

DEPARTMENT FOR CHILD PROTECTION

Complaints Process Review

September 2024





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Executive Summary

Project Objective

BDO was engaged to conduct an independent review of the Department for Child Protection's (DCP) complaints processes to assess the effectiveness of formal complaints management processes and systems with reference to better practice principles.

Scope

The scope of the review included:

- Reviewing and assessing the effectiveness of existing formal complaints management systems and processes adopted by DCP for the management of formal complaints. To include any legislative mechanisms which are in place to support complaints management, together with DCP's complaints management systems, policies and procedures
- Undertaking a comparison of DCP's complaint management practices relative to other SA Government Department processes and complaint management best practice
- Undertaking a case study review of a specific complaint/series of complaints as a means of gaining an insight into the way existing DCP complaints handling systems and processes work on the ground. Case studies were selected by DCP and included:
 - 2 x made by carers
 - 2 x made by biological parents
 - 2 x made by family members
 - 2 x made by children and young people
- Identifying opportunities to strengthen the management of complaints in DCP
- Developing a final review report.

The review did not include:

- Complaints other than those made by third parties who interface with DCP (i.e. internal complaints made by staff)
- Incident management
- Detailed analysis of any complaints other than the specific case studies
- Detailed analysis of any existing performance or other data regarding complaints management, beyond any high-level observations made
- Qualitative analysis of individual case files and tracking of these to monitor and measure case specific outcomes for vulnerable children and their families.

Disclaimer

The assignment is a consulting engagement as outlined in the 'Framework for Assurance Engagements', issued by the Auditing and Assurances Standards Board, Section 13. Consulting engagements employ an assurance practitioner's technical skills, education, observations, experiences and knowledge of the consulting process. The consulting process is an analytical process that typically involves some combination of activities relating to objective-setting, fact-finding, definition of problems or opportunities, evaluation of alternatives, development of recommendations including actions, communication of results, and sometimes implementation and follow-up.

This consulting engagement does not meet the definition of an assurance engagement as defined in the 'Framework for Assurance Engagements', issued by the Auditing and Assurances Standards Board, Section 10. As such, we have not sought to perform an audit in accordance with generally accepted auditing standards. Accordingly, we do not express such an audit opinion. Readers of the report should draw their own conclusions from the results of the review based on the scope, agreed-upon procedures and findings.

The nature and scope of work was determined by agreement between BDO and DCP.

Approach

Phase 1: Process Analysis

The Process Analysis phase involved a desktop review of the current policies, procedures and practices within the complaints management system, and discussion with DCP representatives, with consideration of the following:

- How the policies, procedures and practices align with each other
- How the policies, procedures and practices align with the legislative requirements within DCP and the SA Public Sector
- 'User friendliness' of the policies, procedures and practices
- Tracking and reporting of the complaints processes
- The skills and knowledge required to apply the policies, procedures and practices
- The workflows associated with the application of the policies, procedures and practices.

Phase 2: Process Assurance

The Process Assurance phase involved the following steps:

2a - Other SA Government Departments 'better practice' review:

- Compared information gathered from other SA Government departments regarding comparable complaints processes. This information was compared to the understanding gathered in Phase 1 to identify any potential differences and gaps in DCP's complaints management policies, procedures and practices
- Based on the results of the 'better practice' review, identified areas requiring improvement to strengthen complaints management processes.

2b - Application review:

- Building on the knowledge gained from Phase 1 and 2a, the eight (8) case study complaints selected were reviewed to assess their compliance with the DCP's requirements. This process also revealed any 'indicative trends/patterns' as well as 'pinch points' in the process

(Note: The case study review only considered Level 1 and Level 2 complaints processes as per the Complaints and Feedback Management Procedure. We were advised that none of the case studies tested were escalated to Level 3)

- Based on the results of the case study reviews, identified areas requiring improvement to strengthen complaints management processes.

Phase 3: Process Improvement

- Prepared draft review findings and recommendations
- Held preliminary discussions with DCP representatives to confirm accuracy of review findings and discuss recommendations.

Phase 4: Report Results

- Prepared a draft report presenting findings and recommendations and provided to DCP representatives for feedback
- Held closing meetings with DCP representatives regarding the review outcomes
- Finalised and issued the independent review report.

Good Practices Observed

Overall, our independent review highlighted a generally sound complaints management process at DCP, supported by comprehensive policies and procedures and a competent Complaints and Feedback Management Unit (CFMU). To support DCP in their continual improvement, we identified some areas to build on the existing good practice, which are detailed in the Key Findings and Recommendations.

