

Acknowledgement of Country



Complaints Management



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- ▶ Complaint Management Policy and Procedure explored
- ▶ Supporting documents
- ▶ Complaint pathways
- ▶ Top tips


Taking a look into the past

2014	2016	2020
The first audit of the departments Complaints Management System (CMS) included 22 recommendations, which were provided to the Director General in a report.	The first Queensland Ombudsman (QO) investigation focused on the accuracy of the department's complaint data. The report included 5 recommendations including greater accuracy in recording of Child Safety Complaints.	The QO continued its oversight of the CMS by conducting a second investigation, resulting in 9 recommendations.




9 Recommendations:

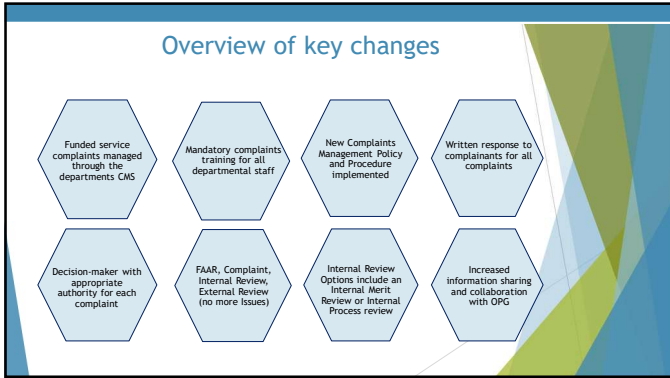
March 2020 the Queensland Ombudsman released its report into the *Management of child safety complaints*.

- ▶ Whilst the 2016 investigation focussed on the accuracy of the departments complaint data, the 2020 investigation focused on the operation of the departments Complaint Management System (CMS)
- ▶ All 9 recommendations were accepted by the department and have subsequently been implemented



Timeline

	Queensland Ombudsman Second Report 2020	<ul style="list-style-type: none"> • Stopped using Issues • Introduced the FAAR process
	Internal Audit 2021/2022	<ul style="list-style-type: none"> • Revised Timeframes • Reporting Accountability
	New Policy and Procedure July 2022	<ul style="list-style-type: none"> • Revised Timeframes • Out of scope procedural fairness



Complaint management policy and procedure

- ▶ Updated and released 1st July 2022
- ▶ Represents learnings over the past two years since the implementation of recommendations that came out of Ombudsman report
- ▶ Lens for Policy and Procedure client driven and focused with emphasis on how the complainant would want to experience the process
- ▶ This lens required Child Safety to reconsider areas such as language, timeframes, streamlining and outcomes focused.



Complaints Procedure



Complaints Policy

Complaints Management Unit

- ▶ A key change to the Complaints Management Unit has been the shift from the service being managed under a Cooperate arm of Child Safety to now being under the Chief Practitioners Office
- ▶ This is a very important shift as the focus now relates to Quality Practice
- ▶ The Complaints Unit have access to a range of specialist services through the Chief Practitioners office that can support them through the investigation and reviews of complaints as follows
 - Domestic and family violence
 - Alcohol and other drugs
 - Disability
 - Mental health
 - Sexual and gender identity
 - Indigenous practice
 - Practice advice and support
 - Child Sexual abuse practice

Continued....

In addition to the specialist services, the Complaints unit can consult with the following teams that also sit under the Chief Practitioners office

- ▶ Systems and Practice Review
- ▶ Child Safety Training
- ▶ NDIS Interface Team
- ▶ Delegated Authority
- ▶ Child Safety Practice Manual Team

What is a complaint? Policy definition

Not prescribed as "out of jurisdiction" in the complaints management policy

Would benefit from being managed in accordance with the complaints management policy without a first attempt at resolution being attempted

An oral or written expression of dissatisfaction made on behalf of a complainant regarding:

- Decision
- Service
- Behavior

Requires a response or resolution

Remains unresolved following a first attempt at resolution process

First Attempt at Resolution Local Early Resolution

The department encourages a local early resolution of your concerns. Contact your Child Safety Officer or Senior Team Leader in the first instance. If you are having trouble getting hold of them you can contact the Complaints Unit to raise a FAAR.

Complaint Formal Written Response

If you remain dissatisfied after your FAAR or the ICSC has not responded to you within the FAAR timeframe, you can contact the Complaints Unit to escalate your concerns to a complaint. Complaints Unit may devolve your complaint.

