Complaints Management Policy

Approved Date	October 2026
Review Frequency	One year – new policy
Next Review Date	October 2027
Approved By	Board
Related Policies	Clinical Governance Framework Conflict of Interest Policy Data Breach Prevention and Management Policy Delegations Policy Fraud and Corruption Control Policy Incident Management Policy Privacy Policy Risk Appetite Statement Risk Management Policy Whistleblower Policy Work Health and Safety Policy
References and Legislation	National Principles for Child Safe Organisations Primary Health Networks Program Complaints Policy Privacy Act 1988 Work Health and Safety Act 2011
Supporting documents, procedures and forms	Complaints Management Procedure Complaints and Feedback Online Form (website) Complaints Form Complaints and Feedback Register
Executive Sponsor	Chief Financial Officer

1. INTRODUCTION

COORDINARE is committed to receiving, managing and responding to complaints fairly, respectfully, transparently, and in a timely manner.

The purpose of this policy is to provide guidance in relation to handling a complaint made by external stakeholders.

Complaints provide valuable information about the experiences of consumers, community members, commissioned service providers, stakeholders, employees and children. Information gained through complaints is used to improve services, strengthen governance and reduce the risk of harm.

COORDINARE promotes a culture where concerns can be raised without fear of victimisation or negative consequences and where complaints are viewed as opportunities for learning and continuous improvement.

This policy establishes the principles, responsibilities, and requirements for managing complaints about COORDINARE's activities, employees, office holders, contractors, volunteers, and commissioned services.

2. DEFINITIONS

Complainant	A person who makes a complaint.
Complaint	An expression of dissatisfaction by a person that may have one or more associated issues and has the expectation of a response.
Feedback	Information about reactions to a service, product, system or a person's performance. Feedback may be complimentary or suggest opportunities for improvement.
High Risk Complaint	A complaint involving actual or potential serious harm, significant clinical safety or quality concerns, child safety concerns, serious misconduct, a material breach of contractual or regulatory obligations, or another matter that may expose consumers, the community, a commissioned service provider or COORDINARE to substantial risk and requires prompt escalation and senior oversight.

3. SCOPE

This policy applies to all employees and external stakeholders.

The following are out of scope:

- Employee grievances – refer to the Employee Grievance and Complaint Procedure.
- General feedback or compliments to COORDINARE. These will be acknowledged and recorded but will not be managed under this policy.

Matters relating to whistleblower disclosures, fraud and corruption, privacy breaches, work health and safety incidents, discrimination, harassment or bullying may also be managed under other specialised policies where appropriate.

COORDINARE will help direct complainants to the most appropriate pathway where the matter is better managed by another organisation, regulator, service provider or policy.

4. RESPONSIBILITIES

Role	Additional role specific responsibilities
Board of Directors	• Maintain oversight of complaint management arrangements.
Finance, Audit and Risk Management Committee	• Monitor complaint trends and organisational responses.
Chief Executive Officer	• Ensure effective complaint management systems are in place. • Reviews significant or high risk complaints and escalate to the Board, where required.
Clinical Governance Committee	• Review and provide oversight to high risk complaints relating to clinical services in commissioned services.
Child Safety Lead	• Ensure child safety complaints are managed appropriately.
Executive	• Ensure complaints are appropriately managed and investigated. • Implement corrective actions. • Monitor emerging risks and trends.
Risk & Compliance Lead	• Coordinate the complaints management system. • Receive, assess and coordinate complaints. • Maintain the Complaints and Feedback Register.

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Role	Additional role specific responsibilities
	• Prepare and provide quarterly reporting to the Finance, Audit and Risk Management Committee on complaint management, key trends, outcomes and emerging risks. • Prepare and provide quarterly reports to the Clinical Governance Committee on complaints relating to clinical services in commissioned services.
Employees	• Treat complaints seriously. • Report complaints received through the course of their work. • Cooperate with investigations and corrective actions.
Service Providers	• Maintain an accessible complaints management process. • Investigate complaints in line with internal policies. • Maintain records of complaints and outcomes. • Report complaints to COORDINARE in accordance with contractual requirements.

