Good Practice Guide and Self Audit Tool 2017

Developing an effective person centred complaints resolution culture and process

Tasmanian Government

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Foreword

As Chief Executive Housing and Disability Reform, I have pleasure in presenting this Good Practice Guide on successfully managing complaints.

We continue to work with our disability support providers to promote a culture where **people feel able to speak up** about the supports they receive and where complaints are embraced as an opportunity to improve quality of services. This guide provides advice and tips for service providers in preparing for, resolving and reviewing the handling of complaints about their services.

Our disability support providers already operate in a regulatory environment. This guide is designed to complement existing legislative and contractual requirements. It is just one part of a range of controls and mechanisms that support compliance and continuous improvement of services.

Please visit the Departments website at www.dhhs.tas.gov.au/disability to familiarise yourself with the range of information and resources we have available.

I commend this 'Good Practice Guide and Self Audit Tool' to you as a useful reference to help your organisation further refine and enhance your approach to handling complaints to ensure that people feel that **it's ok to complain.**

Peter White
Chief Executive, Housing and Disability Reform

Introduction

This guide and self audit tool has been developed to assist disability service providers develop and review their complaints resolution process to ensure that it:

- is responsive and accessible to people with disability
- forms part of a broader quality culture that sees complaints as an opportunity for service improvement.

For complaints handling policies to translate into good practice, services must commit to a plan of action that is supported by its board of management and executive leadership group. Equally, managers should actively involve their staff and the people using the service in any review process to ensure that it meets everyone's needs. Whilst this guide has a specific focus on complaints it is important to recognise that this is just one way an organisation can receive feedback from the people using their services. Successful organisations will provide ongoing opportunities for people with disability, their families and carers to provide feedback as a key influence on service improvement.

What is a complaint?

There are many definitions of a complaint but in essence it is someone giving feedback or letting providers know that their service is not 'hitting the mark'.

In Disability and Community Services, we recognise that feedback, in the form of compliments or complaints is important. Feedback from people who access funded disability and community services contributes towards improving service delivery.

A complaint can be about a wide range of issues, and can be made in writing or verbally to the service provider. From the perspective of the person with disability it is important that the definition of a complaint is not too narrow. Too often, what has been considered to be of concern to people with disability has not been informed by their own views and experiences. The resolution of complaints should be consistent with the principle presented by the disability rights movement 'nothing about us, without us', which is fundamental to the *United Nations Convention on the Rights of Persons with Disabilities*. Given the importance of taking a rights based approach to the provision of disability services, it is also important that sound working relationships are developed between service providers and the people using their services.

Thought

It is no longer sufficient to determine whether or not the complaint is justified from the organisation's point of view: it is almost certainly justified in the view of the person making the complaint.

Mark's story

Mark, with the assistance of his advocate, made a complaint to the service provider running the group home in which he lived. The issue was that he owned a cat that was previously allowed to remain in the lounge room at night and sleep in his room with him. The service provider had introduced new rules forbidding the cat from being indoors during meal preparation and from sleeping in the room with Mark. Mark felt that the service provider perceived the complaint as trivial, and that they did not take into consideration the effects these rules would have on the residents of the house, particularly Mark.

Mark was willing to accept one of the rules regarding the cat being outside during meal preparation but felt there was no reason why the cat should not be allowed to remain in the lounge room and at night sleep in his room with him. The cat was a great source of pleasure to Mark and the other residents. The service provider came to understand the impact of these new rules on the residents. Following a meeting with Mark, his advocate and his service provider, agreement was reached that the cat could remain in the house at all times, except during meal preparation.

What does the Guide and Self Audit Tool do?

The guide explores what it means to have a quality human service and how an effective complaints system can contribute.

It considers people's experience of complaints processes and, more specifically, the experiences of people with disability and complaints processes.

The guide and self audit tool considers and aligns with:

- the *United Nations Convention on the Rights of Persons with Disabilities*

- the International and Australian Standards on complaint handling

- the principles prescribed in the *Disability Services Act 2011*

- NDIS Quality Assurance and Safeguards Working Arrangements

- Contractual obligations under Department of Health and Human Services (DHHS) Funding Agreements including the DHHS Quality and Safety Framework

- DHHS policies and procedures as they relate to Complaints Handling.

The key elements of an effective complaints resolution process are explored with specific reference to how the use of person centred thinking tools assist in maintaining a focus on the person with disability when seeking to resolve a complaint.

At the end of the guide is a self audit tool which organisations can use to assess their current approach to complaints. This will help identify specific areas of strength and those needing further development.

Legislative obligations for service providers

The *Disability Services Act 2011* (the Act) and *Disability Services Regulations 2015* require that all funded disability service providers must:

- seek regular feedback on the services, support and programs provided; and

- use the feedback to review and improve those services, supports and programs.

While the Act formally requires providers to seek feedback, good human service practice has long acknowledged that complaints, when managed effectively enhance and strengthen relationships with people using the services and improve the quality of the service provided.

This guide provides an introduction to a number of key concepts which are fundamental to understanding why it is important to have an effective complaints resolution process and culture and how that relates to good practice.

Guiding principles

There are a number of guiding principles that have informed the development of this guide and self audit tool that continues to lead the work of Disability and Community Services (DCS).

DCS believes that complaints provide both people with disability and disability service providers with an important opportunity to improve the quality of disability services.

Disability Services is guided by the principles agreed in the *United Nations Convention on the Rights of Persons with Disabilities* and reflected in the *Disability Services Act 2011* which include:

- respect for inherent dignity, individual autonomy including the freedom to make one's own choices, and independence of persons

- non-discrimination

- full and effective participation and inclusion in society

- respect for difference and acceptance of persons with disability as part of human diversity and humanity

- equality of opportunity

- accessibility

- gender equality

- respect for the evolving capabilities of children with disability and respect for the right of children with disability to preserve their identities.

The following principles are also important and guide the work of Disability Services:

community engagement – a whole of community effort is required to support the inclusion of people with disability in the life of their communities

simplicity – the service system for people with disability is easy to understand and navigate

universal approach – products, services, environments and communities are accessible and usable by all people to the greatest extent possible without the need for specialised modification

life course approach – a person's likely needs and aspirations over their lifetime are taken into account, paying particular attention to times of significant change

person centred – policies, programs and services for people with disability are designed to respond to the needs and wishes of each individual

independent living – services and equipment enable people with disability to be independent

collaboration – governments work together to ensure that policies and programs work well.

Chapter 1
Quality human service

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Quality human service

Helen complained that her 20 year old son Peter was not able to access respite care when the family was experiencing a crisis.

There was a history of tension and disrupted communication between Helen and the disability service. Peter had not accessed respite for more than a year due to the communication issues. The family were increasingly stressed and angry about asking for assistance. Service provider staff reported feeling intimidated and frustrated as they were not able to get cooperation from the family. They regarded Helen as difficult and threatening.

Helen contacted an advocacy service who helped her voice her frustration and concerns and the two sides were able to discuss the issues from their individual perspectives. It was discovered that emergency respite in the area was operating as planned respite. This raised systemic and resource issues. The family was subsequently provided with respite and the process for accessing it was more fully explained.

I DON'T NORMALLY COMPLAIN!

THAT'S OK ... WE DON'T NORMALLY LISTEN!

When people not used to speaking out are heard by people not used to listening then real change can be made.

John O'Brien (2007)

The provision of good quality human service is based on sound and trusting relationships that develop between the people using the service and the service provider. These relationships develop best through an ongoing process of effective communication. Effective communication is important as it helps to ensure that the service continues to appropriately meet people's needs. Good service delivery is enabling people with disability to say what is working and not working for them so that appropriate actions can be taken.

This is based on an expectation that people with disability have the right to expect quality services and that these services play an important role in improving quality of life. Many people with disability and their families are increasingly aware of their right to receive quality services. However, this has not always been the expectation.

Thought

In addressing these areas it is important that your organisation records what is working and what is not working, from the perspective of the person with disability.

1.1. Department of Health and Human Services Quality and Safety Framework

Every day, community sector organisations provide valuable services to Tasmanians. Funded service providers embrace a wide range of community, voluntary and not for profit activities aimed at improving the health and wellbeing of Tasmanians through direct support such as disability, family and mental health services, and strategies for preventing or reducing the effects of chronic conditions.

The Department of Health and Human Services (DHHS) is the largest Tasmanian State Government agency. DHHS is responsible for delivering integrated services that maintain and improve the health and wellbeing of individual Tasmanians, and the Tasmanian community as a whole.

About the Framework

The aim of the Quality and Safety Framework for Tasmania's DHHS Funded Community Sector (the Framework) is to support DHHS funded service providers to have systems and processes in place to deliver safe, high quality services to Tasmanian consumers.

The aims of the Framework

The Framework aims to support the following outcomes for consumers, funded service providers and DHHS:

- high quality and safe services for Tasmanians through continual improvement of service delivery

- service systems and processes are enhanced using recognised evidence bases (such as standards)

- a culture of continuous improvement within the sector that is supported by, and inclusive of, all stakeholders

- minimising regulatory and administrative burden

- consumers, service providers and DHHS work in partnership to enhance service delivery

- consumers, the community and Government have confidence that DHHS funded service providers are delivering safe and high quality services

- learnings, both at the service provider and sector level, are used in planning and development activities.

The requirements of the Framework

Broadly, the Framework requires funded service providers to:

- continue to undertake quality and safety activities against recognised Standards relevant to the services DHHS is funding;

- have systems and processes in place which record and monitor continuous improvement activities;

- have systems and processes to ensure that feedback and learnings from incident outcomes contribute towards enhancing service delivery;

- report serious consumer related incidents within 24 hours or the next working day;

- expect an annual visit from their DHHS Funding Agreement Manager to discuss/ monitor performance; and

- expect a quality and safety review of the services that DHHS is funding via a Funding Agreement, at least once every three years.

More information on the Framework is available on the DHHS website under Quality and Safety Framework at: www.dhhs.tas.gov.au/about_the_department/business/community_sector_relations_unit/resources,_publications,_and_tools

Chapter 2

Relationship between a complaints resolution process and quality human service

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Relationship between a complaints resolution process and quality human service

Often, people with disability and their families do not have high expectations of services. Indeed, people using services sometimes believe that they should be grateful for any services they do receive.

A customer focused organisation understands the expectations of the people using their services. They also understand that the extent to which those expectations are met is essential to how people feel about the services that are provided.

To explain this further, if people's expectations exceed what the organisation is able to, or can afford to, deliver this can create issues. In this scenario, either the service level needs to increase or people's expectations have to be better managed. Perhaps promotional material, website content, staff training etc. need to be reviewed to determine why expectations are higher than service delivery?

A complaints resolution process is an organised way of responding to, recording, reporting and using complaints to improve the service for people with disability. It includes procedures for people to make complaints and guidelines for staff to resolve complaints.

An effective complaints resolution process will:

- create a second chance
- identify areas for improvement
- provide opportunities to strengthen public support for your organisation, and
- assist in the planning and allocation of resources.

An effective complaints resolution process has two key components. First, the specific complaint must be resolved in a way which is respectful, responsive and accountable. Second, data must be captured to provide feedback about the system and processes. Often complaints are an early warning of an issue that may be of concern to a number of other people using services.

I CAN ONLY SEE ONE SMALL COMPLAINT!

TITANIC

Tip

There is no point having a complaints resolution process if staff (or people using services) are not aware of how it works nor had any input into its development.

(Queensland Ombudsman, 2008)

The bus story

Several families had concerns about a bus driver who collected their sons and daughters for a day program. One of them raised this concern with the disability service provider but nothing was done. A few months later the bus was involved in an accident and it subsequently emerged that the driver had his licence suspended for dangerous driving some months beforehand.

This is an example where one complaint not only reflects the concerns of others but can also be an early warning sign of more significant problems. As will be discussed later, only a small percentage of those dissatisfied with a service make a complaint. Consequently complaints should be seen as the tip of the iceberg. In this way complaint data can help to determine service deficiencies that may require corrective action, as well as service strengths that may require further support. Complaints often have a 'root cause' not just a 'tipping point'. Root causes can include: recruitment processes, organisational communication, staff training, policies, processes, guidelines etc. Tipping points are usually the 'straw that broke the camel's back'. The issue that caused the person to make the complaint may be the result of a build-up of dissatisfaction with your organisation.

It is no longer sufficient to determine if the complaint is justified or not from the organisation's point of view as it is almost certainly justified in the view of the person making the complaint. Given the reluctance many people feel towards making a complaint there is a need to make people feel comfortable raising their concerns. Organisations can also use the complaint process to follow up how people found the complaints process separate from the actual outcome of the complaint. One way of approaching this is to ask people who have made a complaint what worked and what did not work about the complaints process. This can provide helpful information to improve the complaints system. It is also important to seek feedback from those who have not made a complaint, as they may have different issues with the process.

Complaints resolution is just one way of obtaining feedback from people using services. The satisfaction levels of people using services can be measured via a range of other methods. This could include surveys, suggestion boxes or focus groups, as well as informal events where people using a service have the chance to mix with staff of the service so they can raise issues they might not otherwise raise through more formal complaints processes. In selecting approaches for obtaining feedback from people using services you need to consider the appropriateness of the method.

A thematic analysis of person centred plans may serve to highlight trends in the types of assistance and support people using services are seeking from your organisation. This may serve to identify areas for improvement.

Satisfaction surveys can also be an effective means of gathering useful data to identify areas of service strength and potential improvement (Huson, 2008). One disadvantage with some satisfaction surveys is that they can be lengthy, reducing the return rate and adding to the analysis costs. They also do not always provide targeted information for the organisation on how it can improve.

