Complaints and Feedback

POLICY STATEMENT

Mayflower values complaints and feedback on our care and services and related processes from all sources and particularly from our clients and their supporters and we apply open disclosure principles.

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1 PURPOSE

To provide worker guidance in responding to complaints and feedback.

2 SCOPE

Organisation-wide

3 OUR APPROACH TO COMPLAINTS AND FEEDBACK[1]

Mayflower is committed to fostering a culture where clients, their supporters, aged care workers, and others feel safe and supported to raise complaints or provide feedback about our services without fear of retaliation or discrimination.

Our complaints and feedback management system ensures that matters relating to the delivery of funded aged care services are acknowledged, assessed, managed, and resolved in a way that is fair, transparent, accessible, safe, culturally safe, and timely; supporting our commitment to quality care and continuous improvement.[2]

Policies and forms relating to our complaints and feedback management system are provided to anyone on request. To facilitate complaints and feedback:

- Clients and their supporters[3] are made aware of their right to complain and encouraged to give feedback, or to make a complaint if they are not happy with Mayflower. Information on clients' right to complain without fear of retribution, the complaints process and their right to use an advocate in making a complaint, is included in the **Client Information Pack** and a copy of the **Mayflower Feedback and Complaints Policy** is on our website.
- This information is also explained to clients at service commencement, at reviews, when a complaint is raised, and at other appropriate times such as client meetings. To maintain ongoing awareness, reminders are included in regular communications like monthly newsletters, emails, statements, and written updates.[4]
- Additional assistance to understand the complaints and feedback process is available on request and may include explanations, guidance, or translated materials. (See also 'People with Specific Needs' below.)
- We provide all clients wishing to make a complaint with the Aged Care Quality and Safety Commission brochure; "Do you have a concern?"[5]. This is available in a range of languages. We support and assist them in making a complaint and provide information and assistance on accessing advocacy services.
- Workers take steps to ensure that clients feel comfortable to continue receiving services after making a complaint.

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1 Australian Government Federal Register of Legislation Aged Care Act 2024 165 Complaints, feedback and whistleblowers, See also Aged Care Rules 2025 Part 10-Management of incidents and complaints

2 Australian Government Federal Register of Legislation Aged Care Rules 2025 165-10 (b)

3 Supporters include registered supporters, substitute decision-makers, advocates, and other persons supporting the client. Preferred supporters are those nominated by the client. See Consent, Substitute Decision Makers and Advance Care Planning and Communicating for Safety and Quality regarding the roles of supporters in care planning

4 Australian Government Federal Register of Legislation Aged Care Rules 2025 165-20 (J) - communicate and at least monthly that complaints and feedback (including whistleblowers) are welcome. This applies to our clients, aged care workers and responsible persons.

5 Australian Government Aged Care Quality and Safety Commission Do you have a concern or complaint?. Website Accessed February 2026

- Other individuals or organisations are informed of their right to make complaints and provide feedback through: the provision of information on our website, other published materials and (where relevant) the contractor management process. Complaints and feedback are managed in accordance with our principles for handling client complaints and feedback.

Workers are informed of their right to make complaints and provide feedback during induction, through training, the **Employee Handbook**, and reminders in our regular communications, such as permanent email footer and digital screens in staff rooms. (See also Workforce Recruitment)

Workforce-related complaints (e.g. employment disputes or interpersonal issues) are managed under a separate Employer/Employee Dispute Procedure (See Workforce Management)

- General complaints or feedback from workers about care delivery, safety, or service quality are managed in accordance with our client complaints and feedback principles. See also Disputes Between Clients and Support Workers below.

3.1 MAKING OR WITHDRAWING COMPLAINTS AND FEEDBACK[6]

Complaints and feedback can be given at any time, they may also be withdrawn at the complainant's request[7], unless doing so would conflict with our legal or regulatory obligations, such as mandatory reporting requirements or where the matter involves a breach of the law.

Incidents, once identified, cannot be withdrawn and must be recorded, assessed, and managed under our Incident Management or SIRS Management procedures[8]. If a complaint or feedback reveals that a client was harmed or at risk of harm, it is treated as an incident and managed accordingly.

