

Customer complaint management

Department of Health Standard
QH-IMP-450-1:2017

1. Statement

This standard provides the minimum actions required to comply with the Customer Complaint Management Policy for the Department of Health (the department). The objective of customer complaint management in the department is to provide a system which facilitates communication between customers and the organisation, and to agree on a resolution to a problem which suits both parties. Complaints and/or the receipt of feedback provide an opportunity for continuous improvement to the services, policies and operations of the department.

The standard is built on the nine customer complaint management principles outlined in detail in the Customer Complaint Management Policy. These are:

1. Human rights
2. People focus
3. Visibility, transparency and access
4. Responsiveness
5. Objectivity and fairness
6. Feedback
7. Remedies
8. Accountability, learning and prevention
9. Skills development

The Customer Complaint Management Policy, Standard and Guideline (the customer complaint management framework) outlines the intent, roles, responsibilities and operational guidance for customer complaint management in the department. The framework is based on the Australian/New Zealand Standard, Guidelines for Complaint Management in Organisations (AS/NZ 10002:2014).

The standard provides for standardisation and consistency in the outputs of customer complaint management e.g. minimum data requirements, review and continuous improvement, reporting and capability/awareness of staff.

2. Scope

This standard applies to all employees, volunteers, contractors and consultants within the department's divisions and business units (BUs) managing customer complaints about staff, products and/or services they provide, including whether an action or decision limits human rights.

This standard *does not* apply to:

- complaints about the products, services or staff of Hospital and Health Services or the Queensland Ambulance Service
- complaints covered by existing statutory or policy obligations, for example; regarding corruption, fraud or right to information/privacy, complaints made by public servants regarding their employment/employer or any other type of complaint already addressed by subject specific legislation and/or policies
- enquiries from a customer about a departmental service or action of the department, or its staff.

3. Requirements

3.1 Department of Health Customer Complaint Management Model

3.1.1 The department has adopted a three-level customer complaint management model, which is designed to support the core principle of responsiveness by focussing on early resolution. The severity of the customer complaint should inform the management approach selected for each complaint.

The model is outlined at figure 1.

