

# Customer Complaints Management Policy and Procedure

Owner People and Culture (PC, CS)  
Last Reviewed 28/05/2024

CHC/2019/4684  
Version 1.06

## 1. Purpose

This policy and procedure is designed to ensure that customer complaints about departmental products and services are managed through an effective and consistent process that meets the requirements of the *Public Sector Act 2022* and the current Australian standard for handling customer complaints (AS 10002:2022).

Customer complaint definition, *Public Sector Act 2022*, s264(4): A complaint about the service or action of a public sector entity, or its staff, by a person who is apparently directly affected by the service or action. Examples and exceptions are included in a detailed complaint definition in [Appendix 8](#).

## 2. Policy

The department is committed to delivering high quality services and welcomes customer feedback on its products, services, performance and staff as a means of monitoring and improving service delivery to customers, as well as enhancing organisational effectiveness and efficiency.

The department is also committed to ensuring that all customer complaints are managed in a responsive, efficient, effective and fair manner. Complainants will be treated with respect and will receive a professional level of service throughout the complaint management process.

Together, the policy, procedure, personnel, and technology used by the department to receive, record, respond to and report on customer complaints comprise the Customer Complaints Management System (CCMS).

This policy deals with Customer Complaints as depicted in [Appendix 6](#), the Complaint Management Framework. Each type of complaint is addressed according to its appropriate complaint-handling process, as detailed in this Framework.

## 3. Principles

Details regarding the principles for receiving, managing, and responding to Customer Complaints are outlined in [Appendix 7](#).

## 4. Authority

[Public Sector Act 2022](#)

## 5. Human rights compatibility

The department is committed to respecting, protecting and promoting human rights. Under the [Human Rights Act 2019](#), the department has an obligation to act and make decisions in a way that is compatible with human rights and, when making a decision, to give proper consideration to human rights. When making a decision under this policy and procedure, decision-makers must comply with that obligation (refer to [Comply with Human Rights Act](#)). See also **Complaint received alleging a breach of the *Human Rights Act 2019* ([Appendix 1](#))**



## 6. Scope

This policy does not replace pre-existing processes for dealing with complaints, for example:

- a. The review and appeal provisions in the *Environmental Protection Act 1994*
- b. The review and appeal provisions in the *Nature Conservation Act 1992* - for further details of these review provisions refer to the relevant section of the Act
- c. The internal review provision in the *Right to Information Act 2009* (RTI) - further details on the RTI process can be found on the department's Right to Information internet page
- d. The complaint handling provision in the *Information Privacy Act 2009*
- e. The complaint process for *Public Interest Disclosure Act 2001*
- f. The processes for dealing with an allegation of corrupt conduct under the *Crime and Corruption Act 2001*
- g. The employee disciplinary process in accordance with the *Public Sector Act 2022*
- h. The complaint process under the *Anti-Discrimination Act 1991*.

Complaints containing alleged breaches of the *Human Rights Act 2019* are to be managed under this policy, however one of the alternate processes above may be applied concurrently.

Refer to the Complaint Management Framework for other complaint procedures ([Appendix 6](#)) or seek further advice by contacting the [Principal Integrity Officer, Workforce Relations and Integrity, People and Culture](#).

## 7. Overview of Customer Complaint Management System

The CCMS is comprised of the Customer Complaint Management Policy and Procedure, employees involved in managing and responding to complaints and compliments and relevant record tracking and keeping systems used to receive, record, respond to and report on complaints and compliments, as defined by s264, *Public Sector Act 2022*.

For the effective functioning of the CCMS all employees are required to be familiar with the Customer Complaints Management Procedure (CCMP). The CCMP provides an overview of the steps involved in a customer complaint and is supported by associated guides that detail the required actions of each step ([Appendices 1-5](#)).

This procedure includes an overview of the broader Department of Environment, Science and Innovation (DESI) Complaint Management Framework that describes categories of complaints that members of the public may lodge with the department. It is important to note that some categories of complaints are covered by other complaints procedures or processes.

### 7.1 DESI Complaint Management Framework

The DESI Complaint Management Framework is designed to ensure each type of complaint is addressed within the appropriate complaint-handling process. Complaints fall into a number of categories: Customer Complaints, Privacy Breaches, Employee Misconduct, Corrupt Conduct/Public Interest Disclosures, Employee Complaints and Other.

The policies and procedures for breaches of Privacy, Employee Conduct, statutory processes, Corrupt Conduct and Public Interest Disclosure are out of scope of this procedure. Please refer to the table in the Customer Complaints Management Policy and Procedure, [Appendix 6](#) for guidance on which complaint handling process may apply.

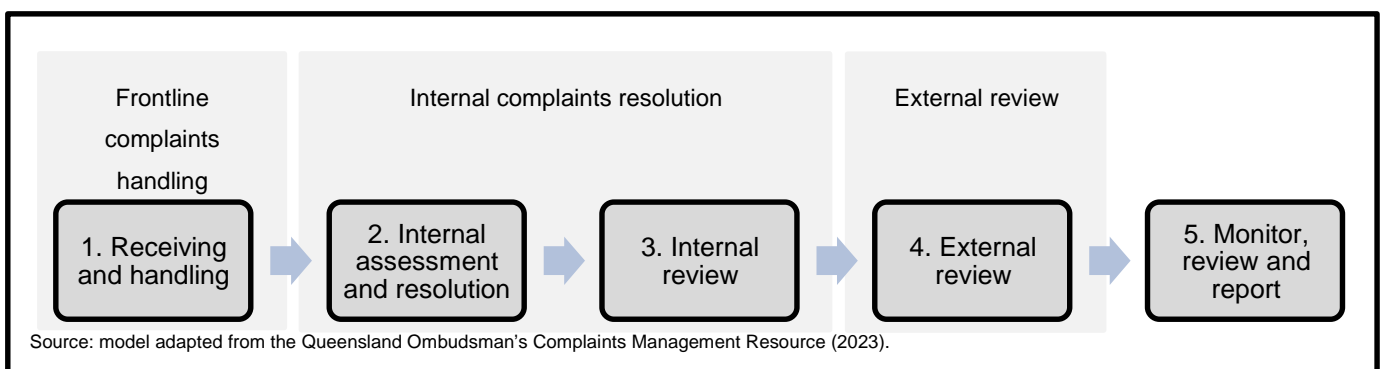
## 7.2 Key Participants

The following is a list of key participants involved in the CCMS procedure:

Key participant	Description
<b>Complainant</b>	A person, organisation or their representative providing feedback to the department regarding dissatisfaction with departmental products or services
<b>Divisional Complaint Coordinator (DCC)</b>	A single point of contact in each division where any complaints received directly by the business areas are assessed and either lodged into MECS and allocated to the business unit or assigned to another complaint process if required
<b>Workforce Relations and Integrity (WRI)</b>	Assesses and lodges incoming customer complaints from the DESI online complaint form, DESI Complaints email address, Smart Service Queensland (SSQ), the Queensland Ombudsman, Minister and Director-General. If the complaint belongs to another complaint process, it will be referred to that area for action
<b>Complaint Manager</b>	An impartial departmental officer who has the authority to investigate a complaint and recommend solutions/responses
<b>Complaint Decision Maker</b>	A senior officer who authorises/decides upon a response prepared by the Complaint Manager
<b>Internal Reviewer</b>	An impartial senior officer of equal or higher level than the original Complaint Decision Maker who undertakes a review of the complaints process and outcome
<b>Ministerial and Executive Correspondence System (MECS) Support Team</b>	The MECS Support Team manages the system which records Ministerial and departmental correspondence (incoming and outgoing). This team addresses technical issues, employee access and reports related to MECS
<b>Executive Correspondence Unit (ECU)</b>	The ECU receives and allocates correspondence in MECS which is addressed to the Minister and the Director-General. If the correspondence appears to relate to a customer complaint for the department, ECU will inform WRI for assessment against this policy
<b>Complaints Management System Manager</b>	The Chief Human Resources Officer, reports to DESI Executive Leadership Team on operation, performance, significant trends and resources required

## 8. Customer Complaint Process Steps

There are five steps in the Customer Complaint Management process:



Steps 1, 2, 3 and 5 are followed when dealing with complaints and compliments covered by this procedure.

Step 4 is followed as required or when requested.

### **8.1 Step 1 - Receiving and Handling**

This step in the procedure involves the following key participants:

- **DCC**
- **WRI**

#### **Range of entry points for customer complaints**

This step of the CCMS procedure involves receiving complaint submissions from the public. Complaints may come into the department through a range of channels. For example, in person at a DESI location, by telephone, letter, from SSQ via the DESI online complaint form or email address, direct referral from the Queensland Ombudsman's Office to the CCMS, or via the ECU.

