

COMPLAINTS, COMPLIMENTS AND FEEDBACK POLICY & PROCEDURE

Purpose

This policy is intended to ensure that we handle complaints and feedback fairly, efficiently, and effectively. Our feedback management system is intended to:

- Enable us to respond to issues raised by people making complaints in a timely and cost-effective way.
- Boost participant confidence in our administrative process.
- Provide information that can be used by us to deliver quality improvements in our services, workers, and complaint handling.

Policy

Maxlife Care Pty Ltd will create an environment where complaints, compliments, and feedback are welcomed and viewed as an opportunity for acknowledgement and improvement. Comments and complaints are taken seriously and viewed as vital to ensure we achieve better internal performance and designs in our processes. We seek feedback as part of our ongoing goals of continuous improvement and achieving our commitment to our clients.

We will set up processes to ensure that individuals have the right to provide feedback and make complaints. Our processes are designed to encourage stakeholders to exercise their right in blame-free and resolution-focused environment. Our processes are informed by Industry standards and will ensure they respect an individual's right to privacy and confidentiality.

What is a complaint?

A complaint is an expression of dissatisfaction with a support or service we provide. Your complaint may include how a previous complaint was handled, for which a response or resolution is explicitly or implicitly expected. All complaints are managed in accordance with allocated time frames.

Who can complain?

It is our policy to accept complaints by multiple stakeholders. If we are unable to handle your complaint, we will take steps to direct you to the relevant agency or body for further support.

Complaints may be made verbally or in writing by:

- Workers
- participants
- A member of public
- An advocate

https://disabilityadvocacyfinder.dss.gov.au/disability/ndap/organisations

- A family member
- A Carers
- Anonymously

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Reportable incidents

Reportable incidents are serious incidents or allegations which result in harm to a NDIS participant and occur in connection with NDIS supports and services. When managing feedback or complaints if we have cause to believe the information gives rise to a reportable incident, we will take steps to report the incident to the NDIS.

Principles of Complaints and Feedback Processes

The relevant team of Maxlife Care will engage with the complainant and ensure all efforts are made to enable access, allay fears, provide opportunities for support and to provide a fair, timely and appropriate complaints resolution process. All procedures developed under this policy will include the following principles:

Natural Justice Confidentiality & Procedural Accessability Transparency & Privacy Fairness Resolutions Accountability Consistency Respect & Oversight driven Continous **Inclusive Improvement**

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Complaint Management Process

At all stages of the complaint process the complainant will be notified of the progress.



Stage 1 Acknowledge

- All complaints received by Maxlife Care will be acknowledged as quickly as possible. Acknowledgement's will take place between 1 working day to 48 hours.
- Any complaints that are required to be reported to other bodies will be referred as appropriate
- Record the information about the complaint in the Complaint's Register.

Stage 2 Review of the Complaint

- Consult with the participant regarding their desired outcome.
- Determine the type of complaint service, support, or process.

Stage 3 Assessing the Complaint

- During the assessment of the complaint, the relevant complaint manager will determine a resolution pathway (where required).
- If a meeting is required, then it will be held in a safe environment that has been determined by the complainant and at a time relevant to the participant.
- Inform the complainant of support regarding their right to an advocate, an interpreter, stages of Decision.

Stage 4 Investigation:

- At the time of lodgement, determine if it is practicable to find an immediate resolution.
- Consult with the complainant to gather information about the underlying issue.
- Analyse antecedents and underlying issues in determining a decision.

Stage 5 Decision:

- Respond to the complainant with a clear decision.
- Inform the complainant of the decision, including the reason for the decision and giving options for reviewing the decision
- Steps will be taken to consider the response from the complainant.

Post decision review (if required)

- Ascertain preventative actions and continuous improvement.
- Consider if there are any systemic issues.
- Record the details of the improvement from the complaint in Continuous Improvement Register.
- Complaint's resolution will be monitored according to the audit schedule.
- Where necessary feedback sought from complainants to assist in the continual improvement of the organisation.

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Documentation

- All complaints will be recorded in a Complaints Register.
- Information in the register will include:
 - o Information about the complaint.
 - o Identified issues.
 - Actions are undertaken to resolve the complaint.
 - o The outcome of the complaint.
- Upload the documents, including Compliments, Complaint/Feedback forms into the computer system.
- Keep a copy of the information given to complainant in the file.
- Keep all complaint documents for seven (7) years from the day of record.
- Collect statistical and other information to:
 - o Review issues raised.
 - o Identify and address systematic issues.
 - o Report information to the Commissioner if requested by the NDIS Commissioner.
- The Policy review will occur if there are legislative changes or regularly (at least annually).

Unresolved complaints

Unresolved complaints will be escalated for further investigation and resolution. Should the complaint not be resolved to the complainant's satisfaction, the complaint will be escalated to the appropriate persons through the appropriate pathways.

If the complainant is not satisfied with our response, they may contact the NDIS Feedback and Complaints. Website https://www.ndis.gov.au/contact/feedback-and-complaints#online-form or 1800 800 110.

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