

# Internal Audit of Complaints Handling

NSW Department of Communities &  
Justice

17 November 2021

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Communities  
& Justice



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# 1. Executive summary

## Introduction

PwC was engaged by the NSW Department of Communities & Justice (DCJ) to conduct an internal audit of Complaints Handling managed by the Community Services Enquiry, Feedback and Complaints Unit (EFCU).

## Scope

### Stream 1: Consultation with key stakeholders

As part of this internal audit, the following stakeholders were consulted:

- EFCU
- District offices and local area offices
- Prudential Oversight
- Statewide Contracts
- Joint Child Protection Response Program (JCPRP)
- Non-government organisations (NGOs)
- Community complainants
- Office of the Children's Guardian

### Stream 2: Process and controls review

Performed an end-to-end internal audit of the EFCU's processes and controls relating to complaints handling, focussing on:

- Strategy & Governance
- Process & Procedures
- People
- Systems & Data
- Investigations Management

## Background

In the *2019 Family with Culture Independent Review of Aboriginal Children and Young People in OOH* report, Recommendation 10 urges DCJ to

conduct a review of its complaint handling with a view to developing a complaints system that is transparent and accessible; child friendly; empowered to resolve complaints adequately; developed in consultation with Aboriginal communities; supported by a Charter of Rights and Responsibilities for Aboriginal Families. In addition, the report stated that this system should also employ Aboriginal staff in key roles.

In response to this recommendation, DCJ commissioned an internal audit review of its key complaints handling system. A separate special report by the Office of the Children's Guardian to the Minister for Families, Communities and Disability Services will consider how the system supports Aboriginal children, young people and families.

This review also considered the *2018 NSW Ombudsman's Complaint Handling Improvement Program Commitments Implementation Review* which details the 6 key commitments to effective complaint handling: Respect, Information & Accessibility; Communication; Ownership; Timeliness; and Transparency.

## About the EFCU

The Community Services Enquiry, Feedback and Complaints Unit (EFCU) commenced operation in 2011. The EFCU provides a centralised intake and referral point for feedback and complaints about Community Services, including funded NGO service providers, from across NSW. The majority of contacts are managed and resolved by an EFCU Complaints Officer, however, approximately 4-6% are referred by email to relevant district offices/local area offices for local resolution.

During 2019-20, EFCU managed 10,759 contacts from clients and stakeholders. This resulted in 460 (4%) formal complaints for review. Complaints related to service access, processes or procedures (202), communication (100), service quality/delivery (93), staff behaviour (63) and other feedback (2). 96% of communication was resolved at first contact by providing relevant advice or immediate resolutions to requests.

The EFCU is staffed by 6 DCJ staff and leverages the Satisfy Complaints Handling System (Satisfy) to digitally record complaints.

# 1. Executive summary (continued)

## Summary of Observations

Complaints received by the EFCU follow an established process, with pro-forma documents used to manage the investigation of the complaint by the district offices / NGOs and the Satisfy system used to manage the process. Overall, positive observations for the EFCU team include:

- A high level of compliance for the completion and upload of documentation into Satisfy.
- The well regarded reputation of the EFCU team amongst the DCJ district and local area offices.

However, from work undertaken the review noted that not all complaints relating to out of home care are overseen by the EFCU, as some may be directly issued to the district / local area office. As a result, there is no single source of truth for all complaints received. This impacts the Department's ability to have a holistic view of all complaints received in order to understand, and address, the root causes. In addition, this makes it difficult to have confidence over a consistent level of service to complainants when addressing their concerns.

The EFCU has an established control environment supported by the Satisfy system. Sample testing of controls owned by the EFCU did not result in any control issues being identified. The approach to complaints handling changes once complaints are referred to district offices, local area offices and NGOs for investigation with some areas unaware of the key public facing KPIs required to be met.

We noted that the approach to measuring KPIs and the use of data to produce insightful reports could be improved to allow for better identification and remediation of potential issues. Additionally, further alignment to best practice *NSW Government's Commitments to Effective Complaint Handling* could be achieved.

To understand the EFCU complaints handling process from the perspective of non-DCJ stakeholders, two surveys were conducted:

- A survey of the NGOs who provide out of home care on behalf of DCJ
- A survey of complainants who's complaints have recently been resolved.

The results of these surveys are presented in Section 2 and these were considered when developing our findings detailed in Section 3.

## Compliance Statement

This review was completed in full compliance with *Treasury Policy Paper TPP 20-08 Internal Audit and Risk Management Policy for the NSW General Government Sector* which stipulates the application of the Institute of Internal Auditors (IIA) International Standards for the Professional Practice of Internal Auditing (the IIA Standards) in the NSW General Government sector.

## Acknowledgements

Internal Audit wish to acknowledge the assistance and cooperation received from all interviewed staff and management during the course of this internal audit, and the support provided, particularly from the staff from the EFCU.

Staff interviewed have provided open and honest comments and were engaged in the discussions, and supported the internal audit team through providing requested documentation.

## Overall Management Comment

The Department of Communities and Justice (DCJ) is committed to providing accessible and effective complaint handling systems. All recommendations proposed by PwC are accepted and managerial actions are being completed to enhance the complaint handling experience.

DCJ pledges to ensure clients have a voice in all circumstances and the core complaint handling principles of natural justice and procedural fairness are upheld.

We appreciate the constructive approach to the audit to inform our continued collaboration with clients and stakeholders. DCJ's commitments will further ensure the complaint system is child friendly and our processes are transparent and trusted.

