



BIRIPI ABORIGINAL CORPORATION MEDICAL CENTRE

External Complaint Management Policy and Procedure

1. PURPOSE

To fulfil Biripi ACMC's commitment to client satisfaction, the objective of the policy is to ensure complaints are handled and resolved in a prompt, effective and efficient manner.

Our complaint management system is intended to:

- enable to respond to concerns or issues raised by consumers accessing the service in a fair way and in a timely manner
- build positive relationships with consumers, their family, friends and representatives, by informing the clients have a right to complain, who they can complain to and how they can complain
- boost public confidence in our administrative process by providing information that are accurate and accessible to clients and other interested parties
- gain insights of clients' expectations and better understand their needs and wants which can be used to create noticeable improvements within the service to assist in the improvement of the quality of care being delivered

2. SCOPE

This applies to complaints including all feedback (suggestions, ideas, comments) received from clients, patients, their family or representative and member from the public regarding services provided or staff member of Biripi Aboriginal Corporation Medical Centre received either verbally or in writing.

Complaints from Biripi staff member are dealt through Workplace Grievance Management Policy and Procedure.

3. RESPONSIBILITIES

- 3.1 The Chief Executive Officer (CEO) promotes a culture that value complaints and their effective resolution. Support recommendations for service, staff and complaint handling improvements arising from complaint data trend analysis and evaluation.
- 3.2 All Division Managers (ELT) –
 - 3.2.1 encourage all staff within their area of responsibility to be alert to complaints and assist those responsible for handling complaints resolve them promptly.
 - 3.2.2 to educate staff about the process and the expectations of them, including skills training in the interpersonal aspects of simple complaint resolution and empower staff to resolve complaints promptly and in accordance with Biripi policies and procedures.
 - 3.2.3 encourage staff to make recommendations for system improvements.
- 3.3 Complaints Coordinator designated by the CEO is to –
 - 3.3.1 provide regular reports and analyse commonalities and trends in complaints to help service identify low and high-risks processes and practices.
 - 3.3.2 ensure recommendations arising out of complaint data analysis are solicited with the appropriate Divisional Manager and / or the Chief Executive Officer and implemented, where appropriate.

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3.4 All staff members are –

3.4.1 to be aware and must comply to the policy and associated procedures.

3.4.2 to treat people who wish to make a complaint with respect, assist people who wish to make complaints and make them aware of the Biripi complaints management process.

4. DEFINITIONS

COMPLAINANT is a person making a complaint. The term collectively refers to consumers and their family, as well as representatives, carers and health professionals. It does not include staff of Biripi in this procedure.

A person who contacts the Commission and provides information or raises a concern about the care or Services being provided to a person receiving Australian Government funded aged care services.

COMPLAINT is an expression of dissatisfaction made to an organisation, related to its (products), or the complaints-handling process itself, where a response or resolution is explicitly or implicitly expected (AS 4269).

Complaint is an expression of dissatisfaction with any aspect of a provider's responsibilities that requires the Commission to facilitate the resolution of the complaint.

5. PROCEDURE

An effective complaints handling process is fair, accessible, responsive and efficient and contribute to continuous improvement in service delivery. The aim is for consumers (clients and patients), families, representatives and staff to have confidence in the complaints handling process.

I. Procedure for a Person (You) to Express a Complaint

1. If you have a problem, concern or complaint related to a decision or action taken by Biripi APMC or you are dissatisfied about any aspect of the service of Biripi APMC, we encourage you to tell us about your concerns. You may:
 - a. Raise your concern in person with any member of Biripi APMC's staff
 - b. Lodge your complaint in writing using Biripi APMC's Complaint Form, **FOR-HRCS-00027**
 - c. Write a letter or an email to the CEO or any member of staff
 - d. Email your complaint to info@biripi.org.auand will also be informed of who can support you at the time of making a complaint.
2. You may ask someone else to lodge a complaint on your behalf. Complainants with accessibility needs will be provided with assistance relating to:
 - a. literacy and language skills
 - b. cultural and linguistic background
 - c. physical, mental, cognitive and sensory ability
3. Biripi APMC would prefer that you raise your concerns directly with the staff involved so that the matter can be dealt with promptly; however, in some cases we recommend a different course of action. For example:
 - a. If it is difficult for you to speak to the staff involved for any reason, we encourage you to ask to speak to the manager of the service concerned or to put your complaint in writing to the CEO.
 - b. If you wish to complain about a particular staff member's decisions or actions, we ask

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that you submit your complaint to the employee's manager.

