Before Independent Hearings Commissioners Rotorua Lakes Council

In the matter of 13 applications for resource consent for

contracted emergency housing by Te Tūāpapa Kura Kāinga Ministry of Housing and Urban

Development

Statement of evidence by Emerge Aotearoa

11 October 2022



Counsel

Nick Whittington
Hawkestone Chambers
PO Box 12091, Thorndon,
Wellington 6144
+64 21 861 814
nick.whittington@hawkestone.co.nz

Statement of evidence by Emerge Aotearoa

1 Introduction

Item	Detail
Legal name:	Emerge Aotearoa Limited
Legal Status	Limited Liability Charitable Company
Date of Incorporation:	1 July 2015
Registered Office:	5/17 Lambie Drive, Manukau 2104, Auckland
Organisation's Registration Number:	Companies office registration number: 3038730 Charities register number: CC45040
Physical Address:	5/17 Lambie Drive, Manukau 2104, Auckland

1.1 Current Emergency Housing Provider contracted by HUD in support of the resource consent application.

2 Organisation

Emerge Aotearoa Group have a national proven track record of delivering services to individuals, whānau, and communities. Wellbeing and Mental Health and Addiction form the core of our services; however, we are a true social services provider with a range of services contracted by Ministry of Social Development, Te Tūāpapa Kura Kāinga/Ministry of Housing and Urban Development, Ministry of Health, Corrections, and Oranga Tamariki. Our range of services include Mental Health, Addiction, Housing Support, Sustaining Tenancies, Corrections, Peer Support, Respite, Home Based Support, Employment Services, Primary Care Support, Disability, RIDSAS, Forensic Step Down, Multi-Systemic Therapy, and Employee Assistance Programmes.

Emerge Aotearoa is a Registered Community Housing Provider and has Certification under the Health and Disability Standards. Emerge Aotearoa providers a wide range of services requiring varying levels of Social Service Accreditation. Our housing services currently hold level three accreditation, and we hold level one accreditation in some of our more specialist services.

Between the entities in our Group, we provide 206 services across 33 towns in Aotearoa. These services have consistently delivered positive outcomes across the lifespan, in primary, secondary, and tertiary settings from preventative

interventions, including building community resiliency, through to providing support to people requiring a sophisticated response to needs with high levels of acuity.

Our unique structure means we are well positioned to provide the Contracted Emergency Housing space in Rotorua a seamless and customised range of supports in a timely manner. We can provide access to suitable transitional housing in the community, have inhouse expertise on tenancy management, can provide holistic care by a multi-disciplinary workforce, complimented by a lived experience lens. Additionally, we have a nationwide network of partnerships that provides links to other supports and organisations to meet the needs of these whanau we will be supporting.

Kaupapa

Our organisation is committed to delivering outcomes led by the needs of people who use our services, their whānau, and their communities. We believe everyone can live a meaningful life.

Our vision is for people to realise their potential - tautokohia te mana tangata.

Our mission is to strengthen whānau together so that communities thrive - whakapakari ngaatahi I te whānau kia puuawai te haapori.

All our services are guided by our three strategic pou:



Māori Succeeding as Māori

We believe in the importance of Māori having sovereignty over their destination to achieve Tino Rangatiratanga and success as defined by Māori. This is not a destination that

is determined by others, it is a destination that Māori have authored themselves.

Lived Experience and Diversity are Privileged



We privilege people's experience of mental health, disability, discrimination, addiction, and trauma to name a few, as well as diversity. Having diverse people with diverse experiences participating actively in decision

making, represented at all levels of our organisation and sought out for their experience is central to all that we do.

Thriving Pacific Peoples



Pacific Communities will be thriving when the languages and cultures are embraced, Pacific youth are confident, resilient, contributing to and shaping their future, and the

communities are healthy and prosperous. The Pacific story has shifted from one of migration to one of belonging in Aotearoa.

We focus on these strategic pou by achieving the following outcomes:

Greater Equity

Whānau are choosing the services they wish to access; whānau are confident advocating for themselves; whānau who experience homelessness; mental distress, addiction or disability challenges participate equally in society; whānau experience equitable health outcomes; our relationship with Māori is centred on building partnerships.

