



## Complaints Management Policy

New Aged Care is committed to ensuring that any person or organisation using its services or affected by its operations has the right to provide feedback, make complaints about care and services, or to appeal a decision made by the organisation.

New Aged Care ensures that its clients and others can provide feedback and make complaints without reprisal, and promises to manage all complaints transparently. In this way, all concerns that are raised will be addressed to ensure access and equity, fairness, accountability and continuous improvement.

The organisation will implement a complaints and appeals management system that:

- Allows and supports any person to make a complaint or provide feedback;
- Facilitates complaints by cultivating a supportive environment in which they can be made;
- Is simple, accessible and easy to use;
- Is effectively communicated and promoted to all individuals and stakeholders;
- Is proportionate to the size of the organisation and the services it provides;
- Ensures complaints or appeals are fairly assessed and responded to promptly;
- Is procedurally fair and follows principles of natural justice; and
- Complies with legislative requirements.

### Record of policy development

Version	Date approved	Date for review
1.0	27/11/2025	27/11/2026

### Responsibilities and delegations

This policy applies to	Everyone in our NAC Community
Policy approval	Executive Team

Policy context – this policy relates to:	
Standards	Strengthened Quality Aged Care Standards, RACGP Standards for General Practice (AGPAL)
Legislation	The Aged Care Act 2024 The Aged Care Rules 2025
Related NAC policies	Feedback Policy Whistleblower Policy Open Disclosure Policy Client Advocacy & Support Policy Interpreter Services Policy Disciplinary Policy Grievance Policy
Forms, record keeping, other documents	Opportunity For Improvement (OFI) Form; OFI Register; Complaints and compliments Register; Incident Forms; and Incident Register

## Definitions

**Complaint:** an expression of dissatisfaction made to or about an organisation regarding its workers, services or products that warrants response or resolution.

**Complainant:** an employee, individual, advocate, entity or member of the public who expresses their dissatisfaction about an organisation to either the organisation itself or an external body.

**Escalation:** the process of reporting complaints to the Aged Care Quality and Safety Commission (ACQSC) – Complaints Commissioner or if appropriate the Health Services Commission, if the complainant is not satisfied with the outcome of their complaint.

## Complaints

Can be made to either NAC's Clinical Director of Services or Business Manager or any staff member. Externally, complaints can be made to:

**ACQSC – Complaints Commissioner:** Ph: 1800 951 822

Website: [www.agedcarequality.gov.au/making-complaint/lodge-complaint](http://www.agedcarequality.gov.au/making-complaint/lodge-complaint)

**AHPRA:** [www.ahpra.gov.au](http://www.ahpra.gov.au)

**Health Complaints Commissioner:** Ph: 1300 582 113

Website: [www.hcc.vic.gov.au/contact](http://www.hcc.vic.gov.au/contact)

## Principles

New Aged Care will:

- Ensure that all individuals, and their families, carers, advocates and other supporters are encouraged and supported to raise any concerns they have about the service or organisation;
- Consider all complaints it receives regardless of whether or not the complainant is a client of the organisation;
- Treat all complainants with respect and recognise the importance of their concerns;
- Maintain confidentiality of parties involved, keeping any information private to those directly involved in the complaint and its resolution. Information will only be disclosed if required by law, or if otherwise necessary;
- Ensure support and advocacy is available to individuals who make a complaint and require support;
- Resolve complaints, where possible, to the satisfaction of the complainant;
- Individuals, families and advocates have access to the organisation's complaints management policy;
- Deal with all complaints in a timely manner, and aim to provide a formal response to the complainant within 25 days of the complaint being received;
- Keep relevant parties appropriately involved and informed of progress of the complaint;
- Ensure that Governing body/ Committee's members, staff, volunteers, associated providers and clients are given information about the complaint's procedure as part of their induction and are aware of procedures for managing client feedback and complaints;
- Ensure all individuals, stakeholders and members are aware of and understand the complaints policy and procedures;
- Ensure that all complainants are aware of and understand how to escalate their complaint to ACQSC Complaints Commissioner or the Health Services Commission;
- Ensure that a complainant is not penalised in any way or prevented from use of services during the progress of an issue\*;
- Ensure that feedback data (both positive and negative) is considered in organisational reviews and in planning service improvements; and
- Review and evaluate the accessibility and effectiveness of the complaints management system and continually improve its processes.

\* The NAC Complaints Fact Sheet will direct the individual to the NAC website for this policy or a copy can be provided on request.

## **Procedures**

### ***Information for individuals and stakeholders***

New Aged Care's complaints and feedback procedure will be documented for individuals and stakeholders in NAC's "Feedback & Complaints Fact Sheet" which will be provided to each individual upon entry to the service, and additionally made available during annual

reviews with Care Partners. Individuals with specific communication needs will be made aware of this information, e.g. through translated copies or easy read formats.

