

# External feedback management policy

## External feedback management policy

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### Contents

<b>1</b>	<b>Purpose.....</b>	<b>3</b>
<b>2</b>	<b>Scope.....</b>	<b>3</b>
	2.1. Inclusions .....	3
	2.2. Exclusions .....	3
<b>3</b>	<b>Policy statement.....</b>	<b>3</b>
	3.1. Rationale.....	3
	3.2. Key elements.....	3
	3.3. Principles .....	4
<b>4</b>	<b>Roles and responsibilities .....</b>	<b>5</b>
<b>5</b>	<b>Associated documents .....</b>	<b>5</b>
	5.1. CCQ policies, procedures, frameworks.....	5
<b>6</b>	<b>Review and feedback .....</b>	<b>5</b>

## External feedback management policy

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### 1 Purpose

The purpose of this policy is to ensure that external feedback received by the Sunshine Coast Health Network Ltd. (trading as Country to Coast QLD, hereafter **CCQ**) is responded to in a consistent, fair and timely manner and is used effectively to improve the organisation's performance and relationship with stakeholders.

### 2 Scope

#### 2.1. Inclusions

- This policy applies to all CCQ staff
- With the exception of the items listed under 'exclusions', this policy covers all feedback received from outside the organisation, whether positive or negative. This includes:
  - privacy complaints, which will be referred for handling to the CCQ Privacy Officer (as per the Privacy complaints investigation procedure), and
  - feedback from individuals about a CCQ commissioned service they have accessed. CCQ encourages individuals to give feedback directly to service providers in the first instance. However, if an individual does not feel comfortable doing this, or their concerns remain unresolved after providing feedback directly, CCQ will respond to their feedback under this policy.

#### 2.2. Exclusions

This policy excludes:

- PHN staff grievances (refer to the Grievance procedure)
- commissioned service providers' reporting of clinical incidents and near-misses. These should be reported to the relevant CCQ contract manager or program lead, and
- commissioned service providers' feedback to CCQ about matters pertaining to their contract with CCQ. Service providers should raise these issues in contract review meetings or by contacting the relevant CCQ contract manager or program lead.

### 3 Policy statement

#### 3.1. Rationale

CCQ believes that effective management of external feedback is important because it:

- i. strengthens the organisation's services and administration processes: feedback highlights improvement opportunities in programs, activities, policies, procedures and commissioned services, and
- ii. builds the organisation's reputation in the community and relationships with clients, stakeholders and health system consumers as a result of responsive, fair and consistent management of feedback.

#### 3.2. Key elements

To achieve its objectives, the CCQ external feedback management approach involves:

- ensuring all CCQ staff, at all levels, understand their role in complying with the External feedback management policy and procedure
- a dedicated Feedback Officer who is responsible for managing the administration of the feedback management systems and processes

## External feedback management policy

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- ensuring all feedback is investigated and responded to in an appropriate manner and within reasonable timeframes
- resourcing investigation and resolution of issues identified through feedback, and
- identifying trends and ensuring action is taken to address any issues identified.

### 3.3. Principles

The following principles underpin the CCQ's approach to managing external feedback:

#### 3.3.1. Accessibility

The CCQ will ensure that this policy and the *External feedback management procedure* are available at all times from the organisation's website along with the appropriate form for providing feedback. In addition, the following guidance will be maintained on the website:

- the feedback management process
- anticipated timeframes for completion of the process and response, and
- further options in the event that a person is dissatisfied with the outcome or how the PHN managed the feedback.

#### 3.3.2. Fairness

The PHN will manage all feedback with fairness and integrity.

#### 3.3.3. Responsiveness

CCQ will promptly acknowledge receipt of feedback and comply with the timeframes set out in the *External feedback management procedure* where possible. Where usual timeframes will not be met due to resourcing or complexity, CCQ will keep the individual providing feedback informed.

#### 3.3.4. Proportionality

CCQ will handle feedback in a way that is proportionate and appropriate to the matter being addressed. Proportionality is ensured by the consequence categorisation and escalation matrix set out in the *External feedback management procedure*.

#### 3.3.5. Transparency

CCQ will inform individuals providing feedback of the outcome of the investigation unless they have elected to remain anonymous or indicated that they do not wish to be contacted. Where feedback relates to high-risk or complex circumstances, CCQ may request individuals to provide further information.

#### 3.3.6. Confidentiality

CCQ acknowledges that all individuals have a right to privacy and will:

- ensure feedback is investigated in confidence, and
- observe relevant privacy regulations when collecting, storing, using and disclosing personal information.

Where personal information inadvertently becomes public, CCQ staff will comply with the CCQ *Data Breach Policy*.

## External feedback management policy

### 3.3.7. Risk

Where necessary, the Feedback Officer will record and escalate external feedback that identifies an issue or concern posing a risk to CCQ.

### 3.3.8. Continuous improvement

CCQ will use external feedback to identify and report trends, eliminate causes of negative feedback and drive improvement of CCQ's systems and processes.

## 4 Roles and responsibilities

Role/Position	Responsibility
All PHN staff	Awareness of policy, and when responding to external feedback on behalf of CCQ, compliance with principles stipulated.
Senior Manager, Quality and Risk	Compliance, monitoring, review and receiving feedback in relation to the policy
Feedback Officer	Reporting and records management

## 5 Associated documents

### 5.1. CCQ policies, procedures, frameworks

Document number	Document name
	External feedback management procedure [under review]
POL-PRI-002v2	Data breach policy [under review]
PRO-PRI-003v2	Privacy complaints investigation procedure [under review]

## 6 Review and feedback

This policy will be reviewed by CCQ in 24 months. CCQ staff and affected stakeholders may provide feedback on this policy to Senior Manager, Quality and Risk.