

# Feedback & Complaints Policy & Procedure



## Purpose and Scope

This policy outlines how feedback (including complaints, compliments, and suggestions) is managed and resolved in our organisation. It ensures that anyone – participants, family members, carers, advocates, staff, or community members – can easily provide feedback or make a complaint about any aspect of our services, supports, or conduct. We implement this policy in compliance with the NDIS Practice Standards and the *NDIS (Complaints Management and Resolution) Rules 2018*, as well as relevant South Australian requirements. All staff, contractors, volunteers, and management members must follow this policy.

**Compliance:** As a registered NDIS provider, we are required by law to have an effective complaints management and resolution system that meets the NDIS Commission’s rules. Failure to comply can result in regulatory action. This policy is designed to be audit-ready and reflects best practices from NDIS Commission guidance and South Australian legislation.

## Policy Statement and Principles

We are committed to a positive feedback culture where concerns are welcomed and addressed promptly. Our guiding principles include:

- **Right to Complain:** Everyone has the right to express dissatisfaction or make a complaint about any part of our services without fear of adverse consequences. We ensure our feedback process is transparent, accessible, and easy to understand.
- **Respect and Fairness:** Complainants will be treated with courtesy and respect. All complaints are handled with procedural fairness, meaning we listen to all sides and make decisions impartially and objectively.
- **No Retribution:** Making a complaint will not result in any retribution or reduction in the quality of service. We explicitly forbid any form of retaliation or disadvantage toward a person for raising an issue.
- **Timeliness:** We address all feedback and complaints promptly and efficiently. Complaints are acknowledged within 2 business days of receipt, and we aim to resolve and formally respond to complaints within 21 days (three weeks) wherever possible. If more time is needed for complex issues, we will keep the complainant informed of progress regularly.
- **Confidentiality:** Complaints will be handled in a manner that protects privacy. Information is only shared on a need-to-know basis or if required by law, and records are kept secure.
- **Quality Improvement:** We view feedback and complaints as opportunities to improve our services. Trends and issues identified through complaints will be reviewed and lead to continuous improvements in our practices.
- **Accessibility and Support:** We support people to make complaints in whatever way suits them. This includes providing information in alternative formats or languages, assisting those with communication difficulties, and permitting the use of advocates or support persons. We will facilitate access to interpreters or advocates as needed so that everyone can be heard.

## Definitions

For the purposes of this policy, the following definitions apply:

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- **Feedback:** Any comment, compliment, complaint, suggestion or information about our organisation's services or staff, whether positive or negative. All feedback is valued as it helps us improve.
- **Complaint:** An expression of dissatisfaction made to or about us, related to our services, supports, or the handling of a prior complaint, where a response or resolution is explicitly or implicitly expected. A complaint might range from a minor issue to a serious allegation.
- **Complainant:** The person or party making the complaint. This could be a participant, their family member or guardian, an advocate, a staff member, or any other concerned person (including anonymously). A complaint can also be made on someone's behalf (with their consent or best interest in mind).
- **Informal Complaint:** A complaint that can be resolved quickly and easily at the point of service, requiring minimal investigation or formality. These are often low-risk issues or simple misunderstandings that can be addressed by frontline staff immediately. (Even when resolved informally, these complaints should still be recorded for tracking purposes.)
- **Formal Complaint:** A complaint that is more complex or cannot be resolved immediately, and thus is managed through the formal process outlined in this policy. Formal complaints typically require investigation, documentation, and a formal response to the complainant.
- **Serious Complaint (Significant Complaint):** A complaint that involves serious issues such as an alleged breach of law or NDIS standards, risks to a person's safety or well-being, or issues that could significantly impact the participant or the organisation's reputation. Serious complaints are treated with high priority, often involve senior management, and may trigger additional reporting obligations.
- **Reportable Incident:** Any serious incident that must be reported to the NDIS Quality and Safeguards Commission under the *NDIS (Incident Management and Reportable Incidents) Rules*. This includes allegations of abuse or neglect, serious injury, sexual misconduct, unlawful sexual or physical contact, death of a participant, or other serious harm. If a complaint includes allegations that meet the definition of a reportable incident, we will immediately initiate our incident management procedures and notify the NDIS Commission and other relevant authorities as required by law.
- **Complaint Management System:** The overall system we use to manage feedback and complaints, including this policy and related procedures, any forms or software for tracking complaints, and the personnel responsible for handling issues.

