

NQPHN Policy

Title:	Feedback, Compliments, and Complaints Policy	Doc Ref.:	CORP-PLY38	Version:	3
Category:	CORP	Owner:	Operations Director Business Services	Authoriser:	Executive Director Business Services

1. Purpose

The purpose of the Feedback, Compliments, and Complaints Policy is to establish the scope, objectives, and principles for:

- processes for stakeholders and staff to provide feedback, compliments and complaints (collectively 'observations') about NQPHN
- processes for stakeholders, government and the public to provide clinical feedback, compliments and complaints about commissioned services to NQPHN
- processes to monitor, assess and report against observations.

2. Scope

This policy applies to observations about NQPHN received:

- from both external clients (i.e. the public) and internal clients (i.e. work units providing services to other work units)
- by staff
- anonymously
- via the Chief Executive Officer or Board correspondence.

This policy applies to clinical observations NQPHN receives about commissioned services which may come from varied sources and through various communication channels.

This policy applies to all staff, contractors, and consultants.

3. Terms and definitions

Term	Definition
Board	The NQPHN Board of Directors.



NQPHN acknowledges the Aboriginal and Torres Strait Islander peoples as Australia's First Nation Peoples and the Traditional Custodians of this land. We respect their continued connection to land and sea, country, kin, and community. We also pay our respect to their Elders past, present, and emerging as the custodians of knowledge and lore.



Term	Definition
Complaint	<p>Complaints are concerns that are raised by a complainant and may include concerns arising from:</p> <ul style="list-style-type: none"> • a decision made, or failure to make a decision • an act or failure to act by NQPHN • the making of a recommendation by NQPHN • the service provided by NQPHN staff, consultants, contractors or any other person that provides services whether paid or on a voluntary basis • NQPHN's handling of personal or sensitive information. <p>Clinical complaints are observations of concerns that are raised by a complainant about a service funded by NQPHN and may include concerns arising from:</p> <ul style="list-style-type: none"> • access to a service or care • the quality of the service or care intervention • an act or failure to act by the service provider to deliver services or care • transitions within a service or care system.
Compliment	<p>Compliments are positive observations that are raised by a stakeholder to NQPHN and relate to the service provided by NQPHN staff, consultants, contractors or any other person that provides services whether paid or on a voluntary basis.</p> <p>Clinical compliments are positive observations that are raised by a stakeholder to NQPHN and relate to a positive experience of a service or care funded by NQPHN.</p>
Feedback	<p>Feedback are observations of a neutral nature (i.e. neither positive or negative) that are raised by a stakeholder (feedback provider) to NQPHN and relate to the service provided by NQPHN staff, consultants, contractors or any other person that provides services whether paid or on a voluntary basis.</p>
Framework	<p>A framework incorporates the policies, procedures, work instructions and/or guidelines used to create consistency and repeatability in business operations supporting good governance.</p> <p>A framework document is a simplified description of a complex business unit or process.</p>
Governance	<p>The corporate governance of NQPHN, including Board composition, structure of sub-committees, conflicts of interest, risk management, and policies.</p> <p>This includes governance functions such as the planning, scoping, resourcing, monitoring and growth of the business as well as legislation, regulations, standards, codes of practice, and contractual requirements.</p>
Guidelines	<p>Advisory and explanatory statements offering detail, context, and/or recommendations for good practice.</p>
Observation/s	<p>The collective noun representing feedback, compliments or complaints.</p>
Policy	<p>A statement of the mandatory principles guiding NQPHN's operations and significant decision-making.</p>
Procedure	<p>Statements of NQPHN's mandatory prescribed processes, practice, and/or actions, which give effect to a policy.</p>
Staff	<p>A person carrying out work in any capacity for a person conducting a business or undertaking, including as an employee, contractor, sub-contractor, employee of a contractor, sub-contractor or labour hire company, or any person in a volunteer or training/work experience capacity. Are people who carry out work in any capacity for NQPHN including work such as employees, contractors or subcontractors, an employee of a labour hire company who has been assigned to work at NQPHN, an apprentice, trainee, a student gaining work experience or a volunteer.</p>
Standard	<p>Statements of NQPHN's mandatory prescribed specifications as to the qualities of a product, service, system, infrastructure, or other resource which give effect to a policy.</p>

4. Policy

The Feedback, Compliments and Complaints Policy is intended to fulfil the following objectives:

- Demonstrate a commitment to a high standard of observation management to ensure that these are assessed and responded to in a timely manner
- Promote a culture of frank and open disclosure of observations without fear of victimisation or unfair treatment
- Provide monitoring and reporting systems to identify instances systemic and re-occurring issues
- Promote observations as a means to identify opportunities for improvement and enhance quality of care for consumers
- Enable prompt action where necessary to address observations that present an unacceptable exposure to risk or to consumers of a service
- Assess observations consistently using pre-determined assessment criteria
- Provide for periodic reporting and review of the observations management process and its contribution to organisational performance.

