

Complaints and Feedback Management Policy and Procedure

1. Purpose and Scope

Belong at Home (BaH) will actively seek, respectfully receive and consistently action feedback and complaints. Raising concerns about the quality of care is a normal part of service delivery and provides an opportunity for BaH to become aware of issues, find solutions and improve care.

The purpose of this policy is to ensure a transparent and coordinated approach to our overall Feedback Management Process, to be adhered to by all BaH workers. The term workers includes all employees, volunteers, board members and contractors.

2. Definitions

Complainant	A client, worker, advocate, entity or member of the public who expresses their dissatisfaction about BaH to either BaH itself or an external body.
Open Disclosure	An open discussion with clients and/or their representatives when something goes wrong that has harmed or had the potential to cause harm to a client.
Reprisal	Any act of retaliation or punishment taken against someone, in response to them exercising their rights, raising concerns, or reporting misconduct.

3. Policy Statement

Belong at Home is committed to ensuring that any person or organisation using its services or affected by its operations has the right to provide feedback, make complaints about care and services, or to appeal a decision made by Belong at Home.

Belong at Home ensures that its clients and others can provide feedback and make complaints without reprisal, and commits to manage complaints transparently. All concerns that are raised will be addressed in ways that ensure access and equity, fairness, accountability and continuous improvement.

The organisation will implement a complaints and appeals management system that:

- encourages, allows and supports 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;
- ensures complaints or appeals are fairly assessed and responded to promptly;
- maintains confidentiality of the people involved;
- ensures relevant workers are trained in complaints, feedback and the roles and functions of aged care advocates; and
- complies with legislative requirements.

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4. Procedures

Identifying Feedback

Feedback may be raised by a client, representative/carer, worker, other providers, advocate or concerned individual. Clients are encouraged to provide respectful feedback to workers during service delivery. BaH workers are required to report client or representative feedback (unless the individual requests this not occur) for investigation.

Feedback will also be proactively sought through annual surveys, ad hoc surveys, committees, manager phone calls to clients to assess worker performance and more general satisfaction.

Reporting Feedback

- Written feedback or complaints from clients can be recorded on the Feedback Form, via our website, a letter or email. Anyone can assist a client to complete the form.
- Feedback Forms are available within clients in home files or at their local branch.
- Verbal feedback can be given over the phone or in person. Workers may call the Care Support Hotline or afterhours to report immediate concerns.
- Once received, the feedback is to be entered into Sandwai using either the Complaint, Compliment or Concern with Client note types which ensure the appropriate Care Partner/CSC, Site Manager, Support Coordinator and Executive Managers are made aware of the feedback to support timely review and/ address feedback.
- While Sandwai will be the initial location for reporting client related feedback, the feedback, inclusive of the investigation is recorded in BaH's Quality Management System Logiqc.
- Logiqc entry/accountability will depend on the type/severity of the incident. The Site Manager will manage the incident, unless the matter is serious, escalated to the Executive by the client/ representative or presented by an external agency. In these situations, the relevant executive (CEO, Quality and Client Experience Manager, Operations Manager or Clinical Services Manager) will take the lead.
- The BaH Escalation and Severity Protocol must be considered and where applicable, applied.
- Privacy requirements to be undertaken in the recording and investigation of complaints, information should only be shared on an as need only basis.
- Compliments should be acknowledged through a Shout Out on Employment Hero (EH). Client names are not used on EH to preserve privacy (use wording such as "a South Bunbury client").
- The Site Manager or Care Partner/CSC should review and confirm further reporting requirements such as the Serious Incident Response Scheme (SIRS) reporting or escalation to the Executive Management Team due to severity/consequences.
- Internal complaints where a worker has made a complaint about another worker will be managed in accordance with the Grievance Policy and Procedure.

Actioning Feedback

- It is the role of the actioning Care Partner/CSC and Site Manager to ensure the immediate safety and wellbeing of involved parties following a complaint.
- Complaints relating to staff must be managed by a manager/Supervisor. Complaints involving managers should be managed by an appropriate Executive Manager. Complaints involving the CEO should be managed by the Board Chair (or delegate).

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- Person/s affected by complaints are informed and given the opportunity to be involved in the resolution process.
- Support should be offered and provided; and not assumed that this will be provided by another party (i.e. client's family) or that the complainant does not require any support.
- When responding to a complaint, it is essential to consider other factors related to the matter. Typical actions may include:
 - asking affected people if they're okay;
 - Recommending timely and appropriate medical/psychological treatment for affected people as applicable;
 - shaping your response to consider the views of all affected people;
 - stopping, preventing and reducing the risk of the issue happening again where possible;
 - contacting relevant family members or representatives as soon as it's practical/consent provided;
 - helping those affected access advocates or support services if required;
 - logging related incidents to Logiqc (if applicable); and
 - determining if the incident is reportable and notifying in line with requirements.