## How to Lodge a Complaint

We offer multiple accessible avenues for anyone to lodge a complaint or provide feedback.

Complaints can be made in any of the following ways:

- **By Phone:** Call us at **1300 000 730** to speak with a staff member and lodge a complaint over the phone. Our staff will listen and, if needed, help put your complaint in writing.
- **Online via Website:** Visit our website [www.ahhlifekskills.com/](http://www.ahhlifekskills.com/) and fill out the online Feedback/Complaint form. We have a dedicated section on our site for submitting complaints or feedback at any time.
- **Complaint Form (PDF):** You may download our **Complaint Form (PDF)** from the website, fill it in, and send it to us via email or post, or hand it to any of our staff. If you prefer, we can provide a printed form at our office or mail one to you on request.

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- **In Person:** You can raise a complaint directly with any staff member, Team Leader or manager. Our staff will document your concerns and ensure they are logged in our system.
- **By Email or Mail:** (If applicable) You can email your feedback or complaint to our official email address or send a written letter to our office mailing address. (*Contact details are available on our website and in the participant handbook.*)

**Anonymous Complaints:** Complaints can be made anonymously (for example, by not providing a name on the web form or by mailing an unsigned letter). We will treat anonymous complaints seriously and investigate them to the extent possible. However, keep in mind that if a complaint is anonymous, we will not be able to provide a direct response back to the complainant.

**Support in Lodging Complaints:** We can assist individuals to formulate or lodge their complaint if needed. This may include arranging interpreters, providing information in easy-read or other languages, or connecting the person with an independent advocate. People making or affected by a complaint are encouraged to have a support person or advocate of their choice to help them at any stage, if they wish.

Each participant (and their family/representative) is informed of these complaint avenues at the start of service (through our Participant Handbook and orientation), and reminders are given that they can complain at any time. Information about how to make a complaint to us, or directly to external bodies like the NDIS Commission or HCSCC, is provided in plain language and alternative formats as needed.

## Complaint Types and Triage Criteria

When a complaint is received, we will assess its nature and severity to determine how it should be managed. Not all complaints are the same – some can be resolved quickly and informally, while others require formal investigation and escalation. We use a triaging system to categorise complaints:

- **Informal Complaints:** These are minor issues or simple complaints that can often be resolved on the spot or within 24 hours by the staff member receiving the complaint. For example, a misunderstanding about a schedule or a low-level dissatisfaction that can be fixed with an explanation or minor adjustment. Staff are empowered to address these promptly. If the complainant is satisfied with the quick resolution, the issue may be considered resolved informally. Even so, staff must document the issue and outcome and inform their manager so it can be logged in the complaints register for record-keeping and trend analysis.
- **Formal Complaints:** If an issue cannot be resolved immediately, or if the person prefers a formal process (or has submitted a formal complaint via form, email, etc.), it will be treated as a formal complaint. Formal complaints are entered into our complaints management system and assigned to an appropriate Manager for investigation. We will follow the full process (acknowledgment, investigation, written response) for these complaints.
- **Serious Complaints:** Complaints that involve serious matters (for example, allegations of abuse, neglect, exploitation, serious breaches of policy or law, or anything posing risk to a participant's health and safety) are classified as Serious or Significant Complaints. These are given the highest priority. We immediately escalate serious complaints to senior

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management for oversight. In some cases, we may also engage an independent investigator to ensure objectivity.

- If a complaint involves allegations of harm or abuse to a participant, or other critical incidents, it will trigger our incident management process and any required external notifications (such as informing the NDIS Quality and Safeguards Commission within 24 hours for certain reportable incidents, notifying police or child protection authorities if relevant, etc.), in line with our legal obligations.
- **Triaging and Risk Assessment:** Upon receiving a complaint, the designated Complaints Officer or manager will conduct an initial risk assessment. We assess factors such as: the severity of issues raised, any immediate risks to anyone's safety, whether the issue is systemic, and who should best handle it. We then assign a priority level:
  - **Low/Moderate:** Routine complaints with low risk. Handled by the relevant staff or line manager. Example: minor service dissatisfaction.
  - **High:** Complaints indicating significant concern or moderate risk. These are escalated to a higher manager or executive for awareness and guidance. Example: a complaint about a staff member's conduct (non-abusive) or a recurring service failure.
  - **Extreme/Critical:** Complaints indicating a critical issue, high risk of harm, or legal breach. These are immediately escalated to the Managing Director for awareness and direction. Example: allegations of abuse, serious misconduct, or anything that could have serious consequences for a participant or the organisation.
- This triage ensures that serious complaints get prompt senior attention, and that all complaints are dealt with proportionately. No matter the category, every complaint is taken seriously and addressed fairly. The level of response will be scaled to the complexity and severity of the complaint.