Another methodology called the Net Promoter Score (NPS) seeks to determine behaviours rather than attitudes, and specifically draws out information based on whether people using services are likely to talk positively to others about the organisations they receive services from. This approach groups consumers into broadly three categories. There are those who are loyal customers, who keep receiving service from the organisation and actively promote it to others. Then there are people who are passive, who are satisfied but unenthusiastic and would easily change services. Finally there are the detractors, who are unhappy customers trapped in a bad relationship. The key questions posed are:

Rate from 0 (Not at all likely) to 10 (Extremely likely) whether you would recommend the organisation to someone you know.

What is the primary reason for the score provided?

What is the most important improvement we could make to improve your score?

Then by subtracting the detractors (those who scored 0 – 6) from the promoters (those who scored 9 –10) an NPS% can be formulated *(Reichheld, 2006).*

Thought

In promoting choice it can be helpful to have a decision making agreement which outlines how the person communicates and this information is then shared with others.

Tip

Inform people where to complain

- *Avoid long complicated forms that discourage complaints*

- *Use forms that clearly indicate to people making a complaint what they need to tell you when lodging their complaint*

- *Be responsive – acknowledge complaints quickly, establish target times for stages of the complaint process and let people know what to expect*

- *Find out what the person wants you to do about the problem, be clear about the remedies you can offer and do not make promises you cannot keep*

- *Give personal and specific replies – a stock standard reply that doesn't address their issues, may make things worse*

- *Treat people as you would like to be treated – do not pass the buck – but if you need to refer the complaint to someone else or further review is available internally or externally make sure you give the person who made the complaint full details*

- *Let people who have made a complaint know about any improvements that have been made as a result of their complaints and thank them for their feedback.*

Adapted from Queensland Ombudsman, 2008 (Communication fact sheet 3)

Chapter 3

Delivering quality human services through continuous improvement and building a learning culture

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Delivering quality human services through continuous improvement and building a learning culture

An effective approach to managing complaints requires an organisational culture which sees a complaint as an opportunity to improve and learn.

3.1. Culture is more than compliance

The National Standards for Disability Services include a specific standard about feedback and complaints (standard four) www.dss.gov.au/our-responsibilities/disability-and-carers/standards-and-quality-assurance/national-standards-for-disability-services

The *Disability Services Act 2011* (the Act) and the *Disability Services Regulations 2015* include the requirement for funded disability service providers to seek regular feedback on their services and to use the feedback to review and improve services.

There are also a number of existing Departmental policies in place for the management of complaints. These are:

- Disability and Community Services Compliments and Complaints Procedure (2015)

- Preventing and Responding to Abuse in Services Funded by Disability Services policy P2010/1102-001 and Procedure P2012/0177-014.

In addition, service providers must develop and implement guidelines and procedures for receiving feedback and resolving complaints from consumers about the delivery of the services under their funding agreement with the Department.

Compliance is about meeting legislative and contractual requirements. Organisational culture, however, is a step beyond that: where complaints resolution becomes part of the organisation's way of thinking and doing (not just an action item on its 'to do' list).

Where complaints are seen only in the context of compliance, and not about improving service quality or forming part of the shared values of the organisation, a complaints resolution process may, at best, not be fully supported by the culture or at worst be at odds with it.

Complaints resolution processes not only provide an effective means of dealing with complaints, they also provide an opportunity for your organisation to find out where problems may be occurring and where changes need to be made. Complaints data offers a valuable source of information as to where and how organisations can improve service delivery. Efficiencies gained through complaint resolution processes are a major justification for setting up and maintaining such a system.

Michael's story

Michael lives in his own home with the support of a disability service. His mother contacted the service provider, concerned that she was unable to contact him. She advised that Michael had a history of behaviours of concern and tended to get into trouble when he was not well supported. When she contacted the service provider, she was told that his case worker had not had contact with him for several days.

The service provider set up a meeting with the case worker, Michael and his mother for the following day to discuss how best to support Michael, especially when contact couldn't be made.

His mother later advised that the meeting had been very productive. Both his mother and the case worker were unsure about how to best work with Michael but were able to share valuable information. They discussed and agreed a process for when Michael was hard to contact, which included visiting him at his house either late at night or early in the morning. They decided this was the best option as he tended to be out all day and would not return phone messages. They agreed to review this process in three months time or sooner if needed.

However, unless these processes are supported by a strong culture which sees complaints as an important way of receiving feedback from people using services, they tend to become simply a collection of manuals, policies and procedures which are not reflected in the practice of the organisation.

> *One of the surest signs of a bad or declining relationship with a customer is the absence of complaints.*
>
> *Ted Levitt, Harvard Business Review, 1991*

> **Tip**
>
> *To help with the integration into the culture it can be helpful to develop a complaints vision. This can be something to aspire to, a mantra to motivate people and a general statement that complaints are valued.*

3.2. What is organisational culture?

Culture is the collective values of a group of people, the relationships between those people, how they see the world and their own place in it *(Neill and Smith, 2008: 3)*. In short, it is 'the way things are done around here' *(Neill and Smith, 2008: 3)*.

We all create and re-create our culture every day through the words we use and the work we do, through what we find unacceptable, and what we are prepared to tolerate, what we see as worth working for, giving us meaning and purpose so that it is worth getting out of bed in the morning.

Each organisation has its own culture that reflects the things that staff, or sections of staff, commonly value, including shared visions and beliefs and what work related behaviour is considered appropriate or inappropriate. Organisational culture affects how members of staff relate to each other and to people using services, and the everyday manner in which people work together to get things done.

Culture is larger than any single organisation and belongs to all of us. Consequently we all have a role to play in applying our efforts where it fails to meet the needs and aspirations of the people it is meant to serve.

> **Tip**
>
> *Your policy and procedures will be most effective where there is a strong organisational culture where it is seen as being OK to complain.*

3.3. Quality culture

A quality culture is one which reflects on everyday practice using values, beliefs and expectations to learn from experiences. This reflection is aided by a willingness to challenge assumptions which affect an organisations approach to service provision. Using this approach, areas for improvement can be identified in a systematic and planned way. The presence of a quality culture is important in delivering better service outcomes for people with disability and promoting the sustainability of the organisation.

A quality complaints culture is more than writing policy, procedures and guidelines. It is more than training staff in complaints resolution. Complaints must become an important and valued part of everyone's job. This type of culture is the opposite to one where the organisation seeks to attribute blame for any mistakes made, which can have the effect of discouraging staff from taking calculated risks or indeed learning from their mistakes.

To create a 'complaints friendly' culture the executive leadership group need to clearly signal their support of the system and take visible responsibility for outcomes. Complaints resolution should be recognised and should be an important function within the organisation; how it works should be clearly articulated and publicised and its purpose and objectives should be discussed and reinforced with staff. People are an organisations greatest resource whether they are staff or people using services. People power is a key mechanism for raising awareness of the complaints approach and promoting accountability.

TRUST ME WHEN I SAY WE WON'T BE ASSIGNING BLAME!

Features of a person centred organisation include the following:

- it knows its purpose and what it can offer others

- its leaders and decision makers know the people that the organisation supports

- everyone across all levels of the organisation understands the importance of taking a person centred approach

- it continues to evolve – it is fluid and learning

- it is open and unafraid of taking risks and making mistakes

- it consists of a group of individuals working to one purpose but remaining individuals

- it is not precious about its own resources, sharing for the good of all individuals *(Neill and Smith, 2008: 8).*

3.4. Person centred culture

In the context of disability services there is a gradual transition from a service led culture to one that is increasingly, although not yet consistently, person centred. Such a person centred culture has outcomes which are about more productive and meaningful lives and better connections with the community *(Neill and Smith, 2008: 3)*. This person centred culture is one where listening and learning are built into every aspect of the service, no matter the size. This culture has deep values of respect for the individual and responsiveness to what is most important to and for them, and is not confined to disability services but also offers this to the wider community (Neill and Smith, 2008: 2).

Person centred thinking tools are increasingly the building blocks creating more flexible and responsive services. A greater level of consistent and ongoing application of person centred approaches can achieve a more person centred culture.

There are a number of factors that will also influence this change:

- the growing voice of people with disability, their families, carers and advocates

- greater control by people with disability over how they choose to spend their funds

- a more competitive market where service providers will need to see the people they serve as consumers

- the growing number of individuals who champion a more person centred approach to their work

- dissatisfaction with existing services, together with the desire of staff for change.

The use of person centred approaches helps focus energy towards supporting people to realise their hopes and dreams, as well as keeping them healthy and safe in a way that makes sense for them.

3.5. Understanding the existing culture

If an organisation does not have a quality culture the first step in changing the culture is to understand what it currently is. The study by Simpson (2008a) found that the leaders of an organisation often perceived their culture to be more positive than their middle managers or staff. Therefore it's important to implement a range of strategies to monitor all aspects of the culture and to act on the outcomes from the feedback mechanisms.

It is also important that leaders in the organisation model the behaviours they would like to characterise their organisation.

Tip

In order to uncover the unwritten ground rules that guide the behaviour of staff it can be useful to pose questions such as those listed below:

- *Around here, service users are...*

- *Around here, communication is...*

- *Around here being open and honest gets you...*

- *Around here, showing initiative is...*

- *Around here, if you criticise your manager...*

- *Around here the only time a manager speaks to you is when...*

- *Around here, getting a complaint is...*

(Simpson, 2008b)

3.6. Principles of effective cultural change

In order to effectively bring about cultural change within an organisation, five key principles should guide your approach:

Strategically aligned – The changes sought need to be clearly consistent with the stated vision and mission of the organisation.

Collaborative – For culture to shift it is important to engage key individuals across all levels of the organisation if there is going to be ownership of the importance of shifting the way things are done around here.

Focused – Clear attention needs to be given to the behaviours to be encouraged and those that need to be challenged.

Open – The process of changing the culture needs to be open in its engagement with people across the organisation and provide opportunities for people to challenge and question as this is part of the process of integrating the new approach for them.

Demonstrated – The cultural shift needs to be demonstrated through people's actions and attitude.

(Success Works, 2008:10)

In bringing about organisational change the appreciative inquiry (AI) method offers a way to embrace organisational change. Its assumption is simple: 'every organisation has something that works right – things that give it life when it is most alive, effective, successful, and connected in healthy ways to its stakeholders and communities. AI begins by identifying what is positive and connecting to it in ways that heighten energy and vision for change.' *(Cooperrider, Whitney and Stavros, 2003)* It encourages organisations to identify what is working well and then seeks to broaden this successful approach to other tasks that may not be performed as well by the organisation.

This is based on the premise that organisations change in the direction in which they inquire. Therefore organisations who inquire into problems will keep finding problems, but an organisation which attempts to appreciate what is best in itself will discover more and more that is good. These discoveries can then help to build a new future where the best becomes the norm *(Seel, 2008)*.

The attached self audit tool encourages organisations to look at what is working well in their service and how this experience can be broadened to other areas of operation.

Tip

In promoting a shift in culture the following approaches are critical:

- *modelling positive behaviour*

- *having a mind-set that is positive and solutions orientated*

- *being proactive*

- *challenging negative behaviours displayed by others.*

(Simpson, 2008b)

Thought

Useful questions to ask are:

- *What is it about your organisation – its structure, values, systems, processes, policies, staff, leaders, strategy – that creates the conditions where receiving complaints can flourish?*

- *Are staff confident in dealing with complaints?*

- *How does the culture of the organisation foster an environment where it is seen as being OK to complain?*

- *What does the organisation do really well and how can this be applied to managing complaints?*

- *Tell a story about a complaint you received recently that resulted in a positive outcome for the person who made the complaint and also led to an improvement in the service for others.*

3.7. Use of appreciative inquiry approach to complaints

A common reaction to receiving a complaint can be defensiveness. It is often perceived as a criticism of the service rather than being seen as an opportunity to improve. A critical aspect of responding to and learning from a complaint is the extent to which you look for what you are doing well and then seek to do more of this, rather than focusing exclusively on what is not working and how to fix it.

Chapter 4

The experience of people with disability and complaint resolution processes

Chapter 4
The experience of people with disability and complaint resolution processes

John's story

John lives in a group home. He was very unhappy and wanted to complain about the fact that he never had any opportunities to make choices about what went on in the house. He felt like he wasn't listened to and gave examples of how his individual support arrangements were changed to suit the house's staff roster without first discussing it with him. He felt that the meals were not healthy or big enough and often the staff would drink coffee in their area and talk about him rather than with him.

John was concerned about contacting his service provider as he didn't want the staff in the house to know he was complaining. He thought they would be upset with him and would treat him badly.

Previously when he had told staff he wasn't happy he felt like they didn't want to listen and told him that things were done in that way to suit everyone in the house. He contacted an advocacy service, telling them that he didn't have anywhere else to live. He wondered if things would get worse if he made a complaint.

As a result of working with the advocacy service John was able to voice his concerns and he and the advocate were able to ask the service provider to respond to the concerns raised by John.

Overseas research suggests less than 4% of people who are dissatisfied with a service bother to complain. Businesses will not hear from 96% of the people who are unhappy with their service. For every complaint received the average company has 26 customers with problems and six with serious problems *(SAI Global and Neill Buck, 2008)*. Local research suggests Australians are more likely to complain about serious service difficulties. However, the majority don't complain, preferring not to say anything and just vote with their feet if there is an alternative source, which is not always possible with disability services. Whilst most complaints can be addressed quickly, if they are not handled well, the person's dissatisfaction can fester, making further contacts difficult and the relationship strained.

Many complaints reflect this tense or difficult relationship between the organisation and the person with disability and their family. Often the central issue is poor communication. In some instances the relationship deteriorated because there was nowhere independent for these complaints to be taken.

