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## 6.2 CLIENT COMPLAINTS

Clients (including family, friends and others) are encouraged to express their complaints to enable us to improve the quality of our support. We utilise the Better Practice Guide to Complaints Handling in Aged Care Services<sup>1</sup> to guide our management of complaints and the Complaints Journey<sup>2</sup> card to ensure staff understand the complaints process from the clients' perspective. We have adopted the Australian Open Disclosure Framework<sup>3</sup> principles and processes to support the effective and inclusive management of complaints (including complaints that may be a result of an adverse event or incident related to care and services).

Clients are made aware of their right to complain and are encouraged to make a complaint if they are not happy with Waratah Respite Services. This is explained to clients at service commencement, at reviews, when they wish to make a complaint and whenever appropriate, including at meetings with clients and representatives. Information on clients' right to complain without fear of retribution, the complaints process and their right to use an advocate in making a complaint, is included in the Client Handbook.<sup>4</sup>

We have complaints brochures from the Aged Care Quality and Safety Commission available to clients and can provide them in a range of community languages.

Clients can expect complaints to be dealt with fairly, with transparency and promptly and for staff to take steps to ensure that clients feel comfortable to continue receiving services after making a complaint.<sup>5</sup>

All complaints are reviewed by the Management Team to identify improvements to services and processes that underpin all of our services and operations (see 8.9.6 Continuous Improvement Forms/Client complaint form). Our complaints handling approach reflects our vision, objectives and philosophy outlined in Section 8: Organisational Governance.

All staff involved with clients receive information on their responsibility to encourage and support clients to make complaints and to support them through the complaints process.

Clients are encouraged to talk to us before raising a complaint with an external complaint agency, but clients can choose to raise their complaint with an external agency at any time. Details of external complaints agencies are detailed in 6.4 Advocates.

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<sup>1</sup> Australian Government Aged Care Complaints Commissioner [Better Practice Guide to Complaints Handling in Aged Care Services](#) 2017

<sup>2</sup> Australian Government Aged Care Complaints Commissioner [The Complaints Journey](#) November 2017

<sup>3</sup> Australian Commission on Safety and Quality in Health Care [Australian Open Disclosure Framework](#) 2013

<sup>4</sup> Australian Government Department of Health Charter of Aged Care Rights (Effective 1 July 2019)

<sup>5</sup> Australian Government Aged Care Complaints Commissioner [The Complaints Journey](#) November 2017

### 6.2.1 KEY CONSIDERATIONS IN MANAGING COMPLAINTS

Waratah Respite Services adopts the following principles, from the Aged Care Quality and Safety Commission, in managing complaints<sup>6</sup> and the Open Disclosure Principles. If an open disclosure meeting is to be held, the Manager will prepare and conduct the meeting/s with the client/representative/Advocate. We consider these principles in the management of complaints and open disclosure meetings (where an adverse event may have occurred with harm or potential harm to clients is evident). The specific details of how complaints are managed are included in Table 6.2.1 Complaints Management Process.

#### Be open and timely

If things go wrong in the provision of care and services to a client (including adverse events or incidents) we communicate and provide timely information in a timely, open and honest manner. We provide ongoing information until the complaint or issue is resolved.

#### Acknowledge

The person managing the complaint will:

- Acknowledge all complaints quickly.
- Repeat what you've heard in your own words. This creates a shared understanding and establishes empathy.
- Express regret using the words 'I/we are sorry', but do not admit liability or apportion blame.
- Tell the complainant what happens next with their complaint and provide contact details for the staff member handling the complaint.
- Reassure all parties that confidentiality is respected.
- Give an estimate of how long the process may take.
- Invite those involved to participate in the resolution process; engage the client.
- Complaints that are straightforward with low risk can be resolved on first contact.

#### Assess

- Assess the complaint and prioritise against other complaints the service is handling.
- Clarify the concerns and issues raised by the complainant.
- Determine the level of risk to the client, other clients and the service.
- Ask the client and complainant how they would like to see the complaint resolved.
- Show a positive, professional attitude and thank the complainant for bringing the matter to your attention.

