



Feedback and Complaints Management Procedures for External Parties

Related Policy	Participant and Carer Feedback Policy
Version	5.0
Creation date	January 2012
Revision Date	January 2024
Date for Review	January 2029
Person/Body Responsible	Chief Executive Officer
Approved By	Chief Executive Officer

1. Purpose

These procedures set out the processes that Mental Health Foundation ACT (MHF) will follow if it receives feedback or a complaint.

This document also sets out the processes that external parties can follow if they are not satisfied with how their issue is managed by MHF and want to formally complain to an external government body.

2. Feedback

Participants, carers, family members, advocates, other community service organisations, and any member of the public are encouraged to provide feedback on their experience of MHF.

Feedback can be offered at any time but may be specifically solicited from participants in the form of post service satisfaction surveys, or as part of a scheduled participant survey or other formal strategies identified by MHF. Feedback may come posed as an unanswered question, or through identification of unmet need, and can be given in several different ways, including through email, webforms, text messages, verbally or social media.

2.1. Informal feedback

Informal feedback is all verbal communication, either face to face or via telephone, to anyone in the MHF and can be offered at any time, though more complex verbal feedback may require an appointment. Providers of verbal feedback may not necessarily require a response. If the feedback is of a serious nature, such as complaints of abusive behaviour or criminal activity, the complainant is to be asked to formalise their feedback, and made aware of staff mandatory reporting requirements.

2.2. Formal feedback

Formal feedback includes all forms of written communication whether it be submitted on paper or recorded electronically via email. Formal feedback can include completed surveys, service feedback templates, complaints, compliments, or suggestions.

MHF will implement a schedule for acquiring formal participant feedback at least annually, regarding the successful achievement of outcomes and the quality of MHF services they are receiving.

All formal feedback will be reviewed and reported to the Management Committee and must be recorded in the client management system. The Board are to be apprised of all formal feedback trends.

3. Compliments

Compliments include any form of positive feedback. Compliments may be passed on verbally, electronically or in writing via a thankyou card or letter. It is important to capture and record this feedback as confirmation on what the program or organisation is doing well or capturing new information regarding the positive impacts of service delivery.

4. Suggestions

Suggestions are constructive input from participants or stakeholders on how we may improve the quality of our services, to address gaps or unmet needs, and add value to the overall goals and outcomes of the program.

All formal feedback mechanisms should seek suggestions for improvement.

5. Complaints

A complaint is any expression of dissatisfaction made to MHF about:

- Any aspect of existing or proposed services or operations, or
- A failure to act in a proper and responsible manner at governance or operational levels, or
- A failure to abide by published policies, practices, and procedures.

Complaints can be made to MHF by participants, their carers, advocates, or any other person or organisation. Complaints can be submitted in person, by phone, email, or by completing the MHF Feedback and Complaints Webform.

Information about the MHF complaints system and how to make a complaint is provided to participants and carers upon entry to an MHF program and published in each residence.

MHF staff will assist complainants to complete a Complaint Form if the person is not able to do so themselves.

The MHF will accept anonymous complaints. Where allegations cannot be verified due to the anonymity of the complaint, the complaint may not be able to be progressed to a resolution.

MHF will generally not investigate a complaint about an incident or matter if more than six months have elapsed since the incident occurred, however, investigation may take place depending on the nature of the complaint and types of evidence presented.

Formal complaints will be forwarded to the Chief Executive Officer (CEO) to initiate the complaints management process. The CEO will forward the complaint to the relevant manager within MHF to register it in the client management system, and to investigate and report on the complaint.

Complaints about the complaints policy or procedures should be made in writing to the CEO.

The target turnaround time for addressing formal complaints is twenty (20) working days, but all complainants will be contacted initially within five (5) working days. Where an issue is being investigated and the investigation is unlikely to be finalised within twenty (20) working days, the complainant will be contacted and advised of the progress of the investigation including a projected response date.

Complaints regarding an illegal activity are to be reported to the police.

No MHF participant will be disadvantaged or penalised because of lodging an appeal or a complaint to an external agency. The MHF *Whistleblower Policy and Procedure* seeks to protect people making such complaints.