Thriving Communities

People we support are involved in organisational decision making; whānau participate in leadership and development opportunities; whānau are engaged in activities to achieve wellbeing; whānau are responsible stewards of their environments; whānau are economically secure and are developing pathways to independence.

Healthy Whānau

Whānau live in decent homes; whānau, particularly children are safe and experiencing mental wellbeing; whānau are connected to their whakapapa and communities; whānau are setting and achieving personal goals; and whānau, particularly children have the resources to cope with life's challenges and to heal and recover from trauma.

3 Ann's Volcanic Motel, Midway Motel, Geneva Motel

3.1 <u>Description motels:</u> All 3 motels are made of units of various sizes from studio to 2 bedroom. Midway Motel and Geneva Motel are located on Fenton Street and Ann's Volcanic is located on Malfroy Road There are a total of 39 units across all 3 locations that Emerge Aotearoa provide services to. All motels have a live in motel manager who is responsible for

- ongoing maintenance, general wear and tear, cleaning of the units and the overall condition of the motel.
- 3.2 Access to play space: Ann's Volcanic whanau have their own courtyard that is fenced in and safe for tamariki to play. Midway has a playground for tamariki. Geneva Motel does not have a designated space for tamariki to play however tamariki are encouraged to attend afterschool care programs, or extracurricular activities. Parents or caregivers work closely with their Navigator and Community Liaison to determine what programs the children could attend.
- 3.3 <u>Description of services:</u> Our team is made of up 1 FTE Team Leader, 3 FTE Navigators, 1 FTE Community Liaison and .5 FTE Referral Coordinator. One of the primary functions of all the roles is to support Te Hau ki te Kainga in the vision of self-sufficient, interdependent and vibrant whanau alongside Te Pokapu and the other partners of the

The role of the Team Leader is to ensure optimum outcomes for whanau who access the service by effectively and efficiently managing the service through team leadership, coaching, practical support, and supervision. They continuously seek new ways of improving the service and liaise and network with other agencies in the sector and region to ensure linkages and relationships are facilitated that provide the best outcomes for whanau.

The purpose of the Navigator role is to work in a client-centred way with the whole whanau. The Navigator works to holistically assess needs and combines skills, knowledge, and experience to provide support in a mana enhancing way. They support whanau to identify and work toward their goals and aspirations. They give guidance on how to navigate the various agencies that they may be working with, connecting them with relevant community and statutory resources to support them in achieving their goals and aspirations.

Community Liaison provides an important connection between the Housing Team, whānau, and stakeholders. They develop, co-ordinate and implement engagement activities for whānau in our housing services. This includes whānau -centered social and community programmes with a focus on building social connection and engagement. This team member fosters positive working relationships and work closely with local lwi, Hapu

and community agencies, to ensure whānau needs are at the forefront of service provision. This role is responsible for putting together Whanau hui in each motel. These are held to unite the whanau and help provide whanau in service a sense of community within their living space





- 3.4 Emerge Aotearoa has had many successful outcomes from working alongside whanau in the Contracted Emergency Housing space. Below are some examples:
 - A whanau with a history of violence and benefit fraud were referred into service. This whanau was frequently appearing on the Police Harms Agenda - a total of 56 times prior to entering service with Emerge Aotearoa. The whanau were moving from motel to motel in EH SNG in order to avoid Oranga Tamariki. OT were attempting to engage the whanau due to the violence.

Having someone listen to their story was the key to engaging with this whanau. Our navigation team encouraged and helped them re engage with OT to ensure the safety of their children, encouraged them to be open about living together and having her partner put on her referral so they could be a family, helped her partner attain a job full time with Trevally's. With the support the were given in the Contracted Emergency Housing space, this whanau are no longer needing to work with OT and they have successfully attained a private rental property.

