| | | | |
|---|---|---|---|
| *Title:* | **3.5 FEEDBACK, COMPLIMENTS AND COMPLAINTS** | | |
| *Version:* | **5.0** | *Type:* | **Org Wide** |
| *Approved by:* | **CEO** | *Date:* | **10/11/2026** |
| *Status:* | **APPROVED** | | |

General

## 1. PURPOSE

The purpose of this policy is to provide a consistent, fair, and confidential complaints and feedback handling process to receive and respond to feedback at CoMHWA.

This policy applies to anyone accessing CoMHWA services. Consumers have access to this policy through our website and will be supported in understanding the policy and its procedures. Consumers also have access to a simplified one-page chart on the basics of the feedback process.

## 2. BACKGROUND

Definitions

**Employee** encompasses all paid workers including sub-contractors.

**Volunteer** refers to an individual or groups including volunteers, students and the Board.

**Member/s** refers to an individual or group of individuals who join the organisation to support our objectives at service, local and regional level.

**Minor Complaint** refers to a complaint that would be considered by a reasonable person to not potentially impact on the safety or efficacy of a service (an example may be feedback on the quality of coffee available in a training, or the décor in reception). Complaints can be easily resolved at the service level.

**Moderate complaint** refers to an issue that may require a more involved investigation. Moderate complaints pose potential to impact service provision/delivery and represent legitimate consumer concern, especially about communication or practice, but do not cause lasting impact or harm. Moderate complaints may present some potential for legal action.

**Major complaint** describes a significant issue of standards, where input from the manger is required. Major complaints may involve a problem with the quality of care, or denial of rights. These complaints pose quality assurance or risk management implications or issues causing lasting harm that require investigation. They pose a threat of legal action and Ministerial notification.

**Serious complaint** refers to an issue regarding serious adverse events, long-term damage, grossly substandard care, professional misconduct, or death that require investigation. They pose probable legal action and Ministerial notification.

**Consumer** refers to an individual who identifies as having lived experience of mental health challenges, irrespective of whether they have a diagnosed mental illness and/or have received treatment.

**Consumer complaint** is any expression of dissatisfaction, made by or on behalf of a consumer or significant other, regarding dealings with CoMHWA.

**Consumer suggestion** is a recommendation for service improvement made by a consumer.

| | | | |
|---|---|---|---|
| *Title:* | **3.5 FEEDBACK, COMPLIMENTS AND COMPLAINTS** | | |
| *Version:* General | **5.0** | *Type:* | **Org Wide** |
| *Approved by:* | **CEO** | *Date:* | **10/11/2026** |
| *Status:* | **APPROVED** | | |

## 3. POLICY

An effective and efficient management process for suggestions, compliments and complaints enables CoMHWA to resolve disputes, obtain feedback from consumers and provide strategies for service improvement.

CoMHWA recognises the importance of the following rights in giving feedback:

- To give feedback anonymously if preferred.
- To have feedback considered in the delivery, planning and evaluation of services.
- To have confidentiality upheld, and limits to confidentiality explained.
- To not be intimidated or treated favourably than others because of providing feedback.
- To access reasonable adjustments to accommodate a disability, to support personal safety, or cultural safety in providing feedback.
- To engage a support person, advocate or third party.
- To be treated with fairness, respect, and dignity always.
- To be informed of the progress and outcome of their feedback.
- To have their feedback responded to in a timely way and with as little formality as appropriate.
- To have a complaint responded to in a manner that is sufficient and impartial (adequate, appropriate, and fair).
- A person who is the subject of feedback or complaint also has these rights, and additionally has the right to be informed of feedback about them and to have fair opportunity to respond.
- When investigating a complaint, all parties involved will be kept informed and engaged in the process, and principles of natural justice will be applied.

## 4. PROCESS

### 4.1 Making a complaint

- Feedback and complaints can be provided anytime to any staff member by phone, face to face, email, in writing or via our Feedback Form.
- Members and networks at CoMHWA will be provided with the formal opportunity to give feedback (such as via a Satisfaction Survey) on at least an annual basis.
- Complainants should provide details of their concerns, including relevant dates, locations, and any supporting evidence, as well as their contact details. CoMHWA encourages complainants to raise issues as soon as possible after an incident. While we understand that it is not always possible to make complaints as soon as something happens, we are able to act to resolve the issue sooner if we hear about the complaint earlier.

### 4.2 Receiving feedback and complaints

CoMHWA is committed to being responsive to feedback and complaints and resolving them as quickly as possible. We will acknowledge receipt of complaints within 5 business days and aim to resolve all complaints within 30 business days.

Wherever possible, we will address complaints at the first point of contact with minimal formality.
If we are unable to resolve a complaint immediately, we will provide the complainant with an estimated timeframe for resolution, a designated contact person, and details of our complaint handling process. In some cases, we may need to contact the complainant to clarify details or request additional information.

- All feedback, compliments and complaints received will be reviewed by the relevant service manager or coordinator. Where the complaint or other feedback is **minor**, and the issue will be contained to that service only and the Line Manager or coordinator will manage the response locally, with no requirement to report the complaint to executive level.