Investigating Feedback

- BaH practices Open Disclosure following any complaint involving an incident in line with the Open Disclosure Policy and Procedure.
- When investigating any matter, the following factors must be considered:
 - the impact of the issue on the client and/or their representative's confidence in BaH;
 - the underlying causes of the issue;
 - the likelihood of recurrence;
 - whether the same or similar issue or underlying cause has occurred in the past;
 - whether it involves people who have been involved in other complaints in the past;
 - if workers involved are required to be notified and offered the opportunity to respond;
 - the complexity of the complaint (for example, where the facts are in question or the underlying cause is unclear);
 - additional actions required to address the issue that occurred;
 - additional actions that may reduce the occurrence of a similar issue in the future, including any systemic changes; and
 - if the matter is a reportable incident under the SIRS/Escalation protocol e.g. report to CEO/Exec/Board.

Resolving the Feedback

- The complainant and relevant parties should be offered the opportunity to hear about the investigation that has taken place, the outcome and the reasons for any decisions made.
- Where possible, complaints should be resolved to the satisfaction of the complainant.
- If an apology is in order, ensure that the appropriate person makes the apology and informs the complainant what BaH intends to do to avoid further grievance.
- If no further action can be taken, the complainant should be made aware of the reason/s.
- Inform the complainant of any options for further action if required.

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- The resolution approach must be consistent with the Statement of Rights and the complainant should be provided with information about independent aged care advocates and the Complaints Commissioner if necessary.
- Key details that should be captured in the Logiqc record include:
 - investigation and analysis;
 - implementing changes and improvements; and
 - if the complainant has been informed of the outcome and their response.

Lodging an appeal

- Complainants or their advocates may lodge an appeal if they disagree with a decision made by BaH or if they are not satisfied with the investigation and proposed resolution to their complaint.
- Appeals are made in writing and submitted to the Quality and Client Experience Manager. Where the complainant is still not satisfied with the outcome, they can be assisted to/advised to contact the Complaints Commissioner or an Aged Care Advocate.

Improving/ Implementing Changes

In some circumstances, BaH leadership undertake remedial action to prevent similar complaints from recurring in the future. Whenever a complaint is raised or issue occurs, the accountable manager/executive should consider whether:

- it may have been prevented (or the severity of the impact lessened) by action taken by someone in BaH;
- there is an ongoing risk to clients, visitors, workers or others; and
- if there are actions that can be undertaken to prevent or minimise the risk of a recurrence.

Remedial actions may include:

- providing or mandating individual and/or service-wide training or re-training;
- making changes to the organisational or the Quality and Clinical Governance Framework;
- developing, reviewing and updating BaH's practices and procedures to support workers to manage emerging risks and issues;
- making changes to the service environment or equipment used to provide care and services;
- taking actions to promote a safe culture of care
- making additional staff available to assist clients with certain activities;
- seeking specialist assistance and/or implementing strategies to manage client behaviours;
- timely referrals for reassessment;
- updating care planning documentation to address the cause or impacts of the issue; and
- disciplinary action against a worker arising from a complaint, taken in accordance with the disciplinary procedures.

Complaint Handling Timeframes

Step 1. Complaint received:

- Initial phone/email contact confirming receipt within 2 business days;

Step 2. Initial investigation:

- Within 5 business days of the complaint, post acknowledgment of complaint i.e. 7 business days (if possible), provide a verbal update to complainant.

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- If complaint was in writing and serious in nature, provide verbal/ and written response within 5 business days.

Step 3. Outcome:

- Meeting or discussion with the complainant confirming outcome of investigation and to confirm the complainant is accepting of the outcome within 2 weeks of step 2 (if possible based on the availability of other parties).

Step 4. Written response to client if initial complaint was in writing and serious in nature:

- Within 5 days of step 3.

The complainant should be contacted and notes recorded on Logiqc if these timeframes are unable to be met, inclusive of a documented reason for the delay. Written responses should reflect the complainant's method of post or email.

Closing the Loop

Logiqc will enable the collection of data relating to feedback, supporting the leadership team to:

- identify and address systemic issues raised by the complaint;
- identify and analyse trends in relation to complaints;
- provide feedback and training to staff about preventing and managing complaints;
- provide information to the Regulatory Bodies such as the Commission as requested; and
- provide reports to the Board, Quality and Clinical Governance Committee (QCAC), Client Advisory Committee (CAC) and Quality Care Advisory Committee (QCAC).

No Reprisal

As per the Statement of Rights, clients have the right complain free from reprisal, and to have complaints dealt with fairly and promptly. All workers are responsible for ensuring clients are free from reprisal following feedback and complaints and failure to maintain this requirement may result in performance management or counselling of the involved worker/s.