If at any point an issue initially considered "informal" turns out more serious than first thought, we will reclassify it and escalate accordingly. Conversely, if a complainant does not want a matter handled informally, we will respect their wishes and use the formal process.

## Complaint Handling Procedure

Our complaint handling process follows clear stages from initial receipt to final resolution. We aim for a person-centered approach, keeping the complainant informed and involved throughout. The key stages are:

1. **Receipt of Complaint:** When a complaint is received by any staff member (whether verbally, by phone, or in writing), the first step is to listen and record. Staff will remain calm, respectful, and helpful to the person raising the issue. We gather basic information about the complaint – what happened, who was involved, and what outcome the person is seeking. If the complaint is given verbally, staff will document it (for example, by filling out a complaint form or creating a record in our system). If the issue can be resolved immediately (e.g. a quick fix or clarification), staff will do so, and still report the complaint and outcome to their manager to be logged. If not resolved within 24 hours, or if it's serious, the complaint is referred to management for formal handling.

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2. **Acknowledgment:** We formally acknowledge all complaints within 2 business days of receipt. Acknowledgment can be in writing (e.g. an email or letter) or the same method the complainant used (for example, a phone call followed by written confirmation). The acknowledgment will:
  - a. Thank the person for raising the issue.
  - b. Confirm that we have received their complaint.
  - c. Provide the name and contact of the person or team handling the complaint.
  - d. Outline the next steps in the process and expected timeframes (for example, that we aim to investigate and respond within 21 days).
  - e. Reassure the complainant that their concerns are taken seriously and will be dealt with confidentially and without retribution.
  - f. If not already provided, give information about support options (like using an advocate or interpreter) and external avenues (like the NDIS Commission or HCSCC) in case they need additional support or are not comfortable going through our process.
3. **Assessment and Planning:** After acknowledging, the responsible manager will assess the details of the complaint in depth. This involves:
  - a. **Clarifying issues:** They may contact the complainant to ensure they fully understand the complaint and the outcome the person wants. If needed, they will assist the complainant in articulating the issues clearly.
  - b. **Triage/Risk Rating:** As described in the *Complaint Types and Triage* section, they will determine the seriousness and priority. Using our risk matrix, they categorise the complaint (e.g. low, moderate, high, extreme) and follow the corresponding escalation protocol.
  - c. **Assigning an Investigator:** They will assign an appropriate person to handle the complaint. For straightforward complaints, this might be a line manager. For more serious or sensitive complaints, a senior manager or an independent person will investigate. Importantly, the investigator will be someone not directly implicated in the complaint to ensure fairness. If the complaint is about a specific staff member, that person's direct supervisor (or another manager) will usually investigate, rather than the staff member themselves.
  - d. **Planning the approach:** The responsible person will develop a brief plan for how to investigate and resolve the complaint. This may include identifying who needs to be interviewed or consulted, what evidence (documents, records) to review, and setting target dates for steps. We aim to complete most investigations and provide a final response within 21 days of receiving the complaint. If the issue is complex and might take longer, the complainant will be informed of the extended timeline and updated regularly on progress.
4. **Investigation and Resolution:** The assigned officer/manager will carry out a fair and impartial investigation of the complaint. This can involve:
  - a. Speaking with the complainant (and/or their representative) to hear their full story (if not already obtained) and to clarify any details.
  - b. Interviewing staff or other parties involved in the issue, ensuring each has a chance to provide their perspective (following procedural fairness).

