

Consumer Participation and Feedback Policy

Think Community Services (TCS)

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Think Mental Health acknowledge the Traditional custodians on the land on which we live and work, and of the many different nations across the wider regions from which we all come. In Canberra this is the Ngunnawal people. We pay our respects to the Elders past, present and emerging as the holders of the memories, the traditions, the culture and the spiritual wellbeing of the Aboriginal and Torres Strait Islander peoples across the nation.

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1.0 Purpose

This policy establishes Think Community Services (TCS's) approach to consumer and carer participation across all services encompassing both the active participation of consumers and carers in governance, service design, and quality improvement, and the mechanisms through which service users provide feedback, complaints, compliments, and suggestions.

Consumer and carer participation is not limited to feedback. It is a continuum from active partnership in individual care, through input into service design and improvement, to formal governance participation through the Consumer Advisory Group (CAG).

The purpose of this policy is to:

- Establish TCS's approach to consumer and carer participation across four levels: partnership in care; input into service design; participation in quality improvement; and ongoing feedback on safety and quality.
- Define TCS's Consumer Advisory Group (CAG) as a formal governance mechanism and establish the principles governing consumer participation in governance.
- Explain the types of feedback, complaints, compliments, and suggestions that are important to TCS, and how service users will be supported to provide them.
- Ensure all service users have access to a simple, confidential, and transparent feedback and complaints process across all services and channels.
- Establish clear timeframes and processes for responding to complaints fairly, consistently, and promptly.
- Define how feedback is actively used to inform continuous quality improvement.
- Provide mechanisms to identify and address emerging risks to consumer safety and quality.

2.0 Scope

This policy applies to all Think Community Services staff, contractors, and governing body members involved in policy development, approval, implementation, and review or management of organisational policies. It applies across all services, programs, and operational areas delivered by TCS.

This policy applies to all TCS policy documents, including policies, procedures, guidelines, and protocols. It does not apply to individual consumer support plans, clinical documentation, or operational work instructions that fall outside the policy suite.

3.0 Policy Statement

Think Community Services is committed to genuine partnership with consumers, carers, and families across all services. It is a core component of how TCS designs, delivers, and improves its services. TCS actively seeks the perspectives of people with

lived experience at every level of the organisation, from individual care planning through to Board-level governance.

Feedback (positive and negative) is valued, welcomed, and actively used to improve services. TCS promotes a culture of open communication so that service users feel comfortable raising concerns, ideas, and suggestions at any time and through any channel. All service users have the right to make a complaint if they believe a service was not safe, respectful, or of an acceptable standard. TCS is committed to responding to all complaints fairly, promptly, and without reprisal.

This policy aligns with:

- The principles of recovery, trauma-informed care, and human rights
- The organisation's mission, values, and applicable legislative, regulatory, contractual, and accreditation requirements relevant to the services delivered by TCS
- The Consumer and Engagement Participation Framework
- The Quality, Safety and Clinical Governance Framework
- The Consumer Engagement and Participation Policy
- The Open Disclosure Policy
- Health Records (Privacy and Access) Act 1997 (ACT)
- Human Rights Commission Act 2005 (ACT)
- The Privacy Act 1988 (Cth) and Australian Privacy Principles.

4.0 Guiding Principles

This policy is guided by the following principles:

Table 1 – Guiding principles of this policy

Principle	Description
Consumer Participation	Feedback is a core mechanism for consumer and carer participation in service governance and quality improvement. TCS actively seeks feedback and creates accessible pathways for service users to contribute
Safety and Quality	Complaints are acted upon promptly particularly where they raise risks to consumer safety. Safety-related complaints are escalated immediately and managed as incidents All feedback is managed confidentially. Anonymous feedback is accepted and valued. Identifying information is not shared beyond those with a need to know
Evidence-Informed	Policies are based on current research, practice guidelines, and legal frameworks
Transparency and Accountability	Feedback processes are clearly communicated, consistently applied, and available to all service users. Service users are kept informed at each stage of the complaints process
Continuous Improvement	All feedback (positive and negative) informs quality improvement activities at both service and organisational levels. Feedback is systematically reviewed at QIC and reported to the Board

Accessibility	Feedback mechanisms are accessible, inclusive, and available in formats that suit diverse service users including those with disability, language barriers, or communication support needs.
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5.0 Responsibilities