Good practices identified from our review are summarised in the table below.

Observations	
1. Current Complaints and Feedback Management Policy and Procedure are aligned and consistent	<p>The Complaints and Feedback Management Policy (the Policy) clearly outlines the principles that underpin the complaints management process, including the agency's commitment to dealing with matters in a <i>'timely, effective and culturally safe'</i> manner <i>'that builds a culture of promoting procedural fairness and transparency in decision making'</i>. The Policy also states that DCP has modelled its process on the Australian Standard (2014) and the SA Ombudsman's recommendation for complaints handling (2018).</p> <p>The supporting Complaints and Feedback Management Procedure (the Procedure) <i>'outlines the steps that must be taken to manage complaints and feedback at the local office level and by the DCP Complaints and Feedback Management Unit (CFMU)'</i>. It aligns with the Policy, providing greater detail regarding actions required at each of the three tiered levels:</p> <ul style="list-style-type: none"> • Level 1 - Local Complaint Resolution • Level 2 - Centralised Complaint Resolution • Level 3 - External Complaint Resolution. <p>The Procedure also presents a diagrammatic illustration of the three stages of the DCP model, adopted from the Australian Standard (AS/NZ 10002:2014).</p>
2. Current Policy and Procedure aligned with legislative requirements	<p>The Policy and supporting Procedure operate within a complex operational and legislative framework given the importance of creating a safe and supportive environment for young people and their carers. Specific reference is made to the <i>Children and Young People (Safety) Act 2017</i> (CYPs Act) along with other legislation plus relevant and related DCP procedures, plans and templates/forms.</p>
3. Current Policy and Procedure are 'user friendly'	<p>Overall, the current Policy (11 pages) and Procedure (18 pages) are clearly written and presented with appropriate and contemporary language, headings and 'links'. The flow diagrams appended to the Procedures are clear and easy to follow.</p> <p>We did, however, identify some improvement opportunities for the Policy and Procedure as outlined in Finding #4.0.</p>
4. Tracking and reporting of 'contacts' and 'complaints'	<p>The CFMU currently tracks 'contacts' and 'complaints' using an Excel-based register. Contacts include requests for information or issues that can be resolved quickly. For the 2023/24 financial year these numbered 925. Complaints are generally more complicated and for the same period they numbered 251.</p> <p>The Manager CFMU reports on both 'contacts' and 'complaints' to Executive on a quarterly basis, detailing the event, action outcome and whether the CFMU met the 30 day target for complaint resolution.</p>

Observations	
5. CFMU team has the appropriate skills and knowledge	<p>The CFMU currently comprises the following staff:</p> <ul style="list-style-type: none"> • 1 x ASO8 Manager - Social Work trained with DCP case work experience • 1 x ASO7 Lead Assessment Resolution Officer - Social Work trained with DCP case work experience • 3 x ASO6 Assessment Resolution Officers - general case work experience • 1 x ASO2 - Administrative Support - vacant. <p>Our interviews with CFMU representatives indicated that the CFMU has current knowledgeable and skilled team members who appear to be positively oriented to resolving complaints.</p> <p>Given the sensitivity of the role and client groups, combined with the complexity of the legislative and operational context, it is evident that case work experience is essential with an understanding of DCP specific matters being highly desirable for CFMU staff.</p>
6. Monthly supervision of CFMU staff	<p>Interviews with the CFMU Assessment Officers indicated that much of the training for the role is on the job given the wide variety of issues they encounter. In addition to on-the-job training, 'monthly supervision sessions' are provided by the Lead Assessment Officer or Manager giving staff an opportunity for additional training and to discuss issues/concerns.</p>
7. Positive culture regarding complaints and feedback	<p>Those CFMU representatives interviewed confirmed that all forms of feedback are valued by DCP at all levels, and that the agency makes a concerted effort to demonstrate procedural fairness even though the complainant may not always be happy with the complaint resolution outcome.</p> <p>All forms of feedback appear to be viewed by the CFMU team as a vehicle for continuous improvement.</p>
8. CFMU define, distinguish and log all contacts and complaints	<p>As indicated above the CFMU makes a distinction between a 'complaint' and a 'contact'. CFMU staff triage all incoming matters so they can be handled expeditiously and by those with suitable expertise and experience. Each matter is allocated a unique identifier that facilitates actioning, tracking and reporting.</p>
9. Detailed and holistic complaints investigations	<p>Review of the eight (8) case files provided for testing suggests that the CFMU conducts detailed and holistic investigations for all complaints, especially those deemed to be complex.</p>
10. CFMU independence	<p>The organisational location of the CFMU within the Office of the Chief Executive (OCE), and separate from day to day operations, enables the Assessment and Review Officers to maintain an independent view when undertaking Level 2 complaints resolution processes and provide a fresh perspective, following Level 1 processes undertaken at the local level.</p>
11. Approval of complaints outcome letters by Director, OCE	<p>Since May 2024, the CFMU has initiated a new process whereby all complaint outcome letters are reviewed and approved by the Director, OCE, prior to provision to the complainant.</p> <p>This step serves as an additional control in the process to ensure complaint outcome letters are appropriate as well as ensuring the Director, OCE who is responsible for the CFMU is informed of all complaint outcomes.</p> <p>We note this process has not yet been included in the Procedure document (refer Finding #4.0).</p>