If a complaint or feedback identifies a potential contravention of the Aged Care Act, the complainant is offered the option to have it treated as a complaint or a whistleblower disclosure, provided that all relevant conditions for whistleblower protection are met[9]. (See Whistleblowers).[10]

While we encourage individuals to speak with us directly before contacting an external complaints agency, they are free to do so at any time, and we will assist them if they wish. Details of external complaints agencies/advocacy services are detailed below in Advocates.

All complaints and feedback are recorded on a **Complaint and Feedback** form and/or entered directly in the quality management system by a worker. Where a complaint or feedback is given orally, workers complete a form on the complainants' behalf. (See below Complaint and Feedback Forms). Withdrawal of a complaint or feedback is also documented on the form, and for serious complaints, a signed statement confirming the withdrawal is requested.

Mayflower does not charge any costs for making, withdrawing or managing a complaint or feedback.[11]

3.1.1 ANONYMOUS COMPLAINTS

Complaints can be submitted anonymously. While anonymous submissions typically limit our ability to consult with the complainant, they may still allow for ongoing communication if submitted through an

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6 Australian Government Federal Register of Legislation Aged Care Rules 2025 165-15

7 Ibid 165-15 1(c)

8 Note: Worker-related incidents are managed under our Workplace Safety procedure. A Worker Incident Report is completed

9 Australian Government Federal Register of Legislation Aged Care Act 2024 165

10 Note: If a potential contravention of the Aged Care Act also meets the criteria for both a SIRS reportable incident and a whistleblower disclosure, and the complainant opts for whistleblower protections, the matter will be managed under our SIRS Management procedure with whistleblower safeguards applied to protect the complainant's identity and prevent reprisal, in accordance with our Whistleblowers procedure.

11 Australian Government Federal Register of Legislation Aged Care Rules 2025 165-15 1(e)

external advocacy service that maintains contact with the individual, or via anonymous channels such as an unidentifiable email address.

All complaints and feedback (anonymous or otherwise) are taken seriously. We will investigate each matter and take appropriate action based on the information available.

If an anonymous complaint or feedback identifies a potential breach of the Aged Care Act and the complainant cannot be contacted, the matter is treated as an anonymous whistleblower disclosure, provided it meets the relevant criteria. (See Whistleblowers).

3.2 SUPPORTING WORKERS TO HANDLE COMPLAINTS AND FEEDBACK[12]

All workers involved with clients receive information on their responsibilities in supporting and encouraging clients to raise complaints and provide feedback, and to assist them throughout the process. We provide workers with information on:

- The complaints and feedback process
- How to handle personal information and data
- How to recognise and respond to complaints and feedback
- Managing relationships and clearly communicating with people making complaints or feedback
- When and how to escalate complaints and feedback
- Their roles and responsibilities in our complaints and feedback process and
- The roles and functions of independent aged care advocates.

This information is provided to workers on induction, annually and when the worker's role changes. Workers are informed of any changes to our complaints and feedback processes on an ongoing basis.

4 COMPLAINTS MANAGEMENT

We use the Better Practice Guide to Complaints Handling in Aged Care Services[13] to guide our management of complaints and to ensure workers understand the complaints process from the clients' perspective.

Our complaints process complies with the Aged Care Act and Rules[14] and our approach is consistent with the Statement of Rights. It is centred around the client/supporter; it seeks to appropriately address the issue raised and contribute to the continuous improvement of our care and services.

We have also adopted the Australian Open Disclosure Framework[15] principles and processes to support the effective and inclusive management of complaints (including complaints that may be a result of an adverse event or incident related to care and services).
Complaint trends are reviewed by the Quality Care Advisory Body to ensure improvements to services and processes that underpin all our services and operations are being implemented (See Continuous Improvement). Our complaints handling approach reflects our vision, objectives and philosophy.

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[12] Australian Government Federal Register of Legislation Aged Care Rules 2025 165-20

[13] Australian Government Aged Care Complaints Commission Better Practice Guide to Complaint Handling in Aged Care Services Updated July 2025. See also Complaints handling checklist Website Accessed February 2026

[14] Australian Government Federal Register of Legislation Aged Care Act 2024 165. Aged Care Rules 2025 Chapter 4 Part 10 Division 2 Complaints, feedback and whistleblowers

[15] Australian Commission on Safety and Quality in Health Care Australian Open Disclosure Framework 2014. Website Accessed February 2026

4.1 OPEN DISCLOSURE AND OTHER PRINCIPLES IN MANAGING COMPLAINTS[16]

Mayflower adopts the Open Disclosure Principles and the principles from the Aged Care Quality and Safety Commission, in managing complaints.[17]

4.1.1 OPEN DISCLOSURE MEETINGS

Open disclosure meetings are conducted when a complaint involves an incident where harm or potential harm to a client is evident. The Manager is responsible for preparing and leading these meetings with the client and their registered supporter, substitute decision-maker, advocate or other supporters as appropriate.

