

Policy Name		Policy Number
Complaints		3.05
Manual Section		Version
Participants and Programs		2
Date Endorsed: May 2010	Date Reviewed: July 2020	

**Policy:**

- 1.1 “Participant(s)” relates to a participant(s) or may include the participant’s family, guardian or advocates who are advocating on behalf of the participant.
- 1.2 Participants of Sharing Places are encouraged to use their inherent right to lodge complaints about any matter related to their participation within the service. The complaints process ensures confidentiality for all parties concerned.
- 1.3 For the purpose of this document a complaint is considered to be something more serious than the day-to-day problems which arise in any organisation and which are normally resolved through informal channels.
- 1.4 The Board appreciates your assistance in resolving any concern or complaint as they arise, as continued good will and partnership amongst all stakeholders in Sharing Places will ensure a high quality service for the participants.
- 1.5 All feedback and complaints will be incorporated into the continuous improvement processes for the organisation and, as such, will be reviewed by the Board and Executive Director for consideration and action.
- 1.6 Sharing Places’ Complaints Policy is based on the principles of natural justice which include that:
  - a person affected by a decision be fully informed of all the facts against them;
  - a person affected by a decision is given the opportunity to be heard;
  - the decision-maker acts fairly and without bias.
- 1.6 Any consequential action is to take place as soon as possible.

### Procedure:

- 2.1 The complaint can be lodged in writing to the Executive Director or the Chair of the Board. The complaint will be accepted and formally acknowledged in writing by the Executive Director/Chair. Alternatively, a Complaints Form may be completed, with assistance, if required. This form includes an outline of issues and is signed by the participant and/or their advocate/s.
- 2.2 In consultation with the person/s lodging the complaint, an assessment will be made as to whether the complaint can be dealt with at the organisational level, or forwarded to the ACT Human Rights Commissioner. The Human Rights Commission can be contacted via their website at [www.hrc.act.gov.au](http://www.hrc.act.gov.au), or via email at [human.rights@act.gov.au](mailto:human.rights@act.gov.au), or by telephoning (02) 6205 2222.
- 2.3 Alternatively, complaints can be made director to the NDIS Commission, which is an independent agency established to improve the quality and safety of NDIS supports and services. The NDIS Commission can be contacted via their website at [www.ndiscommission.gov.au](http://www.ndiscommission.gov.au), or via telephoning 1800 035 544.
- 2.4 If agreement is reached to resolve the complaint at the organisational level, a meeting is arranged to identify the issues and desired outcomes and to develop an action plan that addresses the issue/s raised in the complaint.
- 2.5 If the participant lodging the complaint does not have access to an advocate, Sharing Places will, upon request, contact an independent advocate from either ADACAS, Advocacy for Inclusion or some other independent complaint resolution body.
- 2.6 The outcomes will be recorded in writing and copies given to all parties concerned. Confidentiality regarding the nature and outcome of the complaint will be on a “needs to know basis” and the complainant will be notified as to who else will be informed.
- 2.7 Participants are assured that the lodging of a complaint(s) by them and/or their advocates or providing feedback is encouraged, and will not have any adverse affect on their placement and treatment within Sharing Places.
- 2.8 If the complaint can not be resolved at the organisational level, either party has the option to have the matter referred to and dealt with by the ACT Human Rights Commissioner.
- 2.9 Members of the Board and Employees of Sharing Places are obligated to inform the Executive Director and/or the Chair, of any complaint(s) raised, when approached directly by a participant, carer and/or advocate.

- 2.10 The Executive Director will maintain records and provide regular reports to the Board on the number, type and outcome of complaints received. All formal complaints received will be stored in a locked file, marked “confidential”.
- 2.11 All officially lodged complaints will be followed up by the Executive Director after three months and feedback on the effectiveness of this procedure is encouraged.

**Responsibility:**

Executive Director  
Senior Manager – Participants and Programs  
Board Chair

**Relevant Forms:**

- Complaints form
- Continuous Improvement Register

**Related Policies:**

- Rights and Responsibilities
- Equity and Diversity
- Privacy and Confidentiality
- Disability Discrimination ACT 1992

## COMPLAINT/FEEDBACK FORM

If you need help to fill in this form please phone (02) 6290 1964 or ask the administrative staff.

### Person Making the Complaint/Providing Feedback (optional)

Title: ..... Surname: ..... First Name: .....

Address: .....

Suburb: ..... Post Code: .....

Telephone: (BH) ..... Alternate No: .....

(AH) ..... Fax No: .....

If you are the person who received the service you do not need to answer the questions on page 3.

Signature of person making the complaint: ..... Date: .....

### Complaint/Feedback

Please describe your complaint/feedback. Include information about the events leading up to the complaint/feedback, what happened and who was involved. Please attach any relevant documentation.

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What outcomes would you like to see eventuate from lodging the complaint/providing the feedback?

1. ....
- .....
2. ....
- .....
3. ....
- .....

**Please fill out this page only if the person making the complaint/providing feedback is not the person who received the service.**

Who was the person who received the Service?

Title: ..... Surname: ..... First Name: .....

Address: .....

Suburb: ..... Post Code: .....

Telephone: (BH) ..... (AH): .....

Date of Birth: ...../...../.....

What is your relationship to the person who received the service?

- Legal Guardian
- Other, please specify \_\_\_\_\_