

Feedback, Complaints and Continuous Improvement Policy

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Purpose and Scope

Feedback mechanisms are the starting point for the active engagement and participation of our clients and stakeholders in EnableOT, leading to open and honest communication. Encouraging feedback and open complaints and appeals processes give clients a way of expressing any dissatisfaction with our service and of having their concern dealt with quickly and effectively. This policy and associated procedures guide us in responding appropriately and fairly to complaints and to appeals. Feedback enables our staff and management to have insight into the experience of our clients and stakeholders. Dealing well with complaints and appeals helps us to maintain and improve our service quality and ensure clients have their issues resolved. Feedback and complaints assist us to deliver appropriate and effective services and are an opportunity to continuously improve our services.

This improvement policy guides how we constantly assess our organisation and our services to ensure that we are providing the best possible quality of services to the clients and stakeholders and the most efficient and accountable management practices. Services are provided in a constantly changing environment and we also need to ensure that our organisation maintains necessary compliance with these changes. We also need to manage risks to our organisation, services, clients and staff. While this is covered in a risk management under the WH&S and Risk Management Policy, acting to address identified risks also forms part of the Continuous Improvement process.

This Policy applies to and outlines responsibilities of all staff and management of EnableOT.

Legislative Requirements

Disability Discrimination Act 1992:

This Act aims to eliminate discrimination due to disability in employment, access to facilities, provision of goods and services, legislation and promote equality and equity between persons with a disability and ensure they have the same fundamental rights and others within the community

NDIS Act 2013 (The Act):

The National Disability Insurance Scheme (NDIS) was developed to enable people with disability to live 'an ordinary life' as others in society do. The associated Act aims to provide for the National Disability Insurance Scheme in Australia, support the independence and social and economic participation of people with disability, provide reasonable and necessary supports, including early intervention supports, for clients in the National Disability Insurance Scheme launch, enable people with disability to exercise choice and control in the pursuit of their goals and the planning and delivery of their supports, facilitate the development of a nationally consistent approach to the access to, and the planning and funding of, supports for people with disability, promote the provision of high quality and innovative supports that enable people with disability to maximise independent lifestyles and full inclusion in the mainstream community, raise community awareness of the issues that affect the social and economic participation of people with disability, and facilitate greater community inclusion of people with disability.

Definitions and General Principles

1. Feedback

Feedback is expression of positive or negative comments relating to EnableOT or staff that provides information about how clients, stakeholders and connected disability service providers perceive EnableOT. Feedback may contain an improvement, compliment, issue, complaint or disclosure of serious harm (reportable incidents).

2. Complaints

An issue is a concern or worry by a client regarding the organisation's products, services or staff that can be managed routinely, as a request for service whereas a complaint is an expression of dissatisfaction about the EnableOT services, or staff that requires a response or resolution.

Complaints may include dissatisfaction about:

- a decision EnableOT has made or not made
- the service EnableOT has provided or not provided
- the behaviour of EnableOT employees
- an act or practice of EnableOT in relation to the security of an individual's personal information

Or:

- an allegation of actual or serious harm (reportable incidents) that has been identified under the Prevent and Respond to Harm Policy.

A complaint about a decision or action of EnableOT must be made no later than 12 months after the complainant was notified or made aware of the decision or action. Complaints made outside this time period will only be reviewed if the Director considers that exceptional circumstances warrant consideration of the out-of-time complaint, or if it is deemed that it is the best interests of the client or the organization that the complaint be resolved.

The following matters will be excluded from this policy and will be dealt with under relevant legislation or processes that pertain best to the matter:

- matters currently being dealt with or have been previously dealt with by a court, tribunal or external complaints agency
- matters regarding administrative decisions of EnableOT
- matters that have already been subjected to an internal review and an outcome has been determined that is not part of an appeals process

3. Continuous Improvement

EnableOT is committed to continuously improving all aspects of its operations with the aim of delivering the best possible services to its clients. The stimulus for improvement may come from feedback, complaints or suggestions raised by EnableOT team members or others.

