Feedback and Complaints Handling

How Arpad Aged Care Manages Complaints

The steps outlined in this section are intended to provide guidance about how to handle complaints generally:

- Section 1 – Receiving and Logging Complaints is important for the entire workforce
- Section 2 – Managing and Escalating Complaints
- Section 3 – Recording and Reporting Complaints are important for the Home's Quality Manager and Clinical Managers and Executive Manager

Every complaint will vary in degree of seriousness and not all the steps outlined below will be required to be undertaken in full in every circumstance. For example, when dealing with a Frontline Complaint (Step 1) it generally would not be necessary to send a written acknowledgement of the complaint to the complainant (Step 2). Complaints must be addressed promptly in accordance with their nature and level of urgency. We aim to acknowledge receipt of a complaint immediately and seek to resolve all complaints internally within our pre-determined timeframes for resolution of complaints. If we cannot resolve a complaint within these timeframes the complaint may become subject to external dispute resolution.

Pages in this Section

Section 1: Receiving and Logging Complaints

This section is important for Arpad Aged Care's entire workforce, because any member of the workforce can receive and log a complaint.

A Frontline Complaint is a complaint that can be resolved either at the time the complaint is made and received, or very shortly after it's received. The majority of complaints are frontline complaints – addressed by ‘frontline’ or first point of contact workers.

A Formal Complaint is a complaint that requires further investigation and/or a written acknowledgement and response.

All complaints should be addressed promptly and in accordance with their urgency. For example, significant health and safety issues should be processed immediately.

Complainants should be treated courteously and be kept informed of the progress of their complaint throughout the complaints handling process.

Logging a Complaint in Non consumer incident form on CompliSpace

All feedback received by Arpad Aged Care, including all complaints, must be logged through Non consumer incident form on CompliSpace.

Non consumer incident form on CompliSpace is designed to assist us in capturing all the information that is relevant, to allow the Home to investigate and respond appropriately to a complaint.

Complaints logged through Non consumer incident form on CompliSpace are automatically submitted to a Quality Manager and Clinical Manager for screening and further action. For more information, refer to:

- Step 1 - Dealing with Frontline Complaints
- Step 2 - Receiving and Logging Formal Complaints

Pages in this Section

Step 1 - Dealing with Frontline Complaints

There are likely to be many occasions when someone makes a statement, or sends an email, that is an expression of dissatisfaction about some aspect of the Home’s service or operations that falls

within the definition of a complaint, and a resolution can be quickly and easily achieved usually through verbal communications (i.e. no written response is required).

In many of these instances the person making the statement, or writing the email, may not even consider that they are making a “complaint”. Often, they may simply be offering constructive feedback.

For example, a resident raises the issue that they don’t like their room being cleaned in the morning because it interrupts their time and preference to relax. The Home’s cleaning schedule, however, has all residents’ rooms being cleaned in the morning.

This is an expression of dissatisfaction about an aspect of the Home’s operations and therefore falls within the definition of a complaint. However, it does not warrant a formal written acknowledgement or escalation to a Quality Manager and Clinical Manager.

It can be managed through a verbal acknowledgement of the complaint and negotiating with the resident to find a solution for the complaint. Continuing with the above example, the Home could arrange for the resident’s room to be serviced last to maximise their uninterrupted relaxation time.

This complaint may, on the surface, appear to be minor, however if Arpad Aged Care was to receive 10 similar complaints from residents or their representatives, it would indicate a broader issue which would require formal rectification action. It’s for this reason that even minor complaints should always be logged through Non consumer incident form on CompliSpace.

When receiving verbal Frontline Complaints, it's important to apply the L.E.A.R.N.™ Complaints Handling Technique.

Step 2 - Receiving and Logging Formal Complaints

Receiving a Formal Complaint

Formal complaints can be received in two ways:

- Verbal Complaint (follow the link for directions as to how to manage a verbal complaint)
- Written Complaint (follow the link for directions as to how to manage a written complaint)

A formal complaint is a complaint that requires further investigation and/or a written acknowledgement and response.

Formal complaints must be referred to a Quality Manager and Clinical Manager. When a formal complaint is received a Quality Manager and Clinical Manager should send a written acknowledgement of the complaint to the complainant, if practical.

In less serious instances, this written acknowledgement may be a relatively informal email communication. As the seriousness of the complaint increases, the formality of the communication should also increase.

When dealing with a more serious complaint that requires investigation and time to resolve, a more formal complaints acknowledgement communication should be forwarded to the complainant. Refer to our template Complaint Response Letter.