Table 2 – Responsibilities of specific roles in TCS

Role	Responsibility
Board of Directors	• Hold ultimate accountability for the governance standards reflected in TCS policies. • Receive feedback trends, complaints summary data, and consumer participation reports at each Board meeting • Ensure resource allocation supports meaningful consumer participation across all services
Executive Directors — Think Community Services	• Hold executive accountability for the consumer participation and feedback system • Ensure mechanisms are effective, accessible, and consistently applied across all services • Respond to escalated complaints with legal, media, or reputational implications • Ensure lived experience roles are appropriately supported and resourced
Senior Management Team (SMC)	• Monitor feedback trends and systemic issues • Receive the formal complaints and feedback report • Escalate significant patterns or risk-related complaints to the Board • Ensure consumer participation activities are adequately resourced and reported
Quality Improvement Committee (QIC)	• Review feedback data and consumer participation reports at each QIC meeting • Ensure all feedback and participation input informs quality improvement activities • Receive CAG recommendations and ensure formal written responses are provided • Oversee co-design activities and consumer participation in QI
Consumer Advisory Group (CAG)	• Contribute consumer and carer perspectives to governance, service design, and quality improvement • Review consumer-facing materials including complaint forms and participation information • Receive information on how TCS has responded to consumer input at a systemic level • Operate under Consumer Advisory Group Terms of Reference
People and Administrative Services Manager	• Support managers in addressing workforce-related issues or capability gaps identified through consumer feedback, complaints, audits or quality improvement activities

Systems and Performance Lead	• Maintain the Complaints and Feedback Register as a de-identified, current record • Maintain records of consumer participation activities • Send policy review alerts • Ensure the policy and consumer-facing materials are accessible to all staff and service users
Policy Owner	• Draft, consult, and review policies within their area of responsibility • Ensure the policy uses the standard TCS template and record of document control • Coordinate consultation with relevant stakeholders including staff, consumers, and external advisors as appropriate • Submit the completed draft to the QIC for quality review
Service Managers	• Communicate policy changes to all affected staff through team meetings and internal communication systems • Receive and action all complaints within required timeframes. • Coordinate the complaints response process • Escalate risk-related complaints immediately • Lead service-level responses to feedback and report feedback trends to the SMC
All Staff, Students, and Contractors	• Implement and act in accordance with policies relevant to their role • Participate in policy consultation processes when invited • Report concerns about policy gaps, inconsistencies, or implementation issues through appropriate channels • Inform consumers of feedback mechanisms at the commencement of the episode of care and as needed. • Support a culture of open communication where feedback is welcomed, not discouraged
Consumers and Carers	• Provide input into policy development through the CAG and other consultation processes • Provide feedback on consumer-facing policies and associated plain-language summaries • Receive information on how their feedback has been used • Participate in the CAG and other consultation processes • Contribute to service improvement at individual and organisational levels

5.1 Policy Development or Review

This policy is reviewed on a three-year cycle, consistent with the Document Review Alert System. A review is also triggered by:

- Changes to legislative obligations, applicable standards, accreditation requirements, or organisational needs.
- Incidents, complaints, or audit findings that identify a gap in or non-compliance with this policy
- Consumer feedback, complaints, or audit findings
- Strategic or operational priorities identified by the Board, Executive Directors, SMC, or QIC

- Significant organisational change affecting the scope or application of this policy.

Reviews are managed in accordance with the Policy Development Policy. The next scheduled review date is recorded in the Document Register.

6.0 Policy Requirements

6.1 Consumer and Carer Engagement Context

Consumer and carer participation at TCS operates across four interconnected levels. Together, these levels form a complete system of participation from the individual care relationship through to organisational governance.

