

# Feedback, Complaints and Disputes Policy and Procedure

Policy Number: YCG-POL-009

<b>Version</b>	1.0
<b>Effective Date</b>	January 2025
<b>Review Date</b>	January 2026
<b>Document Owner</b>	Director / Principal Occupational Therapist
<b>Approved By</b>	Director

## 1. Purpose

This policy establishes Youcentric Care Group's framework for managing feedback, complaints, and disputes to ensure:

- Participants, families, and others can provide feedback and raise concerns easily
- Complaints are managed fairly, promptly, and effectively
- Complainants are protected from victimisation
- Complaints inform continuous improvement
- Compliance with NDIS Practice Standards for complaints management

## 2. Scope

This policy applies to:

- All feedback, complaints, and disputes regarding Youcentric Care Group services
- Complaints from participants, families, carers, advocates, and other stakeholders
- Complaints about workers, services, policies, or processes
- Internal grievances between workers

## 3. Definitions

Term	Definition
Feedback	Comments, suggestions, or opinions about services (positive or negative)
Complaint	An expression of dissatisfaction about services, actions, or decisions where a response is expected

Term	Definition
Dispute	A disagreement that remains unresolved after initial complaint handling
Complainant	The person making the complaint
Advocate	A person who supports or speaks on behalf of a participant
Whistleblower	A person who reports misconduct or wrongdoing in the public interest

## 4. Policy Statement

Youcentric Care Group welcomes feedback and complaints as opportunities to improve services and address concerns.

Our approach to complaints is guided by:

- Accessibility - Multiple ways to provide feedback and complain
- Fairness - Impartial handling without prejudice
- Transparency - Clear processes communicated to all parties
- Timeliness - Prompt acknowledgement and resolution
- Confidentiality - Information shared only as necessary
- No victimisation - Complainants protected from negative consequences

Participants are informed of their right to complain and the process at service commencement and throughout service delivery.

## 5. Procedures

### 5.1 Making a Complaint

Complaints can be made:

- Verbally - to any worker or directly to the Director
- In writing - by email, letter, or complaint form
- Through an advocate or support person
- Anonymously (though this limits our ability to respond)

Participants are supported to make complaints through:

- Accessible information about the complaints process
- Assistance from an advocate if desired
- Use of interpreters or communication aids if needed

- Support to access external complaint bodies

## 5.2 Receiving Complaints

When a complaint is received:

1. Acknowledge receipt within 2 business days
2. Record the complaint in the Complaints Register
3. Assess urgency and seriousness
4. Assign a responsible person to manage the complaint (usually the Director unless about the Director)
5. Advise the complainant of the process and expected timeframe

## 5.3 Assessing Complaints

Complaints are assessed to determine:

- Whether it relates to a reportable incident (requiring notification to NDIS Commission)
- Whether it involves potential harm to participants
- The appropriate level of investigation required
- Whether the subject of the complaint needs to be stood down pending investigation
- Whether external notification is required (e.g., AHPRA)

## 5.4 Investigating Complaints

Investigation involves:

- Gathering information from relevant parties
- Reviewing documentation and records
- Applying procedural fairness (natural justice)
- Making findings based on evidence
- Identifying required actions

The worker who is the subject of a complaint will be informed and given opportunity to respond, unless doing so would compromise the investigation or participant safety.

## 5.5 Resolution Timeframes

Action	Timeframe
Acknowledgement	Within 2 business days

Action	Timeframe
Initial assessment	Within 5 business days
Simple complaints resolved	Within 14 days
Complex complaints resolved	Within 30 days
Updates to complainant	At least every 14 days if not resolved

If resolution will take longer, the complainant is advised of reasons and revised timeframe.

## 5.6 Resolution and Outcomes

Possible outcomes include:

- Explanation and apology where appropriate
- Action to address the concern
- Policy or procedure changes
- Training or supervision for workers
- Disciplinary action against workers
- No action if complaint is not substantiated

Complainants are informed of the outcome and any actions taken. If they are dissatisfied, they are advised of review and escalation options.

## 5.7 Review and Escalation

If a complainant is dissatisfied with the outcome, they may:

- Request internal review by the Director (if not already involved)
- Lodge a complaint with the NDIS Quality and Safeguards Commission
- Contact the relevant state ombudsman or health complaints entity
- Contact AHPRA if the complaint relates to a registered practitioner

External complaint bodies:

Body	Contact
NDIS Quality and Safeguards Commission	1800 035 544 or <a href="http://www.ndiscommission.gov.au">www.ndiscommission.gov.au</a>
AHPRA	1300 419 495 or <a href="http://www.ahpra.gov.au">www.ahpra.gov.au</a>
State Health Complaints Entity	Contact details vary by state

## 5.8 Feedback Management

Feedback that is not a complaint is:

- Recorded in the Feedback Register
- Acknowledged to the provider of feedback
- Reviewed for improvement opportunities
- Actioned through the continuous improvement process

## **5.9 Whistleblower Protection**

Workers who report misconduct in good faith are protected from:

- Dismissal or demotion
- Harassment or discrimination
- Other adverse treatment

Reports can be made to the Director, or externally to the NDIS Commission, AHPRA, or other regulators. Anonymous reports can be made.

## **6. Record Keeping**

The Complaints Register records:

- Date received and complainant details
- Nature of complaint
- Investigation actions and findings
- Outcome and resolution
- Complainant satisfaction with outcome
- Improvement actions identified

Records are retained for minimum 7 years.

## **7. Responsibilities**

### **7.1 Director Responsibilities**

- Ensuring accessible complaints processes
- Managing and investigating complaints
- Reporting to NDIS Commission when required
- Protecting complainants from victimisation

- Using complaints to drive improvement

## 7.2 Worker Responsibilities

- Receiving complaints respectfully
- Informing participants of their right to complain
- Reporting complaints to the Director
- Cooperating with investigations
- Not victimising complainants

## Version History

Version	Date	Changes	Author
1.0	January 2025	Initial policy creation	Director