



McLean Care®

POLICY

Feedback & Complaints

CP-PY-002

Applies to	Division:	McLean Care	Category:	Corporate
	Scope	All Staff		
	☒ Clinical		☒ Non-Clinical	

Policy Statement

McLean Care is committed to fostering a culture of openness, transparency, and accountability where feedback and complaints are welcomed, valued, and acted upon. Complaints are recognised as an important opportunity for learning and continuous improvement and are handled in a way that upholds the rights, dignity, and safety of older people in our care.

In accordance with the Aged Care Act 2024, the Aged Care Quality and Safety Commission Rules, and the Strengthened Aged Care Quality Standards (effective 1 November 2025), McLean Care ensures that all consumers, representatives, staff, and other stakeholders have access to a clear and fair process for making and resolving complaints.

Our approach aligns with the Aged Care Statement of Rights, which guarantees that every older person has the right to:

- Be listened to, treated with dignity and respect, and to have their concerns taken seriously.
- Speak up without fear of adverse consequences or reprisal.
- Receive timely and transparent communication about the outcome of their complaint.
- Access an independent complaints process, including the Aged Care Quality and Safety Commission and advocacy services such as OPAN.

Have complaints used as a mechanism to drive continuous improvement in the quality and safety of care and services.

General Principles

Consumer Rights to Complain

- All older people receiving care and services through McLean Care have the right to raise concerns or complaints freely and without fear of reprisal or discrimination.
- They must be made aware of:
- Their right to provide feedback or make a complaint.
- The process for making a complaint and how it will be managed.

Advocacy and Support

Older people have the right to choose their own advocate to act or negotiate on their behalf.

An advocate may be a family member, friend, representative, or professional advocacy service acting in the person's best interests.

- Independent advocacy is available through:
- Older Persons Advocacy Network (OPAN) – 1800 700 600
- Aged Care Quality and Safety Commission (ACQSC) – Complaints Service – 1800 951 822
- My Aged Care – 1800 200 422

Advocates and support persons are encouraged to participate in complaint resolution processes where consent is provided by the older person.

Raising and Managing Complaints

- Complaints may be received verbally, in writing, electronically, or anonymously.
- All staff must apply the principles of McLean Care's 12-Step Model for Effective Complaint Handling, ensuring a respectful, transparent, and timely response.

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Authorised: DoCGQR

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Planned Revision Date: October 2028

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- Where possible, staff should resolve complaints immediately if within their delegation, particularly for issues involving care or service delivery.
- Complaints that cannot be resolved promptly are to be escalated according to the delegation and governance structure, ensuring timely review by the appropriate leader or the Executive Director where necessary.
- All complaints must be managed confidentially, with only those directly involved in the resolution informed.
- The older person's consent must be obtained before information is shared with any third party, unless required by law or regulation.

Organisational Responsibilities

McLean Care has an obligation to:

- Ensure that all complaints are managed fairly, promptly, and without fear of reprisal.
- Maintain a transparent process that upholds each person's rights, dignity, and cultural preferences.
- Encourage older persons consumers to raise their concerns directly with McLean Care in the first instance and work collaboratively toward resolution.
- Provide clear information about external escalation options, including the ACQSC and OPAN.
- Record, monitor, and analyse all complaint data in RiskMan for inclusion in quality reports and continuous improvement planning.

Governance and Continuous Improvement

- All complaint data is reviewed as part of the Quality and Risk reporting framework, including reporting to the Governing Body.
- Lessons learned from complaints inform each services and the organisation's Plans for Continuous Improvement (PCI), ensuring that feedback drives systemic improvement and service excellence.