Paul Vevers

Deputy Secretary, Department of Communities and Justice

## 2. Stakeholder surveys

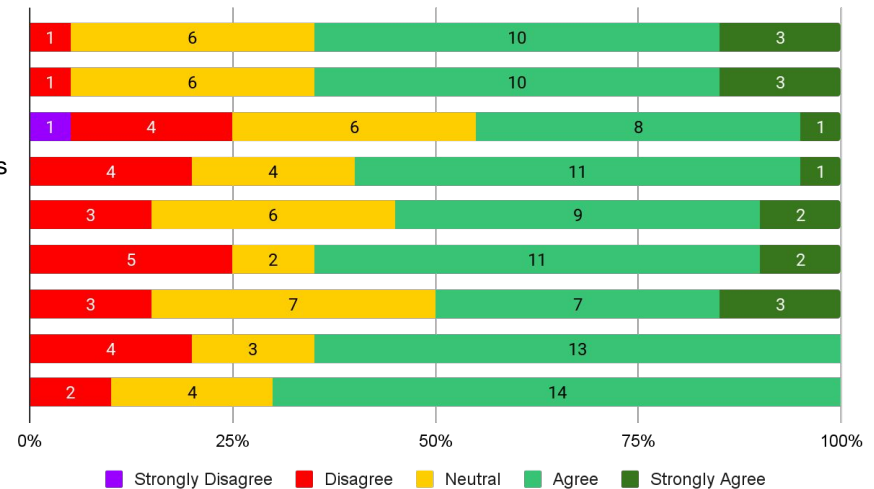
### NGO Complaints Handling Survey

An online survey was distributed to 27 non-government organisations (NGOs) and out of care home providers to understand their views on the EFCU complaints handling process. A total of 20 responded, with feedback captured in the graph below. Key themes were:

- The majority of responses were overall positive
- The EFCU should focus on responsiveness and timeliness of complaints handling (refer Finding 3.2)
- The EFCU should review the availability of information as well as ensuring that complaints processes are easily navigable and that escalation processes are well understood by all stakeholders (refer Findings 3.4 and 3.5).

### NGO Complaints Handling Survey Responses

1. DCJ complaints handling process - is transparent and well understood
2. DCJ complaints handling process is - accessible and easy to navigate
3. DCJ complaints handling process is - responsive and timely
4. Information regarding the process is accessible to me and my stakeholders
5. My stakeholders can easily engage with DCJ complaints handling process
6. DCJ escalation processes are understood
7. We received support from the DCJ when resolving complaints
8. DCJ maintains independence when managing complaints
9. My organisation feels that complaints are resolved adequately



## 2. Stakeholder surveys (continued)

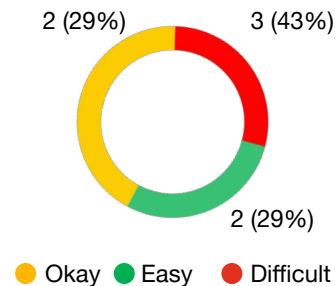
### Complainants Experience Survey

Telephone interviews were attempted with 20 recent complainants who had had their complaints with the EFCU finalised in the past 10 weeks. Out of the 20, a total of 7 complainants engaged with the survey. Key findings from the feedback were:

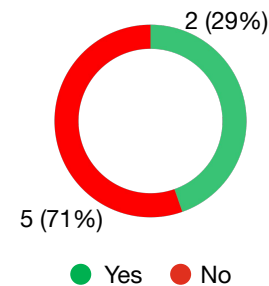
- The majority of respondents had an okay or good experience with the EFCU and local offices.
- Most respondents felt that they were not kept up to date on the progress of their complaint (refer Finding 3.2)
- Almost half of respondents found it difficult to locate contact details for making a complaint (refer Finding 3.4).

**We note that the findings above are based on the data opposite and they do not represent a statistically significant sample and should be read in that context.**

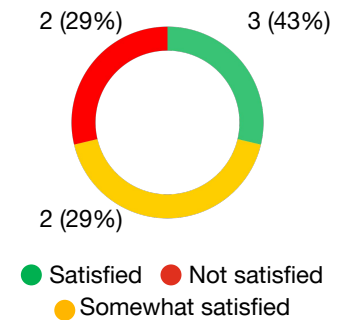
**Ease of locating DCJ's contact details for making a complaint**



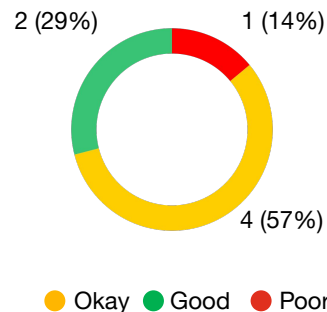
**I was kept up-to-date on the progress of my complaint**



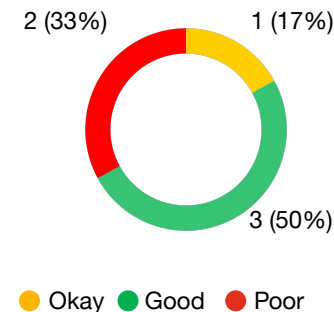
**My experience with DCJ complaints handling process**



**Experience with EFCU**



**Experience with the local office**



The data presented on this page does not represent a statistically significant sample and should be read in that context.

## 2. Stakeholder surveys (continued)

### What worked well:

#### NGO Complaints Handling Survey

- Easy to use Referral Template Form.
- Responsiveness from the EFCU team.
- Clear timelines for when responses are due to be provided.

*The format of the complaint we receive from the complaints unit is clear. It highlights the complaint, the response that the complainant is seeking as well as a clear timeframe on when to complete.*

*Anonymous, NGO Complaints Handling Survey*

#### Complainants Experience Survey

- Initial triage of the complaint through the EFCU team.
- The complaints handling process was straightforward.
- Desired outcome for raising the complaint was achieved in most instances.

