



ADMINISTRATIVE POLICY

YP Leisure Options Feedback, Complaints Management and Resolution

Policy Number:	PO176		
Strategic Plan Objective	Goal 5 – Responsible Governance		
Policy Owner:	Director Corporate and Community Services	Record Number:	20/34525 [v1]
Responsible Officer:	YP Leisure Options Coordinator	Minute Reference:	CMT: 21/04/2020
Date Adopted:	28/04/2020	Next Review Date:	28/04/2024

1. POLICY OBJECTIVES

This policy provides guidance on the key principles and concepts of our feedback management system to our workers and interested parties of the YP Leisure Options (YPLO) programme who wish to provide feedback, raise an issue or concern, or make a complaint or compliment to or about us, regarding our services.

This policy is intended to ensure that:

- we handle all feedback and complaints fairly, efficiently and effectively to satisfactory resolution within a reasonable timeframe;
- that appropriate actions are taken to improve our services where required; and
- that we provide better outcomes to our stakeholders.

2. SCOPE

This policy applies to the YPLO programme workers, contractors and consultants receiving or managing complaints from stakeholders made to or about us, regarding our services, staff and our complaint handling process.

There is a close relationship with the PO174 YPLO Incident Management and Reportable Incidents Policy where incidents or complaints brought to our attention are assessed and treated accordingly.

3. DEFINITIONS

Please refer to Attachment 1.

4. POLICY STATEMENT

YPLO aims to consistently provide services that meet the needs of clients and stakeholders and satisfy applicable statutory, regulatory and contractual requirements.

YPLO undertake a range of strategies to adopt a “Best Practice” approach to monitor, measure and respond to and improve customer experience and satisfaction. Processes in place may include directly solicited feedback from our clients and stakeholders in a planned, coordinated, purposeful and measurable way. This includes:

- Surveys where parents/carers or other stakeholders can give us feedback on a range of areas in relation to the service;
- Forums, information or education sessions where topics can be presented and discussed; and
- Individual meetings with parents/carers about the client’s program and service plan reviews.

5. PROCESS

5.1. Commitment

YPLO is committed to supporting and enabling people to provide feedback, raise a concern, make a complaint to us, or to the NDIS Quality and Safeguards Commissioner (NDIS Commission). By providing a safe environment for people to speak up, ensures the business respond and acknowledge, and allows us to acknowledge when our services have not met expectations or the applicable standards. Everyone should feel confident to make a complaint or provide negative feedback without fear of adverse consequences, retribution or loss of service.

YPLO has processes and mechanisms to receive and respond to feedback, compliments and complaints from any of the interested parties.

5.2. Protections for Worker Disclosures

YPLO will ensure workers are supported by management to report incidents and complaints and that there are no negative consequences for doing so. All workers are advised that they can make a complaint on behalf of a person, or a parent/guardian, to YPLO or to the NDIS Commission. All workers are required to comply with this Policy in addition to the PO175 YPLO Incident Management and Reportable Incidents Policy and be aware of the roles and responsibilities in identifying, managing and resolving incidents and complaints and in preventing incidents or complaints from occurring.

5.3. Complaint Handling Guidelines

The principles underpinning this policy include processes that are:

- Person centred – complaints management is respectful of and responsive to a person’s preferences, needs and values.
- Outcome focussed – complaints management should reveal the contributing factors to the complaint being made, and seek to prevent matters giving rise to complaints from reoccurring, where appropriate.
- Clear, simple and consistent – the process for receiving and responding to complaints is easy to understand, accessible and consistently applied.

- **Accountable** – the response to complaints is appropriately managed. Everyone involved in the management of a complaint understands their role and responsibilities, and will be accountable for decisions or actions taken in regard to a complaint.
- **Continuous improvement** – the complaints process facilitates the ongoing identification of issues and implementation of changes to improve the quality and safety of supports and services.
- **Proportionate** – the nature of any actions following a complaint will be proportionate to the issue raised and any risk of harm to people.

YPLO complaints handling process is modelled to ensure fairness, accessibility, responsiveness, efficiency and integration into organisational culture.



YPLO encourage stakeholders to provide feedback, compliments and/or complaints about our services.

Any concerns raised in feedback or complaints will be dealt with within a reasonable time. People making complaints will be:

- provided with information about our complaint handling process and how to access it;
- listened to, treated with respect by staff and actively involved in the complaint process where possible and appropriate; and
- provided with reasons for our decision/s and any options for redress or review.

