

COMPLAINTS, FEEDBACK & RESOLUTION POLICY

Muscular Dystrophy NSW (MDNSW) is committed to providing high quality services. Feedback from people who use our services, and their families, is key to helping us meet this commitment. This Policy outlines MDNSW's process for handling complaints. MDNSW is committed to ensuring no-one is adversely affected because of making a complaint, or a complaint being made on their behalf.

MDNSW is committed to supporting clients, staff, and members of the community in raising concerns and providing feedback. MDNSW will always take complaints and feedback seriously, treat the people making complaints with respect, respond in a timely manner, always treat people fairly, and work with the person to resolve the matter quickly. We also record positive feedback as this helps affirm what we are doing well.

People have a fundamental right to speak up about the supports they receive. All opportunities to improve the quality of our services should be welcomed and acted upon in the appropriate way.

Receiving Complaints

As an employee of MDNSW you may from time to time become aware that someone is dissatisfied with:

- decisions made by employees of MDNSW
- the conduct of employees of MDNSW, including the quality of service provided, or
- practices, policies, and procedures of MDNSW

Remember:

Making a complaint can be difficult for the person making the complaint, so try to not to take it personally. Try to see their point of view, and remember to respond to the person rather than react to the complaint. MDNSW welcomes feedback and complaints as it provides us with opportunities to continually improve. Thank the person for raising the issue with you.

Options for submitting a complaint

Clients and members, including children and young people, are encouraged to provide feedback to staff about their services.

There are multiple ways clients, members or their advocates can make a complaint:

By phone	02 9888 5711, Mon-Fri 9am – 4pm
In person	MDNSW office: Level 1, 93 George Street Parramatta NSW 2150
In writing	email info@mdnsw.org.au , or by mail to PO Box 1450, Parramatta, NSW, 2124
Online	https://mdnsw.org.au/contact-feedback/

Key contact person

The person making a complaint may also choose to nominate a staff member to be their key contact during the complaints handling process. (Refer to the [Compliments, Suggestions and Complaints info sheet.](#))

Advocacy

MDNSW will provide clients with support to give feedback or make a complaint.

MDNSW will always work with representatives of the client and their support network to resolve issues including friends, family, carers, or advocates.

If a client would prefer support from an external source, MDNSW will support them to identify a support person of their choosing or they will be supported to access an external advocate by providing information on advocacy services and supporting the person to access the services if required.

Support with Communication

MDNSW supports clients and their supports with language or other communication requirements and preferences if they require support making a complaint.

The ways we support clients in the feedback and complaints process is by providing:

- interpreters and translators
- National Relay or TTY
- Easy read information
- Phone, email, face to face and website contact
- Other supports as required - braille, Auslan etc.

For interpreters contact the Telephone Interpreter Service (TIS) on 131 450 to assist with facilitating the complaint.

For hearing assistance supports contact the National Relay service Voice 1800 555 660 (free from landlines), or TTY 1800 555 630 (free).

Interpreting services are always provided free of charge to the client.

VERBAL COMPLAINTS

All complaints can be made verbally or in writing. If a verbal complaint is received it's important to take down the details in the client's own words, as far as possible, but also:

- Listen respectfully, without interrupting as they make their complaint
- Acknowledge:
 - their concerns and make sure they feel they have been heard and understood
 - empathise and acknowledge how the situation has affected them
- If you don't have all the details, ask:
 - What happened, and where and when?
 - What outcome are they seeking from making the complaint?
- Confirm with the client that the details taken down accurately reflect the client's concerns. This may involve reading the details back to the client, emailing them or giving them a printed copy

- Give them the number and name of the person who will handle their complaint (if known, e.g. a manager)
- Reassure the client that they will not be disadvantaged by making a complaint
- Explain the next steps and when they will get an official response to their complaint; acknowledgement within 3 days, official response within 21 days (3 weeks)
- Email details to the Chief Executive Officer (CEO), who will record it in the Complaints Register.
- Work with the person to resolve the issue where possible and keep the person updated on progress.