Acknowledgement should be provided as soon as possible, whether face-to-face, over the phone, or in writing. An acknowledgement must be given within three days business days of receipt of the complaint.

The nominated Quality Manager and Clinical Manager should contact the complainant prior to the target resolution date, and keep in regular contact, advising of the status of the matter and each time confirming when the next communication should be expected.

Logging a Complaint in Non consumer incident form on CompliSpace

All complaints received must be logged through Non consumer incident form on CompliSpace.

As soon as a complaint is logged, it is allocated a unique identifier code and the person logging the incident receives an email confirming its receipt. The balance of the process is set out in Steps 3- 10.

Non consumer incident form on CompliSpace is designed to assist us in capturing all the information that is relevant, to allow us to investigate and respond appropriately to a complaint.

Complaints logged through Non consumer incident form on CompliSpace are automatically submitted to a Quality Manager and Clinical Manager for screening and further action.

Pages in this Section

Receiving and Acknowledging Verbal Complaints

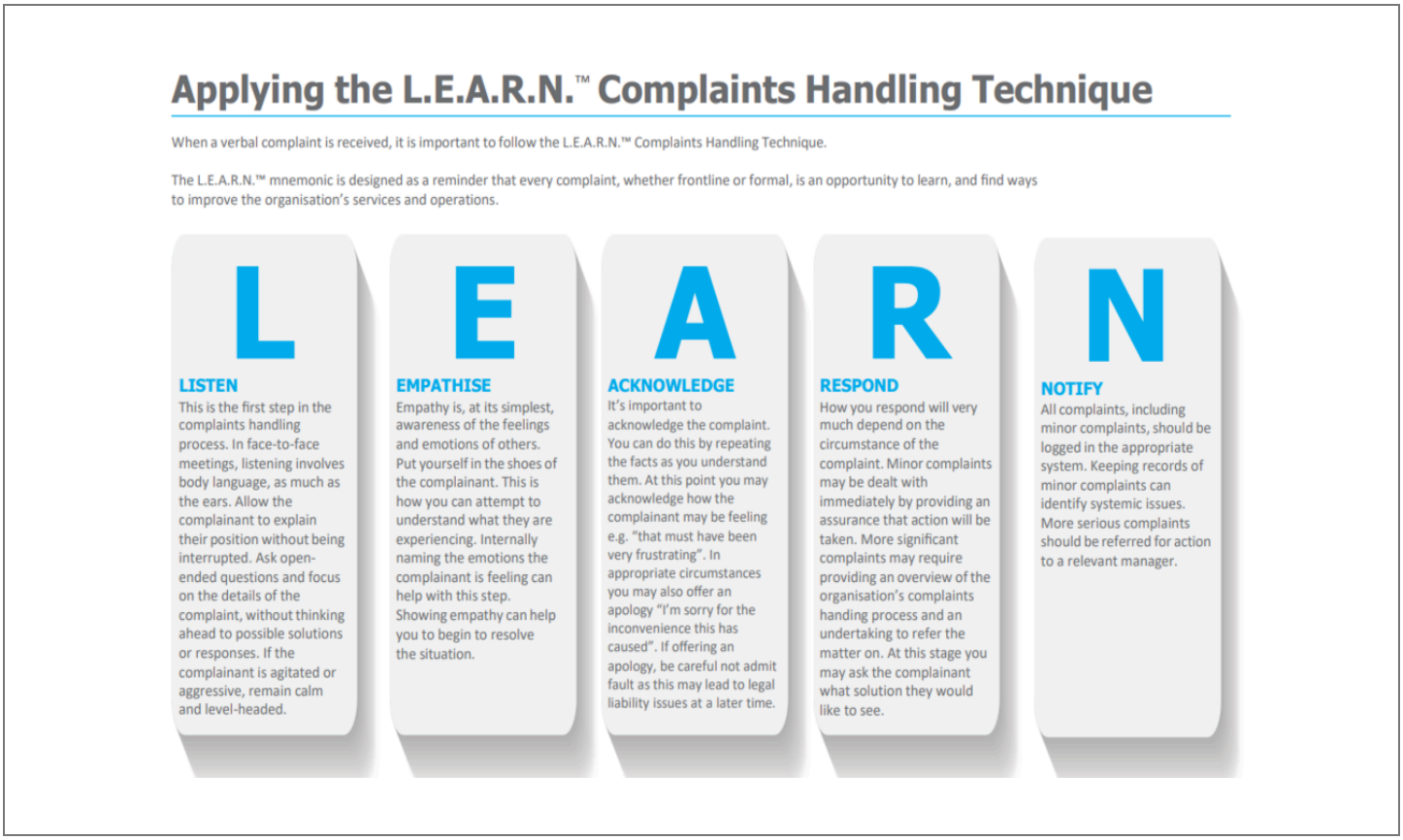
Handling a verbal complaint efficiently requires patience and skill to avoid an initially negative situation becoming even more negative and escalating into a dispute.

