

# Feedback and Resolution Procedure

## Version 9.1

Procedure Number	PRO-88
Procedure Name	Feedback and Resolution Procedure
Procedure Area	Governance
Procedure Owner	Chief Executive Officer

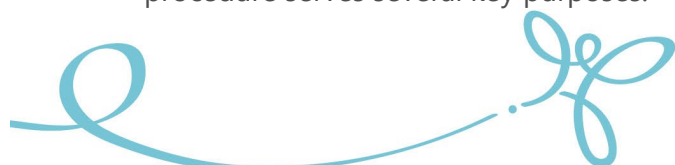
### Introduction

Richmind WA (RW) provides an environment where individuals, consumers, families, carers, and organisations engaged with its services or affected by its operations have the right to voice their concerns and lodge feedback. The organisation is committed to addressing feedback in a manner that upholds principles of access, equity, fairness, accountability, and transparency. As an organisation, we strive to deliver high-quality services, and value any feedback that can contribute to the organisation's continuous improvement. We welcome not only feedback but also compliments and recognition of its services, as we acknowledge the importance of consumer and stakeholder feedback in shaping our operations and expressing gratitude to those who provide valuable input.

By promoting a culture of open communication, RW aims to ensure that all individuals feel heard and respected. It encourages the sharing of experiences, opinions, and suggestions to foster a positive and collaborative relationship between the organisation, consumers, and stakeholders. RW is committed to taking appropriate actions to address feedback, implement improvements, and enhance its services based on the valuable feedback received. This commitment reflects its dedication to providing the highest standards of care and service delivery while maintaining accountability and transparency throughout the process.

### Purpose

The purpose of Richmind WA's feedback and resolution procedure is to establish a structured and systematic approach for receiving, managing, and resolving feedback, complaints, and concerns raised by consumers, participants, family members, carers, external stakeholders, and the public. This procedure serves several key purposes:



- **Accessibility:** It ensures that consumers or stakeholders have a clear and accessible avenue to provide feedback, raise concerns, or lodge complaints about the services, operations, or actions of an organisation. It promotes an environment of open communication and encourages active participation.
- **Accountability:** The procedure holds the organisation accountable for addressing and resolving feedback, complaints, and concerns in a fair, transparent, and timely manner. It sets clear expectations for the organisation to take responsibility for its actions or shortcomings and to learn from them.
- **Continuous Improvement:** By providing a structured process for feedback and complaints, the procedure facilitates the identification of areas that require improvement within the organisation. It allows for the collection of valuable insights, enabling the organisation to learn from feedback and make necessary adjustments to enhance its services, processes, or policies.
- **Consumer and Stakeholder Satisfaction:** The procedure aims to ensure that consumer concerns are addressed adequately, promoting consumer and stakeholder satisfaction. It demonstrates the organisation's commitment to valuing and responding to the needs, opinions, and experiences of those it serves.
- **Resolution:** The procedure outlines the steps and mechanisms for investigating, resolving, and providing appropriate redress for valid complaints or concerns. It helps in reaching a resolution that is fair, just, and mutually acceptable to all parties involved.
- **Organisational Reputation:** A well-implemented feedback and resolution procedure can contribute to maintaining and enhancing the organisation's reputation. By actively addressing feedback and complaints, an organisation demonstrates its commitment to quality, consumer satisfaction, and continuous improvement, fostering trust and confidence among consumers and stakeholders.

Overall, the feedback and resolution procedure serves as a framework for managing and addressing feedback, complaints, and concerns effectively. It promotes transparency, accountability, and improvement, ultimately contributing to the organisation's success and the satisfaction of its consumers and stakeholders. All persons will be informed of their rights and responsibilities with regards to complaints and appeals at the earliest possible stage of their involvement with the organisation (including NDIS participants).

## Scope

Feedback from all consumers, participants, family members, carers, external stakeholders, and the public is welcome. We recognise the unique needs of individuals from groups such as those with a lived experience of mental distress, Aboriginal and Torres Strait Islanders, culturally and linguistically



diverse communities, those of different ages and abilities, social class, ethnicity, gender, and people who identify as LGBTI.

The information is used to monitor and enhance our service delivery, as part of our commitment to improve the care we provide to our community.