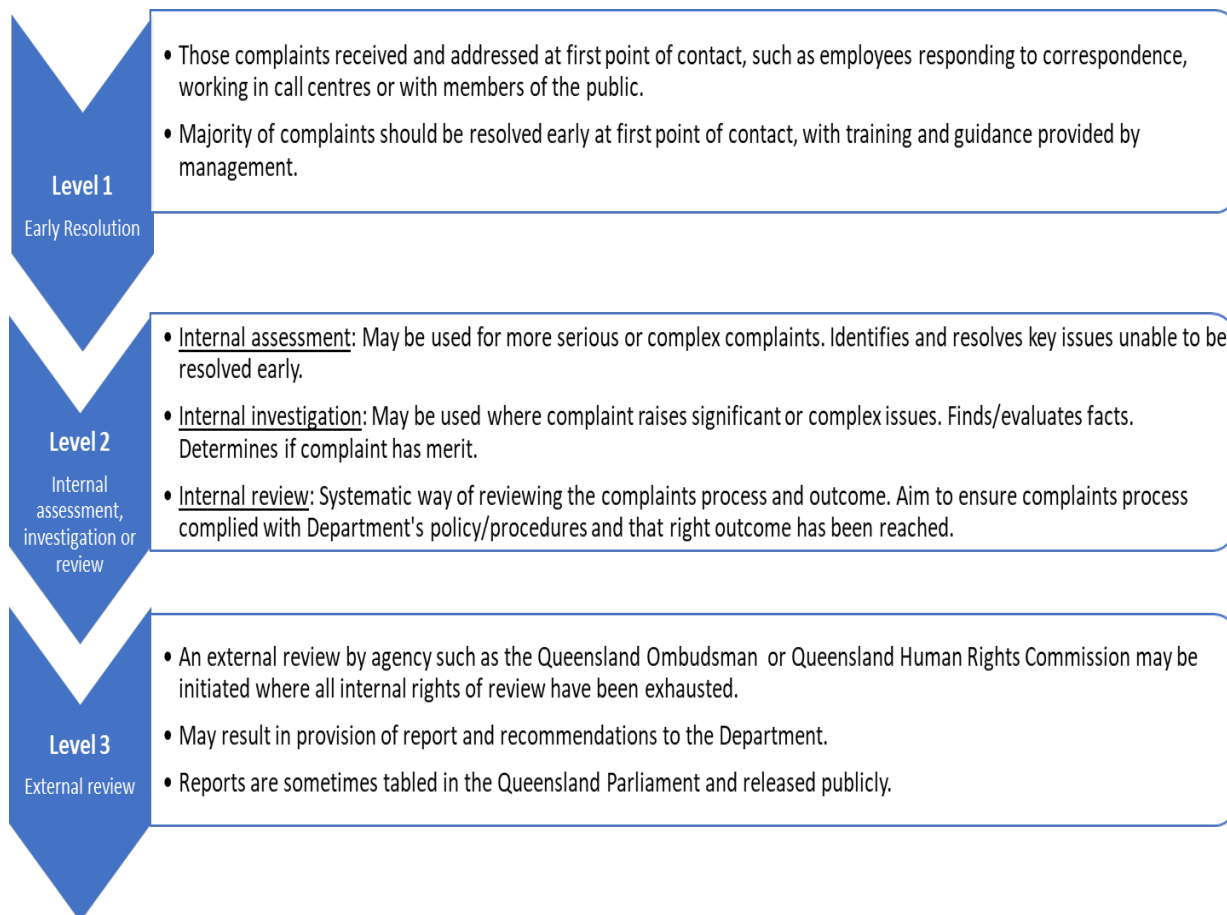


Figure 1 Customer Complaint Management Model

3.2 Customer Complaint Management System

- 3.2.1 The department's complaints management system (CMS) must align with the Customer Complaint Management Model and focus on responsiveness to ensure the early resolution of complaints where possible.
- 3.2.2 All divisions and BUs of the department must have local processes in place for managing customer complaints (receiving, identifying, assessing, recording, reporting and responding to customer complaints)
- 3.2.3 Local processes must be compliant with this standard and align with the nine Principles in the Customer Complaint Management Policy which includes Human Rights considerations. . The Customer Complaints Management Guideline (the Guideline) is considered the default process. Local processes must be documented, if they deviate from the Guideline and be readily available and easily accessible.
- 3.2.4 Staff must be aware of local processes and their roles and responsibilities in managing customer complaints.
- 3.2.5 Staff responsible for receiving, identifying, assessing, managing and responding to customer complaints must be appropriately trained and/or skilled.

3.3 Complexity and timeframes

- 3.3.1 Where possible a resolution timeframe should be agreed with the complainant as soon as practicable (if it is unable to be resolved immediately).
- 3.3.2 The complexity of the complaint may help determine whether it should be managed initially as a Level 1 or 2 customer complaint, as per the customer complaint management model (section 3.1 above). A customer complaint would only be determined as a Level 3 customer complaint (external review) once all internal review processes had been exhausted. A customer should raise a human rights complaint to the department initially before making a contact with the Queensland Human Rights Commission.
- 3.3.3 The table below outlines customer complaint target resolution timeframes based on their complexity. Rationale for departures from these targets are to be communicated to the complainant and revised resolution timeframes agreed proactively.

Classification	Description	Target resolution timeframe
Simple	A customer complaint which is able to be resolved early at the point of first contact.	Resolved immediately at point of service.
Standard	A customer complaint which may have more than one simple issue and requires further information and/or consultation to resolve.	Resolved within 10 working days of receipt.
Complex	A customer complaint that has multiple complex issues and/or is serious in nature and usually requires a formal investigation.	Resolved within 30 working days of receipt.