Key Findings and Recommendations

To further enhance the effectiveness of DCP’s complaints management processes and systems, we have highlighted a number of findings which were identified through our review, including comparison with better practice and other comparable SA government agencies (refer Appendix 2 Better Practice Benchmarking for detailed comparisons between DCP and better practice/other SA government agencies).

We have summarised our key findings and recommendations in the table below, which are expanded upon in the ‘Detailed Findings and Recommended Actions’:

Finding	Finding	Recommendations
1.0	Inconsistent application of Level 1 complaints resolution processes at local offices	<ul style="list-style-type: none"> Reiterate Level 1 complaints resolution processes with local offices, including rollout of recently developed roadshow presentation across state offices Revisit definition of ‘complaint’ in Policy and Procedure to include the concept of ‘implied complaint’.
2.0	Level 2 complaints outcome letter delays	<ul style="list-style-type: none"> Update Procedure to mandate internal responsiveness timeframes Clarify timeframe requirement for complaint outcome resolution (30 calendar days versus 30 business days) and update Procedure accordingly.
3.0	Level 2 acknowledgement to complainant anomalies	Ensure complaint acknowledgements are consistently provided to complainants within two (2) business days
4.0	Policy and procedure updates	<p>Update the Policy and Procedure as follows:</p> <ul style="list-style-type: none"> current better practice references (i.e. Australian Standard (AS/NZ 10002:2022), Commonwealth Ombudsman’s Guidelines and DPC Circular - Complaint Management (PC039) Include new process whereby Director, OCE approves of complaint outcome letters in Procedure Consider reformatting the Policy and Procedure to improve readability.
5.0	Absence of contemporary Complaint Management System (CMS) that is integrated across DCP offices and central office.	<ul style="list-style-type: none"> Investigate the operational and cost implications of activating a Complaints Management System to facilitate timely and efficient recording, monitoring and reporting of all forms of feedback.

Finding	Finding	Recommendations
6.0	Local office staff development	<ul style="list-style-type: none"> • Continue rollout of complaints management roadshow presentation to all sites • Provide supplementary training to local office staff in managing complaints and feedback, resolving conflict, facilitating negotiation and using effective communication.
7.0	Enhance robustness of complaints investigations	Consider trialling the application of a risk assessment upon referral of complaint to CFMU followed by development of investigation plan
8.0	CFMU staff succession planning and development	<ul style="list-style-type: none"> • Develop a succession plan for CFMU to ensure a consistent pool of experienced AROs • CFMU staff to receive ongoing core skills training to ensure quality consistent service.
9.0	Aboriginal and Torres Strait Islander and Culturally and Linguistically Diverse (CALD) feedback	Consider working with representatives of Aboriginal and Torres Strait Islander and CALD groups to explore alternate ways to solicit greater levels of feedback.

Detailed Findings and Recommended Actions

Finding 1.0 Inconsistent Application of Level 1 Complaints Resolution Processes at Local Offices

Observation and Implication

Our testing of eight (8) cases provided by DCP involved reviews of Level 1 complaints resolution processes and discussion with relevant local site management. We noted that two (2) of the cases tested did not involve local resolution as these cases related to a child in care and, as such, are handled directly by CFMU.