*You don't want to make a complaint but sometimes the only way to have something looked at is to make a complaint.*

*Anonymous, Complainant Experience Survey*

### Areas for improvement:

#### NGO Complaints Handling Survey

- Close the Loop Communication - confirmation of when a complaint has been closed and date of resolution.
- Faster provision of complaint from DCJ to NGO.

*Complaints have been managed and handled correctly when speaking with the Enquiry, Feedback and Complaints Unit, however I do not feel the same process is undertaken when speaking with the other areas.*

*Anonymous, NGO Complaints Handling Survey*

*Communicate closure of a complaint and date of resolution.*

*Anonymous, NGO Complaints Handling Survey*

#### Complainants Experience Survey

- Lack of communication and not being kept informed as to the progress of the complaint.
- Lack of guidance on how to make a complaint.
- Difficulty in locating information for where to make a complaint (e.g. website, telephone number) where an existing service user has not been provided with contact information from a service.
- Timeframes to respond to a complaint are long.

*There needs to be more encouragement to come to the EFCU if there is an issue.*
















*Anonymous, Complainant Experience Survey*



# 3. Detailed findings


## Summary of Findings


The individual findings identified by the review are summarised in the table below.


Ref	Findings	Rating	Root Cause
3.1	Not all complaints are communicated to the EFCU	Medium	  
3.2	KPIs are not consistently measured or met	Medium	 
3.3	Reporting is incomplete and not consistently performed	Medium	  
3.4	Complaints processes are not fully aligned with the NSW Government's Commitments to effective complaint handling	Medium	   
3.5	Inconsistent approaches to complaint handling by district and local offices	Low	 
3.6	Policies and Procedures are incomplete or out of date	Low	


Detailed findings and recommendations are included in Section 3 of this report.

### Root Cause

 Policy - Finding either requires a new policy or a review of how the policy is applied

 People - Finding is specific to a person, human error or training requirement

 Process - Finding relates to a gap in process

 System - Finding relates to an Information Technology configuration



# 3.1 Not all complaints are communicated to the EFCU

**Rating: Medium**

## Observations

Complaints received by the EFCU follow an established process, with pro-forma documents used to manage the investigation of the complaint by the district offices, local area offices and NGOs. The Satisfy system used to record the progress of the complaint and TRIM is used to store key documents.

We understand that not all complaints relating to out of home care are managed by the EFCU, refer to the table opposite. Whilst the EFCU has a very structured way of dealing with complaints this process is not used for other complaint channels, as such complainants may have difference experiences.

During interviews with local area offices and district offices we identified instances where the same complaint has been received through different complaint avenues and responded to by different parties.

We note that the EFCU previously had view only access to Ministerial complaints to ensure visibility, prevent duplication of complaint responses and advise complainants of the status / progress of their complaint post contact being made with the EFCU.

## Implication

Complainants may have a difference experience depending on which avenue they choose to make their complaint. Whilst the EFCU has established processes to ensure a consistent level of service, other channels may not.

It is highly likely that DCJ does not have a holistic view of all out of home care complaints received resulting in duplication of resources and effort to respond to complaints which may have been lodged through several complaints avenues.

The absence of a single source of truth for complaints limits DCJ's ability to analyse complaint data to identify themes and root causes of complaints.

## Complaints

	<b>EFCU (Formal Complaint)</b>	<b>Direct to the District</b>	<b>Ministerial (inc local MP)</b>	<b>NSW Ombudsman</b>
Receipt of complaint	Email, telephone, writing	Email, telephone, writing, direct walk-in, MP, Ombudsman	Local Member for Parliament (MP)	NSW Ombudsman
Template	EFCU Referral Form - Part 1 & 2	Variable (outside of scope of current audit)	Briefing Note	Briefing Note
Technology used	EFCU - Satisfy Some Local Areas - MiniApp TRIM	Allocations Mailbox Microsoft Excel	MiniApp TRIM	MiniApp TRIM
EFCU involvement	Yes	On Occasion	On Occasion	On Occasion
Resolution pathway	EFCU > District Office > Local Area Office > Local Area Manager > District Director* > EFCU	District Office > Local Area Office > Local Manager > District Director*	District Office > Local Area Office > Local Manager > District Director*	District Office > Local Area Office > Local Manager > District Director*

*\*Additional review steps may be required if the complaint is deemed contentious, including Review and Endorsement District Director > Review and Endorsement Deputy Secretary > Review and Endorsement Secretary*

## 3.1 Not all complaints are communicated to the EFCU

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### Management Actions

### Action Owner, Due Date

3.1.1 - To minimise concerns regarding complaints potentially not being recorded centrally, training and policy documents will be revised and updated to ensure all DCJ Districts refer complaints to EFCU, where appropriate.

DCJ Enquiries, Feedback and Complaints Unit  
Due Date: 01/02/2022

3.1.2 - In instances where complainants have lodged a matter with the Minister's Office, EFCU will have increased system access to review the correspondence, providing improved visibility of potentially systemic issues.

DCJ Enquiries, Feedback and Complaints Unit  
Due Date: 01/12/2021

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## 3.2 KPIs are not consistently measured or met

**Rating: Medium**

### Observations

The FACS Complaints and Feedback Management Policy states:

*“We will: b) deal with complaints in a timely manner - we aim to acknowledge customer feedback within 2 business days, and generally resolve any issues within 20 business days” (p. 11).*

Internal Audit assessed the design and operational effectiveness of key controls relating to KPIs within the EFCU.

The following design effectiveness observations were noted:

**Performance measures were not formally monitored or reported on,** including:

- The KPI for resolution of complaints within 20 business days was not reported in the EFCU annual or quarterly reporting templates.
- Standard call centre KPIs and use of Genesys (contact centre software) are monitored, however they are not documented in EFCU Procedural Manuals.

