

# Queensland Public Service Customer Complaint Management Guideline

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Responsible agency:	Public Sector Commission

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## 1. Purpose

- 1.1 This Guideline supports the [Queensland Public Service Customer Complaint Management Framework \(PDF, 752 KB\) \(Opens in new window\)](#) (the Framework) and provides agencies and their employees with detailed information about customer complaints management. It aims to provide a consistent approach for managing customer complaints across Queensland public service entities (agencies).
- 1.2 In line with the [Statement of the Queensland Government's objectives for the community](#), this Guideline supports the delivery of better services in customer complaint handling and the use of digital technology solutions for customer complaints.

## 2. Legislation Sections

- 2.1 The Framework and Guideline align with [section 264](#) of the *Public Sector Act 2022* (the Act).

## 3. Application

- 3.1 The Framework and Guideline apply to public service entities as defined under section 9 of the Act and customer complaints as defined under section 264(4) of the Act.
- 3.2 Neither the Framework nor Guideline apply to complaints made and/or managed pursuant to other legislation and/or relevant complaint management processes, such as human rights complaints, privacy complaints, corrupt conduct, public interest disclosures, employee grievances and complaints that are contractual in nature. The Framework and Guideline also do not apply to rights of administrative review under an Act.
- 3.3 Where a customer complaint contains issues potentially concerning matters mentioned in 3.2, then existing agency investigation and response processes relating to these types of complaints (human rights, privacy, corrupt conduct, public interest disclosures) should immediately commence. These agency process requirements (including timeframes)

relating to the matters raised take precedence in relation to customer complaint Framework and Guideline obligations.

3.4 The Framework also does not apply to complaints subject to legal proceedings.

## 4. Guiding principles

4.1 An agency's customer complaint management system (CMS) and complaint management policy should align with the guiding principles outlined in the Framework and below. Further guidance can also be found in the Australian Standard *Guidelines for complaint management in organisations AS 10002:2022* (the standard).

4.2 The Framework's guiding principles are:

- a. **Customer focused** – People should be able to make a complaint via clear and accessible agency complaint management systems, with complainants respected and responses addressing all issues raised.
- b. **Timely and fair** – Complaint handling processes are clear, impartial and confidential, with timely acknowledgements and responses.
- c. **Clear communication** – There are clear and communicated expectations and standards for all parties involved in a complaint.
- d. **Accountable** – Agency roles and responsibilities for complaint management are clear and publicly available.
- e. **Improving services** – Complaints improve existing, and inform new, quality services, with CMSs helping agencies prevent potential ongoing disputes.

## 5. Agency customer complaint management system, policy and model

5.1 An agency's CMS must satisfy the requirements of section 264 of the Act. A CMS consists of all policies, procedures, practices, systems, staff and resources an agency uses to manage customer complaints.

5.2 As part of their customer CMS, all agencies must have a customer complaint management policy which is:

- a. easily accessible to the public and all agency employees
- b. published on the agency's website and intranet
- c. made available to customers at front counter or reception areas.

The policy must include:

- 1. A statement outlining the agency's commitment to receiving all types of feedback (including complaints) and to effective complaint management.
- 2. What the agency considers is a customer complaint and what is out of scope.
- 3. Key responsibilities, roles and authorisations for customer complaint management across an agency.
- 4. Guiding principles underpinning the CMS and the customer complaint management model.

5. A commitment to giving proper consideration to human rights.
6. How the agency manages customer complaints including the steps involved in the complaint process.
7. Timeframes for dealing with customer complaints including for acknowledging and responding to complaints, and for internal review.
8. The internal and external review mechanisms if customers are dissatisfied with the outcome of their complaint.
9. Internal reporting on customer complaints trends and analysis (if applicable) and external mandatory reporting as required under section 264 of the Act.

5.3 Agencies should regularly review and self-audit their CMS and customer complaint management policy. The [Queensland Ombudsman's advisory service](#) provides advice and resources to improve complaint handling.

5.4 An agency's CMS should operate based on a three-tier model of complaint handling, consisting of initial complaint handling; internal review; and external review (AS 10002:2022, p.38). This model provides complainants with an overview of their options through the life cycle of a complaint and should be included in an agency's customer complaint management policy.