#### **Customer complaint lodged directly with business unit**

Employees who receive complaints at a point of service should attempt to resolve the matter if it is a simple, informal type of complaint. If the matter cannot be resolved at the point of service, it should be sent to the relevant DCC who will assess the complaint and lodge it into MECS if it meets the definition of a customer complaint or refer the matter to another complaint process if this is more appropriate.

#### **Customer complaints lodged via Workforce Relations and Integrity (WRI)**

If a complaint arrives at the department via the DESI online complaint form or email address, SSQ, or through the ECU, the WRI team will assess the submission to identify if it is a customer complaint, send a receipt confirmation to the complainant, lodge into MECS as appropriate, and allocate to the relevant DCC. If the complaint relates to another complaint process, WRI will refer it to the business area that manages that process.

#### **Customer complaints received by the Director-General's or Minister's Office**

If correspondence received through these areas are identified by the ECU as customer complaints for the department, they are to be sent to WRI for lodging into MECS, who then allocate to the relevant DCC for further action. If the ECU assess the matter as appropriate for a Deputy Director-General letter of response, they may alert WRI for their advice on management of the matter.

#### **Identifying the complaint category**

In the first instance, the DCC or WRI will assess what complaint process is the most appropriate to address the matters raised.

If, after assessing the complaint, it clearly meets the definition of a customer complaint and alternative complaint processes have been ruled out, the matter is lodged in MECS by the relevant DCC or WRI for action according to the customer complaints process.

If the complaint category potentially relates to a statutory or regulatory process, the matter will instead be referred to the relevant business area for a determination. Due to DESI's wide range of statutory/regulatory processes, the decision to manage a complaint within those processes is more readily made by the responsible business area for that process.

If the business area deems that the matter is not covered by an alternative complaints process, the business area will return the complaint to the DCC or WRI to lodge the complaint into MECS as a customer complaint.

Upon receipt of the customer complaint, the DCC allocates it to a designated Complaint Manager who initiates Step 2.

Refer to [Appendix 1](#) for a more detailed description of Step 1.

## 8.2 Step 2 - Internal Assessment and Resolution

Step 2 involves the following key participants:

- **Divisional Complaint Coordinator**
- **Complaint Manager**
- **Complaint Decision Maker**

During this step the Complaint Manager assesses the complexity, severity, safety implications, urgency and if an investigation is required. The expected timeframes for resolving a complaint are determined by this assessment. Refer to the table below for details of timeframes.

Classification	Description	Complaint Decision Maker level	Timeframe
<b>Informal complaint – simple</b>	Resolved quickly, such as by Ranger/Field Officer or Customer Service Officer e.g. clear up a misunderstanding; error in a record, lack of information. Minimal risk	Local (any officer approached by a complainant, or with the required knowledge to respond)	Can be resolved at point of service within five (5) business days
<b>Formal complaint – standard</b>	Involves a single, low risk issue that can be resolved within 20 business days	Middle (e.g. Director/District Manager)	Resolved <b>within 20</b> business days of receipt
<b>Formal complaint – complex</b>	May involve a higher level of risk, and more than one issue or business area. Requires more time to investigate or coordinate responses from other areas	Middle (e.g. Director/District Manager)	Requires <b>more</b> than 20 business days to finalise (default is 30 business days, but can be extended)
<b>Internal review</b>	A review of the proper process undertaken to resolve the complaint and that the correct decision resulted from the process	Senior (e.g. Director/Executive Director/Deputy Director-General/Assistant Director-General)	Received within 20 business days of finalisation. Resolved within 20 business days
<b>Human Rights Referral</b>	A review of human rights complaints which have not been dealt with adequately/at all by DESI	Human Rights Commissioner	Made at least 45 business days after the complaint to DESI; Resolution determined by commissioner

<b>External Review</b>	Independent review of finalised complaint	Ombudsman	Determined by Ombudsman
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At the completion of the process undertaken, the Complaint Manager prepares a response for the Complaint Decision Maker. The response is to include review options, and the timeframes involved in these processes. The Complaint Decision Maker makes a decision based upon the draft response/outcome letter prepared by the Complaint Manager.

In the event that a decision is made not to look into or investigate a complaint refer to [Appendix 2](#) for the steps in this process. For details on the Step 2 actions required refer to [Appendix 2](#).

### 8.3 Step 3 - Internal Review

If the complainant is dissatisfied with the department's response they have the option to request a review. The complainant has **20 business days**, from receipt or the date of the department's advice, to lodge a request for an internal review by the department. If there is a human rights aspect, the complainant may alternatively lodge a complaint with the Human Rights commissioner (see **Step 4 – External Review**). The complainant will need to be informed that they have these options in the department's initial response. As per the table in Step 2 above, the Internal Review Decision Maker should be at least Director level.

An internal review is a systematic way of reviewing the original process and outcome. The aim of an internal review is to ensure the complaints process complied with the department's policy and procedural requirements. An internal review is not an investigation or re-investigation of a complaint. It is a review of the complaints process and outcome.

For details on the step-by-step actions required, refer to [Appendix 3](#).

### 8.4 Step 4 - External Review

This step in the procedure involves the following key participants:

- **The Human Rights Commissioner**

The Human Rights commissioner may receive complaints directly from members of the public, if:

- a) the department has already received the complaint; and
- b) at least 45 business days have elapsed since the complaint was made; and
- c) the complainant has either received no response or a response they consider to be inadequate.

In exceptional circumstances the commissioner may accept a complaint made before the period mentioned in point b) above.

Complaints referred to the commissioner must be in writing, and include the complainant's name, address, and enough details to indicate the alleged contravention to which the complaint relates.

- **The Queensland Ombudsman**

The Queensland Ombudsman provides a further point of escalation for complainants that remain dissatisfied.

In order to request an external review by the Queensland Ombudsman's office the complainant must have already exhausted the department's complaint system processes. If this has not occurred, the Ombudsman's office generally refers the matter back to the department for action within the Customer Complaints System.

The Ombudsman's office will make a decision whether or not to proceed with an external review of the department's complaints management process and outcome. If the Ombudsman decides to undertake an external review the investigation will be facilitated by staff of the Ombudsman's office.

The Queensland Ombudsman can be contacted through the methods listed below:

**Telephone:** 07 3005 7000

**Email:** [Ombudsman@ombudsman.qld.gov.au](mailto:Ombudsman@ombudsman.qld.gov.au)

**Post:** Level 18, 53 Albert Street, Brisbane QLD 4000 GPO Box 3314

### **8.5 Step 5 - Monitor, Review and Report**

This step in the procedure involves the following key participants:

- **Workforce Relations and Integrity**
- **Senior Management**
- **Complaint Management Manager**

The **Complaints Management System Manager** requests WRI to provide customer complaint numbers each quarter. These reports will be assessed for trends and provided to senior managers of divisions and regions.

For details on the step by step actions required refer to [Appendix 5](#).

## **9. Responsibilities**

### **Director-General**

- Ensure the establishment and maintenance of a departmental complaints management system that complies with s264 *Public Sector Act 2022*

### **Deputy Directors-General/Assistant Director-General**

- Ensure that the complaint management policy and procedure is followed within each division and region
- Ensure that when a complaint is received it is assessed to determine if it can be dealt with within an alternative complaints process or a statutory process
- Ensure the timely and effective resolution of complaints in accordance with the complaints management policy
- Designate an internal reviewer or conduct an internal review of a complaint as considered appropriate
- Ensure that appropriate action, including preventative action where warranted, is taken to address sources of complaints, adverse issues and trends identified and foster continuous improvement
- Monitor, analyse and review complaints data to identify trends, impacts and timeliness of responses. Report any identified trends or relevant information to the Manager, Workforce Relations and Integrity, People and Culture, Corporate Services.

### **Executive Directors, Directors (as appropriate)**

- Allocate sufficient resources to ensure the complaints management process is effectively administered, including the assignment of specific roles and responsibilities to staff as appropriate
- Ensure that staff with roles in handling complaints are provided with appropriate information, training and include expectations/performance indicators in their Professional Development Plan
- Refer allegations of misconduct, immediately to the Manager, Workforce Relations and Integrity, People and Culture, Corporate Services, for assessment (if not already identified and referred)
- Ensure that their business area records all the necessary information related to all customer complaints (refer to [Appendix 5 - Complaint Reporting Monitoring and Reviewing Guide](#)).

- Designate an appropriate complaint manager and complaint decision maker that have not had prior involvement in the complaint matter
- Monitor the progress of resolution and responses to complaints
- Ensure that the approved resolution actions are implemented
- Monitor, analyse and review complaints data to identify trends, impacts and timeliness of responses. Report any identified trends or relevant information to the Manager, Workforce Relations and Integrity, People and Culture, Corporate Services
- Ensure that appropriate action, including preventative action where warranted, is taken to address sources of complaints, adverse issues and trends identified and foster continuous improvement.