- c. If you wish to complain about a manager's decisions or actions, we ask that you submit your complaint to the CEO.
 - a. If you wish to complain about the CEO's decisions or actions, we ask that you submit your complaint to the Chair of the Board of Biripi ACMC via the External Complaints Process available on Biripi Website or refer to the External Agencies listed on Section 6.
 - b. If you are a staff member with concern(s), you will not lodge a complaint in accordance with this policy. Instead, you will apply the Incident Management Procedures and / or the Workplace Grievance Procedures.
4. Where appropriate, the staff member or manager will attempt to resolve your concerns informally and immediately, by discussing the matters with you and working out an acceptable resolution.
5. If the matter cannot be resolved immediately, you may be asked to complete a complaint form or a staff member may do this on your behalf.
6. Your complaint will then be acknowledged in writing and steps will be taken to investigate the issues and resolve your concerns. You will be kept informed of progress and ultimately advised of results.
7. If you have made allegations of a serious nature, then a formal process of investigation may be required. In this case a longer time will be required to resolve the matters.
8. If you are dissatisfied with how your complaint is handled or with the result of your complaint you can appeal to the Chief Executive Officer.

If the Chief Executive Officer is already involved, you can appeal to the Chair of the Board. The complaints process and/or the outcome will then be reviewed by the Board. The Board's decision resulting from the review will be final.
9. Biripi ACMC's goal is to resolve concerns and complaints promptly "in-house" wherever possible. However, you may seek the assistance of an external agency at any time. Contacts for some relevant external agencies are set out in Section 6 of this document.

II- Procedure for an Employee or Manager (You) to Resolve a Complaint

Refer to the Checklist at **FOR-HRCS-00028** and the flowchart **Appendix 1** Biripi's Complaint Process while reading these notes.

1. Client or community member wishes to complain

If a client, client advocate or member of the community expresses concerns to you face-to-face or on the telephone

- a. Ensure privacy
- b. Ask what happened
- c. Listen carefully, with respect and without interruption, making notes as necessary
- d. When the person finish expressing their concerns, listen again, asking questions to clarify the facts without arguing or challenging what has been said
- e. Clarify what the main concern(s) is (are) and confirm this with the complainant

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- f. Ask what the anticipated or desired outcome(s) is. It is important to establish what the complainant wants to achieve from the process
- g. Advise the complainant that any person(s) complained about will be informed of the details of the complaint and invited to respond
- h. Explain the process to the client and say what will happen next.

2. Escalation of the complaint to your Supervisor or Manager

- 2.1 You should refer the following matters to your Supervisor, Manager or CEO:
 - a. complaints about you
 - b. complaints of a serious nature and or matters which may result in disciplinary actions
 - c. complaints that may have to be referred to an external agency, including complaints alleging criminal or corrupt conduct
- 2.2 You should also refer a complaint to your Supervisor if:
 - a. the complainant is very agitated or is not accepting your responses / proposals
 - b. the complainant requests that someone other than you deal with the matter
 - c. the matter is outside your delegation or area of expertise
 - d. you have tried to resolve the matter, but the complainant is still dissatisfied and you do not know what else to do
- 2.3 Respond to the complainant that you are referring the matter and who you are referring it to.

3. Handling anonymous complaint

While complaints may be made anonymously, we would generally review it if the matter were relatively serious and there is sufficient information in the complain to enable an investigation to be conducted. You should advise any anonymous complainants that you will not be able to resolve their specific concerns to tell them how the organisation has responded to the complaint.

4. Immediate Resolution

Consider if you or someone else can resolve the matter immediately and if so initiate action. For example, if a client complains that he / she was not given certain information and you are able to supply the information or arrange for someone else to supply it, then you can do so, and the complaint will be resolved.

5. Dealing with Complaints about Biripi ACMC Employees

1. If a person's complaint makes allegations against an employee of Biripi ACMC, ensure that the complaint is documented immediately, usually by that employee's supervisor.

This may often mean completing the Complaint Form on behalf of the complainant. If the complainant refuses to sign the complaint, the supervisor should advise him / her that it may not be possible to investigate and resolve the matter if the complaint is lodged anonymously.
2. The supervisor should also explain that consistent with the principles of procedural fairness, their identity as a complainant will usually be disclosed to the respondent along with the substance of the concerns so that he / she is in a position to put his / her own case.

