

COMPLAINTS MANAGEMENT POLICY

MARCH 2021

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1. Overview

The establishment of the Department of Health (Health) Complaints Management Policy (the Policy) is intended to ensure that complaints raised to the department are managed consistently, fairly, efficiently and effectively. Health will record, monitor and manage complaints consistent with:

- [Commonwealth Ombudsman's Better Practice Guide to Complaint Handling](#) and
- [Australian Standard AS/NZS 10002-2014 Guidelines for Complaints Handling in Organisations](#).

Definition

A complaint is an expression of dissatisfaction about Health's products, services or staff that requires a response or resolution which cannot be managed routinely. A request for an appeal or review is not considered a complaint under this Policy.

Policy Statement

Complaints are a valuable resource for evaluating strengths and weaknesses in new and existing policies, programs and regulation practices for Health. They can be used to identify both local and systemic problems across Health and used to improve service delivery.

The policy encompasses complaints received by the department from:

- members of the general public
- Health's customers and clients and
- other external stakeholders.

This policy is based on a system of decentralisation where the management, monitoring and reporting of complaints is undertaken by individual business areas. With a single point of entry model that underpins the workflow of complaints, to ensure efficient and effective response strategies.

The relationship between Health and its customers is based on a strong customer service philosophy which is at the heart of all our service delivery. It supports our purpose, *'to lead and shape Australia's health and aged care system and sport outcomes through evidence-based policy, well-targeted programs, and best practice regulation'*.

Purpose

The Policy aims to assist in ensuring the responsible management, monitoring and reporting of complaints received by Health.

Objectives

The objectives of the Policy are to:

- promote Health's commitment to its integrity for community confidence in its approach to effective handling of complaints
- identify opportunities to improve performance through the collection and analysis of complaints data and
- ensure staff awareness for the approach for fair, efficient and consistent management of received complaints.

Scope

All business areas managing complaints within Health will manage, monitor and report receive complaint as they relate to:

- Health's performance and its outcomes
- policies and related materials, including but not limited to:
 - their cost, subsidy or eligibility
 - policy development and implementation by Health
 - policy documents/materials sponsored/developed/published by Health

- potential non-compliance with Health's and the Australian Government's (Commonwealth's) policies.
- programs/schemes/projects where Health has direct or indirect involvement, including, but not limited, to their:
 - design and development
 - implementation, management and administration
 - contractual arrangements
 - sponsorship
 - delivery and performance.
- regulatory administrative practice, including but not limited to management of:
 - legislative and regulatory framework
 - compliance and non-compliance with relevant legislation
 - investigation and enforcement activity.
- how Health invests Commonwealth monies, including but not limited to monies spent in programs via procurement and grant activities
- services provided and/or funded by Health
- materials sponsored/developed/published by Health and
- the conduct of Health's officers, contractors and subcontractors.

Where a complaint is received regarding a third party (eg. Health provider, pharmacist, GP etc.), the complaint will be directly work-flowed to relevant business areas involved. This will ensure minimal handling by staff that are not directly involved with information that may be sensitive in nature or information that has attracted media interest.

The following issues, raised through complaints, must be managed through other avenues, these include:

- appeals and requests for review
- complaints that are considered out of Health's portfolio responsibilities
- internal Health issues, including:
 - human resource matters
 - employment issues and/or conditions
 - internal complaints
 - employee grievances
 - IT issues
 - civil litigation
 - criminal conduct
 - APS misconduct.

2. Accountability

Health staff must treat all members of the public in a respectful and professional manner, in accordance with the APS Code of Conduct, and encourage our customers to extend the same courtesy. Unreasonable, abusive and vexatious complainants should be managed in accordance with the [Commonwealth Ombudsman's Better Practice Guide to Managing Unreasonable Complainant Conduct](#). The roles and responsibilities in [Appendix A](#) are guidelines based on the Ombudsman's Better Practice Guide.

Where there is media interest, sensitive information and/or ministerial involvement the complaint should be appropriately escalated to the level of clearance required for an appropriate complaints response.

Complaints will be managed by:

- ensuring information received is recorded and maintained accurately
- performance against resolution timeframes are maintained
- unresolved complaints are escalated using the applicable escalation criteria and process
- ensuring complaints data is analysed for trends and relevant information that will assist in business improvement
- perform against established service standards set out by each business area and
- continually monitor and update their training and skills for the management of complaints.