**Level 1:** [Initial complaint handling](#)

**Level 2:** [Internal review](#)

**Level 3:** [External review](#)

**Level 1: Initial complaint handling**

5.5 Most complaints received by an agency will be handled and resolved at this stage.

Detailed information about initial complaint handling is available from the [Queensland Ombudsman](#) (see paragraphs 6.12 and 6.18 below for acknowledgement and response timeframes respectively).

5.6 Where a complaint is not resolved initially, agencies must provide complainants with information about their internal review rights as part of their level 1 complaint response. A template paragraph for such advice is:

If you are not satisfied with our response, you may ask for an internal review. You should make this request in writing within 20 business days of receipt of this correspondence. Your request should outline why you are asking for an internal review. You may lodge your request for internal review at (contact details to be included). Please contact (officer name, position, phone number and email address) if you require any further information.

5.7 It should be noted that where a response identifies potential information privacy and human rights issues arising during investigation of the customer complaint, complainants should be advised that an external review/oversight in relation to these issues may be available to a complainant prior to completion of an agency's internal review process.

**Level 2: Internal review**

- 5.8 An internal review is a merits review that involves a consideration of whether, based on the information/facts available at the time, the decision made was the correct one (including whether the actions and decisions were lawful, reasonable, fair and not improperly discriminatory). It is not a re-investigation of a complaint, but an impartial review of a decision made about a complaint undertaken by an appropriate officer (i.e. either at the same level as the first decision-maker or more senior), independent from the original process.
- 5.9 Internal review requests from a complainant should be considered as an opportunity to review and improve complaint handling processes. An agency should enable internal review requests by including information about internal review processes as part of their complaint management policy. This information should also be available on agency websites and in any formal decision about a complaint as outlined in 5.6 above. An internal review procedure should be developed and made available to customers.
- 5.10 Complainants should be advised that they have 20 business days from receipt of the complaint outcome response to their complaint to seek internal review. Requests received outside this timeframe should still be considered when there are reasonable grounds to do so. Agencies must provide their internal review response within 20 business days, with agencies to proactively advise complainants if this timeframe will not be met. In this situation, agencies will provide complainants with advice on progress and an amended timeframe for the response.
- 5.11 Agencies should communicate the following minimum internal review requirements clearly to complainants, including:
- a. the timeframe for lodgement of a complainant's internal review request with the agency
  - b. how the complainant's submission should be made, e.g. in writing, taking into account the complainant's known support needs
  - c. that the complainant needs to outline why they are asking for an internal review
  - d. what the complainant's responsibilities are as part of an internal review
  - e. what outcomes are being sought by the complainant
  - f. what supports are available to assist complainants to apply for an internal review.
- 5.12 Detailed information about undertaking an internal review process is available from the [Queensland Ombudsman](#) .

### **Level 3: External review**

- 5.13 When agencies provide a response to an internal review request they must also advise complainants about their external review rights. An external review is conducted by an agency independent of the entity that dealt with the complaint originally and the internal review. An example paragraph for inclusion in an internal review response letter is:

If you are not satisfied with the outcome of your internal review, you may ask for an external review by the Queensland Ombudsman. The Queensland Ombudsman may be contacted by phone on (07) 3005 7000 during business hours; by mail at GPO Box 3314, Brisbane, QLD 4001. A request for an external review may be lodged via the [online complaint form](#).

Many external review requests will be within the Queensland Ombudsman's jurisdiction. Other external review options, depending on the nature of the complaint include: the Health Ombudsman or the Training Ombudsman; the Office of the Information Commissioner; the Queensland Human Rights Commission; and [other complaint handling organisations](#). Contact details for the relevant external review body should be included in the complaint response.

- 5.14 An external review is a process available to complainants where an oversight agency, such as the Queensland Ombudsman or other complaints handling organisation, investigates the handling of a complaint by an agency or deals with complaints that were previously the subject of a complaint to an agency. An external review will only occur after the complainant has progressed through the agency's complaints process in the first instance and exhausted any other internal right of review.
- 5.15 External review processes are managed by the appropriate oversight or complaint handling organisation. In addition to advising complainants of their external review rights, agencies will work with external oversight organisations to assist with their investigations as needed.