## Procedure

Any person wishing to provide feedback may do so verbally or in writing via the following methods:

- Through any staff member
- By contacting the Quality and Compliance team on 08 9350 8800
- By emailing the feedback to [feedbackandcomplaints@rw.org.au](mailto:feedbackandcomplaints@rw.org.au)
- Submitting a completed Feedback and Complaints form via email to [feedbackandcomplaints@rw.org.au](mailto:feedbackandcomplaints@rw.org.au)
- Submitting a completed online feedback and complaints form which can be found at <https://www.rw.org.au/feedback/>
- A hard copy of the feedback and complaints form can be found on the website at <https://www.rw.org.au/feedback/>

## Managing Feedback

Feedback received (either verbally or in writing) are sent to the Feedback Officer or the Quality and Compliance team at [feedbackandcomplaints@rw.org.au](mailto:feedbackandcomplaints@rw.org.au). All Feedback will be managed as follows:

1. Feedback received via [feedbackandcomplaints@rw.org.au](mailto:feedbackandcomplaints@rw.org.au) for processing or directly into Assurance if submitted using the electronic form.
2. The Feedback is triaged by the Feedback Officer or Quality and Compliance Team into Assurance.
  - a. The complainant will receive a system generated response acknowledging receipt to their nominated email address (if provided).
  - b. Where no email address is provided the Feedback Officer or Quality and Compliance Team will contact the complainant via telephone to acknowledge receipt of their complaint.
  - c. Feedback is assigned a Severity Assessment Measure (SAM) as required.
  - d. If an investigation is required, the SAM rating determines the person/s responsible for investigating and responding to the feedback (see Annex A).
3. All person/s responsible for investigating a complaint will be assigned a checklist for completion, detailing the investigation findings, degree of likelihood, any actions required and the outcome.



4. The person/s responsible for investigating a complaint must ensure the complainant is kept informed of the progress of the complaint, including:
  - a. Any action taken.
  - b. The reasons for decisions made.
  - c. options to have decisions reviewed.
5. All electronic feedback responses are sent from the Feedback and Complaints inbox.
6. Dependent on the SAM rating, the feedback may require approval prior to closure by the relevant Senior Manager/General Manager or Senior Leadership Team member.



All written responses to feedback are centrally managed and must be shared with the Feedback Officer or Quality and Compliance team by the person/s responsible for investigating the complaint at [feedbackandcomplaints@rw.org.au](mailto:feedbackandcomplaints@rw.org.au) for approval and distribution to the complainant.

## Consumer Interviews

The investigation of some complaints may require staff to interview consumers/participants who may have been involved in or witnessed an incident. Staff may use the Consumer Interview Template within this procedure (Annex C) and submit this with their investigation checklist in Assurance.

Consumers/participants are to be advised that they may bring a support person to the interview if they would like. The support person may be any person/s not associated with the incident. Witnesses, co-residents, and service staff involved in the incident are not eligible to act as support person/s for the interview process.

## Specialist Support for Complainants

- All consumers, participants, carers, or family members who require additional mental health supports throughout the Feedback process may request so at any time.
- We will also provide specialist supports where possible.
- These specialist supports include access to the Carers and Family Reference Group (CaFRG), the LGBTI Champion or the Aboriginal Cultural Leads and Elders. These requests are to be made to the Feedback Officer or Quality and Compliance Team by emailing [feedbackandcomplaints@rw.org.au](mailto:feedbackandcomplaints@rw.org.au) or calling 08 9350 8800.



## Time Frames for Feedback and Resolution Responses

- All feedback will be acknowledged within one business day.
- All feedback will be investigated.
- Feedback on the investigation will be provided no later than 30 calendar days from when the complaint was made.
- Initial response recommended timeframes are as detailed below.

These do not indicate timeframes for feedback closures but guide initial responses only.

Where timeframes cannot be met, you must notify the Feedback Officer or Quality and Compliance team, so that they may facilitate an update on the progress and projected resolution timeframe to the complainant and relevant Senior Manager/General Manager or Senior Leadership Team (SLT) member.

