

## Purpose of this policy

EMPHN welcomes feedback – including complaints – from the community, the health sector, our stakeholders and our employees.

How EMPHN receives and responds to feedback is underpinned by our values – working together, integrity and courage – our Code of Conduct Policy, our ISO9001 certified quality management system, our ISO27001 aligned information security management system, and the Department of Health and Aged Care's Primary Health Networks Program Complaints Policy 2024.

### Scope

This policy defines a range of options for members of the public, EMPHN employees, contractors, consultants, government employees, service providers or stakeholders to provide feedback and resolve issues; and sets out how EMPHN receives and manages feedback.

Feedback includes compliments, suggestions and complaints; which can be verbal or written, formal or informal.

What's not covered: evaluations of projects or activities of commissioned services, staff performance-related feedback, occupational health and safety concerns or workplace grievances

This policy and EMPHN's feedback portals are always accessible on <u>EMPHN's website</u> and our staff intranet.

# The Policy

#### **Providing feedback**

Wherever possible, we encourage our community and staff to engage informally – providing feedback as part of a conversation with the relevant individual or team. The advantage of direct dialogue is that, where you are comfortable to do this, it often improves understanding and delivers immediate results.

However, some circumstances warrant a more formal approach; for instance, a compliment about exceptional contribution that you want to share with the wider organisation, or for complaints about significant failures of process or behaviour. Also, if previous efforts to address the situation informally have gone unheeded, you can lodge a more formal complaint to someone in a management or executive position at EMPHN, or via the online feedback portals.

Written feedback – compliments, suggestions or complaints – can be provided to EMPHN at any time via our website or staff intranet. This can be done anonymously, but if you can, leave your contact details so we can follow-up to get more information, and keep you updated on how we are responding. To ensure accessibility, our online feedback policies and forms meet the Web Content Accessibility Guidelines (WCAG) 2.1 to Level AA standards.



#### **How EMPHN manages feedback**

EMPHN is committed to treating each instance of feedback on its own merits; impartially, confidentially and transparently.

Feedback received via EMPHN's website or intranet is automatically allocated for review and action by the appropriate senior manager.

Feedback, especially complaints, received verbally or via email by an EMPHN employee must be entered into EMPHN's risk management system, to ensure the organisation is aware of resolutions actioned, and can identify emerging trends that warrant additional attention.

## **EMPHN's initial response to feedback**

Compliments are forwarded to the appropriate team managers and posted on the intranet, and suggestions are logged to inform continuous improvement activities.

Specifically, complaints are handled according to the principles in the Department of Health's Primary Health Networks Program Complaints Policy 2024; assessed on their merit, and addressed fairly and objectively.

Complaints are escalated immediately to the Executive Director of the relevant business area, as well as to the Privacy Officer if:

- there is a real or perceived conflict of interest
- a complaint is in relation to a manager's (or senior person within EMPHN) conduct
- a complaint involves a risk assessed as moderate or above
- there is an allegation of misconduct, or unethical or illegal activity
- there is a reputational risk to EMPHN, its programs or the Primary Health Network program
- a complaint has not been resolved at the previous level
- the issue affects the financial viability of EMPHN

If the relevant executive or the Privacy Officer are implicated in the complaint, they are bypassed, and the complaint is escalated to the Chief Executive Officer.

Where appropriate, the Privacy Officer escalates serious concerns raised via a complaint to the Executive Leadership Team and, where there is a notifiable issue (either a breach of our obligation to protect personal information or an unresolved conflict of interest), manages the escalation to the Department of Health and Aged Care.

### Communication with providers of compliments or suggestions

Every feedback provider who shares their contact details in the online feedback portal receives a system generated acknowledgement and thanks. For suggestions and compliments that indicate the feedback provider is willing to engage further, an EMPHN representative will get in touch within 10 working days.



Where feedback is received verbally or via email from a community member or other stakeholder by an EMPHN employee, that employee is to acknowledge the feedback and enter the feedback into the risk management system within one business day.

### **Communication with providers of complaints**

While anonymous complaints inherently make further communication and follow up with the person who made the complaint impossible, all self-identifying complainants will receive a system-generated acknowledgement, and then be contacted by a senior EMPHN officer (as assigned by the Risk Manager) within 10 working days to open a dialogue and outline the next steps.

These initial discussions must include:

- The expected timeframe for the investigation and resolution of the complaint
- How the complaint will be investigated
- Who can be present at the interviews (interviewees have the right to have a support person in attendance)
- If required, what interim measures will be taken

Given differences in the nature, complexity and urgency of different feedback topics, some complaints take longer to investigate and resolve. However, the EMPHN representative is to keep the feedback provider informed of what is being done.