YPLO will take reasonable steps to ensure that people making complaints are not adversely affected because a complaint has been made by them or on their behalf.

YPLO accepts anonymous complaints if there is a compelling reason to do so and will carry out a confidential investigation of the issues raised where there is enough information provided.

The management of complaints will be accessible to everyone and assistance provided to understand where appropriate, particularly for people who may require additional assistance. If a person prefers or needs another person or

organisation to assist or represent them in making and/ or resolution of their complaint, YPLO will communicate with them through their representative if this is their wish. Anyone may represent a person wishing to make a complaint with their consent (e.g. advocate, family member, legal or community representative, Member of Parliament, or another organisation).

Each complaint will be addressed with integrity and in an equitable, objective and unbiased manner. YPLO will ensure that the person handling a complaint is different from any staff member whose conduct or service is being complained about.

Conflicts of interest, whether actual or perceived, will be managed responsibly. Internal reviews of how a complaint was managed will be conducted by a person other than the original decision maker if required.

5.4. Who Can Make a Complaint

Anyone can provide feedback, raise an issue, concern or make a complaint. A complaint can be made anonymously if there is a compelling reason to do so.

5.5. How to Make a Complaint

A complaint can be made in a number of ways including:

- In person, directly approaching a worker;
- Website online form
<https://yorke.sa.gov.au/about-us/online-services/feedback/> ;
- By phone, contacting YPLO Coordinator or Support Workers;
- Email at admin@yorke.sa.gov.au;
- By writing via letter; or
- Using the YPLO Compliments, Complaints and Feedback Form.

For NDIS participants, complaints can be made directly to the NDIS Quality and Safeguards Commission <https://www.ndiscommission.gov.au/> or phone 1800 035 544 (free call from landlines). Interpreters can be arranged. The NDIS Commission can take complaints about:

- Services or supports that were not provided in a safe and respectful way; or
- Services and supports that were not delivered to an appropriate standard.

In certain circumstances, it may be necessary to notify an external agency about a complaint, if the matter relates to a notifiable reportable incident. Details for this process are provided in PO174 YPLO Incident Management and Notifiable Incidents Policy.

5.6. Acknowledgement of Complaints

YPLO will aim to respond to a complaint within two (2) business days, acknowledging receipt of the complaint and, where possible, resolve the complaint at first contact. When appropriate we offer an explanation or an apology to the person making the complaint.

A record of the complaint will be added to the YPLO Complaints Register (R104), including those complaints that have been resolved at the first point of contact. This register will be regularly analysed to identify issues and track more accurately the complaint handling activities.

If a resolution is not possible, complainants will be advised of the likely timeframe required to investigate and resolve a complaint and regularly updated as to progress where necessary in line with 5.9 below.

A copy of this Policy may also be provided to the Complainant.

5.7. Prioritising Complaints

A complaint will be prioritised in accordance with the urgency and/or seriousness of the issues raised. The Priority Risk of Low, Medium, High, and Extreme of outlined in Councils Risk Matrix (Attachment 2). The level of worker involvement in the assessment of an complaint will be determined by the Assessment Escalation Actions Matrix (Attachment 3).

If a matter concerns an immediate risk to safety or security, or higher risk of harm the response will be immediate and will be escalated and reported appropriately. The PO174 YPLO Incident Management and Reportable Incidents Policy will also be applied.

5.8. Assessing the Complaint

YPLO is committed to managing people's expectations, and will inform them as soon as possible of this Policy. After acknowledgement and where early complaint resolution isn't appropriate, we will confirm whether the issue/s raised in the complaint are within our control. We will also consider the outcome/s sought by the person making a complaint and, where there is more than one issue raised, determine whether each issue needs to be separately addressed. When determining how a complaint will be managed, YPLO will consider the following:

- How serious, complicated or urgent the complaint is;
- Whether the complaint raises concerns about people's health and safety;
- How the person making the complaint is being affected;
- The risks involved if resolution of the complaint is delayed; and
- Whether a resolution requires the involvement of another organisations.

We will advise as soon as possible when YPLO is unable to deal with any part of the complaint and provide advice about where such issues, concerns and/or complaints may be directed (if known and appropriate).

In some cases, this could include reporting to external agencies or funding bodies for investigation.

Delays may occur where external agencies (e.g. NDIS Commissioner, Work Health Safety (WHS), or an external investigator or other agency) are engaged or otherwise involved.

Workers are empowered to resolve complaints promptly and with as little formality as possible. Flexible approaches will be adopted to service delivery

and problem solving to enhance accessibility for people making complaints and/or their representatives.