Time Frame Guide	Feedback or Complaint Type
Within 24 hours	<ul style="list-style-type: none"> <li>• Any feedback or complaint that may have a significant impact on the wellbeing of an individual or community member or may result in the loss of tenure or accommodation.</li> <li>• Any feedback or complaint that relates to a notifiable incident.</li> </ul>
Within 72 hours	<ul style="list-style-type: none"> <li>• Issues of professional conduct (staff or representatives of RW).</li> <li>• Communication regarding access or entry to RW services or support.</li> <li>• Any issue pertaining to physical or environmental surrounds, relating to RW offices or residential services.</li> </ul>
Within 7 days	<ul style="list-style-type: none"> <li>• Any matter that is financial in nature.</li> <li>• Any issue that relates to the current quality of care or support an individual is receiving.</li> </ul>
Within 14 days	<ul style="list-style-type: none"> <li>• Any administrative or records management error.</li> </ul>
Within 30 days	<ul style="list-style-type: none"> <li>• Any feedback or complaint that is historical in nature, that does not involve any of the previously mentioned points.</li> </ul>

## Degree of Likelihood Ratings

All person/s responsible for investigating feedback will be assigned a checklist for completion.

- Detailing the investigation findings, degree of likelihood, any actions required and the outcome.
- The degree of likelihood rating enables investigating staff to determine, based on the evidence available, the likelihood of the contents of feedback having occurred.



- We acknowledge that there will not always be sufficient evidence to definitively support or oppose the contents of feedback received.
- The degree of likelihood rating allows the investigating staff to make an assessment based on the information available. This assessment will then be received by the Feedback Officer or Quality and Compliance team and may also require approval by the relevant Senior Manager/General Manager or SLT member.

## Staff Complaints and Misconduct

All complaints from consumers/participants or external stakeholders relating to staff, contractors or representatives is to be provided to the Feedback Officer or Quality and Compliance Team via email to [feedbackandcomplaints@rw.org.au](mailto:feedbackandcomplaints@rw.org.au).

If Feedback is received relating to accusations of misconduct against staff or on becoming aware of an incident of misconduct, staff must:

- Send the complaint or feedback to the Complaints Officer or Quality and Compliance team at [feedbackandcomplaints@rw.org.au](mailto:feedbackandcomplaints@rw.org.au).
- Inform their Manager/Team Leader, Senior Manager/General Manager and People & Capability.
- Review PRO-88 Feedback and Complaints procedure.
- Based upon the Severity Assessment Measure (SAM) rating assigned to the complaint/accusation, a People and Capability representative or panel will be assigned to perform an investigation of the conduct and the employee's involvement.

Immediate actions may include (but are not limited to):

- Suspension or relief of duties with or without pay.
- Placement on alternative duties.

Misconduct involves an employee deliberately behaving in a way that is inconsistent with continuing their employment. Examples include but are not limited to:

- Causing serious and imminent risk to the health and safety of another person or the reputation or profits of their employer's business
- Theft or fraud
- Assault
- Sexual harassment
- Refusing to carry out lawful and reasonable instruction that is part of the job.
- Negligence or abuse



Further information on accusations and complaints against staff see PRO-46 Performance Management Procedure.

Please note that all complaints relating to staff, contractors or representatives will remain confidential within the limits of the law.

Any complaints made by RW staff, against other staff members or RW representatives must follow PRO-64 Grievance Procedure or PRO-109 Bullying, Harassment and Sexual Harassment Procedure.

## Vexatious Complaints

Vexatious and malicious complaints can be very difficult to identify. Largely, this must be a matter of professional judgement for the manager/team leader. However, once identified, such complaints should be addressed as soon as possible.

Correspondence to the organisation containing personal abuse, inflammatory statements or material clearly intended to intimidate will be returned to the sender and not acted upon. Where such comments or statements are made in telephone conversations or interviews, these may be terminated at the discretion of the relevant manager/team leader after warning callers of that intention.

If a complainant continues to lodge vexatious complaints, by the third documented occurrence these will be either referred to the Health and Disability Complaints Office (HaDSCO) for resolution (if appropriate) or the relevant GM or SLT member may decide to advise the complainant that communications on the matter are finalised, and no further responses will be sent. Any further complaints received pertaining to these matters from the complainant will be closed off with no response required. If the complainant makes any threats, these will be referred to the Police.

## Lodging an Appeal

Individuals and/or their advocates may lodge an appeal if they disagree with a decision made by the organisation.