TCS's Consumer and Carer Engagement Framework has four key elements feedback is one of them:

Table 3 – Consumer and carer engagement framework

Element	How This Is Achieved at TCS	TCS Policy / Framework
Consumers and carers as partners in care	Input into care planning; informed consent; promoting self-care; peer support	Consent and Confidentiality Policy; Model of Care
Input into service design and implementation	Consultation with people with lived experience; CAG governance structure	Consumer and Engagement Participation Framework
Input into monitoring and review	Consumer engagement in the continuous improvement cycle through surveys, focus groups, and advisory structures	Quality Improvement and Audit Policy
Ongoing feedback on safety and quality	Complaints, Compliments, and Suggestions process	This policy

6.2 Types of Feedback

This policy recognises three types of feedback each valued by TCS, and each managed through a defined process:

Table 4 – Types of feedback

Type	Definition	Process
Complaint	A concern raised by a service user where they believe the service they received was not safe, respectful, or of an acceptable standard	Formal complaints process
Compliment	Positive feedback acknowledging staff, services, or practices that are appropriately meeting consumer needs and providing quality outcomes	Less formal process
Suggestion	An idea or recommendation for what could be done differently or additionally to improve the care experience or outcomes for service users	Less formal process referred to QIC or CAG

6.2.1 Feedback Mechanisms

TCS collects consumer, carer, and support person feedback through two complementary channels:

6.2.1.1 Incidental Feedback

Incidental feedback is collected through everyday service interactions, both spontaneously and through active but informal invitation. It includes:

- Verbal feedback provided directly to staff during or after a service contact including feedback actively invited by staff at the end of a session or group
- Written feedback submitted via feedback forms available at Centre reception areas and the website
- Feedback actively invited from participants at the conclusion of group programs and/or psychoeducation sessions including verbal reflection, written responses, or completion of a brief session evaluation
- Feedback received via email to the service or a staff member
- Feedback from consumers whose primary language is not English and who require an interpreter to access services. Where interpreter support is needed, reception or Team Lead will book the Translating and Interpreting Service (TIS National) to facilitate the consumer providing verbal feedback in their preferred language.

Incidental feedback is recorded in the Complaint and Feedback Register by the receiving staff member and escalated to the Service Manager where it relates to a complaint, concern, or significant suggestion. It is collated and reported to the QIC as part of the quarterly quality improvement cycle.

6.2.1.2 Formal Feedback — Structured Surveys

Formal feedback is collected through structured, platform-tracked surveys sent to consumers at defined points in their service journey. TCS uses two survey platforms for this purpose:

- **Yes-PHN** — a survey used to collect consumer experience of care data from consumers engaged with CHN-commissioned services, including the Medicare Mental Health Centres. Surveys are sent via SMS to consumers at agreed points in the service episode and tracked within the Yes-PHN platform.
- **Cemplicity** — used to collect intake experience data. Surveys are sent via SMS following intake assessment and tracked within the Cemplicity platform, providing real-time feedback on the consumer's experience of the intake process.

Results from both platforms are reviewed by the Systems and Performance Lead and reported to the QIC quarterly. Aggregate data is used to identify trends, inform quality improvement activities, and report on consumer experience outcomes to CHN and the Commonwealth where required.

6.3 Who Can Provide Feedback

This policy is primarily directed at service users, including consumers, carers, family members, and members of the community who have had direct experience of a TCS service. This includes consumers who require interpreter support to communicate in their preferred language.

Feedback may also be received from:

- Referrers and other health or community service providers particularly regarding referral practices and service communication
- Advocates acting on behalf of consumers with the consumer's knowledge and consent
- Members of the general community who have sought information about TCS services.

Feedback from referrers and partner organisations is generally managed through existing partnership communication mechanisms, not the formal complaints process.

6.4 The Complaints Process

The complaints process is designed to be simple, confidential, and transparent. Information about how to make a complaint is displayed at all physical service premises and made available digitally and verbally to phone service users.

6.4.1 How to Make a Complaint

- In person: by speaking with any TCS staff member or Service Manager
- In writing: using the Complaints Form, available in hard copy at all service sites and for download from the TCS website
- By phone: by calling the relevant service and asking to speak with the Service Manager
- By email: to the relevant Service Manager or to the Executive Directors
- Anonymously: anonymous complaints are accepted; note that TCS's ability to investigate and respond may be limited without identifying information.

