

Complaints and Feedback Management Guidelines

Connecting Foster and Kinship Carers South Australia Submission to the Department of Child Protection

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Executive summary

'Complaint' shouldn't necessarily be a bad word. Sometimes complaints are made because of poor decisions, processes or behaviour. However, people usually make complaints because they want to see improvement in individual or system outcomes.

Complaints and feedback should not be viewed through a deficit lens, but through a commitment to continuous improvement.

This commitment to continuous improvement is essential, because at the centre of this system are vulnerable children and young people.

Connecting Foster and Kinship Carers South Australia (CFKC) welcomes the intent of the new *Guidelines*, which is to provide greater transparency about what can be expected when a complaint has been made.

Taking a step back and considering what a carer, or any person making a complaint, would need, a complaints guideline should include:

- Clear timeframes
- Regular updates on the status of the complaint, including information about who is considering what can be incredibly personal information
- Clear communication about the rationale for the outcome, regardless of whether the complaint is upheld
- If a complaint is upheld, clearer advice around what the ramifications are (instead of language such as 'may' or 'could' which is currently used in the *Guidelines*).

As these *Guidelines* currently stand, there are missing pieces from all of these components.

Within this submission, CFKC has provided a range of recommended improvements that we consider would significantly strengthen the *Guidelines*.

Carers are partners in the system

Carers tell us that many local complaints arise from a lack of understanding about why decisions have been made. This lack of transparency and power imbalance can create significant stress for carers who are trying to provide the best opportunities for the children in their care.

For example, one carer told us that support for the child in their care had ended due to staff movement. Because of delays in replacing this support, the carer researched a replacement and proposed it to the DCP case worker, who said 'no' without providing a rationale. The carer later learned this was due to government procurement processes. There were several points at which this could have been communicated.

CFKC provides this example because it should have been resolved locally. Cases like these should not escalate to formal complaints and can be resolved through transparency and communication.

However, some matters require more serious consideration.

Process for escalating complaints needs to be clearer

Fiona Arney's 2022 Independent Inquiry into Foster and Kinship Care in South Australia noted that Level 1 complaints could not manage the inherent conflict of interest. The *Guidelines* do not resolve this and it remains unclear whether escalation above the case manager is possible.

In practice, seeking the details of a supervisor, manager or regional director to make a complaint is awkward and, in all likelihood, a major impediment to the feedback process.

Some matters are not appropriate for local complaints, including serious breaches of policy or procedure involving harm to a child or young person in care, serious concerns about the relationship between a carer and the Department, or concerns about office leadership.

When a threshold has been reached, there must be a way to directly complain to the Complaints and Feedback Management Unit without going to the local level. This threshold could consider:

- When a decision made has caused significant harm to the child or young person in care
- When an actual or potential conflict of interest is present at a local level.

There also needs to be a clear threshold for when a complainant can go directly to the Complaints and Feedback Management Unit.

The fear of reprisal is real

Through CFKC's work, we hear from many carers who fear reprisal by DCP. They worry that being seen as difficult could make their lives more challenging or lead to children or young people being removed from their care. Through the Carer Advocacy Service and conversations with carers across the state, we are aware of experiences of reprisal when complaints have been made.

The draft *Guidelines* state: "We will make sure you are not treated negatively for making a complaint".

While this should be the case, further information is needed on how this will be ensured and what will happen if reprisal occurs.

Reporting of complaints can support continuous improvement

Making a complaint to a case manager is not recorded as a complaint.

Should the issue not be able to be resolved with the case worker, carers are encouraged to raise with the supervisor or Manager - this is not recorded as a complaint.

When a carer or other person complains directly to the CEO or DCP executive, or Minister, this too is not recorded as a complaint.

CFKC understands the word 'complaint' is scary for many. But we also understand that having a clear picture of where complaints are occurring, and how they have been resolved, is essential to embedding system accountability and continuous improvement.

Change the wording, if necessary, but a clearer understanding of issues, feedback and complaints across the system is positive for the system, and proper reporting is essential.

List of Recommendations:

A summary of recommendations is provided in the table below. Further detail is within the body of this submission.