RESPONDING TO COMPLAINTS

All complaints should be responded to in the appropriate way. People complaining are generally seeking one or more of the following:

- **Acknowledgement** – understanding their concerns and recognising the impact on them. Keep them informed of the progress of their complaint.
- **Answers** – people want to know why something has or hasn't happened and/or why a decision was made.
- **Actions** – people want you to take steps to resolve the issue they raised. Even if the issue itself can be fixed, actions show their concerns were taken seriously and by speaking out they helped to prevent future recurrence.
- **Apology** – can be part of, or the whole outcome people seek when they make a complaint.

Watch this video on the 4 A's of Complaints for further information: [Risk, Incidents and Complaints Management: The 4 A's of Complaints \(vimeo.com\)](#)

Making an apology

Staff should consider making an apology if it seems appropriate but depending on the nature of the complaint a manager might need to do it. Apologies can be remarkably effective in addressing the key needs of people who have experienced an incident. There will be some circumstances where an apology will serve no good purpose, but these will be the exceptions not the rule.

If a mistake or error led to the incident, an appropriate apology is often seen by the person making a complaint as an essential part of the resolution of their complaint — an appropriate apology is often the main thing they seek from the complaint.

Apologies should:

- Be made by the appropriate person – it might need to be handled by a manager or the CEO (see Complaint Levels in next section of policy).
- Be sincere, timely and respectful, specific and to the point
- Accept responsibility for what occurred, and the impacts caused
- Explain the circumstances and causes, however, be mindful to do this without making excuses
- Summarise key actions agreed to respond to the complaint.

COMPLAINT RECORDS

MDNSW records all feedback and complaints received from clients, members, and others in the Complaints Register. The Complaints Register is saved in the secure 'CEO' folder on the

network and can only be accessed by the CEO. Any correspondence relating to the complaint is also saved in this folder.

All complaints are recorded because a trend may emerge later and collected data can help pinpoint systemic issues. This is used to continuously improve the process, services and review policies and procedures.

If the complaint is about something beyond the control of MDNSW (out of scope), staff should check with a manager or the CEO as to whether it should be recorded.

Staff should still provide a response to the client for out-of-scope complaints and explain the limits of MDNSW's role - or direct them to an organisation that might be able to better help them. Contact details for other agencies including the NDIS Commission are listed on the last page of this policy.

What information do you need to record?

Using the [Complaints Feedback Report form](#), record the following:

- The name and contact details of the person making a complaint (unless they choose to remain anonymous)
- What happened? (Information about the complaint)
- When did it happen? (Date and time, if known)
- Where did it happen? (At an event/program/service, online, over the phone, etc.)
- What outcome does the person making a complaint expect?
- Communications with the person making a complaint or their advocate
- What actions were taken (if any) because of the complaint
- The outcome of action taken

Records must be kept for 7 years from the date the record was made.

Complaints Documentation

FOR INTERNAL USE

- This policy
- [Complaints Feedback Report FORM](#) - for staff to complete when receiving a complaint

FOR PARTICIPANT USE

- [Compliments Suggestions and Complaints HANDOUT](#) - information for participants on complaints process
- [Compliments Suggestions and Complaints Form](#) - make available for clients/advocates to complete if they choose to
- [NDIS Complaints Information](#)

ASSESSING COMPLAINTS

MDNSW will assess and investigate all complaints raised. Where an investigation is required involving others, this will be conducted with the consent of the person and the privacy and confidential of all parties will be respected.

Many complaints are about administrative conduct, but some raise specialist legal or technical considerations. Often the scope of a complaint is not clear initially to either the person making a complaint or the agency, and clarification is needed. A complaint can raise

several related but differing concerns that require separate handling or referral to another agency.

MDNSW will assess each complaint against the below table to determine the level of potential risk and the action required to mitigate any risk and resolve the issue.

Complaint Levels

Complaints can be accepted both verbally and in writing.

Level 1

Definition	Level 1 complaints are generally straightforward with minimal potential to impact MDNSW. Such complaints are generally able to be resolved at the point of service or may require some enquiries and/or investigation.
Examples of level 1 complaints	<ul style="list-style-type: none"> • Appeal letters have been sent after asking to be removed from mailing list • a client is unhappy their details are incorrect • minor concerns about a program or service • out of scope complaints – like general complaints about the NDIS • client/member didn't receive a newsletter
Who deals with the complaint?	Complaints identified as level 1 should be dealt with by staff as soon as possible, preferably on the spot, the CEO notified and recorded on the Complaints Feedback Report form.

