Purpose

An important part of the NSW Rural Assistance Authority’s strategy in maintaining its reputation for providing quality service to its clients is to identify, address and resolve complaints promptly and taking remedial action where necessary.

This procedure establishes a framework for staff of NSW Rural Assistance Authority (the Authority) who receive and/or address complaints from external clients. Its objectives are to ensure:

- complaints are handled in a structured, timely and professional manner which is fair, courteous and respectful of privacy
- all staff are aware of their responsibilities regarding handling complaints
- complaints are used to identify problems and to continuously improve the Authority's services.

The Authority values feedback, including complaints, as a means of identifying problems and enabling improvements to systems and processes to improve its services. Effective complaint handling is an essential part of the Authority's approach to providing services that are responsive to needs and meet the expectations of clients.

Scope

The procedure describes how the NSW Rural Assistance Authority will manage situations where a service related complaint is made by an external client.

The complaint handing procedure does not cover situations where suitable alternative arrangements are already in place or the substance of the complaint should be, or is being, dealt with under a separate process.

Objectives

The objectives of the complaint handling process are to provide:

- a straightforward means for clients to raise concerns or make complaints related to service delivery which has been unable to be resolved by frontline staff;
- a procedure for investigating complaints and informing complainants about progress and outcomes;
- a means of identifying problems and suggesting improvements to systems and processes;
- information to assist in making decisions or resource allocation, training, prioritisation, planning and quality assurance.

Procedure

The complaints handling procedure supports the Authority’s Complaints Policy providing a structured mechanism to allow complaints and concerns about the Authority’s service delivery to be notified and managed in a professional manner.
A complaint is an expression of dissatisfaction about the services provided or the performance of staff in providing that service. This may include claims that:

- The Authority’s management of a matter is unfair, inappropriate or incorrect;
- The Authority’s response in dealing with an issue is inept, inadequate or unethical;
- Correspondence is overly officious, ambiguous or unhelpful;
- Staff members are abrupt, rude, unsympathetic or aggressive in person or on the telephone;
- A decision, notice or order made by a staff member is inappropriate, excessive or impractical.

A ‘complaint’ for the purposes of this procedure does not include representations which wish to debate or challenge the substance or range of the Authority’s policies or procedures.

This procedure relates to the practices, actions and behaviour through which the Authority and its staff members implement policy, not the substance of the policy itself.

Complaints made to the Authority by clients must be handled within the following guidelines:

- All complaints received by the Authority must be recorded and documented and shall be acknowledged within the prescribed timelines established in this procedure;
- All complaints will be investigated and complainants notified of the results of the investigation, within the prescribed timeframes established in this procedure;
- Grievances, concerns and issues raised by staff – refer to procedure - Grievance Management
- Complaints which have been referred by way of Representation to the Minister – refer to procedure – Ministers’ Inwards Mail Registration
- Complaints involving allegations of possible corrupt or criminal behaviour. Instances of possible corruption are required to be notified and investigated in accordance with the provisions of the Independent Commission Against Corruption Act 1988. Suspected criminal acts are to be referred to the Police. Refer to policy – Responding to Investigative Agencies
- Complaints regarding decisions made in relation to applications for assistance – refer to procedure – Appeals Process.

**Principle**

The NSW Rural Assistance Authority strives to provide services that are responsive to needs and meet the expectations of clients.

An important strategy for maintaining and improving the quality of these services is to identify, address and resolve complaints promptly and take remedial action where necessary.

For customers, clients and stakeholders of the Authority there is an expectation that complaints will be dealt with as soon as possible. Where a complaint cannot be resolved by frontline staff the issue should be elevated to the Section Manager.

**Complaint handling at frontline or unit level**

Wherever possible, complaints are best resolved informally by the people involved. It is expected the majority of complaints will be addressed and resolved by frontline staff or section management providing further information or explanation at the time the original dissatisfaction is raised. This would most commonly occur during a conversation or in writing to documented representations.
In these circumstances no further action is required and it is not necessary for any action to be taken under the complaints handling process as the concern has been resolved.

If it is apparent the client is not satisfied with the service or response and resolution is unlikely at the frontline or section management level, the client should be advised of the option to progress the matter through the complaints handling process. This process provides the formal structure to review and investigate unresolved complaints.

**Complaint Handling Process**

i. **Responsibilities**

The *General Manager* has overall responsibility for the operation and management of the Complaints Handling Process. This responsibility includes setting standards and monitoring the consistency and effectiveness of the process as applied, and reviewing the outcomes.