Definitions

Advocacy	Support provided by an independent organisation or person (e.g. OPAN – Older Persons Advocacy Network) to assist older people to understand and exercise their rights, express their views, or make and resolve complaints.
Compliment	Any positive feedback that we, or a member of our workforce receives.
Comment	A neutral statement of feedback that can neither be categorised as positive or negative, where a response or resolution is not expected or required.
Complaint	An expression of dissatisfaction, concern or grievance made by an older person, representative, staff member, or stakeholder about any aspect of care, service delivery, environment, or organisational practice — whether verbal, written or implied.
Complainant	The person or representative making a complaint. This may include a resident, family member, staff member, volunteer, advocate, or member of the public. Complainants have the right to advocacy and support throughout the process.
Concern	An issue raised by a nm older person, representative, or staff member that may not yet be a formal complaint but indicates dissatisfaction or potential risk. Concerns should be treated seriously and addressed promptly to prevent escalation.
Continuous Improvement	An ongoing, systematic process of reviewing and enhancing systems, care, and services based on feedback, complaints, audits, and incident data to ensure high-quality, safe, and person-centred care.
Feedback	Any information provided by an older person, representative, staff member, or other stakeholder about their experience of care or services — positive, negative or neutral. Feedback includes compliments, suggestions, concerns, and complaints, and is used to identify strengths and areas for improvement.
Resolution	The outcome or conclusion of a complaint following investigation or review. Resolution may include corrective action, communication with the complainant, or systemic improvements to prevent recurrence.
Suggestion	A comment or idea provided by an older person, staff member or stakeholder aimed at improving care, services, systems, or the physical environment. Suggestions are encouraged and considered as part of the organisation's continuous improvement process.

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Roles and Responsibilities

Chief Executive Officer

The Chief Executive Officer is responsible for:

- Ensuring that an effective complaints management system is maintained and utilised for the purpose of continuous improvement; and
- Promoting the rights of customers to provide feedback, including complaints

Executive Managers

Executive Managers are responsible for:

- Ensuring that all staff members and people receiving services and their Carers, Families and advocates receive appropriate information and support in the implementation of this policy;
- Ensuring that adequate information regarding the policy and procedure is widely available throughout each service;
- Overseeing the effective and efficient management of complaints within their Service;
- Ensuring that action plans to address complaints are developed, implemented and monitored within service areas;

Undertaking regular monitoring and reviewing of complaints data / statistics on a monthly and quarterly basis, including the identification and monitoring of trends and working with Senior Managers to implement mechanisms to reduce trends.

Senior Managers

Senior Managers are responsible for:

- Ensuring that a copy of this document is available to people receiving a service, their Carers, Families, advocates and all staff, and that they are aware of and understand its contents;
- Ensuring staff in the service have received information and training as necessary and are aware of their responsibilities in relation to the management of complaints;
- The collation of monthly statistics regarding complaints in their service area or department;
- Ensuring all feedback and learning regarding complaints within the service or department is discussed with all staff during staff meetings

Supervisors / Team Leaders

Supervisors are responsible for:

- Conducting an inquiry of a complaint;
- Developing and implementing a resolution or agreed outcome and undertaking an investigation if required;
- Follow up of resolution or outcome mechanisms within relevant timeframes and delegation; and
- Ensuring the recommendations of an investigation report of a complaint is implemented within the relevant timeframes for complaints that are not within delegation

All Staff

All staff are responsible for:

- Dealing appropriately and effectively with any complaint made to them, either through dealing with the complaint at the point of contact or, where appropriate, reporting the complaint to the relevant Supervisor/Manager in accordance with the complaints management procedure;
- Support a person receiving a service to make a complaint if requested to do so by that person;
- Fully cooperate in any investigation process regarding a complaint where necessary;
- Participate in complaints management training and have knowledge regarding the appropriate management of complaints, sharing learning's from complaints with their colleagues, and, where possible, initiate service improvement.

Evaluation	
Associated Documentation	CP-PR-020 Complaints Procedure Continuous Improvement Policies and Procedure Whistle-blower Policy

Relates to	
Accreditation Standard	Aged Care Quality Standards Standard 1 – The Person Standard 2 – The Organisation Standard 7 – Residential Community
Act	Aged Care Act 2024
Guideline	
Regulation	
Code of Practice	
References	Better Practice Guide to Complaint Handling in Aged Care Services <i>The Aged Care Act 2024</i> (Cth) Aged Care Complaints Commissioner

Risk Rating	☐ High (review due yearly)	☒ Low (review due 3 years)
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Document Version History

Revision No	Description of Changes	Author Role	Approved by	Approval Date	Review Due Date
1	Implemented			2008	2012
2	Reviewed			2015	
3	Reviewed			2018	
4	Reviewed			2019	
5	Reviewed			2024	
6	Updated aligned with Aged Care Act 2025	DoCGQR		October 2025	October 2028