- A couple who had frequent verbal altercations at the motel when they first arrived were supported to make significant change in their relationship. The Community Liaison enrolled both parties in horse riding therapy. This therapy helped them identified for themselves the issues in their relationship and they are now working on being more open and talking freely with each other. Both parties have now attained full time employment one with Goodrich Constructions and the other with a Kohanga Reo as a Kaiako where her children attend. Importantly, they have not had any arguments for two months.
- Client with a mild intellectual disability, estranged from her whanau. She had been couch-surfing for 3 years, when referred, she was in a home with 6 others sleeping on the floor. No form of ID or bank card, not registered with any doctor, taken advantage of by others because of her disability.

While in service with us, we have reconnected her with whanau. She has been visited by her father who viewed her unit. He is happy she has a safe place to stay with people who care about her and look out for her wellbeing. Client has now obtained a Kiwi ID Card, her own bank card is now registered with a GP and getting the medication she needs for her health issues. Emerge are teaching her basic life skills cleaning, hygiene, cooking which she finds very difficult and struggles with daily.

 A in order to assure that whanau are comfortable and provided with appropriate safety supports, we have implemented a mara kai to allow whanau in service an opportunity to explore other interest such as gardening and allow them to learn new skills. This also encourages them to become self-sufficient and provide kai for themselves and sets them up with a new skill to help when they are in their own whare. For safety as some of our units are two story, or close to a main road, baby gates have been purchased to help whanau and their children feel safe while in our Motel spaces.

 Whanau hui for the Motel space have been held to unite the whanau and help provide whanau in service a sense of community within their living space.

We have started using the Matrix tool to evidence and compare changes over time during the course of client journeys:

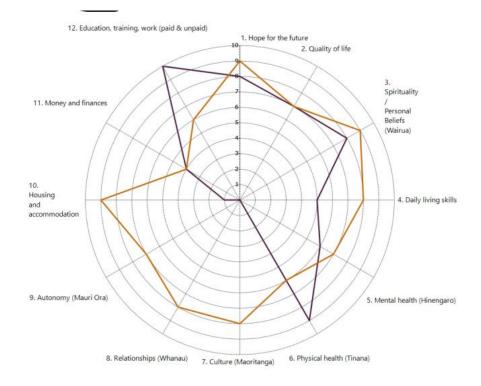
Although this is just in its beginning phases of our practice, we have included two examples of assessments, comparing two assessments from service initiation to two later check-ins. In both instances, improvements in various domains are noted as follows:

Client: A

14 months between Matrix assessments: Increased wellbeing measured on

Social domain:

- Education, training, work(up 1: 6 to 7) Supported
- Housing & accommodation (up 1: 4 to 5)
- Money & Finances (up 3: 4 to 7) from At risk to supported
- Cultural domain
- Relationships (up 3: 4 to 7)
- Personal domain:
- Quality of life (up 1: 4 to 5)
- -
- Clinical domain: Improved to self sufficient
- Mental Health (up 1: 4 to 5)
- Physical Health (up 1: 6 to 7)
- Down on Hope for the future (7 down to 5)
- Daily living skills (down 5 to 3)



Legend	Assessment
	09/08/2022
,	18/11/2021

Client: B

9 months between Matrix assessments:

Increased wellbeing measured on

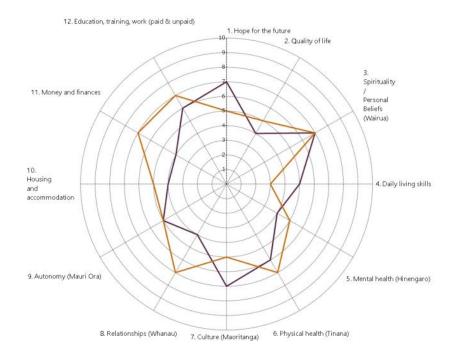
- Social domain: Relationships (up 3: 4 to 7)
- Housing & accommodation (was in crisis at 1, up 5: 4 to 9)
- Quality of life (up 1: 4 to 5)
- Hope for the future (up 1: 8 to 9)

Personal Domain: Thriving/self-sufficient

- Hope for the future (up 1: 8 to 9)

Clinical Domain: self-sufficient/stable

- Daily living skills (up 3: 5 to 8)
- Mental Health/Hinengaro (up 1: 4 to 5)
- Physical Health/Tinana (up 1: 6 to 7)
- Unchanged: Money & Finances (unchanged, client continues to work two jobs)



