

Complaints and feedback policy

Policy name:	Complaints and feedback policy
Date approved:	9 February 2026
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Approved by:	Chief Executive Officer
Organisation contact:	Manager Priority Communities

Purpose

This policy outlines the processes used by Brisbane North PHN (the PHN) to receive, acknowledge, assess, manage and resolve feedback, including complaints and compliments, relating to PHN activities and funded services.

The policy ensures that feedback is captured, recorded and addressed in a timely, fair and consistent manner. Effective management of feedback supports organisational learning, risk management and the continuous improvement of the PHN's activities and services.

The complaints and feedback management process is informed by the principles of [ISO 9001:2015 \(Quality Management Systems\)](#).

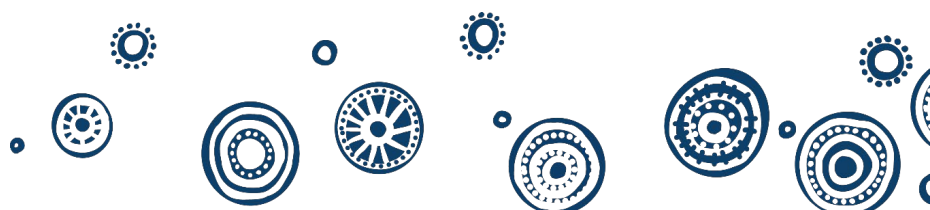
Scope

This policy applies to feedback relating to PHN activities, programs, projects, operations and PHN-funded services.

The PHN does not have oversight of feedback relating to services that are not funded by the PHN. Where appropriate, such feedback will be referred to the relevant organisation or to the [Office of the Health Ombudsman \(OHO\)](#). Where services are delivered in an integrated manner and PHN funding contributes to service delivery, feedback will be considered within scope of this policy.

Responsibility

All Staff	All staff are expected to understand and support the fair, effective and efficient handling of feedback in accordance with this policy.
Quality team	Responsible for monitoring complaints, feedback and compliments in ChilliDB, and for supporting timely responses by responsible officers.
Management	Responsible for investigating feedback, implementing actions arising from complaints and feedback, and ensuring that systemic issues are addressed through quality improvement activities.



Definitions

Feedback

A comment, suggestion or observation about any aspect of the PHN's activities, services or actions.

Complaint

An expression of dissatisfaction with any aspect of the PHN's direct or commissioned services that requires investigation, response or referral.

Compliment

An expression of praise, approval or commendation relating to the PHN, its staff or funded services.

Open Disclosure

The open discussion of adverse events that result in harm to a consumer while receiving health care, involving the consumer, their family and carers.

Note Contracted service providers are required to report all major and minor incidents involving PHN-funded services. These incidents are captured and managed in accordance with this policy.

Related Documents

- [Incident Reporting Policy](#)
- [Privacy Statement](#)
- [Department of Health Primary Health Network Complaints Policy](#)
- [Ombudsman managing unreasonable complaint conduct](#)

Feedback principles

The PHN welcomes feedback from consumers, carers, service providers and other stakeholders. All feedback will be managed using a transparent, accessible and responsive process.

PHN's feedback policy is underpinned by a set of guiding principles, developed by the Department of Health, Disability and Ageing¹, which provide high level guidance for individuals, organisations and consumers and carers wishing to lodge feedback about the PHN, our activities or funded services.

Principle	The PHN will:
Objectivity and Fairness	<ul style="list-style-type: none">• recognise and respect the right of any person or organisation to provide feedback• manage feedback impartially, confidentially and transparently• assess feedback on its merits without bias or prejudice, including from previous interactions
Accessibility	<ul style="list-style-type: none">• make this policy publicly available on the PHN website• provide clear information about how to lodge feedback and how it will be managed
Responsiveness and Efficiency	<ul style="list-style-type: none">• record, acknowledge and track feedback in a timely manner• prioritise feedback according to risk, urgency and seriousness• ensure staff have appropriate support and authority to manage feedback effectively.
Confidentiality	<ul style="list-style-type: none">• protect the identity of people providing feedback where feasible and appropriate• seek consent before disclosing identity where required to resolve feedback• manage personal information in accordance with privacy legislation.

¹ [Department of Health's Primary Health Networks Program Complaints Policy](#)

Feedback about commissioned service providers

The PHN requires contracted service providers to maintain robust and accessible complaints and feedback processes.

Feedback relating to PHN-funded services will generally be referred to the service provider for resolution in the first instance. The PHN will monitor outcomes and themes arising from such feedback to inform contract management and service improvement.