Complaints will be assessed on its merits and involve people making complaints and/or their representative in the process as far as possible.

The identify of complainants will be protected where this is practical and appropriate. Personal information that identifies individuals will only be disclosed or used by YPLO as permitted under the Privacy Act 1988 including any applicable exemptions, secrecy provisions and any relevant confidentiality obligations.

5.9. Investigation of Complaint

After assessing the complaint, YPLO will consider how to manage the complaint including

- Give the person making a complaint information or an explanation;
- Gather information about the issue, person or area that the complaint is about; or
- Investigate the claims made in the complaint.

The person making the complaint will be kept up-to-date on the progress, particularly if there are any delays. Communication of the outcome using the most appropriate medium will be undertaken which included actions we decide to take that are tailored to each case and will take into account any statutory requirements.

Where a complaint involves multiple organisations, we will work with the other organisation/s where possible, to ensure that communication with the person making a complaint and/or their representative is clear and coordinated. Subject to privacy and confidentiality considerations, communication and information sharing between the parties will also be organised to facilitate a timely response to the complaint. This may include verifying appropriate consents to share information.

Where a complaint involves multiple areas within our organisation, responsibility for communicating with the person making the complaint and/or their representative will also be coordinated.

5.10. Outcome of Complaint

Following consideration of a complaint and any investigation into the issue/s raised, YPLO will contact the person making the complaint to advise:

- The outcome of the complaint and any action taken;
- The reasons for the outcome;
- The remedy or resolution/s that are proposed or put into place; and
- Any options for review that may be applicable to the complainant, such as an internal review or external review.

5.11. Managing Unreasonable Conduct by People Making Complaints

YPLO is committed to being accessible and responsive to all people who approach us with feedback or complaints. At the same time our success depends on:

- our ability to do our work and perform our functions in the most effective and efficient way possible;
- the health, safety and security of our staff; and
- our ability to allocate our resources fairly across all the complaints we receive. When people behave unreasonably in their dealings with us, their conduct can significantly affect the progress and efficiency of our work.

As a result, we will take proactive and decisive action to manage any conduct that negatively and unreasonably affects us and will support our workers to do the same in accordance with this policy.

5.12. Alternative Avenues for Dealing with Complaints

YPLO will inform people who make complaints to or about us, about any internal or external review and reconsideration options available to them (including referring the complaint to the NDIS Commission, or Ombudsman for oversight of regulatory bodies, and other relevant agencies and advocacy support available).

Where a person making a complaint is dissatisfied with the outcome of their complaint, they may request a reconsideration for an internal review of the decision where new information or evidence is presented within a reasonable timeframe, which is conducted by the Manager People, Culture and Safety (or representative) not previously involved in the complaint assessment process, or seek an external review of our decision (for example, by the NDIS Quality and Safeguards Commission for NDIS participants, or other agency).

It is important to note that a reasonable timeframe follows that of the NDIS Commission, currently six (6) weeks.

5.13. Monitoring

YPLO will ensure that complaints are recorded in a systematic way so that information can be easily retrieved for reporting and analysis by management and the YPLO Working Party. A regular report will be provided at each YPLO Working Party meeting outlining:

- the number of complaints received;
- the outcome of complaints, including matters immediately resolved;
- types of issues arising from complaints;
- systemic issues identified; and
- the number of requests received for internal and/or external review of complaint handling processes.

Regular analysis of these reports will be undertaken to monitor trends, measure the quality of our service and make improvements.

5.14. Privacy and Confidentiality

Rights related to privacy are set out in Commonwealth Privacy Act 1988, the Australian Privacy Principles and State and Territory Privacy laws. Information provided in a complaint is kept confidential and only disclosed if required by law or if the disclosure is otherwise appropriate in the circumstances where disclosure would be reasonably expected.

YPLO will only provide information about a complaint to those individuals directly involved and all parties will be informed of the need for upholding privacy and confidentiality.

All information regarding the complaint will be stored securely in the client's files and the YPLO Complaints Register (R104). There are certain circumstances where exceptions can apply and our workers should disclose information about a person that can be without consent. YPLO has mandatory reporting obligations to report incidences of violence, exploitation, neglect and abuse, and sexual misconduct to the Commission and SA Police. Other than reporting the matter to relevant personnel within our organisation and other authorities, YPLO will not share any information about a complaint with other workers unless they form part of the investigation team or have been given permission to do so by the person impacted. The only exception is when it is essential to deal with an immediate safety issue.