Legend	Assessment
	27/05/2022
-	23/03/2021

4. Referral Process

- Whanau are assessed through Te Pokapu. They check for availability
 of adults and ages of children for bedding configuration and use the
 availability report to see which provider is suited best.
- At point of triage, it is then sent through to us as we were the best suited for the whanau with the availability of rooms and from there, we take the whanau and complete our own internal triage with our referral co-ordinator.
- This triage involves our referral co-ordinator asking questions to gauge suitability (see attached) and arranging an interview with the whanau to have an initial assessment with the Navigators. The triage allows us to understand what the whanau determine are their most important needs when identifying suitable accommodation and house them accordingly. This can look like the whanau advising they must be close to medical services, and us placing them in accommodation nearest their medical centre. Another example could be whanau advise they have young, active children. We will ensure they are placed in a location with adequate play space.

- During an initial assessment, a Navigator will complete our relevant documents and engage whanau in conversation to determine if they are suitable for service and if we are the best service providers for their needs. This is done with the whanau at the proposed unit for an they view the property and do a walkthrough. The Motel staff are present when signing whanau into service and we check to ensure the whanau are happy with the room that they have been allocated.
- If all parties are happy to proceed, we complete the sign up including a residential agreement.

If we are not able to

5. Complaints Process

Emerge Aotearoa have a robust complaints process. Our policy and procedure documents are below.

Date: 11 October 2022

Moana Paul

North Island Housing Manager



Client Complaints Policy an	d Procedure
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This policy applies to/ E Pā Ana Tenei Kaupapa Here Ki:

All Emerge Aotearoa kaimahi / employees, volunteers, students and contractors and people/clients / whanau supported by our services.

We need this policy because/ Kei Te Hiahia Tatou Ki Tenei Kaupapa Here Na Te Mea:

To ensure the rights of people accessing services and their family/whanau when making a complaint, are understood, respected and upheld and any learnings from the complaint investigation used to improve and develop services and the organisation.

Policy/ Ngā Kaupapa Here

A complaint may be made at any time, verbally or in writing.

All situations which include allegations of criminal behaviour or abuse must be recorded as a complaint and follow the investigation process.

Service delivery to the person accessing services will not be adversely affected by making a complaint.

Complaint documentation will not be stored on the client record.

All complaints will be managed in a systematic way as required by legislation, sector standards and as outlined in this document.

Complaints that require notification to HealthCert will be processed using the approved <u>template</u> accessed on MOH website *Notifying an incident under section 31*

Complaint process time frames will be strictly adhered to.

Investigations will be led by the District/Operations Manager not directly named in the complaint.

Investigations and written responses are supported by Lived Experience Partners (LXP) and Quality.

Information from complaints will be analysed for service improvements in partnership with the Quality and Lived Experience Teams and disseminated to relevant services at National and Regional meetings.

Service Improvement measures will be implemented, and actions documented in the Quality section of Team Meeting Minutes.

Monitoring of improvements and organisational learning will be measured by client surveys and Lived Experience Partner service visits. Feedback from Lived Experience Partners will be provided to Senior Managers who will monitor corrective actions.

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Professional Practice

Tamariki and Rangatahi

An external support person for tamariki (children) and rangatahi (young people) will be identified on entry to the service (e.g. VOYCE, Social Worker)

All tamariki and rangatahi and their advocates will be informed and have information available on how to make a complaint.

Procedure/ Ngā Whakahaere

Receiving and Acknowledging Complaints

All situations which include allegations of criminal behaviour or abuse must be reported to the Regional manager and the appropriate authority at the earliest opportunity, recorded as a complaint and follow the investigation process.

Written complaints and documented verbal complaints will be sent to the Quality team to be recorded in the electronic system within that working day and forwarded to the District Manager and the Lived Experience Partner.

Verbal complaints will be recorded at the time and will be checked with the person raising the complaint that the record is correct.

In some cases, people may be reluctant to formally complain, or will make a complaint and then ask that no action be taken. In these cases, staff should explain that it is our policy to use this feedback as a learning opportunity to improve our services and thank the person for bringing the issue to our attention.

