

<b>ACCOUNTABLE:</b>	CEO
<b>RESPONSIBLE:</b>	Quality Manager
<b>NEXT REVIEW DATE:</b>	November 2023

***Our vision:** For all people with intellectual disability to live the life they choose.*

***Our mission:** We value the inherent worth of every individual.*

*We create opportunities for adults with intellectual disabilities to explore and grow.*

*We build inclusive community connections.*

### 1. STATEMENT

Bayley House is committed to improving the quality of life of people with a disability and to ensuring that each person's human rights are respected and upheld. We recognise that individuals have goals, aspirations and support needs including when they may be unhappy with their experience, or the quality of services or supports they receive.

Feedback is integral to providing safe, quality, effective and person-centred services and supports that result in positive experiences for people who use them. Feedback is important to inform and improve our services.

No person who makes a complaint, or a person with disability affected by an issue raised in a complaint, will be adversely affected as a result of making a complaint.

### 2. SCOPE

This policy applies to all Bayley House clients, carers and other support persons involved with Bayley House.

The following procedure set out the process for clients, carers and other persons to make a complaint and how Bayley House will respond to and manage the complaint.

Information about internal and external complaint and feedback processes are readily available online, in documentation provided at entry to the service, at the time a complaint is made, and at any other time requested or required. Where required, we help people to make a complaint or to access an advocate to support them to express their views and wishes.

### 3. DEFINITIONS

**Client** – Bayley House uses the term 'client' to refer to its service users.

**Allegation** – a claim that something has occurred.

**Compliment** - an expression of praise, commendation or admiration.

**Complaint** – an expression of dissatisfaction with any Bayley House services, systems, people or supports.

## 4.4 Client Complaints and Feedback

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There are systems and reporting requirements for serious incidents or accidents, allegations of abuse, neglect or exploitation, or theft.

**Complaints / Feedback Officer** - The CEO (or delegate) of Bayley House will undertake the role of the Complaints / Feedback Officer.

**Complaints Register** – Bayley House complaints and compliments are recorded on the Bayley House Compliments and Complaints Register.

**Feedback** – Comments about Bayley House services, systems, people or supports which is used as a basis for improvement. Feedback may include a complaint, compliment or suggestion.

**Open disclosure** – Bayley House manages complaints by recognising when things have gone wrong that could harm, or have harmed, someone. We offer an apology, explain what has happened and what we are doing to prevent it from happening again.

**Procedural Fairness** - requires a fair and proper procedure be used during decision making to reach a fair and correct decision.

### 4. RESPONSIBILITIES

This policy applies to all Bayley House clients, carers and other support persons involved with Bayley House.

**The CEO** is responsible for ensuring the implementation of this policy.

**The General Manager Accommodation Options and General Manager Day Programs** are responsible for the implementation of this policy within their delegated responsibilities.

**The General Manager Accommodation Options (or delegate)** is responsible for notifying NDIS Quality and Safeguards Commission of a complaint in relation to a reportable incident in accordance with directives.

The **General Manager People and Culture** is responsible for notifying the Disability Worker Exclusion Scheme and the Victorian Disability Worker Commission immediately if there is reasonable belief that a disability worker has engaged in conduct that is notifiable.

The **Complaints / Feedback Officer** is responsible for the implementation of this policy and will:

- Receive and promptly refer complaints and other feedback to appropriate staff for resolution;
- Maintain the Complaints and Compliments Register;
- Maintain records of complaints received;
- Undertake analysis on complaints and compliments received and report through Quality Governance structures as required.

**All staff and volunteers** are responsible for adhering to these procedures.

- All staff will make themselves available to listen and help any person who needs it to record their comment, suggestion or complaint.

The following procedures describe the process for clients, carers and other persons to make a complaint and how Bayley House will respond to and manage feedback received.

### 5. PRINCIPLES

- Everyone has the right to complain, anonymously if they prefer
- Appropriate support and assistance is provided to any person who requests to make, or has made, a complaint including access to independent advocates
- We encourage and support people to provide us with their feedback directly, to enable issues to be responded to quickly
- All comments, suggestions and complaints will be taken seriously and in confidence and will be investigated and acted upon in a timely manner
- Be courteous and considerate in our communication, keeping those affected informed throughout the management and resolution process, as agreed
- Robust complaints processes help safeguard people with disability
- Complaints identify opportunities to continuously improve our services