#### **Complaint Management System Manager: Chief Human Resources Officer, Corporate Services**

- Establishing a process of performance monitoring, evaluation and reporting.
- Reporting to senior management on significant complaints and systemic issues or trends identified with recommendations for improvement where appropriate.
- Identifying and allocating resources needed for effective oversight of an efficient complaint management system.
- Implementing and maintaining the complaint management system, including
  - I. provision of adequately documented complaint management guidance for all staff
  - II. setting and meeting key performance indicators for the effective and efficient functioning of the CCMS
  - III. other requirements including system reviews
  - IV. implementing internal and external escalation procedures for unresolved complaints/disputes.

#### **Divisional Complaint Coordinator**

- Act as a central referral and coordination point regarding requirements of the Customer Complaints management policy
- Log, action, refer, and record outcomes on customer complaints to ensure they are appropriately managed
- Act as liaison between division and Workforce Relations and Integrity, People and Culture.

#### **Complaint Manager**

- An impartial departmental officer who has the authority and knowledge to investigate a complaint and recommend solutions/responses
- Undertakes the necessary actions to investigate the complaint
- Responds directly to informal complaints
- Identifies facts, gathers relevant information, considers relevant procedures/legislation that applies and prepares a report with findings and recommendations for the Complaint Decision Maker.

#### **Complaint Decision Maker**

- A senior officer above the Complaint Manager who authorises/ decides upon a response prepared by the Complaint Manager.

#### **Internal Complaint Reviewer**

- An impartial senior officer of equal or higher level than the original Complaint Decision Maker who undertakes a review of the complaints process and outcome.

#### **Manager, Workforce Relations and Integrity, People and Culture, Corporate Services**

- If a customer complaint involves allegations about employee conduct, the complaint is assessed in accordance with the relevant policy and procedure



- Provides advice on alleged breaches of the *Human Rights Act 2019*
- Acts as the liaison between the Queensland Ombudsman's office and departmental staff in relation to complaints referred to the department by the Ombudsman

**Principal Integrity Officer, Workforce Relations and Integrity, People and Culture, Corporate Services**

- Monitors trends and emerging issues and provides reports to Customer Complaints Management System Manager
- Provides policy and procedure advice to DCCs, Complaint Managers, Decision Makers and Internal Reviewers.

**All Employees**

- Assist the public with resolving issues before they become a complaint
- Need to have sufficient knowledge and understanding of the department's Complaint Management System to be able to assist complainants in lodging a complaint where a resolution is not attainable
- Should have awareness of the principles of the *Public Interest Disclosure Act 2010* and the *Human Rights Act 2019* to identify complaints within these categories
- Managers are required to ensure that all staff who deal with complaints have received the necessary training prior to dealing with a complaint.

**10. Definitions and glossary of terms – refer to [Appendix 8](#).**

**11. Related Documents**

- Queensland Public Service Customer Complaint Management Framework
- Queensland Public Service Customer Complaint Management Guideline
- Corporate Governance Framework
- Information Privacy Compliance Policy and Information Privacy Complaint Management Procedure
- Conflict of Interest and Engaging in Other Employment Procedure
- Fraud and Corruption Prevention Policy and Procedure
- Employee Complaints Management Policy and Procedure
- Code of Conduct for the Queensland Public Service
- Appropriate Behaviour Guidelines
- Investigation and Discipline Procedure
- Corrupt Conduct Management Policy and Procedure
- Public Interest Disclosure Policy and Procedure
- Ombudsman's Inquiries and Complaints Procedure
- Unreasonable Complainant Conduct Management Policy and Procedure

**12. Further information**

For further information please contact the Principal Integrity Officer, Workforce Relations and Integrity, People and Culture, Corporate Services – [Complaints@des.qld.gov.au](mailto:Complaints@des.qld.gov.au)

**13. Storage of Information**

All information should be managed in accordance with the department's [Recordkeeping Policy](#). This policy and procedure has been created to support the department's commitment to its responsibilities under the [Public Records Act 2002](#). This should be read in conjunction with other related policies and procedures, including the [Recordkeeping](#)

[Email Policy](#), [Retention and Disposal Policy](#), and [Digitisation Disposal Policy](#). In addition, personal information should be managed in accordance with the [Information Privacy Act 2009](#), in particular the [Information Privacy Principles](#) (IPPs) in that Act. For more information refer to the following sites: [Records governance | Information Technology Partners \(ITP\) \(resnet.qg\)](#) and [About information privacy : DES intranet \(resnet.qg\)](#).

## 14. Review

This policy shall be reviewed within two years of the date of the policy.

## 15. Approval

<p>Signed:</p> <p><b>Vivienne Van Der Laak</b>          Chief Human Resources Officer, People and Culture          Department of Environment, Science and Innovation</p> <p>Date: 28/05/2024</p>
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## 16. Version history

Date	Version	Action	Description / comments
15/01/20219	1.00	Approved by the Acting Director General	New policy document
20/08/2019	1.01	Approved by Chief Human Resources Officer	Consolidation of Policy, Procedure and Guides into single document; minor updates to reflect transition of function to People and Culture
23/01/2020	1.02	Approved by Chief Human Resources Officer	Minor updates to incorporate application of <i>Human Rights Act 2019</i>
01/03/2023	1.03	Approved by the Chief Human Resources Officer, People and Culture, Corporate Services	Minor updates to incorporate application of the <i>Public Sector Act 2022</i> and AS 10002:2022; adjustment of Unreasonable Complainant Conduct to align with Ombudsman guidelines
19/12/2023	1.04	Approved by the A/Chief Human Resources Officer, People and Culture, Corporate Services	2 year review. Update to incorporate changes resulting from the new <i>Public Sector Act 2022</i> , Queensland Public Service Customer Complaint Management Framework and Guideline; acknowledgement timeframes adjusted; accessibility and vulnerability advice updated; references to new UCC policy added
24/01/2023	1.05	Approved by the Chief Human Resources Officer, People and Culture, Corporate Services	Minor updates to incorporate name change to Department of Environment, Science and Innovation (DESI)
28/05/2024	1.06	Approved by the Chief Human Resources Officer, People and Culture, Corporate Services	Minor updates to incorporate changes to unreasonable complainant conduct management strategies, including consultation requirements and review timeframe. Minor updates to ensure consistency of the Internal Reviewer level and communication of the full name of the decision maker.

## 17. Keywords

CHC/2019/4684; customer; commissioner; complaint; complaints management system; dissatisfaction; internal; external; review; Ombudsman; statutory processes; privacy; RTI; service

## Appendix 1 – STEP 1: Complaint Receiving and Handling Guide

### Introduction

The department's website provides complainants with a range of methods to lodge a complaint, either via email, phone, web form, or letter. Complainants may also contact Smart Service Queensland (SSQ), which is the government's central call centre, either via their web form, email, or the 13 QGOV telephone number. Those with hearing or speech impediments requiring the National Relay Service, and those who need an interpreter, can lodge complaints via QGOV using details at <https://www.qld.gov.au/contact-us>. Other methods include, at a local regional office, via the Queensland Ombudsman's (QO) Office or the Human Rights Commissioner. Complaints or compliments received through SSQ will be sent to Workforce Relations and Integrity (WRI) for lodging into Ministerial and Executive Correspondence System (MECS), the Customer Complaints Management System (CCMS) record keeping system.

Participants involved in this part of the customer complaints procedure:

- WRI – assesses, inputs into MECS and allocates complaints to business area for action
- Regional Office or point of service – refers possible complaints to DCC
- Executive Correspondence Unit (ECU) refers complaints to WRI for assessment
- Divisional Complaint Coordinator (DCC) – assesses, inputs into MECS and allocates complaints to business area for action
- SSQ – refers complaints to WRI
- QO – refers customer complaints to WRI.

### Initial Receipt of Complaint/Compliment

Any complaints/compliments lodged via the DESI online complaint form, via SSQ, ECU or through the QO Office, WRI receives, assesses, lodges into MECS and refers to the business area.

The QO can receive complaints regarding departments' administrative actions/decisions directly from members of the public. The QO will assess the complaint and if the person has not exhausted the department's customer complaints process, may refer the complaint directly to the agency for resolution within the CCMS.

Complaints received by employees at the local, regional office level or via the ECU are to be referred directly to the relevant DCC for assessment, lodged into MECS and referred to the business area.

#### Initial assessment by WRI/DCC

- An initial assessment of each submission is undertaken to verify if the matter falls within the CCMS guidelines and the department's jurisdiction, see **complaints outside the jurisdiction of the department**. This step also assesses if the complaint has a human rights aspect.
- Based on information provided, determine the appropriate business area to deal with the complaint, see **complaints for more than one business unit**.

#### Referral to other complaint processes outside CCMS

- Refer allegations of inappropriate behaviour by an employee (misconduct) immediately to the Manager, WRI, People and Culture, Corporate Services, for assessment.
- Refer allegations of corrupt conduct or Public Interest Disclosures to the Principal Integrity Officer, WRI, People and Culture, Corporate Services (CS).
- Refer allegations of a privacy breach to the Privacy Officer, Governance and Strategy, Corporate Governance and Operations, CS.

