

Complaints Management Policy

visioneyeinstitute.com.au

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 1 of 17



Contents

1	Purp	ose	4
2	Scop	oe	4
3	Poli	cy Statement	4
4	Defi	· initions	4
5	_	cedure	
		Guiding Principles	
	5.1.1	•	
	5.1.2		
	5.1.3		
	5.1.4	·	
	5.1.5	·	
	5.1.6	•	
	5.1.7	•	
	5.2	Complaints Management Process	6
	5.2.1	L Receiving Complaints	6
	5.2.2	2 Assessing Complaints	8
	5.2.3	3 Investigating Complaints	9
	5.2.4	Resolving Complaints	10
	5.2.5	5 Finalising the Complaint	10
	5.3	Unresolved Complaints	11
	5.4	Complaints Received via Social Media or Other Online Means	11
	5.4.1	L Respond quickly	11
	5.4.2	Respond Personally	11
	5.4.3	Move to a Private Conversation	11
	5.4.4	Responding to Google Reviews	12
	5.5	Unreasonable conduct by a person making a complaint	12
	5.6	Ongoing Obligations	12
	5.6.1	Performance Indicators	12
	5.6.2	2 Record keeping	13
	5.6.3	3 Confidentiality	13
	5.7	Escalation of a Complaint to a Third-Party	13
	5.8	Key Responsibilities in the Complaints Management Process	14
6	Res	oonsibilities	15
	6.1	Compliance, monitoring, and review	15
	6.2	Reporting	15

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 2 of 17



Transforming lives. That's our vision.

(5.3	Records management	15
7	Re	ferences	15
8	Gr	ievance Resolution	16
9	Ро	licy Amendment	16
10	ı	Risk Rating	16
11	(Consequence of Breaching this Policy	16
12	,	Appendix	16
13	ı	Revision History	16

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 3 of 17



1 Purpose

This policy is intended to provide employees of Vision Eye Institute (VEI) entities with directions to effectively manage complaints made by patients, carers, and members of the public. The policy establishes a standardised approach to complaint handling across all sites to support timely, efficient, and fair management of complaints.

2 Scope

This policy applies to all employees of VEI and its entities. It covers complaints and concerns raised by consumers (patients, carers, and others) about the services delivered by all VEI sites. This policy does not cover complaints or grievances raised by employees of VEI. There are separate processes in place to manage these.

3 Policy Statement

Consumers and their representatives make complaints for a variety of reasons. Primarily, complaints are concerning communication, the quality of clinical care, access to services and being treated with respect and in accordance with the rights of consumers and carers. Many complainants are altruistic in that they identify the reason for making a complaint is to avoid other consumers/carers having a future similar experience.

Health consumer feedback is a valuable component of the quality improvement cycle. Complaints provide a means to identify areas in need of improvement and uncover any real or potential system failures from a consumer/carer's perspective.

Resolving complaints at the earliest opportunity, in a way that respects and values the person's feedback, can be one of the most important factors in ensuring an opportunity to recover a person's positive feelings and confidence about our services. It can also help prevent further escalation of the complaint. To facilitate this, we will provide a responsive, efficient, effective, and fair complaint management system.

4 Definitions

Apology	An expression of feelings or wishes that can include sorrow, sympathy, remorse or regret as well as an acknowledgement of fault, a shortcoming or a failing.
Complaint	An expression of dissatisfaction by, or on behalf of, an individual consumer/carer regarding any aspect of a service delivered by a VEI Service Provider, where a response or resolution is explicitly or implicitly expected or legally required. A complaint can be lodged in writing or verbally. Where feedback is provided online, including via social media, and the feedback comprises a complaint, these shall be recorded as a complaint. It is noted that all complaint management steps may not be possible in these types of complaints.
Compliment	An expression of satisfaction and/or gratitude by, or on behalf of, a consumer/carer regarding an aspect of a service delivered by VEI.

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 4 of 17

Transforming lives. That's our vision.

Contact / Concern	An enquiry or feedback from a consumer/carer regarding any aspect of	
(Suggestion for	service where:	
Improvement) a. The contact is inquisitorial in nature rather than are of dissatisfaction; and/or		
	b. The consumer/carer states that they do not wish to lodge a complaint; and/or	
	c. The issue(s) are minor and can be resolved immediately without going through the complaint process (e.g., the complainant is satisfied by immediate actions to resolve the issue). Immediate resolution negates the need for any follow up actions (i.e., if further action is required to resolve the complaint, it is not a contact/concern unless it satisfies criteria a or b).	
Incident An unplanned event resulting in, or with the potential for,		
	damage, or loss, including a near miss.	