Recommendations

1	Zero tolerance for reprisal: CFKC suggests that the Department consider how it can provide greater assurances of protections for complainants.
2	Better integrate the procedure into the <i>Guidelines</i>: CFKC suggests that the Department consider how it can integrate the existing Level 1 guarantees of the Complaints and Feedback Management Procedure within the <i>Guidelines</i> .
3	Introduce revised timelines: The Department should consider introducing revised timelines for the acknowledgement and processing of complaints.
4.	Provide clarity on when a complaint should escalate to the next level: The <i>Guidelines</i> should provide more advice to complainants on when they should seek to escalate their issue.
5	Clearer guidance about when complaints can be made centrally: CFKC suggests that the Department consider making clearer that a complainant may complain directly to the Complaints and Feedback Management Unit (Level 2) in some instances.
6	Develop resources in language: The Department should consider developing versions of the final document in languages that represent those most spoken in families where English is not the first language. Publication of these resources will also need to consider specific cultural practices and customs around making complaints and being heard.
7	Develop resources in alternative formats: The Department should consider developing versions of the <i>Guidelines</i> in alternative formats such as audio and video.
8	Provide links to additional supports for making a complaint: The Department should consider including reference to additional organisations who can assist with making a complaint.
9	Record all complaints: The Department should consider developing a process for capturing, classifying and recording complaints made at the local level. This could include considering a different naming convention – but local issues should be recorded. This should include clear training for case managers, and a simple process for them to raise matters that may be a complaint, so that they can be appropriately considered and handled.
10	Include the requirement for fulsome trend data and identified areas for service improvement: To comply with PC039, the Department should include in the <i>Guidelines</i> or Procedure, or Policy, a clear process for how service trend data is analysed and used to improve services.

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Introduction

The importance of complaints processes

Connecting Foster and Kinship Carers South Australia (CFKC) welcomes the opportunity to provide feedback on the *Complaints and Feedback Management Guidelines*.

Complaints systems are integral to all organisations, but especially so when it relates to vulnerable children and young people in care. Complaints systems can resolve issues, contribute to a system of continuous improvement, increase the safety and confidence of the service users, and provide a mechanism for accountability and justice.

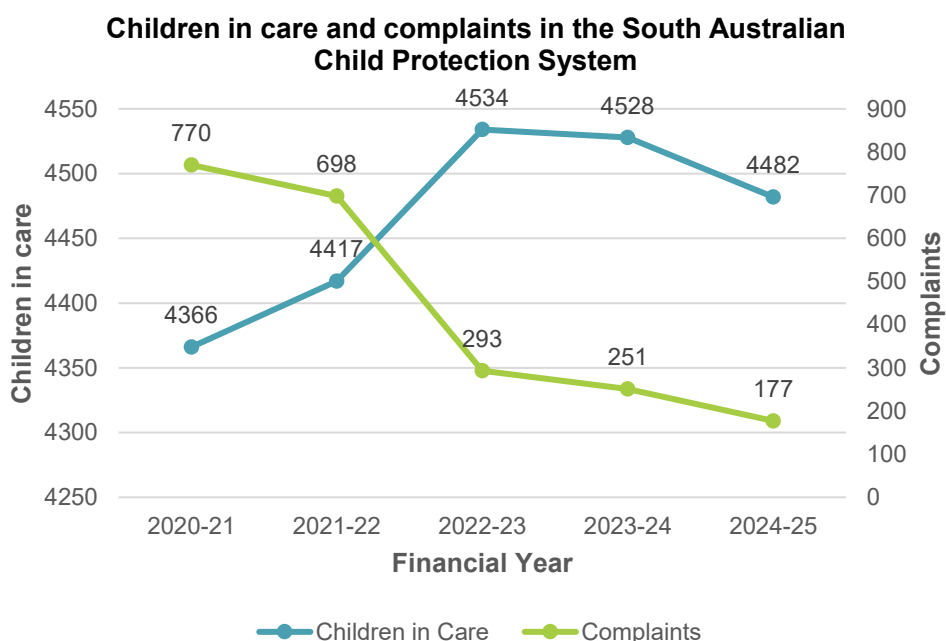
Each of these benefits has further flow on effects: a resolved issue reduces carer stress, which in turn reduces their expressions of distress to their workers, increasing worker retention and allowing energy to be redirected towards other vulnerable young people they work with. The same can be said for improved processes and the sense of justice that comes from well-handled complaints.