3.4 Managing the complaint

- 3.4.1 The business area managing the customer complaint should promptly acknowledge the complaint, and assess it using the complaint management model and complexity classifications to determine the most appropriate way to manage it through to resolution.
- 3.4.2 Complainants should be advised, as soon as practicable, where the business area is unable to deal with part or all of the customer complaint.
- 3.4.3 The business area must manage the complainant's expectations, including advising complainants about:
- The customer complaint process
 - Expected timeframes, including revised timeframes where relevant
 - Possible or likely outcomes where practicable.
- 3.4.4 Customer complaints must be managed in an objective, equitable and unbiased manner.
- 3.4.5 The business area must provide explanations for any decisions made in response to the customer complaint.

3.5 Maintenance and Improvement

- 3.5.1 The use and maintenance of customer complaint records is the responsibility of the department, and by proxy, the business area receiving, managing and recording the customer complaint.
- 3.5.2 Local processes must be capable of recording and reporting of information to assess, classify and analyse customer complaints to identify systemic, recurring and single incident problems and trends.
- 3.5.3 Divisions and BUs must conduct an analysis of aggregate local customer complaint data at least once a year in order to identify trends and themes in customer complaints to inform improvements to service delivery, policy and operations.
- 3.5.4 Divisions and BUs must review implementation of local processes at least every year to assess their effectiveness, efficiency and satisfaction of complainants with the complaint management system.
- 3.5.5 Regular monitoring (including auditing and reviewing) of the department's CMS as well as local processes will be coordinated by the Senior Complaints Executive (or delegate).

3.6 Privacy

- 3.6.1 The department must comply with the privacy principles in the *Information Privacy Act 2009* (IP Act) in its dealings with personal information which includes the nine National Privacy Principles. This necessarily includes dealing with personal information in the course of administering a customer complaint. The obligations include the department:
- only collecting personal information necessary to the administration of the complaint
 - informing parties to a complaint about the flow of personal information involved in the department's administration of the complaint
 - storing personal information to prevent unauthorised access, use, modification and disclosure
 - taking reasonable steps to ensure the personal information is accurate, complete and up-to-date before use

- not using personal information obtained in the complaints process for secondary purposes
 - ensuring limited disclosure of personal information obtained in the complaint process to third parties.
- 3.6.2** Local processes should be assessed to identify whether they require a Privacy Impact Assessment (PIA). The department's Privacy Impact Assessment Threshold Assessment tool can be used to determine whether a PIA is required.

3.7 Records

- 3.7.1** Local processes must comply with privacy and record keeping legislation, policy and principles. The department has a supported complaint management information system (RiskMan) which can assist to appropriately record and report on complaints.
- 3.7.2** Comprehensive and timely recordkeeping is central to effective complaint management.
- 3.7.3** The *Public Records Act 2002* requires that departments/agencies make and keep full and accurate records of their activities.
- 3.7.4** The business area responsible for managing the customer complaint must ensure accurate records are made and kept for as long as they are required.
- 3.7.5** Customer complaints must be recorded with supporting information and assigned a unique identifier.
- 3.7.6** If a complaint is referred from one business area to another, a record of the transfer of the complaint should be kept so there is an auditable trail of the complaint through the department.
- 3.7.7** A public record can only be disposed of with the consent of the State Archivist, and with Director-General (or authorised delegate) approval in accordance with the Queensland State Archives General Retention and Disposal Schedule.

3.8 Minimum data and reporting requirements

- 3.8.1** The department has adopted the minimum complaint data requirements as outlined in AS/NZS 10002:2014. The following information as required by the Standard and Human Rights Act must be collected for each customer complaint:
- a) Date complaint received
 - b) Complainant's name, address and contact details
 - c) How complaint was received or referral source
 - d) Who is handling the complaint
 - e) Whether the complaint is related to human rights. Separately identify direct human rights complaints and those identified while assessing other complaints.
 - f) Dates/methods of follow up contact with complainant
 - g) Primary reason or cause of the complaint
 - h) Outcome (including 'no further action' or 'further action') and any remedies provided as a result of the complaint
 - i) Improvements or updates to policies and procedures resulting out of complaints related to human rights
 - j) Date complaint finalised.
- 3.8.2** Section 219A(3) of the *Public Service Act 2008* requires the department to publish the following information for the financial year by 30 September each year:
- a) the number of customer complaints received
 - b) the number of those complaints resulting in further action (see definitions)

