

Policy – our commitment

Introduction

Carers NT recognises the need for an easy to manage, timely complaint and feedback mechanism for consumers. The information and feedback gathered assists Carers NT respond appropriately and improve the quality of the Service.

We recognise a consumer complaint as any expression of dissatisfaction, whether expressed verbally or in writing, by a client of the Service or their representative.

Purpose

The purpose of the complaints and feedback policy is to provide clear procedures for addressing and resolving complaints and feedback from clients, stakeholders, and staff, fostering transparency, accountability, and continuous improvement.

Scope

This policy applies to all employees, contractors, visitors, and any individuals engaging in activities within the premises of Carers NT.

This policy is to be adhered to at all times during the course of employment or engagement with Carers NT.

It is the responsibility of every individual within the organisation to familiarize themselves with and comply.

Procedure

The following procedure must be adhered to for every complaint received:

- All clients will be made aware of their right to complain and access a range of options and tools to support this. Direction on how to make a complaint or provide feedback will also be given where needed.
- Clients have a right to complain without worry that assistance may cease, or they will face some reprisal.
- All complaints will be dealt with sensitively and with respect to privacy issues.
- All consumer complaints will be documented and dealt with according to the type of complaint within an acceptable timeframe.
- Complainants will be informed of any action taken, and the practice of open disclosure will be supported by staff and management.
- All complaints will be recorded in the Complaints Register, maintained by the Quality Compliance Officer.
- Feedback and complaints will be reviewed and used to inform quality improvement where this is relevant, and learnings will be shared appropriately across the Aged Care, Disability and Carer Gateway teams.

Client Awareness

Clients are to be made aware of their right to complain and the process at the time of assessment and care planning.

Clients will also be made aware they may use an advocate of their choice should they lodge a complaint.

Information about the complaints process will be displayed in a public area of the service centre and documented in the Client Welcome pack.

Recording of Complaints

All complaints should be recorded on a Carers NT Feedback form and logged in the Complaints Register by the Manager, and a summary included in regular reports back to the Executive.

The Aged Care, Disability and Carer Gateway teams will regularly review the complaints register.

Revision: V1.0 Sponsor: Quality & Compliance	Complaints and Feedback	Page 1 of 6
Issue Date: 03 June 2024	POL 1-0012	Review date: 03 June 2026

Implementation

This policy will be made available for staff to access on the Carers NT SharePoint and on Employment Hero.

Review

This policy will be reviewed periodically to ensure its effectiveness and compliance with relevant regulations and best practices.

Any necessary updates or amendments will be made accordingly.

Evaluation and Compliance

The Quality Assurance Committee will complete an informal evaluation of this Policy at time of review.

Permission to Act

Permission should be sought from the client making the complaint to act on the complaint. Clients may request that simple or regular complaint not be acted upon - these must still be recorded and logged. All urgent complaints must be acted upon.

Acknowledgement and Time Frame for Response

Staff will respond according to the type of complaint. Clients or their representative will receive acknowledgment of their complaint within two working days of the complaint being raised. All issues will be dealt with promptly.

Confidentiality

All complaints should be dealt with confidentially within the need to resolve the issue as raised.

The complaint relates to a specific client, all records of the complaint shall be kept on the client file in a locked filing cabinet/area.

Feedback

Feedback can be received anytime, and any verbal feedback from staff, clients, or carers should be raised in staff meetings.

Dependent on the nature of the feedback, it and any related action will be recorded in the relevant register or document, e.g. Hazard report, Quality improvement etc.

Regular client surveys will help the Service know what is working well and what could be changed or improved.

Open Disclosure

Open communication will be promoted, and the Service will acknowledge and apologise when things go wrong or a mistake has been made.

The client, carer and/or their nominated representative will be provided with information about what happened in a timely, open and honest manner. Ongoing updates/ provision of information related to the matter will also be provided where relevant.

Continuous Quality Improvement

Appropriate analysis and monitoring of feedback and data should be used to inform changes required as part of ongoing quality improvement.

Feedback on outcomes and any changes to the process should be forwarded to the Manager for recording under 'Continuous Improvement'.

Revision: V1.0 Sponsor: Quality & Compliance	Complaints and Feedback	Page 2 of 6
Issue Date: 03 June 2024	POL 1-0012	Review date: 03 June 2026

1. Complaint Types

The following table outlines the types of complaints and response times.

Simple Complaints will be addressed immediately where possible, and remedy will be made as part of the day-to-day operation of the Service. Where this was a straightforward issue that was remedied and no changes to the procedure are required, the complaint and action shall be noted in the client's notes.

These are complaints where:

- The facts are not in dispute;
- The annoyance or inconvenience is minor; and
- Minimal concern or distress has been caused to the person complaining.

For example, someone was overlooked when picking up clients to go on an outing.

Investigate what and why this happened, apologise and put in measures to minimise the risk of this re-occurring.