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- c. Reviewing any relevant documents, records, or evidence (for example, support plans, communication logs, incident reports).
- d. *Taking immediate action if required:* If the complaint indicates any immediate risk (for instance, a staff member's behavior posing risk to participants), we will act promptly to ensure safety (such as reallocating staff duties or providing additional support) while the investigation continues.
- e. Throughout the investigation, maintaining confidentiality and only discussing details with those who need to know.
- f. **Resolution:** Once fact-finding is complete, we analyse the information and decide on a resolution. Resolution may involve:
  - i. Providing an explanation or additional information to clear up a misunderstanding.
  - ii. Taking corrective action, such as changing a procedure or providing a service that was missed.
  - iii. Offering an apology where the organisation was at fault (we acknowledge mistakes and apologise to the person for any harm or inconvenience caused, taking accountability).
  - iv. Disciplinary action or additional training for staff if a staff performance issue was identified.
  - v. In some cases, negotiating a mutually agreed outcome with the complainant (for example, a different support worker, a revised schedule, etc.).
- g. We strive to ensure the outcome is aligned with what the complainant is seeking, or if not possible, that a fair and constructive solution is offered. We also focus on identifying any systemic issues the complaint revealed and how to fix them to prevent future occurrences.

During this stage, the complainant (and any affected participant) will be kept informed of the progress. We will provide updates, especially if the process is taking longer than expected, and we may check in to see if they have any additional information to provide. The person handling the complaint may also involve the complainant in discussing potential solutions or remedies, if appropriate, to ensure the outcome meets their needs as much as possible.

5. **Outcome and Closure:** Once a resolution is determined, we will communicate the outcome to the complainant and then formally close the complaint.
  - a. **Response to Complainant:** We provide a clear and written response (unless the complainant has requested another format). This outcome letter (or email) will typically include:
    - i. A summary of the complaint issues we investigated.
    - ii. Steps taken in the investigation (e.g. "We reviewed records and spoke to staff..." without breaching privacy).
    - iii. The findings or results of the investigation.
    - iv. The decision or resolution: what actions we are taking as a result. For example, "we apologise for the issue and will be doing X to address it." If relevant, any changes made (like a new procedure, staff training, etc.) will be mentioned.

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- v. Information on the complainant's right to appeal or escalate if they are not satisfied with the outcome (including both internal and external review options).
- vi. Contact information if they wish to discuss the outcome further.
- b. We aim to write this response in plain, respectful language. If appropriate, we may also deliver the outcome in person or via a phone call in addition to writing, especially if it's sensitive.
- c. **Closing the Complaint:** After communicating the outcome, the complaint is marked as closed in our register. The responsible manager will ensure all actions promised (remedies, apologies, improvements) are implemented. We document the resolution and any lessons learned.
- d. **Follow-Up:** In some cases, we might follow up later with the complainant to ensure they are satisfied and that the solution is working. For example, if we changed a service provision, we may check that the participant is now happy with the new arrangement.
- e. **Unresolved or Dissatisfied:** If the complainant is not satisfied with the outcome, they are encouraged to let us know. We can conduct an internal review of the complaint (e.g. have a more senior person re-examine the matter) or the complainant may choose to pursue external resolution. We make it clear that they have the right to take the complaint to external agencies at any time (see External Resolution Options below), and that we will cooperate with any external review.

Throughout all these stages, our goal is to ensure complaints are acknowledged, assessed and resolved in a fair, efficient and timely manner, and to prevent it recurring.

## Complainant Rights and Support

We recognise and uphold the rights of people who make complaints, as well as those who might be affected by a complaint (e.g. participants). Key rights include:

- **Right to be Heard:** Every complainant has the right to have their concerns listened to fully and with empathy. We allow people to tell their story without interruption and acknowledge the impact the situation has had on them.
- **Right to Respect and Dignity:** Complainants will be treated with respect, courtesy, and honesty. Under no circumstances will a person be ridiculed, ignored, or judged for making a complaint.
- **No Adverse Effect:** Making a complaint will not negatively affect the services a participant receives. Participants will continue to receive services in a safe and respectful manner while a complaint is being addressed. We ensure no one is punished or disadvantaged for raising an issue.
- **Confidentiality:** The details of a complaint are kept confidential among those directly handling or involved in the matter. Information is only shared when necessary to investigate or resolve the issue, or if required to meet legal obligations. All staff are trained to maintain confidentiality in complaints handling. We also store complaint records securely (see Record Keeping below). Complainants have the right to request anonymity if they prefer (though this may limit our ability to provide a response).