Referral to other agencies

The Aged Care Quality and Safety Commission (ACQSC) handles a range of complaints and are available to call on 1800 951 822. BaH will cooperate with external investigations including Commission complaints, SIRS and Police investigations etc. This includes participating in early resolution, conciliation and/or reporting to the body about the resolution and corrective actions if required. An appropriate executive manager will be responsible for liaising with the investigation (such as the CEO, The Quality and Client Experience Manager or Operations Manager).

The Serious Incident Response Scheme (SIRS)

The SIRS aims to prevent and reduce incidents of abuse and neglect in Commonwealth funded aged care services. The SIRS requires providers to have effective systems in place to identify, record, manage and resolve all incidents and to notify all reportable incidents that occur, or are alleged or suspected to have occurred to the ACQSC (and the police where there are reasonable grounds).

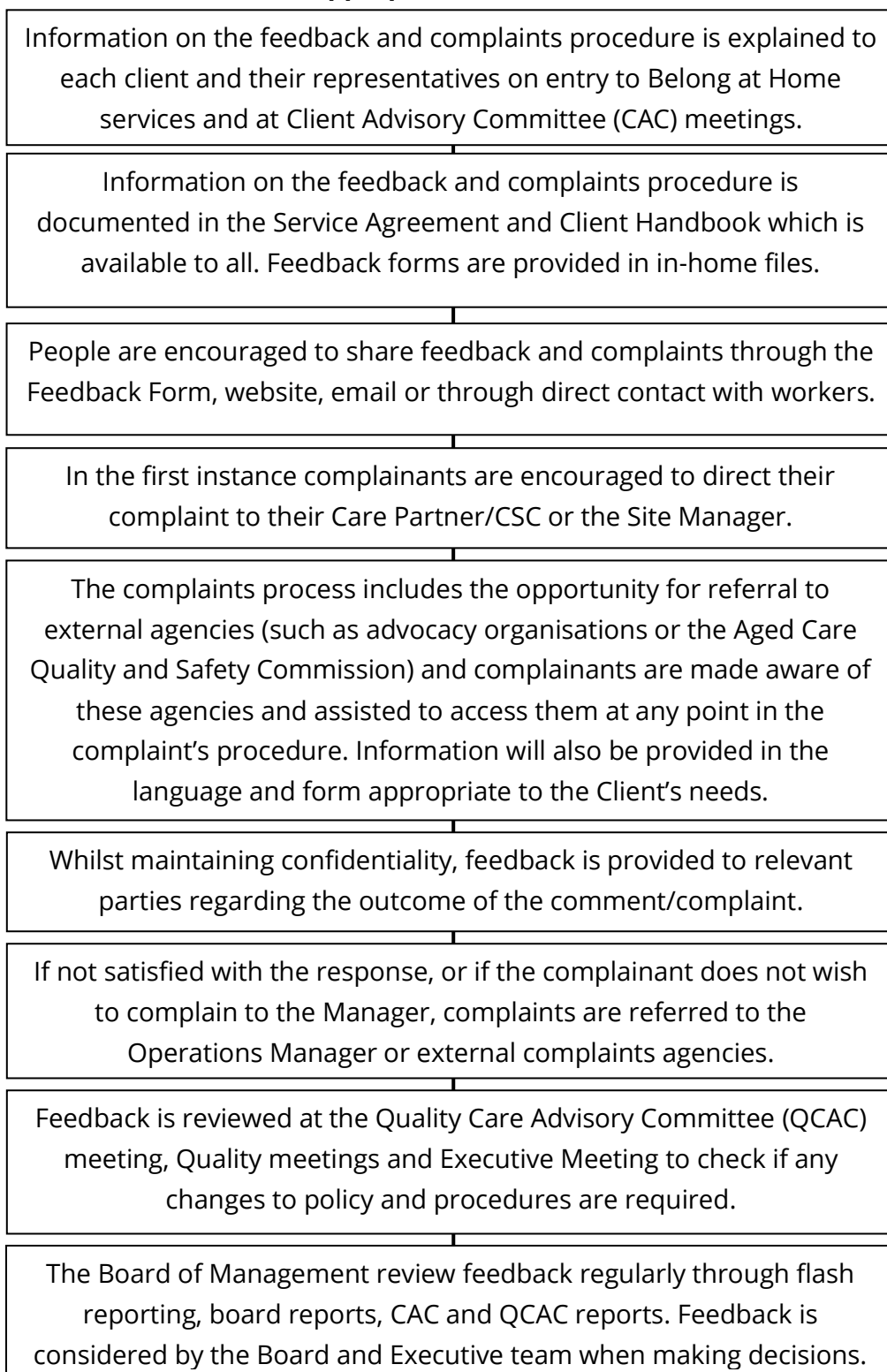
Confidentiality of Complaints

As far as possible, complaints should be kept confidential amongst the workers directly concerned. Client permission must be obtained before sharing information with others, unless required by law or otherwise necessary.

