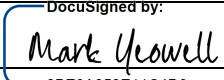


## FEEDBACK, COMPLIMENTS AND COMPLAINTS PROCEDURE

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Sponsor	COO		
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Signature	<small>DocuSigned by:</small>  <small>3BE0A853E11C4D0...</small>		

### 1. PURPOSE

- 1.1. We aim to continuously improve our customer service and we like to hear what we are doing well. We log all our compliments and use this information to train and communicate with our employees.
- 1.2. We are committed to handling each complaint as soon as possible in an efficient and fair manner to improve our standards of customer service. We use a structured mechanism for handling complaints, and we inform our clients of the progress of the complaint and the timeframe for resolution.

### 2. SCOPE

- 2.1. This Procedure applies to all directors, clients, their parents / carers, employees and agents of Bright Door.

### 3. REASON FOR COLLECTION

- 3.1. Bright Door aims to:
  - Log all compliments
  - Use the compliments log as a driver towards improved customer service and as 'best practice' examples during training sessions
  - Log all formal complaints
  - Ensure that Compliments and Complaints are managed in accordance with Language Disorder Australia's Complaints Resolution Policy

#### 4. INTERNAL DOCUMENTS AND EXTERNAL REFERENCES

- Complaints Resolution Policy
- Privacy Policy
- Workplace Grievance Procedure
- *National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018*

#### 5. PROCEDURE

##### 5.1. Compliments

5.1.1. We receive compliments in many forms – by phone, in person, by email, on our website, by letter or via our feedback form. Our compliments log is maintained and reviewed by the Executive Assistant to the Chief Executive Officer of Language Disorder Australia and used as examples of “best practice” whilst training employees and for continuous improvement.

5.1.2. Informal compliments that have been provided directly to Bright Door are logged in the Compliments and Complaints log.

##### 5.2. Complaints

5.2.1. Our formal complaints procedure has four stages. Prior to the formal procedure being invoked, parent/carers, community representatives, clients, individuals, participants and participant representatives are encouraged to contact the relevant clinician or employee who will first try to resolve the complaint informally.

##### 5.3. Self-resolution (within seven working days of a complaint being identified)

5.3.1. We receive complaints in various forms – by phone, in person, by email, on our website, by letter or via our feedback form which we provide to our clients. This procedure may also be used by employees whose children are clients of Bright Door.

5.3.2. Complaints may be made anonymously; however, this impedes our ability to respond to the complainant.

5.3.3. Assistance will be provided to those complainants who let us know if they require support in lodging a complaint, such as provision of a scribe or an interpreter.

5.3.3.1. Speak to a member of the Bright Door Team

5.3.3.2. Phone: (07) 3378 8444

5.3.3.3. Email: [feedback@languagedisorder.org.au](mailto:feedback@languagedisorder.org.au)

5.3.3.4. Website feedback form

5.3.3.5. In writing to: Feedback at Language Disorder Australia, Level 3, 88 Jephson Street, Toowong, Queensland, 4066

5.3.4. Complainants will be informed of their right to:

5.3.4.1. have a support person of their choice present during any discussions or meetings related to their complaint.

5.3.4.2. seek advocacy support from relevant advocacy organisations or services to assist them in navigating the complaints process. Bright Door will provide the complainant with a link to the [Queensland Government Advocacy Supports](#) page.

5.3.5. Where the complainant feels comfortable doing so, they should attempt to seek a resolution to the complaint themselves with the person/persons involved. The purpose of self-resolution is to resolve the matter quickly, avoid escalation of

complaints, to produce a positive result for the maximum number of parties and to encourage a culture where honest and constructive communication is valued between all. Bright Door does not tolerate anyone behaving in a confrontational, aggressive or abusive way in the pursuit of addressing a complaint.

5.3.6. However, the informal approach may not always be appropriate and, in these situations, the parent/carers, community representatives, client, individuals, participants and participant representative or the organisation may trigger the formal complaints procedure.

## 5.4. **Formal Complaints**

### 5.4.1. **Stage 1**

5.4.1.1. We will acknowledge receipt of a complaint about Bright Door within 24 hours of receipt. The complaint will be logged in Bright Door's Complaints Register, and a complaint file will be started. This will then be passed to the Allied Health Manager. The Allied Health Manager will investigate the complaint and respond in writing within seven working days of receipt of the complaint.

### 5.4.2. **Stage 2**

5.4.2.1. Clients who have a complaint that was not resolved at Stage 1, may request to escalate the complaint, via any form (e.g. email or phone call). The Chief Operating Officer (COO) will investigate the complaint and respond within 10 working days of receipt of the escalation of the complaint. All records will be logged in the Complaints Register.

### 5.4.3. **Stage 3**

5.4.3.1. Clients who have a complaint that was not resolved at Stage 2, may request to escalate the complaint via any form (e.g. email or phone call). The Chief Executive Officer will investigate the complaint and respond in writing within 10 working days of receipt of the escalation of the complaint. All records will be logged in the Complaints Register.

### 5.4.4. **Stage 4**

5.4.4.1. Clients who have a complaint that was not resolved at Stage 3, may request for the Board to investigate the complaint and the outcome of each stage of the complaints process. The Board will write to the complainant with the outcome of the investigation within 21 working days of receipt of the escalation and this decision is final.

## 5.5. **EXTERNAL PROCESS FOR COMPLAINTS**

5.5.1. Bright Door will endeavour to try to resolve any complaints quickly and fairly. If a complainant is unhappy with the outcome or the way in which the complaint is managed, they may contact the external parties listed below. 5.5.2 For NDIS Participants – The NDIS Quality and Safeguards Commission <https://www.ndiscommission.gov.au/about/complaints>

### 5.5.2. **A complaint can be made to the NDIS Commission by:**

- Phoning: 1800 035 544 (free call from landlines) or TTY 133 677. Interpreters can be arranged.
- National Relay Service and ask for 1800 035 544.

- Completing a [complaint contact form](#). From the webpage on the following website: [www.ndiscommission.gov.au/about/complaints](http://www.ndiscommission.gov.au/about/complaints)

**5.5.3. Office of the Health Ombudsman (oho.qld.gov.au) by:**

- Lodging the complaint on the website.
- Phoning: 133 646 (Mon-Fri 9am – 4.30pm Closed Public Holidays).
- Completing a [Health Service Complaint Form](#). From the webpage on the following website: [Online health service complaint form - Office of the Health Ombudsman \(oho.qld.gov.au\)](#)

**5.6. Monitoring and Continuous Improvement**

5.6.1. Where a trend is identified in the Complaints Register, the Allied Health Manager will inform the COO who will update the organisational risk register in consultation with the Executive Leadership Team.

5.6.2. The COO will provide the Board with a quarterly update relating to the Feedback, Compliments and Complaints register for review.

5.6.3. Where feedback, compliments and complaints are identified to assist with the improvement of the service, they are logged in the Continuous Improvement Register for further investigation.

5.6.4. Records of any feedback, compliments and complaints will be kept for seven years from the date of receipt.

**6. REVIEW**

6.1. This Procedure is due to be reviewed every three years from the date of approval.