

This fact sheet explains Omnicare’s commitment to ensuring any client using our service has the right to lodge a complaint or appeal a decision of the organisation and have their concerns addressed in ways that ensure access, equity, accountability and fairness.

The procedure for managing complaints and appeals is shown overleaf and details how the organisation will deal with the complaint or appeal, the steps involved and the timelines. It outlines how the person will be informed of the outcome of their complaint and how they would lodge an appeal.

## How to lodge a complaint

Complaints may be made verbally or in writing to:

- the staff member, or supervisor (of the staff member) they were dealing with at the time
- the Branch Coordinator
- the CEO
- the Board of Directors, or
- the Aged Care Quality and Safety Commission
- the NDIS Quality and Safeguards Commission
- Dept Fair Trading

### Contact details:

#### Omnicare Alliance Limited

41-47 Morton St  
PO Box 5709  
Port Macquarie NSW 2444  
Ph: 1300 336 488

**Aged Care Quality and Safety Commission:** 1800 951 822

[www.agedcarequality.gov.au](http://www.agedcarequality.gov.au)

**NDIS Quality and Safeguards Commission:** 1800 035 544

[www.ndiscommission.gov.au/participants/complaints](http://www.ndiscommission.gov.au/participants/complaints)

**Dept Fair Trading:** 13 32 30

[www.fairtrading.nsw.gov.au/help-centre/online-tools/make-a-complaint](http://www.fairtrading.nsw.gov.au/help-centre/online-tools/make-a-complaint)

### Advocacy

It is your right to use an advocate of your choice to negotiate on your behalf. An advocate is a person who, with your authority represents your interests. Advocates may be used during assessments, reviews, and complaints or for any other communication between the client and Omnicare Alliance Ltd. This may be a family member, friend or advocacy service. If you wish to appoint an advocate let us know if writing, the name of the person you wish to be your advocate. You can use the form – Authority to Act as an Advocate. You can change your advocate at any time using the Authority to Act as an Advocate form.

Step	Action	Timeline
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## Procedure for Complaints and Appeals Management

1.	A complaint is received via a Volunteer, staff member, stakeholder or directly from a service user/representative via letter, email, face to face or by phone.	
2.	A Complaint Record Form is completed by the person receiving the complaint and an incident report is logged in MAUS. All staff must endeavor to resolve the complaint at the lowest level possible before escalating the complaint to the next responsible person. (The complaint must be recorded as per Step 11. even if resolved at the lowest level.) If the complaint is not resolved or is of a serious nature, the following process occurs:	On day complaint is received
3.	The complaint is reviewed by the Service Coordinator and relevant information is recorded and a copy is sent to the Manager. The complainant is provided with a copy of the Managing Complaints Fact Sheet A 017b.	Day complaint is received
4.	<p>The Service Coordinator or Manager contacts the client or client representative by telephone to advise:</p> <ul style="list-style-type: none"> <li>□ the complaint is being assessed</li> <li>□ the process that is followed</li> <li>□ the timeline (determined by the level of complain</li> <li>□ their right to an advocate and advocacy agency support</li> </ul>	Within 5 working days of receipt of complaint, (no later than 15 working days)
5.	The Service Coordinator, in consultation with the Manager decides the action to be taken. If a formal investigation is necessary, refer to the Grievance Policy and Procedure. The Manager forwards the complaint to the General Manager – Operations and the CEO.	
6.	Action is carried out. Person/s effected by the complaint are fully informed of all facts and given the opportunity to provide further information.	
7.	A corrective action is logged on MAUS and the complaints Record form is completed.	
8.	The client or client representative or stakeholder is advised by letter of the actions taken to address the issues raised, the reasons for the decision and the outcome of the complaint. General Manager approval is required before the letter is sent. The letter must contain information on the complaints appeal process.	
9.	If the service user wishes to appeal, the complaint is reviewed by the CEO whose decision is final.	
10.	The service user is advised of the decision and of their option to go to the Aged Care Complaints Scheme, NDIS Quality and Safeguards Commission or other relevant body.	
11.	<p>When the complaint is finalised a staff member is identified by the Manager to ensure that the service user feels comfortable to continue accessing the service and to obtain feedback on the complaints procedure. The complaint is closed off by completing all relevant documentation including;</p> <ul style="list-style-type: none"> <li>□ Incident report on Maus</li> <li>□ Complaints Record Form</li> <li>□ Complaints Record Form to be sent to Administration Manager to be registered.</li> </ul>	Within 25 working days of receipt of complaint.