
Client Complaints Policy and Procedure

Client Complaints P & P

Whakamana



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This policy applies to/ E Pā Ana Tenei Kaupapa Here Ki:

All Emerge Aotearoa kaimahi / employees, volunteers, students and contractors and people/clients / whanau supported by our services.

We need this policy because/ Kei Te Hiahia Tatou Ki Tenei Kaupapa Here Na Te Mea:

To ensure the rights of people accessing services and their family/whanau when making a complaint, are understood, respected and upheld and any learnings from the complaint investigation used to improve and develop services and the organisation.

Ako



Policy/ Ngā Kaupapa Here

A complaint may be made at any time, verbally or in writing.

All situations which include allegations of criminal behaviour or abuse must be recorded as a complaint and follow the investigation process.

Service delivery to the person accessing services will not be adversely affected by making a complaint.

Complaint documentation will not be stored on the client record.

All complaints will be managed in a systematic way as required by legislation, sector standards and as outlined in this document.

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Complaints that require notification to HealthCert will be processed using the approved [template](#) accessed on MOH website *Notifying an incident under section 31*

Complaint process time frames will be strictly adhered to.

Investigations will be led by the District/Operations Manager not directly named in the complaint.

Investigations and written responses are supported by Lived Experience Partners (LXP) and Quality.

Information from complaints will be analysed for service improvements in partnership with the Quality and Lived Experience Teams and disseminated to relevant services at National and Regional meetings.

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Service Improvement measures will be implemented, and actions documented in the Quality section of Team Meeting Minutes.

Monitoring of improvements and organisational learning will be measured by client surveys and Lived Experience Partner service visits. Feedback from Lived Experience Partners will be provided to Senior Managers who will monitor corrective actions.

Professional Practice

Tamariki and Rangatahi

An external support person for tamariki (children) and rangatahi (young people) will be identified on entry to the service (e.g. VOYCE, Social Worker)

All tamariki and rangatahi and their advocates will be informed and have information available on how to make a complaint.

Procedure/ Ngā Whakahaere

Receiving and Acknowledging Complaints

All situations which include allegations of criminal behaviour or abuse must be reported to the Regional manager and the appropriate authority at the earliest opportunity, recorded as a complaint and follow the investigation process.

Written complaints and documented verbal complaints will be sent to the Quality team to be recorded in the electronic system within that working day and forwarded to the District Manager and the Lived Experience Partner.

Verbal complaints will be recorded at the time and will be checked with the person raising the complaint that the record is correct.

In some cases, people may be reluctant to formally complain, or will make a complaint and then ask that no action be taken. In these cases, staff should explain that it is our policy to use this feedback as a learning opportunity to improve our services and thank the person for bringing the issue to our attention.

Investigation of Complaints

Within five working days

The District /Operations Manager will:

- Decide the risk rating and how the complaint will be investigated/resolved using recommended complaint investigation guidelines
- Send a letter acknowledging the complaint / valuable feedback. Inform the person raising the complaint of the complaint process and thank them for bringing it to our attention
- Include our process, expected timeframes and that we may need to communicate with the person to gather further information
- Keep the Regional Manager and National Managers Health and Disability/Housing and Lived Experience Partner informed of the complaint and updated on the progress of the complaint investigation.

Within 20 working days of the complaint being lodged

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The complaint will be investigated and resolved. If for any reason more time is required, the complainant will be sent an update with the new expected timeframe for an outcome by day 10. Updates will be provided at least monthly should any extension be required.

Investigation may include meeting or communicating with the person making the complaint to gather further information. They will have been informed of this in the acknowledgement letter.

During the investigation, consideration will be given to the Emerge Aotearoa values, the Code of Health and Disability Consumer Rights, Health Information Privacy Code, Health & Safety in Employment Act, or any other contractual or legislative requirement that may apply.

The Investigator will ensure the complaints register/system is updated with details of the investigation and the investigation will be concluded, giving enough time to respond to the person making the complaint within 20 working days from receipt of the complaint.

All documentation including the investigation process will be filed with Quality Assurance and is accessible on request to the Quality Team by District/Operations Managers, Line 3 or above.

Complaints Risk Rating

High	Client's needs not met resulting in harm
Moderate	Client's needs not met with impact on positive client experience
Low	Client's needs only partially met with minimal negative impact on client experience

Low risk complaints can be resolved in a meeting with the person raising the complaint including:

- Acknowledging the complaint in writing
- Informing them of their right to advocacy
- Offering to meet, and if the person wants to meet negotiating a time, place and participants of the meeting
- Using our values to learn from the issue and discussing at team meetings and regional meeting to share the learning and prevent reoccurrence
- Include cultural support and/or interpreter support as required

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Moderate complaints process includes:

- Acknowledgement of the complaint in writing
- Providing information on advocacy and HDC
- Preferably negotiating a face to face meeting time and place with the person raising the complaint at a time and place the person is comfortable with
- Consider cultural support and/or interpreter support

High Risk Complaints process includes

- Notifying Regional Manager, who will escalate as required
- Acknowledgement of the complaint in writing
- Providing information on advocacy and HDC
- Preferably negotiating a face to face meeting time and place with the person raising the complaint
- Include cultural support and/or interpreter support as required
- If required, reporting the complaint to HealthCert and/or the DHB/ funder.