All complaints are managed in accordance with the following principles:

4.1.2 BE OPEN AND TIMELY

If things go wrong in the provision of care and services (including adverse events or incidents) we communicate and provide information in a timely, open and honest manner. We provide ongoing information about our investigation and any actions until the complaint or issue is resolved.

4.1.3 ACKNOWLEDGE

The person managing the complaint will:

- Acknowledge all complaints quickly
- Repeat what you have heard in your own words. This creates a shared understanding and establishes empathy
- Express regret using the words 'I/we are sorry', but do not admit liability or apportion blame
- Tell the complainant what happens next with their complaint and provide contact details for the worker handling the complaint
- Reassure all parties that confidentiality is respected, including record keeping of complaints
- Give an estimate of how long the process may take
- Invite those involved to participate in the resolution process; engage the client
- Complaints that are straightforward with low risk can be resolved on first contact.

4.1.4 RECORD

All complaints and feedback are recorded in the quality management system. A summary of serious complaints may also be documented in the care management system outlining the actions taken. Updates to the records are made as events progress including any investigations or actions taken to support clients and workers.
Complaint records are stored securely in the quality management system (paper-based forms are uploaded in the quality management system and filed in the relevant General Manager/Program Manager's office). Privacy and confidentiality of information is maintained, including when records are shared with outside agencies as necessary. Mayflower privacy and confidentiality processes apply to the collection and sharing of information regarding complaint reporting (See Confidentiality of Complaints and Disputes below and Privacy and Confidentiality).

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[16] Australian Government Federal Register of Legislation Aged Care Rules 2025 Subdivision B—Implementing and maintaining a complaints and feedback management system

[17] Australian Government Aged Care Complaints Commission Better Practice Guide to Complaint Handling in Aged Care Services Updated July 2025 Website Accessed February 2026

4.1.5 ASSESS

- Assess the complaint and prioritise against other complaints the service is handling
- Identify if the complaint is a high-risk complaint that has the potential to cause a major risk or damage to the reputation of the service or organisation. Examples include, but are not limited to:
    - Allegations of corruption against a worker
    - Claims of dereliction of duty and/or professional misconduct by a worker
    - Claims of personal injury
    - Claims that a law has been breached
    - Claims of discrimination on the grounds of race, religion, gender, sexual orientation, disability or age
    - Allegations of theft
    - Allegations of abuse or assault
    - Breach of duty
    - Referral to coroner
    - Reports to or from external agencies. This includes but is not limited to the:
        - Aged Care Quality and Safety Commission
        - Australian Human Rights Commission
        - Department of Health and Ageing
        - Office of a Health Care Complaints Commissioner
        - Office of a state Health Ombudsman
    - Exclusions:
        - This does not include general staff grievances (that is, not relating to professional misconduct).
- Clarify the concerns and issues raised by the complainant
- Determine the level of risk to the client, other clients and the service
- The Manager will seek legal advice (after discussion with the CEO) in the management of complaints, if necessary
- Ask the complainant and any clients involved in the issue, how they would like to see the complaint resolved, and engage them in the resolution of the complaint if they wish[18]
- Show a positive, professional attitude and thank the complainant for bringing the matter to your attention
- Plan (if required)
    - consider the best way to resolve the complaint. Note that in certain situations, alternative approaches, such as conciliation, mediation, or external review, may need to be considered.
    - prepare a short-written plan of how the complaint is to be managed and any information to be collected

[18] Australian Government Federal Register of Legislation Aged Care Rules 2025 164-20, 164-45

