



## Policy and Procedure for Client Complaints (CF108P)

### 1. Objective

This policy and procedure describes the way in which complaints made by external clients on any aspect of the provision of products or services by Durack Institute of Technology are received and responded to by the Institute. This policy includes a student grievance with another student or a Institute staff member.

This policy does not relate to:

- Appeals by students against assessment results (refer to Procedure for Conducting Student Assessment Appeals SR202P).
- A staff or student complaint of Sex Based Harassment (refer to Sex Based Harassment Policy HR601P)
- A staff grievance (refer to Grievance Resolution Policy and Procedure HR401P)
- Appeals or feedback regarding decisions related to actions covered by the provisions of the Public Sector Standards in Human Resource Management.

### 2. Policy

Durack Institute of Technology values client feedback and recognises that opportunities to improve products and services arise from effective handling of client complaints. The overarching aim of this policy is to ensure complaints are processed in a way that reconciles the interests of clients and the Institute whilst ensuring expectations of fairness are met.

Information about opportunities for clients to provide the Institute with feedback, including using the complaints procedure, will be made widely available to clients in easy to understand formats. For example the procedure can be advertised in the student Fact Pack, on the Institute website, on posters around the campuses or in information brochures.

The complaints procedure will be made as accessible as possible to all clients. Where clients have special needs, for example clients with a disability, clients from culturally diverse backgrounds or clients with limited literacy skills, every reasonable effort will be made to provide assistance if requested and to make the complaint lodgement procedure as flexible as possible.

Complaints will be handled fairly, recognising the rights of both the client making the complaint and the Institute, or the section/division of the Institute, or person against whom the complaint is being made. All parties concerned will be treated with courtesy and appropriate confidentiality will be maintained.

In the interests of providing the most effective and timely address of client concerns and complaints most complaints should be dealt with as close to the source as possible, and involve the people most directly concerned. The Institute will respond to complaints in a timely manner and ensure the client is kept informed of progress in the resolution of the complaint and of any undue delay.

The Institute will be transparent and accountable in relation to client complaints by ensuring information about the procedure is widely available and by informing stakeholders about feedback received and actions taken to improve products and services resulting from analysis of feedback.



Where a complaint is made anonymously this will be regarded as feedback and incorporated into the Institute's continuous improvement processes where appropriate.

Where necessary, the Institute Managing Director will have the final determination in the outcome of a complaint.

### 3. Procedures

At any point in the procedure a client may withdraw a complaint.

The Institute will ensure appropriate training for staff involved in the complaints management process.

The Institute will collect data and maintain records of complaints received and their outcomes. These will be analysed by Corporate Executive twice yearly to identify systemic issues that can be addressed through continuous improvement. This process will be co-ordinated by the Manager Quality and Planning.

All documentation relating to client complaints will be forwarded to the Manager Quality and Planning to be registered on the Institute records management system and filed appropriately.

#### Informal Complaint (see flowchart at end of document)

The first level of the complaint procedure is informal where a client may approach a member of staff to discuss a concern or make a complaint. This does not need to be in writing and it is anticipated that most complaints can be resolved at this level.

A client may approach any Institute staff member to discuss a concern or with a complaint. The staff member has a responsibility to take prompt and reasonable action to try to resolve the complaint. If necessary the staff member may ask for assistance from or refer the client to an appropriate officer, for example their supervisor or relevant Director.

Where the client lodging the complaint is under the age of 18 the staff member is to inform the client that their parents will be notified and asked to be involved in resolution of the complaint.

The staff member should record the details of the complaint, the client involved and any actions taken to resolve the complaint. The details can be recorded in an informal way, e.g. in a diary or as a file note, however appropriate confidentiality must be maintained.

An informal response will generally be given verbally to the client within ten Institute working days from when it was received.

The client should be informed that a formal procedure is also available to them if they are unsatisfied with the outcome of the informal process.

Once resolved the staff member involved is to provide details of the complaint to the Manager Quality and Planning including the essential details of the complaint, when it was made, what steps have been taken to resolve the complaint and whether the client has been informed of the outcome. This should be done ensuring appropriate confidentiality is maintained and as soon as is reasonable to ensure data regarding complaints is recorded and shared with the Manager / Director of the area as necessary.

If the complaint has not been resolved to a satisfactory level through this informal mechanism the Manager Quality and Planning is to forward the



complaint to the relevant Institute Director for investigation and recommendation. The complaint then becomes a formal complaint.

Formal Complaint (see flowchart at end of document)

The second level of the procedure is a formal one where a complaint could not be resolved using an informal approach.