5 Procedure

5.1 Guiding Principles

The following principles underpin the management of complaints within VEI and the relationship each has with consumers throughout that process. These principles correlate with the Australian Commission on Safety and Quality in Health Care's (ACSQHC's) Complaints Management Handbook for Health Care Services.

Figure 1: Guiding principles of complaint management



5.1.1 Rights and responsibilities of consumers and carers

Complainants have the right to be treated with respect and dignity, have their concerns treated as genuine and properly investigated, and to participate in decisions about the management of their complaint.

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 5 of 17



Likewise, complainants are expected to respect the role of VEI staff and their right to respond to a complaint.

5.1.2 Promotion, accessibility, and transparency

VEI encourages its consumers and carers to provide feedback, concerns, and complaints. These are then actioned in an open, receptive, and transparent manner. The process for lodgement of complaints at each site shall be highly visible, easily accessible, and understandable for all consumer groups. Special consideration shall be given to those with special needs e.g., Culturally, and linguistically diverse, consumers with disabilities, or Aboriginal and Torres Strait Islander peoples.

5.1.3 Commitment to effective complaint management

VEI demonstrates its commitment to the appropriate management of complaints by providing sufficient leadership, resources, training, and support to staff in the receipt, recording, investigation, resolution, and reporting of complaints.

5.1.4 Fairness and accountability

Each complaint shall be addressed in an equitable, objective, and unbiased manner in accordance with the established timeframes contained in this policy, and the complaint's seriousness. Complainants are to be kept informed throughout the process.

5.1.5 Responsiveness

Complaints management must be responsive to the needs of the consumer/carer and subject to ongoing review and improvement.

5.1.6 Privacy and disclosure

It is recognised that consumers have a right to have complaints regarding their health care investigated and resolved in a fair and confidential manner. VEI has established procedures to ensure that relevant facts and decisions are communicated openly, and that the confidentiality of personal information is protected throughout the complaint management process.

5.1.7 Continuous service improvement

Consumer feedback is used to identify and initiate the implementation of site-based and organisation-wide practice improvements, including practices relating to the management of complaints.

5.2 Complaints Management Process

The four stages in managing a complaint are:

- 1. **Receive** the complaint.
- 2. **Assess** the complaint.
- 3. **Investigate** the complaint.
- 4. **Resolve** the complaint.

5.2.1 Receiving Complaints

The key actions for staff when receiving a complaint are to:

- actively listen to the person making a complaint
- empathise, understand, and acknowledge their viewpoint
- express regret that they have had a poor experience, and

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 6 of 17



• assure them steps will be taken to investigate and resolve their concerns.

5.2.1.1 Stop before you speak

A person who is complaining about a service may have an emotional need to vent their anger over what has happened to them.

The following strategies can be employed when receiving a complaint.

- Keep the volume and pitch of your voice low. Lowering your voice and speaking calmly helps to calm an emotional person.
- Reinforce the person's right to complain, to be heard, and to receive a response.
- Accept what is being said without attempting to justify another's actions or without denying the perspective of the person making a complaint.
- Respect and empower the person making a complaint.
- Be open, non-judgmental, and empathetic. Use phrases such as:
 - o I can see why you feel that way
 - o I see what you mean
 - That must be upsetting
 - o I understand how frustrating that must be.

5.2.1.2 Listen for understanding

- Take time to listen to the person's concern.
- Adopt good listening skills by nodding and saying, "I see", maintaining eye contact, leaning forward if you are sitting down, adopting an open body posture, and looking interested.
- If you are on the phone, add tone and expression to your voice to show you are listening, e.g., by saying "yes", "mm", etc.
- Never speak over a person. It gives the impression that you are not listening.
- Seek clarification of points in a non-judgmental way by using open-ended questions that start with How? When? Where? Who? Why?
- Use plain English and choose words naturally without using jargon.
- Try to understand and appreciate the person's point of view, without necessarily adopting it.
- Make it clear that you have understood the complaint by summarising the main points and asking whether that is correct.
- Keep your own emotions in check and be aware of any responses carried over from a previous call, work, or personal matter.

5.2.1.3 Look for solutions

- Dependent on the type of complaint, resolutions can occur relatively quickly. Make sure that if you can, you offer to remedy the situation. If there are things you can do straight away, do so.
- Ask the person what they want to happen to resolve their concerns.