## 6. Customer complaint management stages

- 6.1 A customer complaint will go through seven stages during its life cycle. While the progression of these stages will not always be linear, each step ensures that complaints are received and appropriately investigated, complainants are kept up to date with the progress of their complaint and the agency continues to learn and improve. Throughout the complaint management life cycle, agencies should ensure that procedural fairness is provided to customers. Stages through the life cycle of a complaint include:

**Stage 1:** [Receipt](#)

**Stage 2:** [Assistance](#)

**Stage 3:** [Acknowledgement](#)

**Stage 4:** [Assessment](#)

**Stage 5:** [Response](#)

**Stage 6:** [Reporting](#)

**Stage 7:** [Learning and improvement](#)

### Stage 1: Receipt of a complaint

- 6.2 An agency's CMS should provide a customer with multiple avenues for lodging a complaint, such as an online complaint form, email, social media channels, phone, or in

person. Complaints can be referred from other state government agencies, federal government agencies or local government. Information on how to lodge a complaint should be readily available on the agency's website and in its complaint management policy.

- 6.3 Complaints may be received via correspondence to the Director-General or other head of an agency or its Minister. Agencies may determine whether such correspondence is classified as a customer complaint for reporting purposes, e.g. if the correspondence complains about a service delivered or action taken by an agency that has directly affected the complainant. In determining whether to report ministerial correspondence as a customer complaint, agencies will need to balance resourcing issues with accurate complaint reporting, e.g. in determining this balance, if the correspondence is complaining about a service or action taken by an agency, then it should be classified as a customer complaint for reporting purposes. If ministerial or director-general correspondence is deemed to be out of scope for an agency's CMS, then this should be clearly stated in the agency's complaint management policy.
- 6.4 The standard notes that social media is a valid method for lodging customer complaints. Agencies have discretion as to how they use social media to accept complaints, recognising that some matters will not be appropriate to discuss on these platforms. This needs to be included within an agency's customer complaint management policy. At a minimum, agencies should have clear directions on their social media page as to how to lodge a complaint online, either through the agency's website or via the whole of government webform or both channels.
- 6.5 Agencies will accept anonymous complaints however, the complaint may not be able to be fully investigated if contact information has not been provided.
- 6.6 A complaint may raise issues that cover multiple agencies. Agencies should work together to ensure that the complainant receives a clear and coordinated response. Agencies should seek the complainant's consent before sharing their complaint with another agency unless there are legislative obligations or other appropriate reasons consistent with the Privacy Principles of the *Information Privacy Act 2009*.
- 6.7 If the same complaint has been lodged by a complainant with multiple agencies at the same time, agencies are to contact other agencies included in the complaint to determine what action is being taken; for example, an email that has been sent or carbon copied to several agencies. If the complaint does not fall within an agency's jurisdiction, then a response should be sent to the complainant advising them accordingly. The response should also provide them with the appropriate contact details for the responsible agency or note that their complaint has already been provided to the correct agency.
- 6.8 Agencies should ensure access to their CMS in relation to complainant information is appropriately managed consistent with the *Information Privacy Act 2009*.

## **Stage 2: Assistance for complainants**

- 6.9 In line with the accessibility guiding principle, everyone should be able to lodge a complaint. Agencies should provide, and make customers aware of, flexible options and services that can assist them in lodging a complaint. Agencies are encouraged to provide customers with reasonable assistance in lodging a complaint. This assistance may include, but is not limited to:

- a. access to interpretation or translation services
- b. access to the National Relay Service and teletypewriter services
- c. easy to read complaint policies and forms
- d. a contact number to discuss complaint processes prior to lodgement
- e. the option for their complaint to be recorded in writing for them.