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Feedback and Complaints Mechanism

CLIENT OUTCOME: I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.



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Language, Access and Cultural Support

Information regarding the complaints process may be provided in a language/culturally appropriate document for the client. Administration workers ensure that brochures relating to complaint management are available for access (and provided on request) in all primary languages for clients within the service. Language and culturally appropriate 'Do you have a concern' brochures are accessed here: <https://www.agedcarequality.gov.au/resources/do-you-have-concern-brochure>

Hearing or speech impaired services can be contacted through the National Relay Service:

- TTY users: phone 1800 555 677 then ask for number 1800 951 822.
- Speak and Listen users: phone 1800 555 727 then ask for number 1800 951 822.
- Internet relay users: connect to the National Relay Service and enter 1800 951 822.

Clients can contact ACQSC and request the services of a translator. Alternatively, contact can be made on behalf of a client to one of the services below to translate on behalf of the client to ACQSC:

- Translating and Interpreting Service (TIS) - 131 450
- Aboriginal Interpreter Service (AIS) - 1800 334 944
- Kimberley Interpreting Service (KIS) – 08 9192 3981

Advocacy

The client and/or representative has the right to use an advocate of their choice to support them with complaints. This may be a family member, friend, or a representative from an independent agency.

For a client or representative, an advocate is an impartial person, who:

- takes the time to listen and understand their views and wishes;
- informs them of their rights and responsibilities;
- assists them to explore their options and make informed decisions;
- supports them to raise concerns and work towards a resolution;
- provides practical assistance such as help to write a letter or raise concerns at a meeting;
- speaks for them in situations where they don't feel able to speak for themselves; and
- increases their capacity to self-advocate.

Advocare is an advocacy service for older adults and they are the Seniors Peak Body in WA. They are a not-for-profit organisation and independent from aged care providers. Their services are free, unbiased and confidential. Contact: 08 9479 7566 or 1800 655 566 or email: rights@advocare.org.au

5. Responsibilities

Board of Management

- Promoting a culture of transparency, safety and responsiveness regarding feedback.
- Reviewing feedback data and reports and communicating with the CEO and Executive team on Continuous Improvement.
- Utilise feedback from the CAC and QCAC to inform strategic planning choices where possible.

CEO and Executive Team

- Establish and maintain a robust feedback and complaints management system that is accessible, confidential, and responsive.

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- Ensure all complaints and feedback are acknowledged, recorded, investigated, and resolved in a timely and transparent manner.
- Provide multiple avenues for workers and clients to submit feedback and complaints, including verbal, written, digital, anonymous, and confidential options.
- Ensure feedback and complaints are used to inform quality improvement initiatives.
- Provide clients with reminders of their ability to give feedback via newsletters and Statements.

Quality and Client Experience Manager

- Monitor and evaluate the effectiveness of the feedback and complaints system.
- Ensure compliance with legislative and regulatory requirements.
- Report trends, risks, and improvement opportunities to the Board and relevant stakeholders.

People and Culture Manager

- Implementing and managing a training program that includes how to handle complaints and the roles and functions of Aged Care Advocates.
- Ensuring that workers are provided information on our Feedback and Complaints Management Policy and Procedure at induction and ongoing refresher training.

Leaders and Managers

- Facilitate open disclosure when things go wrong and implement corrective actions to prevent recurrence.
- Ensure all complaints and feedback are acknowledged, recorded, investigated, and resolved in a timely and transparent manner.
- Regularly review and report feedback data to identify trends and implement improvements.

Care Partners/ CSC / Admissions

- Inform clients and their representatives of their rights and responsibilities with regards to feedback and complaints upon entry to BaH and regularly.
- Manage Complaints and Feedback in line with this policy.

All Aged Care Workers:

- are encouraged and supported to raise feedback/complaints without fear of reprisal;
- must participate in any assigned training on the feedback and complaints system;
- understand their responsibilities under the Aged Care Act 2024 and Code of Conduct for Aged Care; and
- should actively participate in resolving complaints and contribute to service improvement through constructive feedback.

6. Related Documents

- Strengthened Aged Care Standards 2.3, 2.6a, 2.6b & 2.9
- Aged Care Act 2024
- Code of Conduct
- Continuous Improvement Policy and Procedure
- Open Disclosure Policy and Procedure
- Grievance Policy and Procedure
- Feedback Form
- Escalation and Severity Protocol

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