Investigation of Complaints

Within five working days

The District /Operations Manager will:

- Decide the risk rating and how the complaint will be investigated/resolved using recommended complaint investigation guidelines
- Send a letter acknowledging the complaint / valuable feedback. Inform the person raising the complaint of the complaint process and thank them for bringing it to our attention
- Include our process, expected timeframes and that we may need to communicate with the person to gather further information
- Keep the Regional Manager and National Managers Health and Disability/Housing and Lived Experience Partner informed of the complaint and updated on the progress of the complaint investigation.

Within 20 working days of the complaint being lodged

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The complaint will be investigated and resolved. If for any reason more time is required, the complainant will be sent an update with the new expected timeframe for an outcome by day 10. Updates will be provided at least monthly should any extension be required.

Investigation may include meeting or communicating with the person making the complaint to gather further information. They will have been informed of this in the acknowledgement letter.

During the investigation, consideration will be given to the Emerge Aotearoa values, the Code of Health and Disability Consumer Rights, Health Information Privacy Code, Health & Safety in Employment Act, or any other contractual or legislative requirement that may apply.

The Investigator will ensure the complaints register/system is updated with details of the investigation and the investigation will be concluded, giving enough time to respond to the person making the complaint within 20 working days from receipt of the complaint.

All documentation including the investigation process will be filed with Quality Assurance and is accessible on request to the Quality Team by District/Operations Managers, Line 3 or above.

Complaints Risk Rating

High	Client's needs not met resulting in harm
Moderate	Client's needs not met with impact on positive client experience
Low	Client's needs only partially met with minimal negative impact on client experience

Low risk complaints can be resolved in a meeting with the person raising the complaint including:

- Acknowledging the complaint in writing
- Informing them of their right to advocacy
- Offering to meet, and if the person wants to meet negotiating a time, place and participants of the meeting
- Using our values to learn from the issue and discussing at team meetings and regional meeting to share the learning and prevent reoccurrence

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Include cultural support and/or interpreter support as required

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Moderate complaints process includes:

- Acknowledgement of the complaint in writing
- Providing information on advocacy and HDC
- Preferably negotiating a face to face meeting time and place with the person raising the complaint at a time and place the person is comfortable with
- Consider cultural support and/or interpreter support

High Risk Complaints process includes

- Notifying Regional Manager, who will escalate as required
- Acknowledgement of the complaint in writing
- Providing information on advocacy and HDC
- Preferably negotiating a face to face meeting time and place with the person raising the complaint
- Include cultural support and/or interpreter support as required
- If required, reporting the complaint to HealthCert and/or the DHB/ funder.

Review of documentation

Lived Experience Partner and Quality Assurance review the content of the final response letter which will include:

- Details of the results of the investigation and whether it has been upheld or could not be substantiated
- Details of how any improvements will be implemented and timeframes
- Evidence that the complainant has been consulted and is satisfied with the outcome
- Information on the appeal process

Where the investigation is not concluded within 20 working days, a written update to the progress of the investigation and a reason for the delay will be provided to the person raising the complaint by day 10, with an expected timeframe for the investigation to be completed. Monthly updates will be provided at a minimum should there be any further delays.

Appeal Process

If the person raising the complaint appeals the outcome of the complaint investigation the Regional Manager will consider involving an external reviewer, discuss options with the National Manager, and will:

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Within one week

Consider the need for further investigation by:

- Gathering information from the investigator of the complaint
- Reviewing the related documentation

Contact the person who raised the complaint to:

- Clarify what the person is not happy with
- Offer to meet to discuss and gather more information
- Keep the National Manager informed

Decision is made to close the complaint

The Regional/Operational Manager informs the person raising the complaint of the decision in writing.

If the decision is **accepted** the complaints register / system is updated and the complaint is closed.

If the decision is **not accepted** and the person raising the complaint is not satisfied the Regional/Operational Manager:

- Advises the person that they may refer the complaint to the Health & Disability Commissioner or The Privacy Commissioner
- Reinvestigates the complaint
- Advises Quality Assurance of the outcome to update the complaint register

Service Improvement Process

Service improvement begins with thorough, respectful investigation of all complaints and feedback that includes a responsive approach to all parties and an understanding of their worldview.

