

ESAR Home Care is committed to delivering a quality service to all of our Clients and understands from time to time that there may be complaints. ESAR Home Care has a commitment to a positive complaints culture and takes all Client complaints seriously and is committed to dealing with them effectively.

This Policy & Procedure complies with the Australian/New Zealand Standard: AS/NZ 10002:2014 Guidelines for complaint management in organisations (Australian Standard) and the National Disability Insurance Scheme Complaints Management and Resolution Rules 2018. The purpose of this policy and procedure is to ensure:

- Clients receive the services that ESAR Home Care has committed to providing;
- Clients receive a quality service that meets their needs;
- Clients are informed about their right to provide feedback or complain about a service and what they can expect in response to that feedback, including possible outcome, actions and/or resolution;
- All complaints are responded to in a timely, consistent and systematic manner and are handled appropriately and fairly;
- All staff understand how to deal with complaints as they are reported; and
- Trends can be identified and the causes of complaints eliminated to improve ESAR Home Cares operational effectiveness.

Definitions

Client Complaint

When any form of dissatisfaction with any part of a service that ESAR Home Care has provided (or was planned to provide) is raised as a Client Complaint. Some examples may include, but are not limited to:

- Dissatisfaction with the quality or type of service;
- Dissatisfaction with the quality of care;
- Dissatisfaction with the employee delivering the service;
- Damage to Client property or belongings;
- Alleged theft;
- A planned service not being delivered on time;
- A planned service not being delivered.

Reporting a Complaint to ESAR

A Client complaint can be lodged by a:

- Client: the person receiving services;
- Carer: family members, guardians or friends who have an interest in, or are responsible for the Client;
- Provider: service provider that has organised a service to be delivered through ESAR Home Care;
- Advocate for the client;
- Member of the public.

A Client complaint can be reported via a phone call, in writing such as a letter or an email or in person. Where requested or required, appropriate support and/or assistance can be arranged, including access to an Advocate.

If a Client, carer or member of the public visits the ESAR Home Care office, calls in directly or writes to the office to lodge a complaint; this must be directed to the Service Quality Officer in the first instance.

ESAR Home Cares' contact details are: Service Quality Officer: Tracy Dean Phone: 08 8367 8141 Email: <u>tracy@esarhomecare.com.au</u> Address: 286 North East Rd, Klemzig SA 5087



Reporting a Complaint to an External Organisation

If you feel comfortable, you are encouraged to raise your concern or complaint with ESAR Home Care first as this is often the best way to have your issue resolved quickly. However, all Clients have the right to make a complaint to an external agency such as:

Reporting a complaint to the NDIS Commission: Lodge a complaint online: <u>https://www.ndiscommission.gov.au/participants/complaints</u> Phone: 1800 035 544 (free call from landlines) National Relay Service: www.relayservice.gov.au or 1800 035 544 Translating and Interpreting Service: 131 450

Reporting a complaint to the **Community Services Complaint Commissioner** Lodge a complaint online: <u>http://www.hcscc.sa.gov.au/raise-a-complaint-with-hcscc/</u> Phone: (08) 8226 8666

Reporting a complaint to the **Aged Care Quality & Safety Commission**: **Lodge a complaint online:** <u>https://www.agedcarequality.gov.au/making-complaint/lodge-complaint/online-</u> <u>complaints-form</u> **Phone:** 1800 951 822 (free call from landlines)

Referring Complaints

ESAR Home Care will refer or support a complainant to notify other bodies in accordance with any requirement under relevant Commonwealth, State or Territory laws.

Additional Reporting Requirements for Complaints Involving NDIS Participants

In line with the National Disability Insurance Scheme Complaints Management and Resolution Rules 2018 and the NDIS Quality & Safeguards Commission Effective Complaint Handling Guidelines for Providers, ESAR Home Care has an effective system in place for the management and resolution of complaints about the supports or services we provide.

When ESAR Home Care receives a direct complaint, the person making the complaint and the person with disability affected by the issue will be supported through the complaint process and will be:

- informed of the complaint's progress;
- appropriately involved in the resolution of the complaint;
- updated on the implementation of any relevant outcomes, including any action taken and decisions made; and
- not adversely affected because of making the complaint.

ESAR Home Care must also report to the NDIS Commission serious complaints (including allegations) arising in the delivery of NDIS supports including:

- the death of a NDIS participant;
- serious injury of a NDIS participant;
- abuse or neglect of a NDIS participant;
- unlawful sexual or physical contact with, or assault of, a NDIS participant;
- sexual misconduct committed against, or in the presence of, a NDIS participant, including grooming of the NDIS participant for sexual activity;
- the unauthorised use of a restrictive practice in relation to a NDIS participant.



The NDIS Service & Quality Manager must report any serious complaints effecting NDIS Participants to The NDIS Commission and notify the General Manager, who will notify the Director.