Individuals and/or their advocates may also access external Advocacy feedback and complaint handling services such as HaDSCO, Mental Health Advocacy Service (MHAS), Complaints Ombudsman, Mental Health Commission, or the National Disability Insurance Scheme (NDIS) Commission, to support the review of the way in which a feedback or complaint has been handled and resolved.





## Feedback Officer

The Feedback Officer responsibility is a component of the General Manager Quality, Governance and Risk role. The Feedback Officer may use their discretion to escalate feedback, outside of the SAM rating matrix, to the SLT as required.

According to the Complaints Ombudsman of Western Australia, a Feedback Officer will:

- Have the skills to act with sensitivity, be objective and impartial.
- Have knowledge of, and be able to advise on, all aspects of the organisations' internal complaint procedures and be trained to receive, investigate, and deal with complaints about the organisations' services.
- Have access to adequate privacy to ensure the complainant's confidentiality is maintained and appropriate information technology equipment.
- Access to the organisations' complaint handling database and reference material.
- Not directly involved in the subject matter of the complaint and raise the matter with the Chief People and Brand Officer, if such an issue arises.
- To assist in the formulation of a written complaint for complainants who require additional assistance.
- Access to staff at all levels of the organisation to resolve complaints quickly.
- Clearly defined power to act and provide redress to complainants or to refer the matter to someone who has this power.

## Reporting and Escalation

The organisation will report and escalate any matters of assault, sexual assault, criminal behaviour/crime, abuse, or death, if required by law or legal compliance. A delegate from Richmind WA will contact relevant emergency services.

## Training

Following the completion of the Feedback and Complaints training, staff will be expected to ensure that they are familiar with the contents of the associated policy and procedure, including their location and if they not feel confident in any of the content, they should seek assistance from their manager or team leader.

## Breaches of Procedure

Breaches or failure to follow the instructions provided will be referred to the People and Capability for performance management.





## Related Documents

- POL-37 Feedback and Complaints Resolution
- Feedback and Complaints Form
- Employee Grievance Resolution Policy and Procedure
- POL-36 Quality and Continuous Improvement Policy
- PRO-67 Quality and Continuous Improvement
- RW Diversity Statement
- PRO-62 Retention and Disposal of Records

## Supporting Information

- Disability Services Act 1993
- Guidelines for Handling Complaints about Mental Health Services 2018
- National Disability Insurance Scheme Act 2013
- National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018
- National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018
- National Disability Insurance Scheme Procedural Fairness Guidelines 2018
- National Standards for Disability Services
- National Standards for Mental Health Services
- Licensing and Accreditation Regulatory Unit (**LARU**)
- Privacy Act 1988



- QIC Health and Community Services Standards
- Standards Australia Complaint Handling Standard As 4269-1995



## Review Timeframe and Responsibility

Date of effect:	7 February 2008
Review Period:	3 years
Next review date:	May 2027
Prepared by:	GM Quality Governance and Risk & Quality and Compliance Manager
Preparation date:	5 <sup>th</sup> May 2024
Reviewed by:	GM Operations Group and Chief Operations Officer
Reviewed date:	5 <sup>th</sup> May 2024
Last reviewed by Consumer and Family Reference Group:	June 2023
Approved by:	Chief Executive Officer
Approval date:	5 <sup>th</sup> May 2026

Once PRINTED, this is an UNCONTROLLED DOCUMENT - Refer to SharePoint for latest version.