6.4.2 Complaints Response Process

Table 5 – Steps in the complaints response process

Step	What Happens	Who Is Responsible	Timeframe
1 Receipt	All complaints are directed to the Service Manager. Past records of engagement are reviewed. Immediate safety risk is assessed	Service Manager	Within 1 business day of receipt
2 Acknowledgement	The complainant is contacted to acknowledge receipt of the complaint and explain the process	Service Manager	Within 5 business days of receipt
3 Safety response	If the complaint raises a risk to consumer safety, an immediate response is initiated and logged as an incident	Service Manager → Executive Directors	Immediately upon identification

4 Assessment	The complaint is escalated to appropriate Leadership Team members (Team Leads, Service Manager, Directors) depending on its nature and seriousness	Service Manager / Leadership Team	Within 5 business days of acknowledgement
5 Staff response	If a staff member is involved, they are provided an opportunity to respond to the complaint details as part of the assessment	Service Manager	As part of assessment phase
6 Decision and response	A decision is made on the appropriate response. The complainant is notified in writing or verbally, according to their preference	Leadership Team / Service Manager	Within 14 business days of receipt
7 Complex complaints	If additional time is required due to complexity or seriousness, the complainant is notified at the 14-business-day mark with an updated timeline	Service Manager / Executive Directors	At 14 business days
8 Register	All complaints (de-identified) are recorded in the Complaints and Feedback Register	Service Manager / Admin & People Manager	At each stage

6.4.3 Complaints Timeframes Summary

Table 6 – Timeframe for complaints

Action	Timeframe
Acknowledgement of complaint	Within 5 business days of receipt
Response to complaint	Within 14 business days of receipt
Update if additional time required	Notified at the 14-business-day mark with revised timeline
Safety-related complaint — immediate action	Same day managed as an incident

6.4.4 Phone Service — Feedback and Complaints Management

For consumers accessing the ACT Medicare Mental Health Phone Service, complaints, suggestions, and compliments are managed through the national Medicare Mental Health Service infrastructure administered by the Commonwealth Department of Health and Aged Care. Consumers who wish to provide feedback about the Phone Service are directed to the national feedback mechanisms provided by the Medicare Mental Health service [About Medicare Mental Health | Medicare Mental Health](#).

The national service notifies Think Community Services of any complaints, concerns, or feedback relevant to the delivery of the ACT Phone Service. TCS reviews and responds to notifications received from the national service in the same manner as internally received complaints consistent with the response timeframes and escalation process.

Where a complaint received via the national service requires local investigation, remediation, or reporting (for example, a serious complaint involving a specific

clinician or a critical incident), TCS manages this through its standard complaints and incident management processes.

6.5 The Process for Compliments and Suggestions

Compliments and suggestions are managed through a less formal process. Information about how to provide a compliment or suggestion is displayed at all services and provided to consumers with initial service information.

- A compliment or suggestion form is available at all service sites and for download from the website.
- Compliments and suggestions may also be provided verbally to any TCS staff member, or submitted anonymously.
- All compliments and suggestions are passed to the Service Manager and relevant Leadership Team members for information and/or consideration.
- Suggestions may be referred to the Consumer Advisory Group (CAG) or the Quality Improvement Committee (QIC) for further consideration and action.
- Summary information is maintained in the Complaints and Feedback Register and used to inform regular reviews of service delivery.
- In addition to one-off feedback, TCS conducts consumer experience surveys to seek broader, systematic feedback from service users.

6.6 How TCS Uses Feedback

All feedback (complaints, compliments, and suggestions) is valued and used at TCS to better understand and meet the needs of service users.

Table 7 – How TCS uses feedback

Feedback Type	How It Is Used
Complaints	• Reviewed for safety implications • Inform immediate service changes where required • Systemic patterns reported to QIC, SMC, and Board • Inform quality improvement activities
Compliments	• Shared with the relevant staff member and team • Recorded for use in training and staff development • Used to identify what is working well
Suggestions	• Referred to QIC or CAG for consideration • May inform service design changes, new initiatives, or model of care review • Recorded outcomes reported back to the CAG
Consumer experience surveys	• Findings reported to QIC, SMC, and Board biannually • Used to inform service planning and the continuous improvement cycle

Not all feedback will result in immediate change where changes are not feasible or immediately relevant, feedback is retained for future quality improvement consideration.

6.7 External Complaints Pathways

TCS acknowledges that service users have the right to access external complaints pathways at any time including before, during, or instead of TCS's internal process. Staff will inform consumers of these pathways without discouragement.

