



Complaints and Feedback Policy and Procedure

POLICY STATEMENT

Complaints and feedback are a valuable element in understanding our clients' views of their experience with Nun kuwarrin Yunti. We recognise that some clients' expectations will not always be met, and we encourage and promote the rights of clients to provide us with their complaints, compliments and suggestions. Effective complaints handling allows us to improve our services, prevent similar issues recurring and maintain our responsiveness to the needs and concerns of clients.

Responsible Officer: Executive Manager, Health Services

Reference No.: CRS02

Version No.: 2.2

Approval Date: 5/03/2019

Next Review: 5/03/2021

SECTIONS

SECTION 1 – INTRODUCTION	3
1.1 Purpose	3
1.2 Scope	3
1.3 Definitions	3
1.4 Legislative and Compliance Context	4
SECTION 2 – POLICY	5
2.1 Policy Statement	5
2.2 Policy Principles	5
2.3 Relationship to other Policies	5
SECTION 3 – PROCEDURE	6
3.1. Compliments and Suggestions	6
3.2. Complaints	6
3.2.1. Receiving Complaints	6
3.2.2. Advocating on Behalf of a Client	7
3.2.3. Responding to Complaints	7
3.2.4. Identifying the Assigned Officer	8
3.2.5. Investigation and Findings	8
3.2.6. Finalising the Complaint	9
3.2.7. Unreasonable Conduct of a Client	9
3.2.8. Alternative Complaint Processes	10
3.3. Collecting Recording and Storing Complaints and Feedback Information	10
3.4. Using Complaints and Feedback for Continuous Improvement	10
3.5. Supporting Documentation	11
SECTION 4 – GOVERNANCE	12
4.1. Authorities and Responsibilities	12
4.2. Delegations	12

4.3. Keyword Search	12
4.4. Approval	12
4.5. Policy change history	13

SECTION 1 – INTRODUCTION

1.1 Purpose

This Policy provides guidance on the manner in which Nunkuwarrin Yunti manages feedback (complaints, compliments or suggestions) received in relation to the services we provide. Our policy recognises the role and responsibilities of all Nunkuwarrin Yunti staff in resolving feedback at the first point of contact and sets out the principles which will empower staff at all levels to effectively listen to the voice of the client.

1.2 Scope

This Policy applies to all Nunkuwarrin Yunti staff and volunteers. It describes the framework through which a person or stakeholder (herein named a 'client') can complain about, compliment us on or provide feedback and suggestions about our services, processes and procedures.

Our clients include but are not limited to:

- a) a person who accesses our services
- b) a student of our Registered Training Organisation
- c) third parties on behalf of the person listed above (e.g. carer or advocate)
- d) a person concerned about or who has an interest in our service or service delivery.

This Policy does not apply to:

- a) a complaint made by Nunkuwarrin Yunti staff relating to working conditions or conditions of service. Refer to the 'Staff Grievance Resolution Policy'
- b) a complaint made about other agencies or organisations.

1.3 Definitions

Word/Term	Definition
Advocate/Nominated Advocate	An advocate is a person who a client nominates to support them in making a complaint, and speaking out on their behalf. This enables the client to retain as much control as possible over how a complaint is carried out. An advocate may provide information and advice in order to assist the client to take action to resolve their complaint, or may take a more active role in representing the clients' rights to another person or organisation. An advocate can be a family member or friend of the person (informal advocate), or a nominated advocate whose role has legal status, for example holding an 'Enduring Power of Attorney' or 'Advanced Care Directive' (legal advocate) or an advocacy service.
Assigned Officer	The staff member (usually a manager) delegated the responsibility to investigate a complaint.
Complaint	An expression of dissatisfaction or unmet expectation by or on behalf of a client, and where a client wants a written complaint to be documented and a specific response from the organisation to their complaint. It relates to any aspect of our services, performance or the way we do our business. A complaint may also come from an external organisation. A complaint is different to someone making a negative comment which they want to give just for information (see Negative Feedback). A complaint is often referred to as a grievance as well. The grievance may relate to an injury, injustice, or wrong that affords reason for resistance or a formal expression as a complaint.
Compliment	An expression of praise, admiration or congratulation in relation to any aspect of our services, performance or the way we do our business.
Confidentiality	Only people directly involved in the complaint, compliment or suggestion e.g. as part of the nature of the complaint or the resolution of it will have access to the information about the complaint.
Feedback	Feedback encompasses all information relating to our services, performance or the way we do our business. Feedback can be positive or

