

## 1. Introduction

### 1.1 Purpose

This policy is intended to ensure that we handle complaints fairly, efficiently and effectively.

Our complaint management system is intended to:

- enable us to respond to issues raised by people making complaints in a timely and cost-effective way
- boost public confidence in our administrative process, and
- provide information that can be used by us to deliver quality improvements in our services, staff and complaint handling.

This policy provides guidance to our staff, and people who wish to make a complaint, on the key principles and concepts of our complaint management system.

### 1.2 Scope

This policy applies to all staff, volunteers, external contractors and Board Members receiving or managing complaints from the public made to or about us, regarding our services, staff and complaint handling.

Staff grievances are dealt with through separate mechanisms [see our grievance policy].

### 1.3 Organisational commitment

The Physical Disability Council of NSW (PDCN) expects staff at all levels to be committed to fair, effective and efficient complaint handling. The following table outlines the nature of the commitment expected from staff and the way that commitment should be implemented.

Who	Commitment	How
Executive Officer of PDCN	<p>Promote a culture that values complaints and their effective resolution</p> <p>Establish and manage our complaint management system.</p>	<p>Report publicly on PDCN's complaint handling.</p> <p>Provide adequate support and direction to staff responsible for handling complaints.</p> <p>Analyse complaints register for trends and issues arising from complaints.</p> <p>Encourage all staff to be alert to complaints and assist those responsible for handling complaints resolve them promptly.</p> <p>Encourage staff to make recommendations for system improvements.</p> <p>Recognise and reward good complaint handling by staff.</p> <p>Support recommendations for service, staff and complaint handling improvements arising from the analysis of complaint data</p>
Staff	<p>Demonstrate exemplary complaint handling practices</p>	<p>Treat all people with respect, including people who make complaints.</p> <p>Assist people make a complaint, if needed.</p> <p>Comply with this policy and its associated procedures.</p> <p>Provide feedback to management on issues arising from complaints.</p> <p>Provide suggestions to management on ways to improve the organisation's complaints management system.</p> <p>Implement changes arising from individual complaints and from the analysis of complaint data as directed by management.</p>
Volunteers, external contractors and Board Members	<p>Understand and comply with PDCN's complaint handling practices.</p>	<p>Treat all people with respect, including people who make complaints.</p> <p>Be aware of PDCN's complaint handling policies and procedures.</p> <p>Assist people who wish to make complaints access PDCN's complaints process.</p> <p>Be alert to complaints and assist staff handling complaints resolve matters promptly.</p> <p>Provide feedback to management on issues arising from complaints.</p> <p>Implement changes arising from individual complaints and from the analysis and evaluation of complaint data as directed by management.</p>

## **2. Terms and Definitions**

### **Complaint**

Expression of dissatisfaction made to or about us our services, staff, or about the handling of a complaint, where a response or resolution is explicitly or implicitly expected or legally required.

A complaint covered by this Policy can be distinguished from:

- staff grievances [see our grievance policy]
- responses to requests for feedback about the standard of our service provision [see the definition of 'feedback' below]
- reports of problems or wrongdoing merely intended to bring a problem to our notice with no expectation of a response [see definition of 'feedback']
- service requests [see definition of 'service request' below], and
- requests for information.

### **Complaint management system**

All policies, procedures, practices, staff, hardware and software used by us in the management of complaints.

### **Dispute**

An unresolved complaint escalated either within or outside of our organisation.

### **Feedback**

Opinions, comments and expressions of interest or concern, made directly or indirectly, explicitly or implicitly, to or about us, about our services or complaint handling where a response is not explicitly or implicitly expected or legally required.

### **Service request**

Any contact requesting provision of PDCN's programs, workshops or training. In addition, any complaints about external matters such as Government policies and programs, access or advocacy issues.

### **Grievance**

A clear, formal written statement by an individual staff member about another staff member or a work related problem.

### **Policy**

A statement of instruction that sets out how we should fulfil our vision, mission and goals.

### **Procedure**

A statement or instruction that sets out how our policies will be implemented and by whom.

### 3. Guiding principles



#### 3.1 Facilitate complaints

##### People focus

We are committed to seeking and receiving feedback and complaints about our services, systems, practices, procedures, products and complaint handling.

Any concerns raised in feedback or complaints will be dealt with within a reasonable time frame.

