

Feedback and Complaints Management Policy Template

Purpose:

To ensure all feedback and complaints are managed transparently, fairly, and efficiently, supporting continuous improvement and compliance with the Aged Care Quality Standards, promoting trust and consumer participation in care delivery.

Scope:

Applies to all staff, contractors, residents, family members, visitors, and representatives involved in providing, receiving, or responding to feedback or complaints within the organisation.

Policy Statement:

The organisation will:

- Provide clear, accessible pathways for consumers and stakeholders to give feedback or lodge complaints.
- Respond promptly, respectfully, and confidentially to all issues raised.
- Use feedback as a key driver for improving quality of care and services.
- Comply fully with regulatory obligations under the Aged Care Act and Quality Standards.

Legislative Context:

- Aged Care Act 1997 (Cth)
- Aged Care Quality Standards (Standard 1 – The Person; Standard 2 – The Organisation)
- Quality of Care Principles 2014
- Complaints Principles 2015
- Privacy Act 1988 (Cth)
- Public Interest Disclosure Act 2013 (Cth)

Definitions:

- **Feedback:** A comment, compliment, or suggestion provided about care or services.

- **Complaint:** Expression of dissatisfaction requiring response or resolution.
- **Anonymous Complaint:** A complaint made without disclosing identity.
- **Complainant:** A person or representative who raises a concern.

Key Principles:

1. Consumers and representatives can provide feedback or complaints without fear of reprisal.
2. Each complaint is acknowledged, recorded, and managed within clear timeframes.
3. All feedback and outcomes contribute to ongoing service improvement.
4. Staff must handle complaints with empathy, respect, and confidentiality.
5. Outcomes will be communicated to complainants where appropriate.
6. Systems support anonymous submissions and data-driven reporting.

Responsibilities:

- **Approved Provider / Board:** Oversee complaint trends and ensure compliance.
- **Facility Manager:** Implement effective local feedback systems and escalate serious issues.
- **Quality & Compliance Manager:** Analyse feedback trends and report to governance bodies.
- **Staff Members:** Receive, record, and respond to feedback with professionalism and care.
- **Residents / Representatives:** Encouraged to participate in open communication and provide regular input on services.

Procedures:

1. Provide multiple feedback channels (online forms, phone, written, in-person, or anonymous drop boxes).
2. Acknowledge all complaints within two working days.
3. Record each complaint in the organisation's complaint register.
4. Investigate to determine causes and establish appropriate resolutions.

5. Communicate outcomes to the complainant and document the resolution process.
6. Report serious matters under the Serious Incident Response Scheme (SIRS) if applicable.
7. Review trends and lessons learned at monthly quality and governance meetings.
8. Use data to inform quality improvement or training initiatives.

Escalation Pathways:

- Unresolved complaints may be referred to the Facility Manager, then to the Quality & Compliance Manager.
- External options include the **Aged Care Quality and Safety Commission** or relevant advocacy services.

Monitoring and Review:

- Regular audits of complaint handling procedures and records.
- Annual review of feedback data, staff training, and system effectiveness.
- Policy updated annually or as legislation requires.

Associated Policies:

- Incident Management and Reporting Policy
- Risk Management Policy
- Whistleblower Policy
- Human Rights and Dignity Policy
- Privacy and Confidentiality Policy

Evidence and Records:

- Complaint and feedback register
- Investigation and outcome reports
- Staff training logs
- Complaint trend summaries and quality improvement reports

Policy Control:

| Version | Effective Date | Review Date | Policy Owner | Approved By | Status |
|---------|-----------------|-----------------|------------------------------|-------------------------|--------|
| 1.0 | 20 January 2026 | 20 January 2027 | Quality & Compliance Manager | Approved Provider Board | Draft |

Compliance Summary:

| Entity Type | Entity Name | Completion Rate | Status |
|-------------|---|-----------------|------------------------|
| Policy | Feedback and Complaints Management Policy | 100% | FULLY COMPLIANT (100%) |