

Complaints Handling Policy

Version 1.0

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1. Overview

1.1 Policy statement

This policy provides guidance on how the Aged Care Quality and Safety Commission's complaints function delivers a high-quality complaints-handling service.

Our complaints process is focused on upholding the rights of older people. By regulating approved aged care providers (providers), their governing persons¹ and aged care workers (workers), we will:

- uphold an older person's rights under the [Charter of Aged Care Rights](#) (Rights), and
- protect and enhance their:
 - Safety
 - Health
 - Wellbeing
 - Quality of life

We are committed to empowering older people and their supporters to be active partners in their care. We also want to empower them to speak up when things aren't right.

Complaints tell us what is not working and give older people, their supporters and providers an opportunity to work together to:

- remedy the problem
- restore the relationship and build trust and confidence
- prevent that poor experience from happening again.

We will work with the older person and provider to ensure the issues raised are addressed, and respond to any risk or harm in a way that:

- considers the wishes of the older person
- ensures providers are meeting their responsibilities under the legislation or their funding agreement (see note below)
- is risk-based and proportionate
- focuses on achieving meaningful and sustainable outcomes.

Note: Both the Commonwealth Home Support Programme and the National Aboriginal and Torres Strait Islander Flexible Aged Care Program are Commonwealth-funded aged care services that operate outside of the [Aged Care Act 1997](#) (Aged Care Act), under funding agreements with the

¹ Governing person: A person who is key personnel of an approved provider, for example a manager responsible for the day-to-day operations of the service. See [Section 8B of the Commission Act](#) for a full definition. Within this document, "workers" refers collectively to governing persons and aged care workers.

Commonwealth. Unlike approved providers under the legislation, organisations which provide services through the CHSP or NATSIFACP programs are required to provide services in line with their funding agreements with the Commonwealth.

A CHSP service provider must comply with the CHSP Manual, which forms part of their funding agreement. Similarly, NATSIFACP service providers must comply with the National Aboriginal and Torres Strait Islander Flexible Aged Care Program Manual which forms a part of their funding agreement.

1.2 Policy and legislative framework

Aged Care legislation and policies provide the legal basis for the Commission's role in managing complaints. We work under the:

- [Aged Care Act](#)
 - This Act outlines the responsibilities that aged care providers must follow to receive subsidies from the Australian Government.
- [Aged Care Quality and Safety Commission Act 2018](#) (Commission Act)
 - Section 16(1)(d) of the Commission Act provides that the complaints function is a function of the Commissioner.
 - Section 18 provides that the complaints function deals with complaints made, or information given, to the Commission about:
 - an approved provider's responsibilities under the [Aged Care Act](#) or the [Quality of Care Principles 2014](#) (Principles)
 - the responsibilities of a service provider of an Australian Government-funded aged care service, under the related funding agreement.
- [Aged Care Quality and Safety Commission Rules 2018](#) (The Rules)
 - Part 2 establishes the Commission's scheme for dealing with complaints made to us about matters outlined under Section 18 of the [Commission Act](#).

This Complaints Handling Policy, in conjunction with our [Regulatory Strategy](#) and other Commission policies, guide us on how we consistently:

- comply with our legislative role and responsibilities
- apply good decision-making principles
- safeguard the wellbeing and rights of older people receiving aged care in a coordinated way.

1.3 Scope

The Commission is the national regulator of Australian Government-funded aged care services. We work with older people, providers, and workers to foster a world-class aged care sector that safeguards the wellbeing and the rights of older people receiving aged care.

We work with older people and providers to address issues raised through complaints made to the Commission, and ensure providers are meeting their relevant responsibilities. We may do this via a complaints resolution process, or by working with other areas of the Commission to undertake:

- Monitoring activities
- Compliance actions
- Enforcement actions

We also regularly analyse the intelligence we receive through complaints and share what we learn within the Commission and with the aged care sector. This ensures older people’s experience of aged care informs our understanding of provider and sector performance. It also ensures the voice of older people helps guide both us and providers in improving services for older people.

[The Rules](#) sets out a complaint as someone raising issues about the responsibilities of:

- an approved provider of an aged care service under the [Aged Care Act](#) or the [Principles](#)
- a service provider of an Australian Government-funded aged care service under the funding agreement that relates to the service.