An **Immediate Notification Form** must be submitted via the <u>NDIS Commission Portal</u> within 24 hours of key personnel becoming aware of a reportable incident or allegation.

The Immediate Notification form is then followed by the 5 Day form must be submitted via the 'My Reportable Incidents' portal. This must be done **within five business days** of key personnel becoming aware of a reportable Incident. This provides additional information and actions taken by the NDIS registered provider.

Please also see ESAR Home Cares Client Incident P&P.

Complaint Management Process

Initial Response to a Client Complaint

If a Client, carer or member of the public visits the ESAR Home Care office, calls in directly or writes to the office to lodge a complaint; this must be directed to the Service Quality Officer in the first instance.

When any other employee receives a Client complaint, they must forward it to the Service Quality Officer as soon as possible, within 24 hours and include the following details:

- Date of the complaint;
- Complainants' details (name, phone number, organisation and relationship to Client);
- Client Details (name, address, phone number and Provider);
- What the complaint is about.

When an employee or the Service Quality Officer receives a complaint, they will:

- Acknowledge the complaint;
- At all times remember that they are not to offer an opinion either in the negative or positive in regard to the complaint;
- not attempt to justify the situation or appease the person lodging the complaint;
- listen attentively and actively to the complaint and request as many details as possible, ensuring they keep notes if appropriate;
- try to understand what a satisfactory resolution would be for the complainant;
- thank the person for taking the time to lodge the complaint, apologise that they have had this experience, and explain that it will now be investigated and the complainant will be contacted shortly.

Where appropriate the Service Quality Officer may request the complainant to put the details of the complaint in writing.

Documenting the Complaint

In all instances of Client complaints, irrespective of perceived seriousness of the complaint and irrespective of whether the resolution has been agreed already or will take time to resolve, a "**Client Complaint Form**" must be completed by the Service Quality Officer.

The Client Complaint Form will collect the initial details of the complaint including:

- Who the complaint was raised by, noting that the person may remain anonymous if they choose;
- Date of the complaint;
- Complainants' details (name, address, phone number, organisation and relationship to Client);
- Client Details (name, address, phone number and Provider);
- Complaint Details (provide as much detail about the complaint as possible).



Once the Client Complaint Form has been completed the Service Quality Officer will log the complaint on the Complaints & Compliments Register, assign the appropriate complaint seriousness assessment rating (Informal, Formal, Serious) and commence an investigation.

The Management Team will review the Complaints & Compliments Register during Management Team Meetings to analyse the data and identify and systemic issues so that they can be addressed.

Complaint Seriousness Assessment

All formal complaints should be assessed immediately after they have been received to identify the level of risk and the appropriate course of action that needs to be taken. The purpose of risk assessment at this stage is to identify high risk complaints that raise significant safety, legal or regulatory issues, that need to be notified to management immediately. Using the three levels of seriousness assessment rating is a useful tool to assist with consistent and reliable risk assessment.

The Seriousness Assessment rating below is based on assessing the complaint against three criteria levels and identifies who and how the complaint is responded to:

- Informal straightforward matters that the Service Quality Officer can resolve at the point of service;
- **Formal** more complex matters that may need to be referred to the NDIS Service & Quality Manager or member of the Senior Management team; and
- Serious complaints that may require notification to external and/or regulatory bodies such as The NDIS Quality and Safeguards Commission will be referred to the NDIS Service & Quality Manager or General Manager. The Client Incident P&P will be enacted and a Client Incident Report will be completed, including a full investigation, reporting and a risk assessment.

All complaints are recorded on the Complaints & Compliments Register and will be kept on file and may be used for any/all of the following:

- Future investigation should the issue not be resolved (or return as an ongoing issue);
- As documentation for the reporting process for accreditation for Quality Assurance;
- As an indication to providers that all correct processes are followed throughout the organisation;
- As possible training tools for future Support Workers and Coordinators.

Complaint Investigation

Once the Service Quality Officer has received a complaint, they will then commence an investigation process.

In the event that the complaint is of a serious nature or involves a Coordinator, the Client Complaint Form must be forwarded to the NDIS Service & Quality Manager and/or the General Manager.

Examples of a serious complaint may be, but is not limited to:

- any complaints involving alleged criminal action;
- Any complaint that may result in adverse public relations;
- Any Reportable Incidents under the NDIS;
- Any complaint that may require handling in a particular way.

An investigation will include gathering as much information surrounding the complaint as possible, assessing the information and agreeing and taking appropriate actions including who will be responsible for these actions and when these are to be completed by.

At times, the Service Quality Officer may need to consult with the NDIS Service & Quality Manager, General Manager and/or Coordinators to discuss possible options for a resolution.



The Client Complaint Form and any documents or notes relating to the complaint must be entered into Alchemy SMS and recorded on the Compliant & Compliments Register.