- Refer matters that clearly fall within an alternative complaints process, or involve a statutory process that has review rights, to the relevant business area for appropriate action.
- If the business area determines that the matter does not have review rights under a particular process it will be referred back to WRI/DCC for further assessment.

#### Lodgement into MECS

- Lodge Informal Complaints into MECS within 3 business days for allocation/finalisation by DCC.
- Lodge Compliments into MECs within 3 business days of receipt and send to relevant business area for noting.
- Send a receipt confirmation email for the complaint, compliment or internal review to the customer within 3 business days of receipt, providing a MECS CTS reference number.

#### Referral to business area

- If received and identified as a customer complaint by:
  - WRI, it is lodged into MECS and it is then allocated within one business day to the relevant DCC for allocation to a business area.
  - any employee within a business area, it is to be forwarded directly to their DCC for lodgement in MECS and allocation to business area for action.

#### Follow up by WRI/DCC

- Reallocate a complaint, compliment or internal review when requested by a business area.
- Extend a complaint due date when requested by a business area.
- Receive internal review requests.
- Monitor complaints in MECS for adherence to record keeping requirements and quality of responses.
- Provide assistance to complainants and departmental staff on CCMS process.
- Ensure all finalised complaints have complaint category, outcome and remedy statistics recorded in MECS.

### **Handling**

When complaints/internal reviews are lodged into MECS by WRI/DCC, the customer must be advised of the following within 3 business days of complaint receipt:

- receipt confirmation of their submission by the department
- the MECS CTS reference number; and
- to expect an acknowledgement email or letter from the relevant business area's Complaint Manager within 3 business days.

For **compliments** WRI/DCC will send a receipt confirmation email to the customer advising:

- the receipt and lodgement of compliment
- the MECS CTS reference number; and
- that any further response will be at the discretion of the business area.

WRI is required to be informed of any request for an internal review of a customer complaint to enable monitoring of the process and to provide assistance, if required.

DCC will allocate complaints, compliments and internal reviews to the appropriate business area and provide assistance, as required. If the matter is complex, the DCC will seek assistance from WRI.

## **Complaint received indicating personal details are not to be used**

Where a complaint is received and the complainant has indicated that the personal details provided are NOT to be used the process will be changed as follows:

- the complainant's personal details will not be lodged into MECS, instead People and Culture, CS will be entered as the contact/client
- WRI will advise the customer that People and Culture, CS will act as an intermediary during the complaint resolution process
- the Complaint Manager will not be required to send an acknowledgement email
- upon completion the complaint response will be allocated to WRI in MECS and WRI will forward the complaint response to the complainant.

## **Complaint received alleging a breach of the *Human Rights Act 2019***

The *Human Rights Act 2019* (HRA) commenced on 1 January 2020. Complainants can use the CCMS to raise allegations of a contravention of section 58(1) - that a DESI employee has unreasonably limited a human right, or an action/decision made by the department is not compatible with human rights. The complainant does not need to explicitly refer to the HRA or use the term "human rights". It is the responsibility of the complaint receiver to determine whether the alleged action/decision is incompatible with human rights.

The HRA Part 2, Divisions 2 and 3 define the human rights protected under this legislation. Rights which may be the subject of complaints to DESI may include (but are not limited to):

- Recognition and equality before the law (s.15), e.g. a complainant believes they were targeted for regulatory action due to their gender or ethnicity
- Peaceful assembly and freedom of association (s.22), e.g. a complainant objects to being told to leave DESI grounds when participating in a protest gathering
- Cultural rights – Aboriginal peoples and Torres Strait Islander peoples (s.28), e.g. a complainant states they were unfairly refused permission with other members of their Aboriginal community to perform a traditional ceremony on DESI property.

Where a complaint is received and the complainant alleges a breach of the HRA, the following steps are added to the standard process:

- Complaint receiver assesses the complaint against the definitions under Part 2, Divisions 2 and 3 of the HRA. Advice can be sought from the Manager, WRI, if required.
- The MECS Action Type "Complaint for Action - Complex" is selected.
- Comments are to refer to the relevant right from the HRA for the information of the Complaint Manager.
- The MECS General Details tab is to show the Complaint Category "Complaint about a breach of Human Rights".

## **Extending Complaint Due Dates**

A complaint due date is automatically generated by MECS when the item is created based upon the Action Type.

Where a complaint is complex, or a delay occurs, an extension of the due date will be required. An extension can be requested by contacting WRI/DCC to advise of the need for an extension. The Complaint Manager will need to advise the Complainant of any delay, as soon as possible.

## Complaints outside the jurisdiction of the department

In the event that a complaint is outside the department's jurisdiction, WRI/DCC will:

- If received from SSQ, immediately return the complaint to SSQ for reallocation
- If received via some other means, advise the complainant of the correct public sector entity and seek consent to refer the complaint to the appropriate agency.

N.B. Consent to re-direct a complaint must be sought from the complainant, prior to any action being taken. This is because the customer has a right to maintain privacy of their information. The DESI online complaint form requests this consent, and if granted by the complainant, the form may be forwarded to the appropriate agency.

In some instances, a complaint may involve more than one public sector entity, and/or more than one level of government. After informing the complainant of the requirement to involve other public sector entities (and obtaining the customer's consent) WRI/DCC will forward the complaint to all responsible entities/levels of government, as appropriate. The entities involved will be required to nominate a central point of contact to coordinate and compile the responses. Generally, the central coordination point may be the agency that has a bigger involvement in resolving the complaint.

## Third party service provider complaints and compliments

### Department receives the complaint/compliment

Where a complaint or compliment is received by the department regarding one of its third-party service providers, these are to be recorded as if they were made against the department.

### Third party service provider receives the complaint/compliment

Where the complaint is lodged directly with the service provider it should be clearly defined within the relevant service agreement that such complaints be directed to the department for management under the CCMS.

### Investigation and monitoring of the complaint

While a complaint against a third-party service provider will need to be investigated by the provider, the overall monitoring and response to the complainant should be managed by the relevant business area that has the arrangement with the provider.

The business unit will liaise directly with the third party to examine options to promptly resolve the complaint, consistent with established contractual arrangements, service standards and applicable legislative provisions.

The progress of the complaint, its resolution and response must be monitored within the responsible business area to avoid unnecessary delays and ensure that service standards are met. MECS has the ability to set due dates and monitor progress.

**Compliments** will be recorded in MECS and forwarded to the third-party service provider as feedback.

## Complaints for more than one business unit

Some complaints received by WRI/DCC may involve more than one business area. In this case the Complaint Receiver will raise one MECS item and appoint a divisional lead to manage the complaint and request SO level endorsed input from relevant business areas.

## Assistance to Complainants

All employees should, wherever possible, attempt to resolve issues raised by customers at the first point of contact. If the issue is not within the authority of the business area or even the department, employees should direct customers to the appropriate business area, or if necessary other public sector entities for resolution. Employees may also contact WRI/DCC to seek advice or assistance.

N.B. any complaint that needs to be re-directed to another agency and where referral to a third party has not already been obtained, must, due to the complainants' right to information privacy, consult with the complainant before any further action is taken.

**Note: Customers who are disadvantaged, have a disability, education, language difficulties or require additional assistance lodging a complaint should be directed to call 13 74 68. Additional options (e.g. National Relay Service, interpreters) can be found at <https://www.qld.gov.au/contact-us>.**

## Internal Review Requests

For Internal Review requests received, WRI/DCC will:

- lodge as a new item into MECS within one (1) business day, using the MECS Action Type: Internal Review
- link to the original complaint item using the "Related" MECS items tab
- allocate to the appropriate division's Office of the Deputy Director-General (DDG) DCC, within one (1) business day
- send a receipt confirmation email to the complainant advising:
  - their internal review request has been received
  - the MECS CTS reference number for their internal review request
  - an Internal Reviewer will be in contact within three (3) business days.

## Divisional Complaint Coordinator

The DCC's responsibilities are to:

- assess and lodge complaints sent to their division's business areas directly by the complainant and in consultation with the proposed Complaint Manager, prepare and send the complaint acknowledgment to the customer using the customer complaint acknowledgment letter template.
- receive allocated complaints, compliments and internal review submissions from WRI for allocation to appropriate Complaint Manager or Internal Reviewer within one (1) business day
- coordinate the complaint/compliment within the business area
- send incorrectly allocated complaints, compliments or internal reviews back to WRI if complaint was lodged by that team, for reallocation
- reallocate complaints that DCC lodged into MECS
- ensure Complaint Category, Outcome and Remedy statistics are recorded in MECS before finalising
- finalise MECS item when complaint is resolved
- allocate internal reviews to the relevant officer who will either conduct an internal review or designate an Internal Reviewer as considered appropriate.



