

Feedback and Complaints Procedure

Division of Disability Services (DS)

Please note this procedure is mandatory and staff are required to adhere to the content.

Summary

To provide a clear and consistent process for the reporting, management and response to feedback and complaints received by Disability Services, which complies with the requirements of the DHS Customer Feedback and Complaints Policy (23BDHS/1625).

Table 1: Document Details

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Applies to	All DHS Disability Services
Issued by	DHS Disability Services
Delegated Authority	Joe Young Executive Director, Disability Services
Procedure Custodian	Julie Rogers Director, Quality and Clinical Services Disability Services
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Confidentiality Classification	OFFICIAL

Table 2 – Revision Record

Date	Version	Revision description
8 April 2021	1.0	Initial version developed to align with organisational changes to DHS Accommodation Services
June 2024	2.0	Reviewed and updated, including names and systems updated in the document (Accommodation Services to Disability Services and MySAFETY to customer feedback and complaint management system (CMS))

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1. Title

Feedback and Complaints Procedure

2. Purpose

This procedure aims to:

- Support the safety and well-being of clients.
- Ensure clients of the Department of Human Services (DHS) Disability Services, their families and support persons can provide feedback, whether it is a compliment, a comment/ suggestion, or a complaint.
- Ensure a systematic approach to complaints and feedback, which is procedurally fair and follows principles of natural justice.
- Enhance transparency and accountability in the delivery of services.
- Meet the feedback and complaints management obligations under the *NDIS Practice Standards and Quality Indicators*.
- This Procedure reflects the DHS Customer Feedback and Complaints Policy (CRL-306) and related documents.

3. Scope

This Procedure applies to all workers, clients, their families, and support persons of DHS Disability Services.

Any person, including clients, can provide feedback and/or make a complaint and the matter will be investigated and responded to.

Excluded:

This procedure does not apply to:

- Complaints that are the subject of a formal investigation, an administrative appeal, or other form of legal redress.
- Internal complaints concerning workforce conduct (managed under the Grievance Resolution Procedure).
- Client incidents (managed under the Client Incident Management Policy and Procedure).

Guiding principles:

The following principles must guide the management of all feedback and complaints.

► **Commitment to clients:** Disability Services is committed to providing safe, high quality and person-centered services.

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► **Responsive and coordinated:** Feedback and complaints will be responded to and managed in a timely, consistent, responsive, coordinated, and effective manner.

► **Privacy, reporting and disclosure:** Personal information will be collected, managed, used, and disclosed in accordance with relevant policy and legislation, and in a manner that is respectful to the individuals involved.

Personal information, particularly sensitive information, is reported and disclosed on a strictly 'needs to know' basis, with systems and processes that support the privacy and security of information and respect for affected individuals.

4. Closing the Gap

Under the National Agreement on Closing the Gap, specifically Priority Reform Three: Transforming Government Organisations, Disability Services, as part of DHS, is committed to systemic and structural transformation to improve accountability, and to respond to the needs of Aboriginal peoples. Disability Services is expected to report on actions to implement the transformation elements under Priority Reform Three which include identifying and eliminating racism and embedding and practicing meaningful cultural safety. These outcomes will be measured by the proportion of Aboriginal people reporting experiences of racism, and the proportion of Aboriginal people who identify as feeling culturally safe in dealing with Disability Services.

It is noted that additional considerations may be required to support and respond to feedback and complaints from Aboriginal clients. These specific factors may include, for example, the provision of information to family, next-of-kin and community, seeking specific cultural advice, and developing specific resources.

5. Definitions

Table 4 – Definitions

Term	Meaning
Advocate	An advocate is a support person engaged by the individual to assist them to participate in the process of providing feedback and could be an informal support person involved to assist the individual or someone in a formal role such as a lawyer, a doctor, a professional visitor, independent advocacy service or the SA Ombudsman.
Client	Someone who has received or is receiving one or more of DHS Disability Services' programs or services including Disability Services, Transition to Home (T2H), Northgate, Clinical Services, or Equipment Program.
Complaint	Includes expressions of dissatisfaction or concerns about a DHS Disability Services service.