4.1 Feedback, Compliments, and Complaints Principles

NQPHN commits to providing effective processes to staff and stakeholders to provide observations through the following principles:

Principle	What this means
People focus	Everybody has the right to provide observations. NQPHN will treat people providing feedback with respect. NQPHN will involve a complainant in the process, if possible and appropriate.
Visibility	Information about how observations may be made will be well publicised on NQPHN's website.
Accessibility	NQPHN will ensure that the observations handling process is accessible and easy to use for all stakeholders. NQPHN will accept observations verbally and in writing via a range of formats. Those providing observations will not be charged a fee.
Responsiveness	NQPHN will acknowledge and respond to all observations as quickly as possible, recording any key actions of any investigations until finalised.
Objectivity	NQPHN will address all observations in an equitable, fair and unbiased manner using evidence submitted by both stakeholders and our staff through the observations handling process.
Confidentiality	NQPHN will apply strict privacy and confidentiality in observations handling.
Stakeholder focus	The interests of NQPHN's stakeholders are foremost in our approach to observations handling as NQPHN is committed to resolving problems, improving relations and building loyalty. NQPHN will work together with our stakeholders to look for a mutually beneficial solution that provides the best outcome for all parties within the resource and practical constraints the situation presents.

Accountability	NQPHN will ensure responsibilities are clearly outlined to staff. Observations will be reported to our Board.
Continuous improvement	<p>NQPHN will:</p> <ul style="list-style-type: none"> • identify trends for the purpose of improving service and business practice • promote feedback, compliment and complaint management better practice • foster a stakeholder-focused approach • provide training to staff to ensure consistent observations handling practices • encourage innovation in observations handling practices • recognise exemplary observations handling behaviour by our staff

5. Roles and responsibilities

Role	Responsibility
Board	<ul style="list-style-type: none"> • Review and approve the Feedback, Compliments and Complaints Framework and Policy in accordance with the Policy Governance Framework.
FARM Committee	<ul style="list-style-type: none"> • Review and endorse the Feedback, Compliments and Complaints Framework and Policy in accordance with the Policy Governance Framework.
CEO	<ul style="list-style-type: none"> • Review and endorse the Feedback, Compliments and Complaints Framework and Policy in accordance with the Policy Governance Framework. • Demonstrate Executive leadership and support through the promotion of the Feedback, Compliments and Complaints Framework.
Executive Team	<ul style="list-style-type: none"> • Demonstrate Executive leadership and support through the promotion of the Feedback, Compliments and Complaints Framework.
ED Business Services	<ul style="list-style-type: none"> • Ensure that all policy and procedure documents are developed, approved and implemented. • Ensures that appropriate consultation has taken place before seeking formal approval. • Ensures that reviews of the framework documents are conducted in accordance with the Policy Governance Framework. • Approves all procedures and supporting documents for the Feedback, Compliments and Complaints Framework. • Ensures that training is maintained and provided to staff. • Ensure that monitoring, analysis and reporting over feedback, compliments and complaints is performed.
Staff	<ul style="list-style-type: none"> • Demonstrate support by using the Feedback, Compliments and Complaints Framework. • Undertake training relevant to the Feedback, Compliments and Complaints Framework.
Risk Manager	<ul style="list-style-type: none"> • Maintain the Feedback Compliments and Complaints register.

- Support the ED Business Services in the performance of their Roles and Responsibilities relating to Feedback, Compliments and Complaints.

6. Management approval

Authorised by:	Chief Executive Officer- Ben Tooth	Signed:	
Date:	28 November 2024	Review date:	November 2026

7. ISO 9001:2015 requirements

Clause 7: Support

7.5 Documented information

7.5.1 General

7.5.2 Creating and updating

7.5.3 Control of documented information

7.5.3.1 Documented information shall be controlled

7.5.3.2 For the control of documented information

Clause 9: Performance evaluation

9.1 Monitoring, measurement, analysis, and evaluation

9.1.1 General

9.3 Management review

9.3.1 General

9.3.2 Management review inputs

9.3.3 Management review outputs

Clause 10: Improvement

10.1 General

10.2 Nonconformity and corrective action

10.2.2 The organisation shall retain documented information

10.3 Continual improvement