The data tells conflicting stories

Most carers tell CFKC they are not satisfied with the system. However, DCP complaints data shows less people are complaining^{1,2}

53%

Of carers were **not satisfied** with the Child Protection System³ in CFKC's annual Carer Survey 2025.



¹ Productivity Commission. (2026). *Report on Government Services 2026, Part F: Section 16 Child Protection Services - Data Tables*.

² Department for Child Protection. (2025). *Annual Reports 2019-20 to 2024-25*.

³ CFKC Annual Carer Survey, 2025.

Carers' experiences are not represented by the current complaints system

To formulate this submission, CFKC has drawn on a number of sources to gauge and represent carers' experiences.

CFKC's Carer Advocacy Service works with carers every weekday and advocates for them to make sure they are informed, supported, consulted, valued and respected. Our work is often at the more complex side of interactions with the child protection system. We also conduct an annual survey of foster and kinship carers. This is added to by regular engagement and consultation with carers across the year.

Our latest annual survey (2025) revealed that of those surveyed, 53% of respondents were not satisfied with the South Australian Child Protection System.⁴

In the same year the Department reported 177 complaints. Not factoring in multiple complaints, this represents about two percent of foster and kinship carers.⁵

This indicates that the volume of complaints being recorded by the Department is unlikely representative of the challenges they are experiencing within the system.

Carers are partners in the system. Their feedback provides important insights into how the system works and can inspire continuous improvement. The Child Protection system is at a disadvantage when it isn't able to consider how it is operating more fulsomely.

"More transparency and partnership in case management and easy, non-punitive access to making complaints at all levels."

CFKC member, when asked to comment on their priorities for system improvement

Areas of Focus

CFKC's submission covers areas of key concern and recommends ways that could improve the draft *Guidelines*. The focuses are the following areas:

1. Protections from reprisal
2. Consistency and clarity of processes
3. Thresholds for elevating complaints to the next level
4. Accessibility
5. Recording of complaints

⁴ Connecting Foster & Kinship Carers SA Inc. (2025). *Annual Carer Survey 2025*

⁵ Productivity Commission. (2026). *Report on Government Services 2026, Part F: Section 16 Child Protection Services - Data Tables*. Combination of the numbers of children in OOHC (4482) as well as foster homes (1338) and Kinship homes (2305). Homes have been conservatively estimated to only contain one parent.

1. Protections from reprisal

Context

In the work CFKC does, we come across many carers that are fearful of reprisal by DCP.

They worry that if they are seen as being difficult, case workers will make their life more challenging or remove children or young people from their care.

These concerns are not unique to CFKC members and have been raised in the Arney report,⁶ and a 2024 review commissioned by the Department into complaints processes.⁷

The Arney report noted that the existing Level 1 complaints process, 'by no means guarantees that the process will be impartial or fair.'⁸

The proposed guidelines

The current complaints system directs attempts at local resolution first. This is in line with government practice across several sectors and jurisdictions – and indeed evidence shows this can result in a timelier resolution of issues raised.

As the Arney report noted, however, a complaints process within statutory Child Protection 'cannot comply with the principles in the [ISO] Standards' where the complaint is required to be sent to direct workers of the complainants involved.

The proposed *Guidelines* state that complainants will be afforded natural justice but do not indicate how this will be guaranteed.

Implications

Because we know that carers can fear reprisal from staff at the local level, the system needs to provide careful advice and clear alternative options at this stage.

The *Guidelines* note that, 'We will make sure you are not treated negatively for making a complaint.' Unfortunately for carers who may have experienced reprisal for making a complaint, or who have been warned of such a culture, they will unlikely consider this an adequate safeguard. The context of mistrust requires recognition and resolution.

