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Complaints Handling Policy

Purpose and Scope

The policy outlines Orthopaedic Outreach’s commitment to seeking and responding to external feedback and complaints about any aspect of Orthopaedic Outreach’s work in Australia and overseas. Orthopaedic Outreach welcomes all feedback that may improve the quality of its work, enhance the trust and confidence of stakeholders, identify areas of work that may need to be improved, and ensure Orthopaedic Outreach learns from the feedback provided through this process. Therefore, Orthopaedic Outreach welcomes feedback and will react constructively to complaints from the people it works with - its supporters, donors, the general public, official bodies, and its partners.

This policy deals solely with external grievances. While the policy needs to be understood and used by all staff, Directors, volunteers and in-country volunteers/observers, this policy only covers complaints made by those external to Orthopaedic Outreach including:

- A person with whom Orthopaedic Outreach works to deliver its international programs including local partners, organisations, and national governments;
- Other NGOs;
- Members of the Australian public;
- Supporters, donors, trusts, and foundations; and
- The Australian Government

Internal issues and grievances made by staff and volunteers are dealt with in discussion with management and in accordance with Orthopaedic Outreach’s Grievance and Dispute Resolution Policy. Internal complaints regarding serious misconduct or wrongdoing should be made through the Orthopaedic Outreach Whistle-blower Policy procedures.

Definitions

A complaint	“an external grievance made against Orthopaedic Outreach or against one or more of its Directors, employees, volunteers, partner organisations or anyone else acting officially on its behalf, where the organisation has allegedly failed to meet a requirement or legitimate expectation. The complaint might be related to Orthopaedic Outreach’s use of resources, mission and values, particular individuals’ conduct/behaviour, legal requirement, or any other expression of dissatisfaction with the organisation’s performance.”
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Legislative Framework and Standards

Orthopaedic Outreach is a signatory to the ACFID (Australian Council For International Development) Code of Conduct and is committed to recognising the importance and value of listening and responding to concerns and complaints and ensuring all stakeholders are enabled to make



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complaints to the organisation in a safe and confidential manner. (Commitment 7.3.3. ACFID Code of Conduct).

Orthopaedic Outreach will manage all complaints responsively and fairly and will meet the following minimum standards:

- a) Complainants will be treated respectfully and without prejudice, irrespective of age and gender.
- b) All information provided will be treated with the strictest confidentiality and any sharing of information will only be made with the permission of the parties involved.
- c) All complaints will be acknowledged, investigated, and resolved in a timely manner.
- d) Orthopaedic Outreach aims to resolve complaints within one month of receipt. If a complaint is unable to be resolved within one month, the complainant will be provided with monthly updates until the complaint is resolved.
- e) All parties will be kept informed of the actions being taken and the progress of the complaint, subject to applicable legislation and legal advice.
- f) All complaints will be acknowledged within five working days from receipt.
- g) Where complaints are unable to be promptly resolved, complainants will be provided with a copy of Orthopaedic Outreach Complaints Handling Policy.
- h) Once resolved, complainants will be provided with a detailed response to their complaint giving the outcome (within applicable legislation, legal advice, and Code practice requirements).

Procedure/Policy Statement

The following principles will guide Orthopaedic Outreach's complaints handling process:

- **Accessibility:** the process for making complaints is readily accessible to all stakeholders. Complaints should be addressed to the Orthopaedic Outreach Operational Manager/Complaints Handling Officer and will be accepted in any of the following formats: telephone, facsimile, e-mail, letter and/or in person.
- **Objectivity:** all complaints are addressed in a fair and equitable, objective, and unbiased manner throughout the complaints handling process. Issues of conflict of interest will be identified to ensure objectivity.
- **Confidentiality:** confidentiality relating to the complaint will be safeguarded as required by law.
- **Customer-focused approach:** welcoming feedback, including complaints, and committing to actively resolve all complaints.
- **Responsiveness:** all complaints and constructive feedback will be taken seriously and handled as swiftly as practicable, subject to applicable legislation and legal advice. All complainants will be updated on the progress of their complaint through the complaints handling process.



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- **Accountability:** accountability for handling complaints and reporting on the actions and decisions of Orthopaedic Outreach with respect to complaints handling is clearly established. All complaints will be recorded through one central point before allocating responsibility to the appropriate staff member to respond.
- **Continuous improvement:** through collection and classification of complaints trends, analysis and reporting of complaints trends, monitoring of complaints handling processes, auditing/management reviews of the complaints handling process and refining of complaints handling in light of those reviews.
- **Organisational commitment to this policy:** Orthopaedic Outreach ensures sufficient resources and expertise is provided to handle complaints.

Policy in Practice

Once a complaint is received by Orthopaedic Outreach, no matter the nature or relevance of the complaint, all reasonable steps will be taken to ensure the gathering of all necessary information for the ultimate resolution of the complaint.

