



Complaints Procedure

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Approval

Procedure owner	Manager, Mental Health Service		
Business Unit	Mental Health Service		
Approved by	Manager, Mental Health Service		
Date approved	13/12/2024	Review date	13/12/2026



St Vincent de Paul Society
(WA) INC
good works

1 Purpose

- 1.1 The purpose of this procedure is to communicate the ways in which a complaint may be made regarding any aspect of service delivery, by consumers, family members, carers and external stakeholders.
- 1.2 To ensure that all complaints are received appropriately and reflect trauma informed considerations.

2 Scope

- 2.1 This procedure applies to all staff, volunteers and consumers working in or accessing Vinnies Mental Health Service.
- 2.2 This procedure is *specific to complaints in relation to service delivery*. The SVDPWA-PR-2051 Grievance Management Procedure should be utilised by employees or volunteers who experience or witness unacceptable or unlawful behaviour in the workplace.
- 2.3 This procedure should be read in conjunction with the SCS-PR-4212 Responding to Appeals Procedure and the SCS-PP-4004 Managing Feedback – Clients/Consumers/Tenants Policy.

3 Procedure

Informal complaints

- 3.1 For the purpose of this procedure, an informal complaint is described as:
 - Feedback given by someone who states that they do not wish to lodge a formal complaint (the exception to this is if it involves staff conduct or risk of harm to anyone);
 - Something that may be easily resolved without a thorough investigation;
 - Solution focussed e.g. what can be done to fix the issue?
 - Not notifiable;
 - Not requiring documentation of processes, only the outcome.

Formal complaints

- 3.2 For the purpose of this procedure, a formal complaint is described as:
 - Feedback given by someone who states that they would like their concern formally investigated;
 - A process of collecting evidence of what occurred, including speaking to all parties involved to hear their side of the story;
 - Involving a process of consideration by the person investigating the complaint, to come up with a decision and outcome that is then formally communicated to the person who laid the complaint;
 - Potentially notifiable depending on the nature of the complaint.

Ways a complaint may be made

- 3.3 Complaints may be made in the following ways:
 - Via the Compliments, Complaints and Feedback Forms and suggestion boxes located at each site;

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- Verbally to staff or management;
 - In writing;
 - By the individual themselves or someone acting on their behalf, with their knowledge and consent.

Receipt of complaints

- 3.4 Vinnies Mental Health Service operates from a trauma informed perspective and as such, is committed to ensuring that the service environment supports safety at all times and particularly with regards to receiving and managing of complaints.
- 3.5 While Vinnies Mental Health Service strives to create a safe environment, the receipt of complaints and feedback is considered an indication that 'enough safety' has been established that consumers and external stakeholders are comfortable and able to express their concerns.
- 3.6 Staff should endeavour to clearly communicate and explain to consumers and family members/carers the ways in which complaints can be made to help ensure that they can and are likely to use the processes available if there is issue that they are not happy about.
- 3.7 Vinnies Mental Health Service adopts a learning and growth approach with regards to feedback, including the receipt of complaints and other forms of feedback. All complaints, whether formal or informal will be taken seriously, responded to and considered for continuous improvement opportunities.
- 3.8 All staff and volunteers who receive a complaint should:
- Receive the complaint in a positive manner and thank the individual for bringing the concern to their attention;
 - Ask the individual what they would like to see happen in regards to the complaint and, whether they would like it to be received informally or, whether they would like to lay a formal complaint;
 - Explain the relevant processes to the individual laying the complaint, including timeframes for responding;
 - Also advise consumers who would like to lay a complaint that there are external agencies that they can also access, should they wish to talk with someone outside the service. These include the Mental Health Advocacy Service, the Health and Disability Services Complaints Office and Midlas.
- 3.9 Informal complaints should be handed over to the relevant VMHS Coordinator for follow up. They will then advise the Service Manager as required. Examples of informal complaints may include:
- Conflict between consumers;
 - Decisions about accommodation that the consumer is not happy about and has negatively impacted them;
 - Dissatisfaction with service systems and processes.
- 3.10 All formal complaints and complaints of a serious nature should be directed to the Manager, Mental Health. Examples of formal complaints may include:
- Conflict between staff and a consumer;
 - Serious risk that may result in a consumer putting their tenancy at risk;
 - Behaviours of concern that can or have negatively impacted other consumers.
- 3.11 If the complaint is regarding a staff member or volunteer the complaint should be directed to the Manager, Mental Health for follow up.
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- 3.12 If the complaint is regarding the Manager, Mental Health the complaint should be directed to the Executive Manager, Specialist Community Services.
- 3.13 All complaints will be kept private and confidential to the extent required by current legislation and organisational policy. Gossiping and/or the spreading of rumours as a result of, or in connection with, a process followed under this procedure will not be tolerated under any circumstances and may lead to further disciplinary action for those concerned.
- 3.14 Complaints of a serious nature may need to be shared with internal stakeholders where necessary to ensure reliability of the investigation and safety for all involved. However, information will only be shared on a need to know basis.
- 3.15 Complaints that involve potentially unlawful conduct may require that information is shared with the appropriate authorities.