## Office, counter or point of service complaints

### Early, informal resolution of complaints preferred

Informal and early resolution should be used wherever possible to resolve a complaint, preferably at the point of first contact and/or within 24 hours of the complaint. Some examples of complaints suitable for early resolution might be:

- lack of advice
- a misunderstanding
- a response to correspondence or a telephone call
- errors in records

Employees are empowered to resolve these issues wherever possible. The most effective way to resolve a simple issue or concern is to discuss it with the complainant.

Any office, counter or point of service may be required to assist a customer with a complaint or compliment. It is therefore necessary that all employees are aware of the Customer Complaints Management Policy and Procedure.

The responsibilities of an officer, counter/point of service (all staff) are to:

- attempt to resolve matters raised by customers in the first instance
- employees should inform customers of the process for lodging and managing complaints
- provide reasonable assistance to enable customers to lodge complaints
- maintain appropriate privacy and confidentiality of complaint information
- keep a record of informal complaints at the business unit level
- direct people with language difficulties or disabilities to 13 QGOV's phone, relay or interpreter services
- respond to complaints in a courteous and timely manner.

**Note:** Also see Informal Complaint in [Appendix 3](#).

## Appendix 2 – STEP 2: Internal Complaint Assessment and Resolution Guide

### Introduction

Participants involved in this part of the procedure:

- **Complaint Manager, and**
- **Complaint Decision Maker**

### Complaint Manager

The Complaint Manager must be an impartial departmental officer who has the authority and knowledge to investigate the complaint and recommend solutions/responses/decisions to the Complaint Decision Maker. The responsibilities of the Complaint Manager are to:

- ensure impartiality by having had no prior involvement in the complaint matter
- provide an initial assessment of a complaint in terms of severity, safety implications, complexity and the need and potential for immediate action
- liaise with complainants as necessary to obtain further information and provide advice regarding the progress of complaints
- acknowledge complaints using a Complaint Acknowledgement template within three business days of receipt (if the matter cannot be resolved within this timeframe) OR within three business days of a receipt confirmation email to the complainant from WRI/DCC.
- investigate the complaint and outline possible remedies to the Complaint Decision Maker
- ensure a record of all actions and decisions in relation to the complaint are entered into MECS.

**Note: Privacy and confidentiality are to be observed throughout the complaints process and information disclosed only in accordance with the *Information Privacy Act 2009*.**

### Complaint Decision maker

The Complaint Decision Maker is a Senior Officer above the Complaint Coordinator who can authorise and/or approve the decision of the Complaint Manager. The responsibilities of the Complaint Decision Maker are to:

- ensure that complaints are managed and investigated in accordance with the Customer Complaints Management Policy and Procedure
- ensure impartiality by having had no prior involvement in the complaint matter
- ensure that natural justice is applied throughout the complaints management process, where required
- approve the resolution and response for each complaint
- decide what to do about unreasonable complainant conduct, refer to Unreasonable Complainant Conduct Management Policy and Procedure
- advise the complainant of the outcome of the complaint and provide an overview of issues, legislation, processes considered and reasons associated with the actions taken in relation to the complaint

### Assessment Principles

The diagram in [Section 7.2](#) shows the classification of complaints, descriptions, management level and associated timeframes.

The assessment needs to consider the relative complexity and/or contentiousness, severity, safety and the need for immediate action when identifying what resources are to be applied and what level of complaint that matter is.

For example, a standard or complex complaint will almost invariably necessitate the appointment of a Complaint Manager and Complaint Decision Maker.

Conversely, while it is preferable that a Complaint Manager and a Decision Maker be appointed to deal with a standard or complex complaint, the Complaint Manager can exercise greater discretion as to whether that is justified given the circumstances applying to a simpler case.

**Note: Complaints are always to be dealt with impartially and objectively.**

## Informal Complaint

An Informal Complaint is described as either:

1. An issue submitted by a customer at an office, counter or point of service that:
  - cannot be resolved by counter staff without escalation to a Manager, but
  - can be resolved within 5 business days
  - does not need an investigation
  - is deemed by the Manager to be indicative of a possible trend or a problem that requires monitoring; or
2. A complaint received by the Complaint Manager via the normal complaint channels that:
  - is deemed simple in nature and likely to be resolved without investigation. Refer **Standard or Complex Complaints**.
  - can be resolved within 5 business days.

Where the issue cannot be resolved as an informal complaint, the customer needs to be advised on how to submit a formal complaint.

## Lodging an Informal Complaint

Informal Complaints not received and lodged by the Complaint Receiver, can be lodged by the Business Manager at a point of service using the online web form at: <http://www.des.qld.gov.au/contactus/feedback-forms/feedback-form-complaint>.

A Simple or Informal Complaint is to be lodged in MECS and serves to provide feedback regarding trends in public attitudes or identify systemic issues with products and services.

Customer details are preferable, but are not mandatory if they have not been provided. Details of the issue including the resolution should be entered into the complaint description field. In the “What do you believe should happen to resolve your complaint” field, the following will be entered:

### Informal Complaint – for lodgement in MECS by Complaint Receiver

In the contact details the responsible Manager should enter their contact details. Web forms are automatically directed to Workforce Relations and Integrity for assessment and action. If assessed as a customer complaint:

- it will be lodged in MECS
- it is allocated to the appropriate divisional Office of the DDG for finalisation
- WRI/DCC must select the “Informal Complaint” field from the MECS General Details tab - DESI Complaint Category metadata.

If the matter is deemed to possibly fall within an alternative complaint process, it will be referred via email to the relevant business area for action or noting.

## **Standard or Complex Complaints**

For standard or complex complaints, a Complaint Manager and a Decision Maker who have had no prior involvement in the decisions or actions that are the subject of the complaint should be appointed. This principle can be applied less rigidly in cases as that are deemed to have lower risk or involve a simple or straightforward issue.

### Standard complaint

- May relate to one or more issues
- Involves a low degree of risk to the complainant/department or a third party service provider
- May require a more detailed investigation than an informal complaint

### Complex complaint

- May involve a serious/complex issue
- May pose significant risk to the complainant/department/third party service provider
- May be a trending topic in the Media
- Will involve a more formal investigation

In order to record a general category for a complaint in MECS, WRI/DCC or Complaint Manager must select the appropriate field from the MECS General Details tab - DESI Complaint Category metadata:

Choose from:

- Complaint about an action
- Complaint about a breach of Human Rights
- Complaint about departmental decisions
- Complaint about departmental policies
- Complaint about products or services
- Complaint about service delivery
- Informal Complaint \*
- Internal Review \*
- Not a complaint \*

The last three options should be used to record exceptions to formal customer complaints as required.

### Anonymous complaints

Where a complaint is received with no contact information but is related to a substantial issue, misconduct or apparent failure in service provision by the department, the complaint will be lodged and investigated regardless.

Complaints will be resolved within the timeframes applying to the complexity categories.

See also **Extending Due Dates** and **Deciding not to investigate a Complaint**

### Compliments

For a compliment no response is required. It is at the discretion of the business unit whether any further acknowledgement or contact with the customer is made.

## Resolution Process

The Complaint Manager must undertake a preliminary assessment of the matter within three business days of receipt of the complaint. The exception is a **Compliment** which does not necessarily require an investigation or further response to the customer.

**Note: It is expected that any compliment will be passed on to the appropriate unit/person.**

If the Complaint Manager determines that the matter is of a simple nature, the option is available to contact the complainant within the 5 day timeframe to explore options for an informal resolution by, for example, providing information to the complainant or explaining the relevant legislation.

If this informal resolution is successful, the Complaint Manager must still record all appropriate comments in MECS and return the item to their DCC to finalise the complaint. See **Informal Complaint** above.

If the assessment indicates the complaint should not be dealt with (see **Deciding not to investigate** or **Refusing to investigate** below), the matter must be referred immediately to the Complaint Decision Maker for determination.

Conversely, where it has been determined that the complaint is to be dealt with, the DCC or Complaint Manager must contact the complainant to acknowledge the complaint within three business days. Complainants should be contacted by their preferred method of contact if indicated, i.e. via telephone, email or letter.

**Note: All contact should be recorded in MECS.**

### All formal complaints must be investigated and remedy options explored

The resulting investigation report and process will involve, but not be limited to:

- contacting the complainant to clarify details or seek further information (as appropriate)
- identifying actions already taken
- gathering and analysing information from file notes, or other sources
- if appropriate, interviewing complainants/employees or others involved
- checking if previous complaints about the same issue have been lodged by the complainant
- identifying relevant legislation, departmental policy and other sources of information where required
- recording all relevant information obtained during the process
- where the circumstances require, ensuring that natural justice is applied throughout the process
- ensuring any findings and recommendations are defensible
- advising the complainant of the outcome in writing
- providing adequate reasons for the decision
- providing options for internal/external review of decision

Whenever a response cannot be provided within the timeframe, the complainant is to be updated on the status of the complaint and advised of the anticipated timeframe for a response.