Table 8 – External complaints pathways

Body	What They Handle	Contact
ACT Health Services Commissioner	Complaints about health services in the ACT, including mental health services	02 6205 2222 hrc.act.gov.au
ACT Human Rights Commission	Complaints about discrimination, human rights violations, or service provider conduct	02 6205 2222 hrc.act.gov.au
Australian Health Practitioner Regulation Agency (AHPRA)	Complaints about registered health practitioners' conduct, health, or performance	1300 419 495 ahpra.gov.au
Office of the Australian Information Commissioner (OAIC)	Complaints about privacy breaches or misuse of personal information	1300 363 992 oaic.gov.au
National Disability Insurance Agency (NDIA) / NDIS Commission	Complaints about NDIS services (where applicable)	1800 035 544 ndiscommission.gov.au

6.8 Consumer Participation in Governance: Consumer Advisory Group (CAG)

The Consumer Advisory Group (CAG) is TCS's primary formal mechanism for consumer and carer participation in governance. It is not a consultation mechanism. It is a governance body whose recommendations carry formal weight within TCS's committee structure.

The CAG provides structured consumer input into the ongoing operation and development of all TCS services. Membership is open to consumers and carers who have used TCS services. The CAG meets quarterly, aligned with the QIC calendar, and its recommendations are formally tabled at the QIC, responded to in writing, and reported to the SMC.

For full Terms of Reference including functions, membership rules, conflict of interest, grievance procedure, and review cycle, refer to the Consumer Advisory Group Terms of Reference.

6.9 Co-Design of Services

TCS is committed to involving consumers and carers in the design, review, and improvement of its services, not only as service recipients, but as active contributors to how services are shaped:

- Consumer and carer input is sought when developing or reviewing models of care, service pathways, and clinical guidelines
- Consumer-facing materials including feedback forms, consent documents, and information resources are reviewed by the CAG before finalisation
- Consumer experience survey findings are used to inform service design changes, specific improvements are documented, implemented, and reported back to consumers
- Focus groups or targeted consultation with consumers may be used when significant service changes are planned
- Co-design activities are documented and reported to the QIC including what was changed as a result of consumer input.

6.10 Consumer Participation in Quality Improvement

Consumer and carer perspectives are integrated into TCS's quality improvement cycle not treated as a separate activity:

- Consumer experience survey results are tabled at every QIC meeting and used to identify QI priorities
- CAG recommendations inform QI actions. Actions arising from CAG input are entered in the Quality Improvement and Assurance Register and monitored to close-out
- Feedback trends including complaint patterns, suggestions, and survey themes are reviewed at the QIC and used to drive specific improvement actions
- Consumers may be invited to participate in QI projects, working groups, or service review activities where appropriate and with appropriate support
- TCS reports back to consumers on QI actions arising from their input through CAG meetings, service communications, or direct feedback.

6.11 Workforce with Lived Experience

The employment of staff with lived experience of mental health challenges is a form of structural consumer participation embedding the consumer perspective within TCS's workforce rather than treating it as an external input:

- TCS actively recruits and supports people with lived experience of mental illness and recovery into peer worker and social and emotional wellbeing worker roles
- Peer workers bring the consumer perspective directly into clinical teams supporting recovery-oriented practice from within
- Peer workers receive dedicated supervision including from staff in designated lived experience roles
- Staff with lived experience are supported to contribute to service design, staff training, and quality improvement activities in ways that draw on their unique perspective
- The employment of lived experience staff is recognised in TCS governance and accreditation materials as evidence of consumer participation at the workforce level.

7.0 Implementation

This policy is implemented and communicated in accordance with the Policy Development Process. Implementation is the responsibility of the Policy Owner, systems and Performance Lead and Service Managers.

Table 9 – Implementation mechanisms for this policy

Mechanism	Description	Responsible
Induction and mandatory training	This policy is included in all-staff induction and relevant mandatory training, ensuring new and existing staff are aware of their obligations	People and Administrative Services Manager and Administrative Team
Staff communication	This policy is tabled at relevant staff meetings following approval or revision. Changes are communicated via internal systems	Service Manager
Document Register	This policy is uploaded to the Document Register and accessible to all staff via internal systems	Systems & Performance Lead
Complaints and Feedback Register	Maintained as a live de-identified record across all services including the Phone Service. Updated at each stage of the complaints process	Systems & Performance Lead / Service Managers
Consumer information materials	Feedback information including complaint forms and external pathways displayed at all physical sites. Available digitally and verbally for consumers	Service Managers
QIC reporting	Feedback trends, complaints data, and survey results tabled at each QIC meeting and included in SMC and Board reports	QIC / Systems & Performance Lead
CAG operations	CAG meets quarterly. Recommendations formally tabled at QIC. Written responses provided. Outcomes communicated back to consumers	QIC / Service Managers
Consumer-facing materials	Plain-language complaint and feedback information reviewed by CAG. Consumer-facing summary available in accessible formats on request	Policy Owner / CAG

8.0 Compliance Monitoring

Compliance with this policy is monitored through the following indicators. Results are reported to the QIC and, where required, escalated to the SMC.

