

服務質素標準十五

社會工作服務 處理服務使用者及職員的投訴政策及程序 (包括整筆撥款和整筆撥款相關的服務)

- 1. 目的**
 - 1.1** 服務單位備有處理投訴的政策及程序，並可供服務使用者、職員及任何關注人士閱覽。
- 2. 相關文件**
 - 2.1** 處理服務使用者的投訴政策及程序。
 - 2.2** 處理職員的投訴政策及程序。
- 3. 處理由服務使用者提出的投訴的政策及程序**
 - 3.1 政策目的**
 - 3.1.1** 讓服務使用者及/或其家屬知道他們本身的投訴權利，以及服務單位會採取甚麼行動處理接獲的投訴；以及
 - 3.1.2** 指引接獲投訴的職員及他們必須採取的有效步驟來處理投訴。
 - 3.2 理念**
 - 3.2.1** 服務使用者及/或其家屬，倘若對任何服務單位所提供的服務有任何不滿（包括服務標準、服務政策、程序、決策或個別職員的行動或態度），可向服務單位投訴。
 - 3.2.2** 對於任何人士的投訴，服務單位都會本著公平公正的原則處理。
 - 3.2.3** 任何人士向機構職員表示需要投訴，無論是以口頭或是以書面形式，都會被界定為正式投訴，服務單位即啟動處理投訴機制。若該人士表示不滿，但沒有提及投訴，負責職員應從促向當事人查詢他／她是否希望投訴，若當事人給予肯定，同樣亦會界定為正式投訴。若當事人表示只是引起關注，或不想投訴，則會當作意見表達。
 - 3.2.4** 任何服務單位收到投訴後，會以虛心積極的態度調查並以解決問題為目標。
 - 3.2.5** 任何服務單位視投訴有利於我們檢視本身的服務，並且可幫助我們尋求改善方法，使服務更臻完善。

- 3.2.6 具有效聯絡方法的匿名投訴（例如有效的電子郵件地址）將被視為正式投訴。
- 3.2.7 投訴人提供的資料必須以事實為依據並清晰可讀。如認為有需要，在進行投訴處理程序之前，專責投訴主任會聯繫投訴人，以獲取更多信息及/或說明。
- 3.2.8 職員應遵守保密原則。所有投訴相關的資訊，應嚴格保密。

3.3 保密

- 3.3.1 在處理投訴資料時，應遵循有需要知道原則。其目標是確保職員只獲得以履行其職責所必要的資訊。

3.4 處理投訴的步驟

- 3.4.1 任何職員一旦接獲與服務單位有關的投訴，不論是記錄或書面投訴，有關職員應立即（一般是接獲投訴後兩個工作天內）通知單位主管及轉交專責投訴主任處理。單位主管應委任一名職員為專責投訴主任，並在職員會議中確認，為期一年。但遇上投訴對象為專責投訴主任或其同級或以上職員，即由高級督導主任或其授權代表處理。
- 3.4.2 專責投訴主任應盡快（一般是接獲投訴人之投訴後七個工作天內）聯絡投訴人，親自向對方了解情況，務求從速解決問題。
- 3.4.3 若經過商討後未能解決問題，專責投訴主任必須告訴申訴人他/她準備如何處理其投訴，並訂出向申訴人報告行動結果的時限。（一般來說，應在三十個工作天內回覆申訴人。）
- 3.4.4 處理投訴時，不論該投訴是否屬實，服務單位必須視之為改善或加強服務程序和溝通方法的良機，以確保日後不再有同類事件或問題發生。在大部分情況下，採取此處理方法可有助於早圓滿解決投訴。
- 3.4.5 若投訴人收到專責投訴主任的回覆後仍感不滿，該投訴人可在一個月內申請複核。複核將轉介到上一級主管（最高至該服務的總主任），並以其處理為最後裁決。（一般來說，應在三十個工作天內回覆投訴人。）
- 3.4.6 如機構收到對高級督導主任或以上職級的投訴，會將投訴轉介到被投訴者之上司（最高至總裁）處理及回覆。若對總裁或管理局成員的投