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3. If appropriate, the supervisor may immediately discuss the complaint with the respondent in private to gather additional information while memories are still fresh and discuss resolution approach. The supervisor must write down the main points and ask the respondent to sign as a correct record. A sincere apology at any early stage will often resolve issues and avoid long drawn-out investigation processes.

6. Documenting Complaints and Acknowledgment

1. If the complaint cannot be immediately resolved, ensure adequate documentation, either in the form of a letter from the complainant or completed Complaint Form, Appendix 1
The form may be completed by the complainant, his / her advocate or you, but must be signed by the complainant
2. When you receive a complaint that is not resolved immediately, acknowledge it in writing within 3-days
3. Indicate an estimated time of how long it is likely to resolve the complaint and when the complainant will be next contacted. Refer also to item 10.vi

7. Complaints Register

You must advise details of the complaint to the Complaints Coordinator for entry in the Complaints Register.

The electronic Complaints Register will summarise:

- i. Type of complainant (e.g. client, community member) – names omitted
- ii. Nature of complaint
- iii. Date lodged, date acknowledged and date resolved
- iv. Form of complaint (e.g. written, oral)
- v. Action taken (e.g. conference, internal review)
- vi. Progress notes / obstacles and dates

Generally, the Complaints Coordinator will update this information in liaison with you (or the employee managing the matter).

8. Advice to External Body (if applicable)

If it appears that the matter may need to be advised or referred to an external body, you must submit it immediately to the CEO with a brief covering memo providing the essential context of the complaint, the known facts and the recommended referral action.

9. Deciding a Course of Action

Complaints Coordinator can provide you with the advice about the option for resolving a complaint and a recommended course action. In some cases, your Supervisor, Manager and / or CEO will be involved in deciding how to resolve the matter.

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For increasing level of complexity and seriousness of the matters raised, the main options are (in increasing order of formality):

- i. Immediate informal resolution (see Sec 5.II.4 above)
- ii. Internal Review which may take one or more of the 3-possible pathways:
 1. Informal conference or discussion facilitated by a manager to provide a hearing and to achieve a mutually acceptable resolution
 2. Mediation between parties involved, facilitated by a suitable qualified independent mediator to achieve a mutually acceptable resolution
 3. Independent investigation either by an internal but disinterested party or by an external investigator
- iii. Referral to an external body, possibly in conjunction with an Internal Review (see item I.9)

You must ensure that decisions about the action to be taken are documented and signed.

10. Plan and Internal Review

The process for Internal Review is set out in flowchart in **Appendix 2**

i. **Reviewer Appointed**

A person with appropriate expertise is appointed by the CEO to review the matter.

ii. **Evaluation**

In consultation with the Complaints Coordinator, the Reviewer assesses the apparent validity of the complaint, evaluates the issues and or allegations, conducts a risk assessment if applicable and recommends any risk mitigation action considered necessary.

Biripi ACMC may decline to deal with a complaint if it appears to be vexatious or frivolous. If the complaint is assessed as valid, a course of action will be decided to resolve the matter. As noted above there are three (3) main methods of resolution, each discussed in turn below.

iii. **Resolution by Informal Discussion**

The Reviewer may approach the complainant for an informal conference to negotiate a resolution of his/her concerns.

If the matter can be resolved in this manner, considerable time, expense and distress may be saved

iv. **Resolution by mediation**

In certain circumstances mediation (internal or external expert facilitator) may be considered as a way of negotiating a mutually acceptable resolution.

v. **Resolution by Investigation**

Investigation is a formal process undertaken by a disinterested party involving:

- Gathering evidence from the complainant, and if applicable, respondent(s) and witness(es) through written statements or interviews
- Weighing up evidence to arrive at facts (findings)
- Drawing conclusions
- Making recommendations to the authorised decision maker

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- Affording procedural fairness to all parties and documenting the process at each stage
- Observing other relevant policies and procedures such as Code of Conduct and Discipline (in consultation with the Human Resources Coordinator) and legislation such as Privacy and Anti-Discrimination.
- Appropriate feedback to both the complainant and the respondent during the process.
- The written report of the outcomes of discussion, mediation or investigation including recommendations is submitted to the manager authorised to make decisions about the matter.

vi. Decisions Made and Communicated to all parties

The decision maker must document decisions on all the recommendations of the report and clear expectations about the action to be taken, the responsibilities for implementation and timeframes for action to be taken.

