



Privacy, Dignity & Confidentiality Policy

1. Policy Statement

Our organisation actively supports a client's right to make a complaint and provide feedback about our services.

We consider a complaint to have occurred when a client or their advocate, tells us that they are unhappy or dissatisfied with:

- A decision we have made
- The services we provide
- The environment we provide services in
- The way we provide services
- The staff/volunteers who work in our organisation

Complaints about our service, or access to our service, will be dealt with promptly, fairly, and confidentially. Our complaints procedures will give service users access to a fair and equitable process for dealing with complaints and disputes.

Complaints are an important source of service user feedback and play a valuable role in the ongoing improvement of our services. Therefore, complaints will be welcomed and organisation policy, procedure and practices will be adjusted to respond to complaints where appropriate.

2. Complaints Procedure

The complaints procedure and a client's right to use an advocate will be explained to the client both verbally and in writing when they commence services. During a client's orientation they will be given a St Mary's Health Service Handbook that includes 'Making a Complaint' and 'Using an Advocate'. They will also be given a copy of the Making a Complaint information sheet provided by the Office of the Disability Services Commissioner.

When making a complaint all clients have a right to use an advocate of their choice. This may be a family member or friend, or an outside organisation.

On receiving a complaint, the Manager, Director or staff member will reassure the client that they will receive no retribution for making a complaint. The Manager, Director or staff member will also reaffirm how seriously complaints and their resolution are taken by our service.

When a complaint is received, the staff member who first receives the complaint will determine whether the complaint is serious or routine using the following criteria:





Serious complaints involve matters that, from the service user's perspective, concern;

- Staff or volunteer conduct
- An alleged incident of harassment
- An alleged breach of:
 - a client's rights
 - duty of care
 - service user/staff safety
 - service user privacy and confidentiality

3. Serious Complaints

The Manager will contact the client verbally within twenty-four hours of being notified of a serious complaint. An action plan will be developed with the client which will include a date when the complaint is expected to be resolved. The client will be kept informed how the resolution is progressing. After attempting to resolve the complaint with the service user, the Manager will write to the client outlining any decisions reached and/or any actions the organization has taken, or will take, in response to the complaint. If the service user is dissatisfied with the way the organization has responded they will be reminded that they are entitled to take the matter further.

4. Routine Complaints

The staff member receiving the complaint will acknowledge the complaint verbally and refer the matter to the Manager who will attempt to resolve the complaint to the satisfaction of the service user. If any policy or operational changes are required the Manager will discuss the matter with the Director.

The Manager will respond verbally to the service user within five working days of the complaint being received outlining any actions or decisions that have been taken. If the service user is dissatisfied with the way the organization has responded they will be reminded that they are entitled to take the matter further, as per the *How to Make a Complaint* brochure.

5. Documenting Complaints

When a routine or serious complaint is received, the staff member to whom the initial complaint is made will fill out a Complaint Form. All complaints are entered into the complaints register by the Manager.

The Manager will ensure that complaints have been responded to promptly, fairly and appropriately and that appropriate policy and procedural changes have been made.





6. Reporting Complaints

All complaints recorded in the complaints register must be reported to the Office of the Disability Services Commissioner (ODSC) annually. The Manager is responsible for submitting the annual complaints return in accordance with ODSC requirements.

7. Feedback

We encourage people to provide us with their feedback about the service we provide. This can be positive feedback or a suggestion about how we can improve our service provision. This feedback is recorded on the feedback form and entered onto the Feedback Register.

8. Privacy and confidentiality

Personal information on individual complaints is kept confidential and is only made available to those who need to deal with the complaint.

9. Training

All staff orientation and training programs will include how to document complaints; how to follow the complaints procedure and the value of feedback to the service.

10. Related documents

The following documents support the implementation of this policy:

- Quality Policy
 - Empowerment Policy
 - Wellbeing Policy
 - Information Privacy Policy
 - Privacy, Dignity and Confidentiality Policy
 - St Mary's Code of Conduct
 - Freedom from Abuse and Neglect and Human Rights Policy
 - Advocacy Policy
 - Feedback form
 - Making a Complaint information sheet (office of the Disability Service Commissioner)
- http://www.dhs.vic.gov.au/odsc/downloads/infosheet1_makingcompl_v1.pdf





11. Legislative and regulatory requirements

Reference is also made to the following enacted legislation, regulations and instruments in the implementation of this policy:

- *Disability Act 2006*
- *Information Privacy Act 2006* and Department of Human Services Privacy Policy
- *Health Records Act 2001*
- *The Victorian Charter of Human Rights and Responsibilities Act 2006*
- Department of Human Services Standards Standard 1 Empowerment and Standard 3 Wellbeing
- Australian Privacy Principles

