



SERVICE DELIVERY

## **E.08 Complaints & Feedback**

REVIEWED: May 2024

## E.08 Complaints & Feedback Policy

This policy describes how Mercy Services manages and deals with complaints and feedback about any of the services it provides.

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

Mercy Services welcomes information and feedback from clients which will enable us to improve the quality of our services.

Mercy Services 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, residents 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.
- there be no repercussions for any client, resident, their families, carer or advocates that submit a complaint in good faith.
- complies with legislative requirements.

### Record of policy development

Version	Date approved	Policy Changes
1.0	26/05/2020	Approved by RCI on 26 May 2020
1.1	01/03/2022	Minor update to whistleblowing contact details & title changes
2.0	18/04/2023	Transferred policy to new organisational template and revised to align with organisational values and position
2.1	30/05/2024	Updated to reference MCSAL policy and additional whistleblower contact

### Responsibilities and delegations

This policy applies to	All personnel, Board, Staff, Volunteers and Contractors
Specific responsibilities	Risk & Continuous Improvement Committee, Head of Risk & Compliance
Policy approval	Risk & Continuous Improvement Committee with Board endorsement

### Policy context – this policy relates to:

Standards	NDIS Practice Standards Aged Care Quality & Safety Standards
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Legislation	N/A
Contractual obligations	N/A
Organisation policies	C.05 Quality Improvement, C.08 Managing Performance, C.12 Bullying Harassment and Discrimination, C.14 Grievance Policy, E.15 Privacy Policy, E.27 Whistleblowing Policy, E.23 Safeguarding Policy, MCSAL-P-003 Complaints Policy
Forms, record keeping, other documents	Quality reviews, Continuous Improvement Register, Plan for Continuous Improvement, Complaints factsheet, Feedback form

## 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 Aged Care Quality & Safety Commission or the NSW Ombudsman if the complainant is not satisfied with the outcome of their complaint.

## Link with Mercy Services values

This policy aligns with the following Mercy Services values in its implementation and practice:

**Justice:** ensuring Mercy Services acts with integrity, fairness and honesty in responding to and managing complaints or feedback raised.

**Respect:** this policy promotes respect for the dignity of everyone through its emphasis on openness, integrity and honesty in our practice. It aims to respect a residents/clients and their families right to factual explanations and prompt response to an adverse event.

## Principles

The following guiding principles underpin Mercy Services approach to handling complaints and feedback:

1. **Accessibility** – complaint practices are easily available to those who interact or engage with Mercy Services. Practices should be easily understood with a variety of methods for raising feedback appropriate to the individual.
2. **Confidentiality** – privacy and confidentiality of matters raised are to be maintained at all times, with personal information maintained in line with the Privacy Policy.
3. **Procedural Fairness** – all complaints are addressed in an equitable manner that is objective and unbiased.
4. **Process and Timeframes** – complaints are managed under a set framework in an efficient and timely manner. This includes acknowledgement of a complaint with expected timeframes communicated for response. Processes for delays or escalation should also be outlined.

In practice, this means Mercy Services will:

- ensure that all clients, residents, 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 and residents who make a complaint and require support.
- resolve complaints, where possible, to the satisfaction of the complainant.
- clients, residents, 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 14 days of the complaint being received.
- keep parties to the complaint appropriately involved and informed of progress of the complaint.
- ensure that Board members, staff and volunteers 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 **Aged Care Quality & Safety Commission** or the **NSW Ombudsman**.
- ensure that a complainant suffers no repercussions and 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.

## Practices

Mercy Services will respond to complaints in line with an open disclosure process, following these principles:

1. expression of apology/regret when a person has experienced harm or detriment;
2. explanation of Mercy Services situation and the policy or process breakdown that may have contributed to this harm;
3. explanation of the consequences/changes that have resulted from Mercy Services response to the complaint; and
4. explanation of the steps Mercy Services will take to ensure there is no recurrence of the harm to the person or others.

## Information for Clients and Stakeholders

Mercy Services complaints and appeals procedure will be documented for clients and stakeholders in the Complaints Fact Sheet which is made available:

- Upon admission to one of our programs or to our residential facility.
- On our website [www.mercyservices.org.au](http://www.mercyservices.org.au).
- Upon request to any staff member or volunteer.
- When responding to a complaint escalated to Risk & Compliance or the Chief Executive Officer (CEO).
- For people who are vision impaired, non-verbal or do not speak English the policy will be communicated in a manner that the person prefers.

All clients and residents 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 Complaints Fact Sheet will contain information on the following:

- how to make a complaint or lodge an appeal, including an anonymous complaint;
- contact person 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; and
- how to make a complaint to an external body including contact details.

## Training

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

Relevant staff will undergo training for complaints management and resolution to support clients throughout the complaint process and appropriately respond to complaints in an empathetic manner.