Research shows that problems arising from poor service and ineffective communication account for up to one-third of an organisation's total workload *(NSW Ombudsman, 2007)*. It is widely acknowledged that dissatisfied customers will talk badly about an organisation and tell many more people than potentially satisfied customers. Whilst there is limited data on the experience of people using disability services, research in business and other areas indicates that dissatisfied customers tell eight to ten people on average. Satisfied customers will tell four or five people *(SAI Global and Neill Buck, 2008)*. Complaints which are not swiftly resolved can generate significant additional workload for an organisation. However, people who have experienced service recovery tend to be at least as loyal and supportive as those who have never experienced a problem *(NSW Ombudsman, 2007)*.

I WANT TO COMPLAIN ABOUT THIS SERVICE'S POOR COMMUNICATION!!

WHAT?

PLEASE MAKE YOUR COMPLAINT FROM HERE

GOLDING

Feedback from people with disability and their families suggest there are a number of reasons why people may not complain about the disability supports they receive including:

- fear of retribution or withdrawal of service for making a complaint

- not being aware of their right to complain

- not wanting to be seen as a 'troublemaker'

- concern about how it will affect their relationship with the service provider

- a lack of information about the process for making a complaint

- previous negative experiences associated with having tried to make a complaint.

These fears and issues, combined with high levels of unmet need and a lack of alternative service options, are often a strong motivation for people with disability and their families to put up with poor service rather than complain. This can be further complicated in regional areas where there may only be one service provider operating in the area.

Thought

How often have improvements in your service resulted from your experience with complaints?

According to Goodman-Delahunty (2004), the following factors affecting frequency of complaints needs to be considered by organisations when developing, putting into practice and assessing their complaints resolution process:

- people wanting to make a complaint may not be aware of the process

- the complaints process may not be readily accessible

- if a person who has made a complaint has had a negative experience in the past, they may fear unpleasant or unfavourable treatment by the service provider when lodging a current complaint.

Whilst organisations may believe that they have sound complaints resolution processes in place it is important to ascertain the views of people using services in order to confirm that this is the case.

Thought

What do people who use your service think about your complaints system?

How do you know?

Tip

Put yourself in the shoes of people using your services.

If you were using your own service and wishing to lodge a complaint, how would you find out:

- *where to make the complaint*

- *how to make a complaint*

- *how long will it take before you hear anything*

- *what is happening to the complaint*

- *what you should do next*

- *who else you could complain to, and*

- *what assistance you could get to lodge your complaint?*

Chapter 5

What you need to consider in having an effective process for resolving complaints

Chapter 5

What you need to consider in having an effective process for resolving complaints

5.1. State legislative and contractual requirements and context

When reviewing or developing a complaints resolution process, any organisation needs to consider the legislative, regulatory and contractual framework in which it operates. If the organisation is a funded disability support provider in Tasmania, there are a number of legislative and contractual requirements that must be complied with.

Firstly, the *Disability Services Act 2011* contains regulations (the regulations) that set the standards for funded disability support providers on things like: the rights of consumers; participation and inclusion; individual outcomes; feedback and complaints; services access and services management.

The regulations set the standards for feedback and complaints. There is a requirement for funded disability service providers to, wherever possible:

- seek regular feedback on the services, support and programs provided; and

- use the feedback to review and improve those services, supports and programs

Contractually, funded disability providers are required to develop and implement guidelines and procedures for receiving feedback and resolving complaints from consumers. They also need to advise consumers of any procedures available for feedback and complaints in relation to delivery of the services.

Funded providers also need to comply with all Departmental policies in place for the management of complaints. These include:

- Disability and Community Services Compliments and Complaints Procedure (2015)

- Preventing and Responding to Abuse in Services Funded by Disability Services policy P2010/1102-001 and Procedure P2012/0177-014.

There are a number of international and national commitments and reforms that also need to be considered. These are:

United Nations Convention on the Rights of Persons with Disabilities

The Convention on the Rights of Persons with Disabilities is an international human rights treaty of the United Nations intended to protect the rights and dignity of persons with disabilities. Parties to the Convention are required to promote, protect, and ensure the full enjoyment of human rights by persons with disabilities and ensure that they enjoy full equality under the law.

National Disability Strategy 2010–2020

This strategy outlines a 10 year national policy framework to guide government activity across six key outcome areas and driving future reforms. It represents a commitment by all levels of government, industry and the community to a unified, national approach to policy and program development. This approach will assist in addressing the challenges faced by people with disability, both now and into the future.

National Disability Agreement

This agreement reflects a strong financial and planning commitment from both levels of government to provide more opportunities for people with disability to participate in and enjoy Australia's economic and social life. The agreement is designed specifically to assist people with disability to live as independently as possible, by helping them to establish stable and sustainable living arrangements, increasing their choices, and improving their health and wellbeing. At the same time the agreement focuses on supporting families and carers in their caring roles.

National Disability Insurance Scheme (NDIS)

The roll-out of the NDIS throughout Australia marks a new way of providing individualised and community support for people with permanent and significant disability, their families and carers. The NDIS will continue to have a significant impact on the future delivery of disability support services in Tasmania. It will provide control, choice and certainty around the supports a person with disability will access over their lifetime.

During 2013 to 2016 Tasmania trialled the NDIS for people in the 15-24 age group. As at 31 March 2016 there were 1135 participants with funded and approved plans in Tasmania. The roll-out to full scheme will see the scheme expand to include people aged 12-14 from 1 July 2016. People aged 25-28 will start transitioning from 1 January 2017. It is expected 1117 people in the 12-14 and 25-28 age groups will move into the NDIS during the 2016–2017 financial year with around 10 600 Tasmanians in the NDIS by 30 June 2019.

National Reforms in Aged Care

The Australian Government has responsibility for creating and maintaining a nationally consistent aged care system. Under the Bilateral Agreement for transition to the NDIS, responsibility for people aged 65 and over who receive specialist disability services will transfer to the Australian Government.

Home and Community Care (HACC) aged care services will also transfer to the Australian Government.

Tip

Assessing the human rights impact of resolving complaints.

The checklist below offers a guide to key considerations your organisation should consider when seeking to resolve complaints:

1. *What is the resolution seeking to achieve?*

2. *Does the proposed resolution raise any human rights issues?*

3. *Are any human rights limited by the proposed resolution?*

4. *What is the nature of the rights being limited?*

5. *How are rights likely to be limited and to what degree?*

6. *How important is it to limit rights to achieve the resolution?*

7. *Does limiting human rights achieve the resolution?*

8. *Are there any other less restrictive ways to achieve the resolution?*

    (Department of Human Services, Process for analysing policies and practice, 2007c)

5.2. International and Australian standards of complaint handling

Australian and International standards have been developed which provide useful guidance on the development and implementation of an effective and efficient complaints handling process. These standards recognise that effective complaints handling can result in service improvements, as well as improving the reputation of an organisation.

The International standard highlights the following key elements, which are also reflected in the Australian standard:

- enhancing the satisfaction of people using your service by creating a person centred environment that is open to feedback, resolving any complaints received, and enhancing the organisation's ability to improve its service.

- executive leadership group involvement and commitment through adequate acquisition and use of resources, including staff training

- recognising and responding to the needs and expectations of people using services

- providing people using services with an open, effective and easy to use complaints process

- analysing and evaluating complaints in order to improve the service quality

- auditing the complaints handling process

- reviewing the effectiveness and efficiency of the complaints handling process.

In summary, an effective and efficient complaints resolution process is critical to having a high quality service. What this translates into for people using services and service providers can be summed up as follows.

What people using services want

- a process where it is easy to make a complaint

- a service that is responsive to their needs

- to be heard

- to be understood

- to be respected

- an explanation

- an apology

- action as soon as possible

- a user friendly complaints system.

An organisation needs

- a user friendly system for receiving feedback from people using services that is easy for staff to use as well

- clear delegations and procedures for staff to deal with complaints and provide remedies

- clear internal and external referral procedures if the complaint is not resolved at the front line

- a recording system to capture complaint feedback/ data

- performance standards including timeframes for response and quality of response

- systematic review of complaint data to identify problem areas and analyse trends

- action to improve service delivery in identified areas.

(Adapted from NSW Ombudsman, 2007)

Chapter 6
Role of boards of management

Chapter 6
Role of boards of management

As stated in the National Disability Service (2008) guide for boards of management of disability service providers, the role of boards is to be responsible for:

…ensuring that their organisations are effective, sustainable, responsive and capable of delivering high quality services. Boards are also responsible for ensuring their organisation's compliance with relevant legislation and funding requirements.

Boards may need to lead and support their organisation through changes to the way services are provided, to ensure that they are flexible and targeted to the individual needs of people with disability, and compliant with the principles and provisions of relevant legislation.

In reviewing or developing a complaint resolution process in organisations which have a committee or board of management (BOM), it is important to be clear on the role performed by the board as distinct from the Chief Executive Officer. Boards of management should make sure that their organisation has sound internal processes for managing complaints, but not actually be part of that process.

Members of boards and executive leadership groups can sometimes be confused by the reference to management. In some organisations the term 'board of governance' is used to make explicit the focus on governance level issues rather than operational management *(Victorian Healthcare Association, 1995)*. However, it is important that disability support providers understand the differences between the two terms.

The main aim of a board of management group is to govern the overall operations of the organisation to ensure it operates in a proper and effective manner. This should not be confused with the day-to-day management of the organisation, which is usually carried out by the senior paid staff member *(Victorian Council of Social Services (VCOSS), 2007)*. It may be useful to consider the application of the doughnut approach described later (see Chapter 8) for both the board and executive leadership group so that there can be greater clarity about respective areas of responsibility.

In relation to community service organisations:

Governance means:

- to oversee and monitor

- to provide leadership and direction

- to accept ultimate responsibility for the overall organisation.

Management means:

- (executive leadership group) to undertake the day-to-day tasks and responsibilities for the operations of the organisation according to the policies and standards laid down by the governance body (this usually includes administration, programming, volunteer supervision etc).

Where an organisation has a paid coordinator, manager or executive officer, the responsibility for 'managing' the day-to day responsibilities usually rests with that person. However, it is the job of the executive leadership group to appoint the appropriate staff for this position and to provide adequate support, direction, policies and procedures to enable them to work effectively.

It is equally important that the executive leadership group adopt an attitude of trust and confidence in staff, so they can 'get on with the job at hand' in a spirit of goodwill and confidence *(VCOSS, 2007)*.
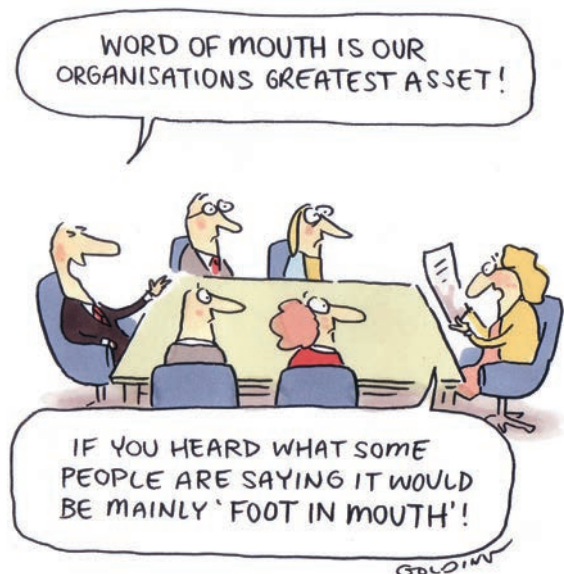
6.1. Role of the board of management in relation to complaints

In this context the responsibility for managing complaints rests with staff, while the board of management (BOM) has responsibility for ensuring the organisation has developed appropriate policies and procedures for managing complaints effectively and in a way which is consistent with the organisation's obligations. The BOM also has responsibility for monitoring any service improvements flagged in aggregated complaints data.

Thought

- *Are the people using your service, and their families and carers, provided with information about how to make a complaint?*

- *Are they informed about where they can take their complaint if they are not satisfied with your organisation's management of the issue?*

- *Are you confident that the people using your services and staff are not adversely affected if they make a complaint?*

- *Does your board regularly consider trends or issues emerging through complaints and use these to identify potential areas for service improvement?*

(National Disability Services, 2008b: 22)

Chapter 7
Key elements to an effective person centred complaints resolution process

WE'VE BEEN FOLLOWING YOUR COMPLAINT VERY CLOSELY... FIRST THERE WAS YOUR COMPLAINT... THEN A COMPLAINT ABOUT THE COMPLAINT PROCESS... & FINALLY A COMPLAINT ABOUT THE COMPLAINT OUTCOME... WE'RE VERY THOROUGH!

Chapter 7

Key elements to an effective person centred complaints resolution process

An effective complaints resolution process is one that is fully integrated into a comprehensive quality management system. This includes policies, procedures and guidelines for receiving, recording, processing, responding to and reporting on complaints, as well as how complaints improve services and impact decision-making. The system should provide clarity on the complaints process as well as informing people using the services of the organisation's commitment to using complaints to continually improve the service.

