

## Compliments, Complaints & Feedback Policy & Procedures

### Purpose

AMPARO Advocacy's Compliments, Complaints and Feedback policy and procedures outlines how we actively seek complement's, complaints and feedback from the children, young people and adults who access our services, alongside their support networks, staff, associates, and stakeholders. We take all compliments, complaints and feedback about our performance, policies, processes, and behaviour seriously and endeavour to respond proactively in a timely, effective, and efficient manner.

### Scope

- AMPARO Advocacy's Compliments, Complaints and Feedback policy and procedures applies to all paid and unpaid staff, students, management committee members and contractors (hereinafter referred to as 'staff and associates') when making, receiving, and responding to compliments, complaints, and feedback.
- Children, young people and adults, alongside support networks, staff and stakeholders are able to follow the Compliments, Complaints and Feedback policy and procedures, which will be incorporated into AMPARO's Continuous Improvement Plan.

### Policy Statement

- AMPARO Advocacy welcomes the opportunity for children, young people, and adults, alongside support networks, staff, associates, and stakeholders to provide us compliments, complaints, or feedback (hereinafter referred to as 'feedback'). We believe that feedback plays an important role in AMPARO's continuous improvement.
- In line with AMPARO Advocacy's Continuous Improvement Plan, we actively seek feedback from the children, young people and adults who access our services, alongside their support networks, staff, associates, and stakeholders. We will ensure that our feedback process is accessible responsive, integrated, and appropriate, with respect shown to all parties. Those providing feedback will not be discouraged or disadvantaged by AMPARO in any way as a result.
- AMPARO aims to respond efficiently, effectively, and constructively to any feedback provided to the organisation, ensuring that concerns raised are understood, acknowledged, and resolved wherever possible.

## Procedure/s

- AMPARO Advocacy will provide accessible information to all children, young people and adults about our feedback process when commencing with the service through:
  - Adult Information Booklets;
  - Child & Young Person Information Booklets;
  - Website;
  - In person during the induction process; and/or
  - Through interpreters where appropriate.
- AMPARO Advocacy will also provide information about our feedback process to support networks, staff, associates, and stakeholders where requested.
- As part of our Continuous Improvement Plan, AMPARO will actively seek feedback from children, young people and adults, support networks, staff, associates, and stakeholders on a regular basis through:
  - Day to day work with individuals;
  - Annual Quality Reviews;
  - When a child, young person or adult exits our service;
  - Internal and external audits;
  - Staff meetings; and/or
  - Stakeholder meetings.
- AMPARO values all feedback provided and will record and analyse feedback for quality assurance and continuous improvement processes. Areas identified for improvement in our staffing, policies, procedures, and systems will be actioned and may include but not be limited to:
  - Additional supervision/performance management of staff;
  - Staff training;
  - Resource allocation/re-allocation;
  - Management of expectations;
  - Changes to policies and procedures.

## Feedback Process

### Providing feedback:

A person providing feedback can contact AMPARO Advocacy at any time in person, via phone, letter or email and request to speak to somebody at the office. A person providing feedback can have someone from their support network and/or an interpreter present:

- Phone: (07) 3354 4900
- Email: [info@amparo.org.au](mailto:info@amparo.org.au)
- AMPARO Advocacy Inc.

PO Box 2065, Brookside Centre QLD 4053

- Children and young people can also write or draw a picture of their feedback or complaint on our Child and Youth feedback form and have a member of their support network submit on their behalf.

#### Who to provide feedback to:

- If a person feels comfortable, they should provide feedback to the person/s directly involved;
- If the first step is unsuccessful, or a person feels uncomfortable providing feedback directly to the person/s involved, they can request to speak to the Manager.
- If the first two steps are unsuccessful, or a person does not want to speak to the Manager, they can contact the President of the Management Committee.
  - The President of the Management Committee can be contacted by calling AMPARO ADVOCACY on (07) 3354 4900 or email [info@amparo.org.au](mailto:info@amparo.org.au). Arrangements will be made for the President to directly contact the person making the complaint.