Specifically, we will:

- Regularly collect information, through various information sources, about things that are working well, things that are not working well, or have gone wrong, ideas for better processes, and changes in requirements or practice knowledge external to the service
- Record issues and ideas in the **Continuous Improvement Log** – on **Halaxy** Platform
- Determine if an issue represents an **Event of Concern** and record it in **Mobile Data App: Event of Concern Project**, whereby, if it identifies an ongoing repeatable risk, will lead to an addition in the **Current Risk Controls Register**
- Determine, in consultation with those affected, necessary actions to address or implement changes and then implementing the changes, as agreed and documented
- Advise all relevant stakeholders of any changes made
- Monitor progress and review whether changes have had the intended positive outcomes or unintended negative impacts of changes

Feedback and Complaints Process for Clients

EnableOT is committed to listening to people using our service. We take on feedback, both positive and negative, as a source of ideas for improving our services and other activities. Feedback includes facilitating our clients and their stakeholders right to make a complaint about our service, to appeal a decision we have made that directly concerns them, and to ensuring that their complaint or appeal is fairly assessed and responded to promptly.

Importantly, EnableOT will never discontinue, reduce, or in any other way, take recriminatory action against a client or stakeholder making a complaint. We will only act, if a complaint raises an issue, to ensure the safety of and prevent harm to clients and others.

Specifically, for our clients we will:

- provide a free and accessible feedback and complaints process, that supports natural justice and procedural fairness for all persons with no reprisals or detriment from making a complaint
- provide information about how to provide feedback or complaints, and how feedback or complaints will be managed, including anonymous complaints and referring complaints to external agencies if required
- provide clear information about what can or cannot be achieved by a feedback and complaint process, and assist anyone who wishes to provide feedback, make a complaint or appeal a decision
- fair, accountable, transparent and responsive management of feedback and complaints
- respond to those giving feedback or complaints about the progress or outcome of the complaint in a manner that respects the confidentiality of personal information
- provide a clear explanation of the final decision, any recommendations, appeal options and any available external appeal mechanisms
- identify and implement business improvement opportunities
- train and assess competency of staff to respond to complaints as part of the induction process

Opportunities to Provide Feedback or Make a Complaint

Invitations to provide feedback, or submit a complaints and appeals is given to the clients and their stakeholders via the **Welcome to EnableOT SMS** – containing a link to a webpage, itself listing links to secure online forms for completion. Paper versions can be provided upon request. There are three online forms:

- Feedback Form (for individual feedback)
- Training Feedback Form (for individuals to complete following group training sessions)
- Complaints Form

The SMS method is preferred over paper as people lose paper, but often have their phones with them – thus making more accessible feedback methods.

During the client on-boarding process, clients are asked about their preferences about being asked for feedback. This is noted in their **Client Support Profile**. Preferences are ascertained regarding the frequency (each session, every 6 months, never, other: _____) and format (conversationally with their EnableOT team member, paper, online via link, phone call with Administration).

EnableOT team members are familiar with facilitating all of the de-identified feedback methods should the client or their support person wish to remain anonymous.

When invited, clients can choose to answer feedback questions in person to their clinician (documented on **Tickflick Clinical Note**, click on the link contained on their phone message history (received from us), access the form via a QR Code which team members carry around with them, or use the EnableOT Team Member's phone via the same link.

The act of providing feedback is, itself, a 'load' on a client which, unless they initiate the feedback themselves in order to show appreciation or initiate a change they believe essential to their care, is actually for EnableOT's benefit and not the client's. As such, it is unethical to add this load to a client who is already exhausted or overwhelmed. This is why EnableOT team members take 'load' into consideration before inviting feedback from their clients, why we seek

preferences for frequency/format of feedback requests, and why we issue a simple link at the commencement of service rather than send them ongoing requests for feedback.

Within the webpage link forwarded in the **Welcome to EnableOT SMS**, all clients are able to access a document informing them of their rights and responsibilities. This is so they can access this information at any time that suits.

Accessibility to feedback and complaints information will be provided by those that indicate preference of communication methods other than written English. This might include verbal explanation either through EnableOT staff, other support persons or networks, or external provider such as translation services and will be tailored to the specific needs and requests of the client and their stakeholders. Similarly, we will use the support plans and access documents to ensure we consider specific and known cultural needs the client might have when making a complaint.

We encourage feedback from our clients and their stakeholders. Feedback can be provided to us by individuals or stakeholders on their initiative or in response to requests by our organisation. We make it as easy as possible for people to provide feedback and ensure anonymity to people who do unless they agree otherwise.