## **Vulnerability**

- 6.10 All customers are unique, with diverse needs, abilities and personal circumstances. The International Standard *Customer vulnerability – Requirements and guidelines for the design and delivery of inclusive service ISO 22458* recognises that there is potential for anyone to become vulnerable due to temporary changes in circumstances. It recommends that organisations not only identify customers who may be vulnerable but also consider how systems and processes may be designed and delivered to reduce and address vulnerability.
- 6.11 Agencies should proactively identify risk factors that may cause vulnerability, such as age, disability or impairment, mental health issues, low income, sudden change in circumstances, rural/remote factors, homelessness, issues accessing digital services, etc. and design a CMS and complaint management policy that encourages and supports vulnerable customers through the complaint process. Rather than only managing vulnerability after the event, e.g. when a customer has experienced loss or placed in a vulnerable position, vulnerability should be considered at all stages of a complaint and mitigated where possible.

## **Stage 3: Acknowledgement of complaint**

- 6.12 An acknowledgement of a complaint should be sent within three business days of the complaint being received by an agency. Although complaints submitted via the whole of government (WofG) webform will receive an automated response on lodgement, in addition to this response, agencies should provide complainants with a more detailed acknowledgement as outlined below. The three business days timeframe for acknowledgement should be included in an agency's complaint management policy.
- 6.13 The acknowledgment should be sent to the complainant in the same format as it was received. If the complaint was received and responded to over the phone, then only a file note needs to be prepared for record keeping purposes. While agencies can tailor acknowledgements as needed, the following must be provided:
- a. acknowledgement of receipt of the complaint
  - b. a departmental tracking number or reference number from the WofG form
  - c. the proposed timeframe for response
  - d. information about the customer complaint management process, such as a copy of the agency's customer complaint management policy
  - e. agency contact information.

See the [Appendix](#) for a suggested acknowledgement template for agencies to use.

- 6.14 An appropriate and timely acknowledgement (within three business days) allows an agency to explain the complaint process and manage the complainant's expectations from the beginning of the process.

#### **Stage 4: Assessment of the complaint**

- 6.15 The initial assessment of the complaint should consider whether:
- a. the matters raised in the complaint fall within the jurisdiction of the agency
  - b. the complaint is within the scope of the agency's customer complaint management policy or falls under another complaint management policy or procedure, such as a privacy complaint or corrupt conduct allegations
  - c. there are any human right issues raised by the complaint.

Where an assessment indicates that a human rights, information privacy, or corrupt conduct issues may be raised, the appropriate agency processes related to these issues should be initiated and the complainant should be informed of this decision, outlining agency processes that will be followed including amended timeframes.

- 6.16 Where a public official reasonably suspects that a complaint, or information on a matter involves, or may involve, corrupt conduct, they must notify the Crime and Corruption Commission.
- 6.17 If a complaint is assessed as not being within an agency's scope of services/actions or referred to another agency at the assessment stage, the complainant should be provided with written advice about the decision (not accepted by the agency or referred to another agency) and the reasons for the decision. Where a complaint has been referred to another agency, the complainant should also be advised of the new agency's contact information.

#### **Stage 5: Responding to the complaint**

- 6.18 A final response to a complaint should be provided within 30 business days after the complaint was originally received by the agency. Early resolution of complaints is strongly encouraged.

Agencies may set a timeframe for response earlier than 30 business days. All timeframes and service standards should be included in the agency's complaint management policy and related procedures and published on the agency's website.

- 6.19 If an agency determines that a timeframe for a response is not likely to be met, the agency should proactively advise the complainant of this at the earliest opportunity and advise the new expected timeframe and officer contact details should they require further information. For example, complaints relating to a school may not be resolved within 30 business days due to staff unavailability over school holiday periods. In this situation, the complainant should be proactively contacted and advised of the circumstances.
- 6.20 Although template responses may be suitable in some situations, such as letters received as part of a letter writing campaign, agencies should tailor a complaint response to address the issues raised in the complaint. A response to a complaint can be made in writing or over the phone and should include:



- a. the decision made in response to the issues raised
- b. clear, meaningful and accurate reasons why the decision was made, including the relevant policies, legislation and directives used in making the decision
- c. actions taken because of the complaint (subject to any privacy considerations), including any remedies or business improvements
- d. information about the review options available to the complainant, including relevant contact details
- e. contact details for the relevant departmental officer who can be contacted for further information relating to the complaint.