#### How AMPARO Advocacy will respond:

- AMPARO will **ACKNOWLEDGE** the feedback and talk to the person involved within three working days, to better understand the feedback and possible solutions;
- AMPARO Advocacy will **ASSESS** the feedback for resolution or further referral/escalation. If the feedback is dealt with between the parties concerned directly and informally, and the person providing feedback is satisfied with the response, the matter will be considered closed;
- The AMPARO Service Manager and/or President will **PLAN** an investigation into the feedback if further referral/escalation is warranted, depending on the complexity of the issues. Once an investigation has commenced, the feedback becomes formal and will be registered in the feedback/complaints register;
- AMPARO will **INVESTIGATE** the feedback required in an impartial, confidential, and transparent manner, to try and resolve the feedback provided in a timely manner. A person providing feedback and/or informing an investigation can have a member of their support network and/or an interpreter present;
- AMPARO will **RESPOND** to the person providing feedback, including information about our findings, decisions made and outcome. In instances where AMPARO decides on your behalf, or refuses a request for information, you will be provided with a written notice of this decision, including the reasons for the decision, and external complaints processes that you can follow in the event that you are unhappy with the decision;
- AMPARO will **FOLLOW UP** with the person providing feedback to ensure they are satisfied with the outcome and advise of further internal and external review options if they are still unsatisfied with the outcome. Internal and external options may include, but not be limited to:
  - Requesting a review with the President of AMPARO's Management Committee;

- Dispute Resolution Branch – (07) 3738 7000
- Queensland Human Rights Commission – 1300 130 670
- Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships Complaints Unit - 1800 491 467 (free call)
- NDIS Quality and Safeguards Commission - 1800 035 544
- AMPARO will **CONSIDER** whether any systemic issues were raised during the feedback process for further action in our Continuous Improvement Plan;
- AMPARO Advocacy will **RECORD** all formal feedback and outcomes on the internal feedback/complaints register, maintaining confidentiality provisions.

#### Rights and Responsibilities:

- A person providing feedback can stop or withdraw from the process at any time;
- A person providing feedback can have a support person with them at any time;
- AMPARO will provide an interpreter if required;
- A person providing feedback can ask for assistance at any time, and AMPARO will support them to find an independent person;
- All feedback will be managed confidentially, and records of feedback will be kept securely in line with our confidentiality and record keeping policies and procedures;
- All efforts will be made by AMPARO to resolve feedback within two weeks of receipt of the feedback;
- Where feedback is collated and used for Continuous Improvement, AMPARO will ensure that any information, including client details, is de-identified.

#### **Roles & Responsibilities**

Role	Responsibility
Staff Students Volunteers Contractors	Provide information to persons engaging with the service about feedback policy and procedure. Openly engage in informal and formal feedback processes, and be willing to listen, acknowledge and respond to feedback provided. Advise Service Manager of any feedback received. Ensure feedback is recorded on case files and the feedback/complaints register where required. Maintain confidentiality of all feedback provided.
Manager	Those responsibilities listed above, and: Provide leadership and oversight to policy and procedure implementation. Monitor the work environment to ensure policy and procedures are followed. Ensure persons engaging with the service are provided information on feedback policy and procedure. Provide consultation, training, and development for staff in relation to handling compliments, complaints, and feedback.

	Investigate formal feedback in accordance with policy and procedure. Review feedback received and utilise when applying Continuous Improvement Plan and actions.
Management Committee Members	Those responsibilities listed above, and: Provide oversight to policy and procedure implementation. Investigate escalated feedback in accordance with policy and procedure.

## Definitions

- Complaint – a statement that something is unsatisfactory or unacceptable.
- Compliment – congratulation or praise for something or someone.
- Feedback – information about reactions to a service or product, or a person's performance of a task, which is used as a basis for improvement.
- Support Network – persons in a child, young person or adults' life who provide direct care and/or support. This may include, but not be limited to, parents, carers, guardians, family members, foster, kinship or residential carers, friends, professionals, support workers, service providers.

## Legislation & Relevant Standards

- *Anti-Discrimination Act 1991 (Cth)*
- *Disability Discrimination Act 1992*
- *Disability Inclusion Act 2014*
- *Disability Services Act 2006*
- *Disability Services and Other Legislation Amendment Act 2008*
- *Guardianship and Administration Act 2000*
- *Human Rights Act 2019*
- National Principles for Child Safe Organisations
- United Nations Convention on Rights of Persons with Disability
- United Nations Convention on the Rights of the Child

## Related Documents, Forms and/or Registers

4.09 Formal Complaints Form

4.09a Compliments, Complaints and Feedback Flowchart

4.09 Complaints and Feedback Register

## HSQF Standards & Indicators

Standard	Indicator
1 - Governance and Management	1.1 The organisation has accountable and transparent governance requirements that ensure compliance with relevant legislation, regulations and contractual arrangements.
	1.2 The organisation ensures that members of the governing body possess and maintain the knowledge, skills and experience required to fulfil their roles.