The identification and development of corrective action plans where a complaint is upheld is logged on the Complaints register by Quality Assurance for national review of trends and improvements.

Services will be supported by their Line Managers to learn from all feedback and complaints by reviewing root causes of complaints and resulting improvements.

Monthly - Service Manager/Team Leader

- Discuss at team and client/whanau meetings to identify trends and documents service improvement measures.
- Provides feedback to Quality Team

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Two Monthly - District/Operational Manager

- Discuss at District and/or Regional Leadership meetings to identify service improvement measures
- Provides feedback to Quality Team

Three monthly - Quality Team

- Identifies area(s) of service improvement(s) resulting from learning from complaint(s)
- Assess the effectiveness of improvement measures taken
- Update the complaints register
- Provides update to Quality Governance Group

Six Monthly - Quality Team

- Complete trend analysis
- Monitors and reports implementation of service improvements
- Analyses effects of service improvement measures (refer Quality Improvement Framework)
- Provides update to Quality Governance Group
- **Client Complaints Recording Process**

Definitions/ Ngā Whakamāramatang

- Client or person using the service can also be identified as; people, tangata whaiora, whaiora, whānau, service user
- A complaint is:
 - Any expression of dissatisfaction about services provided Dissatisfaction with the conduct of a staff member/ student placement/ contractor/ management of Emerge Aotearoa
- A complaint may be made:
 - O Directly from a service user their family/whānau.
 - Through the Health and Disability Commissioners office.
 - Through the Privacy Commissioners office.
 - By a member of parliament.
 - Through Consumer Advocates. 0
 - By a service provider.
 - By a member of the public.
- Feedback is an observation, remark or expression of opinion about aspects of the service/organisation that could be improved. A person will in the first instance be informed of their right to make a formal complaint.

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- Where the person identifies they do not want to make a complaint their comments may be formally recorded with the person's knowledge on the **Compliments Feedback and Suggestions form 180A107** and submitted to their line Manager and Quality Assurance for recording on the National Feedback Register.
- The same timeframes will be followed for investigation and response to feedback as a formal complaint. Corrective Actions will be documented in the quality section of team meeting minutes.
- Anonymous complaints people lodging a complaint or feedback may prefer to be anonymous. Investigations will occur within the limitations caused by the anonymity and the limitations will be acknowledged in any documentation.
- NOTE: Where a person's life is at risk, criminal behaviour or court proceedings are involved anonymity may not be possible.
- Family/Whānau includes but is not limited to carers, guardians, significant other/s, friends, etc.

See also/ Etahi Atu Tirohanga

- Health and Disability Services Standards, 8134:2008
- Health and Disability Commissioner Website http://www.hdc.org.nz/
- **HDC** Complaints processes
- Open Disclosure policy and procedure
- Incident Reporting policy and procedure

🕸 Whakawhanaunga

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lment ID: Version number:

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EMERGE Aotearoa Realising potential Toutokohia to mana tamanta

Client Complaints and Feedback Procedure

On Receipt of a Complaint or Feedback

1. Day 1

On the day a complaint or feedback is received either verbally or in writing, a copy is sent to

- i. <u>complaints-feedback@emergeaotearoa.org.nz</u> by staff or the complainant can email directly to this address from an external email
- ii. The Quality Assurance Privacy Officer (QA) monitors the email, logs all documentation and provides an identification number to be used on all email correspondence and response letters