In respect of the remaining six (6) cases reviewed, the process review and interviews revealed that Level 1 complaints resolution processes, as outlined in the Policy and Procedure, did not appear to be consistently applied at local site level. Discussions indicated that, although local sites are recording interactions with carers, families and young people, matters are not always recorded as complaints at a local level. A number of local site representatives interviewed expressed difficulty in defining a complaint. As a result, it appears that case workers may be accepting tense day-to-day communications with stakeholders as normal practice, rather than understanding these interactions as an 'implied complaint' which should trigger the complaints resolution process.

By not defining such interactions as complaints, the Level 1 - Local Complaint Resolution processes, as required by the Procedure, are not always triggered and in these circumstances complaints resolution processes only commence at Level 2 - Centralised Complaints Resolution, which are undertaken by CFMU.

The consequence of inconsistent application of Level 1 complaints management processes is that there is an incomplete recording of all forms of feedback and hence an incomplete picture and understanding of complaints and concerns at a local level. It is also possible that field and office staff may not be taking full responsibility for their interactions with carers, young people and families knowing that the CFMU will resolve any concerns.

BDO has some concerns regarding the preparedness of DCP Case workers to report and manage complaints at local level. Prima facie this sees 'matters' passed too quickly to the CFMU for resolution.

Our review of complaints management policies, practices and procedures provided by the Department for Education (DfE) and Department for Correctional Services (DCS) shows that these agencies require and enforce field and local office staff and management to be heavily involved in the resolution of complaints and facilitating their escalation, if necessary. For example, DCS have effectively four (4) substages in the Level 1 assessment of a complaint before it is passed to the Prisoner Complaint and Advice Line (PCAL) team. DfE also have four (4) stages of assessment and review before matters are escalated to their Complaint and Feedback unit.

Recommendation

Level 1 local complaints resolution processes should be reiterated with local site management to ensure that staff are aware of implied complaints in their interactions with carers, young people and families, and apply the Level 1 complaints resolution process as prescribed in the Procedure. We recommend that the current training being provided to local case workers in relation to complaints management continue across all DCP sites - refer Finding #6.0.

In addition, DCP should consider revisiting the current definition of a 'complaint' in the Policy and Procedure to include the concept of an 'implied complaint' so that staff at all levels have a clear, agreed and shared understanding. The Policy and Procedure should also incorporate greater involvement by field and local office staff and management in the resolution of complaints, before passing matters to the CFMU.

Finding 2.0 Level 2 Complaints Outcome Letter Delays

Observation and Implication

The Procedure requires complaint outcome letters to be provided to complainants within 30 business days of receiving the complaint. In contrast, the complaint acknowledgement letter provided to complainants on receipt of a complaint states that “for non-complex matters we would expect an outcome within 30 days of receipt of your complaint”.

Following consultation with the Manager CFMU, we determined that DCP is currently measuring performance based on 30 calendar days, as communicated to complainants. On this basis, our review of the eight (8) case studies highlighted three (3) overdue complaint outcome letters as follows:

- One (1) complaint outcome letter was sent 35 calendar days (25 business days) after receipt of the complaint
- One (1) complaint outcome letter was sent 42 calendar days (30 business days) after receipt of the complaint
- One (1) complaint outcome letter was sent 63 calendar days (44 business days) after receipt of the complaint.

We note that, based on the 30 business day timeframe, only one (1) complaint outcome letter would be considered overdue.

For the 35 and 42 calendar day complaint outcome delays we identified timeliness issues in relation to responses from local office staff to requests made by CFMU during the complaints investigation process. We noted that CFMU made more than one request for responses from local office staff.

For the 63 calendar day complaint outcome delay, we were advised that delays were experienced initially by CFMU in determining the scope of the complaint in liaison with case management staff. Delays were also exacerbated by CFMU staff disruptions.

Our testing of the 8 cases indicates that 37.5% of complaint outcome letters were overdue, which suggests systemic timeliness issues in the complaints resolution process, particularly when engagement with local office staff is required. We note that the Procedure does not stipulate any timeframe for responsiveness during the complaints investigation process.

Given the inconsistencies between the timeframe requirements of the Procedure and complaint acknowledgement letter, it is difficult to determine if the delays represent a compliance issue.

Recommendation

To assist in improving timeliness of responses in complaints investigation we recommend the Procedure be updated to outline responsiveness timeframes in the complaints investigation process. We suggest the Procedure stipulates that local offices have 10 business days to forward all relevant documentation to the CFMU in order to assist with the timely management and resolution of matters.