Complaint Resolution

ESAR Home Care has a responsibility to ensure all complaints are resolved in a timely manner, be sincere, be specific and to the point, accept responsibility for what has occurred, and the impacts caused, explain any circumstances, and causes without making excuses and summarise key actions agreed because of the complaint.

Examples of resolutions to Client complaints may include, but are not limited to:

- A written apology with details of how policies, procedures and processes have now been improved to avoid a reoccurrence;
- Informing relevant employees of a change in care requirements and Client needs requiring immediate implementation;
- Change of Support Worker;
- Providing replacement or further services;
- Reimbursing the Client for any loss or damage to property or belongings.

Once a resolution has been decided it must be communicated to the Complainant, this may be over the phone, face to face or in writing as well as the relevant ESAR Home Care Coordinator. Where information is being communicated to the client directly, it must be done so in a way that is appropriate and meets the client's needs. For Any correspondence sent to NDIS participants must include information on how to make a complaint to the NDIS Quality and Safeguard Commission if they feel their complaint has been unsatisfactorily resolved.

Further to this, the resolution must be documented on the Client Complaint Form and Client Complaint & Compliment Register. The complaint can then be closed off.

If any other ESAR Home Care employees are contacted by the complainant before a resolution has been found, they must forward the call or email to the Service Quality Officer.

Confidentiality

As far as possible, the details of the complaint are to be kept confidential amongst employees, Clients, carers and providers directly concerned with its resolution.

Roles and Responsibilities

ESAR Home Care will support those involved in complaint resolution by ensuring:

- The roles, responsibilities and expected behaviour of employees are communicated;
- Training and advice is provided to staff managing complaints.

All ESAR Home Care employees are responsible for:

- Ensuring they are familiar with the Client Complaint Policy and Procedure;
- Enabling Clients to make complaints through the provision of information and advice;
- Reporting all Client complaints to the Service Quality Officer immediately, or within 24 hours of receiving the complaint.

The General Manager is responsible for:

- Ensuring ESAR Home Care has systems and processes in place which are consistent with this Policy;
- Informing the Director of any significant complaints;
- Overseeing the complaints process for any complaints assessed as Formal or Serious;
- Providing advice and consultation on complex complaint management policy and processes.



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The NDIS Service & Quality Manager is responsible for:

- Ensuring there is a process to record Client complaints;
- Ensuring there is a Client Complaint Form and a Client Complaint & Compliments Register in place;
- Ensuring customer feedback is handled seriously and thoroughly;
- Ensuring feedback is responded to in a fair and consistent manner, in accordance with the policy and guidelines;
- Ensuring ESAR Home Care has systems and processes in place which are consistent with this Policy;
- Providing advice and consultation on complex complaint management policy and processes;
- Overseeing the complaints process for any complaints assessed as Formal or Serious;
- Reporting complaints to the NDIS Quality & Safeguard Commission if they are deemed a Reportable Incident.
- Reporting to employees and other internal stakeholders about issues of concern and corrections identified through the complaint management process;
- Monitor and review the Client Complaint Policy and Procedure.

The HR & WHS Administrator is responsible for:

- Ensuring employees understand this policy and related procedures and promote customer feedback processes to Clients;
- Supporting the complaint management process, including employee training and supporting of the Service Quality Officer who is resolving Client complaints;
- Following up Client Complaints that as part of the action taken, the resolution involves inviting employees to attend disciplinary meetings;
- Ensuring customer feedback is handled seriously and thoroughly;
- Ensuring feedback is responded to in a fair and consistent manner, in accordance with the policy and guidelines;
- Keeping the Service Quality Officer and Coordinators up to date with the progress of the complaint where it involves further action to be taken involving an employee;
- Providing advice and consultation on complex complaint management policy and processes.

The Service Quality Officer is responsible for:

- Enabling Clients to make complaints though the provision of information and advice;
- Being the first point of contact for all complaints to be lodged;
- Ensuring that complaints are acknowledged and responded to in a timely, fair and consistent manner, or escalated to the appropriate person;
- Investigating the complaint;
- Resolving and concluding the complaint and communicating with the complainant and staff.
- Supporting the complaint management process, including employee training;
- Logging the complaint on the Complaint & Compliment Register;
- Following up Client Complaints that as part of the action taken, the resolution involves sending Counselling notices to staff;
- Keeping Coordinators up to date with the progress of the complaint where it involves further action to be taken involving an employee;
- Recording investigation and outcome on Alchemy SMS in Client and/or Worker notes;
- Closing the complaint on the Complaint & Compliment Register;
- Providing quarterly summary reports for the NDIS Service & Quality Manager.

Coordinator

- Enabling Clients to make complaints through the provision of information and advice;
- Assist with the investigation of the complaint where required.