2. Within 2 working days

- i. DM/OM confirms the risk consequence and type of complaint/feedback (appendix 1 & 2)
- iii. the investigator is assigned by the DM/OM
- iv. The investigator will be a person not implicated or involved in the complaint
- v. The investigation notes will be legible and saved to the Complaints folder by the Quality partner or Quality Assurance (Complaint Investigation Template 180G107)
- 3. **Registering a complaint:** all complaints must be registered to support continuous quality improvement. Where a complaint/feedback is Low risk, can be resolved within 5 working days and evidence of the complainant's satisfaction can be provided, the complaint will be closed on the register by QA who files the evidence of satisfaction- formal letters do not need to be sent but email communications or summary of phone call providing early resolution will be held on file for 10 years.
- 4. Low and Moderate risk complaints are managed by DM/OM (appendix 3)
- 5. High risk complaints are managed by RM or OM with notification to the National Manager (NM)
- 6. **Formal response** documentation is prepared by District and Operations managers with Quality Improvement, Lived Experience, People Partner and Quality Assurance support
- 7. All responses including acknowledgement, are quality checked before sending within timeframes

8. **Day 5**

- Using the Emerge Aotearoa Complaint Acknowledgement Letter Template 180G006, provide a summary of the areas identified by the complainant the decision to uphold or not can be made by day 10. The HDC Code of Rights requires formal acknowledgement by Day 5 (See 3. Registering a Complaint, for exception, where early resolution occurs)
- The acknowledgement letter is checked by the Quality Partner or QA and is signed and sent by DM/OM within 5 working days of receipt of complaint

9. **Day 10**

- By day 10 a decision is made by DM/OM/RM to uphold or not uphold the complaint
- NOT UPHELD: Notify the complainant of the reason the complaint is not upheld. This
 response must be made as soon as practicable after a decision is made and within 20 working
 days from the receipt of the complaint. Use the Complaint Outcome Letter Template and
 include the right of appeal and the right to advocacy.

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Client Complaints and Feedback Procedure

 UPHELD: If more than 20 days is required to investigate the complaint the person must be notified within 10 days after giving written acknowledgement and updated at least every month thereafter until the complaint is closed using the Complaint Extension Letter 180G112
 Template

10. Day 20

- A copy of the Emerge Aotearoa Outcome letter template 180G007 signed by the person managing the complaint (RM/ DM/OM) is checked by QA and sent by DM/OM/RM cc'd to QA within 20 working days
- The Outcome letter will include
- i. reason the complaint was upheld or not upheld
- ii. summary of the actions taken
- iii. evidence of the complainant's level of satisfaction,
- iv. right to advocacy support and
- v. right to appeal a decision

Monitoring & Reporting

11. Where complaints are upheld, a Corrective Action Plan (CAP) which identifies responsibilities and timeframes will be logged on the National Register and reported on quarterly by Quality partners to Quality Governance.

Right to appeal

12. Where the complainant appeals a decision the same response timeframe will be followed as for the original complaint with acknowledgement of appeal within 5 days and regular updates on reviewing the outcome decision. The National Manager will be notified, and the Regional Manager will manage the complaint process which may include assigning a new investigator to reinterview affected parties

Health and Disability Commission (HDC) Complaints:

- 13. HDC complaints are sent directly to the Chief Executive Officer (CEO) and forwarded to the Executive Assistant for logging, tracking, and monitoring with Quality Improvement Manager oversight
- 14. The RM or OM manages the complaint within HDC required timeframes which may be shorter than the usual 20 working days.
- 15. An extension of the timeframe for gathering information can be requested from the HDC

Recording Process and Timeframes

- 16. Details of the complaint provided to QA as required for the register include
 - i. the region
 - ii. service name
 - iii. Service Manager(SM) or Team Leader's (TL) name
 - iv. assigned investigator name
 - v. risk rating (appendix 1)

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Client Complaints and Feedback Procedure

- vi. type of complaint (appendix 2)
- vii. date the complaint was received
- 17. PDF copies of all complaint documentation, investigation and emails are saved to the confidential Complaints folder by QA (Include the Complaint number in the subject line of all email correspondence)
- 18. Files are saved in the following format: complaint number/ year/ month/document type/complainant name (e.g. 051_2021_11_03_acknowledgement_Bob Smith)

Appendix 1 Risk Consequence

High	Client's needs not met resulting in harm
Moderate	Client's needs not met with impact on positive client experience
Low	Client's needs only partially met with minimal negative impact on client experience

Appendix 2 Source & Type of Complaint

*SOURCE OF COMPLAINT:

C = Client Related (this includes whānau and friends complaints)

F = Funder

P = Public

HDC = HDC

**TYPE OF COMPLAINT

Access to Services
Attitude/Action of Staff
Client Support
Consumer Rights
Environment/Facilities
Information/Communication
Security and Safety (Privacy)
Service Delivery

NOTE: Employee complaints go to People Partners for support—see policy <u>120E108</u> and <u>120B106</u>
All Client complaints about staff will be recorded in the Client Complaints register and will involve a People Partner from the outset.