  - ensure that the person who made the complaint, or the client it was made on behalf of, will not be adversely affected by the planned actions unless necessary given the circumstances (e.g. client safety)[19]
  - focus attention on the issue to be resolved
  - remain flexible and adjust as required
- Investigate (if required)
  - gather relevant information and evidence to resolve the complaint
  - a fair investigation is impartial, confidential, transparent and timely
  - keep written notes of discussions
  - where the complaint is in response to an adverse event[20] we consider:
    - if the event could have been prevented
    - what, if any, remedial action needs to be undertaken to prevent further similar events from occurring, or to minimise their impact
    - any systemic issues, including whether the event is part of a broader pattern of recurring issues, or reflects deeper structural, cultural, or policy-related gaps
    - any operational issues, such as specific failures in processes, communication, or oversight that contributed to the event occurring
- Investigations will be conducted by the relevant General Manager/Program Manager with assistance and oversight from the Quality Care Advisory Body (QCAB). In serious cases, an external investigator may be engaged.
- In investigating complaints, we ensure procedural fairness to all parties involved:[21]
  - the complainant is given the opportunity to present their point of view and respond to any findings
  - any person who is the subject of the complaint is informed and given the opportunity to respond before decisions are made.

An effective complaint handling process is fair, accessible, responsive, efficient and contributes to ongoing quality improvement in service delivery.

Notifications[22]

Some complaints may raise issues that need to be reported to external bodies, including:

- The Aged Care Quality and Safety Commission, if the complaint relates to non-compliance with the Aged Care Act
- The police, if the complaint involves suspected criminal conduct
- The NDIS Quality and Safeguards Commission, if the event relates to non-compliance with the NDIS Act
- Other regulatory or oversight bodies, depending on the nature of the issue (e.g. privacy breaches, financial misconduct, or governance failures)

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[19] Ibid 165-35

[20] Especially for serious events - for example, a contravention of the Aged Care Act where there was no harm or risk of harm to clients, and the complainant chose to have it treated as a regular complaint rather than a whistleblower disclosure.

[21] Australian Government Federal Register of Legislation Aged Care Rules 2025 164-15 1(m). See also Aged Care Quality and Safety Commission Effective serious incident investigations guidance for providers Published 3 October 2022. Section 4 Providing support and fairness to people during an investigation

[22] Australian Government Federal Register of Legislation Aged Care Rules 2025 164-15 1(o)

Mayflower ensures that any requirements for referral or notification of complaints under Commonwealth, State or Territory laws (as applicable) are met.

A General Manager/Executive General Manager will determine whether an event is required to be reported and will take appropriate action in a timely manner, with communication to the CEO.

4.1.6 RESPOND

We aim to achieve restorative outcomes[23] where appropriate, by addressing harm, rebuilding trust, and improving service delivery. In responding to complaints, we:

- Apologise using the words 'I/we are sorry'. It can improve your relationship with the complainant
- Respond to the complainant with a clear decision and explain your reason for the decision
- Written responses may be more suitable for complex matters
- Communicate outcomes promptly
- Recognise that it may take several meetings to come to resolution.

4.1.7 FOLLOW UP

- Check if the complainant is satisfied with the management and resolution
- Ask complainants for feedback
- If the complainant is not satisfied, consider further options such as:
  - An internal review by a worker who was not involved in the original complaint
  - Mediation to help clarify concerns and explore solutions

Referral to external complaints bodies or advocacy services, including the ACQSC Complaints Commissioner[24], who can independently assess and manage complaints. (See also Choice, Independence and Quality of Life/ Table 1: Advocacy and Complaints Contacts.)

- Complaints are evaluated and discussed at the QCAB (with consideration to confidentiality). We ensure that follow-up includes actions that restore the person's trust and confidence in our care and services.

4.1.8 CONSIDER

- Evaluate the outcome for the complainant; ask yourself/the team (and document):
  - are there issues or problems which could be repeated?
  - was there a delay in resolving the complaint?
  - can procedures and policies be reviewed to improve the complaints process?
  - are there opportunities to improve service delivery or client experience more generally?

Regular contact with the complainant should be maintained throughout the process. It is important to keep the complainant informed if their issue is taking longer to resolve than first advised.

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[23] Ibid 164-15 1(n). A restorative outcome is an action the provider takes to restore a person's trust and confidence in the quality and safety of their services. See Australian Government Aged Care Complaints Commission Better Practice Guide to Complaint Handling in Aged Care Services Updated July 2025 p.17

[24] Australian Government Aged Care Quality and Safety Commission Complaints Handling Policy, see also Regulation and oversight under the new Aged Care Act Website Accessed February 2026

An assessment of the effectiveness of our complaints system is conducted as part of our quality audit program annually or more frequently in response to identified issues.

For specific details on how complaints are managed see Table 1 Complaints Management Process.

