

Policy: Complaints by Clients

Policy number: 5002	Date adopted: 19 th August 2020
Authorised by: Mareeba Community Centre Management Committee	Date of next review: 19 th August 2023

Policy context: This policy relates to:	
Queensland Standards for Community Services	Standard 5 - Feedback, Complaints and Appeals
	Indicator 1: The organisation has fair, accessible and accountable feedback, complaints and appeals processes.
	Indicator 2: The organisation effectively communicates feedback, complaints and appeals processes to people using services and other.
	Indicator 3: People using services and other relevant stakeholders are informed of and enabled to access any external avenues or appropriate supports for feedback, complaints or appeals.
	Indicator 4: The organisation demonstrates that feedback, complaints and appeals processes lead to improvements within the service and that outcomes are communicated to relevant stakeholders.
Other standards	
Legislation or other requirements	

1. Purpose: Why do we have a complaints by clients policy?

Dealing well with complaints and appeals helps us to maintain and improve our service quality and ensure clients have their issues resolved. Complaints and appeals processes give clients a way of expressing any dissatisfaction with our service and of having their concern dealt with quickly and effectively. It also provides us with the opportunity to improve our service delivery. The procedures guide us in responding appropriately and fairly to complaints and to appeals.

2. Scope

This policy will apply to all clients and staff (paid and voluntary) of Mareeba Community Centre Inc.

3. Policy statement: Our commitment

Mareeba Community Centre Inc. is committed to facilitating our clients' right to make a complaint about our service and to appeal a decision we have made that directly concerns them. We are committed to ensuring that the complaint or appeal is fairly assessed and responded to promptly.

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Specifically, we will:

- · inform clients about how to make a complaint, using either internal or external mechanisms
- ensure support and advocacy is available to clients who make a complaint
- ensure procedural fairness in the complaints procedure and that clients are not disadvantaged by making a complaint
- · deal with complaints in a timely and culturally appropriate way
- advise clients of the outcome of their complaint
- take the outcomes of complaints into account in planning service improvements
- advise clients about their options for appealing a decision about the service they receive
- ensure that our procedures comply with legislative requirements.

4. Procedures

4.1 Information about our complaints and appeals procedure

We want our clients to feel able to voice their dissatisfaction with any aspect of our service, and to be confident that our organisation will manage their complaints well and respond quickly and appropriately. All clients are informed of their rights and responsibilities and of our complaints by clients policy at the earliest possible stage of their involvement with our service.

Clients are provided with information about their right to make a complaint or to appeal a decision, and the procedures that will be followed if they do. This takes place via the following procedures:

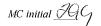
- Clients receiving one-off or short-term service are informed via the client service charter publicly available in our front office and on our website.
- Clients receiving ongoing services from our organisation are:
 - informed verbally by their key worker and
 - either provided with a printed copy of the client service charter or referred to the digital copy on the website and
 - provided with a copy of a completed information for new clients form.

4.2 How clients can make a complaint or appeal a decision and how we will respond

Please refer to the flowchart on the next page for a review of the complaints process.

The complaints process will be undertaken as quickly as possible with the following timeframes applied from date of receipt of complaint:

- Step 2 must be completed within two weeks
- Step 3 must be completed within four weeks
- Step 4 must be completed within six weeks.



STEP 1: Informal discussion with staff member

Complaints should initially be discussed with the staffmember involved. If resolved at this stage, the complaint is not formally recorded, If unresolved – move to step 2.



STEP 2: Formal Complaint to Manager

If the matter involves the Manager-move directly to step 3.

All complaints that do not involve the Manager will be directed to the Manager or the Administrative Coordinator (if Manager is unavailable). Complainants may choose to meet with the Manager to discuss and record the complaint or may lodge a written (or audio recorded) complaint for the Manager's review.

The Managerwill:

- investigate the complaint in order to establish a fair and objective analysis of the situation
- discuss, with the complainant and other parties, possible actions to resolve the complaint
- decide on a course of action and inform the complainant and other parties of the outcome
- document the investigation and outcomes
- record a summary of the outcome in the Complaints Register
- inform the Management Committee about the complaint and its outcome.