At the time of complaint, people making complaints will be:

- provided with information about our complaint handling process
- provided with multiple and accessible ways to make complaints
- listened to, treated with respect by staff and actively involved in the complaint process where possible and appropriate, and
- provided with reasons for our decision/s and any options for redress or review.
- provided with the contact details for the NSW Ombudsman to enable access to an external complaint mechanism at any point
- informed that they can seek access to an external complaints mechanism such as the Ombudsman immediately, and that they do not need to wait for PDCN to resolve their complaint internally first.

##### No detriment to people making complaints

We will take all reasonable steps to ensure that people making complaints are not adversely affected because a complaint has been made by them or on their behalf.

##### Anonymous complaints

We accept anonymous complaints and will carry out an investigation of the issues raised where there is enough information provided.

##### Accessibility

We will ensure that information about how and where complaints may be made to or about us is well publicised. All service users are provided with a Rights and Responsibilities document upon entry to a service or in a workshop pack and an external complaints document is available on the PDCN website or as a hard copy as requested. We will ensure that our systems to manage complaints are easily understood and accessible to everyone, particularly people who may require assistance.

If a person prefers or needs another person or organisation to assist or represent them in the making and/ or resolution of their complaint, we will communicate with them through their representative if this is their wish. Anyone may represent a person wishing to make a complaint with their consent (e.g. advocate, family member, legal or community representative, member of Parliament, another organisation).

### **No charge**

Complaining to us is free.

## **3.2 Respond to complaints**

### **Early resolution**

Where possible, complaints will be resolved at first contact with PDCN.

### **Responsiveness**

We will promptly acknowledge receipt of complaints.

We will assess and prioritise complaints in accordance with the urgency and/or seriousness of the issues raised. If a matter concerns an immediate risk to safety or security the response will be immediate and will be escalated appropriately.

We are committed to managing people's expectations, and will inform them as soon as possible, of the following:

- the complaints process
- the expected time frames for our actions
- the progress of the complaint and reasons for any delay
- their likely involvement in the process, and
- the possible or likely outcome of their complaint.

We will advise people as soon as possible when we are unable to deal with any part of their complaint and provide advice about where such issues and/or complaints may be directed (if known and appropriate).

We will also advise people as soon as possible when we are unable to meet our time frames for responding to their complaint and the reason for our delay.

### **Objectivity and fairness**

We will address each complaint with integrity and in an equitable, objective and unbiased manner.

We will ensure that the person handling a complaint is different from any staff member whose conduct or service is being complained about.

Conflicts of interests, whether actual or perceived, will be managed responsibly. In particular, internal reviews of how a complaint was managed will be conducted by a person other than the original decision maker. In the situation where a complaint is made about the Executive Officer, the complaint will be directed to the President of the PDCN Board.

### **Responding flexibly**

Our staff are empowered to resolve complaints promptly and with as little formality as

possible. We will adopt flexible approaches to service delivery and problem solving to enhance accessibility for people making complaints and/or their representatives.

We will assess each complaint on its merits and involve people making complaints and/or their representative in the process as far as possible.

### **Confidentiality**

To the full extent permitted by law, we will protect the identity of individuals making complaints. Complaints files will be confidential and access will be restricted to staff members and the Executive Officer.

Information about complaints and how they are being resolved will also be reported to the Board of PDCN.

### **Referring complaints to the police**

If any complaint alleges criminal or corrupt behaviour then PDCN will refer the complaint to the NSW Police.

## **3.3 Manage the parties to a complaint**

### **Complaints involving multiple agencies**

Where a complaint involves multiple organisations, we will work with the other organisation/s where possible, to ensure that communication with the person making a complaint and/or their representative is clear and coordinated.

Subject to privacy and confidentiality considerations, communication and information sharing between the parties will also be organised to facilitate a timely response to the complaint.

Where a complaint involves multiple areas within our organisation, responsibility for communicating with the person making the complaint and/or their representative will also be coordinated.

Where our services are contracted out, we expect contracted service providers to have an accessible and comprehensive complaint management system. We take complaints not only about the actions of our staff but also the actions of service providers.

### **Complaints involving multiple parties**

When similar complaints are made by related parties we will try to arrange to communicate with a single representative of the group.

### **Complaints involving the Executive Officer or PDCN Board Members**

The Executive Officer will generally have responsibility for all complaints. However, complaints against the Executive Officer will be managed by the President of the PDCN Board.

Complaints about PDCN Board Members will be referred to the President of the PDCN Board for investigation. Where the President is the subject of a complaint, the complaint will be referred to the Vice President.