訴，管理局主席將會根據管理局的建議作出處理及回覆。

3.4.7 工作天 - 由相關的《津貼及服務協議》內定義。

3.5 應對投訴的態度

3.5.1 任何職員在接獲與服務單位有關的投訴，應保持虛心有禮的態度細心聆聽對方的投訴。

3.5.2 任何職員一旦接獲投訴，應告知投訴人他／她準備如何處理其投訴（通常是轉交專責投訴主任處理），以及投訴人會收到初步回覆（通常是專責投訴主任聯絡投訴人）的時限。

3.5.3 與提出投訴的服務使用者、其家屬及其他投訴相關人士溝通時，不論是口頭或書面溝通，都必須用簡單明確的措辭，避免使用術語或簡稱。

3.6 記錄投訴個案

3.6.1 任何職員一旦接獲投訴，職員必須在投訴記錄冊中記錄投訴的性質、接獲投訴的日期和採取的行動（例如轉交專責投訴主任處理）。

3.6.2 專責投訴主任應在投訴記錄冊中記錄該投訴的結果。

3.6.3 所有關乎該投訴的來往信件及其他有關文件均應存入投訴檔案。

3.6.4 專責投訴主任應撰寫投訴年度報告（附件一），說明接獲的投訴的一般性質、接獲投訴的次數、為解決投訴和改善服務所採取的行動。

3.6.5 投訴記錄冊及投訴檔案應由高級督導主任保管。只有當高級督導主任認為有需要時，才應該把投訴有關的文件副本，存入有關的服務使用者或職員的檔案內。

3.7 讓職員、服務使用者及其家屬知道社會工作服務各單位的處理投訴政策及程序

3.7.1 所有新職員及服務使用者／家屬可知道處理投訴的渠道。

4. 處理職員的投訴政策及程序

4.1 政策目的

4.1.1 讓職員知道本身的投訴權利，以及社會工作服務部會採取甚麼行動處理接獲的投訴；以及

4.1.2 指引接獲投訴的職員及其應採取甚麼有效步驟來處理投訴。

4.2 理念

4.2.1 職員倘對社會工作服務部的任何方面有不滿，（包括服務提供、服務政策、程序、決策、行政及管理、僱傭合約或個別職員的行為或態度）可向他／她的直屬上司表達關注及提出改善建議。（註：倘若被投訴者乃投訴人的直屬上級，該投訴可以直達被投訴者之上司。）

4.2.2 對於任何職員的投訴，社會工作服務部會本著公平公正的原則處理。

4.2.3 社會工作服務部收到投訴後，會以開明的態度調查投訴並解決問題。

4.2.4 社會工作服務部視投訴程序為有利於我們檢視所提供服務的機制，並可藉此尋求改善方法，使服務更臻完善。

4.2.5 任何職員不論口頭記錄或書面形式向機構表示需要投訴，都會被界定為正式投訴，直屬上司應即時啟動處理投訴機制。若該職員表示不滿，但沒有提及投訴，直屬上司應及早適當地向當事人查詢他／她是否希望投訴。若當事人的回覆肯定其投訴意向，同樣亦會界定為正式投訴；若當事人表示只是想引起關注，或不想投訴，則會當作為意見表達。