Figure 1: Key elements of an effective person centred complaints resolution process and culture.
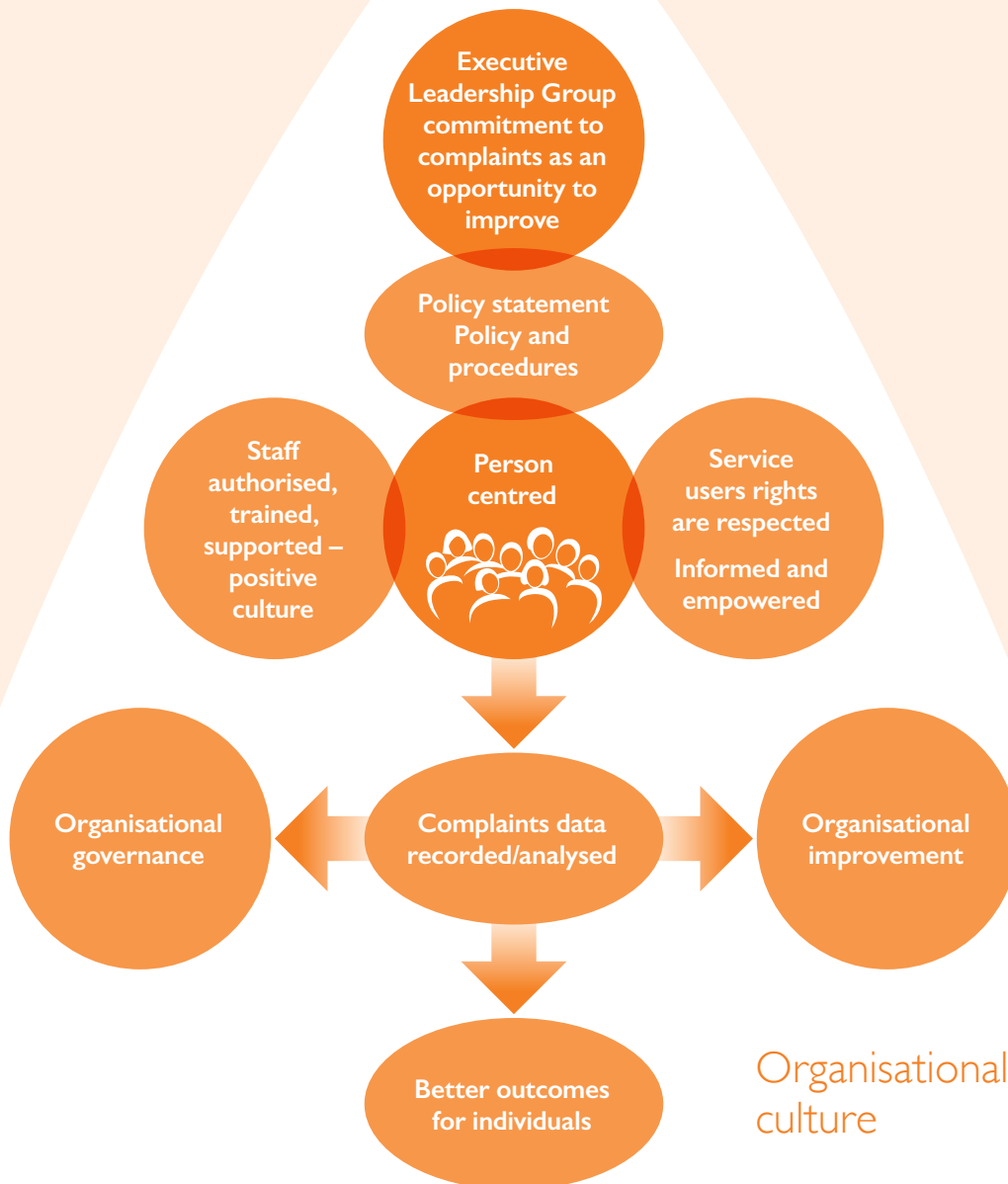
7.1. How to organise an effective complaints resolution process

This section will focus on the more structural elements of an effective complaints resolution process. However, it is important to remember that a good complaints resolution process is equally reliant on having a strong culture which sees complaints as a positive and important part of service provision. In a sense, having a complaints process is acknowledging that, by the very nature of service provision, you will not always get it right. Having a sound complaints process and culture ensures that your organisation is in a strong position to learn from those situations where people are not satisfied with the service they receive, and value you enough to tell you so.

7.2. Key principles that inform effective complaints resolution processes

To ensure an effective complaints resolution process, check your approach covers the following key principles:

Accessible – you are accessible to people with disability and other key stakeholders through clear and effective communication that is easy to use and understand. You provide clear information about the right to complain, how to complain, where to complain and how complaints will be handled.

Person centred – you respect and value the knowledge, abilities and experience of people with disability and support them to make choices about their lives to enable each person to live the life they want to live. You take actions that seek to achieve the best possible outcomes for people with disability.

Responsive – you provide timely assistance to people with disability, their families, carers and advocates. You keep people informed of the progress of complaints with the emphasis on addressing the issue within established timeframes.

Accountable – You work to clear objectives in a transparent manner accepting responsibility for decisions made, being open to appropriate levels of scrutiny and ensuring all conflicts of interest are disclosed and acted upon.

Excellence – You continually seek ways to improve how you do things and promote a learning culture in your organisation that ensures that complaints are vital to continuous improvement.

The self audit tool provided at the end of this guide has been organised under these various principles, and can assist you to identify what you currently have and what you may need to develop.

7.2.1. Accessible

People who use the service know how to make a complaint. There is easy to understand information in accessible formats on the complaints process, and different ways to make a complaint. People can get support to make a complaint if they need it.

This is about letting people know the complaint process you have and where they can access it, as well as ensuring that people are able to complain. For example:

- are there posters, brochures and information in accessible formats on your website that explain how people can complain?
- are all staff aware of the organisation's commitment to and processes for handling complaints?
- are there flexible methods for making a complaint?
- is the complaints handling process easy to use and understand?

7.2.2. Person centred

The process used to respond to complaints ensures the perspective of the person with disability is heard and considered in how the matter is resolved. People are treated respectfully, courteously and sensitively. This includes treating information confidentially.

The complaints process is sufficiently flexible to respond to individual needs and consider what is important to the person using the service, as distinct from what is important for them.

- is your organisation seen by staff and people using services as being open to feedback, including complaints?
- do you show commitment to resolving complaints through your actions?
- are you sufficiently flexible in the way you respond to complaints?
- is there a clear set of published values of the organisation and its role?
- are the executive leadership group and staff actively seen to be implementing the values? i.e. 'walking the talk'.

7.2.3. Responsive

There is a clear process for ensuring that complaints are handled in a timely way and people are kept informed of the progress of their complaint. Part of being responsive is recognising this as an opportunity to maintain/improve the relationship between the provider and the person with disability. A key part of being responsive is ensuring that staff are empowered to respond to complaints quickly and fairly.

This is about responding to the complaint in a timely, non-judgemental and respectful way. For example:

- is the receipt of each complaint acknowledged to the person who made the complaint immediately?

- are challenging but realistic time frames set and clearly communicated to staff and people using services for handling complaints?

- are people who have made a complaint kept informed of the progress of their complaint?

7.2.4. Accountable

Your process for resolving complaints is clearly outlined so people know what to expect. You approach each complaint reasonably, objectively and act in good faith. People are informed of the decision in relation to their complaint. There is a clear process of review and appeal in relation to complaint decisions. The principles of natural justice are applied to the investigation of complaints. The service provider has clear processes to ensure that people who complain are not adversely affected.

This is about the process you use being objective, fair and consistent. For example:

- is equal weight given to the views of all?

- are all complaints considered on their merits?

- is the emphasis on resolving the issue and not assigning blame?

- where necessary, is it dealt with by a person not connected to the complaint?

- are there reporting processes on complaints and improvement initiatives?

- where systemic problems are identified, do the relevant people report back on the implementation of corrective remedial action?

- is personally identifiable information concerning the person who made the complaint only available for the purpose of addressing the complaint within the organisation and actively protected from disclosure?

7.2.5. Excellence

The complaints resolution process is part of a quality culture which sees complaints as an opportunity for improvement. Information is collected from complaints and provided to those who can take operational and policy decisions on improving the service.

This is about seeking to continually improve the quality of the service through effective complaints resolution processes. For example:

- do you regularly review the system and complaints data?

- do you explore, identify and apply best practice in complaints handling?

- do you foster a focus on the person using the service within the organisation?

- do you encourage/reward innovation in complaints-handling behaviour?

- do you seek feedback from people who have made a complaint on their experience with your complaint system?

(Slater, 2008)

Today's problems cannot be solved if we still think the way we did when we created them.

Albert Einstein

I REALLY THINK WE COULD COMMUNICATE BETTER IF WE DID IT FACE TO FACE!

GOLDING

7.3. Importance of a three tiered complaints resolution process

Experience from organisations that have effective complaint processes suggest that a three-tiered approach to complaints resolution is the most effective (NSW Ombudsman, 2007). In reviewing the complaints process your service currently uses it is useful to consider the extent to which the process operates on the following three tiers:

Tier 1: Frontline complaints resolution

At this level staff are empowered with clear delegations to resolve complaints wherever possible at first contact and log complaints into the system for later analysis. The aim should be to resolve most complaints at this level, as the potential for a growing level of dissatisfaction with the service steadily increases at each point of escalation. To achieve this, a number of strategies need to be in place:

- an easily understood procedure for people to provide feedback to the organisation

- clear delegations to staff that define their responsibility for dealing with complaints and their ability to remedy problems

- staff who are skilled, motivated and empowered to be sensitive to and welcome complaints feedback

- training for staff about the process and the skills of listening, problem solving and conflict resolution

- procedures for resolving and investigating complaints

- performance standards for complaint resolution such as turn around times, progress reports to people making the complaint

- control systems to make sure complaints are dealt with

- database for capturing complaints feedback data to assist trend analysis and service improvement planning.

Tier 2: Internal review or investigation

Where complaints cannot be resolved at the first tier, then more senior staff should review/investigate the issues and assist in the resolution of unresolved complaints. It is important that the principles of natural justice are adhered to in this process.

Tier 3: External complaint resolution options

Information on external options for resolving complaints should also be provided to people who have made a complaint, particularly when a complaint cannot be resolved through the above processes. During NDIS transition, these external options include:

- advice and/or complaint resolution from Disability and Community Services as per the Disability and Community Services Compliments and Complaints Procedure which can be downloaded from www.dhhs.tas.gov.au/disability/compliment_and_complaints

- referral to other external and/or universal complaints or dispute resolution systems and bodies, depending on the subject of the complaint

- other resolution options such as mediation or legal remedy.

Responding to complaints is part of the NDIS Quality and Safeguarding Framework released by the Australian Government in February 2017. www.dss.gov.au/ndisqualitysafeguards The Framework requires that at full scheme, registered providers should have effective internal complaints and serious incidents arrangements in place. Requirements will be proportional to the size of provider and the risks inherent within their service model. However, during transition existing jurisdiction quality and safety mechanisms will remain in place to ensure the provision of good quality supports.

In Tasmania, this is the Quality and Safeguards Working Arrangements which can be accessed www.dhhs.tas.gov.au/disability/national_disability_insurance_scheme/quality_and_safeguards

A new national independent regulatory body, the NDIS Quality and Safeguards Commission will be established to implement the Framework. It will commence on 1 January 2018 replacing the various quality and safeguarding arrangements in jurisdictions as they reach fulll scheme. In Tasmania, this means the Commission will begin to deal with complaints about NDIS supports from 1 July 2019.

The Australian Standard on Complaint Handling highlights the importance of seeking to resolve complaints at the lowest possible level/tier.

Whilst a complaint resolution process should have these tiers, it cannot be a requirement that people wishing to make a complaint must adhere to an organisation's complaints process. It is the right of people who are making a complaint to seek the most appropriate resolution to the issue. Consequently, if for whatever reason they feel they are not being heard or are not comfortable with the suggested process, they may choose to seek external review earlier or indeed skip the front line tier and go to either the internal review tier or an external complaints process immediately. This will often be prompted by such considerations as level of risk and degree of trust people have with the organisation.

7.3.1. Shared staff responsibility

If you wonder what getting and keeping the right employees has to do with getting and keeping the right customers, the answer is everything.

Frederick Reichheld (2006)

Internally, staff at various levels in the organisation will have responsibilities associated with complaints resolution. These could include:

- an executive advocate who leads by modelling or walking the talk

- responsible staff who practise what is preached at the policy/procedures level; encourage positive attitude/ reinforce benefits of proactive complaints mindset, as distinct from being driven by compliance alone

- other staff who practise what is preached at the policy/procedure level and:
  – are receptive to complaints
  – welcome feedback on the organisation's service delivery
  – are skilled listeners
  – have sound interpersonal skills
  – are problem solvers and adept at conflict resolution.

(Queensland Ombudsman, 2008: 45)

Tips

- *Train staff to view complaints positively.*

- *Invent new ways for people using services to give feedback.*

- *Randomly ask for feedback.*

- *Ask for value ratings when seeking feedback on forms .e.g. OK, easy, good.*

- *Mix with the people you provide a service to so as to provide informal opportunities to receive this feedback.*

- *Create a staff feedback form to capture staff feedback on the complaints process.*

7.3.2. Indicators of a good complaints culture

- All staff are aware of the importance of complaints and care about the service people receive

- All staff are aware of the policy and procedure because they were involved in its development

- People using services know that they have the right to complain, are supported to complain and know how to complain because they were involved in the development and ongoing review of the complaints resolution process

- Procedures are routinely followed by staff

- Organisation leadership receives and acts on complaints data

- People using services complain.

(Adapted from Queensland Ombudsman, 2008:39)

7.3.3. Use of a risk management approach

Risk management is one way of identifying priority areas that an organisation is most likely to receive complaints about. From an understanding of the purpose of the organisation risks can be identified and analysed in order to determine:

1. What complaints have and could arise

2. What has been or could be the consequences of such complaints

3. What has been done and could be done to prevent these complaints?

This approach can be useful in deciding which complaints your organisation would prefer managers to respond to based on the level of risk to people using services, or indeed the reputation of the organisation, if not handled well.

7.4. Indicators of an effective complaints resolution process

An effective complaints resolution process will pass three key tests:

1. It will listen to people and understand why they are unhappy with the service

2. It will help resolve people using services' dissatisfaction about the service they receive

3. Data will be collected and analysed to assist the organisation to identify problems and change procedures to prevent similar dissatisfactions and complaints in the future.