In addition, DCP should clarify the timeframe requirement for complaint outcome resolution (i.e. 30 business days or 30 calendar days) and update the Procedure and/or complaint acknowledgement letter accordingly. Based on the agreed timeframe, complaint resolution reporting should be adjusted accordingly. In line with better practice, we recommend 30 calendar days be considered as the appropriate timeframe for complaint outcomes.

Finding 3.0 Level 2 Acknowledgement to Complainant Anomalies

Observation and Implication

The Procedure requires acknowledgement of the complaint to be provided in writing to the complainant within two (2) business days of receiving the complaint. We understand that complaint acknowledgements are generally provided to complainants via email.

Our review of the eight (8) case studies highlighted the following anomalies in relation to complaint acknowledgement emails from CFMU to complainants:

- For one (1) complaint, a written complaint acknowledgement was not on file. We were advised by CFMU and local office management that this carer complaint involved a number of stakeholders in addition to the complainant, including direct contact by one of the stakeholders with DCP Executive under acute time pressures
- For two (2) complaints, we noted minor delays with the complaint acknowledgement emails which were one (1) day and four (4) days, respectively, overdue.

These anomalies indicate non compliances with the Procedure, in particular, the absence of the complaint acknowledgement letter.

Recommendation

CFMU should ensure that complaint acknowledgement emails are sent to all complainants within two (2) business days, regardless of the complexity or timeframe pressures impacting the complaint.

Finding 4.0 Policy and Procedure Updates

Observation and Implication

As noted in the Good Practices, the current Policy and supporting Procedure are considered to be sound documents and generally 'user friendly', however, in comparison to equivalent documents reviewed for DfE and DCS, the documents are prose heavy, which may impact readability.

The documents reference the Australian Standard (AS/NZ 10002:2018) and the Ombudsman SA: An Audit of State Government Agencies' Complaint Handling report from November 2014, both of which are outdated. In addition, the documentation does not reference the Department of the Premier and Cabinet Circular - Complaint Management in the South Australian Public Sector (PC039), effective since November 2023.

Further, the new process whereby the Director, OCE approves all complaint outcome letters prior to provision to the complainant (refer Good Practices), is not recorded in the Procedure.

The absence of current best practice references may result in DCP not being aligned to contemporary complaints resolution practices, such as recognising an 'implied' complaint from a young person or carer.

Recommendation

DCP should update the Policy and Procedure with reference to the Australian Standard (AS/NZ 10002:2022), the Commonwealth Ombudsman's recommended framework for Complaints and DPC Circular PC039. As part of the updating process, DCP should include the Director, OCE approval of complaint outcome letters in the Procedure.

In addition, consideration should be given to reformatting the Policy and Procedure to enhance readability. We recommend the DfE format as a useful guide for refreshing the Policy and Procedure documentation.

Finding 5.0 Absence of Dedicated Complaint Management System

Observation and Implication

We understand that DCP does not have a dedicated complaints management system (CMS) however utilises case management software, C3MS, to manage case notes and communications, including feedback. Complaints documentation is initially stored on a DCP shared drive and then transferred to C3MS. This process relies on staff to ensure that complaints documentation is transferred to C3MS. Our review of cases highlighted some minor instances whereby this transfer process had not been completed.

Given the absence of a dedicated CMS, CFMU currently tracks contacts and complaints via Excel spreadsheet, supported by other spreadsheets. This process requires manual monthly data analysis of spreadsheet data which is then collated into a report format. We were advised by the Manager CFMU that the spreadsheets in use are prone to freezing and links breaking.

The manual process of tracking and reporting complaints is inefficient and at risk of inaccuracies, resulting in a potentially unreliable source of information. Given the reporting is provided to Executive, the accuracy of complaints reporting is critical.

Recommendation

Investigate the operational and cost implications of activating a Complaints Management System to facilitate timely and efficient recording, monitoring and reporting of all forms of feedback.

Finding 6.0 Local Office Staff Development

Observation and Implication

As noted in Finding #1.0, our review of complaints resolution processes at a local level suggests some concerns with the preparedness of local case workers to manage and report complaints, which in turn potentially sees ‘matters’ passed on too quickly to CFMU for resolution. As a consequence, in some instances it appears that there is rework required by CFMU in clarifying, understanding and investigating a contact or complaint, leading to delays in the complaint resolution process.

We understand that CFMU is currently visiting DCP local offices to provide refresher information to staff regarding the complaints resolution process and the role of the CFMU.