In scope	Out of scope
<p>Who can make complaints to us? Anyone can make a complaint to the Commission.</p> <p>What can we take complaints about? Under the legislation, we can handle complaints about whether an aged care provider is meeting their responsibilities under the Aged Care Act, Principles or relevant Commonwealth funding agreement. For example, this may include concerns about:</p> <ul style="list-style-type: none"> • Health care • Personal care assistance • Communication • Staff numbers 	<p>Under the complaints function, we do not:</p> <ul style="list-style-type: none"> • handle complaints about the Commission. For this, please visit our review and complaints about us web page • give local care or service availability advice • advise on financial, legal or health decisions. We also do not advise on who should make these decisions for an older person • comment on employment matters. this includes wages or employment conditions • ask service providers to terminate

<ul style="list-style-type: none"> • Living environment • Some fees and charges in care agreements • Choice and preferences <p>When can a complaint be raised with the Commission?</p> <p>A complaint can be raised with the Commission at any time and does not need to be raised with the provider first.</p> <p>The Commission does encourage older people and their supporters to raise the complaint directly with the provider if they can. This is often the easiest and quickest way to resolve a complaint.</p> <p>However, if someone does not feel comfortable doing this, they can contact us at any time, and we can help. We can also help if they're having trouble getting a provider to resolve a complaint.</p>	<p>employment</p> <ul style="list-style-type: none"> • give legal advice on care agreements • give clinical advice on what treatment the older person should receive • investigate the cause of death. This is the role of the coroner • investigate whether there has been a criminal offence. This is the role of the police • determine if specific events occurred, especially where there are conflicting accounts.
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1.3.1 Complaints about workers

When the Commission receives complaints that include concerns about workers, we will work with the associated provider to address the issue/s. This is because the provider is ultimately accountable for the safety and quality of care delivered. For example, providers have a responsibility to take steps to ensure their workers comply with the [Code of Conduct for Aged Care](#).

There will be times where we cannot address concerns about workers through engagement with a provider. For example:

- the worker is no longer employed by, or volunteers for, the provider
- the issue/s is better addressed by engaging directly with the worker.

If the issue/s cannot be addressed through a provider, the Commission can look to address the issue/s through:

- investigating to inform possible actions we may take in relation to that worker
- encouraging the worker to take specific actions to manage the risks (compliance actions)
- stronger measures such as a banning order that can stop or restrict a worker's involvement in the aged care sector (enforcement actions).

We will keep the complainant informed to the extent possible about our regulatory activities and associated outcomes in relation to the worker. There may be things we cannot share with the

complainant because we have a legislated responsibility to protect the personal information we collect about individuals and certain information about the affairs of a provider. There are serious consequences if we breach our legal responsibilities.

2. Aim of the Commission's complaints function

We aim to deliver a high-quality complaint handling service that is consistent with best practice complaints handling principles. The Commission's complaints function plays an important role in the aged care sector as it goes to the heart of older people's experience of aged care. We want to understand what isn't working for older people and work with providers to improve aged care services.

In handling complaints, we aim to:

- protect and enhance the **safety, health and wellbeing** of older people receiving aged care services, by holding providers accountable
- support the **will, independence, rights and preferences** of older people
- understand what is not working well for older people
- make providers aware of issues so that they can, within the framework of their responsibilities under the law, work with older people to:
 - **remedy** the problem
 - **restore** the relationship and build trust and confidence between providers, workers and older people. This includes practicing **open disclosure**
 - **prevent** the problem from happening again
- **educate and empower older people**, and those who represent them, to complain freely, confidently and without retaliation
- **educate and build the capacity of providers** in managing complaints effectively
- use complaints to **understand where a provider needs increased supervision** by the Commission to ensure the services they provide are consistent with the requirements under the law or their commonwealth funding agreement
- use complaints to **understand common issues and drive continuous improvement in services for older people** across the sector.