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Complainant	Any person or organisation who is providing feedback or making a complaint about DHS Disability Services
Complaint Management System (CMS)	This is the system used to register, monitor and report on feedback and complaints. Currently Gov Safety is the designated Complaint Management System for DHS.
Complaint Severity / Seriousness	The Client Feedback System - Severity Assessment Code (SAC) table is used determine the level of seriousness of the complaint and assists with the appropriate management of the complaint.
Conflict of Interest	A conflict of interest occurs when a staff member or an associate has, seeks, or may be perceived as having or seeking to obtain pecuniary or other personal interest which conflicts or may conflict with the proper discharge of their duties.
Feedback/ Suggestion	Any opinion, comment / suggestion, compliment or complaint, or concern, by a client or their representative, about DHS Disability Services or staff.
Gov SAFety	The DHS Incident Reporting and Complaint Management System used to register, monitor and report on feedback and complaints. Training resources and quick reference guides can be found here .
Support Person	Someone providing communication or assistance to the individual making a complaint.
Procedural fairness	The key principles of procedural fairness include: All people involved in the incident or event will be informed about what has happened or alleged to have happened. They will have the opportunity to explain their view of the incident or event. Corrective action will be based on relevant facts and circumstances. The investigator and decision maker will be impartial and even-handed.

6. Procedure Detail

6.1 Raising Feedback and Complaints

Feedback is encouraged and information regarding the DHS Client Feedback processes should be displayed and available at all Disability Services sites and provided to clients by all Disability Services.

Feedback and complaints can be made by anyone and received by any Disability Services staff member.

All feedback, complaints and compliments must be recorded on the Complaint Management System (CMS), acknowledged within five business days by Disability Services and responded to in writing by the relevant Manager within 30 days. An acknowledgement is not required if the complaint is responded to within five (5) days.

6.1.1 Complaints sent to DHS

Feedback is encouraged and information regarding the DHS Client Feedback and Complaints process should be displayed and available at all Disability Services sites.

Feedback regarding Disability Services can be provided in following ways:

- Telephone: (08) 8413 9050
- Online: <https://dhs.sa.gov.au/contact/feedback-and-complaints>
- Email: enquiries@dhs.sa.gov.au
- Posting their own written letter to:

**DHS Client Feedback and Complaints
GPO Box 292
Adelaide SA 5001**

Feedback provided via these means (post, online or phone) is monitored by the Office of the Chief Executive (OCE). The OCE will forward the feedback to the Disability Services Feedback inbox where it will be lodged in the CMS in accordance with the process described in this procedure.

6.1.2 Complaints sent to Disability Services

Feedback direct to Disability Services can be provided in following ways:

- Telephone: 1800 952 962
- Email: DHSDisabilityServices@sa.gov.au
- Posting their own written letter to:

**Disability Services Client Feedback and Complaints
Riverside Centre
North Terrace
Adelaide SA 5000**

6.1.3 Anonymous complaints

Anonymous complaints received, either in writing or via the anonymous reporting system on the DHS website, should be referred to the responsible persons for follow up.

The responsible person will:

- Assess the feedback or complaint to determine the course of action.
- Log the complaint in the CMS (if not already recorded on this system).
- If contact information for the complainant is ascertained, acknowledge the feedback or complaint within five business days.

6.2 Recording

The staff member receiving the complaint should log the details of the complaint in the customer feedback and complaint management system (CMS). When receiving a complaint, the staff member should ascertain the following:

- Name of the complainant/client
- If the complaint relates to a client, include the name and address details of the client.
- Date of the complaint.
- Names of all persons involved.
- Facts of the complaint.

Once the complaint has been logged in the CMS, an alert will be forwarded to the relevant person that a complaint has been received and they are required to undertake an investigation.