Recommendation

We recommend that the CFMU roadshow presentation be continued as a priority to all sites, ensuring that the local level involvement in the complaints resolution process is a focus of the presentation.

In addition, we recommend local office staff receive supplementary training in a core set of tools and techniques necessary for managing complaints and feedback, such as resolving conflict, facilitating negotiation and using effective communication. This will likely increase the competence and confidence of case work staff to manage these situations locally.

Finding 7.0 Enhance Robustness of Complaints Investigations

Observation and Implication

When comparing the DCP complaints management processes with better practice examples we identified that an investigation plan was not developed following triaging to a staff member. We also noted that a risk analysis was not completed.

The absence of an investigation plan means that the rationale for dealing with the complaint matter is not documented and is reliant on the person (generally the Assessment Resolution Officer (ARO)) managing the complaint. As a result, the complaint management processes cannot be easily passed to a colleague within CFMU in the event of an absence. It may also imply that good project management practices are not being followed resulting in overruns of time and resources.

By not completing a risk assessment at receipt of the complaint, the complaint assessment process becomes dependent on the knowledge and experience of the ARO, which may result in inconsistent treatment of the complaint, particularly if multiple AROs are involved in the complaint resolution process. The absence of a risk assessment may also result in the scale or significance of the complaint matter being underestimated.

Recommendation

To enhance the complaints investigation process, we recommend that CFMU trial the application of a risk assessment upon a referral of a complaint to the unit and, once complete, develop an investigation plan, using project management principles to ensure the timely and efficient completion of investigations within the prescribed timeframe.

Finding 8.0 CFMU Staff Succession Planning and Development

Observation and Implication

The CFMU is critical to the successful management and resolution of complaints, particularly those that are complex in nature. Currently, DCP has a small CFMU team of experienced and motivated staff who appear to be adequately skilled in the management of complaints and feedback.

There does not seem to be a succession and development plan in place to maintain the knowledge and skills of the CFMU team, relying on the expertise of current team members and the ability to secure staff with the necessary experience and skills.

The absence of a structured succession and development plan for the CFMU increases the risk of knowledge loss, should team members leave the unit.

Recommendation

DCP should consider establishing a succession plan for the CFMU to secure knowledge retention. We suggest rotating local office staff into the unit (e.g. one (1) per year) in order to improve knowledge sharing with local office staff while providing case management experience to CFMU staff as well as local office staff gaining complaints management expertise from the CFMU team.

In addition, CFMU staff should have access to complaints management training and development materials (online and face-to-face) in order to build a common and robust set of skills in problem solving and decision making, negotiation, conflict management, restorative mediation.

Finding 9.0 Aboriginal and Torres Strait Islander and Culturally and Linguistically Diverse Feedback

Observation and Implication

Discussion with CFMU representatives suggested there appeared to be a disproportionately low volume of feedback from Aboriginal and Torres Strait Islander people given their over representation in the DCP system. Similar concerns were also expressed for Culturally and Linguistically Diverse (CALD) people.

In the absence of such feedback it is difficult for the department to shape and orient services and supports to meet the needs of these groups.

Recommendation

DCP should consider working with representatives of Aboriginal and Torres Strait Islander and CALD groups to explore alternate ways to solicit feedback. This could include the use of technology solutions such as QR codes or the establishment of consultative groups to advise and trial different methods to encourage feedback.

APPENDIX 1 Documents Accessed & Stakeholders Consulted

Documents Accessed

The following documents were provided by DCP and accessed:

- Premier and Cabinet Circular 012 - Information Privacy Principles Instruction (2020)
- Premier and Cabinet Circular 039 - Complaint Management in the South Australia Public Sector
- Child and Young People (Safety) Act 2017
- Child and Young People Regulations
- Australian Government - National Office for Child Safety - Complaint Handling Guide
- Australian Government - National Office for Child Safety - Complaint Handling Reference Guide
- Australian Government - National Office for Child Safety - Complaint Handling Guide - Fact Sheet
- Australian Government - Commonwealth Ombudsman - Better Practice Complaint Handling Guide
- Ombudsman of SA - An audit of state government agencies complaint handling - 2014
- Department for Child Protection - Complaints and Feedback Management Policy (V2.0 - July 2023)
- Department for Child Protection - Complaints and Feedback Management Procedure (V2.0 - July 2023)
- Department for Child Protection - Practice Approach - Summary Guide
- Department for Child Protection - Aboriginal Child Placement Principles
- Department for Child Protection - Strategic Plan 2021-2026
- Department for Child Protection - Strategic Plan - Action Plan 2024-2026
- Department for Child Protection - Child and Youth Engagement Strategy - 2012-2023
- Department for Child Protection - Practice Approach - Summary Guide - 2022
- Department for Child Protection - Disability Access and Inclusion Plan - 2020-2024
- Department for Child Protection - DCP Practice Principles - 2023
- Department for Child Protection - DCP Assessment Framework - 2022 (redacted)
- South Australian Foster and Kinship Careers - Statement of Commitment
- Case documentation for eight (8) cases reviewed from C3MS including intake forms, email correspondence and case notes.