## Making a Complaint

We encourage any person making a complaint to approach a staff member or volunteer they feel comfortable dealing with. Alternatively, if a person wishes to make a complaint via a separate body they can via:

Speak Up Integrity Hotline	Phone: 1800 324 775 Email: <a href="mailto:speakup@coreintegrity.com.au">speakup@coreintegrity.com.au</a> Online: <a href="https://speakup.coreintegrity.com.au/mercyservices">https://speakup.coreintegrity.com.au/mercyservices</a>
Aged Care Quality & Safety Commission	Phone: 1800 951 822 Website: <a href="https://www.agedcarequality.gov.au/making-complaint/lodge-complaint">https://www.agedcarequality.gov.au/making-complaint/lodge-complaint</a> Post: GPO Box 9819, SYDNEY NSW 2000
NSW Ombudsman	Phone: 1800 451 524 Website: <a href="https://www.ombo.nsw.gov.au/Making-a-complaint">https://www.ombo.nsw.gov.au/Making-a-complaint</a> Post: Level 24, 580 George Street SYDNEY NSW 2000

Complaints may be made directly by:

- submitting a completed Feedback and Complaints form into one of the Suggestion Boxes located at:
  - 24 Combo Lane, Singleton
  - 15 Stenhouse Drive, Cameron Park
  - 32 Union Street, Tighes Hill
  - 13 Brooks Street, West Wallsend.
- sending an online enquiry at [www.mercyservices.org.au](http://www.mercyservices.org.au) under 'Contact Us' or alternatively emailing to [complaints@mercyservices.org.au](mailto:complaints@mercyservices.org.au).
- sending written complaints to **13 Brooks Street, West Wallsend NSW 2286**. The Complaint Officer will be responsible for receiving this correspondence and directing it to the appropriate person.
- telephone on **(02) 4962 6680**.
- the independent hotline through **Speak Up Integrity** or the **Aged Care Quality & Safety Commission**.

If the complaint is about:

- a *staff member*, the complaint will normally be dealt with by the Head of the Team the staff member is from and a member of the People & Culture team or alternatively a member of the Risk & Compliance team.
- a *person in the Leadership Team*, the most senior People & Culture member and Head of Risk & Compliance are available to gather information in the first instance.
- the *CEO*, the Chair of the Board will be forwarded or advised of the complaint. The Head of People & Culture and Head of Risk & Compliance are available to gather information in the first instance, which can then be forwarded to the Chair of the Board of Directors for the Board's review. Complaints against a ministry CEO are to be managed in accordance with this policy with the Board also having access to the organisation's Whistleblowing Protection Officer as an independent investigator.
- a *Board member* (in their capacity as a director of Mercy Services), the complaint will be managed in accordance with this policy. Where the complaint relates to their role as a director of MCSAL, then MCSAL-P-003 Complaints Policy is to be followed.

## Lodging an Appeal

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

## 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 to the relevant supervisor or Head of the Team the complaint is about 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 timeframe.
3. Investigating the complaint or appeal:
  - examining the complaint within **3 days** of the complaint being received.
  - investigating the complaint and deciding how to respond.
  - informing the complainant by letter, email or phone call within **7 days** of the complaint being received of what is being done to investigate and resolve it, and the expected timeframe for resolution.
  - as far as possible, complaints or appeals will be investigated and resolved within **14 days** of being received. If this time frame cannot be met, the complainant will be informed of the reasons why and of the alternative timeframe for resolution.
4. Responding to and resolving the complaint:
  - making a decision or referring to the appropriate people for a decision within **14 days** 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 Complaints Officer.
6. Referral to external procedure:
  - a formal external complaints procedure may follow Step 4 if the complainant is still not satisfied with the outcome. The complainant will be referred to the **Aged Care Quality & Safety Commission** or the **NSW Ombudsman** and provided information and support to make the complaint externally if necessary.

## Complaints Involving Staff or Volunteer Conduct

The People & Culture Business Partner 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 Mercy Services C.14 Grievance Procedure.

External complaints by clients, residents or stakeholders made against a staff member or volunteer will be managed by the People & Culture team, or appropriate delegated

person – Head of Risk & Compliance, Head of the relevant Team, 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 C.08 Managing Performance Policy.

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

### **Complaints Involving a Board Director**

Complaints made against a Director of the Board 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 Director 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 Chair of Mercy Ministry Companions.

If the matter remains unresolved, it will be raised 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 Mercy Ministry Companions Ltd (MMC) as the Trustee overseeing the Board under which Mercy Services operates.

Where a complaint is in relation to a director's role as a member of MCSAL, MCSAL-P-003 Complaints Policy is to be followed which includes the avenues for raising a complaint or feedback. Where this arises, the individual can contact the CEO or Head of Risk & Compliance for these options.

### **Cooperation in External Investigations**

If any person makes a complaint about Mercy Services to an external body (including police, or the Ombudsman) the CEO will be responsible for liaising with the body responsible for investigating the issue. Mercy 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 and Compliments Register for a minimum of seven years after the complaint has been made. The register will be maintained by the Complaints Officer 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; and
- complainant response and any further action.

Copies of all correspondence will be kept in the client's, resident's or staff member's file.

The complaints register and files will be confidential, and access is restricted to:

- CEO;
- Head of Risk & Compliance;
- People & Culture team;
- Head of Home & Community Care;
- Head of Community Transport;
- AOD Manager;
- Residential Facility Services Manager;
- Risk & Compliance Officer; and
- Executive Project Officer.

A statistical summary of complaints and appeals will also be kept in the Complaints and Compliments Register and maintained by the Complaints Officer. The Complaints Officer will be responsible for preparing a report on the type of complaints/incidents and their frequency.

Results from this report will be reviewed by the Risk & Continuous Improvement Committee and the Board of Directors (either at a Board meeting or Board sub-committee meeting), 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 Risk & Continuous Improvement Committee meeting agendas.
- influence continuous improvement initiatives through learned experiences.

## Continuous Improvement of Complaints Management System

The complaints management system will be reviewed and evaluated on a regular basis and 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; and
- implementation of a continuous improvement plan based on the review and feedback received.