Included at **Appendix 1** is a table outlining the position responsible (based on level of seniority) for each key step of the complaint handling process.

Where possible, operational staff, with their Team Leader, should seek to resolve complaints made by clients locally and as soon as possible, particularly where the complaint is minor. The complaint details should still be logged in the CMS.

6.3 Acknowledging

Complaints must be acknowledged in writing within 5 business days of receipt. The acknowledgement letter template should be used or an email acknowledgement of the same content. Where a complaint can be quickly resolved, it may be possible to provide the acknowledgment and resolution in the same letter.

6.4 Investigation

Complaints will be investigated/followed up in accordance with the principles of procedural fairness and open disclosure and must include a cultural, access and inclusion lens where appropriate.

Complaints should be investigated in a planned, logical, and consistent manner and it is recommended that a discussion with the complainant occurs as part of this. This includes determining the:

- Substantive issues of concern,
- Relevant requirements in relation to these issues (legal, policy, cultural or procedural requirements),

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- Available sources of information in relation to these issues (parties directly involved, witnesses, documentation, in some situations CCTV footage, cultural advisors) and how can these be obtained,
- Outcome sought by the complainant.

The Department of Human Services (DHS) uses the DHS Client Feedback System - Severity Assessment Code (SAC) table to determine the level of seriousness of the complaint and assists with the appropriate management of the complaint.

Steps to consider for all complaints:

- Collate information on the complaint, which may include speaking to all interested parties and reviewing client notes and CMS for information relating to the matter.
- Keep the complainant/client informed either in writing, or verbally if practicable, including:
 - Ensuring the complainant/client understands the process for resolving the complaint and the outcome of the complaint; and
 - Seeking clarification on the complaint if required.
- Where required, offer an independent advocate's support to help a client make a complaint or provide feedback. An advocate is a support person engaged by the individual to assist them to participate in the process of providing feedback and could be an informal support person involved to assist the individual or someone in a formal role such as a lawyer, a doctor, a professional visitor, independent advocacy service or the SA Ombudsman.
- The staff member handling the complaint must not have a conflicting interest with any staff member who is the subject of the complaint.
- Record/upload all correspondence, including details of telephone calls, on the CMS.
- Advise the complainant/client of the outcome and decision after investigation of the complaint.
- Clearly record the outcome of the complaint on CMS. This may involve completing a Preliminary Assessment of the complaint only, or a Preliminary Assessment and Full Investigation.
- Review the investigation information and complete the investigation review field.

6.5 Additional Reporting

Some Feedback and Complaints may require additional reporting depending on the event's nature. Additional reporting may be internal (for example in the incident management system and may be referred to the Investigation Management Unit) or to external authorities (South Australian Police (SAPOL), Australian Health Practitioner Regulation Agency (AHPRA),

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the Office for Public Integrity (OPI), NDIS Commission, Aged Care Commission and/or Lifetime Support Authority).

6.6 Resolution

Involve the complainant/client in the resolution process, if practical.

Complaints should be finalised within 30 days. Where a 30-day resolution timeline is not possible, progress updates are to be given to the complainant (verbally or in writing) every 20 days until the complaint is finalised.

6.7 Closing the loop

It is important to provide an outcome or resolution of any complaint made.

- Consideration should be given to providing this information in an easy-to-read format, using pictures if necessary. A verbal response to the complaint may also be required.
- Ensuring appropriate records are kept in the CMS.

If the complaint has not been resolved, information should be provided to the complainant or refer the matter to another authority (as relevant).

6.8 Right of review

A client, family member or any other complainant may ask for a review of a decision either verbally or formally in writing (e.g., via the Feedback Form or the Feedback page on the DHS website).