6. RESPONSIBILITIES

All YPLO workers are responsible for implementing this policy.

7. REVIEW

This policy will be reviewed every four (4) years, in consultation with employees and/or their representatives. The policy will also be reviewed as deemed necessary in consideration to any changes to legislation, relevant standards, codes and guidelines, audit findings, any corrective actions/controls arising from risk assessment and/or hazard/incident reports and stakeholder feedback.

8. RECORDS

Records shall be maintained in line with Council's Records Management Procedure (PR063).

9. TRAINING

All workers shall receive training and support in understanding this policy and associated processes during their induction and at subsequent refresher training and/or when processes change.

YPLO Coordinator will facilitate training to workers to ensure continued awareness of this policy.

10. RELATED COUNCIL POLICIES AND DOCUMENTS

PO037 Internal Review of Council Decisions Policy

PO063 Records Management Policy

PO091 Risk Management Policy

PO174 YPLO Incident Management and Reportable Incident Policy
PR048 Corrective and Preventative Actions Procedure
RO084 Corrective Actions Register
RO104 YPLO Complaints Register
YPLO Compliment and Complaints Support Statement
YPLO Compliment, Complaints and Feedback Form

11. REFERENCES AND LEGISLATION

Aged Care Quality Standards
Anti-Discrimination Legislation
Australian Standard AS/NZ 10002:2014 – Guidelines for Complaint Management in Organizations
Charter of Aged Care Rights
Disability Act
Information Privacy Principles 1992 (SA)
NDIS Act 2013
NDIS Complaints Management and Resolution Rule 2018
NDIS Explanatory Statement NDIS (Code of Conduct) Rules 2018
NDIS Explanatory Statement NDIS (Incident Management and Reportable Incidents) Rules 2018
NDIS Explanatory Statement NDIS (Procedural fairness) Guidelines 2018
NDIS Explanatory Statement NDIS (Restrictive Practices and Behaviour Support) Rules 2018
NDIS Quality Indicators Guidelines 2018
Privacy Act 1988
Work Health and Safety Act 2012 (SA)

12. COUNCIL DELEGATION

Details of Delegation:	Chief Executive Officer
Delegate:	Nil

13. VERSION HISTORY

Archived Policy Name	Policy Number	Date Adopted	Last Reviewed
New Policy	PO176	28/04/2020	-

Attachment 1 - Definitions

Interested Parties	Include the public, clients, children and their family, parents, guardians, carers, friends, workers, advocates or agencies who provide support, our clients (members), community visitors, other professionals and organisations who have a relationship or connection with us.
Complaint	An expression of dissatisfaction made to or about YPLO, the services, workers or the handling of a complaint where a response or resolution is explicitly or implicitly expected or legally required.
Dispute	An unresolved complaint escalated either within or outside of the organisation.
Feedback	Opinions, comments and expressions of interest or concern, made directly or indirectly, explicitly or implicitly, to or about YPLO, about the services or complaint handing system where a response is not explicitly or implicitly expected or legally required.
Serious/ Reportable Incidents	Types of complaints treated under the Incident Management and Reportable Incidents Policy (PO174) would include allegations or crimes under the criminal code, notifiable data/ privacy breaches, notifiable Work Health Safety incidents, death, serious injury, abuse or neglect, unlawful sexual or physical contact or assault, sexual misconduct, grooming of a person for sexual activity, and the use of unauthorised restrictive practice.
Compliment	A positive feedback or praise, a polite expression of praise or admiration.

Attachment 2 – Risk Matrix

Risk Matrix Consequence and Reporting Action						
Likelihood		Insignificant	Minor	Moderate	Major	Catastrophic
	Almost Certain	Moderate	High	High	Extreme	Extreme
	Likely	Moderate	Moderate	High	Extreme	Extreme
	Possible	Low	Moderate	Moderate	Extreme	Extreme
	Unlikely	Low	Low	Moderate	High	Extreme
	Rare	Low	Low	Moderate	High	High