4.2 PROCESS FOR MANAGING COMPLAINTS

Table 1: Complaints Management Process

Step	Timeline
1. A complaint is received via support workers or directly from a complainant via letter, email, face to face or telephone. 2. In face to face or telephone contact the person receiving the complaint encourages the person and assures them it is OK to make the complaint, that it is taken seriously and that it helps us improve our care and services. With written complaints the complainant is contacted by telephone or face to face. 3. Clients are supported to participate directly in the complaints process, and to involve their registered or other preferred supporters. 4. All complainants involved are advised that they can use an advocate of their choice and are offered information on independent aged care advocates. (See Choice, Independence and Quality of Life/ Table 1: Advocacy and Complaints Contacts.) 5. Explain to the complainant, the affected client/s (if applicable), and others involved in the initial resolution of the complaint and how the complaint can also be made to the ACQSC Complaints Commissioner[25]. 6. If a complaint or feedback identifies a potential contravention of the Aged Care Act, the complainant will be offered the option to have it treated as a whistleblower disclosure instead of a regular complaint or feedback, provided all relevant conditions for whistleblower protection are met.	On day complaint is received
7. A **Complaint and Feedback** form is completed by the person receiving the complaint (either paper-based or in the quality management system Complaints Register) and the complaint is reported to their General Manager/Program Manager. 8. Assess the ongoing support needs of the complainant, and of any client directly affected by the issue. 9. Offer culturally appropriate support and assistance (including access to advocates and language services) that respect the privacy and confidentiality of both the complainant and any clients involved. 10. If a complaint identifies a new incident, the matter is reported to management and managed in accordance with our Incident Management or SIRS Management procedure. The complaint process may be paused or closed if the issue is now being addressed as an incident, particularly where the complainant is the client directly affected. **Note: Steps 11 – 22 do not apply in this case**. 11. If a complaint relates to a known incident (whether under ongoing investigation or resolved), the complainant is appropriately involved in the investigation or review process where applicable.	

[25] Australian Government Federal Register of Legislation Aged Care Rules 2025 165-25 (e)

Step	Timeline
Both the incident and the complaint are managed with a focus on the wishes and preferences of clients directly affected by the issue.	
12. The complaint is reviewed by the General Manager/Program Manager; relevant information and proposed action is recorded.	Within 2 working days of receipt of complaint
13. The General Manager/Program Manager contacts (by telephone or letter) the complainant to advise: ○ the complaint is being assessed ○ the process that is followed including confidentiality ○ the timeline ○ their right to an advocate and advocacy agency support (See below Advocates) ○ who is handling their complaint and details on how to contact them ○ when they will be contacted again.	Within 2 working days of receipt of complaint
14. The General Manager/Program Manager determines whether an investigation is required and decides the action to be taken and who takes it and a plan for resolution. Investigation principles include impartiality, confidentiality, transparency and timeliness.	Within 10 working days of receipt of complaint
15. The General Manager/Program Manager updates the relevant Mayflower Leadership Team (MLT) member on complaint progress (serious complaints).	
16. Meetings are held with the complainant if necessary.	Within 14 working days of receipt of complaint
17. Action is carried out including providing an apology to the complainant. Person/s affected by the complaint are fully informed of all facts and given the opportunity to provide further information and contribute to the solutions.	
18. The complainant is advised of the actions taken to address the issues raised and the outcome of the complaint in a letter.	
19. If the complainant is not satisfied with the outcome, they are advised of the complaints appeal process (See below Advocates).	
20. If the complainant wishes to appeal, the complaint is reviewed by the CEO, whose decision is final.	Within 21 working days of receipt of complaint
21. The complainant is advised of the General Manager/Program Manager's decision and of their option to go to an advocacy agency (See below Advocates).	
22. When the complaint is finalised, a worker is identified by the General Manager/Program Manager to make sure that clients involved feel comfortable to continue accessing the service and to obtain feedback on the complaints process. 23. The complaint is closed out following evaluation of the complaint process. Evaluation includes: ○ the accessibility of the complaints process for the client ○ documentation of any investigation and all actions taken ○ timeliness of the complaints process ○ the satisfaction of the complainant with the outcome ○ validation that appropriate education, training and worker support processes have been implemented to prevent the issue recurring.	
24. Information on the complaint closure is included in the Complaints Register on the quality management system	At close out