### 6. PROCEDURES

#### 6.1 Feedback and Support

- We welcome feedback about all aspects of our supports and services.
- Feedback can be provided verbally, electronically (online or email) or in writing by completing a Client Feedback Form (GCP-406) as preferred, at any time. Families, carers and advocates can also provide feedback on behalf of the person with disability that they support.
- Most feedback, issues and concerns can be resolved by speaking directly with a staff member, team leader or General Manager.
- Staff who are given feedback, including issues that are unable to be resolved directly, must help the client to complete a Client Feedback Form GCP-406.
- Staff will inform clients or others of their right to have a support person or representative of their choice, for example a family member, friend, advocate or interpreter, present at any time during the complaints process. Advice on interpreter or advocacy services will also be provided if required.
- It is important that the staff member checks with the person making a complaint that complaint has been recorded accurately.
- Complaints should be documented within 24 hours of being made and forwarded to CEO, General Manager of the Department concerned or to the Bayley House Complaints / Feedback Officer as appropriate.
- Complaint information is private and must not be shared with people outside of the complaints process.

#### 6.2 Managing Feedback Received

- Feedback is logged on the Complaints or Compliments Register which is updated as the process continues, by the Complaints / Feedback Officer.
- Compliments, positive feedback and suggestions received are shared with the person or team involved to let the staff know that they are making a difference and to continue to improve the services we provide.
- All complaints will be handled in a sensitive and confidential manner and we will try to resolve the issue promptly.

## 4.4 Client Complaints and Feedback

- All formal complaints are responded to within 2 business days, detailing the steps to be taken to resolve the complaint if the issue raised has not already been resolved.
- In consultation with the Complaints / Feedback Officer, the area General Manager will conduct an internal investigation, including meeting with the person and any other relevant persons to discuss the complaint. We recognise when things have gone wrong that could harm, or have harmed, someone. Offer an apology and commit to working together to find a resolution to the issue raised and how we might prevent it from happening again.
- The Complaints / Feedback Officer in consultation the relevant General Manager, will develop an action plan to resolve the complaint.
- We will make every effort to resolve complaints immediately, working with the person lodging the complaint to identify desirable outcomes to resolve the complaint within 14 days of receipt. We will keep those involved in the complaint informed of the progress of the complaint and provide updates of any action taken and decisions made.
- If the complainant is not satisfied with the response, the complaint will be forwarded to the Chief Executive Officer to review the complaint and ensure that procedural fairness has been met.
- We will make every endeavour to resolve the complaint and will offer support to access an advocate or referral to the NDIS Quality & Safeguards Commission at any stage of the complaints process if desired.
- Where a matter needs to be referred to an outside agency or otherwise investigated, all staff will cooperate with the inquiry and produce material as requested.
- If the complaint made is against an employee or volunteer, that person will not have contact with the complainant while the complaint is investigated.

### 6.3 Complaint resolution and finalisation

- Within one week following finalisation of the complaint, the relevant General Manager of the program area (or delegate) will seek feedback from the person who made the complaint.

### 6.4 Confidentiality and Records Management

- Complaint information is private and must not be shared with people outside of the complaints process.
- Access to documents relating to complaints is controlled in a manner that ensures confidentiality and meets disability, privacy and freedom of information legislation.
- Feedback forms and other documents will be retained by the Complaints / Feedback Officer.

### 6.5 Continuous Quality Improvement through Feedback Review

The review of feedback data is essential to safeguarding clients and providing services and supports that continue to meet client needs and preferences.

Feedback is reviewed and trends analysed and reported through the relevant General Manager and Continuous Improvement Committee to inform service delivery and continuous improvement.

## 7. RELATED DOCUMENTS

<b>Policies:</b>	2.13 Diversity & Inclusion Policy 3.2 Privacy & Confidentiality Policy 7.15 Grievance & Dispute Resolution Policy
<b>Forms:</b>	GCP-406=Client Feedback Form MGT-321= Feedback Form GCP-438=Complaints Acknowledgement Letter

<b>References:</b>	<p>REF-060=BH Client Complaints Poster</p> <p>REF-063= OPA Brochure</p> <p>REF-115=Australian Open Disclosure Framework – Better communication a better way to care</p> <p>REF-129= Effective Complaint Handling Guidelines for NDIS Providers National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018</p>
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### 7. STANDARDS / LEGISLATION

<p><b>NDIS Code of Conduct</b></p> <p><b>NDIS Practice Standards and Quality Indicators</b></p> <ul style="list-style-type: none"> <li>- <i>Rights and Responsibilities</i></li> <li>- <i>Governance and Operational Management</i></li> <li>- <i>Provision of Supports</i></li> </ul>
<p>Disability Act (2006)</p> <p>Information Privacy Act 2000</p> <p>Australian Privacy Principles in the Privacy Act 1988 and the NDIS (Protection and Disclosure of Information) Rules.</p>

### 8. DOCUMENT HISTORY

#### Client Complaints and Feedback

Version	V6
Approved by	CIC
Effective Date	30.11.2020