Consequence Rating Table

Description	Safety	Reputation	Legal & Regulatory	Environmental	Financial	IT/Records	Service Delivery
Catastrophic	Death. Critically life threatening injury/ illness.	State-wide negative media coverage for 2 years or greater. Insolvency.	Criminal charges/ prosecution/ fines >\$2mil.	Irreversible extensive, detrimental environmental damage/loss of environmental amenity.	>\$2mil	Irreversible, extensive loss/ damage/ access to IT infrastructure/ data.	Complete loss of Critical Business Functions (as defined in BCP).
Major	Severe, potentially life threatening injury/illness i.e. loss of limb.	State-wide negative media coverage for 12 months up to 2 years. Council dismissed.	Criminal charges/ prosecution/ fines \$1mil to <\$2mil.	Extensive, detrimental environmental damage/loss of environmental amenity for >12mths.	>\$1mil to <\$2mil	Extensive loss/ damage/access to IT infrastructure/ data >3mths.	Loss of Critical Business Functions (as defined in BCP) >3mths.
Moderate	Non-life threatening injury/illness requiring hospitalisation.	State-wide negative media coverage for up to 12 months. Council dismissed.	Prosecution/ fines \$250k to <\$1mil.	Extensive, detrimental environmental damage/loss of environmental amenity for >1mth and <12mths.	>\$250k to <\$1mil	Extensive loss/ damage/access to IT infrastructure/ data <3mths.	Loss of Critical Business Functions (as defined in BCP) >1mth and <3mths.
Minor	Non-life threatening injury/illness requiring medical treatment by a doctor. No hospitalisation.	Extensive local media coverage.	Prosecution/ fines \$100k to <\$250k.	Limited environmental damage/loss of environmental amenity for <1mth.	>\$100k to <\$250k	Partial Loss/ damage/access to IT infrastructure/data	Loss of Critical Business Functions (as defined in BCP) <1mth.
Insignificant	Non-life threatening injury requiring first aid treatment.	Some local media coverage.	Prosecution/ fines <\$100k.	Containable incident with minimal environmental damage/loss of environmental amenity.	<\$100k	Minimal Loss/ damage/ access to IT infrastructure/data	Delayed or untimely service delivery to community.

Likelihood Rating Table

Likelihood	Description	Past Occurrences	Likelihood %
Almost Certain	Expected to occur in most circumstances	Has occurred at least once within the past year	95% or greater chance
Likely	Will probably occur in most circumstances	Has occurred at least once within the past two years	75% to <95% Chance
Possible	Not expected to occur but could under specific circumstances	Has occurred at least once within the past two to five years	25% to <75% Chance
Unlikely	Not expected to occur and no previous occurrences	Has occurred at least once within the past five to ten years	5% to <25% Chance
Rare	Expected to occur only in exceptional circumstances	Has not occurred within the past ten years	<5% Chance

Attachment 3 – Complaint Assessment Escalation Criteria

What is the Risk Rating?

<p>Low Where practicable, action should be taken within a reasonable timeframe to address the risk associated with the hazard (within 5 business days)</p>	<p>Medium Action should be taken within a reasonable time-frame to address the risk associated with the hazard (within 2 business day)</p>	<p>High Action should be taken as soon as possible to address the risk associated with the hazard (immediate or same day if practicable, or next business day)</p>	<p>Extreme Immediate action must be taken to address the risk associated with the hazard (immediate, within hour)</p>
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Assessment Escalation Actions	
Extreme Risk	Details of complaint referred to relevant YPLO Coordinator, Manager People Culture and Safety, Director Corporate and Community Services and Chief Executive Officer immediately following complaint received. Manager People Culture and Safety (or delegate) coordinate investigation and resolution process. Manager People Culture and Safety (or delegate) ensures all related documents are filed and completed. Chronology of Events and Complaints Register are maintained until closed. Complete continual improvement processes as required and tracked through the Corrective Actions Register until complete.
High Risk	Details of complaint referred to YPLO Coordinator, Manager People Culture and Safety, Director Corporate and Community Services immediately following complaint received. YPLO Coordinator and Manager People Culture and Safety (or delegate) coordinates investigation and resolution process. YPLO Coordinator or Manager People Culture and Safety ensures all related documents are filed and completed. Chronology of Events and Complaints Register are maintained until closed. Complete continual improvement processes as required and tracked through the Corrective Actions Register until complete.
Moderate Risk	Complaint escalated, unresolved, or may require investigation or reporting to an external agency: complaint to be referred to YPLO Coordinator who ensures all related documents are filed and completed. Complaints Investigation, Chronology of Events and Complaints Register are maintained until closed. Complete continual improvement as required and tracked through the Corrective Actions Register until complete.
Low Risk	Resolved at Centre level normally by YPLO Coordinator and report up. Manage complaints through appropriate controls and record information and actions in the Complaints Register. Complete continual improvement as required and track through the Corrective Actions Register until complete.