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Client Complaints and Feedback Procedure



Appendix 3

Managing a Complaint

Any questions please email complaints-feedback@emergeaotearoa.org.nz and a Quality Team member will respond within one business day

- Quality Partners for each region are available to Managers for documentation support
- Quality Assurance monitors and reports on quality of outcomes, organisational learning, and service compliance with meeting timeframes for each stage of the complaint as required by legislation
- Quality Partners Responsibilities: The V drive folder and Complaints register are confidential to the Quality Team who report quarterly on complaint themes and outcomes in Regional Quality data reports stored on Te Kete's Quality Page

Complaints spreadsheet: V:\Projects & Groups\Client Complaints\Complaints Register.xlsx

PDF copies of all complaint documentation: V:\Projects & Groups\Client Complaints\Paperwork

Templates and Links

Responses are completed to a professional standard using Emerge Aotearoa Templates and within the strict timeframes required under Right 10 of the Code of Health and Disability Services Consumers' Rights

Link to Code of Health and Disability Services Consumers' Rights

Code of Rights in Full

Link to Investigation Template 180G107

Link to Client Complaint Form 180A027 or email directly to complaints-feedback@emergeaotearoa.org.nz

Link to Acknowledgement Letter Template 180G006

<u>Link to Complaint Extension Letter Template</u> 180G112

Link to Complaint Outcome Letter Template 180G007

Link to Client Complaints & Feedback Policy 180E008

Employee complaints

Employee complaints about other employees are not logged on the Client Complaints register

Client complaints about staff may involve a People Partner from the outset and will be recorded in the Client

Complaints register.

Link to Employee Complaints Policy 120E108

Link to Employee Complaints Procedure 120B106

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Appendix 4

Complaint Procedure Flowchart Client Complaints & Feedback policy 180E008

Day 1

- 1.Complaint received & sent to
- complaints-feedback@emergeaotearoa.org.nz
- 2. Quality Team provides a complaint number for all documentation

Day 2-4

- 1. Dates for the complaint actions are entered in Managers Outlook calendars
- 2. LOW/MODERATE risk: Senior Manager (DM or OM) confirms risk and assigns an investigator
- 3. HIGH risk DM/OM escalates to Regional/National Manager for oversight
 - 4. DM/OM prepares the acknowledgement response
- 5. Quality partner checks & edits prior to sending by day 5

Day 5

- 1. Acknowledgement Letter is signed and given to the complainant or sent from a senior managers email
- 2. Copy of the signed acknowledgement is filed by Quality partner in secure V drive Complaints folder

Day 5-10

- 1. A decision is made to uphold or not uphold the complaint by day 10
- 2. Lived Experience & People partners are included in review of complaints
- 3. UPHELD but need more time: Extension letter must be provided by day 10 and at a minimum of monthly while the complaint remains open
- 4. NOT UPHELD: notify complainant of reasons as soon as possible after the decision is made using the formal Outcome letter template

Day 10

- 1.Extension of time letter including reason and expected new timeframe has been received by complainant
- 2.Decision to not uphold letter has been fomulated to be sent asap
- 3. Investigation is well under way interviews & investigation evidence have been sent to quality team for confidential filing

Day10 to 20

- 1. DM/OM completes & signs Low to Moderate risk Outcome letter
- 2. RM/NM completes High risk Outcome letter
- 3. Outcome letter includes satisfaction of the complainant, service actions and improvements, right to advocacy & right to appeal
 - 4. Letter is quality checked before sending
 - 5. Outcome letter is received by the complainant no later than day 20

An appeal
will be managed
by National and
Regional or
Operational
Managers or
referred on to
HDC

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