Feedback initiated by the client or stakeholder will be encouraged by a culture of openness and honesty around positive and negative feedback and the outcomes of this feedback. Feedback will be received through a variety of methods including verbal, written or any other communication methods suited to the person providing feedback. Feedback will be analysed to decide whether the feedback is an improvement, compliment, issue or complaint.

Feedback and Complaint receipt is monitored daily by the Practice Manager, and any with a risk exposure of 'high' or above will initiate action with 24 hours of receipt.

We ensure that client and stakeholder feedback inform our decision making and planning processes. We use feedback to improve our services by:

- EnableOT is committed to continually improving its service delivery. Information from the complaints process will be analysed and meaningful feedback will be provided to staff about the nature, causes and outcomes of complaints.
- Recommendations from complaints management processes relating to operational and/or systemic process improvements, may be implemented and monitored by the Director.

Investigating a Complaint

An investigation is warranted when:

- The cause of an **Event of Concern** (hereafter referred to as an **EOC**) is unknown, or a complex combination of factors
- The nature of an **EOC**, or its impact is significant
- There is a need to clarify actions regarding allegations made about an EnableOT team member in order to resolve any findings of risk, and therefore, the appropriate corrective action.

An investigator of the complaint will be nominated, typically the Director or Practice Manager of EnableOT. In some instances this will be an external investigator. An external investigator is required when:

- There has been a direction from the NDIS Commission or other statutory body to appoint one
- EnableOT does not have team members with the expertise/training sufficient to carry out an investigation of that nature
- EnableOT does not have team members able to be impartial. The issue is such that the conflict of interest precludes anyone internal conducting the investigation

Investigators need to be appropriately trained and experienced in conducting investigations, be able to maintain independence, are not involved as an interested party in the complaint and are able to be objective and impartial (ideally from an unconnected area of EnableOT).

Documentation of investigative efforts are to be recorded in the **Continuous Improvement Log** on **Halaxy**.

The investigator is to complete the following tasks and make the following findings:

- Gather facts and evidence, sufficient for in-depth understanding. This includes obtaining information from anyone affected.
- Consult with anyone affected regarding their preferences for involvement, preferred outcomes and actions, and how they wish to be kept informed of progress, findings and actions
- Establish the cause(s)
- Determine the impact
- Identify operational issues that may have contributed
 - Ask “what have we learned?”
 - Identify ongoing risks and trigger the Risk Management process to implement indicated hazard control.
 - Ascertain in what way it could have been prevented
- Prevention, corrective and restorative actions already taken
- Remedial actions required to:
 - Prevent similar incidents/complaints
 - Minimise similar incident/s impacts
 - Notification of any other parties/agencies
- Corrective actions required:
 - Disciplinary – such as performance review or probationary periods
 - Dismissal
 - Training/Education
 - Modification of Environments
 - Development or modification of policies/procedures
 - Changes in the way supports are provided
 - Practice Improvements
- Restorative actions required:
 - Ongoing support to the person(s) impacted
 - Giving apology
 - Financial refund or reparation
- Analysis of activities taken to manage and resolve
 - Whether parties were satisfied with the outcome
 - The Remedial, Corrective and Restorative actions implemented and their effectiveness
 - Reasons for rejected actions
 - Any further actions required.

Review and Auditing

Regular check and auditing are intended as follows:

- Daily
 - (all staff) Inviting feedback from clients in accordance with their recorded preference
 - (Practice Manager) – monitoring of online form databases, and Event of Concern Database for feedback/complaints that need actioning within a certain timeframe
- Every EnableOT Team Weekend (approximately 3 times per year)
 - Check of ongoing risks or continuous improvements
 - Check of new risks or continuous improvements
 - Internal Audit Activity: Review against Standards.
- Every Initially, then 6 monthly, then 6 weeks after final service:
 - Internal Audit Activity: Client Reviews (Initial, Ongoing, Final) – checklist that follow implementation of all policy requirements regarding client service delivery.
- Every 18 months – 36 months
 - External NDIA certification

Record Keeping

EnableOT keeps records of feedback, complaints and appeals in a secure electronic format – within a database from our online forms. Any actionable feedback is transferred to EnableOT’s Continuous Improvement Log and/or Actionable EOC – both within the Staff Halaxy portal for ongoing actioning and documentation of the actions. This allows for the provision of appeals and reporting for the 12 months following the receipt of feedback or complaints. Complaints processes are recorded according to the steps in the Complaint Management Procedure. Complaints including serious harm (reportable incidents) disclosures will be kept on the relevant client or staff file for 10 years after the client or staff member has left EnableOT. Records will be securely destroyed in accordance with the [Privacy, Confidentiality and Information Security Policy](#).