Level 2

Definition	Level 2 complaints are generally of a more complex or serious nature and have the potential to impact negatively on MDNSW. Such complaints will require enquiries and/or investigation and a considered response.
Examples of level 2 complaints	<ul style="list-style-type: none"> • client/other person is dissatisfied with an element of the service, program or event • the complaint is about a staff member • the subject matter is beyond the staff member's expertise or delegation • the person making a complaint requests the complaint be referred to a manager • complaints that trigger an internal review
Who deals with the complaint?	Level 2 complaints should be referred to a manager who will keep the CEO informed of the complaint and steps taken to resolve it.

Level 3

Definition	Level 3 complaints are generally complex and significant and have the potential to impact negatively on the person or MDNSW and/or cause lasting detriment or significant consequences. Such complaints
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	will usually require immediate action, comprehensive assessment and/or investigation and informed response.
Examples of level 3 complaints	<ul style="list-style-type: none"> • if the complaint is about a manager • if it is from the media • alleges a breach of a privacy protection principle • is a formal application for access to information • complaints that trigger an investigation • Any Reportable Incidents (see Incident Management System policy) which include: death, injury, assault, abuse, etc, of a client or staff member. • the complaint involves an allegation of a staff member committing a criminal offence, acting corruptly or engaging in misconduct (also a reportable incident)
Who deals with the complaint?	Level 3 complaints should primarily dealt with by the CEO &/or Board or in some cases, the client Services Manager.

Reporting to the CEO

Once a complaint has been recorded on the Complaint & Feedback Report and actions and feedback to the complainant has occurred, send the final paperwork plus any supporting attachments to the CEO who will save them on the complaints register.

PRIVACY

Protecting privacy and confidentiality

The security of client records is essential and MDNSW is obligated to protect privacy and personal information under the *Privacy and Personal Information Protection Act 1998 (NSW)* and the *Privacy Act 1988 (Commonwealth)*. That is why we:

- apply security classifications to files that contain complaints
- provide secure storage of complaint files and records
- restrict access to any individual complaint record to those staff involved in the handling of that complaint
- ensure there are no negative repercussions for the person making a complaint such as reducing or cancelling any ongoing or new services, unless required by law
- ensure clients and family members are advised of their right to confidentiality in the complaints process in the appropriate mode of communication.

Complaints by a third party on behalf of client

Where a third party has made a complaint on behalf of a client, staff must:

- not assume that the third party is authorised to act on behalf of the client
- as appropriate, seek the consent of the client to deal with the third party on the client's behalf
- consider the privacy implications of releasing information to the third party, and;
- not release any information without the client's express consent.

Complaints received anonymously

Anonymous complaints (with no name/s or contact details), should still be recorded by staff in the usual manner. The complaint should also be assessed to determine if it raises relevant issues, and whether any improvement to service delivery or policy is warranted.

When the person making a complaint requests anonymity

If a complainant identifies him or herself but requests anonymity or confidentiality during the complaint handling process, a supervisor or manager (who is not the subject of the complaint) should:

- clarify with the client his/her concerns and ask them what details they want disclosed and to whom. (e.g. the client may be comfortable with a manager reviewing the complaint having access to the client's identity details, but not the staff at the location where the issue occurred)
- de-identify records of the client's complaint, maintain confidentiality, and apply security to the client's complaint record.

RESPONDING TO COMPLAINTS

Response time standards - timing is crucial!

When a complaint is received in writing, or where a verbal complaint has not been resolved on the spot, staff should:

- reply to the person making a complaint within 3 business days, acknowledging the receipt of the complaint, either by phone or in writing
- provide an official response to the person within 21 days (3 weeks) of receipt
- If this cannot be achieved, an interim response must be sent to the client.
- The interim response should indicate when a full response can be expected and explain the cause of the delay (e.g. next MDNSW Board meeting).

Staff should also attempt to resolve complaints earlier where the issues raised by the client are time sensitive, for example, where they may involve access to a program or event.

When staff are the subject of a complaint

Staff who are the subject of a complaint should be kept informed and treated respectfully during the complaint handling process. The principles of procedural fairness must be applied. This means that staff have a right to be given detailed information on a complaint made about them and to be given an opportunity to respond.