In order to pass these key tests your complaints resolution process would have the following qualities:

1. Your complaint resolution process should complement and reflect your service's vision, mission, principles and values. It should show how you relate to the people using your service, and should be integral to your operations rather than a 'nice to have' add on. This philosophy should be clearly communicated to all staff and people using services.

   Policies and procedures must be developed with involvement of staff and people using services and be easy to understand, regularly reviewed and widely known.

2. The executive leadership group of the organisation should be receptive to feedback passed up the line.

3. The process for lodging complaints should be widely known and easy to use:

   a. complaints can be lodged in person, by phone, email or in writing

   b. appropriate support and formats to enable people with disability to lodge complaints

   c. easy to understand process for handling complaints.

4. Direct support staff should be empowered to handle complaints:

   a. Staff need to have clear delegation to resolve complaints. This may specify the nature of the complaints they can seek to resolve.

   b. A key staff member at direct worker level within the organisation should have responsibility for providing information and education to other workers on approaching complaints.

c. Staff should receive appropriate and ongoing training and support to be clear on how to approach complaints and to reinforce the message that complaints will not reflect badly on them but rather may identify areas for additional resourcing or training. Such training should use real life examples and offer clarity on the complaints resolution process used by the organisation.

d. Complaints are discussed in groups in a de-identified way to enable staff to learn from each other. The outcomes of complaints, particularly where this has led to service improvements, should be made known to staff as a way of reinforcing their value to the organisation.

e. The process for referring complaints that cannot be resolved at this level needs to be clearly understood.

f. Managers should be actively involved in coaching staff in complaint handling.

5. Managers must have overall responsibility for seeking to resolve complaints in their area and encourage staff to come to them with any complaints they have been unable to resolve or that raise systemic issues for the organisation. *(AS 4608-2004: 9)*

6. There should be a sound approach to complaint resolution in which:

a. the person handling the complaint is clear about the outcome the person who made the complaint is seeking as a result of bringing a complaint

b. resolution occurs within agreed timeframes as much as practicable

c. people who have made a complaint are kept informed of the progress of their complaint

d. responses are consistent and appropriate.

7. There should be a means of recording data about complaints and the time taken to resolve them, and identifying any trends and reporting these regularly to the executive leadership group as a basis for potential service improvement. This is one of the most common areas where complaint processes fail.

8. No targets should be set to reduce the number of complaints.

RESOLUTION...

I'M HAPPY TO OFFER A SINCERE APOLOGY, BUT I'D PREFER MY LABRADOR PUPPY TO EXPRESS THE EMPATHY AND UNDERSTANDING!

7.5. Complaints policy and procedures

The complaints resolution process should be supported by written policies and procedures. It should be noted that whilst clear policy and procedures are important foundations, a positive attitude that views complaints as opportunities for improvement is also required.

7.5.1. Developing a policy statement

In approaching complaints it is important to acknowledge their significance through a brief statement of policy which recognises the importance of this feedback to your organisation. The statement should state clearly and simply the organisation's commitment to receiving and responding to complaints as part of a commitment to continuously improving the service *(AS 4608–2004: 9)*. This statement should be written in a way that instils staff commitment and the confidence of people using services. This can be helped by the use of active language wherever possible and by the involvement of staff and people using services in the development of the statement so that there is a shared ownership *(Queensland Ombudsman, 2008: 11)*.

A complaints policy statement would acknowledge the importance of feedback/complaints to your organisation and include:

- a statement of principle

- recognition of the capacity to fail

- what you are going to do

- how you are going to do it

- why you think it is important.

It should be signed by the Chief Executive Officer.

Most importantly, you need to mean what you say.

7.5.2. Developing a complaints policy

Having developed a clear policy statement you then need to provide a more detailed explanation of why complaints are important to your organisation. This is distinct from your procedures, which provide the how or the specific steps your organisation will take to give effect to the policy.

A complaints policy should contain:

- reason for the policy (including benefits to the people using your services and staff)

- aims and objectives of the system

- definition of a complaint *(refer Australian Standard ISO 10002: 2006, MOD as an example)*

- guiding principles (these could include the principles mentioned previously), such as:
  – person centred focus – people who use our services are valuable and the heart of our business
  – complaints are an opportunity, not a nuisance
  – people who use our services will be helped and supported to make complaints
  – resolution will be provided wherever possible
  – principles of natural justice

- confidentiality of complaint information

- safeguards against retribution

- reporting and review obligations.

✔ Tips

Listed below are some examples of policy statements from a number of different organisations:

- *All management and staff at … are committed to providing an organisation and workplace where people feel free to speak about any problems or concerns that they may have.*

- *We recognise we provide a personal service. In the event service expectations are not met, we will conduct a prompt investigation to resolve the issues and maintain communication with you. Feedback allows us to constantly improve our service to you.*

- *We believe all feedback is great feedback. We are committed to delivering outstanding service and acknowledge we are not always perfect (yet!). One of our team members will call you within 24 hours, because without you, we have no business.*

- *At … we are committed to providing people using our services with a better level of service. If we make a mistake, or our service doesn't meet your expectations, we want to know. Most likely we'll be able to solve the problem on the spot. If it can't be resolved in 48 hours, your concern will be referred to more senior staff within our organisation who will take responsibility for the matter. We'll send you a letter to acknowledge your complaint and let you know how long we expect it will take to resolve. We aim to resolve all complaints from people using our services within ten working days.*

- *This organisation is committed to ensuring simple, flexible and accessible arrangements for people who use this service to complain. All staff can respond to complaints and people who have made a complaint will be given regular updates on the progress of their complaint.*

Concepts you may wish to include in your policy

(a) Privacy

Privacy applies to personal information and requires that reasonable steps are taken to protect this information from loss, unauthorised access, use, unauthorised disclosure or any other misuse during a complaints process.

(b) Confidentiality

While there is some similarity between privacy and confidentiality they are not the same. Confidentiality is imposed to protect information, and the information does not have to be of a personal nature. A person given an assurance of confidentiality is being told that the organisation will put controls around how and when certain information will be used within the organisation and/or disclosed to an outside agency or person.

(c) Natural justice

Natural justice means providing a person who may be affected by a decision about a complaint with a fair hearing before the decision is made. There are essentially three elements to natural justice:

The notice requirement – any person likely to be affected by a decision should be given notice of the issues and relevant information.

The fair hearing rule – the person should be given a reasonable opportunity to respond to the issues/information, and the decision maker needs to be able to show that they have given genuine consideration to the affected person's submission.

The lack of bias rule – the person making the decision must act impartially (without bias) in considering the complaint. Bias could arise if the decision maker has some financial or other personal interest in the outcome or has given the impression that they have prejudged the decision ahead of time.

(Queensland Ombudsman, 2008: 12)

(d) Staff awareness

There is little value in having a complaints resolution process if staff are not aware of it or are unsure of how to use it. Your policy should therefore reflect that staff are thoroughly trained in the application of your complaints policy and relevant procedures.

(e) Delays

Obviously complaints need to be dealt with quickly, effectively and appropriately, and the time frames should reflect this. However it is also acknowledged that complaints may range in seriousness and complexity, which can cause delays.

Tip

In writing your policy try to choose active language wherever possible so that it helps to instil staff commitment and public confidence.

(f) Audience

You should consider such things as complexity of language, writing style, content and formatting as well as being sufficiently succinct for your audience.

Tip

Avoid getting bogged down in the detail. Remember that your policy is only one component of your overall complaints resolution process, and its purpose is unique.

7.5.3. Developing a complaints handling procedure

Your procedures should identify the steps needed to handle complaints – the 'how' of managing the complaints resolution process. The procedures should explain how the principles contained in the policy statement and how the policy will be put into practice.

Complaint procedures should contain:

- how complaints can be made (verbal, written, email, anonymous etc)
- how feedback from people using services will be sought
- who is responsible for taking, recording, resolving and analysing complaints
- how complaints and outcomes will be recorded
- time frames for resolution, and guidance on what happens if these are not met (you may need different
- turn-around times and priorities for urgent and complex complaints)
- forms of redress, including delegation levels

- procedure for closure of files – closure process should include seeking feedback from the person who made the complaint on their experience of the process

- process for dealing with serious issues raised by complaint, e.g. criminal charge, risk to health etc.

- review mechanisms if the person who made the complaint is not satisfied

- internal reporting and review mechanisms.

7.6 Features of effective responses to complaints

Complaints are more likely to be resolved, if the organisation's response pays attention to the four key things that people commonly seek when they make a complaint – the 'four A's.

7.6.1 Acknowledgement

In many respects this first step is the most important of the 'four A's' as it often sets the tone for the rest of the process. Having stepped out of their comfort zone to make a complaint, people want to feel that you've understood their concern and how the situation has affected them.

There is no perfect way to give a positive and respectful acknowledgement in all situations but some basic steps that can help include the five step 'LEARN' process:

Listen
Genuinely listen to the concerns of the person without interruption. Look for the positive intention behind the person's issue and behaviour.

Empathise
Use your body language and/or voice to create an environment where the person can feel comfortable talking with you. Be conscious of whether you are feeling defensive and how this can be perceived.

Acknowledge
Acknowledge how the situation has affected the person who made the complaint. Acknowledge where the service response was not the best.

Rectify
Ask the complainant what a good outcome would look like for them. Take steps to rectify the problem.

Notify
Notify the person promptly and regularly of the steps you have taken, or will take, in response to their complaint but don't commit to things you can't do.

> **Thought**
>
> *A good acknowledgement delivered with respect, the right body language and tone will indicate to the person that you are not about to oppose them and that you see their feelings as legitimate. Acknowledgement is about validating emotions.*

7.6.2 Answers

People want to know why something has or has not happened or why a decision was made. This is important to their ability to understand and process what has happened and to move on to resolving their concern.

Answers should include details of the event / decision relevant to the concern raised.

Answers should also provide information about organisational processes for further information gathering and communication.

7.6.3 Actions

People want you to fix or at least take steps to address their concerns.

Sometimes you may not be able to fix the concern raised but may be able to initiate actions that will assist in preventing it occurring again. This can be just as important to the person as it validates their concern.

It's a good idea to agree to an action plan with the person who raised the complaint. The plan should include things like:

- What will be done?
- Who will do it and when?
- How will we communicate our progress?
- How will we check that things are on track?

It's a good idea to then follow-up with the person who made the complaint to make sure they are satisfied with what action you have taken.

Thought

Actions often cannot fix the past, but they can show that the concern raised was taken seriously and offer reassurance that the issue is less likely to happen again.

7.6.4 Apology

An apology can either be part or the whole of the outcome people seek when they make a complaint.

Careful consideration should be given to who might give any apology and what form it should take. Whilst a genuine apology can be an important step in resolving a complaint, a poorly given apology can actually make the situation worse.

Some of the key elements of a 'good' apology are:

- Timeliness
- Sincerity
- Being specific and to the point
- Accepting responsibility for what occurred and the impacts caused
- Explaining the circumstances and causes (without making excuses)
- Summarising key actions agreed to as a result of the complaint.

Thought

A genuine and timely apology is a powerful healing force and a way to separate the past from the future, to put things to rest and get on with any new arrangements agreed to.

7.6.5 Staff Training

Whilst it is important to have the 'four A's' as a core element of your organisation's complaints resolution process, in order for this to be an effective approach it is essential that staff are supported and trained to develop the range of skills required to provide these types of responses to complaints, and to work through the issues presented in complaints.

Chapter 8

Use of person centred thinking tools to resolve complaints

Chapter 8

Use of person centred thinking tools to resolve complaints

Put simply, person- centred thinking is a way of assisting people to work out what they want and the support they need, and helping them get it *(Department of Health Guidance, 2008).*

Tony's story

A father lodged a complaint with the service provider about his son Tony's day service. Tony has an intellectual disability and autism. His father complained that the day service program wasn't meeting Tony's needs, because it lacked structure and routine. He complained that Tony wanted to learn how to handle money and how to read and that the service wasn't supporting Tony to develop these skills.

When Tony's father raised this with the service they explained that people using the service voted on the types of activities they wanted and that Tony enjoyed the various social and recreational activities offered. They didn't feel that Tony wanted or needed the type of program suggested by his father.

As Tony's father felt the issue had not been resolved to his satisfaction, he contacted the DCS Community Partnership Team for assistance. The Community Partnership Team contacted the service provider asking about Tony's support plan and whether people knew what was important to Tony– in terms of what he enjoyed doing and what was a good day for him? What activities were offered that reflected what was important to Tony, compared to the group as a whole?

Tony's father, Tony and the service provider were able to identify things that were working well for him in the program, for example which of the social activities he enjoyed and which he did not. Tony's father put forward that Tony was often stressed and anxious about going to the day service. The service provider and Tony agreed that this could be because Tony needed more predictability and routine in his day. The service provider also learned from Tony's father that Tony had been able to count money and had learnt to read signs in his previous program. He appeared to have lost some of these skills and was now less confident when going out and shopping. Tony particularly liked going to milk bars, and being able to choose and pay for snacks. The service provider hadn't realised this and talked about how they could develop a program with a regular routine of Tony going to a nearby milk bar and working out his money to pay for snacks.

Through taking a person centred approach to the complaint, the service provider agreed to work with Tony and his father to develop a support plan that reflected a balance of what was important to, and important for, Tony in their program. The program was individualised to meet Tony's needs and goals.

Person centred thinking provides an opportunity to broaden the understanding of what quality of life means for each person and what good quality human service practice is for each individual. The particular challenges are to make this goal a reality with limited time and resources.

Success therefore requires 'new' skills and a critical look at existing roles. These 'new' skills are referred to as person centred thinking skills. 'New' does not mean these skills are not currently practised by many people, rather that they are not yet systematically taught to people in the context of their day to day work. The skills referred to are ones that will help providers to have better information on which to base their response to a complaint.