We acknowledge that older people come from a diverse range of backgrounds and aim to provide a complaints service that is accessible to and meets the needs of all, including:

- First Nations peoples
- people from culturally and linguistically diverse backgrounds
- people who live in rural or remote areas
- people who are financially or socially disadvantaged
- veterans
- people who are homeless or at risk of becoming homeless

- care leavers
- parents separated from their children by forced adoption or removal
- lesbian, gay, bisexual, transgender, intersex, queer, asexual and other sexually or gender diverse people
- people with a disability

3. Guiding principles

The Commission's complaints processes are underpinned by a number of guiding principles, including:

- [Older person focus](#)
- [Timely resolution](#)
- [Keeping people informed](#)
- [Transparency](#)
- [Risk-based and proportionate approach](#)
- [Procedural fairness](#)
- [Open disclosure](#)
- [Outcome-focused approach](#)
- [Early resolution approach](#)

Our complaints process is consistent with the principles set out in the [Better Practice Complaint Handling Guide](#) by the Commonwealth Ombudsman. In line with the guide, our complaints service is designed and delivered in a way that:

- is user-centred, simple to access and easy to use
- supports early resolution
- is integrated within the Commission's [Regulatory Strategy](#)
- enables us to identify and report on insights from complaints
- is supported by clear process guidance
- ensures skilled staff who have the support they need to deliver better practice
- is supported by robust quality assurance and review processes
- is appropriately resourced.

3.1 Older person focus

Older people are at the centre of our complaints processes. To ensure this, older people can expect that we will:

- listen to them to ensure we understand their values and what they want from both their aged care services and us at the Commission
- always include them, or their representative, in the complaints process
- share accurate information that is clear, straightforward and accessible
- keep them informed throughout the complaints process and about any actions or decisions that affect them, and the reasons for those decisions.

3.2 Timely resolution

Resolving complaints in a timely fashion is a key principle of best practice complaints handling. We understand that people making complaints need their concerns addressed as quickly as possible and providers also need us to make timely decisions.

We will always assess and prioritise complaints based on the risk or harm to older people. This is because the safety, health and wellbeing of older people is our priority. It also ensures we take timely action to reduce serious risk and prevent harm to older people.

This can sometimes impact the timeliness for addressing concerns involving lower risk. However, we are committed to resolving all complaints within our service standards.

3.3 Keeping people informed

We will keep the parties involved in the complaint up-to-date throughout the complaint process. This is another important aspect of good complaints handling and ensures parties are informed and empowered to actively participate in the complaints process. To ensure this, we will talk to complainants/older people about their preferences in terms of both method and frequency of communication. We will gain agreement from them about how they wish this to occur, and ensure all parties have clear expectations regarding frequency of communication.

3.4 Transparency

We want to build trust and confidence in the Commission through:

- our willingness to publicly share information about our operations
- application of good decision-making principles, including consistency and fairness
- open communication about the complaints process and ensuring people understand what it can and cannot do
- our openness to external scrutiny

We are transparent about:

- how we regulate
- our decisions and the reasons for them
- how we perform.

In the complaints function, we openly share information about:

- the aim of the complaints process
- the principles behind the complaints process
- the outcomes we aim to achieve in the complaints process
- key steps in the complaints process
- the decisions we make in the complaints process, the reasons for them and the decision-making principles we apply when making them

- how we perform the complaints function as required under the Commission Act
- each person's rights and responsibilities in the complaints process
- how we record, use and share protected information throughout the complaints process.

3.5 Risk-based and proportionate response

We base our decisions and actions on risk to the older person, and act in proportion to the level of identified risk. We use the right mix of regulatory tools to get the best results for older people, focusing on protecting and enhancing their safety, health and quality of life.

This approach underpins all the Commission's regulatory actions, including when we handle complaints.

In managing complaints, this means:

- we escalate risk as required to the appropriate areas of the Commission to ensure older people are safe
- the way we manage the complaint is based on the nature of the risk or harm to the older person, and whether the provider is managing that risk or harm appropriately. This proportionate approach to regulation is demonstrated in our regulatory diamond, found in our [Regulatory Strategy](#)
- we prioritise complaint matters to ensure people are safe
- we consider the circumstances of each complaint and the outcomes being sought by the older person.

3.6 Procedural fairness

As decision-makers, under the law we must approach our decisions with procedural fairness. This means we give everyone involved in a complaint the right to:

- be heard
- be treated fairly and without bias
- be informed of and respond to allegations
- information regarding the status of a complaint.

The 3 main rules for procedural fairness are:

1. Hearing rule – We must tell a person or provider before we make a decision that may affect their interests. We must then hear and consider their response before making the decision. We will share the critical issues we seek to address, and any additional information that is credible, relevant and significant to the issues.
2. Bias rule – We must:
 - Be impartial and unprejudiced.
 - Have no personal stake or interest in the case.

- Have no actual bias or appearance of bias in the case or against the person or provider involved.