Complaint resolution will inform continuous improvement processes which may include changes to relevant policies or procedures and will be proportionate to the issues raised and any risk of harm to people with disability. As part of this process MHF will ensure that any risks identified during the investigation of the complaint, are included in the MHF Risk Register.

See **Appendix** for a flow chart of how complaints are managed by MHF.

5.1. Managing Informal Complaints

Informal complaints are usually initiated via a phone call or personal visit but may also be in writing such as an email. An informal complaint process is likely to be used when:

- The participant making the complaint wants to do it informally,
- The allegations are less serious, and no one has been injured,
- There is a chance of quickly stopping the problem before it develops, or
- The complaint can be easily remedied or requires no further action.

In making informal complaints the complainant will generally seek agreement and a shared understanding of how to avoid problems in the future. In these circumstances informal processes are used for quick problem solving rather than investigating and substantiating claims. An

informal complaint will generally identify strategies and outcomes that can be discussed and agreed upon in consultation with the participant, or carer.

All informal complaints should in the first instance be referred to the most appropriate person to deal with the issue; this would usually be the specific manager. On receiving an informal complaint, the staff member dealing with the issue should:

- Listen to the complainant, be impartial, let them have their say,
- Where possible and appropriate fix the issue to the complainant's satisfaction, and
- Record the details of the complaint and the agreed outcomes for inclusion in the client management system.

If the complainant is not happy with the proposed resolution, they can:

- Request to discuss their concerns with the appropriate manager, and/or
- Engage an advocate who could assist them in communicating their concerns.

If this process does not satisfactorily resolve the issue the complainant will be encouraged and assisted to formalise their complaint for more intensive investigation and resolution negotiation.

5.2.Managing Formal complaints

Formal complaints are always submitted in writing and may include substantiating evidence. Formal complaints are more likely when:

- The person making the complaint wants to do it formally,
- Informal attempts to resolve the complaint have failed, or
- The allegations are serious (e.g. consequences require disciplinary action).

On receipt, complaints are to be referred to the appropriate manager for registration and processing. That manager will:

- Contact the complainant or nominated representative within five (5) working days of receipt of the complaint to:

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- o acknowledge receipt,
 - o confirm the details of the complaint,
 - o confirm our complaints handling processes, and
 - o if possible,
 - o provide a preliminary indication of how long the investigation will take.
- Refer the complaint to the relevant manager to investigate, or to the CEO if the complaint involves a manager directly. Where the complaint involves the CEO, it will be forwarded to the MHF Board President for investigation in line with these Procedures.
 - Refer the complaint to the CEO if the complaint is received through a funding body, the Human Rights Commission or similar external agency.
 - Ensure where possible the complaint is to be resolved within twenty (20) business days.
 - Where the complaint cannot be resolved within twenty (20) business days, contact the complainant to inform them of the delay in resolution, and communicate the current action being taken.

When the investigation of a formal complaint has been finalised, the proposed resolution will be discussed with the complainant verbally and acknowledged in writing. The outcome will be recorded in the MHF client management system.

5.3. Appeals

MHF encourages all participants and relevant stakeholders to engage with the organisation in our complaints management process prior to approaching an external body.

Participants, and carers have a right of appeal if they are unhappy with the outcome of their complaint.

Appeals should be in writing and submitted to the CEO clearly indicating the grounds of appeal. If, after an appeal, there is still no satisfactory resolution to a complaint, the complainant will be encouraged to refer their complaint to an external agency.

5.4. Complaints Made to an External Authority

There are two external avenues available to lodge a complaint about MHF services, depending on the type of service received.

All complaints relating to the provision of National Disability Insurance Scheme (NDIS) services are to be lodged with the NDIS Quality and Safeguards Commission (NDIS Commission).

Complaints relating to services provided under programs funded by non-NDIS government or non-government organisations, are to be lodged with the ACT Health Services Commissioner. Each of these processes are discussed in detail below.

As soon as staff working with MHF participants become aware that the participant is lodging a complaint with an external authority, they **must** advise their Manager and the CEO as soon as possible. The CEO will be responsible for managing a formal response and addressing any requirements resulting from an investigation of the issues.

Staff should not attempt to contact any parties' subject to the complaint unless directed to do so by the CEO or the MHF President.

