

COMPLAINTS AND DISPUTES**1.0 PURPOSE**

- 1.1 The purpose of this procedure is to establish mechanisms for all stakeholders of Spinal Injuries Association to lodge a complaint, grievance or dispute against the Association or any of its employees; and to ensure that these are recorded and actioned in a transparent and accountable manner.

1.2 OBJECTIVE

- 1.2.1 To improve stakeholder confidence in the complaints process by developing a complaints management system which considers complaints to be opportunities to improve; which is a fair, equitable and timely process; which strives for the best outcome for the complainant within reason; and which is regarded by stakeholders as a process towards excellence.

2.0 SCOPE

- 2.1 All Spinal Injuries Association stakeholder complaints and disputes (excluding grievances, see 3.1.1 below).

3.0 PROCEDURE**3.1 General**

- 3.1.1 Spinal Injuries Association defines a complaint or dispute as any stakeholder dissatisfaction with the service. The Association welcomes any positive or negative feedback from any stakeholder as it allows for continual improvement and quality of service.

Where a stakeholder identifies they are making a complaint, this process will follow. Where a stakeholder expresses dissatisfaction with the service, but does not specify they wish to lodge a complaint, a department's own internal service management processes will progress the issue to resolution (***Continual Improvement Procedure***).

The Association defines a ***grievance*** as a staff-raised internal complaint (ie. a grievance raised against another staff member). There is a separate ***Grievance Procedure*** and process, however for consistency the objective above applies to both processes.

- 3.1.2 Individuals shall be able to express complaints without fear of retribution and have these matters addressed in a manner which is not threatening.
- 3.1.3 No person who raises or lodges a complaint shall be subjected to any reprisal as a result of their registration of a complaint. This includes subtle or implied reprisal.
- 3.1.4 Individuals shall have the right to take a complaint to any level within the Association. However, where possible the complaint shall be addressed and resolved at the point of conflict by the persons concerned, or as close as possible to the level within the Spinal Injuries Association where the conflict has occurred.
- 3.1.5 Individuals shall have the right to have an independent advocate present at any time
- 3.1.6 The primary aim of the Complaints and Disputes Procedure is resolution of any problems

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or concerns.

3.2 Complaint Process

NB: When a complaint is received by a stakeholder, the complaint will be documented. Documentation of the complaint will be stored in the stakeholder's file and/or the Document Control System, and a Quality Improvement Request raised as part of the complaints process (see Complaints – Registering process below).

3.2.1 The person with a complaint is encouraged to discuss the problem with the person(s) directly involved in order to resolve the complaint.

3.2.2 If the matter is not resolved or if the person feels uncomfortable about raising the problem with those directly involved, they may progress the complaint through the levels of management, i.e. Supervisor, Manager, Executive Manager (EM) and Chief Executive Officer (CEO), until the complaint is resolved.

3.2.3 If the complaint remains unresolved, individuals may choose to pursue the option of dispute resolution through mediation services or other professional body. The Association will support individuals with information about and access to those services – see Appendix B.

3.2.4 If a complaint involves an alleged criminal action, staff will undertake action as per **Critical Incident Reporting Procedure**.

3.2.5 If the complaint could result in adverse public relations, the staff member will immediately advise their Manager.

3.2.6 If the complaint could result in adverse public relations the EM will advise the CEO.

3.2.7 If the complaint is about another person, then that person must be told about the nature of the complaint. This person then has the right and responsibility to respond and to have support from a representative of their choice.

3.2.8 The Manager/EM who is assigned the complaint will:

- Initiate an appropriate investigation and nominate a person with the required competencies to undertake the investigation;
- Contact the complainant within 48 hours to acknowledge that their complaint has been received and that an investigation is underway.
- Contact the complainant at least once every two weeks with an update of the progress of the complaint investigation until resolution. Every effort will be made to keep the investigation time to a minimum, without compromising the quality of the investigation.
- Advise the stakeholder of the outcome of the complaint and record the outcome in the stakeholders file. The outcome of the complaint is to be advised in writing.
- Update the Quality Manager on the progress and outcome of a complaint, as well as any improvement action.

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3.2.9 Complaints will generally be investigated internally by a Manager or Executive Manager of the Department the complaint is raised in; however, complaint may be investigated by an independent internal party or external agency at the discretion of the relevant Executive Manager, or as nominated by the complainant. This also applies to Employee Grievances.

