Purpose of Policy

Care Assessment Consultants Pty Ltd (“Care Assess”) recognises the importance of managing complaints to ensure quality standards are maintained for clients, that their rights are protected, and that any and all issues are addressed in the most diligent and appropriate manner, upholding both the rights of clients and complying with all regulations, standards and relevant laws.

The purpose of this Complaints Policy is to outline the standards and procedure that all staff are expected to follow in their receiving and dealing with a complaint from any customer, supplier, client, co-worker, management and the general public.

Care Assess expects all workplace participants to observe both the standards and procedure set out in this Complaints Policy. Compliance with this Policy is expected and non-compliance may result in disciplinary action. Agents and contractors (including temporary contractors) may have their contracts with Care Assess terminated or not renewed.

The procedures outlined in this Policy aim to achieve consistent treatment in the handling of complaints by workplace representatives and provide a procedure to follow in the event a complaint is received.

Commencement of Policy

This Policy will commence from 10/10/2011. It replaces all other complaints policies of Care Assessment Consultants Pty Ltd (“Care Assess”) (whether written or not).

Application of policy

This Complaints Policy applies to employees, agents and contractors (including temporary contractors) of Care Assess, collectively referred to in this policy as ‘workplace participants’.

The Complaints Policy does not form part of any contract between an employee and Care Assess nor does it form part of any other workplace participant’s contract for service.

This Policy does not apply to personal grievances of workplace employees themselves, related to discrimination, harassment or bullying. If such a grievance arises, refer to the Anti-discrimination and EEO Policy, which outlines a specific complaints procedure to deal with those grievances.

Care Assess also has a separate Personal Grievances Policy related to general personal grievances of workplace employees themselves.

This Policy does also not apply to disputes between Care Assess and Contractors/sub-contractors, Service Providers or any other personnel or organisation under a service agreement, memorandums of understanding or any other formal agreement with Care Assess (“the parties”). If such disputes occur, refer to the Disputes Policy.
Care Assess may at its sole discretion, on a case by case basis, alter the manner in which the process outlined in this Policy is conducted to ensure it suits the particular complaint.

**What is a complaint?**

A complaint is any type of problem, concern or complaint related to a client’s care or services. A complaint can be about any act, behaviour, omission, situation or decision impacting on the client, which the client thinks is unfair or unjustified, unacceptable or unsatisfactory.

A complaint can relate to almost any aspect of services, for example:

- Quality of care provided
- Timeliness or responsiveness of services
- Costliness of fees and charges

**Dealing with complaints**

Care Assess recognises that our clients may not exercise their right to complain if they feel they are being treated unfairly or are feeling aggrieved. Accordingly, Care Assess will endeavour to provide a fair and just working environment, by aiming to ensure that clients have access to processes for the resolution of genuine complaints related to the care or services they receive.

As such, Care Assess will use its reasonable endeavours to:

- encourage clients to come forward with complaints;
- deal with complaints in a supportive way, without victimisation or intimidation of any person connected with the complaint;
- encourage fairness, impartiality and the resolution of complaints as reasonably promptly and as close as possible to the source of the complaint; and
- have managers and supervisors seek to prevent and resolve complaints.

**The Policy**

- All clients will be informed of their right to complain without affecting access to our services
- All clients have the right to appoint a representative or access an advocate of their choice (as per Client’s Rights Policy)
- All clients will be encouraged to complain if ever they want or need to complain.
- All clients will be given access to this policy, including our complaints resolution mechanism.
- All clients will be provided any assistance that they may need to use our complaints resolution mechanism.
- All clients will also be advised of what other mechanisms are available to address complaints.
- All persons involved in the complaints process will be treated fairly and without bias. Complaints will be dealt with promptly, confidentially, and without retribution.
- A complaint may be informally or formally, and may be made orally or in writing, and be made anonymously. Oral complaints may be made in person or by phone. Written complaints may be submitted by email, fax or mail.
• A complaint form will be supplied to all clients upon their admission into a service or program. A feedback form will be supplied all clients prior to or upon their exit from a service or a program.

• Care Assess will address complaints in the following ways. All complaints will be:

  o Acknowledged, investigated and remediated.
  o Handled in a fair and positive manner with confidentiality maintained throughout the process.
  o Recorded on the Complaints Register (minor and major) for future reference. The complaints Register includes details of the complaint, the actions taken and the outcomes of the complaint.
  o Handled with the aim of resolving the complaint appropriately, and making any warranted improvement to procedures, service delivery and policy.
  o Immediately upon receipt, complaints will be triaged according to the Complaints Resolution Mechanism outlined below. This assessment should be carried out by the most senior Care Assess representative available in order to assess the priority of the complaint according to the Complaints Resolution Mechanism.