- c) the number of those complaints resulting in no further action (see definitions).
- 3.8.3** Section 97 of the *Human Rights Act 2019* requires the department to publish the following information in its annual report:
- a) details of any actions taken during the reporting period to further the objects of the *Human Rights Act 2019*
 - b) details of any human rights complaints received by the department, including the number of complaints, the outcome of the complaints and other information prescribed by regulation
 - c) details of review of policies, programs, procedures, practices or services undertaken in relation to their compatibility with human rights
- 3.8.4** Deputy Directors-General and equivalents are to provide an annual assurance statement to the Risk, Assurance and Information Management Branch, providing:
- a) the data outlined in section 3.8.2
 - b) a summary of the trends, themes and proportion of complaints resolved within timeframes
 - c) information about how Division/BU's roles and responsibilities are discharged in relation to 3.5.3 and 3.5.4.
- 3.8.5** Divisions and BUs may be asked to report on other customer complaint related information to the Senior Complaint Executive (or delegate) from time to time.

4. Roles and Responsibilities

4.1 Director-General

The Director-General is responsible for the following:

- a) ensuring that a customer complaint management framework is established and maintained within the department
- b) cultivating a customer focus throughout the department
- c) appointing a senior executive (Senior Complaint Executive) with overall strategic responsibility and authority for customer complaint management within the department.

4.2 Senior Complaint Executive

The Senior Complaint Executive (Deputy Director-General, Corporate Services Division or delegate – Risk, Assurance and Information Management Branch) is responsible for the following:

- a) ensuring staff are aware of the customer complaint management framework
- b) ensuring information about the customer complaint management framework is easily accessible to members of the public and is communicated in an easy to understand manner
- c) overseeing the process for performance monitoring, evaluation and reporting on customer complaint management
- d) publication of the department's complaints management data per s219A of the *Public Service Act 2008* as required by 30 September each year.
- e) publication of the department's human rights complaints data in the Annual Report as required by s97 of the *Human Rights Act 2019*.
- f) provide advice and guidance on the customer complaint management system
- g) reporting to senior management and other relevant stakeholders on the effectiveness of and compliance with the complaint management system.

4.3 Deputy Directors-General or equivalent

Deputy Directors-General or equivalent (or delegates) must, as applicable within their area of responsibility, be responsible for the following:

- a) ensuring local processes are implemented which are compliant with the requirements of the department's customer complaint management framework and CMS
- b) ensuring their staff are aware of the department's customer complaint management framework, the CMS and its intent and objectives
- c) ensuring staff handling customer complaints are appropriately trained and/or skilled and experienced
- d) where required, ensuring information about local process is easily accessible to staff
- e) ensuring there are processes in place to review trends and themes in customer complaints and the effectiveness and efficiency of local processes to inform annual maintenance and improvement activities
- f) ensuring there is a database or complaints register for recording customer complaint data.
- g) ensuring customer complaint data and related information is prepared for annual data reporting and publication as outlined in section 3.8.2 and 3.8.3.

4.4 Staff handling complaints

All staff handling complaints should:

- a) ensure complaints are managed according to the department's customer complaint management framework and local processes. This includes the consideration of any Human Rights relevant to customer complaints.
- b) ensure the complaint is promptly acknowledged, assessed and resolved in a timely manner
- c) participate in training and have knowledge of customer complaint management processes relevant to their role and business area
- d) ensure minimum customer complaint data is captured and recorded
- e) treat complainants in a respectful and courteous manner
- f) be able to identify and effectively respond to people's support and communication needs and preferences in accordance with the principle of "Visibility, Transparency and Access"
- g) ensuring the timely and appropriate notification to senior management of any significant customer complaints or systemic issues identified through complaints.