Note: to prevent bias or potential bias within our complaints process, we follow a strict conflict of interest policy.

3. Evidence rule – We must make decisions for logical reasons based on the available evidence.

When we handle complaints and information about provider responsibilities, we make sure we provide procedural fairness to a person or provider whose rights or interests may be negatively affected by one of our decisions, including:

- giving the person making the complaint the chance to respond to our findings before finalising the complaint
- ensuring the older person's voice is heard and involving them or their representatives in decisions that affect them
- allowing providers to respond before a decision is made that affects them, and affording them the opportunity to give information and evidence to inform the complaint process
- keeping the person and provider informed of the progress and outcome of the complaint.

This makes sure we treat all parties fairly, keep them informed, and involve them in managing the complaint.

Further guidance regarding procedural fairness can be found on [our website](#).

3.7 Open disclosure

Open disclosure is the open discussion that a provider has with the older person or the person making the complaint when something goes wrong. This may include their family or supporters if appropriate. It includes situations when something has harmed, or has the potential to cause harm, to people receiving aged care services.

Open disclosure can involve:

- listening to the older person's experience of what occurred and ensuring they feel heard
- a factual explanation of what went wrong
- explaining what steps parties will take to prevent it from happening again
- an apology
- ensuring the older person understands how their experience will inform service improvements.

Comprehensive guidance regarding open disclosure is available [on our website](#).

In managing complaints, we:

- require providers to meet their responsibilities to practice open disclosure under [Aged Care Quality Standard 6](#) and [Standard 8.3.c and 8.3.e](#) in the [Principles](#)

- make sure providers understand their responsibilities for open disclosure generally, as well as within the specific complaint
- make sure that older people or people making the complaint understand providers' obligations for open disclosure. We will also help them understand:
 - how taking part in open disclosure can help them speak up about issues that affect them
 - how they can be supported throughout these discussions.

3.8 Outcome-focused approach

We focus on helping older people achieve the outcomes they want to see from their complaint. This means we will listen carefully to the older person to understand the outcome(s) they are looking for. We will talk with them at the beginning of the complaint process about what is realistic to achieve. This is because we need to make sure complaint outcomes are proportionate and in line with provider's responsibilities.

We help providers improve their services and each older person's experience of aged care. We also monitor how effective our resolution approach is in improving the quality of care for older people.

We make sure, where possible, that providers:

- **Remedy** non-compliance – this means providers understand and fix what went wrong.
- **Restore** older people's trust in the care that they deliver – often through practicing open disclosure.
- Take steps to **prevent** issues from happening again.

To ensure we focus on outcomes, we:

- understand the outcome the older person is seeking for each issue they raised
- make sure the complainant understands where outcomes are consistent with provider responsibilities
- focus on addressing risk and ensuring people are safe
- check that the complaints process has delivered the outcomes the older person is seeking, or explain when those outcomes are not possible
- focus not only on outcomes related to the complaint issues, but also on outcomes related to restoring relationships and trust
- ensure older people, their families and carers feel heard and respected throughout the complaints process.

3.9 Early resolution approach

The process of resolving complaints early, while adhering to the [Rules](#) and [Aged Care Act](#), is a guiding principle of how the Commission handles complaints. A key step in our assessment process is identifying where the issues raised in a complaint are suitable for early resolution. Early

resolution means identifying and implementing a proportionate and fit for purpose response to a complaint at the earliest point possible. It recognises that in many complaints there are different ways, other than formal investigation or other formal dispute resolution techniques, that allow for a prompt outcome to be reached.

Early resolution allows for efficient and effective complaint resolution and promotes expedient and effective use of public resources. It meets the expectations of the public and helps foster trust, confidence and satisfaction with our complaint handling. Our complaints management system is structured so that the option to resolve a complaint early is considered in most complaints. Consideration is given at all stages to the most appropriate complaint-handling option in the circumstance and managed accordingly.

4. Complaints process

4.1 How complaints can be made

Anyone can make a complaint about aged care services to the Commission. We encourage people raising complaints to provide their contact details to us because it allows us to:

- involve them in the process
- provide updates
- check complaint outcomes meet their needs.

However, we understand that some people wish to remain anonymous or keep their information confidential. We want everyone making a complaint to feel safe and able to raise their concerns.

