

Whole of Department PROCEDURE

Title: Complaints Management Procedure

Purpose:

The Department of Child Safety, Youth and Women (the department) is committed to effective complaints management by managing complaints in an accountable, transparent, timely and fair manner.

This procedure is to be read in conjunction with the department's Complaints Management Policy and has been developed to provide guidance to officers in complaint management handling to ensure all complaints are managed consistently and within agreed timeframes.

All complaints must be entered into the department's electronic complaint management system (Resolve) to ensure consistent monitoring and reporting of complaints.

Suspected harm or risk of harm

Information relating to suspected harm or risk of harm to a child must be immediately referred to the appropriate Regional Intake Service for assessment.

First attempt at resolution

First attempts at resolution are defined in the Complaints Management Policy and are not subject to this procedure. Examples of matters considered resolved at first attempt at resolution may include:

- A case plan was not provided to a parent in a timely manner, and the parent has called the Senior Team Leader to express their concern. The Senior Team Leader returns the phone call to the parent and organises for the relevant documentation to be provided.
- A step-parent has contacted a regional Senior Advisor to express their dissatisfaction that an Investigation and Assessment was recently closed and the child was 'left' in the care of their parent who is using drugs. The Senior Advisor confirms that the step-parent hasn't discussed their concerns with the Child Safety Officer or Senior Team Leader. The Senior Advisor refers the step-parent back to the CSSC to discuss with the Child Safety Officer and/or Senior Team Leader.
- The CEO of a non-government organisation calls the Central Complaints Unit with concerns they have not received the outcome of their recent grant application. The

Central Complaints Unit confirms the CEO has not yet discussed their concerns with the department’s contact person nominated for the grants process. The Central Complaints Unit refers the CEO to the relevant contact person.

Complaint

For the purpose of this procedure, a complaint is:

- an expression of dissatisfaction by a complainant regarding;
 - a decision made or not made by the department; or
 - a service provided or not provided by the department; or
 - a service that is funded or contracted by the department; or
 - the behaviour or performance of the department’s employees, including contracted persons.
- that has NOT been resolved at the first attempt at resolution, and
- requires a response or resolution, and
- is not a matter prescribed as ‘Out of scope’ in the Complaints Management Policy.

A complaint may be:

- lodged by a complainant or their representative/advocate, through one of the available channels, or
- referred by a department officer after one attempt at resolution has been made by an officer or their supervisor

Complaints Management System

Phase 1	Phase 2	Phase 3
Complaints Management	Internal Review	External Review

Complaints Management – Phase 1

Complaints management process

Management of a complaint follows these key steps:

1. Enter the complaint in the electronic complaints management system (Resolve), and maintain relevant records as the complaint progresses.
2. Acknowledge receipt of the complaint.
3. Ensure complainants have the opportunity to be supported by a friend, an advocate, an interpreter, a community Elder or Independent Entity.
4. Clarify the concerns and desired outcomes with the complainant.

5. Assess the complaint against established criteria, including any alleged breach of the Human Rights Act 2019, and decide which concerns will be progressed
6. Provide information about the complaints management process, timeframes and the name and position of the allocated complaint administrator/investigator and decision maker.
7. Where complaints involve multiple parts of the department or organisations, provide a single point of contact within the department and communicate complaint management roles and responsibilities to complainants.
8. If a complaint concern relates to a child protection practice decision, consider whether a senior practitioner review should be undertaken.
9. Manage the complaint, ensuring relevant parties to the complaint are afforded procedural fairness and kept informed throughout the process. The complaints management process could include:
 - Direct/informal response options
 - Formal Investigation
 - Senior Practitioner Review
 - Taking no further action
 - Make preliminary findings and outcomes
 - Provide the complainant with a right of reply to preliminary findings and outcomes.
 - Make final findings and outcomes.
10. Advise the complainant in writing of final findings and outcomes, including complaint decisions, reasons for decisions, review options and any other action taken.
11. Record findings, outcomes, and any other action taken in the electronic complaints management system and close the complaint.
12. Ensure that outcomes and follow up actions are completed.

Complaints complexity

Low complexity complaints

Low complexity complaints generally require no investigation and can be easily addressed through the provision of information, or through negotiating a desired outcome, perhaps through a face-to-face meeting or over the phone.

Low complexity complaints should take no more than **30 business days** to manage.

Medium complexity complaints

Medium complexity complaints may require some investigation, senior practitioner review, negotiation or facilitated discussion with the complainants or consultation with other areas of the department.

These complaints should take no more than **60 business days** to manage.

High complexity complaints

High complexity complaints are matters where there are possibly a large number of complaint allegations, or where the complaint allegations may refer to possible systemic concerns. These matters will typically involve complainants providing detailed or lengthy background information that requires considerable time to address.

Formal investigation is typically required, sometimes involving a number of units in the department, and may involve interviews or discussions with staff and other relevant persons, including external persons of interest and jurisdictions. These matters may also require a senior-practitioner review.

These complaints may take up to **six months** to complete.