Word/Term	Definition
	negative. It may come in the form of a complaint (by completing the 'Complaint Form'), compliment or suggestion or just someone expressing a view by completing the 'Feedback Form (Compliments and Suggestions)'.
Negative Feedback (vs a Complaint)	Negative feedback is when a client or stakeholder makes a negative comment about the organisation or a staff member however does not want to formalise it through a documented complaints process or be specifically contacted about any changes made by the organisation. This is negative feedback not a complaint
Procedural Fairness	Is concerned with the procedures used by a decision maker, rather than the actual outcome reached. It requires fair and proper procedure be used when making a decision.
Serious or Complex Complaint	Is one which has the potential to place Nunkuwarrin Yunti at extreme risk or may require specialist knowledge or skill to address. For example, a complaint that: <ul style="list-style-type: none"> a) poses an extreme risk to staff or may require significant staff disciplinary action, b) involves alleged criminal activity e.g. breach of law, corruption, sexual harassment, fraud or child abuse, c) has potential for litigation e.g. alleged defamation, d) may jeopardise Nunkuwarrin Yunti's relationship with funders and other key stakeholders e) involves the media and/or political environment e.g. the complaint is from a Member of Parliament f) a client or stakeholder has formally disputed an outcome of a complaints process.
Suggestion	A comment on how we could improve our services, do our business differently or improve staff performance. It may be part of a compliment or complaint but may also be offered as standalone information.
Vexatious Complaints	Where the person making the complaint uses the complaint resolution process without reasonable cause, the processes will still be adhered to.

1.4 Legislative and Compliance Context

Name	Location
Quality Improvement Council (QIC) Health and Community Services Criterion 1.9 Feedback management and 5.2.5 Focusing on positive outcomes (7 th Edition)	http://www.qip.com.au/standards/quality-improvement-council-qic-health-and-community-services-standards/
Royal Australian College of General Practitioners (RACGP) Standards for general practices (5 th Edition) Criterion C1.1 Information about your Practice	https://www.racgp.org.au/your-practice/standards/standards-for-general-practices-(5th-edition)/
<i>Health and Community Services Complaints Act 2004 (SA)</i>	http://www.legislation.sa.gov.au/LZ/C/A/HEALTH%20AND%20COMMUNITY%20SERVICES%20COMPLAINTS%20ACT%202004.aspx
<i>Privacy Act 1988 (Cth)</i> and the Australian Privacy Principles	http://www.oaic.gov.au/privacy/privacy-act/the-privacy-act
<i>Standards for Registered Training Organisations 2015.</i> Primarily Standard 6: Complaints and Appeals are recorded, acknowledge and dealt with fairly, efficiently and effectively.	http://www.asqa.gov.au/about/australias-vet-sector/standards-for-registered-training-organisations-(rtos)-2015.html

SECTION 2 – POLICY

2.1 Policy Statement

Complaints and feedback are a valuable element in understanding our clients' views of their experience with Nunkuwarrin Yunti. We recognise that some clients' expectations will not always be met, and we encourage and promote the rights of clients to provide us with their complaints, compliments and suggestions. Effective complaints handling allows us to improve our services, prevent similar issues recurring and maintain our responsiveness to the needs and concerns of clients.

The way we manage complaints is based on the right of the client to let us know their experience and their right to know what will happen next.

2.2 Policy Principles

- 1) **Client Focus:** All Nunkuwarrin Yunti Board Members and staff are committed to effective complaint handling and we value feedback through complaints.
- 2) **Visibility:** Our Policy is publicly available on the Nunkuwarrin Yunti website and is well publicised to clients, staff and other interested parties.
- 3) **Accessibility:** The process for making a complaint or providing feedback is easy to access and understand.
- 4) **Responsiveness:** Feedback is valued by Nunkuwarrin Yunti as this information will help us to continuously improve our systems and services. Complaints are acknowledged in a timely manner, addressed promptly and a client making a complaint is kept informed throughout the process.
- 5) **Objectivity & Fairness:** Complaints are dealt with in an equitable, objective and unbiased manner. The principles of natural justice and procedural fairness are adopted at every stage of the process.
- 6) **Confidentiality:** Personal information related to complaints is kept confidential.
- 7) **Remedy:** If a complaint is upheld, we provide a remedy wherever possible.
- 8) **Review:** There are opportunities for internal and external review and/or appeal about our response to a complaint. People are informed about these avenues.
- 9) **Accountability:** Responsibilities for complaint handling are clearly established, and complaints and responses to them are monitored and reported to Executive Management and the Board.
- 10) **Continuous Improvement:** Information received through complaints and feedback processes is reviewed regularly and used as a source of improvement of our services.