3. Principles

To enable effective complaints management, the following fundamental principles must be observed:

- F** Fairness and objectivity
- A** Accessibility and visibility
- I** Integration and efficiency
- R** Responsiveness and accountability

These principles aim to ensure that complaints are dealt with effectively and that the complainant is given confidence that they have been heard and their issues will be dealt with appropriately. A full list of the Guiding Principles can be found at [Appendix B](#).

4. Complaints Management Model

Business areas will develop complaints management procedures which provide a platform for how customer complaints are received, processed, managed, referred or resolved from receipt to closure. The business area’s procedures also need to describe in detail how feedback, complaints and enquiries will be managed and reported. Each business area will need to ensure that their escalation and review processes are incorporated into their complaints procedures. All procedures are to comply with this Policy and the [Commonwealth Ombudsman’s Better Practice Guide to Complaint Handling](#)

Below is a high-level model in which Health will manage complaints. These guiding principles outlines what Health will do to ensure a consistent, effective and transparent approach to managing complaints.



[See Appendix C – Complaints Management Model](#) for single point entry options.

5. Reporting and Analysis

Commensurate with the number of complaints and/or the critical nature of their complaints, each business area will be required to report on complaints based on the following key objectives:

- Accuracy - precise, reliable and timely information, based on sound methodology and systems.
- Balanced - a fair and honest picture of achievements presenting strong points and areas for improvement.
- Learning - demonstrated improvement based on learning from past experience.
- Presentation - information that is concise and clear.

Business areas will analyse all complaints data to identify systemic issues and trends that can be used to implement continuous improvement practices. Where appropriate the information should be made available to other business areas to assist in providing consistent approaches to service and program deliverables.

Reporting will be developed for all relevant stakeholders including Health's Senior Executive and will be distributed on a periodic basis commensurate with the importance and need for the report.

6. Quality Assurance

Health is committed to continually improving its service and program delivery and therefore each business area will monitor agreed system improvements resulting from a review of complaints.

Commensurate with the number of complaints and/or the nature of the complaints, relevant business areas must conduct and report on regular reviews and self-audits of the effectiveness of their entire complaints management system, to the relevant Branch Head, Division Head, and stakeholders. This should include an evaluation of the major elements of the system including:

- compliance with the Policy and the business areas' procedures and guidelines
- the accuracy and effectiveness of complaints capture, recording and internal reporting
- the time taken to manage and resolve complaints; and
- the correctness of complaints outcome recording.

Each business area will conduct quality assurance reviews and provide information on the management and performance of their complaints process to the relevant Branch Head, Division Head, and stakeholders. Information from these reviews will be shared (where appropriate) with other areas within Health and all staff involved in the business areas complaints process. This will increase the effectiveness of complaints management and allow reports to more effectively provide useful instruction and accurate guidance on improvement of:

- program and service delivery
- customer service
- business administration.

Periodically, Health will undertake an exercise of collating and analysing complaints data to support the ongoing enhancement to the management of complaints. The information obtained may be used in broader risk management strategies and business operations across Health.

7. Privacy

Health is committed to protecting our customers' privacy in accordance with the Commonwealth Privacy Act 1988 including the thirteen Australian Privacy Principles (APPs) contained in that Act.

All staff must adhere to the [Privacy Act 1988](#), and the [APS Code of Conduct \(Section 4: Managing information\)](#).

[Health's Privacy Policy](#) must be adhered to when referring complaints to an external agency, organisation or third party.

Records relating to actions taken under the policy are subject to the [Freedom of Information Act 1982](#).

Appendix A – Roles and Responsibilities

Roles & Responsibilities	
Complaints Management	
All Staff (Initial Contact)	<ul style="list-style-type: none"> Assist clients gain access to the complaints process. Resolve complaint during initial contact where possible. Accept, acknowledge, record and resolve and/or refer complaint in accordance with duty responsibilities and delegation. Call Centre staff to refer to relevant business areas if specialist knowledge/expertise required.
Section Managers	<ul style="list-style-type: none"> Assess complaint and assign a priority and timeframe. Allocate to an appropriate responsible officer depending on nature and complexity of the complaint Monitor the progress in resolving of complaints managed by their area.
Responsible Officer – Subject Matter Expert	<ul style="list-style-type: none"> Examine and analyse complaint. Respond to customer with a clear decision or outcome. Maintain accurate records that give rationale to the decision made.
Senior Staff (EL2/ Directors)	<ul style="list-style-type: none"> Examine and respond to complaints of a contentious or sensitive nature. Immediately escalate any allegations of misconduct to the Assistant Secretary for further action. Ensure support, guidance and training are offered to relevant staff that are handling complaints in their area.
Assistant Secretary/State & Territory Managers	<ul style="list-style-type: none"> Refer any allegations of criminal misconduct to Investigations and Fraud Control Section (Corporate Assurance Branch) or Assistant Secretary, (People Branch) for allegation of misconduct. Understand trends that are identified by reports relating to their branch. Resolve complaints of a highly contentious or very serious nature as defined in the RBA's escalation process. Resolve complaints that involve media or ministerial interest
Senior Executive	<ul style="list-style-type: none"> Promote a positive culture and awareness in complaint management. Understand trends identified in departmental reports. Ensure a complaint management policy is widely accessible to all staff.