CFKC understands that the process may allow complainants to go directly to Level 2 processes if they 'can't try Level 1'. Complainants are also advised of their right to complain to the Ombudsman.

⁶ Arney, F., Schutz, C., Hawkes, M., Bevan, K., & Barnes, M. (2022). *Report of the Independent Inquiry into Foster and Kinship Care*.

⁷ BDO Services Pty Ltd. (2024). *DCP Complaints Process Review Report* (Final Redacted Report).

⁸ Arney, F., Schutz, C., Hawkes, M., Bevan, K., & Barnes, M. (2022). *Report of the Independent Inquiry into Foster and Kinship Care*.

Recommendations

1. Zero tolerance for reprisal

CFKC suggests that the Department consider how it can provide greater assurances of protections for complainants.

There are existing examples of such protections, such as in Child Protection in NSW, and internationally in Human Rights in Canada.

Safe Complaints Framework NSW:⁹ NSW is in the process of developing a ‘safe complaints framework’. This framework will include a clear and unequivocal commitment that individuals which raise complaints will not be subjected to any detrimental action, and that such action will not be tolerated under any circumstances. Consideration should be given to embedding this commitment in a new South Australian framework, with consultation with carers and their peak body.

Human Rights Code of Ontario: While not dealing directly with child protection, the Human Rights Code of Ontario demonstrates that recrimination protections can be implemented for the general public where a relevant status is present. Under Section 8 of that code everyone has the right to enforce their rights under the Act, ‘without reprisal or threat of reprisal for so doing.’¹⁰ Foster or kinship carers could be recognised in a similar manner as prescribed people within the Public Interest Disclosure legislation¹¹, which DCP notes in *Guidelines*, already provides some protections to certain types of complainants.

⁹ NSW Department of Communities and Justice. (2025). *A Better Complaint Management System for Child Protection and Out-of-Home Care: Outcomes Report*.

¹⁰ Ontario. (1990). *Human Rights Code, R.S.O. 1990, c. H.19* (s. 8). Government of Ontario.

¹¹ South Australia. (2018). *Public Interest Disclosure Act 2018* (SA). Government of South Australia.

2. Consistency and clarity of processes

Context

Effective complaints and feedback systems have clear and consistent processes that both complainants and workers can understand.

In Child Protection specifically, a system defined by trauma, the importance of clear information and processes is heightened. Clear processes which are consistently followed, can provide containment and build trust and safety.

CFKC is aware that for many carers, a formal complaint only arises following a prolonged issue with case management. The reason the complaint is raised, is therefore to get the original issue solved. Timelines, triaging and clarity on what will happen following a complaint, are critical in this context.

Carers have told CFKC that where processes do exist, these are not always followed by DCP staff. They also tell us that they are rarely given a rationale for case management decisions.

The proposed guidelines

Clarity and communication

Level 1 processes described by the *Guidelines* are flexible and unstructured. They do not provide a clear expectation for what is to follow.

The repeated use of words like ‘try’ ‘may happen’ ‘might’ leave carers with little clarity around what is going to happen with their complaint within Level 1.

If a complainant is not satisfied with the resolution of an issue with their case manager at Level 1, they may ask for it to be escalated to a supervisor, then manager, then regional director. DCP local offices may also escalate to these points through their internal processes. These complaints remain at Level 1 and are guided by Level 1 processes.

The Arney report noted that at this level, complainants have little view over what the status of their complaint is, with some being unable to locate the details of managers who are they are meant to escalate to, or others never receiving a response to their complaint.¹²

Feedback from carers indicate this remains a major issue. There is a lack of transparency around what stage a complaint is at, or who is considering the details – which can often be very personal and time sensitive.

A lack of communication produces more anxiety, particularly when it regards sensitive matters. Carers have regularly told CFKC of the delays and lack of communication that they experience when speaking with the department.

In comparison, the [Complaints and Feedback Management Procedure](#)’s coverage of Level 1 complaints specifies a two-day timeline for acknowledgement of a complaint, the requirement that they are uploaded to C3MS, the information that a case manager *must* consider when determining an

¹² Arney, F., Schutz, C., Hawkes, M., Bevan, K., & Barnes, M. (2022). *Report of the Independent Inquiry into Foster and Kinship Care*.

outcome (including the Statement of Commitment to Kinship and Foster Carers), the need to provide updates when delays are encountered, and more.

