

POLICY

Complaints and Feedback Policy

The Lifestory Practice

Effective date: 30 August 2026 | **Policy contact:** Carrie Gibbons, Practice Manager

Purpose and scope

This policy explains how The Lifestory Practice receives, assesses, resolves and learns from complaints, concerns, compliments and feedback. It applies to all services, workers and communication channels. The practice welcomes feedback and recognises the right to complain without fear of retaliation, discrimination, withdrawal of service or reduced quality of care.

Guiding principles

Complaints are handled accessibly, respectfully, fairly, promptly and as confidentially as practicable. The process will be proportionate to the seriousness and complexity of the issue and will follow procedural fairness. A complaint may identify a service problem, privacy concern, boundary issue, incident, abuse, neglect, exploitation, billing concern or risk requiring a separate safeguarding or reporting response.

Who may provide feedback or complain?

A client, NDIS participant, family member, carer, nominee, guardian, advocate, support person, worker, referrer or member of the public may provide feedback or make a complaint. A person may complain on another person's behalf where they have authority or the person's consent, or where safety or the law justifies action without consent.

Complaints may be anonymous or made using a pseudonym where practicable. The practice will consider the information provided, although anonymity may limit investigation, communication or the remedies available.

How to make a complaint

A complaint may be made verbally or in writing, in person, by telephone, email or another accessible method. The person does not have to use formal language or prove that a breach occurred. Helpful information includes what happened, when and where it occurred, who was involved, the impact and the outcome sought.

- raise the issue with the practitioner or worker, if the person feels safe and comfortable doing so
- contact Carrie Gibbons, Practice Manager, for a complaint about a worker, service, bill, privacy matter or unresolved concern
- contact another senior person nominated by the practice if the complaint concerns the Practice Manager or there is an actual or perceived conflict
- use an advocate, interpreter, communication aid or support person at any stage.

Direct discussion with the worker is optional. A person may go straight to the Practice Manager or an external body and does not have to complete the practice's internal process first unless an external body's rules require it.

Accessibility and support

The practice will take reasonable steps to make the process accessible, including providing information in plain language, accepting the person's preferred communication method, arranging an interpreter or communication support where reasonably available, allowing a support person or advocate and giving additional time where needed. Children and young people will be supported in a manner appropriate to their age, maturity, communication and safety needs.

A person will not be charged for making a complaint. Staff must not discourage, pressure, threaten or disadvantage anyone for raising a concern or assisting with a complaint.

Immediate safety and urgent concerns

Concerns involving immediate danger, abuse, neglect, exploitation, sexual misconduct, serious privacy or security risk, self-harm, violence or another urgent safety issue are escalated immediately. Emergency services should be contacted on 000 where there is immediate danger.

The Practice Manager will ensure immediate protective steps, preserve relevant information and assess whether the matter must also be managed under incident, child-protection, mandatory notification, police, privacy breach or NDIS reportable incident requirements. A complaint process does not delay required safety action or external reporting.

Acknowledgement and initial assessment

The practice aims to acknowledge a complaint within two business days. The acknowledgement will confirm the contact person, explain the next steps, identify any immediate action and ask about communication, accessibility or safety needs.

An initial assessment will consider seriousness, risk, desired outcome, jurisdiction, conflicts of interest, privacy, evidence, whether interim safeguards are required and whether another policy or external notification applies. A complaint will be referred to a suitably independent person if the usual decision-maker is involved or cannot act impartially.

Fair investigation and response

The person handling the complaint will gather information reasonably necessary to understand the issue. The complainant will have an opportunity to provide information and respond to material issues. A worker whose conduct is questioned will be told the substance of the concern and given a fair opportunity to respond, except where temporary limits are necessary to protect safety, evidence, privacy or a lawful investigation.

The practice will avoid unnecessary delay and aim to provide a written outcome within 30 calendar days. If this is not practicable because the matter is complex or depends on another process, the complainant will be told why, what has been completed and when the next update is expected.

Possible outcomes

Outcomes depend on the facts, the person's preferences and the practice's responsibilities. They may include:

- an explanation, acknowledgement or apology
- correction of information, billing or an administrative error
- a service adjustment, replacement appointment, referral or agreed communication plan
- staff supervision, education, performance management or disciplinary action
- a policy, procedure, system or environmental improvement
- a privacy, safeguarding, incident or regulatory response
- a finding that the available information does not substantiate the complaint.

The outcome will explain the decision, reasons, action taken or proposed, any limits on information that can be disclosed and the available review or external complaint options. Privacy and employment obligations may prevent the practice from sharing confidential details about action concerning another person.

Review of an internal decision

A complainant who is dissatisfied may request review by a person who was not the original decision-maker, where reasonably available. The request should identify the unresolved issue or relevant new information. The reviewer may confirm, vary or return the matter for further assessment and will explain the result.

External complaint options

A person may seek independent advice or complain externally at any time. Depending on the issue, options include:

- Health and Community Services Complaints Commissioner (SA): hcscc.sa.gov.au or 1800 232 007
- NDIS Quality and Safeguards Commission for NDIS supports: ndiscommission.gov.au or 1800 035 544
- Ahpra for concerns about a registered health practitioner: ahpra.gov.au
- Australian Association of Social Workers for concerns within its ethics and complaints jurisdiction: aasw.asn.au
- Office of the Australian Information Commissioner for privacy complaints: oaic.gov.au. The OAIC generally expects the person to complain to the practice first and allow 30 days for a response.
- South Australia Police or emergency services where criminal conduct or immediate danger is suspected.

The practice will not obstruct external contact and will cooperate with lawful oversight, investigation and information requests.

Privacy, confidentiality and records

Complaint information is collected, used, stored and disclosed only as reasonably necessary to assess and respond, protect safety, obtain advice, meet legal obligations and improve services. Complete confidentiality cannot be promised because relevant information may need to be shared with the person complained about, an investigator, insurer, regulator or authority.

The practice keeps a complaint record that may include the issue, dates, parties, risk assessment, communication, evidence, findings, reasons, actions, review and closure. Access is limited to authorised people. Records are retained securely for the period required by privacy, health, employment, insurance and applicable NDIS requirements.

NDIS complaints

Complaints about NDIS supports are managed consistently with the NDIS Code of Conduct and applicable complaints management rules. Participants are supported to understand how to complain, use an advocate and contact the NDIS Commission. Complaints are handled fairly and promptly, and any related incident or reportable incident is managed through the incident system without requiring the participant to make a separate complaint.

Feedback, compliments and improvement

Suggestions and compliments may be given through the same channels and may be recorded with consent. The practice reviews complaint themes, response times, outcomes and recurring risks to identify service improvements. De-identified information may be used for governance, training and quality improvement. Feedback data will not be used to disadvantage an individual.

Responsibilities and review

All workers must recognise complaints, respond respectfully, preserve relevant records and promptly pass the matter to the Practice Manager. Workers must not investigate serious allegations independently or make promises about outcomes. The Practice Manager oversees complaint triage, conflicts, communication, records, corrective actions and organisational learning. This policy is reviewed at least annually and sooner after a significant complaint, incident or regulatory change.

Contact details

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Policy references

- National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018
- NDIS Code of Conduct and applicable NDIS Practice Standards
- Health and Community Services Complaints Act 2004 (SA)
- Privacy Act 1988 (Cth), Australian Privacy Principles and OAIC privacy complaint guidance
- Applicable National Board codes and Ahpra notifications guidance
- The Lifestory Practice Privacy, Incident Management, Professional Boundaries and Ethical Billing policies.