The *Manager Administration* administers the Complaints Handling Process. This responsibility includes acting as a point of contact and information for complainants and staff members, maintaining the Complaints Register, monitoring actions and reporting progress against designated performance standards.

The *Manager Policy* has responsibility for the conduct of investigations concerning complaints. This responsibility includes ensuring all aspects of the complaint are thoroughly examined and reported upon, suitable recommendations are actioned and responses issued to the complainant.

*Staff investigating a complaint* gather the facts and assess whether the actions and behaviour of Authority staff and the processes under which they operate were considered suitable and appropriate in the circumstances.

ii. **Initiating a Complaint**

Where a concern is unable to be resolved by frontline staff and the client wishes to progress the matter under the Complaint Handling Process details should be referred to the Manager Administration.

This notification may be made in writing directly by the complainant or by a staff member on their behalf to:

Email: [rural.assist@raa.nsw.gov.au](mailto:rural.assist@raa.nsw.gov.au)

Post: Manager Administration

NSW Rural Assistance Authority

Locked Bag 23

ORANGE NSW 2800

Fax: 02 6391 3098

The details required in the notification are:

- Name and contact details of the complainant
- A short summary of the issue and the Authority’s actions relevant to the complaint
- Staff members involved in the issue
- The action the complainant is seeking to resolve the complaint. It is essential the desired outcome is clearly stated to ensure there are no misunderstandings regarding the expectations of the complainant.
The State Government Contact Centre – Connecting NSW (133 679 or www.nsw.gov.au) is also able to accept complaints. These complaints will be forwarded to the Authority by way of the rural.assist email address and will include a reference number together with a request to acknowledge receipt of the complaint within a 24 hour period.

The General Manager is to be advised immediately upon receipt of a written complaint.

The Authority may decline to deal with a complaint at any time where the Authority is of the view that:

- the complaint is:
  - frivolous
  - vexatious
  - not made in good faith
  - misconceived
  - lacking in substance
  - lacking in currency
- a claim has been commenced (either by the complainant or the Authority) in a court or before another judicial authority;
- the subject matter of the complaint has been lodged with an external agency and it is more appropriate for the matter to be dealt with by that agency;
- the subject matter of the complaint may be more appropriately dealt with by an external agency;
- the Authority has already dealt with the substance of the complaint in the past.

iii. Documenting a Complaint

The Manager Administration will enter details of the complaint in the Complaints Register and contact the complainant within 1 week to acknowledge receipt.

iv. Complaints Register

The Complaints Register is maintained by the Manager Administration. Each complaint will be allocated an identifying reference number when entered in the Complaints Register. The Complaints Register will also contain:

- the name and contact details of the complainant
- details of the complaint and date received
- date acknowledgement of receipt was issued to the complainant
- the Authority business unit/s involved
- the responsible branch head and the date referred
- the name of the nominated investigator
- target date for issue of response to complainant
- date the investigation was completed
- actual date the response was issued to the complainant.

Internal reviews will also be entered and tracked in the Complaints Register using similar information. These will, however, be flagged to highlight the tighter timeframes for completion.
A summary of current actions and issues in the Complaints Register is to be provided to the General Manager during the progress of an investigation with a report also provided to the Authority Board at their meetings for monitoring and review of progress and outcomes.

v. Investigating a Complaint

Complaints which cannot be resolved by frontline staff will be referred within 2 working days of receipt to the Manager Policy for action. Such action includes nominating a staff member within 2 weeks of referral to conduct an investigation and ensuring they are provided with full access and cooperation.

An investigation requires access to relevant documentation and files as well as written or verbal reports from the staff members and managers involved. It is important to place the situation, giving rise to the complaint, in context by reviewing the relevant operational, administrative and legal processes and implications.

During the investigation phase the aim is to impartially gather, assess and report facts rather than act as a prosecutor or advocate. Procedural fairness is an important issue in investigations which could result in an outcome that affects the rights, interests or reputation of an individual. Procedural fairness may require an investigator to:

- inform people of the substance of any allegations against them or grounds for proposed adverse comment in respect of them
- provide a reasonable opportunity for relevant people to put their case, whether in writing, at an interview or otherwise
- make reasonable inquiries and consider any submissions before making a decision
- act fairly and without bias, including not investigating a case in which they have a direct interest
- conduct the investigation without undue delay.