We offer two ways to make a complaint without sharing their identity with the provider:

1. **Confidential complaint:** we will not share details with the provider, including:
 - a. the identity of any person and/or
 - b. any specific information requested not to be shared.
2. **Anonymous complaint:** we do not ask for or retain identifying information. The complainant may also choose to complain using a pseudonym.

If anyone is worried about providing information due to fear of retribution, it is important they raise this with the Commission.

Exceptions

There are some very rare times when the Commission may have to share the identity of the person making a confidential complaint. For example, we might need to share information to police if someone is in immediate danger. This includes when:

- the complaint suggests serious or immediate risk or harm to the older person
- a complaint party is at risk of self-harm
- the person making the complaint threatens to harm involved parties.

We do this only when necessary to ensure the safety and health of a person. Where practicable, we will let the person making the complaint know before we share any information.

Please see our [Privacy Policy](#) for more information about when and how you can interact with us anonymously.

Considerations for confidential and anonymous complaints

Not being able to share the details of the person making the complaint with the provider affects how we manage it and, sometimes, the outcomes we can achieve.

For example, if we can share the identity of the person making the complaint with the provider, we can:

- give them more detail about what happened
- check information we receive from the provider with the person who made the complaint, to make sure it is consistent
- work with the complaints parties to achieve a wider range of outcomes, like an apology or conciliation approach.

With anonymous complaints, we can't do that. This means we are sometimes more limited in what we can achieve with anonymous and confidential complaints. That's why we encourage people to leave details on how we can contact them if they can.

However, anonymous and confidential complaints are still important to the Commission and give us vital information about issues that can be affecting the safety and wellbeing of older people. The most important thing is everyone can feel safe to raise their concerns in whatever way suits them.

Withdrawn Complaints

There may be times where the parties do not want to continue with their complaint. Where this occurs, we may continue with the complaint, where needed, for example to manage risks to older people.

Own Initiatives

An own initiative complaint is where a decision is made to initiate a complaints process based on information received which identifies concerns about a provider not meeting its responsibilities. When deciding to undertake an own initiative, we collect and record sufficient information on:

- the name of the provider
- the source of the information
- when and how the concern was identified
- the reason we created an own initiative case (what is the risk we are concerned about)

4.2 Who's involved in a complaint

There are several different parties involved in the complaints process. Early in the process, we clearly establish who needs to be involved and their roles.

Person who makes the complaint

When things go wrong, older people should feel empowered to express their concerns with their aged care provider and with the Commission. Complaints can also be raised by anyone else. Often this might be:

- their family, friends or representative
- aged care workers
- professionals in the sector.

We will communicate with the complainant in a timely manner throughout the process to understand their needs, keep them up to date on progress and discuss outcomes.

Older person

We will always contact the older person involved in the complaint or their representative. We will engage with them to:

- hear their experience
- understand the outcome they seek
- keep them informed if that is their wish.

This is regardless of whether they made the complaint, or someone made the complaint on their behalf. We will not usually talk about the older person to others unless we have their permission.

Person who represents the older person

Sometimes older people have legal representatives or other people they give us permission to talk to on their behalf. We will ensure we clearly understand the representatives involved and work closely with them to gather information and provide updates.

Aged care provider

Aged care providers have the key responsibility for resolving the complaint about their service and ensuring they remedy the issue, restore relationships and prevent it from happening again. As such, they are a key stakeholder in the complaints process. We will work with providers to understand the issues from their perspective, provide information about our role, the information we need, and engage with them about how we can best work together to achieve the outcomes for older people.

Other relevant parties

When handling a complaint, we may request information or documents from any other person with knowledge of the matter, for example aged care workers or other health professionals. If we identify a person with relevant information, we will contact them as needed.

Advocates can play an important part in the complaints process, supporting complainants and older people to understand their rights and raise complaints. We welcome the involvement of advocates in the complaints process and are committed to working with them to assist older people to get their issues resolved.

The Commission

The Commission owns the complaints process. We:

- engage with all complaint parties and consider their perspectives, needs and preferences
- consider relevant information and documents to understand the complaint
- evaluate evidence we gather regarding what has happened and what has been done to address the issues

- apply a risk-based and proportionate response.

In communicating with parties, we will:

- treat everyone with respect
- be transparent and clear on what each party can expect from us at each stage of the process
- explain if there is any information or action, we need from each complaints party
- listen to and acknowledge concerns
- keep in mind the desired outcome the parties are seeking.