It may also be necessary to escalate the complaint to a manager or senior staff member. If that is the case, ensure the appropriate person is notified as soon as practicable, and advise the complainant that this is your chosen course of action. Make sure something is done, say something like: "I'll make sure this information gets to the right person".

5.2.1.4 Acknowledge receipt of the complaint

When a complaint is received by VEI, its receipt must be acknowledged within five (5) working days of receipt. Prompt acknowledgment of a complaint contributes to effective resolution. Usually, a complaint

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 7 of 17



should be acknowledged in the mode it was received (e.g., a verbal complaint may be acknowledged verbally, an email complaint via email). A letter of complaint can be acknowledged by reply letter. This can be emailed rather than posted if appropriate to do so.

Acknowledgement by letter or email must include the following:

- The individuality of the complaint.
- Contact details and information as to what the person who has made the complaint should expect
 next.
- The date of the acknowledgement. This date should also be recorded in RiskMan against the entered complaint.

Where a complaint can be quickly resolved, it may be possible to provide the acknowledgement and resolution of the complaint in the same interaction. In this case, the complaint and its resolution must still be documented, regardless of whether any correspondence is issued in relation to the complaint.

5.2.1.5 Record the complaint

There must be a comprehensive record of conversations, concerns, names, addresses, providers etc. created for each complaint received. The written record of the complaint is the basis of any action taken about the complaint.

5.2.2 Assessing Complaints

A rigorous assessment process is vital to effective complaint management. The complaint is to be assessed and prioritised according to the issues raised. Staff and patient safety must be the foremost consideration when assessing and complaint.

The assessment process must clarify the issues in the complaint and if serious, escalated to management; either the site manager or the appropriate member of the Executive Leadership Team.

5.2.2.1 Identify Issues

It is important that the issues to be addressed are clearly identified. These can include those raised by the person making the compliant and any other issues arising or identified during the assessment. There may be some issues raised by the complainant that cannot be addressed. It is important that, at this stage, the complainant is contacted to advise them of what issues shall form part of the complaint management process.

5.2.2.2 Identify individuals involved

During the assessment, key people involved in the situation need to be identified. Complaints may involve multiple individuals or sites across VEI. It is important that early communication occurs with all parties involved to enable effective investigation of the complaint. It is important to remember that principles of procedural fairness must be followed during the management process.

5.2.2.3 Addressing the complaint

After assessment, a decision must be made as to how the complaint will be managed. Options may include:

- Providing information, an explanation or an apology to the person making the complaint.
- Meeting with the person making the complaint to discuss the matter further.
- Gathering additional information in relation to the complaint.
- Referring the matter to the appropriate person to deal with that type of complaint.
- Investigating the allegations made in the complaint.

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 8 of 17



5.2.3 Investigating Complaints

Not all complaints will require an investigation. Some can be resolved without it. The process undertaken will depend on the nature of the complaint.

Investigations will require a fact-finding process in order to determine the facts of the complaint and what action might be appropriate. The steps in the investigation process may include:

- Clarifying issues for investigation
- Determining applicable legislation/policy/standard/procedures
- Preparing an investigation plan
- Collecting relevant information (medical records, rosters, documentation, policies)
- Identifying relevant witnesses and suitable order of interviews
- Developing questions for key witnesses
- Conducting interviews as appropriate or obtain statements
- Analysing and review information obtained
- Preparing an investigation report

5.2.3.1 Clarify the allegations and the issues to be investigated

It is important to clarify the allegations and ascertain if the complaint has arisen from personal agendas rather than from issues related to standards or conduct. For example, a personal dimension may include revenge. Another factor may be family conflict. All these will have a bearing on the nature of the complaint or what is being sought in response to the complaint.

5.2.3.2 Information collection

Once the required information and the manner of its collection has been identified, the investigator then gathers the pertinent data as per the plan. It is at this stage that any identified respondents are requested to provide a response to the complaint. Any further action will depend on the nature of the response and information received.

Analysis of the information collected is an ongoing process during the investigation and is a critical component of adequate investigations.

After information has been gathered it has to be evaluated. This includes identifying:

- what can be agreed upon between the parties
- what facts are in dispute
- whether there is sufficient information to determine whether particular standards have been met
- whether there are inconsistencies
- whether there is independent verification
- what systemic and performance factors led to the outcome.