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- **Right to Advocacy and Support:** Complainants have the right to use an advocate or support person at any stage of the process. This could be a family member, friend, independent advocate, or anyone the person chooses. We will help connect people with independent advocacy services if requested. We also accommodate interpreters, communication aids, or cultural support as required. If a person has difficulty understanding the process or communicating their complaint, we will take practical steps to assist.
- **Right to Fair Process:** The complainant can expect that the complaint will be handled in line with procedural fairness. This means we will give the person and any staff involved a fair chance to share their viewpoints, we will not make assumptions without evidence, and decisions will be made by unbiased personnel.
- **Right to Timely Response:** The complainant will be kept informed of the progress and outcome within a reasonable timeframe. They will receive acknowledgment in 2 days and a resolution outcome as promptly as possible (goal 21 days).
- **Right to Feedback:** If the complainant is not satisfied with how we handled their complaint, they have the right to provide feedback about the process itself and have that reviewed by management. We treat this as valuable input to improve our system.
- **Freedom to Withdraw:** The complainant has the right to withdraw their complaint at any stage. (However, if the complaint raised serious issues, we may still be obligated to address those issues internally or report them.)
- **Access to External Avenues:** It is the complainant's right to approach external oversight bodies at any time (they do not have to exhaust our internal process first). We inform people about their right to complain externally, and we will never penalise someone for doing so.

All staff must support these rights. If a complainant believes their rights are not being respected, they should escalate the matter (for instance, to a higher manager or directly to an external authority).

## Confidentiality and Record-Keeping

We manage complaint information with strict confidentiality and proper record-keeping practices:

- **Confidential Handling:** Details of complaints are only shared with staff who need to know in order to investigate or resolve the issue. All persons involved in handling a complaint (including witnesses or support persons) are expected to maintain confidentiality. Information about a complaint will not be discussed openly or with irrelevant parties. We also ensure that any documentation is kept secure. Complainants and those complained about will be informed of the need for confidentiality. In rare cases, we might not be able to maintain full confidentiality (for example, if a law requires us to disclose something to a regulator or if a serious criminal allegation is made that must be reported), but we will inform the person about these obligations.
- **Privacy Compliance:** Complaint records are managed in accordance with privacy laws (such as the Australian Privacy Principles). Personal information collected during complaint handling (names, contact details, details of the issue) is used only for that purpose or related purposes of addressing the complaint. We obtain consent from individuals if we need to share information beyond the scope of the complaint process.

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- **Record Keeping:** We keep a Complaints Register and individual complaint files to document each complaint and its resolution. This includes the complaint details, dates and times of key steps (receipt, acknowledgment, resolution), all actions taken, communications with the complainant, outcome and closure information, and any follow-up actions. We are required by NDIS rules to keep these records for a minimum of 7 years from the date of creation. Our record-keeping system (electronic and/or hardcopy) ensures records are protected from loss, unauthorised access, or damage.
- **Reporting and Analysis:** Data from complaints is aggregated (with personal identifiers removed) to analyse trends. We regularly review complaint data to identify any systemic issues or recurring problems that need addressing. Statistical information (e.g. number of complaints, types of issues, time taken to resolve) is reviewed by management as part of our continuous improvement and risk management processes. If requested by the NDIS Quality and Safeguards Commission, we will provide information about our complaints as required.
- **Continuous Improvement:** Complaints are a standing agenda item in our internal meetings focused on quality and safety. We track and discuss any trends in complaints at least quarterly. The Compliance Manager prepares reports on complaints for senior management. This helps us identify where policies or practices might need change. We document any improvements made as a result of complaints in a Continuous Improvement Register. Our complaint management system itself is reviewed at least annually to ensure it remains effective and user-friendly.
- **Storage:** Complaint records (including any investigation notes, correspondence, and outcome reports) are stored securely, with access limited to authorised personnel. After the 7-year retention period, records are disposed of securely in line with our document retention policy, unless required to be kept longer by law.
- **Integration with Other Systems:** Our complaints record-keeping is also integrated with our incident management system when relevant. If a complaint overlaps with an incident (e.g. an incident report was also filed), we cross-reference these records. We ensure that improvements identified through incidents and complaints are consolidated in our governance processes.

In summary, robust record-keeping not only ensures compliance with NDIS requirements but also allows us to learn from every complaint and demonstrate accountability.