Appendix B - Guiding Principles

Guiding principles	Meaning in the Policy
Fairness and Objectivity	<ul style="list-style-type: none"> • All complaints will be treated on their merits and investigated impartially and thoroughly. • Complaints will be managed transparently, and complainants kept informed about the progress and result of investigations. • Complainants will not be victimised as a result of their complaint. • A complainant's privacy will be respected, and staff will investigate complaints discreetly in accordance with relevant privacy legislation and Health's Privacy Policy.
Accessibility and Visibility	<ul style="list-style-type: none"> • Health will make the lodgement of feedback, complaints and enquiries simple for the complainant. • Health will accept complaints via a range of channels – see Appendix C.
Integration and Efficiency	<ul style="list-style-type: none"> • The business area will use its collective skills, knowledge and experience to finalise complaints and provide complainants with an explanation of what has occurred. • The business area will collaborate across divisions and teams to resolve complaints for the benefit of the complainant. • When required and agreed to by the complainant, the business area will collaborate with other Australian Government departments and agencies to resolve complaints without the complainant needing to contact each organisation. • The business area will use complaints and other feedback to improve service delivery. • The business areas managing complaints will report volumes, reasons, and strategies used to address root causes of the complaints for use in the annual report. • The business areas managing complaints will ensure its response is proportionate and appropriate. • The business area will attempt to finalise complaints as quickly as possible at the first point of contact. The priority and complexity of a complaint will determine whether it is escalated to specialist complaints handling staff. • Complainants are able to raise their issues and/or concerns through the relevant business areas review process, if they remain dissatisfied with Health's response.
Responsiveness and Accountability	<ul style="list-style-type: none"> • Health will act professionally at all times. • Health will balance the needs of staff with the needs of complainants. Alternative servicing options may be implemented for customers that continue to behave in an unreasonable manner or inappropriately towards staff. • Health will be responsive to complainants who have special needs and offer measures to assist them in making a complaint or providing a complaint. • Health will ensure that staff are aware of the needs of vulnerable complainants.

Appendix C - Complaints management model

Guiding principles	Meaning in the Policy
Single point of entry model	<p>Health will receive complaints using the single point of entry model to ensure consistency and efficiency in complaints management. Aspects of the model include:</p> <ul style="list-style-type: none"> • a designated telephone number, diverted to Health’s call centre for workflow to the relevant business area – 1800 020 103 • one designated email address - enquiries@health.gov.au • one mailing address - Department of Health, GPO Box 9848, Canberra ACT 2601, Australia • one designated online complaints form, and • one website.
Data capture	<p>The information required is:</p> <ul style="list-style-type: none"> • the complainant’s name and contact details • the staff member managing the complaint • assignment of a unique identifier • the date of complaint • the type of problem or complaint issue • the outcome sought by the complainant and • the date of resolution, escalation and/or closure.
Communication	<p>Business areas will ensure the complainant is kept informed by providing:</p> <ul style="list-style-type: none"> • an acknowledgement when required • an estimated date for further response and/or resolution, if not immediately resolved • a follow-up and update mechanism • a record of the resolution details • an acknowledgement from the complainant as to whether their complainant has been satisfactorily addressed or otherwise. • a referral to the designated escalation or review process, if otherwise.
Multiple mechanisms for data management	<p>Relevant business areas within Health will record and manage complaints data. Commensurate with the number of complaints and/or their nature, each business area will undertake analysis of their complaints data to identify opportunities to:</p> <ul style="list-style-type: none"> • improve performance • improve policies, programs and regulation practices • improve administrative procedures • identify complaints that span across programs • undertake trend analysis to support management in making informed decisions • improve relations with the public.
First Point of Contact Resolution	<p>Complaints will be investigated and finalised from the First Point of Contact (FPC) where possible. Ownership of the complaint remains with the FPC until it is either finalised or it is work-flowed to a business area or a designated responsible officer.</p>