Complaint management roles

Every complaint must be assigned an employee to perform the two roles described below. A complaint may be managed by a single employee, or two different employees, performing the roles.

A single employee can perform both roles if they meet the stated requirements.

Role	Requirements
Complaint administrator and investigator	An employee of the department who is appropriately capable of performing all the steps outlined in Phase 1 above, with the exception of those steps allocated to the Complaint decision-maker role
Complaint decision-maker	An employee of the department: <ol style="list-style-type: none"> 1. with the relevant delegations (statutory / financial / human resources) and / or positional authority to perform steps 9 and 11 of the complaint management process outlined in Phase 1 above regarding making findings and decisions and the determination of appropriate complaint outcomes, and 2. determined following due consideration for actual, perceived or potential conflicts of interest.

Direct/informal response options

A direct/informal response might be a facilitated discussion, a face-to-face meeting, an informal discussion over the phone between the departmental officer and the complainant or an explanation of departmental legislation/policy/procedure that results in a resolution to the complaint.

A written response is required, and a right of reply to preliminary findings / decision and outcome advice must be afforded prior to making a final determination.

Formal Investigation

An investigation is a process whereby the department investigates complaints made by complainants. The complaint allegations need to be tested and assessed against legislation, relevant policies, procedures, standards, and service agreements.

A written response is required, and a right of reply to preliminary findings / decision and outcome advice must be afforded prior to making a final determination.

Senior Practitioner Review

A senior practitioner review can be conducted as part of a response to a complaint regarding a practice decision or practice that led to a decision. Either the complaint administrator/investigator or decision-maker can request a Senior Practitioner or other suitably qualified practitioner (such as a Regional Practice Leader or Aboriginal and Torres Strait Islander Practice Leader) undertake a senior practitioner review to support and inform the complaint process.

A senior practitioner review may also be conducted to inform an internal review of a complaint where appropriate.

The review will make findings to assist the decision-maker determine the outcome of the complaint. The review may also make recommendations to respond to opportunities identified in the review to strengthen practice.

Where the complaint relates to Aboriginal or Torres Strait Islander children and families, the review should be undertaken by, or in partnership with, an identified staff member.

To promote objectivity, the reviewer should not be currently, or have previously been, involved in consultation related to the decision, or practice leading to the decision.

Taking no further action

The department may decide to take no further action where dealing with the complaint would be an unjustifiable use of resources or where the complaint:

- is frivolous or vexatious
- lacks substance or credibility

- is not made in good faith
- is made recklessly or maliciously, or primarily for a mischievous purpose
- has already been managed and exhausted under the Complaints Management System.

Communication Plans

Where the complainant's conduct is unreasonable; for example making excessive or threatening telephone calls, emails or letters when requested not to, a communication plan may be developed to guide future communications between the department and the complainant.

Internal Review – Phase 2

After progressing through Phase 1, if a complainant is dissatisfied with the process undertaken to manage a complaint, or the outcomes of a complaint, the complainant can request an internal review.

A request for an internal review should:

- state clearly the details of what specific aspects of the complaint management process or outcomes the complainant disagrees with and why the complaint should be reviewed, and
- be lodged within 12 months of receipt of the complaint outcomes.

If the complainant is seeking an internal review of the outcomes of a complaint, the internal review must:

- Consider primary documents from the initial complaint management process, including the complainant's submissions, records of the complaint process and the outcome under review
- Consider any new information provided by the complainant
- Conduct additional inquiries to obtain information relevant to the internal review.

Internal Review complexity

Medium complexity Internal Review

Medium complexity internal review matters are where there are a number of grounds that require formal review.

A right of reply to preliminary findings / outcome advice is required prior to making a final determination.

These reviews should take no more than **50 business days** to manage from when the grounds have been agreed upon by the complainant and the department.

High complexity Internal Review

High complexity internal review matters are where there are possibly a large number of grounds that require formal review and consideration. A review of this nature may involve interviews or discussions with staff and other relevant persons, including external persons of interest and jurisdiction.

A right of reply to preliminary findings / outcome advice is required prior to making a final determination.

These reviews should take no more than **100 business days** to manage from when the grounds have been agreed upon by the complainant and the department.

Internal review roles

Every internal review must be assigned an employee to perform the two roles described below. An internal review may be managed by a single employee, or two different employees, performing the roles.

A single employee can perform both roles if they meet the stated requirements.

Role	Requirements
Internal review administrator and investigator	An employee of the department who is appropriately capable of reviewing the complaints management process and outcomes, and provide recommendations to the internal review decision-maker
Internal review decision-maker	An employee of the department: <ol style="list-style-type: none"> 1. who is usually more senior than the original complaint decision-maker 2. with the relevant delegations (statutory / financial / human resources) and / or positional authority to set aside, remake or affirm a decision or provide another appropriate outcome, and 3. determined following due consideration for actual, perceived or potential conflicts of interest.

External Review – Phase 3

If a complainant remains dissatisfied after progressing through Phase 1 and 2 of the complaints management model, they can pursue external options.

