staff.

All clients will be informed of their rights and responsibilities with regards to complaints and appeals at the earliest possible stage of their involvement with the organisation.

The Client Service Charter and/or the Privacy Policy contain information on the following:

- how to make a complaint or lodge an appeal, including an anonymous complaint
- contact details for lodging a complaint or appeal
- how the organisation will deal with the complaint or appeal, the steps involved and the timelines
- the rights of the complainant to an advocate, support person or interpreter
- how the person will be informed about the outcome of their complaint or appeal
- how to make a complaint to an external body including contact details

### Training procedures

Staff will be trained on the complaints management procedures during their induction, and as part of ongoing refresher training.

Managers will undergo training for complaints management and resolution to support clients throughout the complaint process and appropriately respond to complaints in an empathetic manner. This will include open communication strategies such as acknowledging the grievance without being defensive and making apologies while accepting responsibility for what occurred.

### Making a complaint

A person wishing to make a complaint may do so in writing or verbally to:

- the staff member they were dealing with at the time
- the supervisor of that staff member
- the CEO
- the Board or
- the NDIS Quality and Safeguarding Commission (on 1800 035 544) or Anti-Discrimination Commission of Queensland (on 1300 130 670)

Complaints may be made by:

- submitting a completed Feedback and Complaints form, available on the SBH Disability Services website ([www.spinabifida.org](http://www.spinabifida.org)). Hard copies available on request.
- written complaints may be sent by mail to PO Box 8022 Woolloongabba QLD 4102, or by email to [enquiries@sbhqueensland.org.au](mailto:enquiries@sbhqueensland.org.au). The Business Support Manager will be responsible for receiving this correspondence and directing it to the appropriate person.
- feedback and complaints via telephone may be made on (07) 3844 4600
- anonymous complaints may be made by writing anonymously to SBH PO Box 8022 Woolloongabba QLD 4102.

If the complaint is about:

- a staff member, the complaint will normally be dealt with by the staff member's supervisor
- a member of the senior management team, the complaint will normally be dealt with by the CEO
- the CEO, the complaint will normally be dealt with by the Board Chair

### **Lodging an appeal**

Clients or their advocates may lodge an appeal if they disagree with a decision made by the organisation, or by a staff member. An appeal should be made in writing and submitted to the CEO.

### **Procedure for complaints and appeals management**

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

1. Receiving the complaint:
  - listening to the complainant, acknowledging the concern raised, and explaining the next steps to the complainant
  - Depending on the type and severity of the complaint, either discussing with the complainant an agreed upon resolution (for smaller matters) or referring the complaint on to the CEO for further investigation and action.

The person managing the complaint will be responsible for:

2. Processing the complaint or appeal:
  - registering the complaint or appeal in the Complaints Register
  - informing the complainant that their complaint has been received and providing them with information about the process and time frame

**3. Investigating the complaint or appeal:**

- examining the complaint within five business days of the complaint being received
- investigating the complaint and deciding how to respond
- informing the complainant by letter within seven days of the complaint being received of what is being done to investigate and resolve it, and the expected time frame for resolution
- As far as possible, complaints or appeals will be investigated and resolved within two weeks of being received. If this time frame cannot be met, the complainant will be informed of the reasons why and of the alternative time frame for resolution.

**4. Responding to and resolving the complaint:**

- making a decision or referring to the appropriate people for a decision within two weeks of the complaint being received
  - informing the complainant of the outcome and the reasons for any decisions made
  - 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
- informing the complainant of any options for further action if required
- if an apology is in order, ensuring that the appropriate person makes the apology and informs the complainant what the organisation intends to do to avoid further grievance

**5. Reviewing the complaint:**

- If the complainant is not satisfied with the investigation and proposed resolution of their complaint or appeal, they can seek a further review of the matter by the Board within one month.

**6. Referral to external procedure:**

- A formal external complaints procedure may follow Step 5 if the complainant is still not satisfied with the outcome.
- The complainant will be referred to the NDIS Quality and Safeguarding Commission (on 1800 035 544) or Anti-Discrimination Commission of Queensland (on 1300 130 670) and provided information and support to make the complaint externally if necessary.