## Annex A: Severity Assessment Measure Rating System

INSIGNIFICANT	MINOR	MODERATE	MAJOR	EXTREME
Not associated with any incident.	Potentially associated with SAC 3 incident	Potentially associated with SAC 3 or SAC 2 incident	Potentially associated with SAC 2 or SAC 3 incident	Associated with SAC 1 incident
Investigated and responded to by relevant SM/TL. No further approvals required.	Investigated and responded to by relevant SM/TL. All findings reported to SRM/GM and response approved by SRM/GM.	Investigated and responded to by relevant SRM/GM and reported to relevant SLT member. Response approved by relevant SLT member.	Panel formed consisting of SRM/GM, SM/TL, Q&C representative, GM SQJ, and P&C representative (if related to staff conduct). Findings reported to SLT, and response approved by SLT.	SLT escalates to board for direction (internal or external investigation). Internal investigation conducted by panel consisting of SRM/GM, SM/TL, GM SQJ, Q&C representative, and P&C representative (if related to staff conduct).
Initial complaint recorded in Assurance. All responses sent via feedback and complaints inbox and recorded in Assurance.	Initial complaint recorded in Assurance. All responses sent via feedback and complaints inbox and recorded in Assurance.	Initial complaint recorded in Assurance. All responses sent via feedback and complaints inbox and recorded in Assurance.	Initial complaint recorded in Assurance. All responses sent via feedback and complaints inbox and recorded in Assurance.	Initial complaint recorded in Assurance. All responses sent via feedback and complaints inbox and recorded in Assurance.
Consumer: Trivial, vexatious, or misconceived complaint. No injury to consumer or impact on level of care required.	Consumer: No impact on or risk to the provision of recovery or the organisation. Feedback/complaint easily resolved at the frontline. Gaps identified in service delivery (however no injury sustained). Consumer may have required a temporary increased level of care due to the event.	Consumer: Significant gaps identified within service delivery. Formal feedback and complaint raised requiring a formal response from a nominated GM (dependent on the content of the complaint). Consumer has required a temporary increased level of care due to the event.	Consumer: Significant issues of standards, quality of care, or denial of rights are identified. Feedback/complaints with clear quality assurance or risk management implications or issues causing lasting harm. Requires investigation panel and findings reported to the SLT for remedial actions.	Consumer: Issues regarding SAC1 incident, long-term damage, gross negligence or involving a death. Requires panel investigation and findings reported to the board for approval. Remedial actions implemented by SLT.
Staff conduct: Low impact procedural breach. Evidence of good faith by degree of care/diligence. Little impact to consumer and service delivery.	Staff conduct: Minor breach resulting in minimal harm or adverse impact on recovery or service delivery. Evidence of good faith arguable.	Staff conduct: Evidence of conscious breach. Lack of good faith evident. Performance review required. Minor misconduct established.	Staff conduct: Deliberate breach or gross negligence. Significant harm. Formal investigation. Disciplinary action. Serious misconduct.	Staff conduct: Serious and wilful breach. Criminal negligence or act. Litigation or prosecution with significant penalty. Possible grounds for dismissal. Ministerial involvement. Criminal misconduct
<b>All feedback relating to staff behaviour are also sent to People &amp; Culture once processed by Quality &amp; Compliance</b>				

## Annex B – Feedback Response Template

Insert Date

Dear XX,

**Introduction:** Use the introduction of the complaint response to thank the complainant for their time, any meetings they have participated in, information they have provided and re-state the organisations position on feedback.

For example, *“Thank you for taking the time to meet with me in person on XXXX. This meeting was to seek some clarification regarding the feedback you provided to our Feedback and Complaints team on XXXX. I would also like to thank you for taking the time contact to Richmind WA and provide your feedback in relation to your experience with the XXXX service. Feedback is important to us and allows the organisation an opportunity to review and improve our programs and services.*

*In addressing your feedback, I will first revise the context and background you have provided and then address each of the points you have raised individually.”*

**Background:** Use the first body paragraph of the response letter to summarise the feedback that the complainant has provided and then provide guidance on how the rest of the response letter will be formatted.

For example, *“You first accessed Richmind WA services on the XXXX, during your stay at XXXX you reported that staff supported you in applying for XXXX, which you felt could assist you in achieving your longer-term recovery goals. Following your acceptance to the XXXX, you remained in that service for approximately XXXX, exiting the service on the XXXX.*

*I have reviewed the information you provided prior to our meeting on the XXXX and advised you that through this process XXXX. I will now summarize each issue you have raised and then provide any available evidence to either support or dispute these issues.”*

**Issues Raised:** Proceed with summarising each issue the complaint has raised and the provide a separate response paragraph.

For example, **“Issue 3 – Breach of Policy and Procedure by Richmind WA Staff:** *Upon entry to Richmind WA services, residents are required to consent to receive services and acknowledged all living agreement guidelines as outlined in the Consumer Information Pack. Within days of entering*



the XXXX service and agreeing to these, you felt that you were being treated inequitably to other residents and in breach of these documents.