These decisions and expectations must be communicated to all parties and process adopted for follow through and accountability. Regular contact with the complainant and all other relevant parties is to be maintained to keep them informed throughout the process particularly if the complaint is taking longer to resolve than first advised.

In general, it is expected that an Internal Review would be completed within 21-days, however in certain cases, where the issues are complex or the required process of investigation are time consuming and / or external agencies are involved, a longer period will be required. In these cases, the CEO or his / her delegate must be kept informed of progress at least monthly.

11. Resolutions

Whether or not the complainant is satisfied with the outcomes, the complainant is deemed to be resolved when it has been managed in accordance with these procedures and the parties have been advised of the results.

12. Advice to Complainant

When the matter is resolved, the decision maker must inform the complainant of the outcomes of the process, as fully as confidentiality and privacy will allow.

13. Documentation

Any documentation must be finalised and stored as appropriate in a locked cabinet. Appropriate notes must be made on the Client Record.

14. Implementation

The decision maker is to ensure that it is clear who is responsible for implementing the decisions made. You are encouraged to develop an implementation plan to ensure that you follow through on all the outcomes of the complaint process. Any changes affecting work practices must be communicated to all relevant employees.

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15. Evaluation and Follow-up any concern

The relevant manager should monitor the results of action taken to resolve a complaint. This will ascertain if the outcome of the measures adopted is what was intended or if further actions is required. This may include a formal review with the parties involved on a pre-arranged date.

Monitoring includes ensuring clients and employees are not victimised following their involvement in a complaint.

16. Improving Systems and Processes

Consideration of the complaint may have highlighted limitations of existing systems and processes, and you should make every effort to identify and implement ways of improving these so that problems will not recur.

Here are some examples:

| Limitations | Remedies / Recommendations |
|---|--|
| <ul style="list-style-type: none"> • Inadequate training of staff to implement a particular service • Imbalanced workloads across a team • Appointment systems that don't take a count of client's need • Compute failures or outdated equipment • Safety of facilities or poor access to buildings • Inadequate transport to get to appointments • Lack of information for clients about eligibility criteria for a program • Insufficient clinical supervision of staff • Unclear expectations of staff in how they are to treat clients and infrequent feedback | <ul style="list-style-type: none"> • Increased on the job training, training courses, coaching or clinical supervision • Review work planning, work allocation and work roles in the team • Review the appointment system to introduce triage process • Review asset acquisition plans and budgets • Review WHS processes and capital acquisition plans • Provide better information to clients about transport available or liaise with community transport organisations to improve access • Provide better information in routine consultations • Improve training of and access to clinical supervisors in the organisation and externally • Improve training of supervisors so that expectations are clarified in orientation and performance review processes |

6. EXTERNAL AGENCIES CONTACT DETAILS

- Health Care Complaints Commission
Tel: 1800 043 159
- Human Rights and Equal Opportunity Commission
Toll Free: 1800 021 199
- Anti-Discrimination Board (NSW)



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Toll Free: 1300 653 227

- Department of Families, Housing, Community Services and Indigenous Affairs
Toll Free: 1300 653 227
- Aboriginal Health and Medical Research Council
Tel: 02 9212 4777
Email: ahmrc@ahmrc.org.au
- Translating and Interpreting Service (National)
131 450
- Aboriginal Interpreter Service (AIS)
1300 334 944
- Independent Commission Against Corruption NSW
Tel: 02 8281 5999
Email: icac@icac.nsw.gov.au
- NSW Ombudsman
Tel: 1800 451 524

National Relay Service (NRS) provides a free service to assist conversations with people who are deaf or have a speech or hearing impairment

- TTY users: phone 1800 555 677 then ask for number 1800 951 822
- Speak and Listen users: phone 1800 555 727 then ask for number 1800 951 822
- Internet Relay users: connect to the NRS and enter 1800 951 822