## Roles and Responsibilities

All members of the organisation have responsibilities in our feedback and complaint handling system. Key roles include:

### All Staff and Volunteers

- **Frontline Response:** All staff and volunteers must be prepared to receive feedback or complaints courteously at any time. This means listening carefully, acknowledging the person's concerns, and either resolving the issue if it's minor and within their control or promptly referring it to the appropriate person.
- **Empowerment and Information:** Staff should inform people of their right to complain and how to do so. They should provide or assist with complaint forms if needed and explain the

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process in a way the person understands. This includes informing them of external options (NDIS Commission, HCSCC) if they prefer to go outside our organisation.

- **Support and Respect:** Staff must treat every complainant with respect and without defensiveness. They should reassure participants that services will continue uninterrupted and without negative repercussions when a complaint is made. They should also support colleagues who might be the subject of a complaint by ensuring they have a chance to tell their side of the story, and reminding them that the process is about improvement, not blame (except in cases of serious misconduct which will be handled through proper disciplinary processes).
- **Confidentiality and Professionalism:** Staff are expected to keep complaint details confidential (even from other staff not involved) and handle information sensitively. They should also log or report complaints accurately to ensure the formal process can begin.
- **Training and Awareness:** All staff receive training on this Feedback and Complaints Policy and Procedure during induction and through refresher training. They are expected to be familiar with how to assist someone to make a complaint, how to respond to complaints, and their duties under this policy. If staff are unsure, they should seek guidance from a supervisor. Staff performance reviews may include assessment of how they handle feedback and complaints to ensure ongoing compliance.

*(Note: If a staff member has a complaint of their own as an employee (e.g., a workplace grievance), that is handled under our HR Grievance Policy in the Employee Handbook, unless it directly relates to participant services, in which case this policy may also apply.)*

## HR & Compliance Manager

We designate the HR & Compliance Manager or an alternative senior manager to oversee the complaints process:

- **Oversight of Intake:** The Manager ensures all incoming complaints are logged and acknowledged quickly. They may personally acknowledge serious complaints or delegate routine ones.
- **Triage and Assignment:** They review each new complaint, determine its severity, and assign it to the appropriate investigator or manager, according to our triage criteria. For high-risk complaints, they alert senior management immediately.
- **Guidance and Support:** They provide guidance to staff handling complaints, ensuring the process is followed. They may take the lead on investigating complex or sensitive complaints, or coordinate external investigators if needed.
- **Communication:** The Manager may act as a point of contact for the complainant in more serious cases, keeping them updated and ensuring their needs are met (e.g., arranging interpreters, advocates).
- **Monitoring Timeframes:** They track the progress of open complaints to ensure we meet our timeframes (acknowledgments, updates, resolutions). If a case is approaching the 21-day mark without resolution, they will check in on the status and possibly reallocate resources to assist.

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- **Review Outcomes:** Before a complaint is formally closed, the Manager reviews the outcome and response to ensure it adequately addresses the issues and that the resolution is in line with our policies and any regulatory requirements.
- **Record Management:** They maintain the complaints register and ensure all documentation is completed. They also safeguard that records will be retained for 7 years as required.
- **Reporting:** They compile regular reports on complaints for the Management Team (e.g., number of complaints, themes, resolution times). They highlight any systemic issues identified and recommendations for improvement.
- **Continuous Improvement:** The Manager helps integrate lessons from complaints into organisational practice. This includes updating this policy or related procedures if needed, based on complaint findings or changes in NDIS rules. They also ensure staff training includes any new learnings from complaints.
- **External Liaison:** If the NDIS Commission or other external agency is investigating a complaint about us, the Complaints Officer coordinates our cooperation and response. They also handle any requests from NDIS Commission for information about our complaints (e.g. during an audit).