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<sup>6</sup> Australian Government Aged Care Complaints Commissioner [The Stages of Complaint Handling](#) 2017

- Plan (if required)
  - Consider the best way to resolve the complaint (e.g. conciliation with the complainant or investigation).
  - Prepare a short-written plan of how the complaint is to be managed and any information to be collected.
  - Focus attention on the issue to be investigated.
  - Remain flexible and adjust as required
  - Investigate (if required)
    - Gather relevant information to resolve the complaint.
    - A fair investigation is impartial, confidential, transparent and timely.
    - Keep written notes of discussions.
    - Allow complainants to present their point of view.

An effective complaint handling process is fair, accessible, responsive, efficient and contributes to ongoing quality improvement in service delivery.

### Respond

- Apologise using the words 'I/we are sorry'. It can improve your relationship with the complainant.
- Respond to the complainant with a clear decision and explain your reason for the decision.
- Outline the steps taken to address the complaint including improvements to be implemented to reduce the risk of a re-occurrence.
- Written responses are more suitable for most matters, including complex matters.
- Communicate outcomes promptly.
- Recognise that it may take several meetings to come to resolution.

### Follow up

- Check if complainant is satisfied with the resolution.
- Ask complainants for feedback.
- Outline alternative options available to the complainant.
- Reviews should be carried out by staff who haven't been previously involved.
- Complaints are evaluated and discussed at the relevant committee e.g. Clinical Care, risk and Improvement Committee (with consideration to confidentiality) or by the Management Team.

## Consider

- Evaluate the outcome for the complainant; ask yourself/the team (and document):
  - Are there issues or problems which could be repeated?
  - Was there a delay in resolving the complaint?
  - Can procedures and policies be reviewed to improve the complaints process?

Regular contact with the complainant should be maintained throughout the process. It's important to keep the complainant informed if their issue is taking longer to resolve than first advised.

### 6.2.2 PROCESS FOR MANAGING COMPLAINTS

**Table 6.2.1 Complaints Management Process**

Step	Timeline
1. A complaint is received via support staff or directly from a client/representative via letter, email, face to face or telephone  2. A Complaints Form is created by the person receiving the complaint and the complaint is reported to their Team Leader/ Manager. All details are documented in Complaints register.  3. If a serious complaint, the staff report to the Manager  4. In face to face or telephone contact the person receiving the complaint encourages the person and assures them it is OK to make the complaint, that it is taken seriously and that it helps us improve our care and services. With written complaints the client is contacted by telephone or face to face.	On day complaint is received
5. The complaint is reviewed by the Manager and relevant information and proposed action is recorded. Serious complaints are reported to the President of the Management Committee (generally in instances that present material or reputational risk to the organisation)	Within 2 working days of receipt of complaint
6. The Manager contacts (by telephone or letter) the client to advise: <ul style="list-style-type: none"> <li>○ the complaint is being assessed</li> <li>○ the process that is followed including confidentiality</li> <li>○ the timeline</li> <li>○ their right to an advocate and advocacy agency support (see 6.4 Advocates)</li> <li>○ who their contact person is and details on how to contact them</li> <li>○ when they will be contacted again.</li> </ul>	Within 2 working days of receipt of complaint
7. The Manager reviews the complaint and decides the action to be taken and who takes it and a plan for resolution.	Within 5 working days of receipt of complaint
8. The Manager updates the President (Management Committee) on complaint progress (serious complaints)	