The *Guidelines* do not mention these requirements, and it is unclear which document takes priority.

Comparatively, Level 2 is able to provide clear and containing guidance to complainants.

Timeliness

There is little clarity on timelines at Level 1.

Carers noted that while timelines were a useful component of the Level 2 process, the length of time (i.e. 30 days to plan a solution) is too long when they are dealing with live case management issues that remain unresolved (e.g. a child missing psychology every week while debate or inaction takes place over funding).

Implications

Carers who reviewed the current *Guidelines* noted that there is insufficient clarity about what the Level 1 process involves and what they can expect to happen once a complaint is lodged.

CFKC's considers the *Guidelines* would benefit from:

- detail regarding response timeframes for complainants, and
- clearer requirements to enable similar complaints to be handled consistently across different offices.

Currently, the same complaint could reasonably result in different outcomes depending on where it is raised. This is despite DCP's stated objective of achieving consistency, outlined at the beginning of the *Guidelines*.

While flexibility is important in any process, the *Guidelines* should also support trauma-informed practice and natural justice. A clear framework would help should allow for greater consistency in assessment and outcomes for similar complaints be assessed and resolved more consistently. More complex or unique complaints should still be managed flexibly, while remaining guided by these principles that address trauma-informed practice and natural justice.

By the time a carer makes a Level 2 complaint, they have often already tried other options and are seeking a clear resolution. The way a complaint is handled early can strongly affect everyone involved, including the person making the complaint and the staff responding to it. When carers feel heard, understood and confident that their concerns will be addressed, it can strengthen the partnership between the Department and carers.

As an aside, the language 'similar complaints can expect similar outcomes' could be received as meaning the escalation of the complaint would result in a similar outcome. It is suggested this language is clarified.

Recommendations

2. Better integrate the procedure into the guidelines

CFKC suggests that the Department consider how it can integrate the existing Level 1 guarantees of the [Complaints and Feedback Management Procedure](#) within the *Guidelines*. Specifically, the Department should deliver to complainants at level 1 clarity on:

- When their complaint has been received
- Who is responsible for investigating
- In what timeline they can expect an update on the gathering of information
- What information will be considered
- In what timeline they can expect an update on the investigation of gathered information
- In what timeline they can expect the complaint to be finalised
- What documentation they will receive at the conclusion of the complaint, including a requirement that the reason for the decision is included

CFKC considers this would create significant additional work for Local Case Managers but provide greater clarity to complainants.

In implementation, the department should consider:

- The eventual establishment of C3MS templates, or templates in the new KidSafe Connect system, for recording of complaints in a compliant manner and carers being able to monitor the status of the complaints process
- Customisable email templates for case managers to complete which send details on the complaints process to complainants, and automatically remind case managers when timelines are approaching
- The use of software tools to automatically flag emails that contain complaints

3. Introduce revised timelines

The Department should consider introducing revised timelines for the acknowledgement and processing of complaints.

Specifically, the Department should consider how it may reduce the timelines for complaints and recognise that some will require more immediate support while the complaint continues to be investigated.

3. Thresholds for escalating complaints

Context

It is generally best practice for issues and complaints to be raised locally, as this can be the step in which a resolution is quickest.

Following this there should be clear principles for when a complaint can escalate to subsequent levels, and clear information on exactly how to do this. This means having clear timelines, communication expectations, information that must be considered, and avenues for review.

Some matters are not appropriate for local complaints, including serious breaches of policy or procedure involving harm to a child or young person in care, serious concerns about the relationship between a carer and the Department, or concerns about office leadership.

Carers have told CFKC, as well as providing evidence to the Arney inquiry, that are often not aware of, or able to understand the Departmental complaints policy. They have told us that they do not trust that complaints will be handled appropriately within local offices and as a result, often complain directly to the Chief Executive of the Department, or to the Minister.