2.3 Relationship to other Policies

Policy Name	Relationship
Client Privacy	Ensuring the privacy of client's and organisational information.
Records Management	Describes how organisational records are managed from creation through to disposal.
Staff Grievance Resolution	Staff can pursue their own grievances through the Staff Grievance Resolution Policy.

SECTION 3 – PROCEDURE

Nunkuwarrin Yunti acknowledges that making complaints in person and / or verbally is the preferred method in Aboriginal culture. Staff are responsible for managing this process while ensuring complaints and feedback are dealt with in a culturally respectful manner such as recording complaints on behalf of clients or community when the individual would prefer to talk about it to someone.

Any staff member who has been informed of a client issue must in the first instance attempt to resolve the matter where possible. At this stage the resolution of the client issue may include advice, discussion and general mediation. Once a client has submitted a formal written complaint the following procedures must be followed. Formal complaints can be submitted by a staff member if the client or community member is not comfortable writing it down themselves.

Staff are not to pursue their own grievances through the complaints process, refer to the 'Staff Grievance Resolution Policy' for more information.

3.1. Compliments and Suggestions

Any staff member receiving feedback that is made by phone, in person or in writing should record this information on the 'Feedback Form (compliments and suggestions)' and placed in the Feedback Box located at the Front Reception Desk. The Feedback Box is to remain locked at all times.

At the end of every month, the CEO or Executive Management will collect any forms in the Feedback Box and the CEO or CEO PA/Executive Support will enter the information onto the 'Feedback Register'.

The CEO PA/Executive Support will forward the completed forms to the CEO for review. Depending on the type of feedback received, particularly if it is a comment or suggestion for improvement, it may be appropriate for the CEO to refer the matter to the relevant team to consider the feedback or suggestion. It may be appropriate to contact the client who provided the feedback (if known) and communicate any changes made as a result of their suggestion.

For compliments / positive feedback for specific programs or staff, the CEO will include this information in the Vicki's Yarns (CEO Update). The CEO will notify the Board if deemed necessary by the CEO.

If there are complaints included in the Feedback box, the CEO will follow up where possible and complete the 'Complaints Form' following the Complaints process.

3.2. Complaints

3.2.1. Receiving Complaints

A client wishing to make a complaint may do so in writing, by post, email, fax, in person or by phone.

A client may lodge a complaint by **writing** and completing a 'Complaints Form' which is available on the Nunkuwarrin Yunti website and on the intranet. Forms are also available at the Reception of all Nunkuwarrin Yunti sites.

The Form is to be completed for all complaints received and any associated correspondence that has been received should be attached.

Anyone making a complaint **in person** can complete the 'Complaints Form' or ask a staff member to complete it on their behalf. Any staff member (excluding Reception staff) can assist clients where needed. If the client would like to speak to the relevant Line Manager this should also be offered.

Anyone making a complaint **over the phone** should be directed to the CEO PA/Executive Support, who will complete a 'Complaints Form' on their behalf. If the complaint is received by

post, email or fax, it must be forwarded to the CEO PA/Executive Support as soon as possible and no later than two (2) working days of the initial date received.

The main steps in assisting a client to write and lodge a complaint are:

- a) identify yourself, listen (this is an important step in reducing tension), ask the necessary questions, record details of their complaint and what the client thinks should be done to resolve the complaint
- b) confirm the details that you have documented based on your discussion
- c) empathise with them in a courteous manner. Do not offer excuses, or argue with the client
- d) explain the complaints process
- e) do not attempt to lay blame or be defensive
- f) resolve the complaint if possible or commit to doing something immediately (within your authority) regardless of who may ultimately handle the complaint
- g) acknowledge the client's feelings
- h) take action to lodge the complaint and follow up as appropriate.