**No automated advance notification of 20 day KPI** - The EFCU complaints handling system Satisfy does not currently provide advanced notification when a complaint is approaching the 20 day KPI, instead notification is provided once the deadline has been exceeded.

The following operational effectiveness observations were noted:

**Complaints exceeded the 20 day KPI in 9 out of the 25 samples reviewed.**

This was also borne out in the NGO survey, whereby less than half of respondents thought the process was responsive and timely (refer Section 2 of this report).

Per management, resolution delays are mostly caused by:

- Difficulty contacting the Complainant (for instance, complainant health issues, incorrect contact details provided).
- Further investigation required at a district office or local area office level.
- Other complexities such as ongoing Children’s Court Proceedings or field assessments required.

We note that representatives from all six district offices and local area offices were unaware of DCJ’s public facing complaint resolution time frame when interviewed, instead advising that timeframes for which to respond to complainants were supplied in the complaint notification email from the EFCU team. This notification email only contains the EFCU requirement and does not contain details of the public facing KPI.

### Implication

The overall performance of the EFCU may not be adequately monitored through effective KPIs. This could impact its ability identify performance or operational issues that may be impacting complainants.

## 3.2 KPIs are not consistently measured or met (continued)

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<b>Management Actions</b>	<b>Action Owner, Due Date</b>
3.2.1 - DCJ internal reports will have an increased focus and clear guidelines on District KPI adherence. It is noted that EFCU's requirements and the public facing KPI's are the same metrics.	DCJ Enquiries, Feedback and Complaints Unit Due Date: 01/12/2021
3.2.2 - EFCU will increase internal reporting to monthly regarding unit performance and continue providing quarterly data to the NSW Ombudsman for independent review.	DCJ Enquiries, Feedback and Complaints Unit Due Date: 01/12/2021
3.2.3 - In addition to exploring NGO feedback through further consultation, our complaint referral form to NGOs will be updated with further details of the complaints process and offer increased direct assistance to manage complaints and clients.	DCJ Enquiries, Feedback and Complaints Unit Due Date: 01/12/2021

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## 3.3 Reporting is incomplete and not consistently performed

**Rating: Medium**

### Observations

The FACS Complaints and Feedback Management Policy states:

*'We will record, review and report on complaints handling data as part of our commitment to continuous improvement' (p. 11).*

### Not all complaints captured

Complaints managed by the EFCU are captured in the Satisfy system. However, report data only includes complaints that have been entered into the Satisfy system and does not capture complaints that followed other pathways (refer to Finding 3.1).

### Report distribution

For complaints captured in Satisfy, every quarter data is manually extracted for reporting provided by the EFCU to the 15 district offices. It is also provided to the Statewide Contracts team for the manual production of quarterly dashboards. These dashboards are used by the Prudential Oversight team and distributed to over 50 NGO's and DCJ contract managers to facilitate performance discussions at contract meetings.

From discussion with a sample of district offices, local area offices and NGO representatives, we noted the following areas that could be improved:

- Quarterly reports have not been consistently provided by the EFCU team to all 15 district offices. Five out of six district and local area offices consulted reported that they had not received a recent quarterly report (the EFCU advised that March 2021 quarterly report was not provided to stakeholders as the unit is currently reviewing the content).
- Quarterly reports had not been provided from the Prudential Oversight team to the four NGOs with whom we consulted.

### Report content

The FACS Complaints and Feedback Management Policy states:

*'The Central Complaints Management Reporting function within FACS aims to provide reports on complaints and feedback trends and insights that will help inform improvements in services and business processes' (p. 12).*

From review of reports produced it was noted that these did not fully align with the NSW Government's Commitments to Effective Complaint Handling, refer to Table below:

#### NSW Govt. Commitments to Effective Complaint Handling Requirements\* - EFCU current practice observations

#### Commitment 6: Transparency

We record and analyse information on our complaint handling processes, including:

- a) ✓ the number of complaints received
- b) ✓ the number of complaints finalised
- c) ⊕ the percentage of complaints finalised within our KPIs
- d) ✓ the issues raised by complainants
- e) ✓ the actions taken in response to complaints
- f) ⊕ the systemic issues identified
- g) ✓ the number of requests received for internal and/or external review.

*\*please note a full listing of the NSW Government Commitment requirements can be found in Appendix A of this report.*

Key:

- ✓ - The EFCU's current practices meet this expectation
- ⊕ - The EFCU's current practices could be improved
- ✗ - The EFCU's current practices does not meet this expectation

## 3.3 Reporting is incomplete and not consistently performed (continued)

Additionally, we noted that **the report template does not allow for performance comparison**. The current reporting template provides quantitative, static analysis of complaints data with no trend analysis or comparison to previous quarters. This makes it difficult to ascertain performance improvements.

The report details the number of complaints in each category and sub-category, however it does not delve into the root causes of the issues.

### Implication

Business areas are unable to track performance and make informed decisions associated with the management of complaints. Issues may not be identified and remediated.

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### Management Actions

### Action Owner, Due Date

3.3.1 - Updated reporting will resume, based on the recommendations made by the internal audit.	DCJ Enquiries, Feedback and Complaints Unit Due Date: 01/12/2021
3.3.2 - EFCU will meet with each District to present the new reporting and how to interpret the data as part of regular Quarterly Business Reviews.	DCJ Enquiries, Feedback and Complaints Unit Due Date: 01/02/2022

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# 3.4 Complaints processes are not fully aligned with the NSW Government's commitments to effective complaint handling

**Rating: Medium**

## Observation

The NSW Government's Secretaries Board endorsed the implementation of the *NSW Government's Commitments to Effective Complaint Handling (the Commitments)* in recognition (1) of the value and importance of complaints and (2) the need for a consistent approach to best practice complaint handling.