Where a response is provided over the phone, an appropriate file note should be prepared for recordkeeping purposes.

- 6.21 Any remedies or business improvements identified because of the complaint should be actioned once the complaint response has been finalised and considered as part of wider complaint analysis and learning. Agencies should consider communicating these changes to the complainant.

## **Stage 6: Reporting**

- 6.22 Reporting on complaints can provide agencies with useful information to assist with performance monitoring and business improvement. Section 264(3) of the Act requires agencies to publish information annually on the number of customer complaints:

- a. received by the entity in the year
- b. resulting in further action
- c. resulting in no further action.

- 6.23 In addition to mandatory complaint reporting outlined in 6.22 above, detailed reporting should be provided to senior management, such as divisional heads and Boards of Management, on a regular basis, at a minimum every six months.

Agencies should also consider, in the context of their organisation, whether more detailed and regular reporting beyond statistical complaint information is required. This could include detailed trend analysis and reporting on key performance indicators, such as percentage of complaints responded to within service standards and customer satisfaction with the agency's CMS.

## **Stage 7: Learning and continual improvement**

- 6.24 Complaints provide valuable information that can help an agency learn and improve their operations. In addition to reporting and analysis, an agency's CMS should include mechanisms for seeking complaint feedback on the complaint process. This could come from survey links in online forms, emails or regular customer surveys. Agencies may consider integrating risks and learnings into each agency's risk management framework.
- 6.25 Agencies may wish to consider strategies to ensure learnings from complaints are shared across the agency. Strategies agencies could implement include creating a

complaint handler network or community of practice to share knowledge and ensure consistency in customer complaint handling across an agency; and/or a complaint champion at a senior leadership level to demonstrate an active commitment to effective complaint management and continued improvement.

- 6.26 Although management responsibilities will be outlined in an agency customer complaint management policy, a complaints champion role would go 'above and beyond' these obligations to advocate for customer-focused complaint handling; appropriately resourced complaint functions; and ongoing analysis and learning from complaints.

## **7. Other agency responsibilities**

### **Record-keeping**

- 7.1 Agencies should keep detailed and accurate records about complaints, beginning at initial receipt (see 7.4 below regarding circumstances where it may not be practical to have detailed records). Personal information that is received by an agency through its customer complaints management process is to be managed in accordance with the *Information Privacy Act 2009*. All customer complaint records should be managed in line with the *Public Records Act 2002* and the *General Retention and Disposal Schedule*. Accurate record-keeping will also assist with internal and external review processes.
- 7.2 At a minimum, the following information should be recorded for each complaint on receipt:
- a. contact information (where the complaint is anonymous, then 'Anonymous' can be recorded)
  - b. issues raised
  - c. outcome sought
  - d. any other information required to respond to the complaint
  - e. any support needed by the complainant.
- 7.3 Although an anonymous customer complaint may not have contact information or receive a response, it should still be recorded as a complaint and captured as a record. Other documents relating to the complaint, such as human rights assessment forms, file notes, emails, supporting documents etc. should be recorded during each stage of the complaint process.
- 7.4 Under the standard, a customer complaint may not need to be recorded in circumstances where it is not reasonably practicable to record it at the time of receipt if it is addressed immediately or the complainant has been provided with information about how to lodge a complaint. Agencies should consider how their frontline complaints are recorded, balancing resourcing needs against the value of more complete and detailed customer information.

### **Training**

- 7.5 Agencies should ensure that staff involved in complaint handling have access to appropriate training on complaint management procedures relevant to their role. This

should include training on receiving and managing complaints from individuals experiencing vulnerability; and about cultural awareness.

- 7.6 Specialised training should be made available to staff with specific complaint responsibilities e.g. [complaint training courses](#) run by the Queensland Ombudsman, such as managing unreasonable complainant conduct, training for frontline staff and internal review training. Other training courses on topics such as customer service, mental health awareness and communication and writing skills, can be useful for staff involved in customer complaint management and may already be provided as part of an agency's learning management system.
- 7.7 General complaint awareness training should be provided to all staff as part of induction, covering the definition of a customer complaint; how to identify a complaint; the Framework and Guidelines and agency's customer complaint management policy; and contact details for advice about managing customer complaints within an agency.