4.3 CONFIDENTIALITY OF COMPLAINTS AND DISPUTES[26]

Information provided in a complaint or feedback is treated as confidential and only disclosed if required by law, or if the disclosure is otherwise appropriate in the circumstances[27]. For example, when:

- The complaint suggests serious or immediate risk or harm to the client
- A complainant is at risk of self-harm
- A complainant threatens to harm involved parties.[28]

As far as possible, the fact that a client has lodged a complaint, and the details of that complaint, are kept within the workers directly involved in resolving it. The client's permission is obtained prior to any information being given to other parties that it may be desirable to involve to investigate and satisfactorily resolve the complaint or dispute. Complaints that are sensitive in nature are managed by the appropriate General Manager/Program Manager and may be referred to a member of the Mayflower Leadership Team.

4.4 WORKING WITH EXTERNAL COMPLAINTS AGENCIES

If we receive a request to provide information or input from an external complaints/advocacy agency we provide relevant information as requested with consideration to privacy. Information provided to external agencies is documented in the quality management system, detailing the information provided and any relevant documentation is uploaded by the General Manager/Program Manager for review by the relevant Mayflower Leadership Team member.

If we are provided with a direction from the Aged Care Quality and Safety Commission[29], we follow that direction and document the actions taken on the complaint record in the quality management system. Additionally, if requested by the System Governor or the Commissioner to provide a Complaints and Feedback Management Report, we will provide the report within 14 days (or within the timeframe specified in the request). This report will:

- Be in the approved format
- Be signed by the governing body of Mayflower
- Include the following prescribed information:
    - number and nature of complaints and feedback received
    - actions taken to resolve complaints or respond to feedback, including any service improvements
    - evaluation of the effectiveness and outcomes of those actions
    - time taken to resolve each complaint and feedback
    - education and training provided to staff in relation to complaints and feedback
    - analysis of patterns and underlying causes of complaints.[30]

Information on contact details for external complaints or support agencies is included in Choice, Independence and Quality of Life/ Table 1: Advocacy and Complaints Contacts.

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[26] Australian Government Federal Register of Legislation Aged Care Rules 2025 165-15

[27] See Australian Government Office of the Australian Information Commissioner Chapter 6: APP 6 Use or disclosure of personal information and Chapter C: Permitted general situations Accessed February 2026. See also Aged Care Rules 2025 165-15(l)

[28] Australian Government Aged Care Quality and Safety Commission Complaints Handling Policy Published October 2025

[29] Australian Government Aged Care Quality and Safety Commission Provider resolution fact sheet Website Accessed February 2026

[30] Australian Government Federal Register of Legislation Aged Care Rules 2025 Subdivision E—Complaints and feedback information on request

5 DISPUTES BETWEEN CLIENTS AND SUPPORT WORKERS

Mayflower support workers are required to report immediately to their Team Leader/RN In-Charge/Care Manager any dispute with clients, regardless of how small. Disputes are reported verbally in the first instance. The Team Leader/RN In-Charge/Care Manager then decides:

- Whether the client should be contacted
- If a written report is required
- The format of the report
- Any other action to resolve the dispute as early as possible.

The Team Leader/RN In-Charge/Care Manager may offer the client the opportunity to make a formal complaint. If the client accepts this offer the Team Leader/RN In-Charge/Care Manager completes a **Complaint and Feedback** form with them and the complaints process is followed.

6 PEOPLE WITH SPECIFIC NEEDS[31]

Where a person has specific needs, such as people from culturally and linguistically diverse (CALD) backgrounds or Aboriginal and Torres Strait Islander people, the workers ensure that any cultural aspects are considered when reviewing a complaint or dispute and ensures the person feels comfortable in discussing a dispute. The presence of a family member or friend may be required. An independent interpreter is offered to persons not proficient in English.

Where necessary to support clients understanding of our complaints policy and process, we provide documents in translated or alternative accessible formats,[32] and may also use resources from the Aged Care Quality and Safety Commission[33] that explain information in simple English or in the client's preferred language.

We also ensure that any actions, interventions, or referrals are appropriate to people from specific needs groups. This may require the involvement of organisations with expertise in specific needs groups either in providing advice or assisting in actions.

7 FEEDBACK

Feedback can be positive and negative. Negative feedback is defined as minor dissatisfaction or a minor issue that can be easily resolved and/or the client does not want to make a formal complaint. For example, feedback on an occasion of late service provision or dissatisfaction with a provided meal. Positive feedback is a compliment or praise regarding service delivery, workers or the organisation. Feedback can be formal or informal.