From a review of process documentation, walkthroughs of key processes and review of Satisfy and survey data (refer Survey Findings), it was identified that the DCJ complaint handling processes are not aligned to the Commitments in some instances. The results of the review are presented in the table opposite and on the next page (refer to Appendix A for a full list of the Commitments).

Note 1: These figures are based on the data provided on page 6 of this report. They do not represent a statistically significant sample and should be read in that context.

**Key:**

- ✓ - The EFCU's current practices meet this expectation
- ⦿ - The EFCU's current practices could be improved
- ✗ - The EFCU's current practices does not meet this expectation

### NSW Govt. Commitments to Effective Complaint Handling Requirements\*

### DCJ / EFCU current practice observations

#### Commitment 2: Information and accessibility

⦿ We make it easy and accessible for you to make a complaint.

✓ You can readily access information about our complaints processes in a variety of formats and across a range of media.

This information includes:

b) ⦿ what you can expect about the process - for example, next steps and time frames

d) ✗ examples of how complaints have helped improve our services.

- The 'Contacting the Community Services, Enquiry, Feedback and Complaints Unit' printed materials lists an outdated contact number as well as the current EFCU number. Of the 7 complainants we spoke to, 3 identified difficulties in locating contact details for DCJ (Note 1).

- Public facing information (pamphlet, website) does not include information on the next steps for complaints.

- Examples of service improvements implemented post complaint have not been made publicly available on the website.

#### Commitment 3: Good communication

We keep you informed about the status of your complaint by:

a) acknowledging receipt of your complaint and providing you with information which includes:

iii) ✓ the expected time frame to finalise your complaint.

b) ⦿ providing you with updates on your complaint at regular intervals as specified in our procedures

- The *FACS Complaints and Feedback Management Policy* states: 'We will keep people or their representative informed about the status of their complaint, from beginning to end, about the progress, or any delays in resolving the complaint'. 5 out of the 7 complainant interviewed stated that this did not occur. However, we note that EFCU records indicated that the outcome of the case was communicated to all 7 complainants interviewed. (Note 1).

\*please note a full listing of the NSW Government Commitment requirements can be found in Appendix A of this report.



# 3.4 Complaints processes are not fully aligned with the NSW Government's commitments to effective complaint handling (continued)

NSW Govt. Commitments to Effective Complaint Handling Requirements\* (continued)

DCJ / EFCU current practice observations (continued)

## Commitment 5: Timeliness

- b) ⦿ We have set and made public expected time frames and KPIs for finalising complaints which recognise the differing levels of seriousness, urgency and complexity of complaints received.
- c) ⦿ If there are unavoidable delays in dealing with your complaint, we will inform you and explain the reasons.

- Whilst we acknowledge that a KPI has been established, it does not account for the differing levels of seriousness, urgency and complexity of a complaint.

- Interviews with district office representatives identified that complainants were not always informed if there was a delay in dealing with their complaint. Complainant interviews confirmed this as 5 of the 7 of complainants (Note 1) spoken to identified that they were not always kept informed as to delays in responding to their complaint. Additionally, of 20 NGO's surveyed 1 responded Strongly Disagree, 4 Disagree and 6 provided a Neutral response to indicate that they did not find the complaints process responsive or timely.

Note 1: These figures are based on the data provided on page 6 of this report. They do not represent a statistically significant sample and should be read in that context.

Key:  
✔ - The EFCU's current practices meet this expectation  
⦿ - The EFCU's current practices could be improved  
✘ - The EFCU's current practices does not meet this expectation

## Implication

DCJ complaint handling processes are not fully aligned to best practice complaint handling practice as identified by the NSW Government.

## Management Actions

## Action Owner, Due Date

- 3.4.1 - DCJ complaint printed materials will be updated. DCJ Enquiries, Feedback and Complaints Unit  
Due Date: 01/02/2022
- 3.4.2 - DCJ's website will include additional information regarding the complaint process, including examples of how complaints have helped improve our service. DCJ Enquiries, Feedback and Complaints Unit  
Due Date: 01/01/2022
- 3.4.3 - EFCU will formally seek regular feedback from complainants regarding their experience with the complaints process at intake and local levels. Management will review this feedback and consider if further changes can be made, including improvements to communication when delays occur. DCJ Enquiries, Feedback and Complaints Unit  
Due Date: 01/02/2022
- 3.4.4 - DCJ will consider setting formal staggered KPI targets for more complex cases (i.e. 40 days and 60 days). DCJ Enquiries, Feedback and Complaints Unit  
Due Date: 01/02/2022

## 3.5 Inconsistent approaches to complaint handling by district and local offices

Rating: Low

### Observations

The EFCU complaints handling policies and procedures are documented in the *FACS Complaints and Feedback Management Policy* and the *Community Services Enquiry, Feedback and Complaints Unit Procedures Manual*.

Review of the documentation and discussion with stakeholders noted the following positive observations and issues:

- ✓ The **EFCU Complaint Referral Form Template** was completed and uploaded to Satisfy in all 50 complaint and enquiry samples examined.
- ✓ The **FACS Complaints and Feedback Management Policy** aligns with all six of the *NSW Government's Commitments to Effective Complaint Handling*.
- ✓ The **EFCU team** is experienced and has low rates of turnover. Members of the team have served in the EFCU for a number of years.
- ✓ The **EFCU team** is well regarded within the DCJ district's and local area offices.

Whilst sample testing showed that the EFCU's referral form template was used consistently in the complaints process, the following areas for improvement were identified for complaints that follow the EFCU pathway:

- **Processes and systems to manage complaints varied between the DCJ district offices and local area offices.** Complaints are initiated when formal complaints are forwarded from the EFCU via email to district offices. The district offices and local area offices used a combination of a centralised mailbox, the creation of their own Microsoft Excel tracking sheet or the use of the MiniApp system to monitor, track and respond to complaints.