**Response:** The purpose of the Community Living Agreement is to, as far as practicable, ensure the physical and psychological safety all residents and staff. As you stated in our meeting on the XXXX, you experience XXXX, and this made your Safeguarding Plan around XXXX particularly important. We understand that your experiences with some first responder services has not been positive, so we completely accept that you would feel reluctant to engage with emergency services. However, our primary goal was always to keep you safe.

**Summarise and Close:** Once all issues raised have been summarised and a response included, advise if any have been substantiated and what the next steps are. Also use this paragraph to thank the complainant again and provide any information around appealing the outcome of the complaint.

For example, *“After thorough investigation I was unable to substantiate any of the six claims made within the feedback you have provided. I anticipate that the outcome of this investigation would not be what you have expected, and I apologise that I have been unable to substantiate any of the claims you have made. As we discussed on the XXXX, investigations of XXXX nature pose several challenges and we must largely rely on the evidence available within our records.*

*Richmind WA is committed to providing the highest possible standard of support and care for consumers and whilst we are disappointed that you found the XXXX service failed to meet your expectations, we would like to assure you that your complaint has been taken seriously and the matter investigated thoroughly.*

*You are welcome to appeal the outcome of this complaint by replying to this email and providing any additional feedback or evidence you have. Additionally, alternate organisations such as the Health and Disability Complaints Office (HaDSCO) can assist you further.*

*Kind Regards,”*

**It is important to note that all formal complaint responses must be sent from the Feedback and Complaints inbox and approved by the relevant General Manager.**



## Consumer Feedback Interview Template Instructions

The purpose of this template is to provide staff with guidance on how best to facilitate an interview with consumers in response to allegations made against other consumers or staff.

Staff must ensure that they reflect Richmind WA values throughout this process, ensuring that they are creating a safe space for consumers, where they understand and feel that their voice matters, and they are encouraged to share as much information as they feel comfortable with. Staff should inform and explain how the information will be used and stored and provide a general outline of the complaints process.

The interview is facilitated by the Service Manager. If there is any conflict of interest identified, the Service Manager must contact the Feedback Officer who will consult with the consumer and make alternate arrangements. A time frame should be offered prior to the interview to ensure the Consumer has the appropriate time frame to arrange a support person.

The purpose of an interview is to gather information and objective facts by asking open-ended questions and allowing consumers to share their story. Interviewers are encouraged to assist the consumer in exploring the incident by structuring the interview as follows:

- Description: Describe the situation in detail. The main points to include here concern what happened.
- Feelings: Encourage the consumer to talk about what they thought and felt during the experience. At this stage, avoid commenting on their emotions.
- Evaluation: Encourage the consumers to look evaluate the incident and reflect on what occurred and what meaning can be extracted from the incident.
- Conclusion and Action: Explore possible resolutions to the incident with the consumer from their perspective.

Please see the Consumer Allegation Interviewing module on ELMO if you require further support or contact your manager.

All questions have been grouped and organised into a sequence which they are recommended to be asked. You are not required to ask all questions listed, the choice and order of questions is up to the interviewing staff and should be reflective of the needs of the consumer throughout the interview process. You may also elect to use your own questions, these can be typed into the template prior to printing.

Interviewers must ensure that the consumers are aware that they may request a break or access to support people at any time. Where possible, consumers will have access to specialist supports,





which include the Carers and Family Reference Group (CaFRG), the LGBTI Champion or the Aboriginal Cultural Lead and Elders.

Once completed, the template is to be attached to the Feedback and Resolution Checklist assigned in Assurance and a copy is to be provided to the consumer interviewed. Do not provide a copy of the completed interview template to any other consumers, staff, or witnesses who may be involved in the investigation. Completed interview templates are to be treated as a confidential document.



## Consumer Allegation Interview Template

Interview Date:

Support Person Present & Name:

Interviewing Managers Name:

Consumer Name:

Can you please describe what occurred?

What happened?

What did you do?

What was said?

When did it occur?

Where did it happen?

How did you respond when this happened?

Who else was involved?

Was there anyone else around? Did anyone else witness the incident?

Who did you talk to after it happened?

Do you know if this has happened to anyone else?

Tell me about what is happening now?

Do you feel safe in the service?

Why do you think it happened?

How often has this happened?

How are you feeling now?

Thinking about the people involved, do you feel that they are treating you differently?

How do you think this should be resolved?

What can we do to help you?

Is there anything else you would like to tell me?

What would help you now?