**Note: All updates or advices to complainants must be recorded in MECS.**

## Remedies

A complaint, upon either initial or further investigation will be found either substantiated or unsubstantiated.

Unsubstantiated complaints may result from a lack of sufficient merit or substance based on the initial assessment or after an investigation has been completed.

Substantiated complaints require an appropriate remedy and determined by taking into consideration:

- the available options including any remedies
- the outcome sought by the complainant
- the degree of detriment to the complainant

Possible remedies could include (alone or in combination):

- acknowledgement of an error made
- apology
- change of decision
- change of policy, procedures, practice or product
- compensation or financial assistance
- an explanation of how and why the problem occurred and what steps the department is taking to prevent it from occurring again
- correction of incorrect records
- provision of information or technical assistance
- repair/rework
- provision of a substitute product or service
- any other remedy appropriate to the circumstances

All remedies must be approved by a person with the appropriate level of authority/delegation, see Complaint Decision Maker.

In order to record a general complaint remedy in MECS, the Complaint Manager or DCC must select the most appropriate complaint remedy from the MECS outcome metadata item field:

Further action options:

- Substantiated – Apology or explanation sent to Complainant
- Substantiated – Compensation or refund provided
- Substantiated – Information supplied
- Substantiated – Original decis mitigated/altered
- Substantiated – Other tech assist offered, repair
- Substantiated – Rectification eg decis rescinded

No further action:

- Unsubstantiated – Frivolous or vexatious (this requires a briefing note to seek the approval of the Division's Deputy Director-General)
- Unsubstantiated – Insufficient details
- Unsubstantiated – Investigation finds no fault
- Unsubstantiated – Referred to other agency for act

## **Complaint Outcomes**

If a complaint is substantiated the outcome may require further action by the unit/division/department.

Where a process, service, product or policy is in error, in need of a review as the result of a complaint, the DCC is required to record an outcome in MECS using the options below:

- DESI Complaint Outcome requires further action in any of the following:
  - policy to be changed/reviewed
  - process to be changed/reviewed
  - service delivery to be changed/reviewed
  - service to be changed/reviewed
  - other remedial action
- No further action required
- No further action required - Not related to Dept

## Response to the Complainant

The level of detail included in a response to the complainant is guided by the complexity of the complaint and the communication method preferred by the complainant.

In cases where a complainant has requested contact by telephone, a verbal response to the complainant will be provided and a file note made and lodged in the record keeping system.

All Complex complaints must include a written response to the complainant.

The response must provide appropriate details, and include:

- the issues that were identified from the complaint
- outcome of the complaint investigation
- the reason for any decisions made
- explanation of the process undertaken to investigate the complaint
- identify the action/s which could be taken by the department to resolve the complaint
- include the reasons for the proposed resolution action/s
- further options for review that are available
- the full name of the decision maker, as a contact for further enquiries or in the signature block.

If a decision maker appears likely to be targeted with unreasonable conduct following a complaint response, they can ask their manager to sign the letter on their behalf. However, complaint responses cannot be sent anonymously (see further strategies under **unreasonable complainant conduct**).

In situations where the Complaint Manager has refused to investigate a complaint, the complainant must be provided with the reasons for not investigating.

**Note: All communication whether it is verbal, via email or in writing must be recorded in MECS.**

## Recordkeeping

Complaints are to be recorded in MECS.

The Complaint Manager will keep accurate records documenting actions taken in response to a complaint. These records include:

- unique identifier
- complainant's name and contact details (if anonymous, please note this in the record)
- the decision/action (or lack of) complained about
- the complaint category (eg action/decision/human rights matter)
- outcomes sought
- key actions taken to manage the complaint
- the outcomes, reasons and advice provided to the complainant

- correspondence sent and received
- records of meetings, telephone conversations and interviews
- findings from an investigation
- recommendations and approvals

All complaint records must be able to show the decisions and actions that resulted in the outcome.

**Note: Complaint records will be made available upon request to officers appropriately authorised to conduct internal and external reviews (subject to any restrictions imposed by the *Information Privacy Act 2009* or confidentiality) including the Ombudsman.**

### **Unreasonable complainant conduct**

Unreasonable complainant conduct may include:

- Persistence – prolonged unreasonable contact, which significantly impacts employee time or other resources
- Demands – issuing unreasonable instructions, escalations or expectations of outcomes
- Lack of cooperation – providing insufficient or irrelevant details, or actively hindering the complaints process
- Arguments – irrational, false, inflammatory and defamatory complaints, not supported by evidence
- Behaviour – conduct which compromises the health, safety and security of employees or others.

In these circumstances, the Complaint Manager may need to consider the department's duty of care to its staff and the appropriate use of resources and decide on a case-by-case basis if it would be appropriate to limit the complainant's contact with the department. That decision can take a number of forms, including:

- restricting the times for and/or frequency of contact;
- designating a single officer with whom the complainant may have contact, such as a manager; and/or
- nominating the acceptable form of contact; for example, email communication to [Complaints@des.qld.gov.au](mailto:Complaints@des.qld.gov.au) only.

A decision to limit a complainant's contact with the department is to be communicated to the complainant in writing by the responsible senior executive and in consultation with Manager, WRI or Chief Human Resources Officer. Any limitations on complainant contact with the department will be subject to a six-monthly review process to evaluate the necessity of their continuance.

The above actions may also be appropriate when a person continues to contact the department after feedback has been provided about the complaint and all avenues of review have been exhausted.

Employees should liaise with Workforce Relations and Integrity for appropriate strategies whenever complainant conduct creates a risk to health or safety. Complainant conduct which involves violence or aggression should be managed in accordance with relevant policies and/or procedures, and reported to police when appropriate.

For further details, refer to the Unreasonable Complainant Conduct Management Policy and Procedure.

### **Deciding not to investigate a complaint**

There are circumstances in which it is appropriate not to investigate a complaint under this procedure. They include:

- the department is not the correct agency to address the concern (complainant must be referred, see **Complaints outside the jurisdiction of the department**)
- there is an existing right of appeal or review available (to which the complainant must be referred)
- the matter has already been adequately addressed, by an external agency, court or tribunal; or
- the matter has been previously investigated and all review options have been exhausted



- the complaint is received with no contact information and is an expression of general dissatisfaction with a product or service i.e. the cost of camping in a National Park is too high, or, does not agree with Crocodile Management policy, as such a response may not be possible and or, an investigation generally unnecessary
- the matter is an expression of dissatisfaction with a policy or procedure and there are contact details then an investigation may not be necessary but, a response will be required
- a complaint previously received and is still under investigation
- a complaint which is deemed vexatious in nature or not of sufficient merit to warrant investigation, see **Refusing to investigate a complaint** (below)
- a complaint (prior to entry into MECS) that is able to be resolved at a counter or point of service by escalating to a manager and which can be resolved within two (2) business days to the satisfaction of the customer

### **Refusing to investigate a complaint**

The department can refuse to investigate a complaint because:

- the complainant does not have sufficient direct interest in the issue;
- the resources required to handle the complaint are disproportionate to the likely outcome, and the matter cannot be addressed through less resource-intensive means;
- it is impractical to investigate a matter due to the length of time that has passed since it occurred
- after assessment, the complaint is determined to be trivial, frivolous or vexatious or is not made in good faith.

**Note: Refusing to deal with a complaint is a serious decision that should only be made after considering all reasonable options for addressing the issue. Marginal cases, in terms of the substance of the complaint or the decision to investigate, must always be decided in favour of the customer, such that the complaint is not refused.**

When the investigation of a complaint has been refused, the customer may pursue the issue through other means, such as by lodging the complaint with the Office of the Queensland Ombudsman.

A complaint that may qualify for refusal on any of these grounds must be referred to local management for resolution. If the manager to whom a complaint is referred has any doubts about the appropriateness of refusing the complaint, the issue must either:

- not be refused; or
- referred to a more senior manager for consideration and decision.

Workforce Relations and Integrity is also available to assist managers tasked with deciding if a complaint should be refused.

**Note: Even if a complaint is refused to be investigated a response advising the complainant of the action must be sent prior to finalising the MECS item. See Responding to a complaint.**

## Appendix 3 – STEP 3: Complaint Internal Review Guide

### Internal Review

An internal review is a systematic way of reviewing the complaints process and outcome. Its aim is to ensure the complaints process complied with the department's policy or procedure and that the right outcome has been reached. An internal review is not an investigation or re-investigation of a complaint. It is a review of the complaints process that was undertaken and its outcome.

The Internal Reviewer will be at minimum, Director-level and either at the same level as the original complaint decision-maker or more senior, who:

- has no conflict of interest in relation to the matter
- is independent from the original process
- has the necessary expertise to deal with the matter or be able to access appropriate advice
- have broad discretion to overturn previous decisions and apply remedies.