3.3 Complaints - Registering

3.3.1 For each complaint raised, a Quality Improvement Request (QIR) will be lodged – refer to **Continual Improvement** procedure. QIRs relating to complaints can be raised by any staff member.

3.3.2 A Quality Improvement Request can be lodged either;

- electronically via the Spinal Injuries Association Intranet (for staff who have access) or;
- via a manual **Quality Improvement Request (QIR) form**

3.3.3 If the complainant requires assistance submitting a QIR, assistance may be provided by a staff member. If the complainant is not prepared to submit a QIR, then the relevant staff member may submit the QIR on behalf of the complainant.

3.3.4 The **Continual Improvement procedure** outlines the steps to be taken to close out the QIR.

3.4 Complaints – Highly Sensitive Nature**3.4.1 Definition**

3.4.1.1 Complaints of a highly sensitive nature include but are not limited to sexual harassment, abuse and neglect and bullying.

Issues raised by stakeholders regarded by the Association as of a highly sensitive nature require escalation to the complaints process regardless of whether the stakeholder identifies their feedback/issue as a complaint. For a list of these categories, please see Appendix A. Please note this is not a definitive list and there may be exceptions – if you are uncertain, please see the Quality Manager.

3.5 Complaints – Highly Sensitive Nature Processing

3.5.1 The Manager/EM lodges a QIR to register the complaint as per 3.3. The QIR will provide a high level overview of the complaint but will not include information of a highly sensitive nature.

3.5.3 The Manager/EM will advise the Quality Manager of the dates when the action is required, action taken and follow up of the QIR have occurred. The Quality Manager will record this on the QIR.

3.5.4 All documentation relating to the Complaint of highly sensitive nature is forwarded by the Manager/EM to the Executive Manager – People and Organisational Development to be filed in a clearly labelled, secured environment within Human Resources.

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- 3.5.5 The Quality Manager will be advised by the Manager/EM when the documentation is filed and this will be recorded on the QIR.
- 3.5.6 Access to files containing highly sensitive information can only be provided by the Executive Manager – People and Organisational Development or designee when requested by the EM or designee.
- 3.5.7 A notation advising that a Complaint of highly sensitive nature has occurred will be recorded in the Staff/Client/Members file.

3.6 Access and Copies

- 3.6.1 The Executive Management Team (EMT) is informed about each complaint lodged in their department.
- 3.6.2 All complaints will require:
- A quarterly summary of complaints received collated and reviewed at the Management Review meeting.

4.0 REFERENCES

Document and Data Procedure
Record Control Procedure
Continual Improvement Procedure
Complaints and Disputes Policy
Privacy and Confidentiality Policy and Procedure
Risk Management Procedure
Critical Incidents Reporting Procedure
Workplace Harassment Procedure
Employee Grievance Procedure
Quality Improvement Request form
Complaints Flowchart Office Use Only and General

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The following feedback should be registered as a complaint by following the procedure above – see section 3.3 and 3.4.

- Bullying or harassment.
- Discrimination.
- Abuse
- Neglect
- Assault
- Other allegation of criminal activity
- Breach of privacy and confidentiality

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APPENDIX B – LIST OF EXTERNAL COMPLAINTS RESOLUTION AGENCIES

Complaints Resolution and Referral Service	1800 880 052 (free call)
Disability and Communities Complaints Unit	Disability Services Telephone: 3224 7179 TTY: 3224 8021 Email: complain@disability.qld.gov.au for more information or to receive a brochure about the Disability Services Complaints Service.
Legal Aid QLD	1300 651 188
National Disability Service Abuse and Neglect Hotline contact points	Telephone: 1800 880 052 (toll-free within Australia) TTY: 1800 301 130 (toll-free within Australia) National Relay Service: 1800 555 677 (toll-free within Australia) Telephone Interpreter Service: 131 450 (cost of a local call)
Office of the Adult Guardian	(07) 3234 0870 or 1300 653 187
Public Trustee (Brisbane)	(07) 3213 9288
QLD POLICE (Headquarters Brisbane)	(07) 3364 6464
Queensland Anti-Discrimination Commission	Level 17, 53 Albert Street Brisbane, 4000 Tel 1300 130 670 TTY: 1300 130 680
Queensland Victims Counselling & Support Line	1300 139 703
Regional Dispute Resolution Centre	179 North Quay BRISBANE QLD 4000 Tel 3239 6007 Free Call 1800 017 288
Sexual Assault Services	Statewide Sexual Assault Help Line (open 24 hours a day) 1800 010 120 (free call)