They may choose to contact the Queensland Ombudsman to request an independent review.

If a complainant is dissatisfied with the department's response to a human rights complaint, they may choose to contact the Queensland Human Rights Commission (QHRC) who may be able to resolve the complaint through a conciliation process.

Identify referrals to specialist teams

Throughout the complaint management process there may be matters that require liaison with or referral to a specialist team of the department to handle, this includes:

- Practice specialities including: Domestic and Family Violence, Mental Health, Drugs and Alcohol, Disabilities
- Privacy Complaint or Privacy Information Breach
- Matters subject to review under the Right to Information Act 2009
- Serious staff Conduct Complaints eg. suspected corrupt conduct
- Non-Compliance of Service Contract
- Possible Public Interest Disclosure.

Practice Specialties

The department has practice leaders who can provide specialist practice knowledge about domestic and family violence, mental health, substance misuse and disabilities. To support a complaints process, these specialist areas may be requested to provide consultation about specific areas of practice.

Information Privacy Breach or Complaint Privacy Complaint

An information privacy breach occurs when personal information is not handled in accordance with the Information Privacy Principles. It will generally involve access to, or collection, use or disclosure of, personal information in contravention of the department's obligations under the Information Privacy Act 2009. A privacy breach may be accidental or intentional. It may be a one off occurrence or due to a breakdown in procedures. A breach may occur when personal information held by the department is lost, misused, mistakenly disclosed or stolen.

The Information Privacy and Governance team will work with the relevant area to ensure appropriate steps are taken to contain the breach, assess the risk, determine whether affected persons should be notified, and what steps should be taken to address any systemic issues and prevent a recurrence.

An information privacy complaint is a complaint about an act or practice of the department in relation to a person's personal information that is a breach of the department's obligations under the Information Privacy Act 2009.

If it is determined that the complaint is a privacy complaint it will be referred to and managed directly by the Information Privacy and Governance team.

Right to Information

If a person is concerned about the outcome of an application for access to or amendment of information under the Right to Information Act 2009 or the Information Privacy Act 2009 they have internal and external review rights under that legislation.

Serious Staff Conduct Complaints

If a complaint includes an allegation or allegations about suspected 'corrupt conduct' as defined in section 15 of the Crime and Corruption Act 2001, category 3 misconduct under the Public Service Commission's Conduct and Performance Excellence (or 'CaPE') framework, or 'misconduct' as defined in section 187(4) of the Public Service Act 2008, the matter will be referred to the Professional Standards Unit, Complaints and Professional Standards for assessment.

Professional Standards will advise the Complaints Unit whether or not it accepts the referral and any reasons for that decision.

If Professional Standards accepts the referral, Professional Standards will assess the matter in accordance with the relevant policy, procedure and/or guidelines depending on the type and nature of the complaint.

Non-Compliance of Service Contract

Compliance Services conducts financial compliance reviews and compliance investigations of departmentally funded non-government service providers where there are allegations or concerns which indicate a funded service provider's alleged non-compliance with their financial and or service delivery obligations under the departmental service agreement.

Possible Public Interest Disclosure

If a complaint or contact contains information about a danger to the health or safety of a person with a disability, the Central Complaints Unit will:

- assess the contact / complaint to determine whether the matter constitutes a public interest disclosure under the Public Interest Disclosure Act 2010, and
- undertake further enquiries in liaison with the relevant area to assess the risk and ensure appropriate risk mitigation strategies are in place.

The Complaints Unit may also investigate the complaint.

When to escalate a complaint to the central Complaints Unit

If the complainant believes that a complaint cannot be resolved at the local level or at the (funded) service level, or if the complaint relates to how a previous complaints process was conducted or how a departmental decision was made, the complainant is to be supported to escalate the complaint to the department's central Complaints Unit, which manages the department's central complaints function.

A business area may also highlight reasons as to why it is not feasible or appropriate to manage a complaint, irrespective of the complaint's complexity level. In circumstances such as this, following consultation with and agreement from the Complaints Unit, the business area is to refer the complaint to the central Complaints Unit and advise the complainant of this decision and action.

Other factors that help determine how and who should handle the complaint also include:

- the complainant's complaints history (including any current communication protocols)
- whether the complaint / decision-making process raises systemic factors and or concerns
- the complainant's existing relationship with the department e.g. if the complainant's relationship with a Service Centre is strained and they may deem that the Service Centre lacks objectivity, it may be desirable that the complaint is managed at a Regional or Central level
- concerns about perceived bias or conflict.

Authority:

Child Protection Act 1999

Public Interest Disclosure Act 2010

Information Privacy Act 2009

Public Service Act 2008

Public Sector Ethics Act 1994

Human Rights Act 2019

Date of approval: 29 September 2020

Date of operation: 29 September 2020

Date to be reviewed: 29 September 2022

Office: People, Culture and Governance

Help Contact: Central Complaints Unit – 1800 080 464

References

Complaints Management Policy

CaPE framework

CaPE assessment tool

Rescinded Policies/Procedures

Complaints Management Policy and Procedure (December 2019)

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