- **Inconsistent utilisation of the EFCU team by the business** - one of the six district offices and local area offices frequently referred complaints back to or sought assistance from the EFCU team for support in the management of difficult or aggressive complainants, whereas other sampled district / local area offices did not. Additionally, only 50% of NGOs surveyed felt they received support from DCJ when resolving complaints.
- There is a **limited understanding of the EFCU Officer's role by DCJ stakeholders**, for example, there was limited knowledge in the district offices and local area offices surveyed that the EFCU acts to resolve queries before they become formal complaints.

### Implication

Different approaches taken by district offices and local area offices could result in complainants receiving inconsistent levels of customer service and KPIs not being met.

### Management Actions

3.5.1 - EFCU will review policies and procedures to ensure the most contemporary practices are captured, subsequently EFCU will work collaboratively with each District to ensure they are adhering to these documents.

3.4.2 - EFCU will provide training and documentation to all Districts regarding the role of the unit and assist building local knowledge to enhance the transparency of the complaints process when discussions are held with clients.

### Action Owner, Due Date

DCJ Enquiries, Feedback and Complaints Unit

Due Date: 01/01/2022

DCJ Enquiries, Feedback and Complaints Unit

Due Date: 01/02/2022

## 3.6 Policies and procedures are incomplete or out of date

Rating: Low

### Observations

A consistent set of standard policies, procedures, templates / guidance materials should be in place to help inform the feedback and complaints management process, guide compliance and ensure consistent application.

FACS Complaints and Feedback Management Policy and Manual (was due for review on 30 September 2020) and Community Services Enquiry, Feedback and Complaints Unit Procedures Manual (was dated March 2016) have not been reviewed to ensure their currency.

From review of documentation and discussion with a sample of stakeholders, the following policy and procedure design gaps were identified:

- **Formalised quality assurance processes, e.g. secondary review of complaints, within the EFCU have not been documented** - currently the Client Services Manager reviews complaint files on an ad hoc basis to ensure complaints / enquiries have been correctly captured by the EFCU team in Satisfy. This process has not been formally captured within the EFCU Procedural Manual.
- **Lack of escalation of complaints based on defined thresholds** - current procedures do not include defined escalation points for complaints based on threshold tolerance points. For instance, it is not clear when a complaint requires review from senior stakeholders.
- **Procedures are siloed** - Documented procedures currently address localised departmental processes (e.g. EFCU) however, there is no holistic procedure describing the end-to-end process, including procedures to be followed at the district offices and local area offices.

Also identified were differing endorsement DCJ position titles in *A Guide to Ministerial Responses*, with responses in the guide required to be provided to the Deputy Secretary Cluster Issues Management, compared to procedural documentation - *Community Services Enquiry, Feedback and Complaints Unit Procedures Manual* stating responses should be forwarded to the Director Child Protection Helpline for endorsement prior to the Deputy Secretary's Office.

### Implication

Complaints may be managed differently within teams or across DCJ, resulting in an inconsistent experience for complainants. Staff may be confused by differing requirements included in guidance.

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### Management Actions

### Action Owner, Due Date

3.5.1 - Policies and procedures that were awaiting the outcome of the audit will now be reviewed. This will include ensuring the formal review requirements and escalation points are accurate.

DCJ Enquiries, Feedback and Complaints Unit  
Due Date: 01/01/2022

3.5.2 - A separate document that contains the end-to-end steps to be undertaken by local offices for their component of complaint resolution will be created.

DCJ Enquiries, Feedback and Complaints Unit  
Due Date: 01/01/2022

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# Appendices



# Appendix A. NSW Ombudsman - The whole of government commitments to effective complaint handling

## Policy and Procedure Review

A review of the DCJ complaints handling policy and procedures were undertaken in alignment with the *NSW Government's Commitments to Effective Complaint Handling (the Commitments)* as the benchmark for best practice complaint handling within Government services. Refer to Finding 3.5 for instances of DCJ / EFCU misalignment to the Commitments.

A full listing of the Commitments is shown below:

NSW Govt. Commitments to Effective Complaint Handling Requirements	DCJ / EFCU current practice observations
<p><b>Commitment 1: Respectful treatment</b></p> <p>We treat you with courtesy and respect. We are responsive and will ensure you receive no detriment for having complained.</p> <ul style="list-style-type: none"><li>a) We have a complaint policy that requires staff to treat you with courtesy and respect</li><li>b) Our public contact staff are trained in customer service, complaints and managing unreasonable behaviour</li><li>c) We review the type and number of complaints we receive about our staff, and take appropriate action to respond as necessary.</li></ul>	<p>We treat you with courtesy and respect. We are responsive and will ensure you receive no detriment for having complained.</p> <ul style="list-style-type: none"><li>a) ✓ We have a complaint policy that requires staff to treat you with courtesy and respect</li><li>b) ✓ Our public contact staff are trained in customer service, complaints and managing unreasonable behaviour</li><li>c) ✓ We review the type and number of complaints we receive about our staff, and take appropriate action to respond as necessary.</li></ul>

Key:

- ✓ - The EFCU's current practices meet this expectation
- - The EFCU's current practices could be improved
- ✗ - The EFCU's current practices does not meet this expectation

# Appendix A. NSW Ombudsman - The whole of government commitments to effective complaint handling

## Commitments (continued)

Key:

- ✓ - The EFCU's current practices meet this expectation
- - The EFCU's current practices could be improved
- ✗ - The EFCU's current practices does not meet this expectation

### NSW Govt. Commitments to Effective Complaint Handling Requirements

### DCJ / EFCU current practice observation

#### Commitment 2: Information and accessibility

We make it easy and accessible for you to make a complaint and if you need help to lodge a complaint we will help you. You can readily access information about our complaints processes in a variety of formats and across a range of media. This information includes:

- a) available avenues to make a complaint - for example electronic (email and online), in person, in writing etc
- b) what you can expect about the process - for example, next steps and time frames
- c) a contact point to enable you to get more information about the complaint process
- d) examples of how complaints have helped improve our services.