Confidentiality can also be a very important issue in an investigation, particularly an evidence-focused investigation into the alleged conduct of an individual. Depending on the circumstances of each case and the particular requirements of procedural fairness that may apply, where this is practical and appropriate there may be a need for confidentiality in relation to some or all of the following:

- the fact that a complaint has been made
- the nature of the allegations
- the identity of the complainant
- the identity of any persons who are the subject of investigation
- the identity of any witnesses
- any evidence gathered by the investigator.

The motive of the complainant may be a consideration in cases where the complaint appears to be activated by malice, avoidance of penalties or for other questionable reasons. Good complaint handling practice demands that if a complaint appears to have substance, it should be investigated irrespective of the motives of the complainant (i.e. a focus on the message, not the messenger). The primary relevance of motive in such circumstances is to increase investigator scepticism of the complainant’s veracity.

The investigation will not only review the circumstances giving rise to the complaint but also assess how these would be perceived in the wider community. A significant responsibility of the nominated investigator therefore is to identify opportunities to change and improve systems and processes to ensure best practice is maintained.
The performance target is for the investigation to be completed and the written report and recommendations to be referred to the Manager Policy within 3 weeks of receipt of the initial complaint.

vi. Disciplinary Action

If at any stage of the investigation it appears that a breach of discipline has occurred this should be immediately reported to the Manager Administration to allow consideration of whether formal disciplinary action should commence.

Although the disciplinary process may take some time to complete, the complaint may still be finalised independently. This is possible where the acceptance that a breach of discipline may have occurred tends to validate the nature of the complaint.

The actual outcome of any disciplinary action is independent of the Complaint Handling Process: any relationship ceases once the decision is made to commence disciplinary action. The disciplinary process is managed separately with decisions made on the facts and merits of the case, not the personal preferences of an aggrieved client.

vii. Recommendations

An investigator may make one or more recommendations to address the current complaint and mitigate against possible recurrences. The investigator may suggest:

- reviewing systems and procedures relating to specific concerns;
- improving information provided to clients on transaction processes and timeframes;
- developing client service standards to benchmark performance standards;
- closer supervision and monitoring of workflows and turnaround rates;
- staff training;
- simply acknowledging on this occasion the complaint was justified and an apology was appropriate with managers and staff to be reminded of their client service obligations;
- dismissing the complaint where it is determined to be spurious or without substance.

At the conclusion of the investigation a written report is to be provided to the Manager Policy for endorsement and action.

This action will include acting upon recommendations where appropriate and advising the complainant and affected staff of the outcomes of the investigation.

viii. Finalising a Complaint

The complainant is to be advised of the results as soon as possible, with the performance target being within one month of the complaint handling process being invoked.

Where this target cannot be met the complainant should receive an interim notification and an expected timeframe for completion.

Regardless of the outcome, the response to the complainant should thank them for raising their concerns and allowing the Authority the opportunity to investigate and review the issues involved.

Where the complaint is:

- upheld, an outline of the resultant remedial action should be provided
• not upheld, an outline of the investigation process undertaken and a statement confirming the actions and behaviour in question were considered appropriate with supporting reasons to be included.

In these circumstances the complainant is also to be advised of their rights of review if they consider their concerns have not been properly investigated or managed.

All documentation (complaint, investigation report, letters to complainant etc) regarding the complaint is to be saved to a secure TRIM file which is accessible by the General Manager, Manager Administration, Manager Policy and TRIM Administrator only, (Security Caveat – Executive in Confidence), with all paper records concerning the complaint then destroyed by secure methods.

ix. Rights of Review

Where a complaint is not upheld the complainant may request an Internal Review or refer their concerns for External Review.

An Internal Review is a review of the investigation process and outcomes by a senior officer not involved in the original investigation.

The Internal Review process includes reviewing all relevant documentation, reassessing the information gathered, conclusions drawn and recommendations made to determine if the original decision was appropriate or whether an alternative outcome should be preferred.

A request for Internal Review is to be made in writing by the complainant to the Manager Administration within one month of being advised of the result of the Authority’s investigation of their complaint.

Any request submitted should provide an explanation of the grounds they are relying upon to have the original decision overturned. To be successful it is preferable a request for Internal Review be based on more than the complainant simply stating they are unhappy with an outcome.

Where possible, additional information such as critical details not previously made known or canvassed during the original investigation and alternative comments or objections to the assessments and conclusions drawn should be specified in the request.