Feedback relating to services not funded by the PHN is outside the scope of this policy and will be referred to the relevant organisation.

Feedback about health professionals

The PHN does not manage complaints relating to individual health professionals or clinical care provided independently of PHN commissioning arrangements.

Where concerns are raised, individuals will be encouraged to:

- raise the matter directly with the health professional
- contact the practice principal or practice manager
- contact the [Office of the Health Ombudsman \(OHO\)](#) or [AHPRA](#), as appropriate.

Feedback regarding privacy

Feedback relating to privacy, confidentiality or data management will be managed by the PHN in accordance with applicable legislation and the [PHN Privacy Policy](#), which is available on the PHN website.

In the first instance, individuals are encouraged to raise privacy-related feedback directly with the PHN to allow the matter to be reviewed and resolved. Feedback may also be lodged with the relevant State or Territory Privacy Commissioner or the [Office of the Australian Information Commissioner \(OAIC\)](#) for investigation. Further information is available via the OAIC.

Engaging with stakeholders who provide feedback

The PHN will take all reasonable steps to ensure that individuals who provide feedback are not disadvantaged or adversely affected as a result of raising feedback, either on their own behalf or on behalf of others. There is no cost associated with lodging feedback with the PHN.

The PHN can assist with access to professional interpreting services for individuals who have difficulty communicating in English, including Auslan and other sign languages, where required.

The PHN does not expect staff to tolerate unreasonable behaviour from individuals providing feedback. Unacceptable behaviour may include conduct or communication that is abusive, offensive, threatening or vexatious.

Where feedback involves unreasonable conduct, PHN staff responsible for managing feedback will apply the principles outlined in the [Ombudsman's Managing Unreasonable Complaint Conduct guidelines](#). Where appropriate, steps may be taken to limit interactions with individuals engaging in unreasonable behaviour. This will not prevent the PHN from assessing the feedback, progressing the matter and providing an outcome.

Acknowledgement

All feedback, including complaints and compliments, must be acknowledged by the relevant PHN staff member **within three (3) business days**

Complaints Acknowledgement should be made in writing or by phone and include:

Confirmation that the feedback was received and whether it falls within the scope of this policy (if not, provide referral details)

Clarification of the issue and confirmation of expected outcomes

Outline of the process that will be followed to investigate the complaint
Contact details of the PHN Manager responsible for managing the investigation
Estimated timeframes for completing the investigation

The responsible Manager should ensure the feedback is fully understood, which may include contacting the person providing the feedback for clarification. If required, the Manager may escalate the matter to the Executive or CEO to determine whether the feedback should be referred to the Board.

Compliment Where appropriate, the responsible Manager may contact the person providing the compliment to thank them.

The Manager will ensure the compliment is shared with the relevant program area, staff member(s), or commissioned services.

No further action is required for compliments; the Manager will close the ChilliDB note once recorded.

Assessment and Action

When determining how feedback will be handled, the PHN will consider:

- The nature of the feedback and what it relates to
- The seriousness, complexity, or urgency of the issue
- Any potential impact on health and safety
- How the feedback affects the person or organisation providing it
- Risks associated with delaying resolution
- Whether resolution requires input from other organisations, including service providers

The responsible Manager will investigate and take appropriate actions to address the feedback. This may include contacting relevant service providers or other stakeholders as needed.

Actions will be tailored to the type of feedback and aligned with any statutory requirements. To manage feedback, the PHN will:

- Assess the claims and information provided in the feedback
- Gather relevant details about the product, service, person, or area concerned
- Escalate the feedback to the relevant Executive Manager if necessary, including recommended strategies for resolution
- Refer feedback to the service provider or external body where appropriate, providing all necessary information
- Request that service providers take specific actions when required
- Maintain accurate and complete records of all actions taken

Open Disclosure

The key elements of open disclosure are:

- A sincere apology or expression of regret, including the words *"I am sorry"* or *"we are sorry"*
- A factual explanation of what occurred
- An opportunity for the consumer, their family, and carers to share their experience
- Discussion of potential consequences of the adverse event
- Explanation of steps being taken to manage the incident and prevent recurrence

Brisbane North PHN follows the **Australian Open Disclosure Framework** (Australian Commission on Safety & Quality in Health Care) and implements the following steps:

Table: Key elements of open disclosure process in small healthcare organisations

1. Incident detection	<ul style="list-style-type: none"> • Identify incidents through multiple mechanisms • Provide prompt care to prevent further harm • Assess and establish the facts of the incident • Notify relevant individuals, authorities, and organisation
2. Signalling the need for open disclosure	<ul style="list-style-type: none"> • Acknowledge the incident to the consumer with a sincere apology • Record the consumer's comments and questions • Determine if a lower-level response is sufficient • Clearly signal the need for open disclosure • Avoid speculation or assigning blame
3. Preparing for open disclosure	<ul style="list-style-type: none"> • Gather all relevant information • Notify and consult with professional indemnity insurers • Ensure consumer records are complete and up to date • Identify appropriate participants and allow the consumer to invite a support person if desired • Arrange the first meeting in consultation with the consumer • Consider practical support for expenses or ongoing care • Provide clinician support if required
4. Engaging in open disclosure	<ul style="list-style-type: none"> • Acknowledge the incident and provide an unprompted apology • Clearly explain the incident • Allow the consumer to provide observations and ask questions • Encourage the consumer to describe personal impacts • Develop, record, and agree on an open disclosure plan if further meetings are required • Assure the consumer they will be informed of investigation outcomes and changes to care • Discuss and agree on future care if needed • Offer practical and emotional support • Hold additional meetings if necessary
5. Completing the process	<ul style="list-style-type: none"> • Provide the consumer with further information and follow-up care • Maintain contact during ongoing investigations and share outcomes • Reach agreement with the consumer or provide an alternative resolution • Provide final written and verbal communication • Share relevant information with other healthcare providers as appropriate
6. Maintaining documentation	<ul style="list-style-type: none"> • Keep consumer records up to date • Maintain detailed records of the open disclosure process • File all documentation in the consumer record • Provide copies to the consumer as appropriate (verify contents with indemnity insurer)

<https://www.safetyandquality.gov.au/sites/default/files/migrated/Implementing-the-Australian-Open-Disclosure-Framework-in-small-practices.pdf>

Refer or Resolve

The outcome of feedback will be communicated to the person providing it **within 15 business days** of receipt.

If resolution cannot be completed within this timeframe, the responsible Manager must maintain regular contact to provide updates on progress and expected timeframes.

Upon resolution, the person providing feedback will be informed of:

- Any actions taken, or if the matter was referred to a service provider or another body
- The reasons for any decisions made
- The remedies or resolutions implemented
- Options for review, including escalation to the Department of Health, Disability and Ageing or another relevant body

Close Feedback

The responsible Manager ensures all feedback and outcomes are fully recorded in **ChilliDB** to support continuous improvement.

ChilliDB records should include:

- Initial feedback details
- How feedback was managed
- Outcomes and actions taken
- Recommendations made and decisions on those recommendations
- Feedback provided to the person and relevant service providers
- Final actions, outcomes, closed date, and status updated to **Closed**

The **Quality team** undertakes regular monitoring of feedback to ensure appropriate resolution and identify areas for improvement. Summaries of open and closed feedback notes are reported to the Management Team in alignment with Board reporting.

Review of decision

If the person providing feedback is dissatisfied with the resolution, they may request a review in writing to the **CEO within three months** of the original outcome.

The review will consider:

- Whether PHN staff followed a fair and adequate process
- Whether the initial conclusions were reasonable and clearly explained

The reviewing officer may:

- Uphold the original decision
- Amend the decision
- Refer the matter back to the original Manager or another officer for further action if new issues are identified

Only **one internal review** is conducted; after this, the feedback will be formally closed.

Escalation of complaints

Anyone may escalate their feedback or complaint directly to the [Australian Government Department of Health, Disability and Ageing](#) if dissatisfied with the PHN's handling or resolution.

Feedback can be submitted to

[PHN Program Complaints contact](#)

Contact us to lodge a complaint about the PHN Program.

PHN.Complaints@health.gov.au

Postal address:

MDP 810 Primary Health Networks and Partnerships Branch, Primary Care Division
Department of Health, Disability and Ageing
GPO Box 9848, CANBERRA ACT 2601

Additional information

Feedback outside the scope of the PHN may be referred to another agency in consultation with the person providing the feedback.

The PHN can assist with professional [interpreting services](#), including Auslan and other sign languages, for people with communication needs.

Contacting the PHN

Any person or organisation wanting to lodge feedback about the PHN's activities, processes or programs should provide the feedback in writing to the PHN via email to info@brisbanenorthphn.org.au or post to

*Brisbane North PHN
Quality Officer
PO Box 2013
Chermside Centre QLD 4032*