Person centred planning has now been in use for 20 years and research has found its application does make a difference to the quality of life people experience. Research from the UK found that:

Very little change was apparent in people's lives prior to the introduction of person centred planning. After the introduction of person centred planning, significant positive changes were found in the areas of: social networks; contact with family; contact with friends; community based activities; scheduled day activities; and levels of choice.

(Robertson et al, 2005)

Whilst this is significant, experience has also shown it is not the mere presence of a person centred plan that makes the difference. The factors that make the difference include:

- the degree of learning that occurred as a result of the plan

- the commitment of people around the person to implement what is learned

- the knowledgeable support of those with power and authority.

(Robertson et al, 2005)

Therefore, whilst your organisation needs to ensure you have person- centred plans for people using your services it is equally important that in the context of complaints your staff know how to:

- engage all of the critical people in doing this work – the person, family members, carers, significant others in the person's life, and managers

- develop person centred assessments that synthesise and organise the learning so that it describes not only what is important to and important for each person but also describes the balance between them

- listen, learn and understand what is important to and important for each person when responding to a complaint, and

- see the complaint as contributing to the ongoing learning process, rather than as a one off event.

(Thompson, Kilbane and Sanderson, 2007)

Other person centred thinking skills which are useful to apply to complaint resolution are available at www.learningcommunity.us

8.1. Important to and important for

What is important to a person includes what people are expressing with their words and their behaviours. In situations where there is inconsistency between what people say and what they do, a person centred thinking approach relies on behaviour as being more likely to reflect what is important to a person. This is particularly the case when people are saying what they think others want to hear.

What is important for people includes those things that we need to keep in mind for people: what others see as important in order to help the person be healthy, safe and a valued member of their community.

One way of doing this is to list those things that are important to the person in relation to the complaint on one side, and those that are important for on the other. It is then possible to compare the two columns and see how a balance between the two aspects can best be achieved in responding to the complaint. This may also cause you to identify other things that you need to know in order to be able to respond to the complaint with a clear focus on the person using the service.

Figure 2: Important to and important for list

What is?

Important to...   Important for...

What else do you need to learn/know?

John's story

John did not like staying at home during the day as he became easily bored, and would tend to self injure. However, his parents were worried that he might be at risk out in the community. The accommodation service provider had not prevented John from leaving the house to go for a walk, and on a couple of occasions he had been returned home by the police.

John's parents complained to the disability service that they were failing to ensure John's safety in the community. In this situation it is clearly important to John to be able to come and go freely from his home at his own choosing. It is important for John to be able to be as safe as possible in the community and not self injure, as well as being able to return home.

As a result of the complaint the provider was able work with John and his parents' concerns. They developed a strategy that would enable John to freely go out into the community and they would work with John on always taking a pack with him that had food, water and his address details, as well as a mobile phone that had programmed numbers which he could ring if he got lost. Whilst the parents were still somewhat anxious about this, it was trialled over an extended period and worked.

8.2. Mindful learning: What is working/not working?

A person centred approach encourages an exploration of what is working and not working for the person. Too often complaint resolution approaches focus exclusively on what is not working, rather than also seeking to identify what is working. What the provider is doing well from the person's perspective can provide important insights into what they may need to do more of to address the complaint.

When receiving a complaint it can be useful to consider what is working and not working for the person with disability, the family and the service provider.

When reviewing your approach to complaints it can be useful to see what themes emerge from person centred plans and go through the following steps:

1. Decide what information is needed to help you review your approach to service delivery

2. Consider what assumptions you are making in deciding what information is needed

3. Collect the information from the plans

4. Group the information

5. Allocate the themes as a team

6. Look at the themes and consider what this tells you about what you need to do differently/better

7. Develop an action plan of what needs to be done by whom and when so that people can see the changes

8.3. Four plus one questions

The other useful person centred tool that can be applied to managing complaints is the four plus one questions. These questions can be used by both the provider and the person bringing the complaint. The questions are:

1. What have we tried?

2. What have we learned?

3. What are we pleased about?

4. What are we concerned about?

1. +1. What do we do next?

As with the working/not working tool, this enables elements of current practice that are going well to be captured in seeking to resolve a complaint. This approach also offers a useful reflection on what has previously been tried and what has been learned so that the approach to resolving the complaint builds on what has been learnt in the past.

8.4 Defining roles and responsibilities – the doughnut sort

Given the history of disability service provision, where sometimes overly protective approaches were taken to supporting people with disability, it can be useful to delineate what is the responsibility of the service provider and what is not. One way of doing this is to use the doughnut sort (see Figure 3). This approach asks:

• What are your core responsibilities?

• What are areas where you can exercise creativity and judgement?

• What is not your paid responsibility?

> **Thought**
>
> *Everyone needs to look at complaints as feedback and that it is positive that people are stopping to tell you how your service works or doesn't work for them. Complaints and feedback create an opportunity to review your processes and staff development and to continually learn and re-evaluate.*

Figure 3: Using the doughnut sort

These tools have been developed by The Learning Community for Person Centred Practices. For other person centred tools that can have useful application to complaint resolution, visit the following website: www.learningcommunity.us
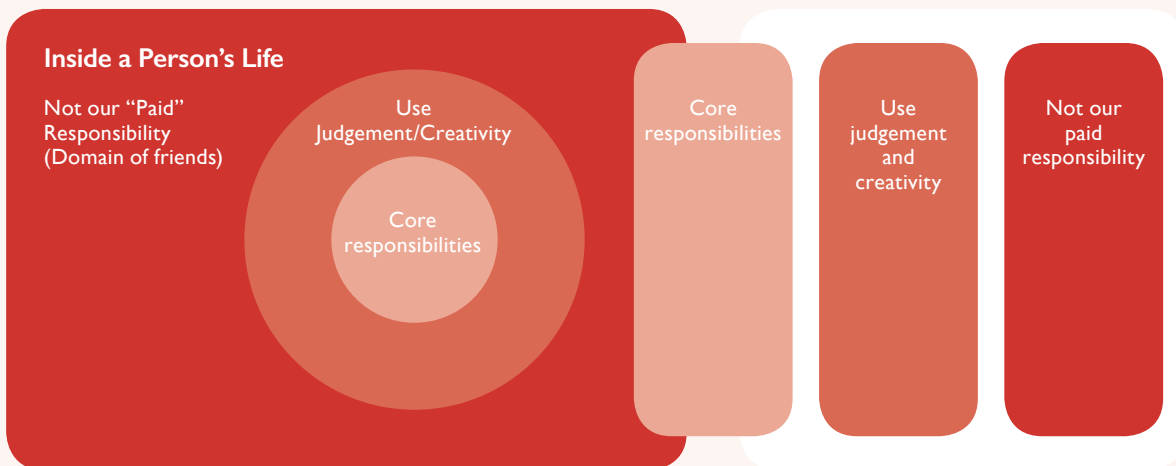
Peter's story

Peter is provided with in-home support following the death of both his parents. He has limited cooking skills and on two occasions the worker arrived to find the gas on after he had cooked something on the stove. They had previously tried delivered meals but he did not eat these, and they had learned that when he cooked the meal himself he tended to eat it. Peter took great satisfaction from having cooked the meal himself.

As the disability service could not provide a worker to support him in cooking each meal they decided to do a couple of things. The first was to change to an electric stove and make sure smoke detection and other fire safety equipment was installed and that Peter knew how to use it. Then they worked with Peter on a menu schedule and shopping twice a week, to see if he could follow the menu when the support worker was not there on alternate days. For the weekend he chose to eat meals from a local take away venue for which he had the numbers programmed into the phone and his favourite dishes highlighted on the menu.

If we consider the earlier example of John, it is the core responsibility of the service provider to provide him with appropriate accommodation and support. Where they exercised creativity and judgement was in relation to how best to support him to access the community, and they developed a strategy with John to achieve this. This did not eliminate the risks involved but did mean they had taken reasonable steps to achieve this; the provider could not be responsible for his care every hour of the day, given his desire and ability to access the community independently.

This approach can also be important as service provision becomes increasingly community based, potentially blurring the responsibilities of the service provider. Working through the doughnut gives your organisation an opportunity to clarify your core responsibilities in relation to the complaint, and where it is possible to exercise judgement and creativity. It can also help clarify those areas that are not the responsibility of the provider.

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Self Audit Tool

Person centred complaints resolution process
self audit

Self Audit Tool

Person centred complaints resolution process self audit

This self audit, will help your disability service assess the effectiveness of your current complaints handling systems and processes, and identify and implement improvements where required.

Background: relevant principles and standards

The following self audit is designed to assist Tasmanian service providers assess the extent to which they have an effective complaints system. The audit is comprehensive, covering all facets of good complaint resolution based on the Australian and International complaint handling standards. Service providers should be able to use this person centred complaints resolution process self audit to evaluate their strengths and identify areas for improvement.

The Australian Standard Complaint Handling ISO 10002–2006

Effective complaints handling can increase your community's satisfaction with services, protect their rights, make the service more person centred, inform them of the complaints process and provide efficient, fair and accessible complaint handling practices. Where complaint handling is monitored, it can improve the quality of services and the complaint resolution process. The Australian Standard for Complaint Handling, ISO 10002–2006, provides organisations with an authoritative complaint handling framework.

The Australian Standard outlines nine guiding principles for managing complaints and disputes: visibility, accessibility, responsiveness, objectivity, charges, confidentiality, customer-focused approach, accountability and continual improvement.

This self audit incorporates these principles as outlined below:

Accessible – visibility, accessibility and charges

Person centred – *customer* focused approach and confidentiality

Responsive – responsiveness and objectivity

Accountable – accountability

Excellence – continual improvement.

Outline of principles used in self audit

Accessible – People who use the service know how to make a complaint. The information on the complaints process is easy to understand and offers different ways to make a complaint. People can get support to make a complaint if they need it. There is no charge for making a complaint.

Person centred – The process used to respond to complaints ensures that the voice of the person with disability is heard and their goals and aspirations are considered in how the matter is resolved. People are treated respectfully, courteously and sensitively. This includes treating information confidentially.

Responsive – There is a clear process for ensuring complaints are acknowledged, are handled in an objective, unbiased and timely way and people are kept informed of the progress of their complaint. Part of being responsive is recognising the opportunity to maintain/ improve the relationship between the provider and the person with disability. A key part of being responsive is ensuring staff are empowered to respond to complaints quickly and fairly.

Accountable – The process for resolving complaints is clearly outlined so people know what to expect. Each complaint is approached reasonably, objectively and in good faith. People are informed of the decision in relation to their complaint. The principles of natural justice are applied to the investigation of complaints. The service provider has clear processes to ensure people who complain are not adversely affected. There is a clear process of review and appeal in relation to complaint decisions. The organisation accounts for and reports on the actions and decisions taken with respect to complaints handling.

Excellence – The complaints resolution process is part of a quality culture which sees complaints as an opportunity to improve and to move towards more person centred services. There are clear policies and procedures which ensure complaints are monitored and reviewed by those who can take operational and policy decisions on improving the service. The training and support of staff assists in creating and maintaining such a culture.

How to use the self audit

Reviewing your organisation's approach to complaints

Valuing complaints

A good complaints system is about how complaints are received and valued, how they're responded to and resolved. Equally important is how the organisation captures and learns from the experience.

A useful approach to reviewing your complaints handling is to first consider whether you value the opportunity complaints provide to improve the quality of your service. If your organisation already has a culture where staff and people using your services are actively encouraged to learn and develop from their experiences then this will not be a problem.

If complaints are not valued by the organisation then it is important to explore why. Handling complaints may be seen as not being real work, as a nuisance or a problem that people wish would just go away. If this is the case then it is important to look at why. Sometimes it can be useful to reflect on your expectations of quality service and your own experience of complaining in order to understand why there may be a difficulty in valuing complaints.

Where there is a fundamental recognition of the value of complaints to the service's capacity to improve the quality of its service then your organisation will have a culture where it is OK to complain.

How people perceive the quality of the service you provide will be a very individual experience, informed by their own expectations.

For example, *a person using your service may place particular emphasis on workers arriving on time to support them and, whilst the quality of the support provided is also important, if it does not happen in a timely way then they may not consider this to be a quality service.*

Given that what quality looks like can be different for each person using your service, it is particularly important to take a person centred approach to reviewing the quality of your service through its approach to complaints.

Approaching this task

There are five key steps to reviewing your current complaints resolution process:

Step 1: Map what is happening now

It is important to gain an understanding of what is currently happening, from various perspectives.

In order to develop a complete picture of your current approach to complaints handling it is important to involve all stakeholders in the review process. This includes people with disability, their families and carers, staff, executive leadership group and board of management. Each of these groups may offer you a different perspective on how well your current system is operating.

One way this can be approached is through a group event, where you invite all stakeholders to explore their current understanding of and experiences with the complaint system, identification of strengths and suggestions for improvement. It is important to get the views of both those who have and those who have not made a complaint, as this will offer different perspectives. It is useful to break the group up into smaller groups, which may be similar stakeholders, e.g. staff, or mixed groups.

You can also hold individual meetings, either as part of existing meetings or specifically convened meetings of particular groups to separately consider the same issues. Once this information has been analysed and summarised then it should be conveyed back to those you consulted with to make sure the different views have been properly understood.

Other approaches include surveys or hosting more informal gatherings for people with disability and families where they can express their view in a more informal environment. It may also be useful to compare your approach to complaints with a similar organisation.

Step 2: Work out what is missing

Having identified your approach to the review process, you will then need to decide on the questions to ask. A useful starting point is to consider what is and is not working in your current approach to complaints handling. It can sometimes be helpful to consider what is working and not working in the service more generally, as this may have potential implications for complaints handling. If your organisation has not had many complaints you may want to look at what is working and not working about your relationship with the people using your services and potentially how you resolve conflict.

