

## MANAGING EXTERNAL FEEDBACK AND COMPLAINTS POLICY AND PROCEDURE

### Purpose

Down Syndrome NSW (DS NSW) is committed to handling complaints in an efficient and effective manner, ensuring that any conflict, grievance, dispute or complaint is addressed competently, fairly, and in a timely manner. Our complaints process is designed to uphold the reputation of our organization and promote accountability, while also ensuring that we consistently improve our services. Adequate handling of disputes is a crucial aspect of our commitment to excellence in customer service, and we strive to exceed expectations in this area.

### Policy Statement

DS NSW recognises the importance of listening to people who wish to provide feedback or a complaint about any aspect of the organisation (e.g. programs and services, miscommunication, and staffing performance) and is committed to managing external feedback and complaints in a proactive and constructive way.

### Applicability

All DS NSW workers, Management, Board Members and Volunteers

### Roles and Responsibilities

Board	Oversee the effective management of complaints at DS NSW. Manage complaints referred by the CEO, where the CEO is unable to resolve the complaint.
CEO	Manage complaints and feedback via <a href="#">the Complaints and Feedback Form</a> Maintain and monitor the <a href="#">Complaints Register</a> . Provide a written response to complainants within 21 days. Report on complaints to the Board. Report on complaints to DS NSW workers in a confidential manner to support opportunities for improvement.
All Workers	Ensure that complaints are heard and that people are aware of their right to complain about any aspect of the organisation or any aspect of service provision they are not happy with. Comply with this policy and procedure. Document complaints in writing to the CEO and in the Complaints Register. Seek opportunities for improvement as an outcome of feedback or complaints.

## Procedure

1. When a complaint or appeal is made or feedback given, it is preferable to provide it in writing. If the complaint is made during a conversation from an external party, any staff member involved is to ask the complainant if they would like the matter formally put in writing and followed up. If it is not put in writing, the complaint is still noted on the Complaints Register.
2. It is important to respond to the complaint made within 24 business hours sending a response as acknowledgement.
3. If the complainant has communication support requirements (e.g. a person not able to communicate verbally) or other support requirements, Down Syndrome NSW will make every effort to ensure that adequate support is provided to the individual to ensure that their complaint is heard and documented.
4. When the complaint is received by a staff member, the staff member is to:
  - Forward the complaint in writing to the CEO for review and action.
  - Document the details of the complaint in the Complaints Register.
5. If the complaint cannot be resolved by the CEO, it will be referred to the Board, and a plan will be developed to investigate the complaint, and resolve it.
6. Complainants may be given a copy of the plan to investigate and resolve the complaint, and the CEO/President will be responsible for ensuring that the complainant is informed of the progress of the investigation.
7. The CEO will update the Complaints Register accordingly and confidentially discuss complaints at staff meetings, protecting the privacy of the complainant, where there are opportunities for quality improvement.
8. The Board is also provided with an update on feedback and complaints via the CEO Report at every Board meeting. This includes a brief description of the complaint, action taken, and whether the incident is closed or open. Reporting to the Board includes:
  - The number of feedback and complaints received
  - The time taken to resolve the complaints
  - Actions arising from complaints
  - The outcome of actions, including matters resolved
  - Systemic issues identified, and opportunities for improvement
9. Down Syndrome NSW may source an external party to assist in resolving complaints when necessary.
10. Depending on the nature of the complaint, where the matter remains unresolved or disagreement in the actions remain, then the complaint may be referred to an appropriate external agency (e.g. mediation) or the complainant informed of appeal procedure or other legal remedy.
11. Complainants will be provided with a written response regarding the outcome of the complaint within 21 days of the complaint being made.
12. Regular analysis of feedback and complaints is undertaken to monitor trends, measure the quality of our service, and make improvements as needed.

## Associated Documents

- [Incident Investigation Policy and Procedure](#)
- [Incident Report Form](#)
- [Grievance Policy and Procedure](#)
- [NDIS Practice Standards and Quality Indicators – November 2021](#)

## Definitions

Term	Definition
Complainant	The party who makes the complaint.
Complaint	A statement that something is unsatisfactory or unacceptable.
Complaints Register	Documents details of complaints received by DS NSW and actions taken to resolve complaints.
Feedback	Information about reactions to a service and/or person's performance of a task which is used as a basis for improvement.

## Document Control

Policy review every: **3 years**

Version	Date Commenced	Policy Owner	Change Description	Review Date	Policy Approver
V1.0	June 2022	Chief Strategy Officer	New policy	June 2025	CEO
<b>V2.0</b>	April 2023	Specialist PCC	Policy review	April 2026	CEO