The following documents were provided by other SA government departments and accessed:

- Department for Correctional Services - Policy 34 - Prisoner, Offender and Public Complaints Management (V2 - July 2021)
- Department for Correctional Services - Standard Operating Procedure 096 - Prisoner Enquiries and Complaint resolution process (V3 - June 2021)
- Department for Correctional Services - Complaints Assessment Panel (April 2023)
- Department for Education - Complaint Management Policy (March 2024)
- Department for Education - Complaint Management Procedure (February 2024)
- Department for Education - Raising a Complaint- Fact Sheet (undated).

Key Stakeholders Consulted

BDO completed this review through discussions with the following representatives from DCP:

- Kris Swaffer - Director, OCE
- Claire Di Carlo - Manager CFMU
- Robert Power - Lead ARO, CFMU
- Paul Cree - ARO, CFMU
- Melanie Madsen - ARO, CFMU
- Nicole Gye - ARO, CFMU
- Bo Galant, Manager, Hindmarsh DCP
- Cherylea Tinsley-Smith, Supervisor, Hindmarsh
- Lindsay Hamston, Business Manager, Hindmarsh
- Stuart Thelning, A/Manager, Limestone Coast
- Claudia Puccio, Supervisor, Inner North
- Deepak Chetry, A/Practice Lead, Inner North
- Meg Gowen, Senior Practitioner, Inner North
- Mischa Nitschmann, A/Supervisor, Inner North
- Michala De Wilde, A/Supervisor, Port Pirie
- Mikala Ballard, Manager, Manager Redress Response Team

In addition, assistance was provided by the following representatives from other SA government agencies:

- Kate Schubert - Acting Manager, Customer Feedback, Customer and Information Services, (Department for Education)
- Nicolle Jolly - A/Manager, Government and Jurisdictional Affairs (Department for Correctional Services)

Better Practice Principles - Commonwealth Ombudsman	Dept. for Child Protection (DCP)	Dept. for Education (DfE)	Dept. for Correctional Services (DCS)
Principle 2 - Supports early resolution	The DCP Policy and Procedure both advocate local and early resolution.	[REDACTED]	[REDACTED]
Principle 3 - Integrated with corporate structure.	<p>Complaints are first dealt with by the most appropriate officer within the local office, which is part of the Service Delivery and Practice Directorate. If the complaint is escalated, it then passes to the Complaints and Feedback Management Unit (CFMU) which is part of the Office of the Chief Executive. This provides the complainant with independence from the operational section.</p> <p>No specific reference is made to the DCP Strategic or Action Plan.</p>	[REDACTED]	[REDACTED]
Principle 4 - Recorded in an electronic system	<p>Local offices record events on the departmental system. They are not required to report local issues.</p> <p>CFMU has a complex multi-format for recording and managing complaints. There is multiple recording of information and although data is collected it requires manual collation and analysis.</p>	[REDACTED]	[REDACTED]
Principle 5 - Clear process guidance	<p>The DCP Policy and Procedure were updated in July 2023. Both use clear and straightforward language and are supported by flow charts depicting stages and decision points.</p> <p>The Policy and Procedure sit within a complicated legislative and operational context.</p>	[REDACTED]	[REDACTED]