Document in the client's progress notes and the complaints register; if a change in the process arose out of this incident, ensure all relevant staff are notified and document in the Quality Improvement register and/or Plan for Continuous Improvement.

Timing – respond to the client within seven days.

Regular Complaints - These are complaints that:

- Happen frequently;
- Have a more significant effect on the client; and
- Relates to someone in the Service or a part of the Service which is not the responsibility of the staff member to whom the complaint has been made;

For example, the meals are consistently not suitable for a client's diabetic dietary requirements.

Investigate what and why this happened. Meetings with external stakeholders may need to be held to develop strategies to minimise this issue from re-occurring. Apologise to the client and appraise them for what is being done to address the issue.

Document in the client's progress notes and the complaints register where a change in the process arose out of this incident; ensure all relevant staff and stakeholders are notified and document in the Quality Improvement register and/or Plan for Continuous Improvement.

Timing – respond to the client within three days.

Revision: V1.0 Sponsor: Quality & Compliance	Complaints and Feedback	Page 3 of 6
Issue Date: 03 June 2024	POL 1-0012	Review date: 03 June 2026

Urgent Complaints - These are complaints that relate to:

- Allegations of theft, physical harm, sexual abuse or other crimes; and/or Situations that cause significant emotional harm or stress to the client.
- Any allegations must be reported to the authorities, and the Department must be advised as soon as management becomes aware of the allegation. Management and staff will assist the authorities with any investigation.

Document in the client's progress notes and the complaints register where a change in the process arose out of this incident; ensure all relevant staff and stakeholders are notified and document in the Quality Improvement register and/or Plan for Continuous Improvement.

Timing – respond immediately on becoming aware of the complaint.

Definitions

Complaint An expression of dissatisfaction, made by a client or their carer, to the organisation about a service or product they have received (or not received), that is related to their identified care needs.

Feedback Mutual information that is gathered on how satisfied a person is with the service they receive, and is used as the basis for improvement.

Quality Improvement Systematic and continuous efforts aimed at enhancing the effectiveness, efficiency, safety, and overall quality of products, services, processes, or systems within an organisation.

Roles and Responsibilities

Governing Body The Governing Body is responsible for ensuring effective systems and processes for responding to feedback and complaints established and maintained.

Revision: V1.0 Sponsor: Quality & Compliance	Complaints and Feedback	Page 4 of 6
Issue Date: 03 June 2024	POL 1-0012	Review date: 03 June 2026

Executive

Ensure all staff are aware of and trained in the correct handling of complaints.

Support a culture of learning from mistakes and feedback.

Ensure that all complaints escalated to the management level are dealt with sensitively and in a timely manner.

Deal with all 'urgent' type complaints in conjunction with the Aged Care, Disability and Carer Gateway teams.

Manager

Deal with all 'simple' and 'regular' complaints promptly.

Deal with 'urgent' type complaints in conjunction with the corporate office and executive personnel as required.

Ensure all complaints are correctly documented, logged and forwarded to the appropriate organisational area as required.

Staff

Deal with 'simple' complaints as they arise, forwarding information to their supervisor and management team as required.

Communicate all complaints received to the Manager for appropriate action and participate in the corresponding action as required.

Related Links, References and Forms

- [Aged Care Complaints](#)
- [NDIS Complaints](#)
- Carers NT Feedback Form (FRM)
- Complaints and Feedback Flow Chart (GUI)

Legislation

- [Federal Register of Legislation - Aged Care Act 1997](#)
- [Federal Register of Legislation - Privacy Act 1988](#)
- [Federal Register of Legislation - User Rights Principles 2014](#)
- [Charter of Aged Care Rights | Aged Care Quality and Safety Commission](#)

Revision: V1.0 Sponsor: Quality & Compliance	Complaints and Feedback	Page 5 of 6
Issue Date: 03 June 2024	POL 1-0012	Review date: 03 June 2026

- [Federal Register of Legislation - Aged Care Amendment \(Independent Complaints Arrangements\) Act 2015](#)
- [Quality Standards | Aged Care Quality and Safety Commission](#), specifically **Standards 1, 6, 7 and 8**
- [Federal Register of Legislation - National Disability Insurance Scheme Act 2013](#)
- [Federal Register of Legislation - National Disability Insurance Scheme \(Complaints Management and Resolution\) Rules 2018](#)
- [Federal Register of Legislation - National Disability Insurance Scheme \(Quality Indicators for NDIS Practice Standards\) Guidelines 2018](#)
- [NT Legislation - Disability Services Act 1993](#)
- [National Disability Insurance Scheme \(NDIS\) Practice Standards 1,2 and 3](#)
- [National Disability Insurance Scheme \(NDIS\) Quality and Safeguarding Framework](#)
- Integrated Carer Support Services Program Guideline

Revision: V1.0 Sponsor: Quality & Compliance	Complaints and Feedback	Page 6 of 6
Issue Date: 03 June 2024	POL 1-0012	Review date: 03 June 2026

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