5.2.3.3 Complaint documentation

All written and verbal complaints / concerns or suggestions for improvement are to be recorded in RiskMan using the Feedback template provided. All relevant documents must be added to the template to ensure a complete record is retained. At minimum, and as part of the investigation section of the template, the issues arising, and actions taken to address must be documented.

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 9 of 17



5.2.4 Resolving Complaints

At the end of the investigative stage, the parties to a complaint are advised about the outcome. Correspondence should set out the status of the complaint.

5.2.4.1 Possible outcomes

Depending on the nature of the complaint, the decision about the outcome of the complaint may be made by a manager, senior executive or the Chief Executive of the organisation.

The person managing the complaint will recommend an appropriate outcome after consideration of the available information. The person making the complaint will be advised that the matter has been finalised.

5.2.5 Finalising the Complaint

Possible outcomes of a complaint process may include:

- Offering an apology
- Offering a face to face meeting for the person making the complaint with relevant people
- Waiving fees
- Making changes to a policy/procedure, process, or system where appropriate
- Providing training and education to staff
- No further action.

The target timeframe for finalising complaints is 35 days from the date of assessment of the complaint. Some complaint issues may require a more urgent response or involve statutory timeframes. A speedy response can be valuable in gaining acceptance of the outcome of a complaint.

Where a complaint is more complex and cannot be resolved within the target timeframe, the person managing the complaint is responsible for providing regular updates (via phone, email or letter as agreed with the person making the complaint).

Except when a complaint is resolved at the first interaction, it is a requirement that the complainant be notified about the finalisation of the matter in writing.

Less serious complaints may require an email rather than more formal written correspondence. For all complaints, the correspondence must come from an appropriately senior staff member at the site.

For more serious complaints that are complex, or deal with distressing issues, the correspondence may need to come from the appropriate member of the ELT. The site manager shall discuss the best plan with their ELT representative.

5.2.5.1 Delays in finalising a complaint

Where a complaint is unable to be resolved within 35 days, regular communication with the person making the complaint becomes important in preserving the person's confidence in the process.

A detailed progress update must be sent, including:

- An apology for the delay
- An explanation for the reasons for the delay
- An expected timeframe for when the complaint will be finalised.

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 10 of 17



5.2.5.2 After the complaint is finalised

It is important to provide feedback to staff about finalised complaints. Participation in feedback ensures staff are aware of issues, and through learning from the experience, can avoid repetition of problems.

The manager must ensure that the actions taken in managing the complaint are appropriately documented and that complaints data is available for reporting to ensure transparency and accountability.

Any systemic issues that arise as a result of a complaint are to be considered, acted upon, and shared with other VEI sites if relevant.

5.3 Unresolved Complaints

Where a person making a complaint is not satisfied with the outcome of their complaint or the way in which the complaint was managed, sometimes this can be addressed via offering a meeting to discuss their concerns and clarify any outstanding issues or miscommunication. People making complaints are to be advised of their option to request a review by another senior staff member of the organisation.

5.3.1.1 Re-opening a complaint

A complaint may be re-opened, or a related complaint management process commenced, where the person making the complaint has made a second complaint raising additional issues. This is not the same as an unresolved complaint, which relates to substantially the same issues.

It may be necessary to commence an investigation of the new issues. Where a person making a complaint claims to have new issues, but is actually reframing the original issues, this will be identified during the assessment process and recorded as an unresolved complaint.

5.4 Complaints Received via Social Media or Other Online Means

Complaints received via VEI managed social media platforms are valid and should be captured and managed. There are several strategies to be implemented. Where complaints are received via social media the marketing team will advise the clinic or day surgery manager and will draft an appropriate response.

5.4.1 Respond quickly

The faster the response, the more VEI shall be viewed as compassionate, professional, and proactive. It is important to remember that resolving the issue on first contact is not always achievable, however; it is critical that VEI engages with the complainant openly.

5.4.2 Respond Personally

Using the consumer's name wherever possible is a good idea. Thanking the complainant for leaving their valuable feedback and acknowledging their dissatisfaction is important. Additionally, we need to ensure they understand that VEI values complaints and feedback and views them as an opportunity to improve.

5.4.3 Move to a Private Conversation

Once the initial interaction has occurred publicly, it is important that further discussions are held privately. Advise the complainant we will contact them to discuss the matter in person, via telephone or

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 11 of 17



email (if we can identify them as a patient) or, invite the complainant to contact us directly if we cannot reconcile their online identity with the patient database.