Better Practice Principles - Commonwealth Ombudsman	Dept. for Child Protection (DCP)	Dept. for Education (DfE)	Dept. for Correctional Services (DCS)
<p>Principle 6 - Skilled staff</p>	<p>The majority of DCP field staff are trained social workers who in turn are supported by similarly qualified supervisors and managers who have greater experience.</p> <p>DCP does not have on-line training however the CFMU is progressively facilitating training for all DCP offices to confirm the importance and value of complaint as well as how to handle them effectively.</p> <p>Staff of the CFMU are experienced caseworkers who are supported by a social work trained supervisor and manager, both of whom also have field/case work experience.</p> <p>The current staffing complement is:</p> <ul style="list-style-type: none"> 1 x ASO2 - Administrative support 3 x ASO6 - Review Officers 1 x ASO7 - Senior Review officer 1 x ASO8 - Manager CFMU 	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>
<p>Principle 7 - Robust QA</p>	<p>The Supervisor and Manager of the CFMU review all 'matters' weekly and review all communication and outcomes.</p> <p>The manager of the CFMU provides quarterly reports to the DCP Executive, through executive governance structures, across 10 key parameters.</p>	<p>[REDACTED]</p> <p>[REDACTED]</p>	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>
<p>Principle 8 - Adequately resourced</p>	<p>Local Offices do not formally record 'complaints'</p> <p>CFMU report that for the period July 23-24 managed 251 complaints and 925 contacts.</p>	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>

Better Practice Principles - Commonwealth Ombudsman	Dept. for Child Protection (DCP)	Dept. for Education (DfE)	Dept. for Correctional Services (DCS)
	<p>This equates to 50 complaints pp and 185 contacts pp</p> <p>Staff and Managers of the CFMU indicate that they currently have sufficient skilled staff. Their efficiency is hampered by not have a dedicated 'case/complaints handling system.</p>	<p>████████████████████</p> <p>████████████████████</p>	

COMPLAINTS MANAGEMENT SYSTEM PROCESS COMPARISON

Better Practice	DCP	DFE	DCS
1. Identify and log the complaint			
Actual?	Yes	█	█
Implied?	No	█	█
How are complaints logged?	Recorded on multiple systems	████████████████████ ██████████████	████████████████████ ██████████
2. Acknowledgement			
How do you acknowledge complaints?	Email letter	██████████	████████████████████ ██████████████████ ██████████████████
How do you determine the complainant's expectations?	Ask complainant	██████████████████ ██████████	██████████████████ ██████████
Do you conduct a risk assessment on receipt of the complaint?	No	████████████████████ ██████████████████ ██████████████████ ██████████████	████████████████████ ██████████
3. Assess and triage			
How do you assess complaints?	Site + CFMU Officer	██████████████	██████████████
How do you triage complaints?	CFMU Officer	██████████	██████████████

Better Practice	DCP	DfE	DCS
4. Investigate and resolve			
Are most complaints resolved quickly?	Yes	█	████████████████████ ██████████████████
Do you operate a no wrong door approach?	Yes	██████████████████ ██████████████████ ██████████████████	██████████
What methods/process do you use for investigation?	Request information from site staff, complainant and carer	██████████████████ ██████████████████	██████████████████ ██████████
Do you have/use an investigation plan?	No	█	█
What types of evidence do you collect?	Data and anecdotal	██████████	██████████
Do you provide updates on progress?	Yes - in particular when there is an unexpected delay	█	█
Do you actively involve the complainant in an investigation?	Yes	█	█
Do you have a single point of contact for a complaint?	Yes	█	█

Better Practice	DCP	DfE	DCS
6. Communication			
How do you communicate with complainants?	Email + telephone + postal letters	[REDACTED]	[REDACTED]
What is typically included in the communication?	Information updates + findings +escalation pathways	[REDACTED] [REDACTED]	[REDACTED] [REDACTED]
How do you communicate unfavourable outcomes?	Telephone and email	[REDACTED]	[REDACTED]
What is typically included in this communication?	Finding + recommendation	[REDACTED] [REDACTED]	[REDACTED] [REDACTED]
7. Finalise			
Are complainants encouraged to review the outcome?	Yes and to follow up alternatives	[REDACTED] [REDACTED] [REDACTED]	[REDACTED]
What information is communicated if dis-satisfied?	Escalation alternatives	[REDACTED]	[REDACTED]
Do you write reports regarding completed investigations?	No DCP provides a final outcome letter to complainants	[REDACTED] [REDACTED] [REDACTED] [REDACTED]	[REDACTED]
Where are these reports stored/filed?	N/A	[REDACTED]	[REDACTED]

Better Practice	DCP	DfE	DCS
8. Systemic Issues			
How do you identify systemic issues?	Quarterly analysis	[REDACTED] [REDACTED]	[REDACTED] [REDACTED]
Do you review procedural fairness?	Yes	[REDACTED] [REDACTED] [REDACTED] [REDACTED]	[REDACTED]
How long are records kept?	State Record Standards	[REDACTED]	[REDACTED]

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