NDIS Quality and Safeguards Commission

Anyone can make a complaint to the NDIS Commission about NDIS supports and services provided by MHF. This includes people with disability, their families, friends, carers, advocates or guardians, workers, or volunteers of MHF or any other person who wishes to make a complaint.

Complaints to the NDIS Commission can be made anonymously, or people can ask the NDIS Commission to keep some details of the complaint confidential. However, making an anonymous or confidential complaint may affect whether, or how thoroughly, the NDIS Commission can deal with it.

The NDIS Commission can receive complaints about issues such as:



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- whether services or supports have been provided in a safe and respectful way,
 - whether services and supports have been delivered to an appropriate standard,
 - how MHF has managed a complaint about NDIS funded services or supports provided to an MHF NDIS participant, and
 - how MHF has responded to an advocate or carer of an NDIS participant.

A complaint can be made to the NDIS Commission by:

- Telephone: 1800 035 544 (free call from landlines)
- TTY: 133 677 (interpreters can be arranged).
- Using the *National Relay Service* and asking for 1800 035 544.
- Completing the online complaints form at:
<https://www.ndiscommission.gov.au/about/complaints>.

Other, non-NDIS funded services

The relevant agency for receiving and managing complaints regarding non-NDIS services is the ACT Health Services Commissioner (HS Commissioner), which is part of the ACT Human Rights Commission office.

The HS Commissioner can deal with complaints about all health services provided in the ACT – public and private.

The HS Commissioner will generally try to resolve health related complaints through conciliation with MHF directly.



The ACT Health Services Commissioner can be contacted by:

- Visiting in person: ACT Human Rights Commission
Level 2, 11 Moore Street, Canberra City ACT 2600
- Mail: GPO Box 158, Canberra ACT 2601
- Telephone: 02 6205 2222
- Fax: 02 6205 1034
- TTY: 6205 1666
- Email: human.rights@act.gov.au
- Complete the online complaints form at:
<https://hrc.act.gov.au/complaints/>.

References

Able Australia
Version 4

Complaints and Feedback Policy,

Belconnen Community Service

Feedback Policy and Procedure,
February 2017

Mental Health Foundation ACT

Feedback Form

Participant Advocate Policy

Participant and Carer Feedback Policy

National Disability Insurance
Scheme Quality and Safeguards
Commission

*Complaints Management and
Resolution Guidance*
(version 2.1 – September 2019)

*Effective Complaint Handling Guidelines
for NDIS Providers*



Distribution and location list	
Electronic	SharePoint.../Admin /Admin /Library and reference material /Policies and Procedures/ Participant Carer Rights and Participation.
Other	MHF Website

Document History				
Author	Version	Amendment	Owner	Date of Effect
PWG	1.0	Document Created	MHF Board	1/12/2012
	2.0	Added 4.4 Complaints Made to an external authority.	EO	10/9/2014
Corporate Services Manager	3.0	Reviewed for currency. Removal of reference to online lodgement of complaints via MHF website, as this is currently not available. Changed 'consumer' to 'participant'.	EO	January 2018

Document History				
Author	Version	Amendment	Owner	Date of Effect
Corporate Services Manager	4.0	<p>Reviewed for currency. Included NDIS Q and S Commission complaints process. Updated ACT Health Services Commissioner details.</p> <p>Specified that all feedback, complaints, etc. must be recorded in the Continuous Improvement Register.</p> <p>Removal of fax as method of lodgement of complaint.</p> <p>Amended anonymous complaints to indicate MHF will accept but may not be able to progress due to anonymity.</p> <p>Amended contact from DEO to CEO and deleted all references to DEO.</p> <p>Amended reference to complaints older than 6 months not being investigated, to include that it will depend on the circumstances if there will be a post-6 months' investigation.</p> <p>Included specific requirement for staff to notify their PM and the CEO of any participant complaint to NDIS Q and S Commission ASAP.</p> <p>Removed Key Performance Indicators.</p> <p>Included reference to protection by the MHF <i>Whistleblower Policy and Procedure</i>.</p> <p>Added in complaints flow chart.</p>	CEO	May 2023
CEO	5.0	Review to align with Governance Manual	CEO	January 2024

Appendix – Flow chart for managing complaints