## Managers and Supervisors

All managers (including Housing & Wellbeing Manager, Operations Manager and Team Leaders) have important roles:

- **Promoting a Positive Culture:** Managers must encourage an open, blame-free culture where feedback and complaints are welcomed. They model a positive attitude towards resolving issues and treat complaints as opportunities to improve.
- **Handling Complaints in their Area:** Managers are often the ones to investigate and resolve complaints about their service or staff. They must do so impartially and thoroughly. This includes gathering facts, talking to all parties, and deciding on actions. They should consult with the Complaints Officer or senior management for guidance on difficult cases.
- **Supporting Staff:** If a complaint is made about a staff member they supervise, the manager should support that employee appropriately. This means informing the staff member about the complaint, giving them a chance to respond with their account of events, and treating them fairly. Managers should also ensure the staff member has access to support (e.g., a mentor) if the complaint process is stressful.
- **Implementing Solutions:** Once a resolution is decided, managers are responsible for implementing any changes in their area. For example, if the complaint result calls for a new process or additional training, the manager must carry this out and ensure it is effective.
- **Monitoring and Prevention:** Managers should monitor for any recurring issues and take proactive steps to prevent complaints. They are encouraged to regularly review feedback (including informal complaints) to improve services. In team meetings, they include discussion of any feedback or complaints and what was learned (without breaching confidentiality).
- **Escalation:** Managers know when to escalate a complaint to higher management. For instance, if at any point a complaint reveals more serious issues than initially thought, the manager should notify the HR & Compliance Manager or designated manager immediately.

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They also escalate any complaint that cannot be resolved at their level or which the complainant wishes to appeal.

## Managing Director

The Managing Director holds ultimate responsibility for ensuring the organisation has an effective complaints handling system and a positive feedback culture:

- **Leadership and Culture:** The Managing Director promotes a strong organisational culture where clients, families, and staff feel confident to express their views and raise issues. They reinforce that feedback is valued and complaints are taken seriously.
- **System Oversight:** The Managing Director ensures that a fair, transparent complaint management system is in place and that it complies with all NDIS requirements. This includes allocating adequate resources (staff time, training, tools like database systems) for managing complaints.
- **Review of Serious Complaints:** The Managing Director is immediately informed of any Extreme or High-risk complaints (e.g., allegations of abuse, high-profile incidents). The Managing Director will oversee or delegate an appropriate independent person to handle such complaints. They may approve engaging external investigators for very serious or sensitive matters.
- **Decision Making:** In some cases, the Managing Director might be directly involved in determining the outcome of serious complaints or those that have organisation-wide implications. They ensure any necessary actions (including disciplinary action against staff, if warranted) are taken.
- **Encouraging Feedback:** The Managing Director (and other executives) encourage participants and stakeholders to give feedback. This can include periodically meeting with participants, reviewing suggestion box comments, or sending out surveys that include questions about the complaints process accessibility.
- **External Compliance:** The Managing Director signs off on any required reports to regulators regarding complaints (for example, any annual attestation or providing information to auditors). If the NDIS Commission contacts us about a complaint, the Managing Director ensures full cooperation and that any corrective action required by the Commission is implemented swiftly.

## Complaints Involving the Managing Director or Senior Personnel

Complaints about the Managing Director or a senior Manager present special consideration to avoid conflicts of interest in the investigation. Our procedure for such cases is:

- **Alternative Complaint Handler:** If a complaint is about the Managing Director, it should be directed to an alternative executive such as the General Manager or HR & Compliance Manager. The Managing Director will not be involved in the investigation or decision-making of a complaint about their own conduct.
- **Complaints about Senior Staff:** If the complaint concerns another senior manager (but not the Managing Director), the Managing Director will ensure the investigator is independent of that manager. The Managing Director may handle it personally or assign it to another executive at arm's length from the issue. In some cases, an external investigator may be appointed to ensure impartiality.

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- **Notifying the Complainant:** We will inform the complainant who the designated point of contact/investigator is for their complaint (for instance, “Your complaint about the Managing Director will be handled by the General Manager”). They will receive acknowledgments and updates from that person or body.
- **Process:** The process will otherwise follow the same steps of acknowledgment, assessment, investigation, and response, with the only difference being the personnel involved. The delegate will review the findings and decide on outcomes in the case of a complaint about the Managing Director.
- **Outcome Communication:** The final response will come from the delegated investigator) to the complainant.
- **External Reporting:** If the complaint about a senior figure involves any alleged criminal activity or serious breach (for example, fraud, abuse of a participant), Managing Director or delegated investigator (as appropriate) will ensure it is reported to external authorities (police, NDIS Commission, etc.) just as any other serious complaint would be.
- **Fairness:** The Managing Director or senior Manager who is the subject of the complaint will be afforded the opportunity to respond to the allegations (to ensure procedural fairness), but they will not influence the investigation outcome. The organisation is committed to handling such complaints with the same rigor as any other, to maintain trust and accountability at all levels.