The complainant may ask for a review of the decision by any of the following:

- Requesting further review by a more senior person, for example the Assistant Director, or Director.
- Requesting a review by the Executive Director, Disability.
- Requesting a review by the Chief Executive, Department of Human Services.
- Requesting a review by the Minister for Human Services.
- Contacting an external body, including (but not limited to):
 - o The NDIS Quality and Safeguards Commission for complaints about NDIS services that were not provided in a safe and respectful way and / or delivered to an appropriate standard.
 - o The Health and Community Services Complaints Commissioner for complaints about health and community services, when a direct approach to the service provider is either unreasonable or had not succeeded.

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- o The Office of the Public Advocate can assist if there is a dispute about consent to medical treatment or there is a disagreement about decisions or decision-makers.
- o The SA Ombudsman for complaints about administrative acts, misconduct, and maladministration (for example failure to act, delay in taking action, deliver of service, unreasonable or unfair decisions).
- o The Adult Safeguarding Unit for concerns about adults who may be vulnerable and experiencing abuse or mistreatment by informal supports.
- o The Community Visitors Scheme can provide advocacy and assistance to clients, their carers and family members as they work to resolve issues relating to care and service provision.

A client or community member has the right to have their review (or original complaint) heard at any level at any stage.

Where a complaint is made to any of these external bodies, staff must inform their line manager. The Director, Quality and Clinical Services must also be notified.

Any response to external bodies, must be made through the Executive Director, Disability.

6.9 Advocacy

Staff have a duty to support any client or complainant to make a complaint, including to the NDIS Quality and Safeguards Commission, without inhibition and to ensure that they do not suffer any harassment or retribution in response:

- Any staff member suspected of harassing a client or community member in response to a complaint will be investigated.

Clients or community members have a right to a support person when making a complaint:

- To provide communication and emotional assistance for the individual in making their complaint.
- To act to ensure that the individual understands the process and the outcome of the complaint; and
- To act to ensure that the complaint is heard and resolved fairly and promptly.
- Where the complainant is a client their support person may include:
 - o Any authorised official, domestic, or professional visitor; or
 - o Any staff member without a conflict of interest who consents to the role.

Where the complainant is a member of the community, their support person may be anyone they nominate.

6.10 Managing unreasonable conduct by people making complaints

Disability Services is committed to being accessible and responsive to all people who wish to provide feedback or complaints. At the same time successful outcomes depend on:

- The ability to work and perform functions in the most effective and efficient way possible,
- The health, safety, and security of workers, and
- The ability to allocate resources fairly across all the feedback and complaints received.

Complainant's conduct can be considered unreasonable if its nature or frequency consumes a disproportionate number of resources to the detriment of other complainants and/or raises significant health or safety issues for workers. Examples of unreasonable conduct include where the person:

- Is aggressive and/or verbally abusive,
- Threatens harm and/or violence,
- Bombards with unnecessary and/or excessive phone calls and/or emails,
- Makes unrealistic and/or inappropriate demands,
- Is unreasonably persistent — continually refusing to accept the decisions and recommendations in relation to their complaints.

In the event of threatening or abusive statements which indicate a risk of harm or violence, Disability Services may report the conduct to the appropriate authorities (for example, the South Australian Police).

If satisfied that a complainant is otherwise acting unreasonably, steps may be taken to minimise or control their interactions with staff by:

- In the first instance, responding with advice that the feedback will not be assigned to the responsible business area, and an invitation to re-submit the feedback without the use of inappropriate language or sentiment.
- Placing restrictions on the type of contact that can be made. For example, contact only in writing if a person is verbally abusive.
- Use of a standardised response to refuse to engage regarding repeated feedback about closed matters.
- Withdrawing services from repeatedly threatening and/or abusive people.

6.11 Analysis of Feedback and Complaints Received

All complaints and feedback will be analysed by the Feedback, Complaints and Briefing Coordinator responsible for the Complaint Portfolio. A report will be provided to the

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Disability Services Quality and Safeguarding Committee monthly with key issues, themes and trends identified and reported. This will include a periodic review of the end-to-end complaint and feedback procedure.