The proposed guideline

The *Guidelines* currently present a three-stage process to complainants. Carers CFKC spoke to were drawn to pages 5-8 of the *Guidelines*, which provide a diagrammatic view of this. The nature of the diagram implied to carers that the steps are sequential. Carers noted it was unclear when they could take a complaint to the CFMU, and what constituted something like a 'practice issue.'

From our reading of information regarding the CFMU, the Ombudsman and DCPs [Complaints and Feedback Management Procedure](#) CFKC understands that most complaints would not be refused if they first arrived at Level 2 or Level 3.

Implications

The *Guidelines* as drafted are likely to leave carers feeling like they must direct their complaints to their Local Case manager in the first instance.

As identified above, once these matters are with the Case Manager, it is often unclear to complainants what is happening with their complaint, or when it may be time to escalate the complaint to the CFMU or Ombudsman. Carers also are often fearful of raising complaints directly with their case manager (as discussed above).

In these cases, complainants may, at worst, not make a complaint, and at best guess or continue corresponding until they receive an answer. Both provide little sense of containment or clarity.

In these circumstances, especially where there is a lack of communication at Level 1, carers may feel they cannot complain to the CFMU until their Level 1 inquiry is concluded. What a conclusion looks like is not defined.

Options for change

4. Provide clarity on when a complaint should escalate to the next level

The *Guidelines* should provide more advice to complainants on when they should seek to escalate their issue.

Importantly, this advice should include a reference for how to get contact details for those people to whom they may escalate at Level 1, and definitions or references to any technical matters which determine escalation.

5. Clearer guidance about when complaints can be made centrally

CFKC suggests that the Department consider making clearer that a complainant may complain directly to the Complaints and Feedback Management Unit (Level 2) in some instances.

When a threshold has been reached, there must be a way to directly complain to the Complaints and Feedback Management Unit without going to the local level.

The threshold should be communicated. It could consider:

- When a decision made has caused significant harm to the child or young person in care
- When an actual or potential conflict of interest is present at a local level.

4. Accessibility

Context

A 2024 independent report into the complaints process found that CFMU staff considered there to be a disproportionately low volume of feedback from First Nations and Culturally and Linguistically Diverse people.¹³ People from First Nations communities are overrepresented in the out of home care system. This likely means that the low numbers of complaints are related to a lack of trust, knowledge or understanding of the system.

A robust complaints process is accessible to all, is trauma informed and promotes continuous improvement, should be known and understood by everyone.

The proposed guidelines

The *Guidelines* note that individuals may bring a support person such as an Elder or advocate to support them. The guideline also notes that, 'Staff might talk with the DCP cultural and linguistically diverse (CALD) team, Principal Aboriginal Consultants (PAC)...to help resolve your complaint.' The *Guidelines* also reference translation and interpreting services.

As far as CFKC is aware, the *Guidelines* are not intended to be published in language or in accessible formats such as audio or visual at this stage.

CFKC members noted that the *Guidelines* do not define key terms or provide hyperlinks to applicable policies and procedures.

There are not additional links for people who may need assistance with making a complaint.

Implications

The *Guidelines* at present do not provide an accessible way to communicate the complaints process which will reduce the number of complainants who are able to understand and submit a complaint.

Recommendations

6. Develop resources in language

The Department should consider developing versions of the final document in languages that represent those most spoken in families where English is not the first language.

Publication of these resources will also need to consider specific cultural practices and customs around making complaints and being heard.

7. Develop resources in alternative formats

The Department should consider developing versions of the *Guidelines* in alternative formats such as audio and video.

¹³ BDO Services Pty Ltd. (2024). *DCP Complaints Process Review Report* (Final Redacted Report).

Not only can these benefit members of our community who are hearing or vision impaired, they are also much more easily consumed by time poor members of our community.

8. Provide links to additional supports for making a complaint

The Department should consider including reference to additional organisations who can assist with making a complaint.

These may include CFKC's Carer Advocacy Service, the Legal Services Commission and other such legal and community services.

5. Recording of complaints

Context

The recording, classification and analysis of complaints is the main way in which a complaints system contributes to the development of ongoing service improvements.