However, there are some limits to these rights, particularly where a client's request for confidentiality is concerned. The following principles should generally apply:

- The manager handling a complaint or conducting an internal investigation should consult with other staff involved in the incident
- Where a staff member has been named by a complainant as the subject of a complaint, the staff member should be advised of the nature of the complaint, unless there is a compelling reason not to do so. This advice, with specific details, should be given by a supervisor or manager, and at an early stage of the process. (However, where the client has requested anonymity or confidentiality, personal information or any details of the complaint which may identify the client should be withheld. Similarly, a copy of the complaint should not be provided to staff if this would breach the client's request for anonymity or confidentiality.)
- When advising a staff member of a complaint, the supervisor or manager should approach the matter in keeping with the principles of procedural fairness and natural justice, and should offer the staff member a de-briefing session if appropriate
- A staff member who is the subject of a complaint has the right to respond to the officer handling the complaint, and have the staff member's version of events stored in the complaint file or record

- The appropriate time to address and resolve any staff performance issue that may arise as a result of a complaint is at the time of handling the complaint. It is generally not appropriate to defer dealing with such an issue until a formal performance review process. However, where there is a pattern of similar complaints which indicate there may be an ongoing performance issue, it may be appropriate to discuss complaints during a staff member’s performance review.

REVIEWING AND ESCALATING COMPLAINTS

Authority to conduct internal reviews

If a complaint requires more review, the CEO will nominate an officer authorised to conduct an internal review. This might happen with Level 3 complaints.

Records of internal reviews

The nominated officer must retain official records of an internal review, including copies of relevant documents which formed the basis of the decision. The officer will turn all information over to the CEO to save in the secure Complaints Register folder after the review is complete.

Matters requiring investigation or referral

Where an internal review involves very complex or sensitive issues, it may be more appropriate to undertake a more formal investigation. In this case, the investigation should be undertaken by an officer of appropriate seniority who understands investigatory procedures or depending on the matter, an external investigator.

The NSW Ombudsman has a useful resource on conducting investigations:

https://www.ombo.nsw.gov.au/_data/assets/pdf_file/0007/3697/FS_PSA_09_Investigation_of_complaints.pdf

Escalating for external review

Where it is necessary for a complaint to be escalated for further review by an external body, this action should be performed by the CEO and the following protocols apply:

- Referral of a matter to the NDIS Commission or the Commonwealth Ombudsman should be approved and signed by the CEO
- Reporting to the NSW Police Force of a criminal offence allegedly committed by a staff member
- Reporting to the NSW Police Force of a criminal offence allegedly committed by any other person
- Where the complaint would constitute a conflict of interest.

Feedback opportunities

MDNSW values feedback from all stakeholders including clients, families, staff, MD community, MDNSW Board, allied health professional, donors and governments.

This feedback is obtained through:

Annual Client and Family Survey	Distributed via email, Facebook link and mail - for clients/members without access to email.
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	<p>Results are communicated back to the community through our newsletter (which is printed for people without computers), social media and on our website.</p> <p>Results are reported to the Board at the following Board Meeting.</p> <p>The areas of improvement identified in the survey are reviewed by the CEO, respective managers, and the Board.</p> <p>An action plan is prepared by the Management Team during their monthly meetings. The outcomes are fed back to the community via our newsletter, Talking Point and our website.</p>
Website / Email / Mail / Phone	<p>All feedback provided via the website is sent directly to the CEO. Any feedback received via mail is also given directly to the CEO. The CEO discusses the feedback with the relevant manager. Processes are reviewed considering the feedback and where appropriate, changes are made. This is communicated in the monthly management meeting.</p> <p>Refer also to <i>MDNSW Complaints, Suggestions & Compliments</i> for how the feedback is resolved and communicated back to the person providing feedback.</p>
MDNSW Programs and Services	<p>MDNSW values feedback from the participants in our major events and programs. The participant is asked to complete evaluation forms at the end of each event. Feedback gathered is reviewed by the Client Services team and a summary report outlining the positives/negatives/lessons learnt is provided to the CEO for review. All feedback is reviewed and considered when planning the next event.</p>

Analysis and Evaluation of complaints

Analysis is undertaken by the CEO to monitor trends, including measuring the quality of our service, improvement opportunities and an action plan. At the end of every event run by MDNSW, client services staff evaluate the event and client feedback received and discuss in a post-event meeting. Key concerns are raised with the CEO.