Complaints and feedback reporting will also occur through the Incident Management Committee. The Committee will provide:

- Oversight of the quality and continuous improvement of Incident Management training for staff to support a systemic approach to the management of incidents.
- Oversight of relevant policy and procedures relating to Incident Management Practice.
- Actioning service improvement opportunities identified through incident management practice, including improvements to the care and support of clients and the safety and well-being of staff.
- Improving the prevention of, and response to, the abuse and neglect of people with disability through effective incident management practice, consistent with the Zero Tolerance to Abuse and Neglect Strategy.
- Identification and analysis of incident trends to identify gaps and service improvement opportunities.

Disability Services is also required to report to the Office of the Chief Executive Officer 6 monthly via the complaints template report provided.

6.12 Continuous Improvement

Disability Services will continually improve feedback and complaints systems and process by:

- Collecting complaints data to support performance monitoring, analysis, and evaluation of trends.
- Providing internal and public reporting on key performance indicators.
- Providing analysis of complaints and feedback to the Disability Services Incident Management Committee.
- Providing analysis of complaints and feedback to the Disability Services Quality and Safeguarding Committee.
- Providing analysis of complaints and feedback to the DHS Quality and Safeguarding Steering Committee.
- Using feedback and complaints data to identify opportunities for improvement.

6.13 Information sharing and Privacy Principles

Privacy considerations should remain at the forefront of all feedback and complaint processes. Any disclosures made in the CMS process should adhere to public expectations and to the *Premier and Cabinet Circular 12 – Information Privacy Principles Instruction*.

Responses to complaints or feedback that lead to concerns for a person’s health or welfare should follow the Information Sharing Guidelines.

If a client is unable to give informed consent, Disability Services must gain the consent of their family/legal guardians. Wherever possible, written consent from family/legal guardians will be obtained prior to services being provided by Disability Services. Where applicable, ongoing liaison will be maintained with clients or their family/legal guardian to ensure they are involved in decision making, needs are known and decisions around consent are timely.

7. Roles and Responsibilities

Role	Authority/Accountability
Director/Assistant Director	<ul style="list-style-type: none"> • To perform regular reviews of compliance with this Procedure and the DHS Customer Feedback and Complaints Policy and guidelines across Disability Services. • To ensure training on complaints and feedback management is available and provided to staff across Disability Services. • To refer matters of potential staff misconduct to the DHS Incident Management Unit for investigation. • To oversee regular reviews of feedback and complaints received across the Disability Services business, to identify trends, themes, and opportunities to improve the quality and delivery of service and care to clients.
Area Managers Or equivalent role such as: Service Operations Manager, Allied Health Manager, Advanced Clinical Service Coordinator, Nurse Unit Manager	<ul style="list-style-type: none"> • To respond to feedback and complaints of an extreme/high risk nature. • To ensure they are managed formally in accordance with this Procedure and the DHS Customer Feedback and Complaints Policy and guidelines. • To review the report compiled by the Feedback, Complaints and Briefing Coordinator and look for opportunities to improve the quality and delivery of service and care to clients within their area.
Team Leader Or equivalent role such as: Senior Practitioner, Senior Specialist Behaviour Support	<ul style="list-style-type: none"> • To respond to feedback and complaints of a minor/moderate nature. • To identify serious complaints and ensure they are managed formally in accordance with this Procedure and