All individuals will also be informed via the fact sheet of their rights and responsibilities with regards to complaints and feedback via regular reminders through newsletters, annual reviews and 6-monthly mailouts.

The “Feedback & Complaints” Fact Sheet contains information on:

- Your rights to give feedback and make complaints;
- How to give feedback or make a complaint, including:
  - With advocacy or to an external agency
- What happens after you make a complaint;
- Open disclosure and what it means;
- How you will be involved in the complaints management process according to your wishes.

### ***Training procedures***

Workers will be trained on the complaints management procedures during their induction. This is also a regular agenda item at staff meetings. Workers will receive additional training on the complaints management system (i) should the need be identified; (ii) their role or responsibilities in the system change; or (iii) when there are changes to the complaints management system.

Managers, Team Leaders and Executive Team will undergo training for complaints management and resolution to support individuals throughout the complaint process and appropriately respond to complaints in an empathetic manner. This will include open communication strategies such as acknowledging the grievance without being defensive and making apologies while accepting responsibility for what occurred.

### ***Making a complaint***

A person wishing to make a complaint may do so in writing, verbally, or by completing our Incident and/or Opportunity For Improvement form. The complaint may be made to:

- Care Partner or Team Leader
- An Executive Team member
- Any staff member
- Governing body member or
- Aged Care Quality & Safety Commission or Health Services Commission (as applicable)

Complaints may be made by:

- Submitting a completed Opportunity For Improvement (OFI) form and/or Incident Form into the Suggestion Box located at the front door near reception. The OFI and Incident forms are available in hard copy in the office and online via our website;

- Written complaints may be sent to [feedback@newagedcare.com.au](mailto:feedback@newagedcare.com.au) or PO Box 860, Woodend 3442. The Executive Team will be responsible for receiving this correspondence and directing it to the appropriate person;
- Feedback and complaints via telephone may be made on (03) 5427 2002; and
- Anonymous complaints may be made by the feedback email, OFI or website.

If the complaint is about:

- A staff member, the complaint will normally be dealt with by their Team Leader;
- A senior staff position, the complaint will normally be dealt with by the Executive Team; and
- The Executive Team, the complaint will normally be dealt with by the Governing body/ Board Chairperson/Board member.

New Aged Care encourages and supports all of its individuals, their families and carers, and workers and others to make complaints and lodge appeals, in an environment where it is clear that complaints can be made without fear of any reprisal.

If necessary, New Aged Care will provide complainants with advocacy and support, and/ or interpreter services. For more details, refer to: NAC's Client Advocacy and Support Policy and Interpreter Services Policy.

### ***Lodging an appeal***

Individuals or their advocates may lodge an appeal if they disagree with a decision made by the organisation, or by a staff member. An appeal should be made in writing and submitted to NAC Board Chairperson or another Board Member.

### ***Procedure for complaints and appeals management***

Any worker may be a recipient of a complaint, and is responsible for:

#### **1. Receiving the complaint:**

- Listening to the complainant, acknowledging the concern raised, and explaining the next steps to the complainant; and
- Discussing with the complainant an agreed upon resolution (for smaller matters) and referring on to their Team Leader to manage, or referring the complaint on to the Executive Team for further investigation and action. The chosen action will depend on the type and severity of the complaint.

The person managing the complaint will be responsible for:

#### **2. Processing the complaint or appeal:**

- Registering the complaint or appeal on the Complaints and Compliments Register and if appropriate the Incident Register; and
- Informing the complainant that their complaint has been received and providing them with information about the process and time frame.

### 3. Investigating the complaint or appeal:

- Examining the complaint within one week of the complaint being received;
- Investigating the complaint and deciding how to respond, while maintaining principles of procedural fairness and open disclosure;
- Informing the complainant verbally or by letter within 10 days of the complaint being received of what is being done to investigate and resolve it, and the expected time frame for resolution; and
- Involving the complainant, and any other individuals affected by an issue in the complaint, in an appropriate way in the resolution of the complaint, should they wish to do so.

### 4. Responding to and resolving the complaint:

- Making a decision or referring to the appropriate people for a decision within 25 days of the complaint being received;
  - informing the complainant of the outcome and the reasons for any decisions made and whether it was:
    - upheld (and if so, what will be done to resolve it);
    - resolved (and how this has been achieved); or
    - if no further action can be taken, the reasons for this;
- Informing the complainant of any options for further action if required; and
- If an apology is in order, ensuring that the appropriate person makes the apology and informs the complainant what the organisation intends to do to avoid further grievance.