Service Improvement

Overview:



Continuous Improvement Log - Halaxy

The Continuous Improvement Log allows us to undergo the cycle described above and monitor our progress over the lifetime of our business and the services we provide.

The log contains details such as:

- Date identified: date the issue or idea was identified
- Brief description of the idea or issue including definition of minor or major improvement
- Agreed action/s to respond to the idea or issue
- Who will be responsible for taking action/s
- Date action/s are to be completed
- Date to review actions and any outcomes or unintended impacts; further actions required

The Director and Practice Manager are both responsible for maintaining the Continuous Improvement Log, and actioning it as required (including delegating aspects to less senior team members), and disseminating information to staff.

Identifying Improvements

All staff are responsible for identifying risks in the workplace but are also encouraged to voice concerns or opportunities for improvement to the Director or the Practice Manager. Sources of improvement suggestions could include:

- Feedback
 - Positive or negative; from staff, clients, stakeholders or connected providers
 - Formal or informal; client surveys, discussion comments, anonymous complaints or employee disputes
- Risk Management
 - Hazard and incident report
 - Harm disclosure
- Reviews and Audits
 - Policy and procedure reviews; internal audits
 - External audits and regulatory compliance
 - Risk management

We use the **Mobile Data App: Event of Concern Project**, with embedded guidelines, to determine what action we will take in relation to each opportunity for improvement identified.

- Level 4 EOC – immediate reporting to the Director or the Practice Manager
- Level 3 EOC – immediate reporting to the staff member’s Clinical Supervisor
- Level 2 EOC – next supervision session reporting to Clinical Supervisor
- Level 1 EOC – within the next 14 days report it to the person you feel most appropriate.

The Level of implementation may be:

- Some complaints and feedback instances may require an immediate response. These are generally referred to the Director, who will determine the actions required.
- Minor: Some improvements may be short reaching such as implemented within a work team within a short period of time. No changes to policies or procedures are required but simply a change in the way procedures are carried out. Such instances are discussed and required actions agreed upon. Intended timeframe, 15 business days – notification via Mattermost platform.
- Major: issues or changes that require changes to documentation, policies and procedures or when there is a significant cost, risk or impact to the organization must be referred to the Director for decisions regarding action. Intended timeframe, 6 months
- Future: Strategic Planning may identify actions consistent with the future aspirations of the organisation (eg: building specialist skills, expansion of services, developing partnerships). No intended timeframe.

Implementation

Actions are strategies to implement improvements balanced against the cost and risk of the action not being implemented. Common actions include:

- Staff training
- Provision of information
- Changes in procedures or practices
- Further consultation or formation of a working group to explore the issue and possible responses. Outcomes would be reported back to future staff meetings.
- Seeking external services or advice
- Acquiring or replacing equipment or software, etc.

Monitoring

We monitor implementation of actions by:

- All improvement actions should be reported to the Director or the Practice Manager to enable updating of the Continuous Improvement Log
- Reviewing the Continuous Improvement Log prior to each Team Weekend to prepare improvement activities and dissemination of changes.

Advocacy

At the time of informally assessing a person for access to the service, and again at the signing of the service agreement, the client and their stakeholder network will be informed of the role of an advocate, their right to use advocacy services, and the contact details of an advocate organization. EnableOT will support an advocacy process if they choose to self-advocate, change advocates or withdraw consent from an advocate. If a client voices their wish to have an advocate, EnableOT will introduce them to an advocate of their choosing according to the Positive Support Policy. We will work with an advocate chosen by the client and involve the advocate in the areas of a client's service delivery and decision making. We will keep records of the clients' decisions made regarding advocacy and when an advocate is present.

Review

This policy will be reviewed when required by changes to legislation or when organization operations require it. Employees will be consulted in relation to any proposed changes. It is recommended that this policy be assessed at 9 monthly internal review alternating with formal auditing processes.