

Complaints Management Policy

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Drafted by	Josephine Stewart	Approved by Board on	20/11/2025
Responsible person	Anne Mackay	Scheduled review date	20/11/2027

1. Purpose

- 1.1 The purpose of the Complaints Management Policy is to set out the requirements for the collection, recording, reporting and management of client complaints relating to Radiance. This includes complaints received directly from clients or from a third party on behalf of a client, and complaints involving or made about venue operators, staff, volunteers, Board members, contractors and partner organisations.
- 1.2 This policy promotes best practice in complaints management and ensures an efficient, proactive approach that results in the best possible outcomes for Radiance clients, staff, volunteers, venue operators, contractors and partner organisations. Complaint management forms part of the broader quality improvement system, including incident reporting and risk management.

2. Policy

- 2.1 Complaints to Radiance must be managed in accordance with the principles of respect, privacy, transparency, fairness, accountability and responsiveness, within a culture of continuous service improvement. These requirements apply to all venue operators, staff, volunteers, Board members, contractors and partner organisations who engage with Radiance clients or represent Radiance in any capacity. Below: Client opportunities for feedback:

Opportunities for feedback

Clients are invited at various stages in their engagement with Radiance to share their thoughts.



Upon receipt of feedback it is recorded in Radiance's Safety and Quality Data System; noted and discussed during staff and Board meeting; next steps are identified and discussed with client (where possible).

2.2 Collection

Radiance will collect client feedback and complaints about services delivered by Radiance or by venue operators, staff, volunteers, Board members, contractors or partner organisations on its behalf. Complaints may be received via email, letter, verbal communication, social media, internet sources, and local feedback forms/surveys.

Radiance will ensure that feedback mechanisms are visible, accessible and appropriate for all clients and carers, including specific client groups such as Aboriginal people, Culturally and Linguistically Diverse communities, people with mental health issues, people with disabilities, children and young people, LGBTQIA+ people and other underrepresented groups.

Where possible, Radiance will investigate and attempt to resolve anonymous complaints to the extent feasible. All investigated anonymous complaints must be recorded in the complaint management system.

2.3 Acknowledgement

Radiance has a central point of coordination for managing complaints. Written complaints must be acknowledged in writing within five working days of receipt.

2.4 Assessment

Radiance shall assess each complaint to determine:

- complaint issue(s)
- need to develop a child safety investigation plan if the complaint involves a child or young person
- management requirements, including cultural or language supports
- seriousness and organisational risk
- confidentiality considerations and client authorisation
- investigation requirements
- any potential, actual or perceived conflict of interest involving venue operators, staff, volunteers, Board members, contractors or partner organisations.

2.5 Response

Radiance will demonstrate commitment to timely complaint resolution by:

- resolving complaints within 30 working days of receipt
- advising complainants of any delay and providing progress updates every 15 working days, beginning 30 working days after receipt or as soon as a delay is identified
- escalating matters to the relevant senior executive(s) if unresolved within three months.

2.6 Recording

All complaints will be recorded in the Quality and Safety Systems Database.

2.7 Service Improvement

Radiance evaluates service quality by analysing complaints to identify systemic or recurrent issues and making improvements accordingly. Consideration will be given to involving client representatives in these processes. Findings may result in improvements for staff, volunteers, venue operators, contractors, partner organisations and Board governance.

Complaints Management Procedure

3. Procedure

3.1 Receive complaint

- Actively listen—individuals often want to be heard and acknowledged.
- Clarify key concerns and ensure you understand the complaint.
- Determine the desired outcome, including suggestions for improvement.
- Identify immediate issues arising from the complaint and respond appropriately.

3.2 Manage complaint

3.2.1 Resolve

- If the complaint can be resolved at the point of contact, do so and offer an appropriate resolution.
- Record feedback in the *Quality and Safety Systems Database*, and in Carepatron (if applicable) to identify themes, regardless of whether the matter relates to staff, volunteers, venue operators, contractors, partner organisations or Board members.

3.2.2 Escalate

- Escalate complaints to the Manager when the complainant wishes to lodge a formal complaint and/or the issue is complex or beyond your authority.
- Inform the complainant of the complaints management process and that the Manager will follow up. Determine their preferred contact method.
- Record all complaints in the *Quality and Safety Systems Database* and Carepatron (if applicable).

3.3 Reflect on complaint

3.3.1 Service Improvement

- Consider whether the incident is isolated or recurring.
- Identify necessary changes to processes or systems.
- Implement changes as appropriate or escalate improvement suggestions to senior staff.

3.4 Tips for managing difficult complaint situations

- Remain calm, considerate and empathetic.
- Focus on the issue, not the person.
- Allow time for the complainant to express concerns.
- Listen carefully—they may raise valid points.
- Use neutral tone and language.
- Explain what you can do to help.
- Apologise that their experience did not meet expectations.
- Ask a colleague or senior staff member for assistance if needed.

See also:

- Crisis Communication Plan
- Risk Management Plan
- Charter of Rights and Responsibilities
- Code of Conduct and Ethical Behaviour Policy