All feedback and its importance is acknowledged, and the provider is thanked for providing it.

If feedback raises issues that need to be resolved, we:

- Consult with the person who provided the feedback
- If feedback is given on behalf of a client, we consult with the client directly
- If the client consents, we also consult with their registered or preferred supporter.

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31 Australian Government Federal Register of Legislation Aged Care Rules 2025 165-20

32 Ibid 165-20(h). Mayflower assesses the needs of its client base and prepares translated or accessible materials in advance where there is a clear need, to ensure equitable access to complaints information and processes

33 Australian Government Aged Care Quality and Safety Commission Resource library Website Accessed February 2026

We ensure all parties are informed about how to make a complaint or give feedback about the resolution of any issue raised to the Complaints Commissioner.[34]

7.1 FORMAL CLIENT FEEDBACK

Formal feedback is given with the intention of providing feedback such as a client completing a survey, a **Complaint and Feedback** form or specifically informing a worker about their dissatisfaction with services or care.

When formal feedback is not written on a **Complaint and Feedback** form the worker receiving it completes a form or enters the feedback directly into the quality management system and attaches any documentation.

7.2 INFORMAL CLIENT FEEDBACK

Informal feedback is made during interaction, for example, a client mentioning to the bus driver that the outing location was unsatisfactory or general dissatisfaction with care or services.

Informal feedback is recorded by the worker directly into the quality management system. The procedure is outlined in Continuous Improvement. (See Continuous Improvement)

8 COMPLAINT AND FEEDBACK FORMS

Complaint and Feedback forms are provided in hard copy to clients in the service commencement meeting and are also included in the support plan home folder, in our residential service information folder, and they are promoted at Client & Relative meetings and in our Newsletter. Workers also have access to forms that they can provide to clients.

8.1 FORMAL COMPLAINTS

Complaint and Feedback forms are used to lodge formal complaints or when negative feedback involves a significant issue that requires detailed documentation and action. Workers may complete the form for the client or may provide a form to them or their supporter. If clients write a letter or telephone their complaint, workers complete a report directly in the quality management system on their behalf.

Completed paper-based forms are uploaded in a new complaint record in the quality management system and forwarded to the appropriate General Manager/Program Manager who reviews and investigates the complaint in line with the procedures specified in Complaints Management above.

8.2 FORMAL FEEDBACK

Feedback, both positive and negative, is actively sought from clients, workers, management and other people using a **Complaint and Feedback** form. Workers and clients are also encouraged to provide feedback through meetings, newsletters and day to day contact.

8.3 INFORMAL CLIENT FEEDBACK

Informal client feedback is also recorded in the quality management system by workers (client names are not reported). Feedback can include:

- Activities, outings, meals

[34] Australian Government Federal Register of Legislation Aged Care Rules 2025 165-30

- Ideas to improve our services and processes; including client intake, assessment and support planning, and reviews and reassessment are also recorded
- Feedback from focus groups, meetings or other gatherings with clients to hear their views on key aspects of service delivery such as working in partnership, client choice and control and input in the service.

8.4 COMPLETED RECORD

Completed records are analysed by the Quality Team for any additional action required and further distribution as necessary. The relevant team member's advice regarding appropriate actions is sought.

The confidentiality of complaints is maintained as per the principles of the Privacy Act. (See above Confidentiality of Complaints and Disputes.)

DOCUMENT INFORMATION

Owner**	Executive General Manager Quality & Safety
Date Approved	20 May 2026
Applicable Aged Care Programs	Support at Home, Residential Care
Review History	Developed: 1 August 2024
Date of review and summary of changes	September 2025: updated terminology in line with the Aged Care Act 2024, Aged Care Rules 2025, SAH requirements and CHSP requirements
Date of review and summary of changes	February 2026: Reviewed references
Date of review and summary of changes	March 2026: Mayflower context edits referencing position titles; the Complaint and Feedback form; and timeline edits to reflect org structure and Policy; added email comms; CHANGED WORK PRACTICE: provide all clients wishing to make a complaint with the Aged Care Quality and Safety Commission brochure; “Do you have a concern?” (Section 3)
Date of review and summary of changes	

** In approving this document, the Owner certifies it is consistent with the Statement of Rights