A complainant may appeal the Manager's decision to the Management Committee - move to step 3.



STEP 3: Formal Complaint to Management Committee

All complaints regarding the Manager will be directed to the Management Committee. Complainants may choose to meet with a member of the Committee to discuss and record the complaint or may lodge a written (or audio recorded) complaint for the Management Committee's review.

The Management Committee may meet as a whole or delegate particular committee members to:

- investigate the complaint in order to establish a fair and objective analysis of the situation
- discuss, with the complainant and other parties, possible actions to resolve the complaint
- decide on a course of action and inform the complainant and other parties of the outcome
- document the investigation and outcomes
- record a summary of the outcome in the Complaints Register.



STEP 4: Formal Appeal to Management Committee

The Committee may meet as a whole or delegate particular committee members to investigate the appeal. The Committee will review all procedures undertaken by the Manager and may meet with the Manager, complainant and/or other parties to do so. The Committee will decide on a course of action to resolve the appeal. The Committee will inform the complainant, Manager and other parties of the outcome in writing.



External Mediation

- . This is an option open to the Manager or Management Committee with the express consent of the parties in dispute.
- The mediation session's must be conducted by a qualified mediator or mediation service.

External resolution by the Funding Body

- If the complainant is not satisfied with the resolution of the complaint by the above procedures, they can make a complaint to the funding body of the service they are dissatisfied with.
- Assistance will be given to the complainant to contact the appropriate person in the funding body.



4.3 Using complaints and appeals for service improvement

We ensure that client and stakeholder feedback informs our decision making and planning.

We keep comprehensive, clear and useful records of all complaints from clients and stakeholders. We assess, compile and use information arising from these complaints.

We document and keep records of complaints in the following ways:

- a record of all individual instances of complaints is digitally stored on SharePoint in Business Admin
- a record of all complaints, as presented at Management Committee meetings, is recorded in the Management Committee meeting minutes
- a record may be kept on the client's file (where the complaint is not anonymous and the client has provided consent for this to occur) of the complaint made and follow up action taken
- an annual review of all complaints, summarising findings and proposing actions is presented to the Management Committee.

We use what we learn from the client complaints process to:

- inform training and development opportunities (the complaints register is referred to when creating the organisational training and development strategy,
- staff management processes (ie, performance appraisals and supervision sessions)
- other client and governance policies and processes as relevant.

4.4 Notifications to the funding body of allegations of misconduct

The Manager and / or Management Committee is required to notify all Queensland Government funding bodies if there is an allegation of misconduct by us "that raises a reasonable suspicion of misconduct or dishonesty of a serious nature relating to... or the operation of the services" (Service Agreement – Standard Terms, v 1.1, 17 Feb 2015, Section 4.5c). Such allegations must also be reported to the police.

5. Other related policies and procedures

Documents related to this policy		
Related policies	1020 Confidentiality Policy 4002 Client Service Charter Policy 5001 Feedback Policy	
Forms or other organisational documents	4002 Client Service Charter 4002 Information for New Clients Form 5001 Feedback Form 5001 Annual Review of Client Complaints and Feedback 5002 Complaint Form 5002 Complaint Appeal Form 5002 Complaint Register	



6. Review processes

Policy review frequency: Every three years

Responsibility for review: Manager

Review process: The Manager will review the policy in consultation with other service providers, clients, staff, volunteers and Management Committee. Any recommended changes will be tabled for Management Committee approval.

Documentation and communication: Updated policies will be signed by the Management Committee and be placed in the Policy & Procedures Manual. All staff and volunteers will be advised of updated policies via meetings and / or email.

Authorised by: Management Committee

Date: 19/08/2020

Signature: 244000lew

Name: TERRY AUSON

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Version: 5002.3

Record of Policy Revisions:

Version 5002.1 (adopted 2nd August 2017) – added section 4.4 regarding notifications to funding body

Version 5002.2 (adopted 30th August 2017)

Version 5002.3 (adopted 19th August 2020) - updated digital saved location for complaints