

Complaints and Feedback Policy

Purpose

The purpose of this policy is to establish a framework for the timely and effective handling of complaints and feedback within the Indigenous GP Trainee Network (IGPTN). This policy aims to ensure transparency, accountability, and fairness in addressing concerns raised by members, employees, contractors, or other stakeholders.

Background

This policy forms an important component of sound governance of the IGPTN. Receiving and working to understand complaints can provide useful information and perspectives to allow the organisation to develop and continually improve and is also a critical component of governance and director's duty of care.

Definitions

Complaint: A concern raised by a member, director, employee, contractor, or stakeholder of the IGPTN regarding the organisation's policies, practices, services, or conduct.

Complaint Handler: The individual or team designated to receive, assess, investigate, and resolve complaints.

Reporting Party: The individual or entity raising the complaint.

Scope

This policy applies to all IGPTN operations, all members, directors, employees, contractors, and stakeholders of the IGPTN involved in the receipt, investigation, and resolution of complaints.

This policy does not cover grievances or whistleblowers and these are addressed in separate policies.

Policy

The IGPTN's response to a complaint is informed by several key principles.

- 1. Accessibility: The IGPTN will establish accessible channels for members, directors, employees, contractors, and stakeholders to raise complaints or provide feedback.
- 2. Confidentiality: All complaints will be treated confidentially to protect the privacy and safety of all parties involved, in compliance with applicable laws and regulations.
- 3. Impartiality: Complaints will be investigated impartially and without bias, ensuring fair treatment to all parties involved.
- 4. Timeliness: Complaints will be addressed promptly and efficiently, with reasonable timelines for resolution.
- 5. Transparency: The process of handling complaints will be transparent to the extent possible, while respecting confidentiality requirements.
- 6. Accountability: The IGPTN will take responsibility for addressing complaints ensuring appropriate actions are taken to prevent recurrence and promote accountability.

Member complaints in regards to decisions made by an Independent Body are not within the scope of this policy. Decisions made by an Independent Body will be deemed as the final decision. Any subsequent action the complainant wishes to make is outside IGPTN policies and procedures and will be at their expense.

Procedure

Receiving the complaint

Any individual (the reporting party) is able to make a complaint or provide feedback to IGPTN.

If the complaint involves the manager, the reporting individual should escalate the matter to the next level of management, a Director or the Chairperson.

The person receiving the complaint will identify an appropriate person to progress the issue. This person is referred to in this policy as the complaint handler. The complaint handler may be the person receiving the complaint or another person.

A complaints form will be available on the IGPTN website.

IGPTN will acknowledge receipt of the complaint within 7 days, and will commit to getting back to the complainant within 28 days.

Page 2 of 4

Adopted: 08 Jan 2025

Expected review date: Jan 2027

Revised: N/A

Initial assessment

Upon receiving a complaint or feedback, the designated complaint handler will conduct an

initial assessment to determine the nature, severity, and urgency of the matter.

The complaint handler may gather preliminary information from the reporting party and any

other relevant sources to inform the next steps.

Formal documentation

The complaint handler will document the complaint in writing, including relevant details such as

the date, time, location, individuals involved, and a description of the circumstances.

This documentation will be kept confidential and securely stored.

Investigation

If the complaint requires further investigation, the designated complaint handler will initiate an

investigation process.

The investigation may involve interviewing witnesses, collecting evidence, reviewing relevant

documents or records, and consulting with appropriate experts or authorities.

Throughout the investigation, the complaint handler will maintain confidentiality and

impartiality, ensuring a fair and thorough process.

Resolution

Based on the findings of the investigation, the complaint handler will determine an appropriate

course of action to address the complaint.

The resolution may include corrective measures, disciplinary actions, policy revisions, training,

or other interventions as deemed necessary to prevent recurrence and promote accountability.

The complaint handler will communicate the resolution to the reporting party and any other

relevant stakeholders, ensuring transparency and clarity.

Follow-up

Following the resolution of the complaint, the complaint handler will monitor the situation to

ensure that the agreed-upon actions are implemented effectively.

The complaint handler may conduct follow-up meetings with the reporting party and other

involved parties to address any remaining concerns or provide additional support as needed.

Documentation and reporting

Page 3 of 4

Adopted: 08 Jan 2025

Expected review date: Jan 2027

Revised: N/A

All actions taken in response to complaints will be documented in writing, including details of the investigation, resolution, and follow-up activities.

This documentation will be maintained securely and confidentially.

Periodic reports summarising the types and outcomes of complaints will be provided to Directors for consideration.

Review and continuous improvement

This policy will be periodically reviewed and updated as necessary to ensure its effectiveness and relevance.

Feedback from stakeholders, lessons learned from past experiences, and changes in regulatory requirements or best practices will be considered in the ongoing refinement of this procedure.

Page 4 of 4

Adopted: 08 Jan 2025

Expected review date: Jan 2027

Revised: N/A