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Practitioner, Advance Clinical Nurse.	<p>the DHS Customer Feedback and Complaints Policy and guidelines.</p> <ul style="list-style-type: none">• To review the report compiled by the Feedback, Complaints and Briefing Coordinator and look for opportunities to improve the quality and delivery of service and care to clients within their area.
Team Supervisors or equivalent	<ul style="list-style-type: none">• To assist with the handling of feedback within their staff teams.• To respond to complaints where required.• To respond to local and minor complaints made by clients. To ensure feedback information is displayed and available in sites.• To work with other Disability Services staff to implement opportunities and improvements based on analysis of complaints by the Feedback, Complaints and Briefing Coordinator.
Feedback, Complaints and Briefing Coordinator	<ul style="list-style-type: none">• To identify trends, themes, opportunities to improve the quality and delivery of service and care to clients.• Provide analysis of all complaints received by Disability Services.• Reports provided monthly to the Disability Services Quality and Safeguarding Committee to proactively address key themes and issues and foster continuous improvement.
All Staff	<ul style="list-style-type: none">• To respond appropriately to any feedback received by a client, family member, legal guardian, stakeholder, or community member in accordance with this Procedure.• To undertake training on complaints and feedback.• To support all clients, family member, legal guardian, stakeholder, or community member to give feedback without inhibition, risk of harassment or retribution.

8. Monitoring, Evaluating and Review

The Director, Quality and Clinical Services must:

- Be satisfied that feedback and complaints are managed in accordance with this Procedure and the DHS Customer Feedback and Complaints Policy and related documents.
- Ensure delegated officers understand their responsibilities and conduct their duties in line with the requirements set out in this Procedure.
- Ensure all responsible officers have access to the necessary training and orientation to equip them to conduct their areas of responsibility effectively; and

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- Ensure regular audits of compliance with this Procedure and report any non-compliance to the Executive Director, Disability.
- Ensure a periodic review of the end-to-end feedback and complaint procedure occurs.

9. Reference Documents

9.1 Directive documents

DHS Customer Feedback and Complaints Policy (23BDHS/1625)

DHS Critical Clients Incidents Policy

Department of the Premier and Cabinet Circular, Complaint Management in South Australian Public Sector (PC039).

AS 10002:2022: Guidelines for complaint management in organisations.

NDIS Quality and Safeguarding Framework

9.2 Supporting documents

DHS Client Feedback System Severity Assessment Code (SAC)

DHS Diversity & Inclusion Strategy

Closing the Gap Framework and Policy

DHS Client Feedback form

DHS Zero Tolerance to Abuse and Neglect of People with Disability Strategy

Disability Services Customer Charter

9.3 Related documents and resources

[Audit Survey Report: Assessment of state agencies' complaints managements systems – Ombudsman SA \(June 2018\)](#)

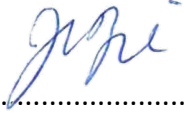

[Code of Ethics | Office of the Commissioner for Public Sector Employment](#)

[Managing unreasonable conduct by a complainant – A manual for frontline staff, supervisors and senior managers – A joint project of the Australasian Parliamentary Ombudsman \(2021\)](#)

[Effective Complaints Handling Guidelines for NDIS providers | Commonwealth of Australia \(Department of Social Services\) \(2015\)](#)

10. Approval

Version 2.0

Endorsed by the:		
Quality and Safeguarding Committee Julie Rogers Director, Quality and Clinical Services Joe Young Executive Director Disability Services
Out of Session email dated 10/04/2024	Disability Services 11/ 06 /24	11 /06/ 2024

Appendix 1 - Feedback and Complaints Process - Position Responsible

		Role* Responsible (based on Severity) **		
		Low / Moderate	High	Extreme
Step In Process	Record in CMS	Worker receiving complaint	Worker receiving complaint	Worker receiving complaint
	Acknowledge	Team Leader	Area Manager	Senior Manager/Director
	Notify senior staff	Team Leader	Area Manager	Senior Manager/Director
	Investigate	Team Leader	Area Manager	Senior Manager/Director
	Notify client / guardian of outcome	Team Leader	Area Manager	Senior Manager/Director
	Ensure all information added to CMS	Team Leader	Area Manager	Senior Manager/Director
	Advise senior staff	Team Leader	Area Manager	Senior Manager/Director

* Or the equivalent role relevant to the business unit (where different position titles are utilised).

** Outlines minimum standard. These standards can be exceeded, for example allocating a more senior member to handle the complaint.