General and Medical Reception staff are expected to direct clients to the relevant staff member who will assist with receiving and processing the complaint. They are not to assist clients with documenting complaints.

Any information received from a client regarding a complaint must be kept **CONFIDENTIAL** and should not be discussed with anyone outside of the formal investigation process.

3.2.2. Advocating on Behalf of a Client

If it is difficult for a client to personally make a complaint, a complaint may be made by their nominated advocate. To become an advocate, the client making the complaint must identify themselves (for example, provide their full name and date of birth) and also provide their expressed verbal consent. This consent can be provided face to face to the Nunkuwarrin Yunti representative managing the complaint or over the phone to the CEO PA/Executive Support managing the complaint. If the advocate wants us to share client personal information, then written consent from the client must be obtained.

The advocate may assist the client to complete the 'Complaints Form' or can advocate on their behalf, as some clients may experience difficulty speaking up for themselves. In these instances, an advocate may communicate with Nunkuwarrin Yunti and suggest a suitable resolution where a complaint or dispute has arisen.

The advocate may be a family member or friend of the client (informal advocate), or a nominated advocate whose role has legal status, for example holding an 'Enduring Power of Attorney' or 'Advanced Care Directive' (legal advocate) or an advocacy service.

The advocate must be made aware that Interpreters cannot be used as advocates, as they have a distinct role to play through their interpreting services and should not nominate to be an advocate in circumstances where they have a conflict of interest, are not concerned about bias or being fair-minded and do not act in the client's best interests.

3.2.3. Responding to Complaints

A completed Complaints Form is to be forwarded to the CEO PA/Executive Support as soon as possible and no later than two (2) working days of the initial date received.

The CEO PA /Executive Support will acknowledge receipt of the complaint in writing to the client. The complaint will be delegated by the CEO or the CEO PA /Executive Support to an Assigned Officer within four (4) working days of the initial date the complaint was received.

The CEO PA/Executive Support is responsible for ensuring all information related to the complaint is documented in the Complaints Register including the Assigned Officer.

To ensure effective and timely management of a complaint, the Assigned Officer must ensure they fully understand the client's complaint issue/s and their requested outcome/s to resolve the matter.

Nunkuwarrin Yunti aims to resolve a complaint at the service level where possible within 20 working days of the initial date provided on the completed 'Complaints Form'.

3.2.4. Identifying the Assigned Officer

When determining an 'Assigned Officer' the CEO or CEO PA/Executive Support should give consideration to who is most appropriately placed to handle the complaint.

- Complaints relating to service delivery, staffing or provision of service should be assigned to the relevant Line Manager.
- Complaints made by external agencies should be assigned to a Team Manager or Middle or Executive Manager depending on the nature of the complaint.
- If the complaint has the potential to place the organisation at 'High' or 'Extreme' risk (for example, stakeholder relationships such as community or funders, political or media involvement or litigation) the complaint should be allocated to an Executive Manager, the CEO or the Board Chairperson.
- Managers should never investigate a complaint about their own conduct, it must be assigned to their Line manager.
- If the complaint is about the CEO, the process remains the same and the Chairperson of the Board facilitates the process.
- Complaints received directly by a Board member that is not related to the CEO, the Board member, through the Chair if deemed appropriate, must refer the complaint to the CEO for management following appropriate organisational process.
- Complaints concerning a Board member must be referred to the Board Chairperson. Procedures for Board complaints are detailed separately within the Board Handbook.

3.2.5. Investigation and Findings

The Assigned Officer should seek support from their line manager if they are unsure of how to deal with the complaint or need any assistance with investigating the matter.

Following consideration of each complaint or issue/s the Assigned Officer will seek the necessary information to make a determination. This could include:

- Seeking proof / facts of the issue: what evidence is there to support the complaint (or evidence to the contrary) e.g. Email, Communicare, phone message records, internal or external witnesses
- Investigating potential sources of information including interviewing relevant staff (interview notes should be documented).

Where a complaint is made by a young client under the age of 16 every effort should be made to ensure that they are encouraged to have a parent or guardian or adult advocate with them in any meetings or discussions with us.

To ensure the principles of procedural fairness are maintained, in the event of a complaint being in relation to a staff member the Assigned Officer shall:

- a) advise the staff member of the complaint and give every reasonable opportunity for the staff member to provide a response

- b) ensure that the complaint is not discussed with other staff and confidentiality is maintained.