New Aged Care is committed to ensuring that all complaints and appeals are addressed in a timely matter. Complaints or appeals will be investigated and resolved within 25 days of being received. If this time frame cannot be met, the complainant will be informed of the reasons why and of the alternative time frame for resolution.

New Aged Care will use an open disclosure process throughout the complaints and appeals process, and will prioritise transparency and accountability. Refer to NAC's Open Disclosure Policy.

### 5. Reviewing the complaint:

If the complainant is not satisfied with the investigation and proposed resolution of their complaint or appeal, they can seek a further review of the matter by the Board Chairperson or another Board member within 30 days.

### 6. Referral to external procedure:

A formal external complaints procedure may follow Step 4 if the complainant is still not satisfied with the outcome. The complainant will be referred to the Aged Care Quality and Safety Commission (ACQSC) – Complaints Commissioner or Health Complaints Commissioner and provided information and support to make the complaint externally if necessary.

### ***Complaints involving specific staff members or volunteers***

The Executive Team has delegated responsibility for resolving complaints or disputes involving staff members and/or volunteers.

Internal complaints, where a staff member or volunteer makes a complaint concerning another staff member or volunteer, will be dealt with in accordance with NAC's Grievance Policy.

External complaints by individuals or stakeholders made against a staff member or volunteer will be managed by the Executive Team who will:

- Notify the staff member or volunteer of the complaint and its nature;
- Investigate the complaint and provide the staff member or volunteer with an opportunity to respond to any issues raised;
- Attempt to mediate the dispute (if appropriate) and/or attempt to resolve the matter to the satisfaction of the outside party; and
- Take any other action necessary to resolve the issue.

Any disciplinary action against a staff member or volunteer arising from a complaint will be taken in accordance with the procedures contained in NAC's disciplinary procedures.

Complaints involving the Executive Team will be managed by Governing body Board Chairperson.

See also NAC's Disciplinary Policy and NAC's Grievance Policy.

### ***Complaints involving organisation members or Governing body/Executive Team members***

Complaints made against a member of the Governing body/Executive Team will be referred to the Board Chairperson. The Board Chairperson, or their delegate, will:

- Notify the person about whom a complaint is being made and its nature;
- Investigate the complaint and provide the member with an opportunity to respond to any issues raised; and
- Attempt to mediate the dispute (if appropriate) and/or attempt to resolve the matter to the satisfaction of the outside party.

Where the Board Chairperson is the subject of a complaint, the complaint should be referred to the Executive Team.

If the matter remains unresolved, the Board Chairperson or Executive Team will raise the matter at the next Governing body/Board meeting. Depending on the seriousness of the complaint, the Governing body/Board may:

- Deal with the matter at its meeting; or
- Refer the matter to an external consultant to review.

### ***Cooperation in external investigations***

If any person makes a complaint about New Aged Care to an external body (including police, or the Ombudsman) the Executive Team will be responsible for liaising with the body responsible for investigating the issue. New Aged Care will fully cooperate in any investigation which may take place, this includes participating in early resolution, conciliation, and/or reporting to the body about resolution and corrective actions if required.

### ***Record keeping***

A Complaints & Compliments Register and an Incident Register will be kept for a minimum of seven years after the complaint or incident is documented. When a complaint is deemed to be an incident, it will be documented in the Complaints Register noting that it is being managed through the Incident Register. The registers will be maintained by the Executive Team. The Complaints and Compliments Register will include:

- Details of the complainant and the nature of the complaint;
- Date lodged;
- Action taken;
- Date of resolution and reason for decision;
- Indication of complainant being notified of outcome; and
- Complainant response and any further action.

Copies of all correspondence will be kept within the Executive Team's documents within SharePoint Management.

The Complaints Register and Incident Register and associated files, and information contained therein, will be confidential, except where required by law or disclosure is otherwise necessary, and access is restricted to the Executive Team and Governing Body.

A report of complaints and appeals will be available on the SPP system for the Governing Body's review. Review of complaints and appeals will also be a standing agenda item for Board Meetings.

Review of complaints and appeals will also be standing agenda items at Clinical Governance & Quality Committees meetings, and used to:

- Inform service planning by including a review of complaints and appeals in all service planning, monitoring and evaluation activities
- Inform decision making by including a report on complaints and appeals as a standard item on staff and management meeting agendas.

### ***Continuous improvement of the complaints management system***

New Aged Care is committed to regularly reviewing and improving the effectiveness of its complaints management system. The Quality Committee will review and evaluate the



complaints management system annually. This will be noted on the Work Planner calendar. The review will include:

- Review of all complaint and feedback policies and procedures;
- Client and staff feedback about the accessibility and effectiveness of the complaints management system; and
- Implementation of a continuous improvement plan based on the review and feedback received.