Complaints are not just about individual issues, and ‘...have a valuable role to play in driving improvements to practices, procedures and systems in public administration.’¹⁴

Because the child protection system is oftentimes defined by trauma, trust is particularly important. A well-functioning complaints process can enhance carers' psychological safety, benefiting both carers and the children they support.

The 2024-25 Annual Report from DCP included 177 complaints in total. Notwithstanding the barriers identified above, this reporting does not appear to present the complexity of the complaints system and how issues have been resolved. The 2024-25 report also does not include details on the number of ‘contacts’ that the CFMU received (where it did in prior years), further reducing the usefulness of the data available.

The number of complaints, what their focus is and what part of the system they are resolved in provide valuable information for stewards of the system.

The proposed guidelines

The draft *Guidelines* name each of the three levels as part of ‘What happens when I make a complaint?’ The implication for readers is that when they speak to their local DCP staff about an issue (Level 1), they are raising a complaint. However, in DCP data, *raising this issue locally is not a complaint*.

Should the issue not be able to be resolved with the case worker, carers are encouraged to raise with the supervisor or Manager. *This is also not a complaint*.

When a carer or other person provides a complaint to the CEO or DCP executive, or Minister, *this is also not a complaint*.

When a complaint is lodged to the Complaints and Feedback Management Unit, the first step is for the complaint to be received and acknowledged. On receipt of the complainant’s submission, an Assessment and Resolution Officer may suggest an alternative pathway and/or offer advice on how best to proceed, or they may they may support a quick resolution. *In this instance the submission is not considered a formal complaint*.

Only after this process, is a complaint recorded as a complaint in DCP systems and subsequently reported on via annual reporting.

This does not provide a transparent understanding of the quantum or outcomes of complaints processes. It also does not meet the requirements of the Premier’s Circular on Complaints

¹⁴ Department of the Premier and Cabinet. (2023). *PC039: Complaint Management in the South Australian Public Sector*.

Management in the South Australian Public Sector¹⁵, which notes that a complaint is, ‘an expression of dissatisfaction made to or about an agency, related to its products, services, staff or the handling of a complaint. A response or resolution is explicitly or implicitly expected or legally required.’¹⁶

Implications

The Premier’s circular on complaints and feedback management in the South Australian public sector (PC039) requires complaint data to be, ‘used to improve service interactions.’¹⁷ According to the current guideline, Level 1 ‘complaints’ do not contribute to any form of continuous improvement.

Secondly, the Premier’s Circular makes clear that performance indicators should be used to ‘assess effectiveness, efficiency and customer responsiveness.’¹⁸ DCP has historically provided summary information on the types of complaints made, although reported themes remain generic between years. DCP’s sole indicator has measured performance by what proportion of complaints were dealt with, ‘within policy timeframes.’¹⁹

As noted above, this only includes complaints that presented to the CFMU and that were subsequently substantiated. Thematic analysis of complaints has not been shown to flow into general service improvements, and instead service improvements have focused on the complaints system itself, rather than the substantive issues raised within that system.

It is clear from DCP’s 2023 and 2024 annual reports that work has been planned and delivered on improving the complaints process, knowledge and culture. CFKC supports this work. It is now time for DCP to start using this system to identify themes in feedback, plan responses and demonstrate delivery of improvements across the system.

Recommendations

9. Record all complaints

The Department should consider developing a process for capturing, classifying and recording complaints made at the local level. This could include considering a different naming convention – but local issues should be recorded.

This should include clear training for case managers, and a simple process for them to raise matters that *may* be a complaint, so that they can be appropriately considered and handled.

10. Include the requirement for fulsome trend data and identified areas for service improvement

To comply with PC039, the Department should include in the *Guidelines* or *Procedure*, or *Policy*, a clear process for how service trend data is analysed and used to improve services.

This presently sits as a single responsibility for DCP Senior Managers within the *Policy*, with no guidance on how to do so.

¹⁵ Ibid.

¹⁶ Ibid.

¹⁷ Ibid.

¹⁸ Ibid.

¹⁹ Department for Child Protection. (2025). *Annual Report*.