All actions and enquiries made should be detailed on the 'Complaint Investigation Form' with clear findings and recommendations documented.

If the investigation and finalisation process is going to take more than 20 working days, the client making the complaint needs to be informed in writing by the Assigned Officer. An update must also be provided to their line manager.

3.2.6. Finalising the Complaint

The Assigned Officer will complete the documentation on the 'Complaint Investigation Form' and draft written response to the client. These documents will then be submitted to their line manager for approval prior to communicating with the client. There may be situations where the letter will need to be reviewed or signed by the CEO, not the Assigned Officer. The CEO PA/Executive Support will note any specific requirements on the Complaint Investigation Form when assigning the complaint.

The client should be notified of the outcome of their complaint in writing, a phone call can also be made if deemed appropriate and noted on the record.

While transparency is highly encouraged, when providing complaint findings to the client who lodged the complaint, the Assigned Officer must give consideration to any confidentiality and or privacy considerations.

Any disciplinary action against a staff member arising from a complaint will be taken in accordance with the 'Staff Code of Conduct Policy' and the 'Staff Counselling and Discipline Policy'.

3.2.7. Unreasonable Conduct of a Client

There may be occasions where a client's actions or motivations in their complaint are considered unreasonable. These situations may include:

- a) complaints made maliciously, for example, to damage a person's career or reputation
- b) aggressive or abusive behaviour, for example, abusive language (oral or written), threats, rudeness
- c) vexatious complaints made without evidence, for example, complaints made without substance to cause annoyance
- d) unreasonable demands, for example, insisting on an unreasonable timeframe, repeatedly changing the substance of the complaint, insisting on speaking to a particular staff member
- e) unreasonable persistence, for example, refusing to accept an outcome, apology or resolution, pursuing a new complaint without any new information.

In these circumstances we acknowledge that the client may still have a valid complaint and their complaint should be handled appropriately.

In cases of unreasonable conduct, the relevant Manager should refer the matter to their Line Manager and a summary of the issues should be provided in writing.

Any decision to restrict, withhold or withdraw access to the service/s or our staff shall only be made by the CEO. The client shall be informed by the CEO of our decision to do so in writing and the reasons for it. This step shall only be taken in extreme circumstances where a failure to do so may compromise our obligations as an employer, divert resources unnecessarily or bring the organisation into disrepute.

3.2.8. Alternative Complaint Processes

If a client is dissatisfied Nunkuwarrin Yunti's response, the client can contact the Health & Community Services Complaints Commissioner (HCSCC).

Options for contacting the HCSCC are by:

- a) calling the HCSCC Enquiry Service on phone (08) 8226 8666 (or 1800 232 007 for country callers) (Monday to Friday 9.00 am – 5.00 pm)
- b) writing to the HCSCC at PO Box 199 Rundle Mall, SA, 5000
- c) visiting the HCSCC website and filling out a 'Complaint Form' at: www.hscss.sa.gov.au

If the complaint is made by a student of our Registered Training Organisation (RTO) and they are dissatisfied Nunkuwarrin Yunti's response the student should contact the Office of the Training Advocate (OTA) or the Australian Department of Education and Training (DET).

Options for contacting the OTA are by:

- a) calling on phone 1800 006 488 (Monday to Friday 9.00 am – 5.00 pm)
- b) visiting the OTA at 55 Currie Street Adelaide SA.

Options for a student contacting the Australian DET are by:

- a) calling the DET National Training Complaints Hotline on phone 13 38 73 (Monday to Friday from 8am to 6pm nationally) or via email at skilling@education.gov.au. The DET website informs that prior to a person lodging a formal complaint with the National Training Complaints Hotline, it is important to follow the formal grievance process of the training organisation with which they have a grievance.
- b) if the complaint remains unresolved, or the student is dissatisfied they may decide to contact the Australian Skills Quality Authority (ASQA) through visiting the ASQA website at: <http://asqa.gov.au> or calling on phone 1300 701 801 (please be aware that ASQA does not act in a mediation capacity).

3.3. Collecting Recording and Storing Complaints and Feedback Information

All documents relating to the complaint, including interview records, investigation notes etc. should be retained and saved within Alfresco. The CEO PA/Executive Support will enter the remaining complaint information on the 'Complaint Register'.