Step	Timeline
9. The Manager is updated about the progress to action the complaint and the proposed action/plan is agreed. Investigation principles include: impartiality, confidentiality, transparency and timeliness. Meetings are held with the complainant if necessary.	Within 10 working days of receipt of complaint
10. Action is carried out including providing an apology to the complainant. Person/s affected by the complaint are fully informed of all facts and given the opportunity to provide further information and contribute to the solutions.	
11. The client is advised of the actions taken to address the issues raised and the outcome of the complaint in a letter	
12. If the client is not satisfied with the outcome, they are advised of the complaints appeal process.	
13. If the client wishes to appeal, the complaint is reviewed by the Manager.	Within 25 working days of receipt of complaint
14. The client is advised of the Manager's decision and of their option to go to an advocacy agency (see 6.4 Advocates) or Aged Care Quality and Safety Commission if they are not satisfied with the outcome,	
15. When the complaint is finalised a staff person is identified by the Manager to make sure that the client feels comfortable to continue accessing the service and to obtain feedback on the complaints procedure. The complaint is then closed out following evaluation of the complaint. Evaluation includes documentation of the actions taken in electronic complaints folder, the satisfaction of the complainant with the outcome and validation that appropriate education, training and staff support processes have been implemented to prevent the issue recurring. Improvements are also entered into the Continuous Improvement Plan	

### 6.2.3 DISPUTES BETWEEN CLIENTS AND SUPPORT STAFF

Waratah Respite Services' support staff are required to report immediately to their Team Leader any dispute with clients, regardless of how small. Disputes are reported verbally in the first instance. The Team Leader then decides:

- Whether the client should be contacted
- If a written report is required
- The format of the report
- Any other action to resolve the dispute as early as possible.

The Team Leader may offer the client the opportunity to make a formal complaint. If the client accepts this offer the Team Leader completes a Complaints Form with them and the complaints process is followed. All details of these discussions are documented in regardless of whether the client decides to address their concerns through an informal feedback or formal complaints process.

## 6.2.4 PEOPLE WITH SPECIAL NEEDS

Where clients may have special needs, such as people from culturally and linguistically diverse (CALD) backgrounds or Aboriginal and Torres Strait Islander people, the staff ensure that any cultural aspects are considered when reviewing a complaint or dispute and ensures the person feels comfortable in discussing a dispute. The presence of a family member or friend or the support of an interpreter may be required.

Where we can, we use the resources on the Aged Care Quality and Safety Commission website<sup>7</sup> to provide information in simple language or in the language of the client.

We also ensure that any actions, interventions or referrals are appropriate to people from special needs groups. This may require the involvement of organisations with expertise in special needs groups either in providing advice or assisting in actions.

## 6.2.5 USE OF AN ADVOCATE

Clients are advised in the Client Handbook and verbally at the time they indicate they have a complaint that they can use an advocate or external agency at any point in the complaint process or if they feel their feedback or complaint was not satisfactorily resolved. We provide the client with a list of agencies and assist them and support them to make contact as required.

Agencies that clients can lodge a complaint with or provide advocacy services are detailed in 6.4: Advocates.

## 6.2.6 CONFIDENTIALITY OF COMPLAINTS AND DISPUTES

As far as possible, the fact that a client has lodged a complaint and the details of that complaint are kept confidential amongst staff directly concerned with its resolution. The client's permission is obtained prior to any information being given to other parties that it may be desirable to involve in order to satisfactorily resolve the complaint or dispute. Complaints that are sensitive in nature are managed by the Manager.

## 6.2.7 WORKING WITH EXTERNAL COMPLAINTS AGENCIES

If we receive a request to provide information or input from an external complaints/advocacy agency we provide relevant information as requested with consideration to privacy. Information provided to external agencies is documented in the complaints folder, detailing the information provided and any relevant documentation by the Manager. If we are provided with a direction from the Aged Care Quality and Safety Commission, we follow that direction and keep a record of the actions taken on in our complaints folder.

Information on contact details for external complaints or support agencies is included in 6.4 Advocates.

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<sup>7</sup> Australian Government Aged Care Quality and Safety Commission [Website](#)

## VERSION CONTROL

Version Number	Reviewed By	Review Date	Modifications Made	New Review Date
1	J Bartholomew	Sept 2019	Created	Sept 2022