5.4.4 Responding to Google Reviews

Responding to negative online reviews not only supports trust building, but it can also provide an opportunity to demonstrate our professionalism and show our customers how much we care. The following steps are undertaken during the process:

- Respond in a timely manner
- Stay professional and courteous
- Understand the customer's experience before responding
- Acknowledge their dissatisfaction
- Offer to talk it over
- Show authenticity and genuineness

5.5 Unreasonable conduct by a person making a complaint

Unreasonable conduct is behaviour, which because of its nature and frequency, raises substantial health, safety, resource, or equity issues for those involved. Using the term 'unreasonable conduct' allows us to focus on the problematic behaviour, rather than labelling individuals as difficult, challenging, or vexatious.

Unreasonable conduct does not mean that the person making the complaint has not raised a valid issue. Unreasonable conduct may involve persistence, demands, behaviour, lack of cooperation or arguments which are beyond reasonable expectations. It may involve any combination of the above conduct.

This type of conduct can prove extremely challenging to manage and individuals managing this conduct will require additional support from the ELT. Effective complaint management processes are essential to resolving complaints and reducing dissatisfaction from people making complaints. These processes become particularly important when managing people who are persistent in making complaints, or who engage in unreasonable conduct.

A person making a complaint has the right to pursue their complaint until it is resolved to their satisfaction. However, there are reasonable limits in terms of dealing with continued contact and correspondence about issues which have been dealt with.

Sometimes a face to face meeting can assist with resolving recurrent concerns, particularly in situations where the person making the complaint is willing to engage in a positive exchange of views about the issues.

5.6 Ongoing Obligations

5.6.1 Performance Indicators

VEI expects that the following performance indicators are met by all sites in relation to complaints management:

- Acknowledgement of the receipt of each complaint within five calendar days (Benchmark 100%)
- Finalise the outcome of each complaint and advise person making the complaint of outcome within 35 calendar days (Benchmark 80%)

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 12 of 17



Unresolved complaints - the proportion of complaints received where interaction with a person
making a complaint has not ceased following finalisation of the complaint, the complainant
remains dissatisfied, and the matter has been reviewed or escalated.

5.6.2 Record keeping

The person managing the complaint is responsible for ensuring that appropriate records are maintained during the management of the complaint. All complaints are to be recorded in RiskMan.

This will include copies of correspondence, memos, briefs, and file notes recording telephone conversations and other interactions.

Complaint records will not be kept with a patient's health care record.

Records will be maintained in accordance with the appropriate state-based regulations.

5.6.3 Confidentiality

VEI staff have ongoing responsibilities to maintain confidentiality about the complaint process, including after the complaint has been finalised. This requires everyone involved in the complaint to ensure that personal or identifying information about the complaint is restricted to those who genuinely need to know as part of their role. It may not be necessary or appropriate to include details about a complaint in a patient's medical record.

5.7 Escalation of a Complaint to a Third-Party

If the complaint is not resolved to the complainants satisfaction, it can be escalated to a third-party. The following list provides details of organisations and their contact details that may be referred to.

Organisation	Overview	Website
Office of the Australian Information Commissioner (OAIC)	Deals with complaints relating to privacy	www.oaic.gov.au
Australian Human Rights Commission (AHRC)	Deals with complaints about discrimination and human rights	www.humanrights.gov.au
Australian Health Practitioner Regulation Agency (AHPRA) - Complaints	Deals with complaints about registered health practitioners	www.ahpra.gov.au
NSW - Health Care Complaints Commission (HCCC)	Deals with complaints about health service providers – organisations, registered health practitioners and non- registered health practitioners	www.hccc.nsw.gov.au
VIC – Health Complaints Commissioner (HCC)	Deals with complaints about health service providers – organisations, registered health	www.hcc.vic.gov.au

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 13 of 17



	practitioners and non- registered health practitioners	
QLD – Office of the Health Ombudsman (OHO)	Deals with complaints about health service providers – organisations, registered health practitioners and non- registered health practitioners	www.oho.qld.gov.au
SA – Health and Community Services Complaints Commissioner (HCSCC)	Deals with complaints about health service providers – organisations, registered health practitioners and non- registered health practitioners	www.hcscc.sa.gov.au

Some complainants may also seek independent legal advice from a solicitor as an alternative avenue for resolution.