### **Empowerment of staff**

All staff managing complaints are empowered to implement our complaint management

system as relevant to their role and responsibilities.

Staff are encouraged to provide feedback on the effectiveness and efficiency of all aspects of our complaint management system.

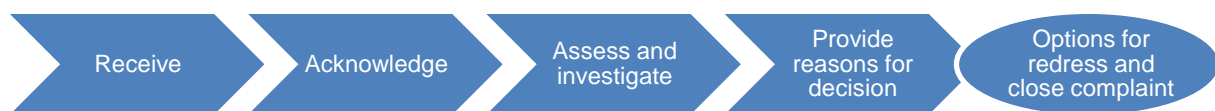
### **Managing unreasonable conduct by people making complaints**

We are committed to being accessible and responsive to all people who approach us with feedback or complaints. At the same time our success depends on:

- our ability to do our work and perform our functions in the most effective and efficient way possible
- the health, safety and security of our staff, and
- our ability to allocate our resources fairly across all the complaints we receive.

When people behave unreasonably in their dealings with us, their conduct can significantly affect the progress and efficiency of our work. As a result, we will take proactive and decisive action to manage any conduct that negatively and unreasonably affects us and will support our staff to do the same in accordance with this policy.

## **4. Complaint management system**



### **4.1 Introduction**

When responding to complaints, staff should act in accordance with our complaint handling procedures as well as any other internal documents providing guidance on the management of complaints.

Staff should also consider any relevant legislation and/or regulations when responding to complaints and feedback.

The five key stages in our complaint management system are set out below.

### **4.2 Receipt of complaints**

Unless the complaint has been resolved at the first contact, we will record the complaint and its supporting information in the PDCN Complaints Register. We will also assign a unique identifier to the complaint file (**Complaint Number - consecutive/Year**)

The record of the complaint will document:

- the contact information of the person making a complaint
- issues raised by the person making a complaint and the outcome/s they want
- any other relevant information, and
- any additional support the person making a complaint requires.

### **4.3 Acknowledgement of complaints**

We will acknowledge receipt of each complaint promptly, and preferably within two working days.

Consideration will be given to the most appropriate medium (e.g. email, letter) for communicating with the person making a complaint.

#### **4.4 Initial assessment and addressing of complaints**

##### **Initial assessment**

After acknowledging receipt of the complaint, we will confirm whether the issue/s raised in the complaint is/are within our control. We will also consider the outcome/s sought by the person making a complaint and, where there is more than one issue raised, determine whether each issue needs to be separately addressed.

When determining how a complaint will be managed, we will consider:

- How serious, complicated or urgent the complaint is
- Whether the complaint raises concerns about people's health and safety
- How the person making the complaint is being affected
- The risks involved if resolution of the complaint is delayed, and
- Whether a resolution requires the involvement of other organisations.

##### **Addressing complaints**

After assessing the complaint, we will consider how to manage it. To manage a complaint we may:

- Give the person making a complaint information or an explanation
- Gather information from the person or area that the complaint is about, or
- Investigate the claims made in the complaint.

We will aim to resolve complaints within 10 working days. We will keep the person making the complaint up to date on our progress, particularly if there are any delays. We will also communicate the outcome of the complaint using the most appropriate medium. Which actions we decide to take will be tailored to each case and take into account any statutory requirements.

#### **4.5 Providing reasons for decisions**

Following consideration of the complaint and any investigation into the issues raised, we will contact the person making the complaint and advise them:

- the outcome of the complaint and any action we took
- the reason/s for our decision
- the remedy or resolution/s that we have proposed or put in place, and
- any options for review that may be available to the complainant, such as an internal review, external review or appeal.

If in the course of investigation, we make any adverse findings about a particular individual, we will consider any applicable privacy obligations that may apply under the *Privacy and Personal Information Protection Act 1998* (NSW) and any applicable exemptions in or made pursuant to that Act, before sharing our findings with the person making the complaint.



#### 4.6 Closing the complaint, record keeping, redress and review

All outside contact with PDCN is registered using our customer relationship management system – Salesforce. (Salesforce CRM is accessible only to PDCN staff via secure user code and password). Each enquiry will record the source of contact (i.e. mail, phone or email), client contact details, reasons for contact and a brief description of actions taken/recommended. Any complaint resolved at first contact will be recorded as a Salesforce enquiry [see our Salesforce Manual for further details on enquiries]. If a complaint is able to be resolved at point of contact, staff should notify the Executive Officer and direct them to the Salesforce enquiry before the complaint is resolved.

