**Compliments, Suggestions and Complaints Procedure**

Expected Outcome

The service stakeholders of St George Community Transport (STGCT) place emphasis on the importance of feedback. Team members will actively encourage consumers/ team members and community members to process compliments, complaints or suggestions.

Procedure Applies to:

All Team Members

Procedure

Feedback is important in ensuring that services are continuing to meet their needs and for planning appropriate services.

Compliments & Feedback

Compliments are an important part of feedback and can assist STGCT to identify:

* The success of service development actions
* Team Members are providing quality services
* Trends in feedback
* Successes in enablement approaches to service delivery
* Qualitative as well as quantitative data for use in planning.

Compliments & feedback are recorded in the Logiqc QMS system using the specific template. As much as possible the complainant’s own words should be used.

Complaints/Suggestions

An important source of feedback is consumer complaints, and these are welcomed and encouraged by STGCT.

All consumers will be made aware of their right to complain and the use and availability of advocates. Consumers will be assured that they have a right to complain about the service they are receiving without fear of retribution and that they can expect complaints to be dealt with promptly. The process for making a complaint is included in the Service User’s Information Handbook. The Chief Executive Officer and Managers will take steps to ensure that consumers feel comfortable to continue accessing the service after making a complaint by following up any actions with the consumers to ensure they were happy with the process.

The consumer has the right to use an advocate of their choice to negotiate on their behalf with team members. This may be a family member or friend, or an agency such as the Older Person’s Rights Service or Disability Rights Service. The consumer also has the right to select the team member they may wish to talk to.

Team members will be trained to take note of consumer’s concerns and act promptly so that they are addressed as part of service monitoring before concerns become a complaint.

Person/s affected by the complaint will be fully informed of all facts and given the opportunity to put forward their case.

Compliments, Feedback, Complaints and Suggestions can be made:

* Verbally or in writing to head office
* Contacting the Manager/ Chief Executive Officer – verbally or in writing.
* Responding to questionnaires and surveys
* Attending consumer forums, meetings or planning days; or
* Contacting external complaints agencies such as the NSW Ombudsman, the Older Person’s Rights Service or Disability Rights Service.

Team members and other community members also have the right to provide feedback about STGCT and STGCT is responsible to respond and follow up on any complaint or suggestion.

Informal Complaints

Informal complaints from consumers should be dealt with by the team members receiving the feedback unless it involves acts of misconduct, negligence or potential breach of the duty of care to the consumer. As much as possible consumer’s requests for an informal complaint not to be taken further should be respected. At times an informal complaint may wish to be discussed as a suggestion. Informal complaints/suggestions are recorded on Logiqc QMS. Informal complaints from team members or members of the community should be recorded in Logiqc and should be followed by up by the responsible Manager.

Formal Complaints

Formal complaints are recorded in Logiqc QMS. The feedback is to be completed by the person receiving the complaint. Consumers are encouraged to raise their complaint with the Team member concerned in the first instance.

Team members that have had a concern or complaint expressed to them must document the matter and/ or enter it in Logiqc QMS. Team members must also discuss the matter with their Manager/ Supervisor. The Manager/ Supervisor will oversee documentation, records and processes relating to the complaint.

If the consumer is not satisfied with the outcome negotiated with the team member/ Manager, they may contact the Chief Executive Officer directly, or use an advocate to negotiate on their behalf. The consumer complaint will be dealt with within 10 days of the complaint being made. The consumer will be informed of the outcome of their complaint and asked for their feedback on the complaints procedure.

If the consumer is not happy with the outcome, the consumer may raise the issue with the Chairperson of the Board. The Chairperson will take the complaint and investigate accordingly, keeping the consumer updated regarding progress (every 5 working days). The Chairperson will inform the Executive of his/her investigations and the Executive will make a determination. That determination will be advised in writing to the Complainant within 14 days of the complaint being received by the Chairperson.

If after approaching the above people, the issue is still not resolved, the consumer will be referred to the NSW Ombudsman.

Team members and community members may raise formal complaints through the Manager or the Chief Executive Officer. The complaint will be lodged in Logiqc and will be followed up within 10 days.

Confidentiality of Complaints

All attempts should be made to ensure that any complaints made to the service are treated in such a way to ensure confidentiality. The consumer’s permission will be obtained prior to any information being given to other parties that it may be desirable to involve, in order to satisfactorily resolve the complaint.

**Documents related to this procedure**

* Logiqc QMS - record feedback
* doc\_144 Complaints Flowchart
* doc\_300 Service User Information Handbook
* doc\_133 Advocacy Policy
* doc\_ 281 Advocacy Procedure
* doc\_ 131 Compliments, Complaints and Suggestions Policy
* STGCT Newsletter

**Relevant Standards**

**Aged Care Quality Standards**

1. Consumer Dignity & Choice

6. Feedback & Complaints

**NDIS Practice Standards**

1. Rights and Responsibilities

2. Provider Governance and Operational Management