## **8. Managing unreasonable conduct by complainants**

- 8.1 From time to time agencies will deal with unreasonable conduct by a complainant. Unreasonable conduct by a complainant is any behaviour which, because of its nature or frequency, raises substantial health, safety or resource issues. This could include unreasonable persistence; unreasonable demands; unreasonable lack of cooperation; unreasonable arguments; and unreasonable behaviour.
- 8.2 Agencies are responsible for ensuring the health, safety and wellbeing of all employees. Agencies should have a clear and proactive approach to managing unreasonable complainant conduct which ensures staff wellbeing while enabling complaints to be productively resolved.
- 8.3 Managing complainant expectations from the beginning of the complaint process and clear and regular communication with the complainant about the status of their matter is essential when dealing with all complainants. Other prevention strategies identified by the [Queensland Ombudsman](#) include:
- a. treating all complainants fairly and respectfully
  - b. providing complainants with clear advice about what the agency can and cannot do in relation to their complaint
  - c. testing and managing complainant expectations throughout the process, including correcting misunderstandings as they arise and redefining unreasonable expectations when they are identified
  - d. not labelling the complainants themselves and instead, focusing on the observable conduct.
- 8.4 To assist frontline and complaint handling staff, an agency should have a policy and procedure in place that clearly outlines how it will manage unreasonable complainant conduct, including informal and formal strategies, record-keeping, approvals required for limiting contact, and communication with the complainant.
- 8.5 Some strategies include limiting a complainant to a sole contact point; restricting the subject matter of communications considered by an agency; limiting when and how a complainant can contact an agency; and developing a no further communication list

where the **matter itself** is listed (i.e. once a complainant has exhausted all avenues internally and externally, and remains dissatisfied, the agency would send correspondence to the complainant potentially advising “We will no longer communicate with you about **this matter**”, however this leaves the complaint pathway open to further complaints which may be made by the same complainant).

8.6 Restricting a complainant’s access should be carefully considered. Agencies considering this should also consider:

- a. members of the public are entitled to engage with government through seeking advice, assistance and using services
- b. the human rights of the complainant need to be considered and whether complaint access limitations to the department is appropriate, in particular, whether there is an alternative course of action
- c. restricting access should be a last resort after other alternatives have been tried by an agency
- d. limitations and restrictions to access should be reviewed on a regular basis.

8.7 Where one agency does limit or restrict contact with a complainant, it would generally not be appropriate to share this information with other agencies due to privacy considerations unless there is a clear risk to the health and safety of a person or persons, e.g. staff dealing with the complainant, other members of the community.

8.8 The NSW Ombudsman model policy on managing unreasonable conduct by complainants is a resource agencies may wish to consider in developing their own policies. Further information is also available from the Queensland Ombudsman’s [resource](#) on managing unreasonable complainant conduct.

8.9 Agency policies about unreasonable conduct should ensure complainants are offered procedural fairness.

The following has been used to inform the development of the Guideline and contain information that agencies may find useful for the management of customer complaints.

- *Customer vulnerability – Requirements and guidelines for the design and delivery of inclusive service ISO 22458*
- *Guidelines for complaint management in organisations AS 10002:2022*
- *General Retention and Disposal Schedule* ([forgov.qld.gov.au](http://forgov.qld.gov.au) )
- *Public Records Act 2002* ([www.legislation.qld.gov.au](http://www.legislation.qld.gov.au) )
- *Public Sector Act 2022* ([www.legislation.qld.gov.au](http://www.legislation.qld.gov.au) )
- *Information Privacy Act 2009* ([www.legislation.qld.gov.au](http://www.legislation.qld.gov.au) )
- Queensland Ombudsman [Complaints management resource](#)
- Queensland Ombudsman [Managing unreasonable complainant conduct](#)
- Queensland Ombudsman [Policy and procedure guide](#)
- NSW Ombudsman [Complaint Management Framework](#)
- NSW Ombudsman [Effective complaint handling guidelines 3rd edition](#)
- NSW Ombudsman [Managing unreasonable conduct by a complainant](#)