**Complaints involving specific staff members or volunteers**

The CEO has delegated responsibility for resolving complaints or disputes involving staff members or volunteers.

Internal complaints, where a staff member or volunteer makes a complaint concerning another staff member or volunteer, will be dealt with in accordance with SBH Disability Services' grievance, complaints, and disputes policy.

External complaints by clients or stakeholders made against a staff member (including volunteers) will be managed by the CEO who will:

- notify the staff member or volunteer of the complaint and its nature
- investigate the complaint and provide the staff member or volunteer with an opportunity to respond to any issues raised
- attempt to mediate the dispute (if appropriate) and/or attempt to resolve the matter to the satisfaction of the outside party
- take any other action necessary to resolve the issue

Any disciplinary action against a staff member or volunteer arising from a complaint will be taken in accordance with the procedures contained in SBH Disability Services' disciplinary procedures.

Complaints involving the CEO will be managed by the Board Chair.

**Complaints involving organisation members or Board members**

Complaints made against a member, or a Board member will be referred to the Chair. The Chair, or their delegate, will:

- notify the person about whom a complaint is being made of the complaint and its nature
- investigate the complaint and provide the member with an opportunity to respond to any issues raised
- attempt to mediate the dispute (if appropriate) and/or attempt to resolve the matter to the satisfaction of the outside party

Where the Chair is the subject of a complaint, the complaint should be referred to the Secretary.

If the matter remains unresolved, the Chair or Secretary will raise the matter at the next Board meeting. Depending on the seriousness of the complaint, the Board may:

- deal with the matter at its meeting, or
- refer the matter to an independent conciliator.

**Cooperation in external investigations**

If any person makes a complaint about SBH Disability Services to an external body (including police, Ombudsman) the CEO will be responsible for liaising with the body responsible for investigating the issue. SBH Disability Services 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 will be kept in the Complaints Register kept on SharePoint for a minimum of seven years after the complaint has been made (or for complaints involving a child client directly or indirectly, for 7 years after the child reaches the age of 18 years). The register will be maintained by the CEO and will record the following for each complaint or appeal:

- 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 correspondence will be kept in BOSS.

The complaints register and files will be confidential, and access is restricted to the CEO and Business Support Manager

**Reporting to the Board**

A statistical summary of complaints and appeals will be kept in a folder in SharePoint accessible only by the CEO and maintained by the CEO. The CEO will be responsible for preparing a report on the patterns, trends and frequency of complaints quarterly to the Board.

Results from this report will be reviewed by the Board and used to:

- inform service planning by including a review of complaints and appeals in all service planning, monitoring and evaluation activities
- inform decision-making by including a report on complaints and appeals as a standard item on staff and management meeting agendas.

**Continuous improvement of the complaints management system**

The complaints management system will be reviewed and evaluated at least annually. This will include:

- review of all complaint and feedback policies and procedures
- client and staff feedback about the accessibility and effectiveness of the complaints management system
- implementation of a continuous improvement plan based on the review and feedback received

### DOCUMENT AND RECORD KEEPING

#### Related Policies (with Document Identifier & Embedded Link):

CS-1.3 [Confidentiality Policy](#)

CS-1.18 [Client Rights policy](#)

GO-1.10 [Privacy Policy](#)

PI-1.3 [Client Feedback Policy](#)

BD-1.1 [Board role and responsibilities policy](#)

HR-1.18 [Grievances and Disputes policy](#)

#### Forms or Other Organisational Documents

GO-3.2 [Client Service Charter](#)

PI-2.2 [Complaint review form](#)

PI-2.3 [Service User Complaint form](#)

PI-2.4 [Quality Improvements Ideas form](#)

PI-5.1 [Complaints register](#)

PI-6.4 [Feedback and Complaints Flyer](#)

#### Legislation

Associations Incorporation Act 1981 (Qld)

NDIS Act 2013

NDIS (Complaints Management and Resolution) Rules 2018

#### Contractual Obligations

NDIA ILC Grants

Status as an NDIS Provider

#### Standards

NDIS Commission Standards