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## 6.2 COMPLAINTS MANAGEMENT

Illawarra Diggers is committed to providing high quality, person centred care and services to all care recipients. Illawarra Diggers encourages and supports care recipients, representatives, family, friends, staff members and other stakeholders to provide feedback and make complaints through a comprehensive range of feedback and complaint mechanisms.

Care recipients, care recipient representatives and all other stakeholders (such as those listed above) are encouraged to express their concerns and complaints to enable us to improve the quality of our care, services and support. We utilise the Better Practice Guide to Complaints Handling in Aged Care Services<sup>1</sup> to guide our management of complaints and ensure staff understand the complaints process from the care recipients' perspective.

We have adopted the Aged Care Open Disclosure Framework and Guidance<sup>2</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).

Care recipients are made aware of their right to complain and are encouraged to make a complaint if they are not happy with Illawarra Diggers. This is explained to care recipients at service commencement, at reviews, when they wish to make a complaint and whenever appropriate, including at meetings with care recipients and representatives. Information on care recipients' 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 pre-admission information pack, Resident and Accommodation Agreement and Care Recipient and Representative Handbook.<sup>3</sup>

We have complaints brochures from the Aged Care Quality and Safety Commission<sup>4</sup> in a range of languages available to care recipients and other stakeholders. We provide to all our care recipients the Aged Care Quality and Safety Commission "Top tips for care recipients: Making a complaint" and Charter of Aged Care Rights information booklet.

Care recipients can expect complaints to be dealt with fairly, with transparency and promptly and for staff to take steps to ensure that care recipients feel comfortable to continue receiving care and services after making a complaint.

All complaints are reviewed by the Senior Management Team to identify improvements to services and processes that underpin all of our services and operations.

All staff receive information on their responsibility to encourage and support care recipients to make complaints and to support them through the complaints process.

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

### 6.2.1 OPEN DISCLOSURE AND OTHER PRINCIPLES IN MANAGING COMPLAINTS

Illawarra Diggers adopts the Open Disclosure Principles and the principles from the Aged Care Quality and Safety Commission, in managing complaints<sup>5</sup>.

<sup>1</sup> Australian Government Aged Care Quality and Safety Commission [Better Practice Guide to Complaints Handling in Aged Care Services](#) 2019

<sup>2</sup> Aged Care Quality and Safety Commission [Open Disclosure Framework and Guidance](#) 2019

<sup>3</sup> Australian Government Department of Health Charter of Aged Care Rights (Effective 1 July 2019)

<sup>4</sup> Australian Government Aged Care Quality and Safety Commission [Resource Library](#)

<sup>5</sup> Australian Government Aged Care Quality and Safety Commission [Open Disclosure Framework and Guidance](#) 2019

If an open disclosure meeting is to be held (where an adverse event may have occurred with harm or potential harm to care recipients is evident), the Manager will prepare and conduct the meeting/s with the care recipient/representative with consideration to the above principles. This includes the following:

#### Be open and timely

If things go wrong in the provision of care and services to a care recipient (including adverse events or incidents) we communicate and provide 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 care recipient.
- Complaints that are straightforward with low risk can be resolved on first contact.

#### Assess

- Assess the complaint and prioritise against other complaints the facility is handling.
- Clarify the concerns and issues raised by the complainant.
- Determine the level of risk to the care recipient, other care recipients and the service.
- Ask the care recipient 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.
- 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, and 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.
- Written responses may be more suitable for 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 by the CEO and Senior 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 staff or directly from a care recipient/representative, or other stakeholder via letter, email, face to face or telephone.	On day complaint is received
2. A Complaint Record is created in Manad by the person receiving the complaint and the complaint is reported to their Team Leader/Manager.	
3. If a serious complaint, the staff report to their Manager and/or the Director of Care who will alert the CEO as appropriate. In face to face or telephone contact the person making the complaint. Encourage 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.	
4. The complaint is reviewed by the appropriate Manager and relevant information and proposed action is recorded in the review notes of the Manad complaint record.	Within 2 working days of receipt of complaint

Step	Timeline
<p>5. The relevant Manager contacts (by telephone or in writing) the complainant to advise:</p> <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
6. The complaint is tabled for further review and discussion at the next weekly senior management team meeting	Within 7 working days of receipt of complaint
7. The Manager/Director of Care reviews the complaint and decides the action to be taken and who takes it and a plan for resolution	Within 10 working days of receipt of complaint
8. The Manager/Director of Care updates the CEO on complaint progress (serious complaints)	
9. The Manager/Director of Care 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 15 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 complainant is advised of the actions taken to address the issues raised and the outcome of the complaint in a verbally or in writing	
12. If the complainant is not satisfied with the outcome, they are advised of the complaints appeal process (see 6.4 Advocates).	
13. If the complainant wishes to appeal, the complaint is reviewed by the CEO, whose decision is final	Within 25 working days of receipt of complaint
14. The complainant is advised of the Manager's decision and of their option to go to an advocacy agency (see 6.4 Advocates).	
15. When the complaint is finalised a staff person is identified by the relevant Manager to make sure that the care recipient 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, 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.	

### 6.2.3 DISPUTES BETWEEN CARE RECIPIENTS AND STAFF

Illawarra Diggers staff are required to report immediately to their department Manager any dispute with care recipients, regardless of how small. Disputes are reported verbally in the first instance. The Manager then decides:

- Whether the care recipient 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 Manager may offer the care recipient the opportunity to make a formal complaint. If the care recipient accepts this offer the Manager completes a Complaint Record in the Manad Feedback Register and the complaints process is followed.

#### 6.2.4 PEOPLE WITH SPECIAL NEEDS

Where care recipients may have special needs, such as people from culturally and linguistically diverse (CALD) backgrounds or Aboriginal and Torres Strait Islander people, staff and management 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>6</sup> to provide information in simple language or in the language of the care recipient.

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

Care recipients are informed in the Care Recipient and Representative 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 care recipient with a list of agencies and assist them and support them to make contact as required.

Agencies that care recipients 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 care recipient has lodged a complaint and the details of that complaint are kept confidential amongst staff directly concerned with its resolution. The care recipient'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 appropriate 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 complaint record, detailing the information provided and any relevant documentation and filed by the relevant Manager after review by the CEO. 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 in the complaint record/file.

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

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<sup>6</sup> Australian Government Aged Care Quality and Safety Commission [Website](#)

#### Regulatory Compliance

- Aged Care Act 1997
- Aged Care Quality Standards
- Charter of Aged Care Rights
- Quality of Care Principles 2014

#### Associated Documents

- Education and Training Feedback Form
- Employee Satisfaction Survey
- Feedback Form
- Feedback Register – Manad
- Meal Comment Forms
- Relative Experience Surveys
- Resident Experience Surveys
- Resident Moving In Survey