- We make it easy and accessible for you to make a complaint.
- ✓ If you need help to lodge a complaint we will help you.
- ✓ You can readily access information about our complaints processes in a variety of formats and across a range of media.

This information includes:

- a) ✓ available avenues to make a complaint - for example electronic (email and online), in person, in writing etc
- b) ○ what you can expect about the process - for example, next steps and time frames
- c) ✓ a contact point to enable you to get more information about the complaint process
- d) ✗ examples of how complaints have helped improve our services.

#### Commitment 3: Good communication

We keep you informed about the status of your complaint by:

- a) acknowledging receipt of your complaint and providing you with information which includes:
  - i) a contact point for enquiries
  - ii) the likely next steps in the complaint process
  - iii) the expected time frame to finalise your complaint.
- b) providing you with updates on your complaint at regular intervals as specified in our procedures
- c) communicating the outcome of your complaint and the reasons for the outcome through the most appropriate channel
- d) providing you with information about internal and external avenues of review where available.

We keep you informed about the status of your complaint by:

- a) acknowledging receipt of your complaint and providing you with information which includes:
  - i) ✓ a contact point for enquiries
  - ii) ✓ the likely next steps in the complaint process
  - iii) ✓ the expected time frame to finalise your complaint.
- b) ✗ providing you with updates on your complaint at regular intervals as specified in our procedures
- c) ✓ communicating the outcome of your complaint and the reasons for the outcome through the most appropriate channel
- d) ✓ providing you with information about internal and external avenues of review where available.

# Appendix A. NSW Ombudsman - The whole of government commitments to effective complaint handling

## Commitments (continued)

Key:

- ✔ - The EFCU's current practices meet this expectation
- ⦿ - The EFCU's current practices could be improved
- ✘ - The EFCU's current practices does not meet this expectation

### NSW Govt. Commitments to Effective Complaint Handling Requirements

### DCJ / EFCU current practice observations

#### Commitment 4: Taking ownership

The staff who manage your complaint are appropriately trained and skilled. One person and/or a team is responsible for managing your complaint, and their contact details are made available to you. We will inform you if your complaint is transferred to another person or team.

- ✔ The staff who manage your complaint are appropriately trained and skilled.
- ✔ One person and/or a team is responsible for managing your complaint, and their contact details are made available to you.
- ✔ We will inform you if your complaint is transferred to another person or team.

#### Commitment 5: Timeliness

We do our best to deal with your complaint as soon as possible. We have set and made public expected time frames and KPIs for finalising complaints which recognise the differing levels of seriousness, urgency and complexity of complaints received. If there are unavoidable delays in dealing with your complaint, we will inform you and explain the reasons.

- ✔ We do our best to deal with your complaint as soon as possible.
- ⦿ We have set and made public expected time frames and KPIs for finalising complaints which recognise the differing levels of seriousness, urgency and complexity of complaints received.
- ⦿ If there are unavoidable delays in dealing with your complaint, we will inform you and explain the reasons.

#### Commitment 6: Transparency

We record and analyse information on our complaint handling processes, including:

- the number of complaints received
- the number of complaints finalised
- the percentage of complaints finalised within our KPIs
- the issues raised by complainants
- the actions taken in response to complaints
- the systemic issues identified
- the number of requests received for internal and/or external review.

We record and analyse information on our complaint handling processes, including:

- ✔ the number of complaints received
- ✔ the number of complaints finalised
- ⦿ the percentage of complaints finalised within our KPIs
- ✔ the issues raised by complainants
- ✔ the actions taken in response to complaints
- ⦿ the systemic issues identified
- ✔ the number of requests received for internal and/or external review.



# Appendix B. Stakeholder consultations

## Stakeholder Consultations

Title
Deputy Secretary, Housing, Disability and District Services
Director, Housing Contact Centre
Client Feedback Manager, EFCU
EFCU Officer x3
DCJ Manager, Prudential Oversight, Partnerships
DCJ Senior Project Officer, Prudential Oversight, Partnerships
DCJ Manager Social Impact and Reporting, Statewide Contracts, Partnerships
Manager Client Services Joint Child Protection Response (JCPR) Program, Northern

# Appendix B. Stakeholder consultations (continued)

## Stakeholder Consultations (continued)

### Title

DCJ District Executive Officer, Mid North Coast, Northern NSW & New England

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DCJ Executive Officer  
District Representative - South Western Sydney

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DCJ Manager Client Services for Central Sydney CSC  
District Representative - Northern Sydney

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DCJ Manager Client Services for Dubbo  
District Representative - Western Sydney

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DCJ Senior Communications Officer Murrumbidgee, Far West & Western NSW Districts  
District Representative - Western Sydney

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DCJ Senior Project Officer - Business & Executive Support Team  
District Representative - Hunter Central Coast

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National Complaints Manager, Life Without Barriers

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Executive Officer, SDN Children's Services

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Operations Manager - Permanency Support, Veritas House

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Pathfinders

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# Appendix C. Scope of work

## Objective and Scope

The objective of this internal audit was to assess the Enquiry, Feedback and Complaints Unit's (EFCU) handling and resolving of complaints through review of processes and controls and consultations with key stakeholders.

This review considered, where applicable, the 2018 *NSW Ombudsman's Complaint handling improvement program Commitments implementation review's* 6 key commitments to effective complaint handling: Respect, Information & Accessibility; Communication; Ownership; Timeliness; and Transparency.