Table 10 – Compliance monitoring of this policy

Indicator	How Monitored	Frequency	Reported To
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Number of complaints received per service per quarter, by type	Complaints and Feedback Register	Quarterly	QIC / SMC
% of complaints acknowledged within 5 business days	Complaints and Feedback Register	Quarterly	QIC
% of complaints responded to within 14 business days	Complaints and Feedback Register	Quarterly	QIC / SMC
Number of complaints escalated beyond Service Manager (Director / external) and their outcome	Complaints and Feedback Register / HR records	Quarterly	SMC / Board
Number of suggestions actioned, referred to QIC or CAG, or retained for future consideration	Complaints and Feedback Register / QIC minutes	Quarterly	QIC
Evidence of phone service post-call feedback mechanism operational and reviewed	Feedback system data / QIC minutes	Quarterly	SMC / QIC
Consumer experience survey completion rates and key findings	Biannual consumer experience survey	Biannual	QIC / SMC / Board
Evidence of feedback trends informing at least one QI activity per service per year	Quality Improvement and Assurance Register	Annually	QIC / SMC
Evidence of CAG meeting quarterly — minutes and recommendations on record	CAG minutes / QIC minutes	Quarterly	QIC / SMC
% of CAG recommendations with formal written QIC response within agreed timeframe	QIC minutes / CAG records	Quarterly	QIC / SMC
Number of co-design activities conducted and documented outcomes	QIC minutes / service records	Annually	QIC / SMC
Evidence of lived experience staff receiving dedicated supervision	Supervision records	Quarterly	SMC / QIC

9.0 Related Documents

The following documents should be read in conjunction with this policy.

Table 11 – Related internal documents

Doc ID	Document Title	Type	Relationship to this Policy
Parent governance documents			

GOV-FRM-01	Governance Framework	Framework	Overarching governance structure and accountability model
GOV-FRM-02	Quality, Safety & Clinical Governance Framework	Framework	Safety and quality system this policy must support
GOV-POL-01	Policy Development Policy	Policy	Governs the development, approval and review of this policy
Related framework			
GOV-FRM-06	Consumer Participation and Experience Framework	Framework	Feedback is a core consumer participation mechanism within this framework
Supporting policies and guidelines			
CON-POL-01	Diversity, Inclusion and Cultural Safety Policy	Policy	Complaints about discrimination or cultural safety managed here
RSK-POL-04	Incident Management Policy & Procedure	Policy	Safety-related complaints managed as incidents under this policy
RSK-POL-05	Open Disclosure Policy	Policy	Adverse event communication linked to the complaints process
CLN-POL-01	Consent and Confidentiality Policy	Policy	Confidentiality of feedback is maintained under this policy
QLT-POL-01	Quality Improvement and Audit Policy	Policy	Feedback informs QI activities managed
Registers and records			
QLT-REG-01	Document Register	Register	This policy is listed and tracked in the Document Register
QLT-REG-02	Quality Improvement and Assurance Register	Register	Feedback-driven QI actions tracked here
CON-REG-01	Complaints and Feedback Register	Register	Complaints and Feedback listed and tracked in this register

10.0 References and Legislation

This policy should be read in conjunction with applicable legislation, regulatory requirements, organisational frameworks, and relevant standards that support governance, quality, safety, and service delivery across TCS:

- Privacy Act 1988 (Cth) and the Australian Privacy Principles.
- Health Records (Privacy and Access) Act 1997
- Human Rights Commission Act 2005 (ACT)
- Health Practitioner Regulation National Law Act 2009
- Applicable national standards and accreditation requirements relevant to TCS services
- Applicable contractual, regulatory, quality, and safety requirements
- ACT Human Rights Commission – Health Services Commissioner complaints information.