4.5 All staff

All staff in the department should:

- a) be aware of the department's customer complaint management framework
- b) be aware of their business area's local processes, where applicable
- c) be aware of the value of complaints and feedback generally to the department
- d) be aware of their roles, responsibilities and authorities with respect to complaints
- e) be aware of the procedures to follow and the information to provide to complainants
- f) know how to recognise a customer complaint and have a general awareness of the various complaint types (e.g. customer, staff, corrupt conduct).

5. Legislation

- *Public Service Act 2008*
- *Information Privacy Act 2009*
- *Hospital and Health Boards Act 2011*

- *Public Records Act 2002*
- *Human Rights Act 2019*

6. Supporting Documents

The department's Complaint Management Standard is supported by:

- Department of Health Customer Complaint Management Policy
- Department of Health Customer Complaint Management Guideline
- Quick Guide for Customer Complaint Management Quick
- *AS/NZS 10002:2014 Guidelines for complaint management in organisations*
- Queensland Ombudsman's online Policy and Procedure Guide
- Queensland Government Guide: Handling human rights complaints.
- Department of Health human rights complaints guide

7. Definitions

Term	Definition	Source
Complaint	Expression of dissatisfaction made to, or about, the department, related to its products, services, staff or the handling of a complaint, where a response or resolution is explicitly or implicitly expected or legally required.	<i>AS/NZS 10002:2014 Guidelines for Complaint Management in Organisations</i>
Complainant	Person, organisation or their representative (including clients, consumers, service users, customers, etc.) who is apparently directly affected by the service or action of the department, making a complaint.	<i>AS/NZS 10002:2014 Guidelines for Complaint Management in Organisations</i>
Customer Complaint	A complaint about the service or action of a department, or its staff, by a person who is apparently directly affected by the service or action. It includes, for example, a complaint about any of the following: (i) a decision made, or a failure to make a decision, by a public service employee of the department; (ii) an act, or failure to act, of the department; (iii) the formulation of a proposal or intention by the department; (iv) the making of a recommendation by the department; (v) the customer service provided by a public service employee of the department.	<i>Public Service Act 2008</i>
Customer Complaint Management Framework	Comprised of the Customer Complaint Management Policy, Standard and Guideline.	NA

Term	Definition	Source
Complaints Management System (CMS)	The systems, processes and procedures used to manage customer complaints. The CMS must comply with the requirements outlined in the Australian Standard.	NA
Customer	A consumer of the department's products and/or services. This definition applies to both external customers (e.g. the public) and internal customers (e.g. employees, contractors and consultants).	NA
Enquiry	Contact or correspondence from a customer seeking information.	NA
External Review	A review of the management of a complaint by an entity external to the department e.g. Queensland Ombudsman.	NA
Further Action	The complaint was accepted and resulted in remedial or improvement action.	NA
Human Rights	Human rights means the rights stated in part 2, divisions 2 and 3 of the <i>Human Rights Act 2019</i> .	<i>Human Rights Act 2019</i>
Internal Review	An internal review is an objective, independent and impartial merits review of the complaints process and outcome. It is not a re-investigation.	NA
Local processes	Systems, processes and procedures developed at divisional and/or commercialised business unit level to manage customer complaints. Local processes must comply with the requirements outlined in the Complaint Management Framework.	NA
No Further Action	The complaint was accepted and resolved immediately at the point of service.	NA
Vexatious Complaint	A complaint without grounds made to cause annoyance, frustration or worry.	<i>Oxford Dictionary</i>

Version Control

Version	Date	Comments
3.0	10 December 2019	Policy review to incorporate requirements of <i>Human Rights Act 2019</i>
2.0	21 February 2019	Policy review – incorporating recommendations from the Queensland Ombudsman
1.0	5 July 2017	Endorsed first version