It also considered, where applicable, the Department's progress against *Chapter 8 Recommendation 10* from the *Family is Culture* report, whereby:

- The Department of Communities and Justice should conduct an independent review of its internal complaints handling system, with a view to developing a complaints system that is:
  - a. transparent and accessible;
  - b. child friendly;
  - c. empowered to resolve complaints adequately;
  - d. developed in consultation with Aboriginal communities
  - e. supported by a Charter of Rights and Responsibilities for Aboriginal Families. This system should also employ Aboriginal staff in key roles.

## Approach

### Stream 1: Consultations with key stakeholders

Engaged with key external stakeholders such as NGOs, out of home care providers and complainants to understand their views on the complaints progress, focussing on the customer experience, quality of information and communications and resolution of complaints.

This stream leveraged an online survey tool and email communications to gather feedback from the approximately 31 relevant NGOs and out of home care providers involved in the complaints handling process. A sample of respondents was contacted for further consultations to deep-dive into specific areas of feedback. A sample of complainants were also contacted directly for their feedback.

### Stream 2: Process and Controls Review

Conducted an end-to-end internal audit of the EFCU's processes and controls relating to complaints handling, focussing on:

- Strategy & Governance
- Process & Procedures
- People
- Systems & Data
- Investigations Management

This stream involved detailed walkthroughs of key processes and assessment of the design and operating effectiveness of key controls.

## Compliance Statement

This review was completed in full compliance with Treasury Policy Paper TPP 20-08 Internal Audit and Risk Management Policy for the General Government Sector which stipulates the application of the Institute of Internal Auditors (IIA) International Standards for the Professional Practice of Internal Auditing (the IIA Standards) in the NSW public sector.

# Appendix C. Scope of work (continued)

## Risk and Control Objectives

The risks below have been identified based on preliminary scoping discussions as well as our knowledge from previous work in this subject area. They have been split into those risks applicable to both grants and specific risks for each grant. Preliminary scoping discussions have revealed the following areas of focus, risks, and control objectives:

Process / Activity	Risks	Expected Controls
Strategy & Governance	<ul style="list-style-type: none"> <li>The Complaints Handling process does not deliver quality outcomes due to inadequate governance and oversight processes in place</li> </ul>	<ul style="list-style-type: none"> <li>A complaints handling strategy exists and is aligned to better practice / NSW Government guidelines.</li> <li>Approved policies and procedures cover all aspects of the complaints handling process, including customer experience.</li> <li>Legal and regulatory controls and oversight exist in the complaints management process.</li> <li>Standard common reporting and KPIs exists and is shared with third party service providers where appropriate.</li> <li>Roles and responsibilities have been defined and are understood.</li> </ul>
Process and Procedures	<ul style="list-style-type: none"> <li>Standardised processes and procedures are not in place for the complaints handling end-to-end process</li> </ul>	<ul style="list-style-type: none"> <li>Standard processes and procedures (including secondary review) exist and are followed.</li> <li>Processes and procedures are aligned to the NSW Government's 7 key commitments to effective complaint handling.</li> <li>Common escalation triggers have been identified and defined and are incorporated into escalation procedures.</li> <li>Continuous improvement processes are in place to identify and implement improvements to the process.</li> <li>The EFCU's performance is measured against defined strategic objectives</li> </ul>

# Appendix C. Scope of work (continued)

## Risk and Control Objectives (continued)

Process / Activity	Risks	Expected Controls
People	<ul style="list-style-type: none"> <li>Staff responsible for the complaints handling processes are not provided with the tools, training and guidance to deliver success.</li> <li>Performance and metrics are not monitored.</li> <li>Staff are not aware of their responsibilities.</li> </ul>	<ul style="list-style-type: none"> <li>Complaints handling training is provided and competency evaluated.</li> <li>Specific training is provided on identification of high-risk complaints.</li> <li>Performance is monitored and assessed.</li> <li>A wellness framework exists to support staff dealing with complex customer behaviour.</li> <li>Employees are provided with relevant tools, knowledge and support to deliver manage the complaints process.</li> </ul>
Systems & Data	<ul style="list-style-type: none"> <li>Systems do not support effective execution of the complaints handling process.</li> </ul>	<ul style="list-style-type: none"> <li>Consistent set of policies, procedures, systems and tools are in use for managing complaints.</li> <li>Feedback and complaint data is aggregated from all sources (online, phone, etc.)</li> <li>Analytical techniques are used for gaining insights from interactions and complaints and triage accordingly.</li> <li>Regular management reporting is in place to manage the complaints process.</li> </ul>
Investigations Management	<ul style="list-style-type: none"> <li>Investigations are conducted inconsistently with mixed outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>Complaints investigations process is documented and understood.</li> <li>Standardised documents are used throughout the process.</li> <li>Clear escalation processes exist and are followed.</li> <li>Clear resolution processes exist and are followed.</li> <li>Management reporting and oversight is in place.</li> </ul>

# Appendix D. Classification of internal audit issue ratings

Each of the report findings has been allocated a Risk Rating in accordance with the Department's Enterprise Risk Management risk matrix to indicate to management the level of attention is required to reduce its probability and/or impact to manage the risk.

Risk Rating	Strategy Category
Very High	Immediate detailed planning and action required at senior levels to determine how to reduce the risk and regular monitoring of progress by senior management.
High	Senior management attention and monitoring of progress with risk management action is required.
Medium	Management responsibility to be specified, monitor and review response action as necessary.
Low	Manage through existing processes and procedures.

In determining the Risk Rating for each of the findings we have considered both:

- the impact of event which is not covered by existing controls, and
- the probability / likelihood of this event occurring.

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