5. POLICY STATEMENT

Complaints will be managed in accordance with the following principles:

Accessibility and eligibility
People can lodge complaints through multiple channels and receive assistance where required. Complaints may be made by individuals, organisations, consumers, carers, advocates, representatives, service providers, community members and other stakeholders. There is no cost to make a complaint, and assistance is available where a person needs support to access the complaints process.

Respect
All complainants will be treated with courtesy, fairness and sensitivity.

Objectivity
Complaints will be assessed impartially and without conflicts of interest. Conflicts of interest must be identified and appropriately managed.

Confidentiality
Information will be handled in accordance with privacy obligations and only shared on a need-to-know basis.

Timeliness
Complaints will be acknowledged, investigated and resolved promptly and proportionately to the nature, complexity and risk of the complaint.

Procedural Fairness
Individuals who are the subject of a complaint will be treated fairly, informed of allegations where appropriate, and provided a reasonable opportunity to respond.

Child Safety
Complaints involving children will be managed in a child-centred manner that prioritises safety, wellbeing and protection from harm. Where a complaint raised concerns abuse, neglect, exploitation, grooming or significant child safety risks, immediate protection action must take precedence over the normal complaints process

Continuous Improvement
Lessons learnt from complaints will be used to strengthen systems, services and organisational performance.

6. RECEIVING COMPLAINTS

Complaints may be received through:

- Phone 1300 069 002
- The COORDINARE website – online form
- Email complaints@coordinare.org.au
- Written correspondence addressed to:
  Complaints
  COORDINARE Limited
  PO Box 325
  Fairy Meadow NSW 2519
- Communication with a COORDINARE employee including face to face, email, telephone or within a meeting.

Complaints should include information that may assist the assessment, including:

- what happened
- when and where it occurred
- who was involved
- the impact
- supporting information
- the outcome sought.

Anonymous complaints will be accepted and assessed based on the seriousness of the allegations and the information available. COORDINARE encourages people raising complaints to provide their contact details as it allows us to actively involve them in the process and keep them updated on the status of the process and outcomes.

7. MANAGING COMPLAINTS

For specific complaint management processes, refer to the Compliant Management Procedure.

Acknowledgement
Complaints received will be acknowledged within five business days of receiving the complaint.

Recording
All complaints received will be recorded in COORDINARE's Complaints and Feedback Register.

Assessment
The Coordinator, Risk and Compliance will assess whether the complaint is within the scope of the Complaints Policy.

If outside the scope of the Complaints Policy, the complainant will be advised and will be provided the rationale for the decision and recommendations about alternative complaint resolution options.

Complaints will be assessed to determine:

- seriousness and risk
- urgency
- whether immediate action is required
- whether another policy or procedure applies.

Complaints that may also be incidents: A complaint may also disclose an incident where it identifies actual or potential harm, a safety event, a privacy or data breach, misconduct, a child safety concern, or another event requiring formal incident management.

Where a matter is assessed as both a complaint and an incident, it will be recorded in both the Complaints and Feedback Register and the Incident Register and managed under both processes in a coordinated manner. Immediate actions to protect people, preserve evidence, meet notification or reporting obligations and control risk will take priority. Wherever practicable, investigations, corrective actions, escalation and reporting will be coordinated to avoid duplication and ensure consistent outcomes.

The complainant will continue to be acknowledged and kept appropriately informed through the complaints process, subject to privacy, confidentiality, legal and procedural fairness requirements.

Conflict of interest: Complaints involving Board Members, Committee Members, or the CEO must be managed in a manner that avoids actual, potential or perceived conflicts of interest and may be referred to an independent investigator or the Board Chair, where appropriate.

Complaint management delegation: Delegation for the management of the complaint will be determined by the assessed risk rating (refer to the Risk Appetite Statement):

Risk Rating	Description	Management
Low	Minor issue with limited impact or risk.	Managed by the responsible executive or their delegate.
Moderate	Potential service quality, consumer, operational, contractual or reputational impact.	Managed by the responsible executive.
High - Extreme	Actual or potential serious harm, child safety concerns, serious misconduct, material provider issue, significant legal/regulatory concern or substantial organisational risk.	Escalated to the CEO, managed by the responsible executive with CEO oversight. Escalated by the CEO to the Board, if required.

