

Feedback Policy

Policy & Procedure Title	Feedback		Policy	5.1	
				Number	
Policy Statement	Fostering a service	culture that	encourages	open and	honest
	communication, aiding in Gladstone Women's Health Centre's delivering				
	high quality services that are flexible and responsive to client feedback.				
Scope	Employees, Clients, Community				
Date document becomes	20/10/21	Review	3 years	Version	2
effective / Updated		Frequency			

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Policy Context

Human Services Quality Framework	Standard 5: Feedback, Complaints and Appeals Indicator 1: The organisation has fair, accessible and accountable feedback, complaints and appeals processes. Indicator 2: The organisation effectively communicates feedback, complaints and appeals processes to people using services and other relevant stakeholders. Indicator 3: People using services and other relevant stakeholders are informed of and enabled to access any external	
	other relevant stakeholders are informed	
	them. Indictor 4: The organisation demonstrates that feedback, complaints and appeals processes lead to improvements within the service and that outcomes are	
Legislation or other requirements	communicated to relevant stakeholders. N/A.	



Policy Scope

This policy applies to:

- All staff, including: managers and supervisors; full-time, part-time or casual, temporary or permanent staff; job candidates; student placements, apprentices, contractors, sub-contractors and volunteers.
- How Gladstone Women's Health Centre provides services to clients and how it interacts with other members of the public.

Procedure

1. <u>Service Culture, Standards, and Client Rights and Responsibilities:</u>

- 1.1. Client Charter:
 - 1.1.1. Upon engaging with Gladstone Women's Health Centre as part of a case management framework, clients receive a Client Charter as part of their registration package.
 - 1.1.2. An updated client charter is to be accessible via the centre's website.
 - 1.1.3. An updated client charter is to be displayed in waiting areas and in each of the counsellor's offices.

2. <u>Informing Clients:</u>

- 2.1. All clients are to be informed of their rights and responsibilities at the earliest possible stage of their involvement with Gladstone Women's Health Centre.
- 2.2. During the initial appointment the counsellor will discuss the client charter with the client to ensure they have an understanding of its contents.

3. Promoting Opportunities for Feedback:

- 3.1. Feedback is always encouraged from our clients and the wider community as a mechanism to evaluate the quality of service delivery.
- 3.2. Feedback can be given either verbally or written to any staff member or member of the management committee.
- 3.3. A feedback / suggestion box is kept in the main waiting area.
- 3.4. Community education evaluation forms are always to have a space for participants to offer any wider service feedback, as well as space for suggestions of what they would like to see the centre offer.
- 3.5. At the 1st, 4th, 6th, 12th, 18th, and every 6th session thereafter, counselling clients will be asked by administrative staff to fill in a simple service delivery questionnaire.



- 3.6. Service delivery questionnaire responses will be collated by administrative staff and the form will then be passed on to the counsellor.
- 3.7. Upon completion of services within the case management framework, clients will be asked to complete a Client Exit Questionnaire.
- 3.8. Client Exit Questionnaire information will be collated by administrative staff.

4. Continuous Improvement:

- 4.1. The director is responsible for developing, implementing, and evaluating the efficiency and effectiveness of this policy and its related procedures.
- 4.2. The collated feedback found within the service delivery questionnaire and the client exit questionnaire is to be tabled quarterly at both staff and management committee meetings.
- 4.3. The results of these questionnaires and other feedback forms from community education will be used to inform service delivery planning.
- 4.4. A continuous improvement register is regularly monitored and updated in response to public feedback.

Related Documents:

Related policies	3.1 Service Delivery.	
	3.3 Community Education.	
	4.2 Client Services Charter.	
	5.2 Client Complaints.	
Forms or other organisational documents	Continuous Improvement Register.	
	Service Delivery Questionnaire.	
	Client Exit Questionnaire.	
	Public Guardian Application Form.	

Document History:

Version #	Issue Date	Summary of Changes	
2	20/10/21	Policy update.	
1.1	19/10/18	Formatting changes to re-brand, format and align with HSQF Standard No's.	
1.0	27/02/2017	New policy and procedure.	