Timeframes

- 3.16 All informal complaints should be acknowledged and responded to within 24 hours and, resolved within seven business days thereafter.
- 3.17 All formal complaints should be acknowledged within 24 hours and, should have an outcome communicated within 10 business days thereafter.

Outcomes

- 3.18 The resolution of informal complaints may be communicated verbally at the time of resolution. It should be explained fully and clearly so that the person who laid the complaint, is assured that it was taken seriously and checked to ensure it has been resolved to their satisfaction. If the complaint has been received via the Compliments, Complaints and Feedback process, it will be recorded on this register. If the complaint was made verbally to staff, the complaint should be noted in the consumer's progress notes and, on the Informal Complaints Register.
- 3.19 The outcome of formal complaints will be communicated by the Manager, Mental Health both verbally and in writing. The Manager, Mental Health will seek to meet with the person who laid the complaint and any support person they would like to attend. An overview of the investigation process will be given to the individual and the subsequent outcome/decision communicated, including reasons for this. This is to ensure that the process is transparent and the person knows that the complaint was taken seriously, thoroughly investigated and understands the reason for the final outcome.
- 3.20 All investigations of formal complaints will be thoroughly documented and kept by the Manager, Mental Health. They will be added to the Formal Complaint Register and the outcome will be noted in the consumer's progress notes once communicated to the relevant Recovery Support Worker.

4 Roles and responsibilities

- 4.1 The Manager, Mental Health Service is responsible for maintaining the currency of this procedure.
- 4.2 Society representatives are required to adhere to this procedure. Failure to comply may be considered a breach of our procedures and may result in disciplinary action.

5 Review

5.1 This procedure is scheduled for review every two years, after consultation. Some circumstances may trigger an early review. This includes but is not limited to; legislative changes, organisational changes, incident outcomes and other matters deemed appropriate by the Manager, Mental Health.

6 Further assistance

6.1 Society personnel should speak with their Manager regarding any questions about the implementation of this procedure.

7 References

7.1 SVDPWA-PR-2051 Grievance Management Procedure

7.2 SCS-PR-4212 Responding to Appeals Procedure

7.3 SCS-PP-4004 Managing Service user Feedback

8 Related documents and legislation

8.1 MHS-PP-4124 Carer Inclusion Policy

8.2 SCS-PP-4018 Privacy and Confidentiality – Consumer/Client/Tenant Policy

8.3 SCS-PP-4168 Safeguarding Vulnerable People Policy

8.4 SCS-PP-4001 Continuous Improvement Policy

8.5 Standard 1.15 Governance. Licensing and Accreditation Regulatory Unit, Department of Health, Government of Western Australia.

8.6 National Standards for Mental Health Services 2010. Australian Government.

9 Approval and amendment history

Version	Approval authority	Date	Amendment summary
1.0	Manager MHS	13.12.2024	Initial version

10 Definitions

Term	Definition
Complaint	A statement that indicates a belief that something that is unfair, unacceptable, or otherwise not up to expected standards
Formal complaint	A formal complaint is a written statement that expresses dissatisfaction with a situation and requests an investigation. Consumers may also lodge a formal complaint verbally if they are unable to put it in writing. Staff would then be responsible for documenting this for the consumer.

Term	Definition
Informal complaint	An informal complaint is a quicker way to resolve a problem that is usually less serious or based on a misunderstanding. Informal complaints are intended to help people reach an agreement and understand how to avoid similar issues in the future.
Stakeholder	Is a person, group or organization with a vested interest, or stake, in the decision-making or activities of a business, organization or project.
Trauma informed	Is an approach to delivery of health and human services directed by a thorough understanding of the neurological, biological, psychological and social effects of trauma and its prevalence in society. It is a strengths-based framework that emphasises physical, psychological and emotional safety for people who have experienced trauma. (Commonwealth of Australia: The Fifth National Mental Health and Suicide Prevention Plan. Canberra: Commonwealth of Australia)