	1.3 The organisation develops and implements a vision, purpose statement, values, objectives and strategies for service delivery that reflect contemporary practice.
	1.4 The organisation's management systems are clearly defined, documented and monitored and (where appropriate) communicated including finance, assets and risk.
	1.5 Mechanisms for continuous improvement are demonstrated in organisational management and service delivery processes.
	1.7 The organisation has effective information management systems that maintain appropriate controls of privacy and confidentiality for stakeholders.
2 - Service Access	2.2 The organisation has processes to communicate, interact effectively and respond to the individual's decision to access and/or exit services.
3 - Responding to Individual Need	3.3 The organisation ensures that services to the individual/s are delivered, monitored, reviewed and reassessed in a timely manner.
	3.4 The organisation has partnerships and collaborates to enable it to effectively work with community support networks, other organisations and government agencies as relevant and appropriate.
4 – Safety, Wellbeing and Rights	4.1 – The organisation provides services in a manner that upholds people's human and legal rights.
	4.4 - People using services are enabled to access appropriate supports and advocacy.
5 – Feedback, Complaints and Appeals	5.1 – The organisation has fair, accessible and accountable feedback, complaints and appeals processes.
	5.2 - The organisation effectively communicates feedback, complaints and appeals processes to people using services and other relevant stakeholders.
	5.3 - People using services and other relevant stakeholders are informed of and enabled to access any external avenues or appropriate supports for feedback, complaints or appeals and assisted to understand how they access them.
	5.4 - The organisation demonstrates that feedback, complaints, and appeals processes lead to improvements within the service and that outcomes are communicated to relevant stakeholders.
6 – Human Resources	6.5 - The organisation ensures that people working in the organisation have access to fair and effective systems for dealing with grievances and disputes.

## National Standards for Disability Services

Standard	Indicator
1 – Rights	1.1 The service, its staff and its volunteers treat individuals with dignity and respect
	1.3 The service supports active decision-making and individual choice including the timely provision of information in appropriate formats to support individuals, families, friends, and carers to make informed decisions and understand their rights and responsibilities.

	1.5 The service has preventative measures in place to ensure that individuals are free from discrimination, exploitation, abuse, harm, neglect, and violence.
	1.6 The service addresses any breach of rights promptly and systemically to ensure opportunities for improvement are captured.
	1.7 The service supports individuals with information and, if needed, access to legal advice and/or advocacy.
	1.8 The service recognises the role of families, friends, carers, and advocates in safeguarding and upholding the rights of people with disability.
	1.9 The service keeps personal information confidential and private.
3 – Individual Outcomes	3.2 Service planning, provision and review is based on individual choice and is undertaken together with an individual and, with consent, their family, friends, carer or advocate.
	3.3 The service plans, delivers and regularly reviews services or supports against measurable life outcomes.
	3.5 The service collaborates with other service providers in planning service delivery and to support internal capacity to respond to diverse needs.
4 – Feedback and Complaints	4.1 Individuals, families, friends, carers and advocates are actively supported to provide feedback, make a complaint or resolve a dispute without fear of adverse consequences.
	4.2 Feedback mechanisms including complaints resolution, and how to access independent support, advice & representation are clearly communicated to individuals, families, friends, carers, and advocates.
	4.3 Complaints are resolved together with the individual, family, friends, carer, or advocate in a proactive and timely manner.
	4.4 The service seeks and, in conjunction with individuals, families, friends, carers and advocates, reviews feedback on service provision and supports on a regular basis as part of continuous improvement.
	4.5 The service develops a culture of continuous improvement using compliments, feedback, and complaints to plan, deliver and review services for individuals and the community.
	4.6 The service effectively manages disputes.
5 – Service Access	5.1 The service systematically seeks and uses input from people with a disability, their families, friends and carers to ensure access is fair and equal and transparent.
	5.2 The service provides accessible information in a range of formats about the types and quality of services available.
	5.3 The service develops, applies, reviews, and communicates commencement and leaving a service processes.
	5.4 The service develops, applies, and reviews policies and practices related to eligibility criteria, priority of access and waiting lists.
	5.5 The service monitors and addresses potential barriers to access.
	5.6 The service provides clear explanations when a service is not available along with information and referral support for alternative access.

	5.7 The service collaborates with other relevant organisations and community members to establish and maintain a referral network.
6 – Service Management	6.4 The service has monitoring feedback, learning and reflection processes which support continuous improvement.
	6.6 The service has systems to strengthen and maintain organisational capabilities to directly support the achievement of individual goals and outcomes.
	6.7 The service uses person-centered approaches including the active involvement of people with disability, families, friends, carers, and advocates to review policies, practices, procedures, and service provision.