#### **Investigation of complaints**

Complaint investigation is done by a senior EMPHN office assigned by the Risk Manager or the Executive Director of Corporate Services, and includes:

- Interviewing all relevant parties
- Reviewing any evidence
- Providing a written summary of the findings
- 1. Where feasible, a determination is made within 20 working days of receipt of the complaint Where the outcome is delayed, the complainant must be informed of the expected date of outcome.
- 2. The investigator's report to the relevant Executive Director must include whether the complaint was justified, and a recommendation on whether any further action needs to be undertaken.
- 3. The complainant is notified of the outcomes in writing although where appropriate, they may receive an abridged version of the full report.

### **Potential Outcomes**

In the event a complaint cannot be substantiated, the investigator will make recommendations to remedy the issue via mediation. However, the investigator may also rule that no further action is taken.

Where a complaint is substantiated, one or a combination of responses may be recommended:

• The complainant receives an apology



- Change to an EMPHN program or process
- Remedial training for EMPHN employees where improvements are required
- Disciplinary measures taken against an employee

#### **Appeal Process**

If the complainant disputes the decision made by the investigator, they can appeal the decision in writing – within 10 working days of being formally advised of the investigation the outcome. All appeals must be directed to the CEO, who will assign an appropriate officer to conduct a review.

When an appeal triggers a review, this is not a fresh investigation of a complaint. The review considers:

- the process adopted by the investigating officer and whether it was appropriate to address the issues raised
- the merit of the initial conclusions and whether they were clearly and appropriately explained to the complainant

The reviewing officer may:

- uphold the outcome; or
- refer the matter back to the original investigator or another officer for further review/action.

An internal review can only be conducted once, and where possible are finalised within 2 weeks.

#### **Application of determination**

The relevant executive director implements the recommended outcomes with the appropriate supports, such as from the Human Resources team.

### Reporting serious unethical conduct

To report serious concerns such as unethical conduct, anyone can make a report directly to the CEO under the Fraud and Corruption Prevention and Control Policy. Individuals connected EMPHN, such as employees or their families, can also lodge a whistleblower report, with our reporting service STOPLINE – accessible on our website and intranet. Prior to making a whistleblower report, EMPHN recommends reporters seek independent, professional advice, visit the Australian Securities and Investments Commission (ASIC) website and read EMPHN's Whistleblower Policy to ensure they are protected under the relevant legislation.

## **Review and learning**

The Quality and Risk Steering Team review the feedback reports to consider relevance for that team's quality projects and the internal quality audit series, and aligned with our Quality Framework and commitment to continuous improvement.

Where trends emerge, further investigation may be required. The Executive Director of each business area is responsible for ensuring understanding of trends is being wrapped back into EMPHN's processes and systems for continuous improvement within their own areas.



Feedback results precipitate better team dialogue and inform:

- decision-making
- program planning, monitoring and evaluation activities
- · drafting or amendment of policies and procedures
- audience, content and focus of learning and development programs
- targets and focus of community consultations

### Reporting

All feedback is collated in a quarterly report (with an annual report that includes all feedback from each quarter for easy reference), based on inputs via EMPHN's website and TICKIT by the Risk Manager. The report lists actions taken by management, tracked against the relevant feedback, until the feedback incident is fully addressed and can be closed.

The Privacy Officer oversees the Feedback Register and reports to the Executive Leadership Team each quarter, highlighting trends and themes or concerns. Feedback is reported to the Strategy and Risk Committee as part of the quarterly Risk Report.

All feedback incidents are reported quarterly in EMPHN's risk and incident report to the Executive and the Board – these include complaints, complaint management and closure, trend data and preventative measures taken.

### **Policy review**

This policy is reviewed every three years in accordance with the Policy Framework, unless legislative or regulative requirements trigger earlier review.

### **Definitions**

Term	Definition
Feedback	Complaints, improvement opportunities or compliments from members of the
	public, EMPHN employees, contractors, consultants or government employees
Complaint	An expression of dissatisfaction with any aspect of EMPHN's activities that
	requires a review, and where appropriate facilitates a resolution
Compliment	An expression of satisfaction with any aspect of EMPHN's activities
Suggestion	An idea about how something could be improved or conducted differently to
	affect better outcomes. Where suggestions are recognised as applicable, useful
	and appropriate, they may be implemented immediately, or logged to inform
	the next scheduled review of a particular process.



### Where to get help?

- If you make a complaint to EMPHN and are unsatisfied with the outcome, you can take your complaint to the Department of Health and Aged Care via the <a href="Primary Health Networks Program Complaints Policy">Primary Health Networks Program Complaints Policy 2024</a>, where there is:
  - o Suspected fraud against the Commonwealth by a funded organisation
  - o Misuse of Commonwealth funds or assets purchased with Commonwealth funds
  - Non-compliance with the terms and conditions of the funding agreement with the Commonwealth
  - Inappropriate or poor handling of conflicts of interest
  - Breaches of privacy
  - Complaints about the outcome of a departmental assessment
- For enquires about this policy, contact its owner: the Privacy Officer privacyofficer@emphn.org.au
- You can also provide feedback on this policy, or EMPHN's handling of a complaint by using the feedback option on our website or intranet