Requests for Internal Review are to be acknowledged, entered in to the Complaints Register and referred within 1 week of receipt to the Manager Policy for action. Such action includes nominating a staff member within 1 week of receipt to review the Authority’s management of the complaint and veracity of the outcomes.

This will involve an assessment of the investigation process, recommendations and actions in terms of comprehensively and appropriately addressing or responding to the complaint.

The performance target is for the written report and recommendations to be referred to the Manager Administration in time to allow the complainant to be advised of the outcomes within 9 weeks from the date their request for Internal Review was received.

External reviews may be undertaken at any time before, during or after the Complaints Handling Process by the NSW Ombudsman.

For further information contact the NSW Ombudsman’s Office www.ombo.nsw.gov.au on 02 9286 1000 or nswombo@ombo.nsw.gov.au.
x. Anonymous Complaints

Anonymous complaints will be investigated where sufficient detail is provided to substantiate a valid complaint.

In these circumstances, however, any investigation may be affected by the inability to seek further information and details and no advice can be issued on outcomes to the complainant.

Policies

- Code of Conduct
- Guarantee of Service
- Apologies
- Complaints
- Improving Client & Customer Satisfaction
- Responding to Investigative Agencies

Related Documents

- Grievance Management
- Appeals Process
- Minister’s Inwards Mail Registration
- Feedback Received via the Authority Website
- M2010-11 – Improving Client and Customer Satisfaction with Public Services – Department of Premier & Cabinet – July 2010
- Factsheet - Complaint Assessment Criteria(Public Administration Jurisdiction) – NSW Ombudsman – July 2012

Revision History

<table>
<thead>
<tr>
<th>VERSION</th>
<th>DATE</th>
<th>BY WHOM</th>
<th>DATE OF NEXT REVIEW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>12/12/2007</td>
<td>POLICY OFFICER</td>
<td></td>
</tr>
<tr>
<td>1.1</td>
<td>23/09/2008</td>
<td>POLICY OFFICER</td>
<td></td>
</tr>
<tr>
<td>2.0</td>
<td>19/03/2013</td>
<td>POLICY OFFICER</td>
<td>31/12/2015</td>
</tr>
</tbody>
</table>

Authorised by

Manager Policy
## Timeframes

<table>
<thead>
<tr>
<th>Time from receipt of complaint</th>
<th>Action</th>
<th>Responsible Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Complaints</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 week</td>
<td>Issue acknowledgement of receipt to complainant and enter details in Complaints Register</td>
<td>Manager Administration</td>
</tr>
<tr>
<td>Concurrently</td>
<td>Refer to Manager Policy</td>
<td>Manager Administration</td>
</tr>
<tr>
<td>2 weeks</td>
<td>Nominate investigator</td>
<td>Manager Policy</td>
</tr>
<tr>
<td>3 weeks</td>
<td>Complete investigation and submit report</td>
<td>Nominated Investigator</td>
</tr>
<tr>
<td>2 weeks</td>
<td>Endorse report and action recommendations</td>
<td>Manager Policy</td>
</tr>
<tr>
<td>1 week</td>
<td>Complainant advised of outcomes and rights of review</td>
<td>Manager Policy</td>
</tr>
<tr>
<td><strong>Internal Reviews</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 week</td>
<td>Issue acknowledgement of receipt to complainant and enter details in Complaints Register</td>
<td>Manager Administration</td>
</tr>
<tr>
<td>Concurrently</td>
<td>Refer to Manager Policy</td>
<td>Manager Administration</td>
</tr>
<tr>
<td>2 weeks</td>
<td>Nominate investigator</td>
<td>Manager Policy</td>
</tr>
<tr>
<td>3 weeks</td>
<td>Complete investigation and submit report</td>
<td>Nominated Investigator</td>
</tr>
<tr>
<td>2 weeks</td>
<td>Endorse report and action recommendations</td>
<td>Manager Policy</td>
</tr>
<tr>
<td>1 week</td>
<td>Complainant advised of outcomes and rights of review</td>
<td>Manager Policy</td>
</tr>
<tr>
<td><strong>Other Actions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Concurrently</td>
<td>Summary of Complaints Register forwarded to the General Manager</td>
<td>Manager Administration</td>
</tr>
<tr>
<td>Quarterly</td>
<td>Report to the Authority Board on effectiveness and outcomes</td>
<td>General Manager</td>
</tr>
</tbody>
</table>