The Internal Reviewer will:

- conduct the internal review and advise the complainant of the outcome in writing within **20 business days** of receipt of the review request by the department.

The Internal Reviewer's response to the complainant will include:

- an executive summary or covering memorandum clearly stating the outcome
- a summary of relevant established facts
- reference the laws, policies, standards and any relevant research considered during the complaint investigation
- whether the review of the previous investigation was substantiated or unsubstantiated
- if unsubstantiated, an outline of what action or options are available to the complainant, for example the complainant can request an external review by contacting the Queensland Ombudsman
- if substantiated, any recommendation(s) for redress and systemic improvements to administrative practices to prevent similar complaints (for example, direct benefit remedy, systemic remedy).

**Note: If the outcome of the internal review constitutes a decision of an administrative nature (including a failure to make a decision) for the purposes of the *Judicial Review Act 1991*, the complainant may have standing to apply to the Supreme Court to have the decision subjected to a Statutory Order of Review, and also to seek a Statement of Reasons explaining the decision.**

**Please note: Step 4 is External (Ombudsman) Review. No guide required for this step.**

## Appendix 4 – Customer Complaints Management Checklist

<b>Managing the complaint</b>	
Complaint reference number/ MECS CTS reference number	CTS
Date received	
Does the complainant want to remain anonymous?	Yes /No
Outcome sought by the complainant?	
Complainant's Preferred Method of Contact	Phone / Email
Name of Complaint Manager	
Name of Complaint Decision Maker	
Complaint Due Date	
Does the complaint require clarification? If so, contact complainant directly.	Yes / No
<b>Identify the correct complaint process</b>	
<ul style="list-style-type: none"> <li>Is there a pre-existing complaint/review process available for the complaint?</li> <li>Check whether this complaint can be addressed under alternative complaints/review processes. For example: a statutory process, grants management process, PIN, Permits, Licences, Environmental Authorities etc?</li> <li>If yes, it is to be managed under that process. Refer the matter to the appropriate process. You do not need to complete this checklist any further.</li> </ul>	Name of alternative complaints process
<b>Customer complaint type</b>	
<p>If it is a customer complaint, determine which category the customer complaint falls within.</p> <p>A person or organisation expresses dissatisfaction with any of the following:</p> <ul style="list-style-type: none"> <li>a decision made, or a failure to make a decision, by a public sector employee of the department;</li> <li>an act, or failure to act, of the department;</li> <li>the formulation of a proposal or intention by the department;</li> <li>the making of a recommendation by the department;</li> <li>the customer service provided by a public sector employee of the department</li> <li>a possible breach of the <i>Human Rights Act 2019</i>.</li> </ul>	

<b>Assessment of complexity level of complaint</b> —Assessment of customer complaints complexity level:	
<b>Informal</b> <ul style="list-style-type: none"> <li>• Cannot be resolved by frontline staff without escalation to a Manager, but;</li> <li>• Can be resolved within five business days, and</li> <li>• Minimal risk to complainant/department</li> <li>• Does not need an investigation</li> <li>• Is deemed by the Manager to be indicative of a possible trend or a problem that requires monitoring.</li> </ul>	Yes / No
<b>Formal Complaint-standard</b> <ul style="list-style-type: none"> <li>• Involves only one, low risk issue</li> <li>• Should be able to be resolved within 20 business days.</li> </ul>	Yes / No
<b>Formal Complaint-Complex</b> <ul style="list-style-type: none"> <li>• May involve a higher level of risk and/or more than one issue or business area</li> <li>• Requires more time to investigate or coordinate responses from other areas.</li> </ul>	Yes / No
<b>Complaint history</b>	
<ul style="list-style-type: none"> <li>• Has this issue been raised by complainant previously?</li> <li>• Check MECS records</li> <li>• If yes, record MECS CTS reference number.</li> </ul>	
<b>Recordkeeping</b>	
For formal complaints an acknowledgement letter is required to be sent within three business days. Has this been done?	
Record all contact and actions taken in the Ministerial and Executive Correspondence System (MECS). N.B Any complaint record may be audited by the Qld Ombudsman's Office.	
<b>Investigation</b> —Investigations may involve any of the following options:	
Contacting the complainant to clarify details or seek further information (as appropriate);	Yes / No
Identifying actions already taken	Yes / No
Gathering and analysing information from file notes, or other sources	Yes / No
If appropriate, interviewing complainants/employees or others involved	Yes / No
Checking if previous complaints about the same issue have been lodged by the complainant	Yes / No
Identifying relevant legislation, departmental policy and other sources of information where required	Yes / No
Recording all relevant information obtained during the process	Yes / No

Ensuring any findings and recommendations are defensible	Yes / No
Advising the complainant of the outcome in writing	Yes / No
Providing adequate reasons for the decision	Yes / No
Providing options for internal/external review of decision	Yes / No
Date response letter sent.	
<b>Complaint Outcome</b>	
<p>Did the complaint require further action by the department? Examples of <u>further action</u>:</p> <ul style="list-style-type: none"> <li>• Amending a decision</li> <li>• Changing a process</li> <li>• Improving information being provided</li> <li>• Addressing an issue / gap in our services identified through the complaint</li> <li>• Staff training</li> </ul> <p>If yes, what action was required/taken?</p>	Yes / No
<p>Did the complaint result in <u>no further action</u>:</p> <ul style="list-style-type: none"> <li>• Department's decision was upheld</li> <li>• The policy remained unchanged</li> <li>• No shortfalls in processes / procedures were identified</li> </ul>	Yes / No
<b>Opportunities for improvement</b>	
If the complaint resulted in further action, describe what improvement/s were identified?	
What date were the improvements implemented?	
Are the improvements applicable across the department, or within the relevant business area?	Business area only Yes / No Department wide Yes / No

## Appendix 5 – STEP 5: Complaint Reporting Monitoring and Reviewing Guide

Please note: Step 4 is External (Ombudsman) Review. No guide required for this step.

### Participants

This step in the procedure involves the following key participants:

- **Workforce Relations and Integrity (WRI)**
- **Senior Management**
- **Complaint Management System Manager (CMSM)**

### Quarterly reporting by Divisions

WRI will collate customer complaints data from MECS each quarter. Minimum information to be recorded for each customer complaint is:

- unique identifier that is generated by MECS (MECS CTS reference number)
- division, business area and unit
- complainant's name
- what was the complaint about (concerning)
- the complaint category (topic)
- whether the complaint was part of a campaign (>10 submissions received on the same issue)
- dates created and finalised
- the outcomes and remedies provided to the complainant.

### Reports to Senior Managers

The CMSM is responsible for reporting to senior management and the Audit and Risk Committee on significant complaints and systemic issues or trends identified through the receipt of complaints and service problems, with recommendations for improvement where appropriate.

Senior Managers should ensure that action is taken to address any issues or trends identified through complaint reports in order to enhance the continual improvement of the department's processes and service delivery, where appropriate.

The *Human Rights Act 2019* requires annual reporting of complaints which allege breaches of human rights. MECS can be audited under the Advanced Search tab (DESI Complaint Category) to locate all customer complaints identified under this Act. Numbers are also recorded by WRI on all alleged human rights breaches submitted to DESI, whether or not they are managed under other complaint categories.

Statistical data on complaints, including the number of complaints received and the resolution timeframes can be provided to divisions upon request to the Manager, Workforce Relations and Integrity, People and Culture, Corporate Services.

Annual reporting, that is required by the *Public Sector Act 2022* will be facilitated by the Chief Human Resources Manager, who is the CMSM.

## Monitoring and Reviewing

The CMSM will implement an ongoing process of monitoring and reviewing of the Customer Complaints Management System (CCMS). The purpose of monitoring and reviewing is intended to identify ineffective or inefficient processes or practices that can be enhanced through implementing improvements to the system.

In order to monitor the CCMS reports may be run from MECS on complaints to evaluate:

- adherence of business areas to the process
- identify any trends or emerging issues that may need to be addressed
- identify issues relevant to a particular division or department wide issues
- effectiveness of CCMS processes in meeting the needs of the department's customers
- compliance with the AS 10002:2022 Australian Standard Guidelines for complaint management in organisations and the *Public Sector Act 2022*.