7. APPLICABLE LEGISLATIONS

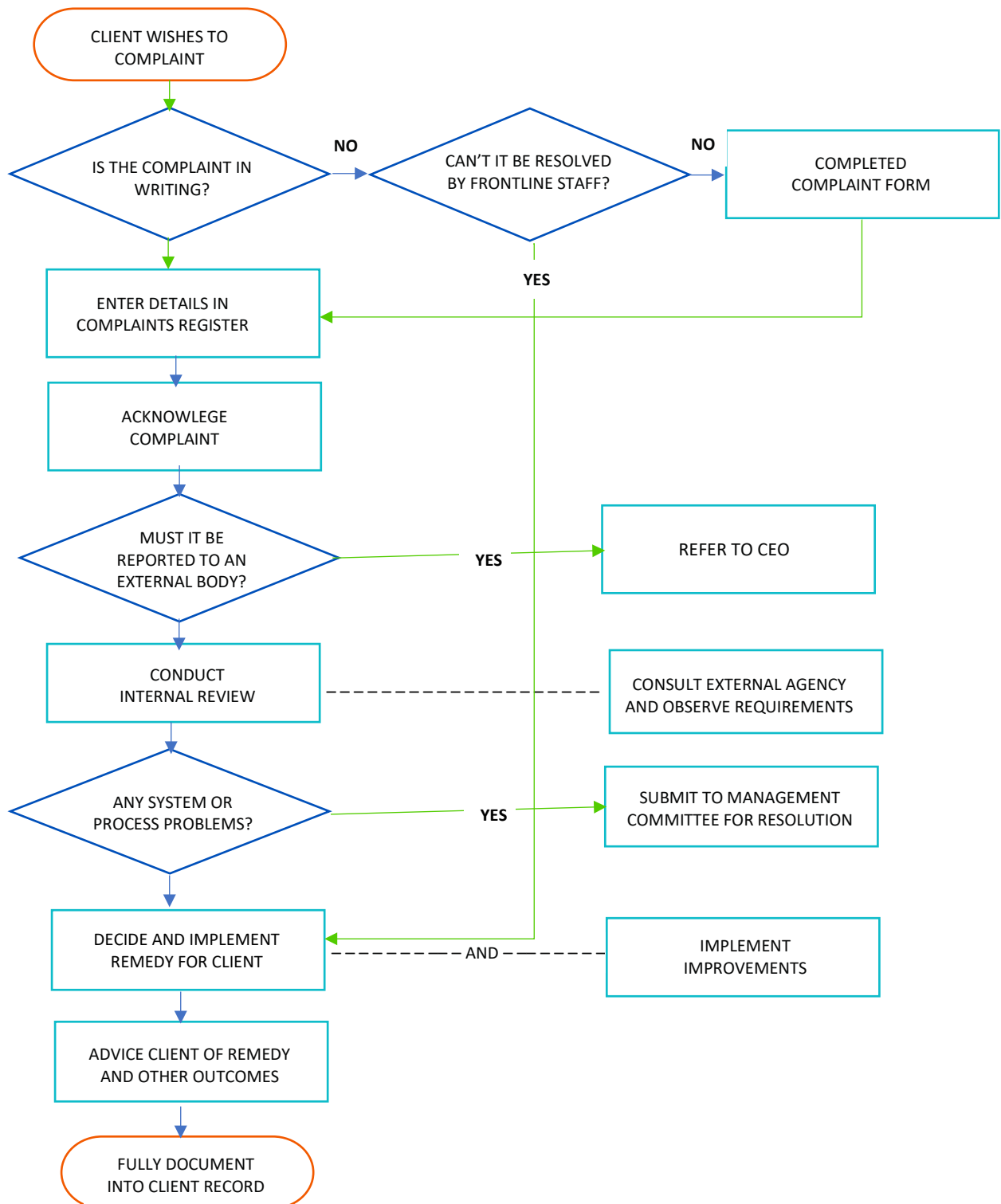
- 7.1. Commonwealth Australian Charities and Not-for-profit Commission Act 2012
- 7.2. Aged Care Act NSW 1997
- 7.3. Anti-discrimination Act 1977
- 7.4. Privacy Act 1988
- 7.5. Privacy and Personal Protection Act (NSW) 1998

8. REFERENCES

- 8.1. The Rule Book of Biripi Aboriginal Corporation Medical Centre
- 8.2. Complaints Form, FOR-HRCS-00027
- 8.3. Complaint Resolution Checklist, FOR-HRCS-00028
- 8.4. Complaint and Feedback Form, FOR-HRCS-00008
- 8.5. Continuous Improvement Policy, POL-CGOV-0003

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Biripi's Complaint Process



Internal Review of Complaints