Our focus is on achieving meaningful, proportionate and sustainable outcomes aimed at safeguarding and protecting the rights of older Australians.

4.3 Phases in the complaints process

The complaints process is made up of several phases, including:

- [Collect and triage information](#)
- [Assess](#)
- [Resolve](#)
- [Finalise](#)
- [Evaluate](#)

Collect and Triage

When someone contacts us to make a complaint, we will listen and ask questions to collect relevant information and provide information needed to progress the complaint appropriately.

The information we collect includes:

- complainant's contact details (if appropriate)
- provider's details
- older person's details
- complaint concerns
- desired outcomes
- details to understand if there is any immediate risk to the older person.

The information we provide includes:

- an explanation of our role
- what we can and can't achieve
- an explanation of the complaints process, and what parties can expect

- how we are fair, impartial and use a risk-based proportionate approach to complaint handling
- how we will keep parties updated.

Throughout the complaint process, we collect information on the risk or harm to the older person and use it to triage and prioritise the complaint. This allows us to take proportionate, risk-based action to ensure the safety, health and wellbeing of the older person.

Information can be provided to us through several avenues, including via phone, webform or email.

Assess

The assess phase is where our complaints officers analyse information gathered and understand the nature and the context of the complaint. We assess a complaint to understand how best to start resolving it and to determine if risks need to be escalated to other parts of the Commission. We assess information from various sources to inform our risk assessment. The priority, where required, is to work with the provider to immediately ensure the older person is safe from harm.

For all complaints we will then undertake the following activities:

- Review information about the provider.
- Engage with the complaint parties.
- Conduct a risk assessment on available information, including what we have collected from complaint parties.
- Escalate risk to appropriate areas of the Commission as required to ensure the safety of older people
- Confirm the issues we need to examine to resolve the complaint
- Seek specialist advice within the Commission if required
- Determine the best way to resolve the complaint.

The assess phase will take all relevant information into consideration to determine the most appropriate way to resolve the complaint. We will engage with the older person, the person raising the complaint and the provider during this phase to get their views and advise on the resolution strategy to be implemented.

We will also consider if risks need to be escalated to other areas of the Commission to ensure older people are kept safe. The Commission supervises providers using a case management model to coordinate the Commission's regulatory responses. Throughout the complaint process, including in the assess phase, we will consider if risks detected should be escalated for further consideration by the Commission. Appropriate and timely risk escalation ensures all parts of the Commission work together as required to manage provider risk.

Resolve

The resolve phase is where we work with the complainant/older person and provider to resolve the complaint. Communication with complaint parties is of key importance throughout the complaint

process. The resolution process should support the provider to remedy the issue(s), restore relationships, and prevent the issue(s) from happening again. We have several resolution approaches available to us, including:

- Service Provider Assisted Early Resolution
 - This is where we ask the provider to try to resolve the complaint directly with the older person.
- Provider resolution
 - This is where we ask the provider to undertake a resolution process. We outline the issues in the complaint and advise them of what we expect from them. We also provide a template to report back to us within a specified time.
- Investigation
 - This is where we take a deeper look at the complaint. We seek a response from the provider to understand the issues and review information from all parties. We assess the information to ensure the provider is meeting its responsibilities, that risk has been addressed and a meaningful outcome has been achieved for the older person where possible.
- Mediation
 - Mediation involves the person making the complaint and/or the older person and the provider meeting with an independent mediator to discuss the concerns and attempt to achieve a mutually acceptable resolution.
- Conciliation
 - Conciliation involves us assisting the complaint parties to work together to discuss the issues and come to an agreement on actions to resolve the complaint.

In our resolution process, we will work with all parties to ensure we are unbiased and fair. We will work with the older person to make sure they understand what is happening to resolve the complaint. Part of our resolution approach may include conducting a site visit to the aged care service, an investigation of the issue(s), or directing the provider to take certain actions. Our priorities during this phase are:

- to reduce any potential risk or harm to the older person to a manageable level
- to balance the communicated needs and preferences of the older person
- resolve the complaint where possible and achieve meaningful and proportionate outcomes for the older person
- achieve the objectives of prevention, remediation and restoration.

Finalise

The finalise phase is where our complaints officers work with the parties to finalise a complaint. Engagement with the parties must occur before we decide to finalise a complaint.