## Appendix 6 - Complaints Management Framework

Type of Complaint	<u>Category 1</u> Customer complaints - DESI products and services	<u>Category 2</u> Breaches of privacy (public complaints)	<u>Category 3</u> Employee conduct (public complaints)	<u>Category 4</u> Employee corrupt conduct/Public Interest Disclosures	<u>Category 5</u> Employee complaints	<u>Category 6</u> Other complaints
Definition / description	Expression of dissatisfaction about DESI services, products, decisions or actions of staff. Can include Human Rights breaches	Expression of dissatisfaction relating to a breach in respect of privacy information	Employee conduct that contravenes the expected behaviours of the Code of Conduct e.g. Employee was rude to a customer	Employee conduct that meets the <i>Crime and Corruption Act 2001</i> definition e.g. Fraud or Corruption	Staff complaints about their employment circumstances; a decision or action perceived as unfair, workplace harassment	Examples include: wildlife or environment regulation/ legislation /offences; grants process complaints; Pollution or Wildlife incident; statutory process issues
Key contact	Workforce Relations and Integrity, Corporate Services	Privacy Officer, Privacy Unit, Corporate Governance and Operations, Corporate Services	Manager, Workforce Relations and Integrity, Corporate Services	Principal Integrity Officer, Workforce Relations and Integrity, Corporate Services	Manager, Supervisor, or Workforce Relations and Integrity, Corporate Services	Refer to the DESI Internet General Enquiries page



## **Appendix 7 - Customer Complaints Principles**

### **Enabling Complaints**

#### People Focus

- The department has a strong commitment to addressing any issues raised within a reasonable timeframe
- Everybody has a right to complain
- The department will have a proactive approach to seeking and receiving feedback and complaints
- Customers who have made a complaint will be treated with respect and as far as practicable and appropriate will be involved in the complaints process.

#### Ensuring No Detriment to Complainant

The department will take all reasonable steps to ensure that complainants are not adversely affected because they or their authorised representative on their behalf have made a complaint.

#### Visibility and Transparency

Information about how to lodge a complaint and the complaints process will be published on the department's website, intranet site and at publicly accessible offices.

#### Vulnerability

The department will provide appropriate additional assistance to those who are vulnerable due to disability, age, literacy levels, gender, trauma and stress.

#### Accessibility

- Complaints can be made in person, over the phone, by email, text, letter, posting on the department's social media, or submitting an online form. Complaints can also be made anonymously or by an authorised representative
- Assistance making a complaint will be provided to customers with specific needs, including those with literacy problems, from non-English speaking backgrounds, with disabilities, seniors or children and young people.

#### No Charges

Complainants will not be charged a fee to lodge a complaint with the department.

### **Managing Complaints**

#### Responsiveness

- Customer complaints about departmental products, services and human rights breaches will be promptly assessed, categorised, recorded electronically in the department's Ministerial and Executive Correspondence System (MECS), and allocated to the business area responsible for the policy, product, service or staff member for investigation and response within set timeframes
- The department will endeavour to resolve complaints in as timely a manner as possible, with consideration given to the complexity of the complaint and other relevant issues
- Complaints will be resolved informally at the first point of contact in the relevant business area wherever possible

- Complainants will be promptly informed where the department is unable to deal with a part or all of a complaint
- Complaints received will be promptly acknowledged, and reasonable progress updates will be provided on request
- To minimise complaints and facilitate early resolution, the department will endeavour to explain policies, procedures and decisions when communicating with a complainant
- Complainants will be advised about –
  - The complaint process;
  - Expected timeframes;
  - Complainant involvement in the process;
  - The possible or likely outcome of their complaint, where practicable
- There are some circumstances in which it is appropriate for the department not to investigate a complaint, or refuse to investigate a complaint. The circumstances where this may occur is detailed in the Customer Complaints Management Policy and Procedure. In those circumstances, the complainant will be informed of the reasons for the decision in writing and advised of any options for having the decision reviewed.

### Objectivity and Fairness

- Each complaint will be managed in an objective and impartial manner
- Conflicting interests will not interfere with, or be perceived to interfere with the management and resolution of complaints. For example, if an internal review is requested by the complainant the review will be undertaken by an employee not involved in the original decision
- Where relevant, any perceived, or actual conflicts of interest will be managed in accordance with the department's Conflict of Interest and Engaging in Other Employment Policy and Procedure
- Where appropriate the department will defer actions that might have significant detrimental impact on the complainant until the complaint has been finalised.

### Equity

All complaints will be addressed in an equitable manner and in accordance with the department's Customer Complaint Management Policy and Procedure.

### Privacy and Disclosure

- Personally identifiable information about individuals will only be disclosed or used in compliance with the *Information Privacy Act 2009* and the *Public Records Act 2002*
- In accordance with the department's Information Security Policy, information provided by complainants as confidential will not be made available or disclosed to unauthorised individuals.

### Communication

The department will provide explanations for policies, procedures and decisions when communicating with complainants.

## **Managing the Parties**

### Conduct of Parties

Complainants who act in an unreasonable manner will be managed in accordance with the Unreasonable Complainant Conduct Management Policy and Procedure (see overview in [Appendix 2](#), Unreasonable Complainant Conduct).

### Complaint Involving Multiple Parties

- Complaints that involve more than one division - In this case the Complaint Receiver will raise one MECS item and appoint a divisional lead to manage the complaint and request SO-level endorsed input from relevant business areas
- Complaints involving more than one agency will be facilitated by the receiving agency communicating the multi-jurisdictional responsibility to the complainant and obtaining consent to share the other aspects of the complaint with relevant agencies
- Each agency will be responsible for resolving their area of responsibility and maintaining communication with other agency/agencies if necessary.

### Empowerment of Staff

- The department will ensure that staff are provided with access to appropriate information and training relevant to their role within the CCMS
- Staff feedback on the operation of the CCMS is encouraged and will be used when reviewing the system's effectiveness.

### Feedback

- Customers will receive appropriate, courteous and timely responses to their complaints
- Complainants will be notified of available review options. If a complainant is dissatisfied with the outcome of their complaint, it may be further investigated via internal or external review where appropriate
- Where a human rights breach has been alleged, the complainant will also be offered the option of submitting their complaint to the Human Rights Commissioner if they are dissatisfied with the outcome
- If a review will not change the outcome of the complaint the complainant will need to be informed of the reasons and advised that the next option is an external review by the Queensland Ombudsman.

## **Accountability, Learning and Prevention**

### Accountability

Accountability for the operation of the CCMS will be made clear through the policy, procedure and associated guides

### Continuous Improvement

The department acknowledges that responding to and learning from complaints is essential to continual improvement of service delivery

### Prevention of Ongoing Disputes

Where practicable, the department will endeavour to mitigate the likelihood of escalating or ongoing disputes regarding a complaint matter

### Monitoring Effectiveness

- Responding to and learning from complaints will form an essential part of the department's ongoing efforts to implement continual quality improvement. Complaint resolutions, systemic issues and trends will be monitored and reported to Executive Management to enable improvements in services, processes and systems at the local and departmental levels

- Information on complaints and resolutions will be published in the department's Annual Report and on its website, including specific data on the number and outcome of human rights complaints.

#### Resources and training

- Appropriate resources and staff training will be provided to support the effective implementation of the Complaints Management System and operationalisation of specific complaints management roles and authorisations
- Where complaint handling is a significant part of an employee's role, achievement of complaint handling related matters (e.g. timeframes) will be included in the employee's Performance and Development Planning Agreement.

## Appendix 8 - Definitions and Glossary

**Anonymous complaint** – A complaint received by the department from a person whose identity is unknown.

**Bias** – An inclination or prejudice, for or against one person or group, that is real or perceived, and which a third party would consider unfair.

**Complaint** – Customer complaint definition, *Public Sector Act 2022 s264(4)*.

*Customer complaint* means a complaint about the service or action of a public sector entity, or its staff, by a person who is apparently directly affected by the service or action.

*Examples -*

1. a complaint about a decision made, or a failure to make a decision, by a public sector employee of the public sector entity
2. a complaint about an act, or failure to act, of the public sector entity
3. a complaint about the formulation of a proposal or intention of the public sector entity;
4. a complaint about the making of a recommendation by the public sector entity;
5. a complaint about the customer service provided by a public sector employee of the public sector entity.

A customer complaint is not:

- the reporting of any environmental nuisance or incident regarding noise, dust, light or other pollution events
- the reporting of wildlife offences or wildlife interactions
- disputes regarding the issuing of an infringement or commercial wildlife licence
- a general service request
- a way to overrule or change any decision made by a court of law as the result of any other public sector appeals process
- an internal process for recording staff issues.

**Customer Complaints Management System** – The policy, procedures, personnel and technology used by the department to receive, record, respond to and report on customer complaints.

**Conflict of Interest** – A conflict between a public official's duties and responsibilities in serving the public interest, and the public official's personal interests (including interests of the public official's partner and/or the public official's dependents), which can arise due to avoiding personal losses, as well as gaining personal advantage, whether financial or otherwise.

**Customer** – A person, company or organisation with whom the department has dealings.

**External review** – When a customer remains dissatisfied and has exhausted the department's complaints management process they can seek an external review from the Queensland Ombudsman.

**Internal review of a customer complaint** – If a complainant is not satisfied with the department's response to their complaint they can request an internal review. An internal review involves an appropriate officer (i.e. either at the same level as the first decision-maker or more senior) undertaking an impartial review of a decision made about a customer complaint.

**Systemic issue or problem** – A failure of a product, service, system, policy or procedure which causes or contributes to a complaint, as opposed to a staff member’s error in judgement.