If a complainant is uncomfortable reporting a serious concern to management (for instance, if it implicates senior leadership), they are encouraged to directly contact external authorities like the NDIS Quality and Safeguards Commission. We will not interfere with or obstruct anyone from making such a complaint.

## External Complaint Resolution Options

While we strive to resolve all complaints internally, we recognise that sometimes a person may wish to seek independent resolution or oversight. At any stage, a complainant has the right to approach external agencies, and we will cooperate fully with any external complaint investigations. Key external complaint avenues include:

- **NDIS Quality and Safeguards Commission:** The NDIS Commission is a national regulatory body that oversees NDIS services. NDIS participants, their advocates, or anyone can make a complaint to the Commission about NDIS services or supports that were not safe, respectful, or delivered to an appropriate standard. The Commission can also handle complaints if a provider has not resolved a complaint satisfactorily.
  - **How to Contact NDIS Commission:** Phone **1800 035 544** (free call) or TTY 133 677. Interpreters can be arranged. Complaints can also be lodged by completing a complaint contact form on the NDIS Commission’s website. More information is available on [www.ndiscommission.gov.au](http://www.ndiscommission.gov.au). We inform participants of their right to complain to the NDIS Commission and will support them in doing so if needed.
- **Health and Community Services Complaints Commissioner (HCSCC) – South Australia:** Because we operate in South Australia, the SA HCSCC is an important avenue for complaints. The HCSCC is an independent body that handles complaints about health or community services (including disability services) in SA, under the *Health and Community*

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*Services Complaints Act 2004 (SA)*. A person can go to HCSCC especially if they have concerns about how we handled their complaint, or about issues of safety, quality or rights in our service.

- **How to Contact HCSCC:** Phone **1800 232 007** (free call in SA). There is an online complaint form on the HCSCC website, or people can write to HCSCC. More information is available at [www.hcsccl.sa.gov.au](http://www.hcsccl.sa.gov.au). We will provide any person with the contact details for HCSCC on request, and these are also listed in our participant handbook and on our website.
- **Other Avenues:**
  - **NDIS Participant Ombudsman:** (Within the Office of the Commonwealth Ombudsman) – handles complaints about the NDIA (National Disability Insurance Agency) or how the NDIS plan is administered. If a complaint is actually about the NDIA (e.g. access decisions, funding issues), we will advise the person to contact the Commonwealth Ombudsman or NDIA directly, as those are outside our service.
  - **Advocacy Organisations:** While not a formal complaint body, independent advocacy groups can assist participants in making complaints and ensuring their voices are heard. We maintain a list of local advocacy services and can provide those details.
  - **Police:** If the complaint involves alleged criminal conduct (e.g. assault, theft), the complainant can go directly to the police.
  - **Safeguarding Offices or Other Regulators:** In some cases, other bodies might be relevant (for example, if the participant is a child or under guardianship, the SA Department for Child Protection or Office of the Public Advocate might be involved). We will support the person to contact any such bodies as needed.
  - **Funding Bodies:** If our service is also funded or regulated by another entity (e.g. state government contracts), a complainant may have the option to contact those funding departments.

We commit to cooperating with any external complaint resolution. This means providing information to the NDIS Commission or HCSCC when requested, attending conciliation meetings if arranged, and implementing any corrective actions or recommendations those bodies issue. If a complaint is raised directly with an external body (bypassing us), we will, upon learning of it (for example, if the Commission contacts us), still address any underlying issues as part of our continuous improvement.

## Continuous Improvement and Review

This policy and our complaints handling procedures will be reviewed regularly (at least annually, or sooner if required by changes in law or in response to significant feedback). We will incorporate feedback from participants, staff, and other stakeholders about the effectiveness of the complaint process.

All changes to this policy will be approved by senior management and communicated to all staff. Participants will be informed of any major changes that affect how they can make complaints (for example, new contact details or processes).

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In summary, through effective complaint handling we aim to continuously improve our services and ensure the rights of participants are upheld. This policy not only fulfills our compliance obligations under the NDIS Practice Standards and *NDIS (Complaints Management and Resolution) Rules 2018*, but more importantly, reflects our commitment to listening to and learning from the people we support.

*Feedback & Complaints Policy & Procedure V.4 2026*  
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