Where a client approaches a staff member to make a formal complaint the staff member is first required to assist the client to resolve the complaint via the informal process described above.

Once it has been established that the complaint could not be resolved through the informal process the complaint is made formally in writing and must contain at least the following details:

- Client's name and contact details.
- A description of the complaint, including where, when and who was involved.
- A description of the steps already taken to try to resolve the complaint.
- An indication of the client's desired outcome.
- Clients may use the Client Complaint Form (CF-108-F) however in the interests of making the procedure as accessible as possible, provided the complaint is in writing, and contains the above details, this form is not mandatory.

Staff will provide assistance to clients in using the procedure and putting their complaint in writing if this is requested. Clients may also ask a friend/colleague or fellow student to assist them in lodging a complaint.

Where the client lodging the complaint is under the age of 18 the staff member is to inform the client that their parents will be notified and asked to be involved in resolution of the complaint.

Any staff member may receive a written complaint. All written complaints should be forwarded immediately to the Manager Quality and Planning for recording and tracking. A copy only will be placed on the relevant records file and the original documentation will be forwarded by the Manager Quality and Planning to the Director (Director Organisational Effectiveness or Director Corporate Services or Director Academic and Training Services) responsible for the area of the complaint in a red complaints wallet.

A workflow action sheet will be placed on the front of this wallet and each action will be assigned, actioned and updated on the Institute records management system, TRIM.

On receipt of a complaint the Manager Quality and Planning will issue the client with an acknowledgement indicating that the complaint has been received and the contact details of the designated Director.

The Director, or their nominated staff member, will liaise with the client and relevant staff to ensure the complaint is resolved. Where the complaint involves allegations against a Institute staff member the Director will inform the Manager Human Resources. Where necessary, the Institute Managing Director will be consulted and have the final determination in the outcome of a complaint.

The client making the complaint will have the opportunity to formally present their case. This can be in writing or verbally and may involve



clarification of the initial complaint. The Director, or their nominated staff member, will facilitate this.

Upon completion of the investigation the Director will prepare a written report to the Manager Quality and Planning including recommendations of appropriate action.

If the recommended actions involve discipline of staff the Manager Human Resources is to be consulted.

The Director in liaison with the Manager Quality and Planning will provide the client with a response, in writing, informing them of the outcome of the complaint and the reasons for any decisions.

The client will normally be provided with a written response within thirty Institute working days from when the formal complaint was received. The client should be kept informed of the progress of the complaint resolution or if there are any delays in the resolution process.

The written response will include the outcome of the complaint, reasons for the decision, any changes which have resulted from the complaint, an apology where appropriate, and information about the option to have the complaint reviewed by an external agency, such as the Ombudsman.

All relevant information regarding the complaint is to be made available to all parties to assist in the resolution process. However, appropriate confidentiality must be maintained.

Once the complaint has been finalised all documentation, including any replies, meeting notes, file notes and the workflow action sheet should be placed within the complaints wallet and forwarded back to the Manager Quality and Planning for registration and filing.

#### 4. Definitions

Complaint – is any expression of dissatisfaction or concern raised by a client in relation to the products or services provided by the Institute.

External client – any person or organisation accessing the products and services of the Institute, including students, employers, industry/enterprises, other government agencies and community groups, or those providing services to the Institute.

Reasonable action – action taken by a staff member, to try to resolve a complaint that is within their area of responsibility and takes account of their level of authority and decision making.

Resolution – an outcome to a complaint, which seeks to reconcile the interests of the client making the complaint and the Institute.

#### 5. References

Australian Quality Training Framework: Standards for Registered Training Organisations.

AS 4269-1995 Complaints Handling

*A Good Practice Guide for Effective Complaint Handling* Commonwealth Ombudsman's Office

Procedure for Conducting Student Assessment Appeals SR202P

Staff & Student Sex Based Harassment Policy and Procedure HR601P

Grievance Resolution Policy and Procedure HR401P

Premier's Circular 2004-04 Whole of Government Complaints Management Strategy.

National Complaints Code, Department of Education, Science and



- Training.
- 6. Documentation** Client Complaint Form [CF-108-F1](#)  
Complaint Acknowledgement Letter [CF-108-T1](#)  
Complaint Outcome Letter Template [CF-108-T2](#)
- 7. Responsible Quality Officer** Manager Quality and Planning
- 8. Date of last review** 30 April 2007



## Client Complaints Action

### First Level - Informal

### Second Level - Formal