5.8 Key Responsibilities in the Complaints Management Process

Effective complaint management requires a whole-of-organisation approach with clear points of accountability for reporting and feedback, as follows:

Vision Eye Institute Board has ultimate responsibility for:

- Ensuring a system is in place for responding to complaints.
- Reviewing reports on complaint trends and issues.

Executive Leadership Team is responsible for:

- Receiving reports outlining complaints received and outcomes.
- Reporting to the Board and other Committees as required.
- Encouraging an environment where complaints are handled seriously and thoroughly.
- Ensuring an effective Complaint Management System is developed and in place
- Ensuring appropriate resources are available and utilised for effective complaint management.
- Ensuring appropriate actions are implemented to eliminate or minimise similar problems from occurring.
- Ensure the Complaints Management System is incorporated into the organisation's Quality Management System.

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 14 of 17



All Staff are responsible for:

- Understanding and complying with Vision's Complaints Management System, including ensuring any complaint they receive is reported and addressed.
- Participation in complaints management processes under the direction of management staff.

Consumers and Community Members are responsible for:

 Consumers, carers, and community members making a complaint about a VEI service will be expected to work with VEI to address the complaint.

6 Responsibilities

6.1 Compliance, monitoring, and review

The Company Secretary in conjunction with the National Quality and Risk Manager is responsible for ensuring that this policy:

- aligns with relevant legislation, government policy and/or VEI requirements/strategies/values
- is implemented and monitored (i.e., the policy and procedure is followed, reflects the changing policy environment, and emerging issues are identified), and
- is reviewed to evaluate its continuing effectiveness (e.g., achieving its purpose, remains relevant/current).

6.2 Reporting

All complaints are to be recorded in the Incident management System – RiskMan. For more detail, refer to Section 5.5.2. Reports are tabled for discussion at relevant committee meetings.

6.3 Records management

Staff must maintain all records relevant to administering this policy and procedure in a recognised VEI recordkeeping system

7 References

Name/Link	Source
Complaints Management Handbook for Health Care	ACSQHC
Services	
Complaint Management Guidelines	NSW Health
Complaints Management Guideline	WA Health
Complaint Handling Standards	VIC Health Complaints Commissioner
ISO 10002:2014 A/NZS - Complaint Management	SAI Global

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 15 of 17



8 Grievance Resolution

Any employee grievance arising from the implementation of this policy may follow the usual resolution process outlined in the Employee Grievance Policy.

9 Policy Amendment

The organisation reserves the right to amend any policy and/or procedure without notice.

Requests for changes or improvements to this policy/procedure shall be forwarded to the Document Owner identified on the front cover of this document.

Changes to this procedure must be approved by the position/committee with approval authority as identified on the front cover of this document.

10 Risk Rating

Extreme	Reviewed bi-annually
High	Reviewed annually
Medium	Reviewed every two years
Low	Reviewed every three years

11 Consequence of Breaching this Policy

Non-compliance with any component of this policy will be treated seriously and, depending on the circumstances, performance management processes may be implemented.

12 Appendix

1. Actions When Taking a Complaint

13 Revision History

Version	Date Approved	Approved by	Amendment
7	November 2022	ELT	New template. Significant updates to policy to provide more stringent guidelines for stakeholders to follow when managing a complaint.

1.1.13	Authorised by: ELT		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 16 of 17



APPENDIX 1 – Actions When Receiving a Complaint

When receiving a complaint or concern, remember – be **STELLAR**:

- **S STOP** before you speak
- TAKE TIME don't rush the person. Allow them to express their thoughts.
- **E EMPATHY** have empathy for the person's situation
- L LOW keep the tone and pitch of your voice low
- L LISTEN actively acknowledge what is being said by saying "I see" or "mmm"
- A ACCEPT what is being said- don't counter or disagree
- **R RESPECT** be respectful in your communication

Key PHRASES:

- o I can see why you feel that way
- o I see what you mean
- o That must be upsetting
- o I understand how frustrating that must be



Look for Solutions	if you can, make sure you offer to remedy the situation
Take Notes	having a good amount of detail enables effective investigation and is the basis for any action
Ask	what does the person want to see actioned from raising their concerns?
Escalate	it may be necessary to escalate the complaint to a manager.

And most importantly, ensure the complaint is entered in the Incident Management System, RiskMan.



1.1.13	Authorised by: ELI		Author: NQRM
Version 7	Reviewed: November 2022	Next Review Due: November 2024	Page 17 of 17