Vexatious complaints: Where a complaint is assessed as vexatious, frivolous, malicious or unreasonable, COORDINARE may implement appropriate management strategies to protect the integrity of its complaints process, ensure procedural fairness, and safeguard the wellbeing of employees, stakeholders and service providers. Such strategies may include limiting the frequency or method of contact, declining to re-investigate matters that have already been appropriately addressed, or ceasing further correspondence where no new relevant information is provided. Any decisions will be supported by documented reasons, approved by the relevant executive and communicated to the complainant.

Investigation

Complaints will be investigated proportionate to their nature and complexity.

Investigations may include:

- gathering information
- interviewing relevant persons
- reviewing records

- obtaining expert advice where necessary, including legal advice (in line with the Delegations Policy)
- referral to an independent investigator (in line with the Delegations Policy).

Complaints will be handled confidentially and in accordance with COORDINARE's Privacy Policy.

Withdrawal of complaints

A complainant may withdraw a complaint, but COORDINARE may continue to assess or act on the matter particularly in matters of safety, child protection, legal, contractual or systemic risk concerns.

Outcomes

Outcomes may include:

- explanation
- apology
- corrective action
- service improvements
- policy or procedure changes
- referral to another authority.

Complaint Closure

COORDINARE will seek to resolve complaints as promptly as possible, taking into account their complexity, seriousness, and investigation requirements.

Complaints will only be closed once investigation activities are complete, outcomes have been communicated where appropriate, and any required corrective actions have been assigned or implemented.

8. MANAGING COMPLAINTS RELATING TO COMMISSIONED SERVICE PROVIDERS

COORDINARE commissions services that are delivered independently by service providers. While commissioned providers are primarily responsible for managing complaints about their services, COORDINARE maintains oversight responsibilities to ensure services are delivered safely, effectively, and in accordance with contractual requirements.

COORDINARE will ensure complaints relating to commissioned services are appropriately received, assessed, monitored, and responded to, with a focus on consumer safety, quality improvement and contractual compliance.

Where COORDINARE receives a complaint relating to a commissioned service provider, COORDINARE will:

- acknowledge receipt of the complaint within five business days
- assess the nature and seriousness of the complaint
- determine whether immediate action is required to manage risks to consumers, children, employees or the community
- request the provider's response and monitor their investigation
- seek assurance that appropriate actions have been implemented
- maintain oversight of complaint outcomes and identified risks
- record and monitor the complaint within the Complaints Register.

Complaints relating to high risk clinical services in commissioned services will be escalated to the Medical Director/s for review upon submission.

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Service Provider child safety complaints relating to commissioned providers
Where a complaint concerns the safety, welfare, or wellbeing of a child receiving, participating in or impacted by a commissioned service, COORDINARE will:

- treat the matter as a priority complaint
- assess whether immediate protective actions are required
- confirm the provider has implemented appropriate safeguarding measures
- ensure relevant legislative, regulatory and mandatory reporting obligations have been considered
- monitor the provider's investigation and response
- seek assurance that risks to children have been appropriately managed
- consider whether contractual compliance, performance management or other corrective actions are required.

The safety and wellbeing of children will take precedence over contractual or administrative considerations.

9. CONTINUOUS IMPROVEMENT

Complaint information will be analysed to identify:

- recurring themes
- systemic issues
- training needs
- service improvement opportunities.

Corrective actions arising from complaints will be monitored until completed.

10. REPORTING AND GOVERNANCE

Significant or high risk complaints will be escalated to the CEO, and reported to the Board, where required.

Complaints relating to high risk clinical services in commissioned services will be reported to the Clinical Governance Committee for review and oversight.

Summary reporting on complaint management, key trends, outcomes and emerging risks will be provided to the Finance, Audit and Risk Management Committee quarterly.

11. EXTERNAL REVIEW

If a person is dissatisfied with COORDINARE's handling of a complaint, they may seek an external review through the Australian Government Department of Health, Disability and Ageing:

PHN Program Complaints
MDP 810 Primary Health Networks and Partnerships Branch
Primary Care Division
Australian Government, Department of Health, Disability and Ageing
GPO Box 9848, Canberra, ACT, 2601
PHN.Complaints@health.gov.au

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VERSION HISTORY

Date	Version	Approved by	Reason for update
October 2026	1	Board	New Policy