External Review Queensland Ombudsman Industrial Relations Commission Old Human Rights Commission Information Commissioner Qld

If you still remain dissatisfied you can pursue external review options.

Internal Review Merit & Process Review

If you remain dissatisfied with the findings of your complaint (merit) or how your complaint was managed (process) you can request an Internal Review through the Complaints Unit

First Attempt at Resolution (FAAR)

- ▶ Prior to a complaint process
- ▶ Resolved at the point of service
- ▶ Early resolution
- ▶ Forms part of case work
- ▶ Can have flexible responses and outcomes

TOP TIP - use of language - when engaging in this process, you must tell the care team you are attempting a First Attempt at Resolution

Activity - FAAR

Molly has been asking her CSO for Additional Care Allowance level one to be considered for two children placed in her care 3 months ago. Molly and her foster and kinship care agency have provided relevant information to the CSO on three occasions which supports the application for Additional Care Allowance. To date, Molly has no response and the CSO is now not responding to emails where this is the related topic.

What can Molly do?

What can Molly do ?

- Contact the Senior Team Leader
- Contact the DG
- Got to QCAT
- Call Regional Complaints office
- Contact the Ministers Office



- Go directly to the Ombudsman
- Contact the Service Centre manager
- Contact Central Complaints Unit
- Contact the Crime and Corruption Commission
- Contact the OPG

Molly calls the Regional Complaints Office

- ▶ Molly contacts the Regional complaints office to raise a FAAR
- ▶ The Regional Senior Advisor refers Molly's FAAR to the CSSC for a local resolution
- ▶ The CSO and Senior Team Leader met with Molly to discuss the Additional Care allowance. A time frame was agreed upon to put forward the application to the CSSC Manager for a decision

Official Complaint process

- ▶ Occurs after a First Attempt at Resolution where applicable
- ▶ Initial step in the Complaint Process has 3 categories, the Senior Complaints Advisor will determine which category to engage as the most effective method to achieve resolution

Direct Response	Investigation	Practice Review
Involves a meeting or facilitated conversation with the Child Safety Service Centre Manager as the delegated decision maker	Involves a thorough investigation of the allegations	Involves an evaluation of practice looking at policy and procedure and identifying any practice gaps

Carer will always receive an outcome letter

What happens.....

- ▶ The concerns are managed by an appropriate officer through one of the three response pathways
- ▶ The complainant is provided a findings letter with the outcome
- ▶ The complainant is entitled to provide feedback in relation to the findings
- ▶ The complainant is provided information on where to escalate their concerns if they remain dissatisfied

Activity - Complaint

Molly heard back from her CSO yesterday to advise that the CSSC Manager has not approved the application for Additional Care allowance, Molly has asked for a rationale, the CSO advised that the only information she has is that it has not been approved.

Molly remains dissatisfied with the CSSC Mangers decision and wants to raise a complaint.

What can Molly do ?

Contact the Senior Team Leader

Contact the DG

Got to QCAT

Call Regional Complaints office

Contact the Ministers Office



Go directly to the Ombudsman

Contact the Service Centre manager

Contact Central Complaints Unit

Contact the Crime and Corruption Commission

Contact the OPG

Molly calls the Complaints Unit

- ▶ The Complaints Unit accepts Molly's complaint and refers to the Regional complaints office for investigation by a Senior Complaints Advisor
- ▶ The delegated decision maker for the complaint has been identified as the Regional Director for the area as an appropriate person with delegated authority
- ▶ The Senior Complaints Advisor speaks to Molly about her concerns, and they develop the allegations that will be investigated

1. The CSSC Manager has not provided rationale as to why the application for ACA has not been approved

2. Molly has demonstrated out of pocket expenses relating to her care of a child that is not being recognized or properly reimbursed

3. The child will miss out on recommended therapeutic interventions without the ACA and therefore their standards of care will not be met

Molly's complaint outcome....