Applying the L.E.A.R.N.™ Complaints Handling Technique ensures that all verbal complaints are effectively handled to minimise the likelihood of dispute.

Our Complaints Handing Program has been purposely designed to minimise the potential for complaints to escalate into disputes.

The L.E.A.R.N.™ mnemonic is used because the acronym itself is an important stage in the complaints handling process.

It acts as a 'meta mnemonic' to remind complaint handlers that every complaint, whether frontline or formal, is an opportunity to learn, and find ways to improve Arpad Aged Care's services and operations.



Receiving and Acknowledging Written Complaints

When a written complaint is received, follow these guidelines:

1. All written complaints must immediately be forwarded to a Quality Manager and Clinical Manager.

2. The Quality Manager and Clinical Manager will review the complaint and log its details through Non consumer incident form on CompliSpace, and allocate the complaint to another staff member, where appropriate.
3. The Quality Manager and Clinical Manager will contact the complainant by telephone (if possible) to acknowledge receipt of the complaint and to obtain additional information which may assist in expediting the matter internally. The Home's guidelines for the management of verbal complaints should then be followed.
4. If it is not possible to contact the complainant by telephone, additional information should be sought through appropriately worded correspondence.

Section 2: Managing and Escalating Complaints

This section is important for our Quality Manager and Clinical Managers and the Executive Manager because they will manage and escalate complaints as appropriate.

Pages in this Section

- **Step 3 - Screening Complaints**
- **Step 4 - Establishing the Facts and Communicating with the Complainant**
- **Step 5 - Making a Determination**
- **Step 6 - Formulation of Proposed Resolution**
- **Step 7 - Presenting a Final Response and-or Offer of Redress**

Step 3 - Screening Complaints

All complaints logged through Non consumer incident form on CompliSpace will automatically be submitted to a nominated Quality Manager and Clinical Manager.

As we encourage workers to log all complaints through Non consumer incident form on CompliSpace, it is important that complaints are reviewed at the earliest possible opportunity to ensure that appropriate action is taken.

After the complaint is submitted and accepted, a Quality Manager and Clinical Manager will screen the complaint and either accept or reject the complaint. If the complaint is accepted, it will be managed through Non consumer incident form on CompliSpace.

Step 4 - Establishing the Facts and Communicating with the Complainant

Once a Formal Complaint has been accepted, a Quality Manager and Clinical Manager is nominated to conduct an internal investigation.

If the complaint involves a member of the workforce, the investigation will be conducted as follows:

Stage 1	The Quality Manager and Clinical Manager will immediately contact the named person and agree on a time (within 48 hours) to meet to discuss the matter, and gain access to relevant documentation.
Stage 2	At this meeting, the Quality Manager and Clinical Manager will provide the person with details of the complaint, interview them, and ask them to provide their version of events. The meeting will be documented. For more information, refer to Record Keeping.
Stage 3	The Quality Manager and Clinical Manager will match the facts of the complaint with the person's response and if the facts vary, through communication with the person and the complainant, clarify why they differ.
Stage 4	The Quality Manager and Clinical Manager will prepare a report summarising key findings of the investigation. A summary of these findings will be entered into Non consumer incident form on CompliSpace.

If the complaint concerns a matter which is not related to a member of the workforce, the Quality Manager and Clinical Manager will conduct an investigation based on the incident priority considering criteria such as severity, complexity, impact and the need, and possibility, of immediate action.

The Quality Manager and Clinical Manager will contact the complainant prior to the target resolution date and keep in regular contact, advising of the status of the matter, and each time confirming when the next communication should be expected. For more information, refer to Timeframes for Managing Complaints Internally.

Step 5 - Making a Determination

After considering all the facts available, a Quality Manager and Clinical Manager must make a determination which addresses all aspects of the complaint. The following options are available:

- accept the complaint and take rectification action without offering redress
- accept the complaint and offer redress
- offer redress without accepting the complaint

- reject the complaint and provide reasons for such rejection.

Offers of redress or remedies may include:

- refunds
- technical assistance
- information
- referral
- financial assistance
- financial compensation
- apology
- goodwill gift or token
- indication of changes in services, process, policy or procedure arising from complaints.

