



# Director of Forensic Disability POLICY

**Title:** The management of complaints about care, support and protection of Forensic Disability Clients

---

## 1. Policy Statement

Effective complaint management is about accountability and is essential to the proper and effective administration of the *Forensic Disability Act 2011* (the Act). This policy addresses the management of complaints about care and support and protection of clients detained in the Forensic Disability Service (FDS).

This policy must be read in conjunction with the Director of Forensic Disability's *Client Statement of Rights and Responsibilities*.

## 2. Purpose

This policy outlines the relevant provisions of the Act, and the Director of Forensic Disability Policy in relation to complaints received about the care and support of forensic disability clients and how these are to be managed.

## 3. Scope

This policy applies to the FDS, all FDS staff the Administrator, Senior Practitioner, Authorised Practitioner/s and other persons performing a function or exercising a power under the Act.

This policy applies if a forensic disability client or someone on the forensic disability client's behalf, such as an allied person, family member, guardian, or other support person including FDS staff members, wishes to make a complaint about any aspect of the client's care or support. This may include a complaint about the quality or standard of care, support or protection, or an alleged failure to provide appropriate care and support and protection by the FDS or a particular staff member.

The Act recognises that forensic disability clients have the same basic human rights as all people. Moreover, the *Human Rights Act 2019*, which has application to all Queensland government entities including the FDS, protects and promotes human rights. Accordingly, if a client at the FDS believes their human rights have been breached due to an action or decision, they may make a complaint.

This policy covers complaints only directly related to a forensic disability client's support and care and does not replace other complaint processes of the State of Queensland, including any complaint processes of the Department that administers the FDS.

This policy must be implemented in a way that is consistent with the purpose and principles of the Act.

#### **4. Authorising Legislation**

Section 91(1) of the Forensic Disability Act 2011.

#### **5. Background and Definitions**

A complaint is any expression of dissatisfaction or concern, by or on behalf of a forensic disability client or group of forensic disability clients, regarding the provision of care or support or protection by the FDS.

A 'forensic disability client' is defined in section 10 of the Act as an adult who has an intellectual or cognitive disability for whom a forensic order (disability) is in force if, under the *Mental Health Act 2016* (MHA), the FDS is responsible for the adult. A person who is a forensic disability client remains a forensic disability client while undertaking any community treatment under the Act.

#### **6. Policy**

Amongst the functions of the Director of Forensic Disability under the Act is to ensure the care, support and protection of the rights of clients residing at the FDS. The Director of Forensic Disability recognises that an effective complaints management system is integral to protecting the rights of the clients and ensuring compliance with the Act.

Accordingly, the Administrator must ensure that the FDS has an effective complaints management system in place to manage complaints made either by a client or by other persons on behalf of a client.

##### **6.1 Complaint Register**

The Administrator of the FDS must ensure that the FDS has a functioning and up-to-date 'Feedback and Complaint Register.'

##### **6.2 Receiving feedback and complaints**

Complaints in relation to the support and care of clients at the FDS may be received by any staff member at the FDS and/or the Director of Forensic Disability. Complaints can be received through a number of channels, including:

- Telephone
- Email
- In person
- Letter

The *Client Statement of Rights and Responsibilities* outlines a client's right to complain and is provided to the client on admission to the FDS (refer to *Director Forensic Disability Policy - Client Participation and Representation*).

If a forensic disability client and/or their support person requires assistance to make a complaint, staff at the FDS must provide this assistance. Where a forensic disability client requires specific help to make a complaint such as, an interpreter, personal guardian, support person or community visitor, every reasonable effort must be made by the FDS to provide this support.

If the complaint is made by a member of staff at the FDS, then it should be provided to the staff member's line manager.

All staff have a responsibility to report a reasonable complaint.

### **6.3 Review of complaint**

Upon receipt of a reasonable complaint, the Senior Practitioner, Senior Service Manager or Administrator must review and identify appropriate action to address the complaint. This may involve further investigation to better understand the complaint, which may include interviews with concerned parties, meeting with a client's allied person/guardian, a review of clinical notes/reports, observation of a situation or other methods of investigation considered appropriate.