• All complaints must be acknowledged as soon as practically possible, investigated as soon as possible, responded to and resolved as soon as possible.

• All complaints must be acknowledged not later than 5 days after receipt, and a response provided within 21 calendar days.

• For serious complaints (Level 2 or above), or complaints relating to an organisational policy, complaints must be:
  o Acknowledged in writing within 5 days upon receipt, and whenever possible the matter resolved, within 21 calendar days (timelines will be monitored)
  o Forwarded immediately to the Chief Executive Officer.

Complaints Resolution Mechanism

Whenever a complaint is received, Care Assess will endeavour, if appropriate, to address the complaint in line with the following procedure: Complaint assessment and resolution triage.

Level 1: Easily resolved issues or incidents requiring minimal intervention

• This type of complaint is most likely received verbally.

• For easily resolved issues or incidents requiring minimal intervention

• Attempts should be made in the first instance to resolve a complaint or inquiry in a simple and informal way at Coordinator level.

• A written record of the issue (on complaints register) is company policy because it can be useful for quality assurance but no formal record of the complaint is required.
• A Company Manager should be made aware of the complaint and must manage the complaint resolution process.

• Communication by writing (e.g. email) should be avoided for level 1 complaint.

• The complaint should be discussed in the first instance by phone or in-person, though if anything more than minimal communication is required, the parties should agree to meet in person to discuss and aim to resolve the complaint together.

**Level 2: More complex issue or incident requiring intervention from key personnel**

• If the issue or incident cannot be resolved in an informal way or is received in writing, formal process needs to be commenced.

• A written formal record of the issue on the Complaints Register is required.

• A Complaints Investigation form must be completed for a level 2 complaint.

• A Company Manager must be immediately made aware of the complaint and must manage the complaint resolution process.

• If any issue becomes the subject of serious concern, Company Management should involve the Managing Director in facilitating the dispute resolution process.

• The party raising the concern should be requested to notify Care Assess of the issue that requires addressing and advice of what actions are required to address those concerns.

• Care Assess must respond in writing to the issues of concern and the actions which are required to address those concerns.

• The parties are to then implement an agreed solution to the issue of concern within an agreed time frame.

**Level 3: Critical incidents requiring external intervention or an independent mediator or complaints unable to be satisfactorily resolved by Care Assess**

• Any complaint that potentially has significant follow-on implications for Care Assess.

• The Directors are required to be notified immediately and the Managing Director should manage the complaint resolution process.

• A written formal record of the issue on the Complaints Register is required.

• A Complaints Investigation form must be completed for a level 3 complaint.

• If the parties are not able to agree to the manner in which the issue of concern is to be resolved within the proposed time frame, and therefore it becomes a dispute, then the Care Assess will request the other party to agree to refer the dispute to an independent suitably qualified person (“the mediator”) agreed to by both parties for resolution.

• The decision of the mediator is to be implemented by the parties, unless the mediator is unsuccessful in resolving the dispute.

• The parties agree that even though there may be a dispute regarding a matter under this Agreement, that all other obligations unaffected by the dispute are to be fulfilled as intended by this Agreement.
• Care Assess must ensure that the other party receives advice of what other mechanisms are available to address complaints.

Other mechanisms

• If at any time a care recipient has an issue that is concerning them, they have the right to talk to an independent advocate. For a free and confidential service, call Advocacy Tasmania Inc. on 1800 005 131. An Advocacy brochure will be provided with all agreements and to all clients upon entry and exit into our services.

• If an aged care client believes a complaint has not been addressed appropriately they have the right to contact the Aged Care Complaints Investigation Scheme by phoning 1800 550 552. The Aged Care Complaints Investigation Scheme is a Commonwealth Government service, available to all recipients of Community Aged Care Packages, which is specifically designed to support the resolution of complaints.

Issues for Managers and Supervisors

Managers and supervisors should also:

• Promote the importance of this policy.
• Maintain confidentiality when conducting investigations into complaints, grievances and disputes.
• Avoid bias in decision making.
• Ensure compliance with procedures when carrying out counselling and discipline.
• Exercise objectivity when administering rewards or discipline.
• Do not condone, permit, or fail to report any breaches of the above policy by workplace participants under their supervision.

Variations

Care Assess reserves the right to vary, replace or terminate this policy from time to time.

Associated Documents

• Disputes Policy
• Personal Grievances Policy
• Anti-Discriminatory and EEO Policy