General

- Where the complaint is moderate, major**,** or serious it will be reported to the executive. **Major or serious** complaints (see below) will also be reported to the Board and the CEO and may be reported to the relevant funding body if required by contract.
- When a **compliment** is received, the individual will be thanked for their feedback and advised their feedback has been communicated to the person/s involved in addition to the CEO.
- When a **suggestion for change or improvement** is received, the matter will be referred to the person responsible for deciding on the change or improvement. They will assess the merits of the suggestion and take action to implement the change if it is decided it will be beneficial to the organisation. The person making the suggestions will be thanked, but there is no expectation that there will be a formal response back to the person with an explanation of why the suggestions was or wasn't implemented.

### 4.3 Process for managing serious complaints

Where a complaint alleges that an issue involves a likely and significant risk to the safety or health of the person concerned or others in the workplace, (i.e., an allegation of a criminal offence) the complaint will have high priority and will be managed in accordance with 3.8 Occupational Health and Safety Policy and/or 3.9 Emergency and Incident Management Policy, according to the nature of the risk identified. Complaints relating to staff conduct that are substantiated through the investigation process will be managed in accordance with 2.4 Substandard Performance and Misconduct Policy.

- The Line Manager or coordinator will record the complaint on the Feedback Form through the CoMHWA website if it is conveyed verbally. The complaint will be recorded on the Compliments and Complaints Register. If the complaint is received via email, an acknowledgement of the complaint to the complainant will be sent within five (5) working days.
- The manager will assess and investigate the complaint, making recommendations and taking action to resolve the complaint. In general, the process should include:
    - Informing the complainant of the process to be undertaken.
    - Informing any party accused of any improper action of the nature of the complaint being made and providing them an opportunity to respond with their perspective on what occurred.
    - Investigate the complaint. The purpose of the investigation is to obtain enough information to decide what has occurred and identify appropriate action.
    - Providing a draft summary of findings to the complainant, and to anyone complained about, prior to finalisation.
    - Resolve the complaint. At the end of the investigative stage, within 30 working days of receipt of the complaint, the parties to a complaint are advised about the outcome.
- The final summary or letter should include what was reported, what is reasonably considered to have most likely occurred, and what has been done to resolve the complaint. If the complaint is significant enough to have warranted reporting to the CEO, then the CEO should approve the final letter and summary before it is sent.
- Should an individual not be satisfied with the complaint resolution process they can escalate the complaint to the Board, in writing, via CoMHWA's CEO.
- The resolution information should include summarising any action already taken or planned to be taken to address the issue – either as redress (such as an apology), or at a systemic level to reduce risk of reoccurrence into the future (such as revision of a policy, or modification of training content).
- Where possible, the matter should be resolved quickly, and at the local level (Minor complaints).
- For all Major complaints, a final written response should be sent to the complainant within 30 working days of receipt of the complaint.

### 4.4 Withdrawing a complaint

A complaint may be withdrawn at any time by notifying CoMHWA in writing.

### 4.5 CONTINUOUS SERVICE IMPROVEMENT

CoMHWA will monitor and evaluate the complaint management policy and practices.
This includes:

- Checking that effective notification to the manager (and possibly CEO) of all relevant complaints is occurring. and that the agreed process is followed and recorded.
- The members or staff involved in complaints being informed of and included in the complaint management process.
- 'Closing the loop' by making sure that recommendations from reviewed complaints are implemented, reviewed and evaluated.
- Evaluating the policies and practices on complaints to decide effectiveness and make improvements.
- Monitoring whether complainants are satisfied with the complaint resolution process.
- Involving consumers and staff in the future review and any change in the design and evaluation of the complaint management system.

### 4.6 COMPLIANCE

CoMHWA is committed to handling complaints fairly, consistently, and in accordance with this policy. If a complainant believes their complaint has not been managed in line with this policy, they may request a review by CoMHWA's CEO.

## 5 STANDARDS MONITORING

CoMHWA monitors relevant standards in relation to this policy, ensuring the policy can be applied in practice.

## 6 REVIEW OF THE POLICY

This policy will be routinely reviewed as needed, based on its application to practice at the service, any relevant amendments to the legislation, and feedback from stakeholders.

## 7 RELEVANT DOCUMENTS

- National Safety and Quality Mental Health Standards for Community Managed Organisations
- *Privacy Act 1988 (Commonwealth)*
- 3.25 Open Disclosure Policy
- Consumers of Mental Health WA Constitution 2024

## 8. VERSIONS

| VERSION | DATE | Comment |
|---|---|---|
| 0.1 | 10/7/13 | Initial draft released |
| 0.2 | 13/12/15 | Revised draft |
| 1.0 | 19/2/16 | Amended draft and template. Approved by CEO. |
| 2.0 | 14/10/19 | Reviewed and approved by CEO. |
| 3.0 | 21/04/21 | Updated. Reviewed and approved by CEO. |

| | | | |
|---|---|---|---|
| *Title:* | **3.5 FEEDBACK, COMPLIMENTS AND COMPLAINTS** | | |
| *Version:* | **5.0** | *Type:* | **Org Wide** |
| *Approved by:* | **CEO** | *Date:* | **10/11/2026** |
| *Status:* | **APPROVED** | | |

General

| | | |
|---|---|---|
| 4.0 | 10/10/22 | Reviewed, approved by Board and CEO. |
| 4.1 | 26/05/25 | Under review |
| 5.0 | 10/11/26 | CEO Approved |