We first need to decide if the complaint is ready to be finalised. In doing this we need to:

- decide if the risk or harm to the older person has been mitigated
- decide if we are satisfied the provider is meeting their responsibilities
- communicate with the complaint parties.

Before we decide to finalise a complaint, we will check with the complainant if their desired outcome has been achieved. Where it has, we will progress to finalisation. Where it has not, we will consider if there needs to be further action taken by the provider that is proportionate and reasonable to address the concerns in order to remedy the issue, restore relationships and prevent the issue from recurring.

Once a complaint is ready to be finalised, complaints officers will contact parties to:

- explain their decision
- provide a written copy of their decision
- explain their review rights.

Evaluate

The evaluate phase is where we look at how our resolution approach has achieved its objectives. This supports continuous improvement of our complaints handling processes. This lets us understand if we are using the right tools at the right time and that we are performing our complaints functions in line with:

- legislation
- our policies and procedures
- industry best practices.

We evaluate our management of complaints through a variety of mechanisms including detailed analysis of customer feedback and monitoring of Key Performance Indicators. See [Quality Assurance](#) section below for more information on our evaluation mechanisms.

4.4 Review rights and complaints about us

For most decisions we make about a complaint, the complainant (and in some circumstances, the provider) has the right to ask for the decision to be reviewed if they don't agree with that decision. Decisions that can be reviewed and who can seek a review are set out in the [Rules](#) and include:

- decisions to take no further action in relation to the issue raised in their complaint
- decisions under Section 17 of the [Aged Care Act](#) to end a resolution process in relation to the issue raised in their complaint.

Some decisions are not reviewable, including those where:

- the complainant has agreed to close the complaint because they were happy with the outcome. A new complaint would need to be lodged if the matter of concern has changed
- the complainant has chosen to remain anonymous
- the complainant has withdrawn their complaint
- we have already reviewed the decision.

The Commission has a standardised process for handling review requests, which is outlined on [our website](#). The review process is undertaken by one of the Commission's designated review managers, who are independent to the complaints process.

Complainants can also make a complaint about us if they are not happy with our service or the way we dealt with their complaint. Further information on making a complaint about us can be found on our website [here](#).

If the complainant is not satisfied with an outcome offered by the Commission, they can ask the Commonwealth Ombudsman to review our actions.

4.5 Quality assurance

We have strong systems in place to review our performance, identify continuous improvement opportunities and make changes to the way we handle complaints based on learnings. We do this through a range of activities, including:

- Monitoring Key Performance Indicators
- Routine surveying of customer (complainant and provider) satisfaction
- Quality Assurance processes such as audits and targeted assurance activities
- Analysis and reporting on complaints trends
- Identifying and implementing lessons from:
 - Independent reviews of our complaint decisions
 - Complaints about us
 - Feedback from older people, their representatives, providers and other government agencies.

5. Personal and protected information

Complaints contain protected information, being information that:

- is personal information
- relates to the affairs of a provider
- relates to the affairs of an applicant to become an approved provider of aged care.

We handle protected information in accordance with the law and our internal policies and procedures. This means that there are strict rules around how we handle personal information, including how we:

- collect personal information
- store personal information
- use personal information
- disclose or share personal information.

5.1 Managing privacy

Our Notice of Collection, available on our [website](#), explains how we manage personal information, including:

- how we collect personal information
- how we use personal information
- when we can share your personal information with others.

We will only share personal information if:

- we have permission from the person the information belongs to
- laws allow us to or require us to share it
- it meets one of the other exceptions in the [Australian Privacy Principles](#).

5.2 Record keeping

Throughout the complaints handling process we must make timely records of all the actions, decisions and information we collect and consider in making our decisions. We must manage our records in accordance with our legal and policy requirements.

6. Relevant resources

Type of document	Document	Document ID
Legislation	Aged Care Act 1997	N/A
	Aged Care Principles	N/A
	Aged Care Quality and Safety Commission Act 2018	N/A
	Aged Care Quality and Safety Commission Rules 2018	N/A
	Quality of Care Principles 2014	N/A
	Australian Privacy Principles	N/A
Commission website	Regulatory Strategy (Version 2.0. August 2024)	N/A
	Review and complaints about us	N/A
	Aged Care Open Disclosure Framework and Guidance	N/A
	Regulatory Bulletin 2023-21 Procedural fairness	FRM-ACC-0863
Other	Better Practice Complaint Handling Guide	N/A