Complaints must be managed in a manner that protects privacy, subject to any legal obligations that may necessitate information being disclosed. Complaints must be taken seriously and handled competently to ensure appropriate outcomes for clients and stakeholders.

It is important that the Administrator, for complaints received by the FDS, ensures that all reasonable complaints are reviewed in a timely manner, thoroughly investigated and that ultimately the outcome of the investigation is provided to the complainant and any other relevant party or stakeholder.

### **6.4 Providing a response to the complainant**

The complainant must be provided with information as to how their complaint was reviewed and any follow up actions that have occurred or are still to occur. Best efforts should be made to understand the complainant's desired response and whether or not this is able to be achieved. Where the resolution of the complaint is prolonged, the complainant should be kept apprised of the actions that are being undertaken in relation to the complaint. When a complaint is resolved, feedback should be sought as to how satisfied the person was in relation to the resolution of their complaint.

### **6.5 Record**

If a reasonable complaint is received, it must be acknowledged and assessed, and this information must be recorded in the 'Feedback and Complaint Register'.

All actions taken and timeframes required to address the complaint should be clearly documented within the 'Feedback and Complaint Register'.

The 'Feedback and Complaint Register' must be made accessible to the Director of Forensic Disability upon request.

### **6.6 Notifying Director of Forensic Disability**

In order for the Director of Forensic Disability to ensure the care, support and rights of the clients are being protected in accordance with the Act, the Administrator must ensure the Director of Forensic Disability is notified as soon as practicable following a complaint being received by the FDS.

Furthermore, the Administrator must keep the Director of Forensic Disability informed about additional information obtained relating to the complaint and the progress of identified actions in response to the complaint. The Director of Forensic Disability may consider taking action in response to a complaint, including appointing an authorised officer to investigate.

### **6.7 Regular inspection of register**

The 'Feedback and Complaint Register' must be reviewed regularly by the Administrator, the Senior Practitioner and/or Senior Service Manager to ensure all complaints have been followed up, to identify whether further action is required and to analyse any trends to inform practice improvement.

Where there is a recognised trend in feedback or complaints, the Administrator must identify action(s) to address the issue.

## **7. Training**

The Administrator must ensure that FDS staff are aware of the application of this policy.

Amongst other things, the training must ensure that FDS staff are aware of:

- the special needs of clients at the FDS and how these special needs may impact on a client's capacity to communicate their feedback or make a complaint;
- the staff responsibility to report all reasonable complaints; and
- the need to record all actions taken in reviewing and resolving the complaint.

## **8. Complaints made directly to the Director of Forensic Disability**

The Director of Forensic Disability may directly receive feedback and complaints. These complaints will be recorded in the Director of Forensic Disability's 'Feedback and Complaint Register.' Where a complaint is reported directly to the Director of Forensic Disability (or officers of the Director of Forensic Disability) and is related to a matter outside the functions and powers of the Director of Forensic Disability, the Director of Forensic Disability will refer the complaint to the appropriate entity. For example, the complaint may be referred to the Administrator of the FDS, the Deputy Director-General of the Queensland Government department responsible for the FDS, or the complaints unit of the Queensland Government department responsible for the FDS.

Where a complaint is made directly to the Director of Forensic Disability and comes within the Director of Forensic Disability's legislative functions and powers, the Director of Forensic Disability will review and determine the most appropriate means to address the complaint. All actions taken and timeframes required to address the complaint will be clearly documented within the 'Feedback and Complaint Register'.

Where appropriate, the Director of Forensic Disability may decide to investigate a complaint directly which may include seeking specific information/reports from the FDS or other involved agency, undertaking interviews with concerned parties or meeting with clients and/or their allied person/guardian. Alternatively, the Director of Forensic Disability may decide to appoint an authorised officer to investigate a complaint.

**Date of approval:** 09 January 2023

**Date of operation:** 01 February 2023

**Date to be reviewed:** 01 February 2026

---

**Designation:** Director of Forensic Disability

**Help Contact:** [directorforensicdisability@dedsatsip.qld.gov.au](mailto:directorforensicdisability@dedsatsip.qld.gov.au)

---

Jenny Lynas  
Director of Forensic Disability