- ▶ Molly receives a findings letter with the outcome of her complaint from the Regional Director - It finds that she did not receive a rationale for non approval and a recommendation is made that the Manage provide a rationale to Molly
- ▶ The investigation supported the managers decision not to reimburse Molly and indicated that no further action would be taken.
- ▶ Molly has an opportunity to provide a response to these findings before the complaint is finalised
- ▶ Molly decides not to respond, she would like the complaint finalised so that she can proceed with a request for an Internal Review of the decision not to reimburse. Molly feels this would be better achieved through this process
- ▶ Molly must now put together in writing a request for an Internal Review

Internal Process Review/Merit Review

Internal Process Review

- Reviews the process of a finalised complaint e.g. you were not given the opportunity to provide feedback
- Backwards facing
- Focused on the complaint process

Internal Merit Review

- Investigates the original concerns raised
- Forward facing
- Solutions focused
- Collaborative
- May include a review of the previous complaint process

Key considerations for an Internal Review

- ▶ Always managed through the Complaints Unit
- ▶ Requests for Internal Review should detail what specific aspects of the complaint findings or process the complainant disagrees with
- ▶ An Internal Review should take no more than 45 calendar days, from the day your concerns are raised to receiving a findings letter
- ▶ Complainants will be advised in writing - if the Internal Review response requires additional time, a new revised timeframe will be provided
- ▶ Every Internal Review will be assigned an investigator and a decision maker, a single employee can perform both roles if they meet criteria set out in the procedure
- ▶ Terms of Reference will be identified to guide Internal review
- ▶ A written response, which may include a written report is required and a right of reply to findings/decisions and outcome advice must be afforded prior to final determination

Activity

What will Molly's main points be in request for Internal Review (merit) that will assist in the development of a Terms of Reference

1. Statement of Commitment - main points that relate
2. Statement of Standards and Charter of Rights - therapeutic needs of child
3. Foster allowance policy
4. Molly was not contacted through the complaint process and supporting documents do not appear to have been considered i.e. Pediatrician report

Possible complaint outcomes

- ▶ Apology
- ▶ Explanation
- ▶ Information Provided
- ▶ Decision / determination identified for review
- ▶ Policy or Procedure identified for review
- ▶ Service identified for review
- ▶ Staff practice identified for review
- ▶ No further action

External review

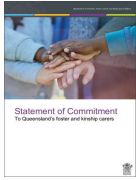
▶ Molly's outcome was positive, but what if the Internal Review determined that the original findings in the Complaint were supported ?

Molly could go to the **Queensland Ombudsman** who have an oversight function for investigating administrative decisions of the department through an external review process

Molly could go to the **Human Rights Commission** if the matter related directly to a breach of a Human Right

Molly could go to the **Office of the information Commissioner Queensland** if her complaint related to an information privacy breach

Supporting documents for the care team



A guide to making a complaint

- ▶ Statement of Commitment *'support access to a feedback, complaints or appeals process that is fair, just equitable and timely'*

Supporting documentation

Complainants should always look to resources and supporting documentation to evidence their position - this helps to keep the emotion out and ensure the matters are focused within the framework required in Child Safety to make decisions i.e.

1. Refer to the Statement of Standards and Charter of Rights, are there Standards of care and Charter or Rights not being met for a child
2. Do any of your concerns relate to commitments made by Child Safety to you under the Statement of Commitment not being met, what are they and how is this impacting you and your family
3. Are the Human rights for the child or young person and yourself being upheld as per the Human Rights Act 2019
4. Are Child Safety following the particular policy or procedure contained on their website or in their Practice Manual that relates to your concerns
5. Are Child Safety meeting their legislative requirements under the Child Protection Act

Recorded all the way....

All first attempts at resolution matters, complaints and internal reviews MUST be entered into the department's electronic complaint management system (Resolve) to ensure consistent monitoring and reporting and to enable effective review and ongoing system and practice improvement.

This means that patterns will be identified and these patterns can be reviewed from a systems approach which could lead to practice improvement.

The whole is greater than the sum of its parts
Aristotle

Navigating the Complaints process - tips

- ▶ Keep a copy of the Policy and Procedure handy - always remember to follow the process
- ▶ Remember to use the correct language associated with the process you are instigating
- ▶ Ensure you access your Foster and Kinship Care agency and/or QFKC for support and guidance through this process
- ▶ Try to take the emotion out and draw on policy, procedure, legislation and documents such as the Statement of Commitment to form your position
- ▶ Keep a record of your communication related to the processes you are undergoing to include dates, times and person you have spoken to if verbal



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NB: This training is a Queensland Foster and Kinship Care tool.
 Policies and Procedures do change over time.
 All efforts are made to provide accurate information at time of training.