The CEO reports to the Board on complaints at each board meeting. An analysis report is presented to the board annually.

Reporting includes:

- The number of complaints received
- The time taken to resolve the complaints
- Actions arising from complaints
- The outcome of actions, including matters resolved at the frontline
- Systemic issues identified, and opportunities for improvement

Contact numbers for external complaints bodies

NDIS Commission
Phone: 1800 035 544
TTY: 133 677

Commonwealth Ombudsman Office
Suite 2, level 16, 580 George Street
Sydney NSW 2000
Phone: 1300 362 072
TTY: 133 677 then ask for 1300 362 072

<p>Web: ndiscommission.gov.au/participants/complaints Information on how to make a complaint to the NDIS</p>	<p>Web: www.ombudsman.gov.au</p>
<p>Australian Human Rights Commission Level 3, 175 Pitt Street, Sydney NSW 2000 GPO Box 5218, SYDNEY NSW 2001 Phone: (02) 9284 9600 Complaints Infoline: 1300 656 419 TTY: 1800 620 241 Email: infoservice@humanrights.gov.au https://www.humanrights.gov.au/complaint-information</p>	<p>Anti-Discrimination Board (NSW) Level 7/10 Valentine Avenue, Parramatta NSW PO Box W213, Parramatta Westfield NSW 2150 Phone (02) 9268 5555 Toll free 1800 670 812 Email: complaintsadb@agd.nsw.gov.au https://www.antidiscrimination.justice.nsw.gov.au/</p>
<p>Multicultural Disability Advocacy Association (MDAA) 10-12 Hutchinson St, Granville NSW 2142 PO Box 884 Granville NSW 2142 Phone: (02) 9891 6400 National Relay Service: 133 677 Toll Free Phone: 1800 629 072 Telephone Interpreter Service: 13 14 50 Email: mdaa@mdaa.org.au Web: www.mdaa.org.au</p>	<p>NSW Ombudsman 02 9286 1000 1800 451 524 regional/charges may apply on mobile phones Translating and Interpreter Service (TIS) 131 450 If you are deaf, have a hearing impairment or speech impairment, contact us through the National Relay Service: Speak and Listen users phone 1300 555 727 then ask for 02 9286 1000. https://www.ombo.nsw.gov.au/contact-us</p>
<p>National Disability Abuse and Neglect Hotline 1800 880 052</p>	<p>MDNSW website has a list of complaints and advocacy links: https://mdnsw.org.au/the-peer-collective/complaints-and-advocacy-links/</p>

Legislation

This Complaints Feedback and Resolution Policy is not a replacement for any Act or Regulation. The criminal law and legislation still apply to all staff. If any conflict arises between this policy and the provisions of any Act or Regulation, the latter provisions will prevail.

The following legislation and conventions are relevant to this policy:

- *Anti-Discrimination Act 1977*
- *Children (Care and Protection) Act 1987*
- *Crimes Act 1900*
- *Disability Inclusion Act 2014*
- *Disability Discrimination Act 1992*
- *Fair Work Act 2009*
- *Freedom of Information Act 1989*
- *Health Care Complaints Act 1993*

- *Human Rights and Equal Opportunity Commission Act 1986*
- *Independent Commission Against Corruption Act 1988*
- *National Disability Insurance Scheme Act 2013*
- *National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018*
- *Ombudsman Act 1974*
- *Privacy Act 1988*
- *Privacy and Personal Information Protection Act 1998*
- *Protected Disclosures Act 1994*
- *Sex Discrimination Act 1984*
- *United Nations Convention on the Rights of Persons with Disabilities*
- *Work Health and Safety Act 2011*

Policy Review

Changes Made	Name and Role	Date of Review	Version #	Date Approved	Next Review Date
<i>Logo updated in header Reviewed against updated NDIS Practice Standards – minimal changes required</i>	<i>HR & Quality Coordinator – Keely Thompson</i>	<i>04/04/2022</i>	<i>V5</i>		<i>April 2023</i>