For example, if one of the things that is working in the organisation is its ability to respond in a timely way to people requiring assistance, it would be useful to know if complaints are being responded to in an equally timely way. If they are, great; if not what, can be learnt from the service delivery, that can be applied to handling complaints?

Once you have had the broader discussion about what is working and not working, then it is useful to consider:

1. What have we tried?

2. What have we learned?

3. What are we pleased about?

4. What are we concerned about?

+1. What will we do next?

This set of questions can be applied equally to what is and what is not working.

Step 3: Agree on the priority areas for work

To assist in determining priorities it can be helpful to use the following matrix. Ask the group to consider what their initial priorities are. Then map these onto the matrix and look for ones that are high impact/low effort. Make sure there is an agreement on the priorities, based on a clear understanding of the resource and other considerations that may impact on the decisions.

Action Priority Matrix

The Action Priority Matrix is a simple diagramming technique that helps you choose which activities to prioritise (and which ones you should drop) if you want to make the most of your time and opportunities.

It's useful because most of us have many more activities on our 'wish lists' – whether these are bright ideas to pursue, exciting opportunities or interesting possibilities – than we have time available. By choosing activities intelligently, you can make the most of your time and opportunities. However by choosing badly, you can quickly bog yourself down in low-yield, time-consuming projects that close down opportunities and stop you moving forwards.

How to Use the Tool:

Figure 4: The basic form of the Action Priority Matrix

	Low	Effort	High
High	'Quick Wins'		'Major Projects'
Impact			
Low	'Fill Ins'		'Thankless Tasks'

(Mind tools, 2009)

Step 4: Develop action plans for the agreed priority areas

These plans should be short to medium term, with an emphasis on those priorities that have been designated high impact/low effort and are likely to offer immediate outcomes.

Step 5: Evaluate the outcomes to inform future plans

In developing the plans it is important to identify how you will evaluate the impact of these changes. For example, if you want to improve the timeliness with which complaints are responded to you should set specific targets and time frames. Similarly, if you want to assess the extent to which you are capturing both verbal and written complaints then you establish a system to track this. If you want to see whether more service improvements result from complaints you will need to track this.

Indicators of service quality

In assessing practice against each area, disability service providers should identify and record evidence across all aspects of the service practice including:

- Documentation – policies and procedures
- Systems and processes
- Executive Leadership Group
- Staff knowledge
- What people using services say about the complaints system
- What staff say about the complaints system
- Observable practice.

In assessing your organisation's approach to service improvements as a result of complaints handling, areas for improvement should be identified and action plans developed. It is important to recognise that quality services are continually changing as they identify new and better ways of providing a service.

For example, if your organisation has specified that a particular element of your complaints system is partially addressed (rating 2 or 3: see p53), the details should be recorded. Action plans should then be formulated to ensure the service: addresses the areas requiring improvement; allocates a responsible officer and has reporting requirements and timeframes in place. A sample response is provided as an example of how the self audit may be used.

How to use this framework

Remember, an organisational self-assessment is designed to provide your organisation with information on how to improve its service. It is important as part of this process to be able to identify existing good practice and successes so that these can be built upon. As improvement is always possible, even where a service assesses itself as meeting the indicator, further improvement measures may be considered.

You can also approach the tasks through a continuous improvement process involving the steps of 'plan, do, study, and act'. (Refer Figure 5. below.)

Figure 5: Continuous improvement cycle
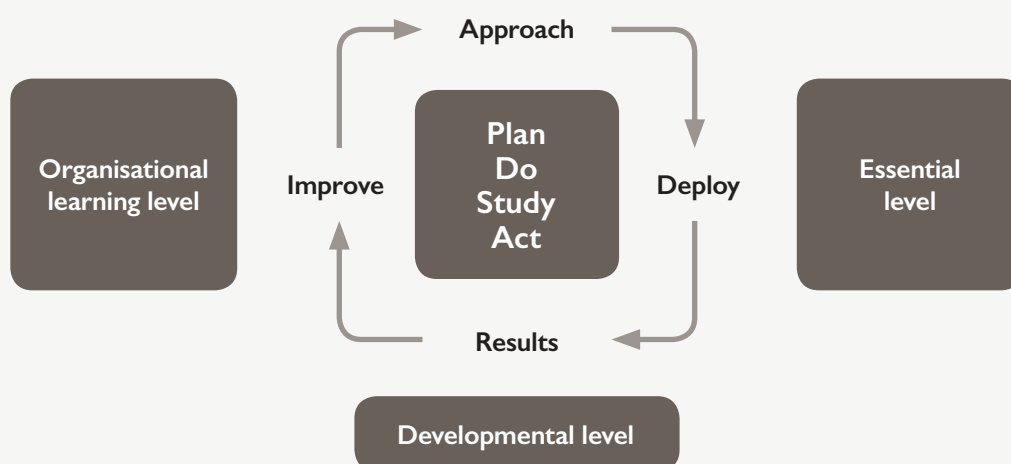
("5.1 Organisational self-assessment" in Understanding the Quality Framework for Disability Services in Victoria, 2007b)

Assessment Indicator – Rating the extent to which you meet the indicator

Once you have identified and cited evidence to support your response to an indicator you need to determine to what extent your service meets the indicator using the four level rating scale outlined in the Rating scale for self audit below.

Where the rating for any indicator in the matrix is 1 or 2, the service meets the indicator. If the rating is 3 or 4, then the service should be assessed as not currently meeting that indicator.

If there is insufficient information to provide a rating then the (i) symbol can be used provisionally to denote the need to obtain further information to be able to finalise the assessment and give a rating. Make sure you confirm all such ratings before you finalise the self assessment and if you are unable to cite evidence then the rating should be a 3 or 4.

> **Figure 6: Rating scale for self audit**
>
> **Rating 1** – Practice is consistent and meets the indicator
>
> **Rating 2** – Practice meets the indicator but is not always consistent
>
> **Rating 3** – Practice is consistent but does not meet the indicator
>
> **Rating 4** – Practice does not meet the indicator and is not consistent

> **Requirement**
>
> It is important to get different perspectives on your complaints system and how well it is working. Make sure you get the perspectives of people with disability, families and staff as this will provide a comprehensive picture of the strengths of the current system and areas requiring further development/improvement.

Collecting evidence

When collecting evidence against the indicators, focus on what your service actually does in relation to each indicator, and then determine how you can demonstrate that. As you work through the indicators, you will find some are prescriptive, while others lend themselves to a broader range of examples.

The strength of the evidence and how it may be demonstrated in practice is more important than the number of examples you use. For example, you may start by recording as evidence a document that relates to a specific procedure. Evidence should then be collected that verifies objectively the implementation of the procedure. This may involve talking to staff to ascertain their understanding of the procedure, watching the procedure in action, or reviewing the experience of people who have made a complaint in the implementation of the procedure.

Evidence of a System

Evidence is not concerned with volume but with being able to demonstrate that a system is in place to support and maintain the activity described.

Documentation is considered to be 'the gold standard' evidence of performance, although observation can confirm conclusions reached from assessing other types of evidence and can add knowledge about the nature of actual practice. (i.e. that practice follows the documented procedures)

Strong evidence is the existence of a coherent set of documents and records of implementation that relate to each element. A small number of documents representing a coherent system are weighted more heavily than multiple isolated documents and records.

In the context of a Plan, Do, Study, Act approach or continuous improvement cycle, the Essential level is primarily concerned with the deployment of policies and legislation and the existence of systems to ensure that operational requirements are met.

There should be a document trail that provides evidence of what is to be done, how it is to be done, and who does it, and records exist that describe the action being carried out as set out (refer to the following four critical characteristics of evidence).

Figure 7: Critical characteristics of evidence
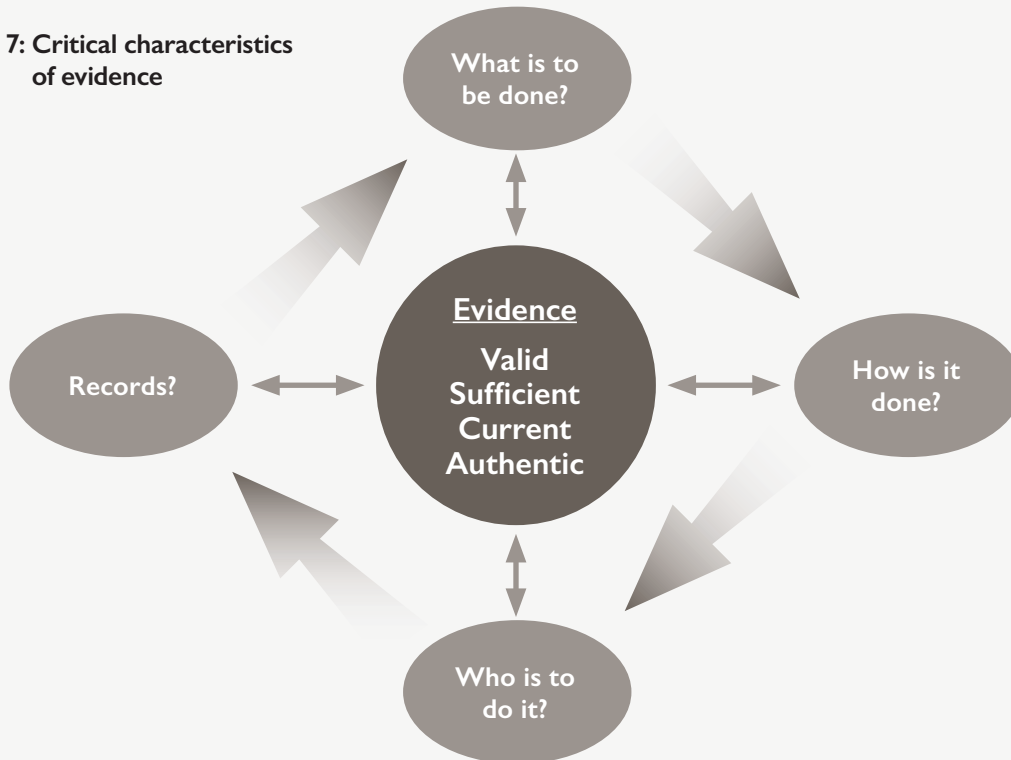
Critical characteristics of evidence

As set out in Figure 7, there are four critical characteristics of evidence proposed:

Critical characteristics of evidence

Valid – This relates to the relevance of evidence. It must assess what it claims to assess and be relevant to the activity to which it is attributed and demonstrate the performance of that activity.

Sufficient – This relates to the amount of evidence. There must be enough evidence to satisfy that the activity is in fact performed. If, for example, there is insufficient explicit documentary evidence, it may be necessary to refer to implicit sources of evidence, such as observations or interviews.

Current – This refers to the currency of the evidence. The reliability of the evidence is greater the more recent it is and therefore the more accurately it will reflect current processes, practices and behaviours.

Authentic – The evidence must relate to the performance and results of the specific service being assessed and not to another related service or to a wider organisation of which the service of which that being assessed is only a part.

(Service Excellence Framework Validation Team Process Guidelines and Practice Notes DHS Operations Division, Regional Operations Performance Branch, Quality Unit, 2006)

Introduction to the self audit

The self audit provides a template against which you can assess the various aspects of your existing complaints resolution process. This will help you to identify areas of strength as well as potential areas for improvement. This should help to inform any overall improvement plans being developed by your organisation.

Example of response to person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
Accessible An organisation demonstrates commitment to an effective complaints resolution process through making it easy to access.	You have written policy and procedures to support your complaints resolution process.	**Sample Response** 2	**Sample Response** Complaints Handling Policy Endorsed on 1 July 2016	**Sample Response** Need to ensure policy reviewed in 2016.	**Sample Response** Review policy John Green to coordinate review to be completed by 3 September 2016
	Your policy is published and people can readily access your complaints policy.	4	Policy is only available to staff.	Reviewed policy needs to be placed on website and more available to people using services.	John Green to provide revised policy to Jane Smith, website coordinator, for inclusion on website by 3 September. People using services to be made aware of the policy and how to access it.
Responsive	Your process is sufficiently resourced with appropriately trained staff who are empowered to handle complaints.	1	Unclear from information provided as whether staff are appropriately trained and empowered to handle complaints.	Clarify what training and support is provided to staff and whether further training is required.	John Green to investigate what is currently provided to staff by September 2016

Refer to 4.6.1. for an explanation of the principles of natural justice.