All other complaints requiring escalation will be entered into the complaints register [kept in folder labelled ‘PDCN Complaints Register’] in secure computer drive accessed via password by PDCN staff only. The complaints register should document all relevant information including:

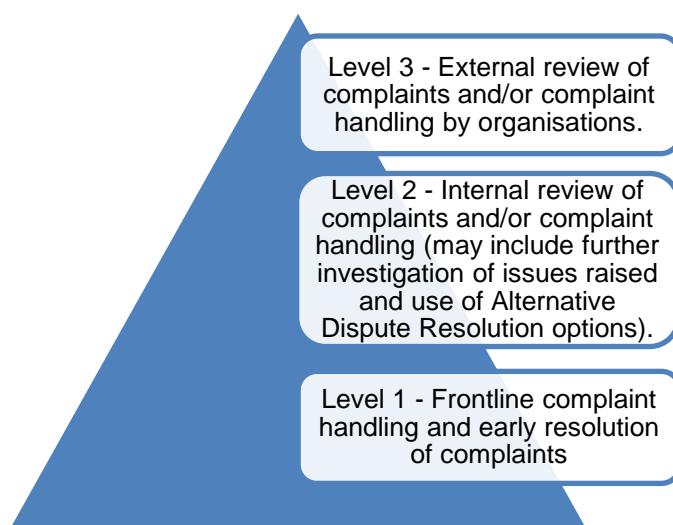
- How we managed the complaint
- The outcome/s of the complaint (including whether it or any aspect of it was substantiated, any recommendations made to address problems identified and any decisions made on those recommendations), and
- Any outstanding actions that need to be followed up.

We will ensure that outcomes are properly implemented, monitored and reported to the Executive Officer and PDCN Board.

#### 4.7 Alternative avenues for dealing with complaints

We will inform people who make complaints to or about us about any internal or external review options available to them (including any relevant Ombudsman or oversight bodies) at the time of making their complaint. We will also clearly inform them that they can seek access to an external complaints mechanism such as the Ombudsman immediately, and that they do not need to wait for PDCN to resolve their complaint internally first.

#### 4.8 The three levels of complaint handling



We aim to resolve complaints at the first level, the frontline (Level 1). Wherever possible, staff will be adequately equipped to respond to complaints, including being given

appropriate authority, training and supervision.

Where this is not possible, we may decide to escalate the complaint to a more senior officer within PDCN (Level 2). This second level of complaint handling will provide for the following internal mechanisms:

- assessment and possible investigation of the complaint and decision/s already made, and/or
- facilitated resolution (where a person not connected with the complaint reviews the matter and attempts to find an outcome acceptable to the relevant parties).

At both Level 1 and Level 2, the Executive Officer will have responsibility for managing and supervising the response to any complaint, unless the complaint is against the Executive Officer.

Where a person making a complaint is dissatisfied with the outcome of a PDCN Level 1 response to their complaint, they may request a Level 2 Internal Review of their complaint by a more senior officer.

They will also be informed that they may seek an external review of our decision (Level 3) and given the details for suggested external complaints bodies, including:

1. NSW Ombudsman

**02 9286 1000** or 1800 451 524

[www.ombo.nsw.gov.au](http://www.ombo.nsw.gov.au)

2. Australian Charities and Not-for-profits Commission (ACNC)

13 22 62

[www.acnc.gov.au](http://www.acnc.gov.au)

## **5. Accountability and learning**

### **5.1 Analysis and evaluation of complaints**

We will ensure that complaints are recorded in a systematic way so that information can be easily retrieved for reporting and analysis.

Analysis of our complaints register will be undertaken to monitor trends, measure the quality of our customer service and make improvements.

### **5.2 Monitoring of the complaint management system**

We will continually monitor our complaint management system to:

- ensure its effectiveness in responding to and resolving complaints, and
- identify and correct deficiencies in the operation of the system


Monitoring may include the use of audits, complaint satisfaction surveys and online listening tools and alerts.

### **5.3 Continuous improvement**

We are committed to improving the effectiveness and efficiency of our complaint management system. To this end, we will:

- support the making and appropriate resolution of complaints

- implement best practices in complaint handling
- recognise and reward exemplary complaint handling by staff
- regularly review the complaints management system and complaint data, and
- implement appropriate system changes arising out of our analysis of complaints data and continual monitoring of the system.

Version #	Approval Date/ Board President sign off	Approved by
1	 13.2.18	<b>PDCN Board</b> (Chris Sparks President)