Step 6 - Formulation of Proposed Resolution

The extent of any remedy will depend upon the nature of the complaint. Some complaints are administrative in nature and the remedy may be to rectify the administrative error and issue a verbal apology or acknowledgement to the complainant. Other remedies are more complex and may, for example, involve financial compensation. Where a financial remedy is considered appropriate, the aim is to provide fair compensation for any loss suffered.

In formulating a proposed resolution, matters to be considered include:

- the extent to which others may have suffered in the same way as the complainant but who did not make a formal complaint
- the level of authority required internally to implement the proposed resolution
- the implementation of a strategy for following up where appropriate
- how information will be disseminated to relevant personnel within Arpad Aged Care.

Step 7 - Presenting a Final Response and-or Offer of Redress

The complainant must be advised of the outcome of any investigation or subsequent determination. This communication should set out:

- the substance of the original complaint
- an outline of the investigation undertaken
- the finding of the investigation
- any proposed resolution or offer of redress.

Where the resolution includes an offer of a financial remedy, a Quality Manager and Clinical Manager may discuss the proposed offer with the complainant prior to providing the offer formally. This will allow a Quality Manager and Clinical Manager to clearly explain the reasons behind the decision and allow a complainant to have any queries they may have answered directly.

All final responses and/or offers of redress should be approved by the Executive Manager and the Clinical Manager. Where appropriate, offers of redress should be made in writing.

Section 3: Recording and Reporting Complaints

This section is important for our Quality Manager and Clinical Managers, and for the Executive Manager who has ultimate responsibility for complaints records and complaints reporting at Arpad Aged Care.

Pages in this Section

- **Step 8 - Complaints Register**
- **Step 9 - Rectification and Improvement**
- **Step 10 - Closing a Complaint**

Step 8 - Complaints Register

The information contained in our Complaints Register can be used to identify trends in complaints and any systemic issues. This helps us determine where to focus attention on improving our internal processes (refer to Step 9 - Rectification and Risk Management) and improve our levels of stakeholder satisfaction.

The Complaints Register is reviewed in Management Team meetings and key information is provided to the Committee of Management on a regular basis (refer to Complaints Reporting).

Non consumer incident form on CompliSpace is designed to capture the key data with respect to any individual complaint and to track the resolution process. Non consumer incident form on CompliSpace automatically creates a Complaints Register that provides a summary of key data about all complaints in the system at any particular point in time.

Step 9 - Rectification and Improvement

Regardless of whether a complaint has been resolved internally or not, it is important that we consider the circumstances that led to the complaint arising, and whether or not an opportunity

exists to improve our internal systems and procedures, to reduce the risk of a similar complaint occurring again.

To clarify whether or not rectification work is required, the Executive Manager will meet with the person responsible for the relevant area of work, review the underlying factors leading to the complaint being made, and make a recommendation as to what, if any, rectification work is required.

Where it is agreed that rectification work is required, the Executive Manager will create Plan for Continuous Improvement/ Action plans by creating a task through Non consumer incident form on CompliSpace. The use of Plan for Continuous Improvement/ Action plans allows the Home to monitor and report on the progress of our Continuous Improvement Program.

For more information, refer to Complaint Handling and Continuous Improvement.

Step 10 - Closing a Complaint

The complaint will be closed on Non consumer incident form on CompliSpace once:

- the complaint has been resolved with the complainant (either internally or externally) or all reasonable internal and external options of rectification or remedy have been exhausted
- all relevant information about the complaint has been captured
- the risk associated with the complaint has been assessed. If necessary, it will be added into Arpad Aged Care's Risk Register(s) with any required corrective actions or improvements recorded in our Plan for Continuous Improvement/ Action plans
- any recommendations with respect to rectification work have been recorded in a corrective action task.

Processes for Review of a Complaint's Resolution

Part of the Home's complaints handling process includes the option for review of a complaint's management and resolution.

Complainants are afforded a number of avenues throughout the complaints handling process should they feel that the complaint is not being handled as they see fit, including:

- making a complaint directly to the Aged Care Quality and Safety Commission
- seeking alternative dispute resolution other than through the Home's Complaints Handling Program, for example through mediation which involves the assistance of an independent third party who helps parties to negotiate a settlement of the complaint or dispute

- seeking legal advice, should a complaint escalate to a dispute, to ensure that they know their rights relating to the issue at hand
- making a request for an alternative investigator for the complaint where the complainant perceives a conflict of interest, or potential for conflict of interest.