- Victoria Ombudsman [Complaints: Good Practice Guide for Public Sector Agencies](#)
- Commonwealth Ombudsman [Better Practice Complaint Handling Guide](#) (PDF, 650 KB)

## **Definitions**

In this Guideline, the terms listed below have the following meanings:

**Accessibility** is the degree to which a product, system or service is available to as many people as possible.

**Agency** refers to a public service entity as per section 9 of the *Public Sector Act 2022*.

**Customer complaint** (see section 264(4) of the PS Act) means a complaint about the service or action of a public sector entity, or its staff, by a person who is apparently directly affected by the service or action. Examples of customer complaints include:

- a complaint about a decision made, or a failure to make a decision, by a public sector employee of the public sector entity
- a complaint about an act, or failure to act, of the public sector entity
- a complaint about the formulation of a proposal or intention of the public sector entity
- a complaint about the making of a recommendation by the public sector entity
- a complaint about the customer service provided by a public sector employee of the public sector entity.

**Complaint management system** consists of all policies, procedures, practices, systems, staff and resources used to manage complaints within an agency (AS 10002:2022, p.2).

**Complaint** is an expression of dissatisfaction made to or about an agency related to its services or actions, or its staff (AS 10002:2022, p.2).

**Complainant** is a person or their representative, or an organisational representative who makes a complaint to an agency. A representative must be authorised to make the complaint on behalf of the person or organisation, e.g. parent/ or relative/person with enduring power of attorney, or officer of an organisation.

**Customer** is a person or organisation who is apparently directly affected by a service or action by an agency.

**External review** is a process available for specific types of complaints where an oversight agency, such as the Queensland Ombudsman, or other complaints handling organisation, investigates the handling of a complaint by an agency or deals with complaints that were previously the subject of a complaint to an agency. An external review will only occur after the complainant has progressed through the agency's complaint process in the first instance and exhausted any other internal right of review.

**Internal review** is a merits review that involves a consideration of whether, based on the information/facts available at the time, the decision made was the correct one (including whether the actions and decisions were lawful, reasonable, fair and not improperly discriminatory). It is not a re-investigation of the complaint; it is an impartial review of a decision made about a complaint undertaken by an appropriate officer independent from the original decision-maker.

**Unreasonable complainant conduct** is any behaviour which, because of its nature or frequency, raises substantial health, safety, resource or equity issues. Examples of unreasonable complainant conduct can include unreasonable persistence; unreasonable demands; unreasonable lack of cooperation; unreasonable arguments; and unreasonable behaviour (AS 10002:2022, p.3).

**Vulnerability** is a state of being especially susceptible to detriment due to circumstances including disability, age, literacy levels, gender, trauma, stress and location – rural/remote and/or homeless (AS 10002:2022, p.3).

### **Suggested complaint acknowledgement correspondence template**

Download the [suggested complaint acknowledgement correspondence template \(DOCX, 23 KB\)](#) (Opens in new window) or use the text below, applying your agency's approved correspondence template/letterhead.

*<Correspondence Reference Number>  
[and/or]  
<Webform number if received via webform>*

*<Date>*

*<Address or email>*

Dear *<insert name>*

I refer to your complaint to *<insert public service entity name>* concerning *<insert issue>*.

Your complaint has been received and it is anticipated that you will receive a response within 30 business days from the above date. If there are any potential changes to this timeframe a representative of the *<insert public service entity name>* will contact you regarding progress of your complaint and advise of an amended timeframe.

Further information concerning the *<insert public service entity name>* complaint management policy and process can be found here *<insert webpage>* or can be provided to you by contacting *<insert phone number>*.

Should you have any queries or concerns, please contact *<insert name>* on *<insert phone number>* or via email *<insert email>*, quoting the above reference number.

Yours sincerely,

*<insert appropriate agency signature block>*