Self Audit Tool

Accessible

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
1. Accessible	A complaint resolution process should be open and available to all.				
1.1. Concise Policy Statement	You have a short summary paragraph that states the importance of feedback/complaints to you including: (a) Statement of principle (b) Recognition of the capacity to fail (c) What you are going to do (d) How you are going to do it (e) Why you think it is important (f) Signed by the CEO/organisation manager. This policy statement should be easily understood by people using your services and families and could include such things as the right to confidentiality, right to have support in making a complaint and the right to be protected from retribution.				
1.2. Clear policy	Your written policy clearly explains to people using your services your strategic intent – the key principles that underpin your complaints resolution process. The policy should expand on what the policy statement mentions. It could include: (a) a commitment by your organisation to the importance of complaints whether they are made verbally or in writing (b) recognise the importance of complaints to quality and continuous improvement (c) that people will not be adversely treated should they make a complaint (d) the right to complain will be made visible and accessible, and that part of this may be that people may be able to access support to make a complaint (e) that you will seek to be responsive in seeking to resolve complaints in a timely way.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
1. Accessible	A complaint resolution process should be open and available to all.				
1.3. Clear procedures	Your procedures identify the steps needed to handle complaints. The procedures should explain how the principles contained in the policy statement and policy will be put into practice. The document should clearly explain: (a) what to do when receiving a complaint, and make clear staff responsibilities at the different levels (b) the approach to take when a complaint involves safety concerns for people using your services (c) recording requirements and response timeframes (d) give staff direction on what to do when investigating a complaint, including adhering to the principles of natural justice (e) how confidential information will be handled within the service.				
1.4. Specific to complaints from people using your services	The procedure for handling complaints from people using services is separate to the grievance process for staff complaints. *Whilst the principles underlying the approach to handling staff grievances may be similar to handling complaints from people using services it is important to keep these two processes separate. There are different laws and associated obligations relating to handling staff grievances, such as occupational health and safety, and if these requirements are included in the procedure for handling complaints from people using services it can cause confusion.*				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
1. Accessible	A complaint resolution process should be open and available to all.				
1.5. Communication	You widely communicate your commitment to complaint handling to people using your services, including for example: a general information package, brochures, posters, signage and information on the website that explain how people can provide feedback to the service. **You inform people using your services of any changes made to your services as a result of their feedback or complaint.** *This should explain that both verbal and written feedback is encouraged and that a complaint is considered to be any expression of dissatisfaction. This information is available throughout the organisation at key service access points and circulated regularly.*				
1.6. Provision of information	**You encourage people using your services to complain and you have made it easy for them to do so.** You provide information that is clear and easy to understand on when, where and how to make a complaint. The information should be made available in appropriate formats having appropriate regard to ability and cultural identity. This information should explain: (a) rights and responsibilities of the people using your services and staff in relation to complaints (b) who to direct complaints to (c) processes for lodging and managing complaints (d) steps and timeframes in assessing and resolving complaints and disputes (e) internal and external avenues for making a complaint (f) process for review of decisions and mechanisms for appeal (g) recording and reporting of complaints.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
1. Accessible	A complaint resolution process should be open and available to all.				
1.7. Complaints process	The complaints process is easy, effective, efficient and flexible, with multiple access and referral points that are actively promoted.				
1.8. Support	You support people with disability to: (a) raise any concerns they have about the service provider (b) have issues resolved regarding aspects of the service with which they are dissatisfied (c) access advocacy or other independent supports to assist with making a complaint.				
1.9. Translating and interpreting	Staff have access to translation and interpreter services to support people with disability and their family.				
1.10. Staff education, training and support	All staff know and understand your complaints policies and procedures. Information and ongoing training is provided to new and existing staff, to ensure they have the necessary skills and knowledge to be able to respond positively and effectively to complaints. Your training program for staff includes areas such as: (a) active listening skills (b) customer service (c) acknowledging mistakes and providing apologies (d) handling criticism and managing conflict (e) problem solving (f) investigating complaints (g) responding to difficult behaviours in order to effectively identify underlying issues or concerns (h) writing in plain English, and (i) stress management.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
1. Accessible	A complaint resolution process should be open and available to all.				
1.11. No adverse consequences for people who have made a complaint	People using services do not experience retribution for making a complaint. You make it clear in your policy, procedures and client information that not only are complaints encouraged, but that any adverse treatment of a person who has made a complaint will not be tolerated.				
1.12. Cost	There are no fees or charges involved in making a complaint.				

Self Audit Tool

Person centred

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
2. Person Centred	The process used to respond to complaints ensures the voice of the person with disability is heard and their perspective considered in how the matter is resolved				
2.1. Balance of important to and important for	The assessment and investigation of complaints seeks to identify what is *important to* and what is *important for* the person with disability, in determining an appropriate resolution of the complaint. (Refer to Chapter 8 of the guide for an explanation of the difference between important to and important for).				
2.2. Respect	People are treated respectfully, courteously and sensitively.				
2.3. Confidentiality and Privacy	The person making a complaint has the right to have their confidentiality and privacy protected throughout the complaint handling process, in accordance with relevant legislation. *This means that information gathered during the complaint process is protected and only used to resolve the complaint or address broader issues arising from the complaint, and information is shared with staff on a need to know basis. This includes ensuring the positive outcomes arising from complaints received and other shared learnings are communicated in a way that does not identify the person making the complaint.*				

Self Audit Tool

Responsive

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
3. Responsive	Complaints are dealt with in a timely manner.				
3.1. Timeliness	Communication from the person is responded to promptly in an open way which is responsive to their needs.				
3.2. Outcome	You seek information from the person about what they would like to see happen or how they see the complaint being resolved.				
3.3. Clarification	Wherever possible, the staff member investigating the complaint clarifies the issues and allegations through meeting directly with the person making the complaint.				
3.4. Early resolution	Your guidelines suggest early resolution through informal discussions, mediation and/or provision of an apology where appropriate as an initial process.				
3.5. Offering something	Where it is not possible to provide the person making a complaint with what they want, you take reasonable steps to offer the person something. This offer should be a way of acknowledging the impact of the problem on the person who made the complaint.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
3. Responsive	Complaints are dealt with in a timely manner.				
3.6 Staff responsibility	Complaint handling is recognised as an integral part of the staff role and workload and not an extra. *Each level in the organisation should have as part of their responsibilities the provision of support and ongoing education to staff on handling complaints effectively.*				
3.7 *'It's OK to complain!'* culture	The organisation promotes a culture of receptiveness as part of good human service practice. Complaints are seen as an important way to improve the quality of the service. *Staff should feel comfortable when they need to raise complaints made by people using your services with their manager.*				
3.8 Positive approach	Staff have a positive attitude towards dealing with complaints.				
3.9 Encouraging feedback	Staff are encouraged to make suggestions and identify problems even if a complaint is not made. There is a process in place for staff to report concerns and offer feedback.				
3.10 Assessing performance	In staff performance reviews the manager discusses complaint handling.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
3. Responsive	Complaints are dealt with in a timely manner.				
3.11 Staff recognition	You appreciate and recognise those staff who anticipate and resolve complaints.				
3.12 Continuity	There is continuity of staff dealing with the complaint. *One staff member is responsible for the conduct of the investigation and establishing a framework for any investigation.*				

Self Audit Tool

Accountable

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
4. Accountable	Your process for resolving complaints is clearly outlined so that people know what to expect.				
4.1. Clear timelines	Your complaints resolution process is easy to use and allows you to record, track and report complaints to ensure compliance with specified complaint handling timelines.				
4.1.1. Stages of a complaint	For those complaints that cannot be dealt with immediately, your organisation has reasonable target timelines for the stages of the complaints handling process and makes the person aware of these timelines.				
4.1.2. Process to ensure timely response	You, have a process to alert staff and managers to key points in the complaints process to help meet target timelines for complaints.				
4.1.3. Meeting timelines	Your target timelines are monitored, reported and generally met.				
4.2. Ongoing communication	You keep the person informed at all stages of the progress of their complaint. *This includes monitoring the progress of complaints and advising the person of extensions of times and reasons for extensions.*				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
4. Accountable	Your process for resolving complaints is clearly outlined so that people know what to expect.				
4.3. Remedy implementation	Remedies are implemented as soon as possible after a matter has been resolved.				
4.4. Extended application	In cases where a remedy is provided to a person making a complaint, active steps are taken by you to identify other people similarly affected and to provide them with the remedy, even if they have not made a complaint.				
4.4.1. Consistent application of remedies	The remedies offered to people with similar issues are consistent. Where few complaints have been received, you would need to be clear in your approach as to how you would ensure that this occurs.				
4.4.2. Monitoring outcomes	The implementation of remedies is monitored, reported and reviewed to ensure outcomes are appropriate and service improvements are made.				
4.5. External complaints authorities	If complaints involve a conflict of interest or remain unresolved, you refer the people who made the complaint to the appropriate external complaints body/authority.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
4. Accountable	Your process for resolving complaints is clearly outlined so that people know what to expect.				
4.6. Investigation	The person investigating the complaint acts reasonably, objectively and in good faith, with each complaint investigated on its own merit.				
4.6.1. Natural justice	You adopt an approach to the handling, management and resolution of complaints and grievances that is underpinned by natural justice principles. *This means making sure that people are:* *(a) heard* *(b) that any conflict of interest is avoided.* *(c) people likely to be adversely affected by a decision or action are given reasonable opportunity to comment on the information or material.*				
4.6.2. Complaints file	The person investigating the complaint maintains a secure, central investigation file, documenting each step of the investigation process and all communications, and completes a report documenting the investigation findings. It may also be appropriate to place this information on the client file.				
4.6.3. Managing complaints	As part of a quality improvement process your guidelines require that each completed investigation is reviewed, preferably by a person who has not been involved in the complaint matter, to identify improvements in the investigation process. *This evaluation may be informal or formal depending on the nature and complexity of the investigation.*				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
4. Accountable	Your process for resolving complaints is clearly outlined so that people know what to expect.				
4.6.4. Right of reply	You allow persons or work groups about whom the complaint is made the time to properly investigate and respond to the complaint.				
4.7. Conflict of interest – code of conduct	Staff are aware of the relevant code of conduct requirements where a conflict of interest may have been identified or is likely to be perceived by the person.				
4.8 Decisions	You make fair, objective and consistent decisions, taking into account all relevant circumstances and based on relevant factors, available evidence and authoritative criteria.				
4.8.1. Right of reply	You inform the person or work group about whom the complaint is made, of your decision/s and reason for the decision/s and, if necessary, invite comment.				
4.8.2. Right of reply	You inform the person who made the complaint of any decision on their complaint and provide the person with detailed reasons for the decision/s appropriate to the complexity of the complaint. *Your guidelines could also require the person bringing the complaint to be notified of any specific changes made as a result of the complaint.*				
4.9. Conflict of interest	You ensure that the person reviewing the approach to the complaint has not had significant involvement in the issue under review and does not have a personal interest in the outcome.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
4. Accountable	Your process for resolving complaints is clearly outlined so that people know what to expect.				
4.10. Transparency	You openly acknowledge areas for improvement and apologise, thereby increasing confidence and accountability.				
4.11. Reviews	You make sure the person making a complaint is informed of their right to internal reviews of decisions and you advise on how they may do this.				
4.11.1. Confidential review	You review the complaint confidentially if requested by the person making the complaint and if appropriate.				
4.11.2. Independent review	You inform people who have made a complaint that their complaint will be reviewed by a person who has not been involved in the complaint matter, where possible.				
4.11.3. External review	You inform the person of further avenues of review if they are not satisfied with the outcome of the internal complaint process conducted by the organisation.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
4. Accountable	Your process for resolving complaints is clearly outlined so that people know what to expect.				
4.11.4. Promotion of options	You regularly publish information about a person's right to seek internal review, external review or referral of their complaint to another body.				
4.11.5. Staff support to access external review	Your staff understand the alternative avenues for dealing with a complaint and advise people of their rights to take their complaint to an external complaints body.				
4.12. Complaints register and or service improvement	You have a simple and accessible process for recording, tracking, monitoring and responding to complaints, which also records the outcomes. This information is systematically used to inform service improvements.				
4.12.1. Essential information	You identify and record essential information on **all** complaints, **whether they be verbal or in writing**: (a) person's details including: name address, contact details, age, gender, cultural identity, type of disability (b) issue and description of complaint including date complaint received complexity of complaint, and factors important to and for the service user. (c) outcome sought (d) source of complaint (e) action taken and outcome achieved, category and description (f) date closed and time taken (g) recommendations for service improvement.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
4. Accountable	Your process for resolving complaints is clearly outlined so that people know what to expect.				
4.12.2. Data analysis	Complaints data is collected in sufficient detail to facilitate comparisons with previous periods and identify system-wide and recurring patterns and trends in complaints.				
4.12.3. Statistics and shared learnings	Information on trends or aggregated complaints data is made publicly available.				
4.12.4. Staff responsibility for data collection	You have a member of staff responsible for ensuring consistency, timeliness and quality in how complaints are dealt with and data collected.				

Self Audit Tool

Excellence

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
5. Excellence	The complaints resolution process is part of a quality culture which sees complaints as an opportunity for improvement.				
5.1. Reporting results	Where appropriate you report the results of your complaints resolution process to the people who made the complaint, organisational staff and executive leadership group. *This should raise awareness of the complaint handling process and how complaints contribute to service improvement.*				
5.2. Continuous improvement	You generate regular reports about the effectiveness of the complaint resolution process against measurable objectives and where appropriate make recommendations for improvements to service delivery. This may also have implications for other areas such as staff development.				
5.2.1. Complaints data	Aggregated complaints information is regularly provided to those who can take operational and policy decisions on improving service. e.g. Boards of management.				
5.2.2. Regular reviews	You conduct regular reviews of your complaints resolution process, including policy, procedures and guidelines, to determine how it is working. *These reviews include seeking the views of all stakeholders on how well the process is operating and how it could be improved.*				
5.2.3. Implementation plan	Following each review an implementation plan is developed, identifying what actions are to be taken, by whom and by when.				

Person centred complaints resolution process self audit

Principle	Criteria	Assessment Indicator 1, 2, 3, 4	What evidence supports your assessment?	Recommended actions for improvement	Action plan (Who, what and when)
5. Excellence	The complaints resolution process is part of a quality culture which sees complaints as an opportunity for improvement.				
5.2.4. Audit and quality checks	Where possible your review process includes an audit or sample investigation of files to confirm the accuracy of information recorded on the complaints process.				
5.2.5. Organisational process improvements	Complaints data is regarded as an important source of information on service quality and informs systemic improvement of organisational policies and procedures.				
5.3. Strategy/ governance	Complaints data and learnings are taken into account in corporate governance and strategic planning processes.				
5.4. Organisational culture	You have a complaints friendly culture which is grounded in a clear understanding that the future of your organisation depends on the people using your services being satisfied. *This means that people feel comfortable raising complaints as well as receiving them as stated in your Policy Statement.*				
5.5. Follow up	You follow up with people who made a complaint on their experience of your complaints process.				

Notes