Access to individual complaints records will be restricted to only those staff responsible for managing the complaint e.g. the Assigned Officer, CEO PA/Executive Support and relevant Management.

3.4. Using Complaints and Feedback for Continuous Improvement

The Complaints and Feedback Policy will be monitored and reviewed as part of our Policy Review process to ensure that it is effectively maintained and continually improved.

At a minimum of every six (6) months, the CEO PA/Executive Support will compile a Complaints and Feedback Report capturing recurring themes that may highlight systemic issues that will help the organisation to improve services, safeguard reputation and better prepare for the future.

3.5. Supporting Documentation

Form	Location
Complaint Form	Intranet
Complaint Investigation Form	Intranet
Complaint Process Flowchart	Intranet
Complaint Register	Alfresco (restricted access)
Complaints, Compliments and Feedback Brochure	Internet
Compliments and Feedback Report	Alfresco (restricted access)
Feedback (Compliments and Suggestions) Process Flowchart	Intranet
Feedback Form (Compliments and Suggestions)	Intranet
Feedback Register	Alfresco (restricted access)

Related Material	Location	Document Type
Better Practice Guide To Complaint Handling (Commonwealth Ombudsman)	http://www.ombudsman.gov.au/publications/better-practice-guides	PDF
Guidelines on Complaint Handling (Ombudsman Western Australia)	http://www.ombudsman.wa.gov.au/Publications/Documents/guidelines/Binder-Complaint-Handling.pdf	PDF
Complaints Handling Kit for Community Services (Ombudsman NSW)	https://www.ombo.nsw.gov.au/news-and-publications/publications/brochures/brochures/complaint-handling-kit-for-community-services-cs-crama	PDF

SECTION 4 – GOVERNANCE

4.1. Authorities and Responsibilities

Title	Responsibility
Chief Executive Officer (CEO)	<ul style="list-style-type: none">• Overarching responsibility for this Policy and for ensuring it is implemented, progress is monitored and regularly reviewed.• Monitor and review reports on all complaints to ensure issues impacting client satisfaction and service outcomes are being managed effectively.• Ensure organisational reputation is not placed at risk.• Ensure complaints are tabled at the Board, where relevant.
Executive Managers	<ul style="list-style-type: none">• Management of serious and complex complaints.• Receive feedback and complaints and ensure the appropriate staff member resolves the complaint in a timely manner and feedback is monitored and reviewed.
Line Managers	<ul style="list-style-type: none">• Orientation of new staff to this Policy.• Management of the complaints handling process within their area of responsibility.• Receive feedback and complaints and ensure the appropriate staff member resolves the complaint in a timely manner and feedback is monitored and reviewed.• Provide advice to and assist staff members with appropriate ways to manage complaints and equip staff to handle complaints in a professional manner and adhere to the complaint management process.
CEO PA/Executive Support	<ul style="list-style-type: none">• Maintenance of Complaints Register.• Maintenance of Feedback Register.• Maintenance of Complaints and Feedback Report.• Prepare a six monthly summary report regarding complaints received
Staff	<ul style="list-style-type: none">• Awareness and compliance with this Policy.• Ensure all service users have the opportunity to provide feedback and treat all complaints seriously.• Assist clients to resolve complaints to the best of their ability.

4.2. Delegations

Delegated Authority	Action
CEO	Authorisation of this Policy.

4.3. Keyword Search

Complaints, Compliments, Feedback, Ideas, Recommendations and Suggestions.

4.4. Approval

Approved by: Vicki Holmes, Chief Executive Officer Nunkuwarrin Yunti of South Australia Inc on 5/03/2019.

4.5. Policy change history

Version Number	Approval Date	Approved by	Amendment
v1.0	8 May 2007	CEO	Original Policy.
	12 March 2014	CEO	Same version number with removal of signature to allow searchable pdf.
v1.1	15 November 2014	CEO	Minor revisions Review of feedback box process.
v2.0	31 March 2015	CEO	Major revisions due to legislation, complexity of complaints, separation of complaints and feedback, the inclusion of nominated advocates, external complaint contacts, the reporting and review of KPIs, the brochure update and new supporting documents.
v2.1	3 May 2016	CEO	Change of review date to 15 November 2016.
v2.2	5 March 2019	CEO	Minor revisions, including general formatting and editing, the inclusion of complaint and feedback standards and flowcharts and the removal of KPIs.