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Review of documentation

Lived Experience Partner and Quality Assurance review the content of the final response letter which will include:

- Details of the results of the investigation and whether it has been upheld or could not be substantiated
- Details of how any improvements will be implemented and timeframes
- Evidence that the complainant has been consulted and is satisfied with the outcome
- Information on the appeal process

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Where the investigation is not concluded within 20 working days, a written update to the progress of the investigation and a reason for the delay will be provided to the person raising the complaint by day 10, with an expected timeframe for the investigation to be completed. Monthly updates will be provided at a minimum should there be any further delays.

Appeal Process

If the person raising the complaint appeals the outcome of the complaint investigation the Regional Manager will consider involving an external reviewer, discuss options with the National Manager, and will:

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Within one week

Consider the need for further investigation by:

- Gathering information from the investigator of the complaint
- Reviewing the related documentation

Contact the person who raised the complaint to:

- Clarify what the person is not happy with
- Offer to meet to discuss and gather more information
- Keep the National Manager informed

Decision is made to close the complaint

The Regional/Operational Manager informs the person raising the complaint of the decision in writing.

If the decision is **accepted** the complaints register / system is updated and the complaint is closed.

If the decision is **not accepted** and the person raising the complaint is not satisfied the Regional/Operational Manager:

- Advises the person that they may refer the complaint to the Health & Disability Commissioner or The Privacy Commissioner
- Reinvestigates the complaint
- Advises Quality Assurance of the outcome to update the complaint register

Service Improvement Process

Service improvement begins with thorough, respectful investigation of all complaints and feedback that includes a responsive approach to all parties and an understanding of their worldview.

The identification and development of corrective action plans where a complaint is upheld is logged on the Complaints register by Quality Assurance for national review of trends and improvements.

Services will be supported by their Line Managers to learn from all feedback and complaints by reviewing root causes of complaints and resulting improvements.

Monthly – Service Manager/Team Leader

- Discuss at team and client/whanau meetings to identify trends and documents service improvement measures.
- Provides feedback to Quality Team

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Two Monthly – District/Operational Manager

- Discuss at District and/or Regional Leadership meetings to identify service improvement measures
- Provides feedback to Quality Team

Three monthly – Quality Team

- Identifies area(s) of service improvement(s) resulting from learning from complaint(s)
- Assess the effectiveness of improvement measures taken
- Update the complaints register
- Provides update to Quality Governance Group

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Six Monthly – Quality Team

- Complete trend analysis
- Monitors and reports implementation of service improvements
- Analyses effects of service improvement measures (refer Quality Improvement Framework)
- Provides update to Quality Governance Group
- Client Complaints Recording Process

Definitions/ Ngā Whakamāramatang

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- Client or person using the service can also be identified as; people, tangata whaiora, whaiora, whānau, service user
- A complaint is:
 - Any expression of dissatisfaction about services provided

Dissatisfaction with the conduct of a staff member/ student placement/ contractor/ management of Emerge Aotearoa
- A complaint may be made:
 - Directly from a service user their family/whānau.
 - Through the Health and Disability Commissioners office.
 - Through the Privacy Commissioners office.
 - By a member of parliament.
 - Through Consumer Advocates.
 - By a service provider.
 - By a member of the public.
- Feedback is an observation, remark or expression of opinion about aspects of the service/organisation that could be improved. A person will in the first instance be informed of their right to make a formal complaint.

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- Where the person identifies they do not want to make a complaint their comments may be formally recorded with the person's knowledge on the **Compliments Feedback and Suggestions form 180A107** and submitted to their line Manager and Quality Assurance for recording on the National Feedback Register.
- The same timeframes will be followed for investigation and response to feedback as a formal complaint. Corrective Actions will be documented in the quality section of team meeting minutes.
- Anonymous complaints – people lodging a complaint or feedback may prefer to be anonymous. Investigations will occur within the limitations caused by the anonymity and the limitations will be acknowledged in any documentation.
- NOTE: Where a person's life is at risk, criminal behaviour or court proceedings are involved anonymity may not be possible.
- Family/Whānau – includes but is not limited to carers, guardians, significant other/s, friends, etc.

See also/ Etahi Atu Tirohanga

- Health and Disability Services Standards, 8134:2008
- Health and Disability Commissioner Website - <http://www.hdc.org.nz/>
- HDC Complaints processes
- Open Disclosure policy and procedure
- Incident Reporting policy and procedure