The process Orthopaedic Outreach follows for the initiation and resolution of complaints is as follows:

a) Receiving and Acknowledging Complaints

- People wishing to lodge a complaint with Orthopaedic Outreach can do so by phone, e-mail, letter and/or in person. This policy, specifically highlighting the central point for all complaints is also publicised on Orthopaedic Outreach's website
- The member of staff receiving the complaint is empowered in the first instance to deal with the complaint and enact any steps to resolve the complaint at the initial point of contact. All complaints must be logged in the Complaint Record Form
- If the complaint is unable to be resolved at this first point of contact, then the staff member will inform the Operational Manager and/or Complaints Handling Officer.
- The Operational Manager and/or Complaints Handling Officer will ensure an acknowledgement of the complaint is provided to the complainant within five business days of the complaint being received. This acknowledgement will confirm that the complaint has been received and outline next steps, the contact officer and likely time frames.
- Where a complainant does not identify themselves, the complaint will be assessed for validity and whether further investigation or caution is called for. This will be determined by the Operational Manager and/or the Board Chair..
- Complaints about the Operational Manager should be referred to the Board Chair. To obtain their details, a complainant should contact the Orthopaedic Outreach office where an appropriate e-mail/postal address will be provided.
- If the complaint relates to an issue raised by a statutory body such as ACFID, DFAT, ATO, ASIC, ACNC, Workcover or state-based fundraising authority then the Operational Manager is to be advised immediately and will take immediate control of the complaint. Depending upon the seriousness of a complaint, the Operational Manager may escalate a complaint for the Board for Directors' input, involvement and/or decision, in line with Orthopaedic Outreach's Risk Management Policy.
- Primary stakeholders are provided the opportunity to contribute to team activity reports towards the completion of each team activity, which are then submitted to the Programs,



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Monitoring and Evaluation Committee upon return; alternatively, each stakeholder also has the capacity to provide direct feedback to the Board via the Operational Manager, regarding performance or direction of future program activities within their site. This feedback can be maintained confidential from the team members if requested to do so by the in-country stakeholder.

b) Registering and Analysing Complaints

- All complaints received by Orthopaedic Outreach will be recorded on the Complaints Record Form at Appendix 1.
- These forms will be collated by the Complaints Handling Officer and/or the Operational Manager and a report prepared for the Audit and Risk Committee at a minimum on a quarterly basis.
- The Orthopaedic Outreach Board has a key role in overseeing the number and nature of complaints received by Orthopaedic Outreach and ensuring they have been handled satisfactorily, that appropriate corrective action has been implemented and that trends are identified and addressed. A complaints register will be presented to the Board twice a year recording a summary of each complaint received since the last report to the Board. These will be de-identified for privacy.

c) Resolving Complaints

- Each complaint will be investigated. The person handling the complaint will establish the facts and gather the relevant information and, if necessary and/or practicable, interview those involved.
- If, as a result of the investigation, it is felt there is a case to answer by a staff member, then the appropriate disciplinary and other organisational policies and procedures will be followed (e.g. Orthopaedic Outreach's Human Resources Policy, Financial Controls policies on fraud and other irregularities and the Child Protection Policy). All relevant laws and code compliance requirements will be taken into account in determining appropriate action.
- Complainants will receive a response outlining the outcome of the complaint or, if it is a complex matter, when it will be investigated further and how long it is likely to take. Orthopaedic Outreach will let the complainant know the official response to the complaint within the boundaries of applicable law.

d) Referral Process

If a complainant is unhappy about the response received from Orthopaedic Outreach, or if they believe the corrective action has not been adequately implemented, they may refer the matter to the next level. For example:

- If the complaint is about a matter at management level, then the complainant may appeal to the Chair of the Board; and
- If the complaint is about Orthopaedic Outreach's governance, then the complainant may appeal to the Chair of the Board.

Orthopaedic Outreach is a signatory to the ACFID Code of Conduct, a voluntary, self-regulatory code that sets out an organisation's commitment to conducting its activities with integrity and



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accountability. Orthopaedic Outreach is committed to the code's standards of sustainable development, governance, and financial management.

If the complainant is concerned that Orthopaedic Outreach is not complying with the ACFID Code of Conduct, they can lodge a complaint with ACFID directly. Complaints should be marked 'confidential' and emailed or posted to:

Chair, ACFID Code of Conduct Committee
C/- ACFID
Deakin ACT 2600

Vulnerable Persons

Orthopaedic Outreach ensures that incidents impacting vulnerable people are managed appropriately. Where reports to local authorities are made regarding allegations of sexual abuse, exploitation or harassment, that this is done with the consent of the complainant/survivor. This includes:

Harassment, abuse, neglect, and exploitation are all serious misconduct, and we reserve the right to:

1. Take disciplinary action against those it believes are responsible, which may include dismissal;
2. Take civil legal action;
3. Report the matter to law enforcement.

Reporting

All staff, volunteers and third parties must, as soon as practicable, report any suspicion that an incident has taken place, may be taking place, or could take place.

They may do this through direct reporting to:

- Any Board Director;
- The Operational Manager

If a person believes that another person is at risk of immediate harm or the victim of a criminal offence, they must dial 000.

Responding to suspected incidents

All suspected, perceived, potential or actual incidents will be managed through the incident response plan.

External Reporting

Orthopaedic Outreach will:

- Report any suspicion of a criminal offence to the police or the relevant criminal judicial body;
- Meet all donor requirements regarding the reporting of incidents;

See OO-PO-01 Policy and Program Manual



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