4.2.6 具有效聯絡方法的匿名投訴（例如有效的電子郵件地址）將被視為正式投訴。

4.2.7 投訴人提供的資料必須以事實為依據並清晰可讀。如認為有需要，在進行投訴處理程序之前，主管會聯繫投訴人，以獲取更多信息及／或說明。

4.2.8 職員應遵守保密原則。所有投訴相關的資訊，應嚴格保密。

4.3 保密

- 4.3.1 在處理投訴資料時，應遵循有需要知道原則。其目標是確保職員只獲得以履行其職責所必要的資訊。

4.4 處理投訴的步驟

- 4.4.1 若投訴涉及單位內部事務，該投訴會先由督導主任處理。若商討後仍未能解決，才交由高級督導主任或他／她的代表處理。
- 4.4.2 高級督導主任或他／她的代表一旦接獲職員的投訴，不論是口頭或書面，應盡早（一般是接獲投訴後七個工作天內）聯絡投訴人，親自向對方了解情況，務求從速解決問題。
- 4.4.3 若經過了解情況及商討後仍未能解決問題，高級督導主任或他／她的代表應告知投訴人如何處理其投訴和向投訴人回覆結果的時限。（一般來說，應在三十個工作天內以口頭回覆投訴人的口頭投訴或以書面回覆書面投訴。）
- 4.4.4 若投訴人收到高級督導主任或他／她的代表的回覆後仍感不滿，他／她可要求複查。審查程序應參考〔人力資源管理手冊〕附錄18「紀律處分與投訴程序指引」（2013年4月1日修訂）。
- 4.4.5 處理投訴時，不論該投訴是否證明屬實，社會工作服務部應視之為改善服務程序或加強溝通的良機，並確保日後不再有同類事件或問題發生。在大部分情況下，採取此處理方法可有助及早圓滿解決投訴。
- 4.4.6 如投訴關乎紀律問題，必須參考〔人力資源管理手冊〕附錄18「紀律處分與投訴程序指引」（2013年4月1日修訂）。
- 4.4.7 如投訴關乎騷擾和／或性騷擾，應參考〔人力資源管理手冊〕附錄41-b「反騷擾/反性騷擾指引」（2021年9月21日修訂）。
- 4.4.8 工作天 - 由相關的<<津貼及服務協議>>內定義。

4.5 應付投訴的態度

- 4.5.1 任何職員一旦接獲有關的投訴，應保持虛心有禮的態度聽取對方的投訴。
- 4.5.2 高級督導主任或他／她的代表一旦接獲投訴，應告知投訴人他／她準備如何處理其投訴，以及投訴人會收到初步回覆的時限。

4.5.3 與提出投訴的職員溝通時，不論是口頭或書面，都應該用簡單明確的措辭，避免使用術語或簡稱。

4.6 記錄投訴個案

4.6.1 任何職員一旦接獲投訴，應在《職員投訴記錄冊》中記錄投訴的性質、接獲投訴的日期和已採取的行動（例如轉交給高級督導主任或他／她的代表處理。

4.6.2 高級督導主任或他／她的代表應在《職員投訴記錄冊》中記錄該投訴的結果。

4.6.3 所有關乎該投訴的來往信件及其他有關文件均應存入職員投訴檔案。

4.6.4 專責投訴主任應撰寫職員投訴年度報告（附件二），說明職員投訴的一般性質、接獲投訴的次數、以及為解決投訴和改善服務所曾採取的行動。

4.6.5 所有關乎該投訴的來往信件的副本、採取的行動及其他有關文件均應存入職員投訴檔案並制作一份副本交予該服務總主任。

4.6.6 職員投訴記錄冊及職員投訴檔案應由高級督導主任或他／她的代表保管。只有當認為有需要時，服務總主任才把投訴有關的文件副本，存入有關的職員檔案內。

4.7 讓職員知道社會工作服務部處理職員投訴的政策及程序

4.7.1 所有職員可從機構的行政指引中知道投訴的渠道。

修訂及更新日期：2022年4月1日

投訴記錄冊

編號	日期	投訴性質	結果

檢討及更新日期：2022年4月1日

職員投訴紀錄冊

編號	日期	投訴性質	結果

檢討及更新日期：2022年4月1日

年度投訴報告

編號	投訴日期	投訴性質	跟進及結果	完成日期

檢討及更新日期：2022年4月1日

年度職員投訴報告

編號	投訴日期	投訴性質	跟進及結果	完成日期

檢討及更新日期：2022年4月1日

《服務意見／申訴記錄表》 (Form_sqs15_01c)

https://docs.google.com/document/d/1lfpUq_CBPOYZSPx_r_1lEMnAl-kW0UcIWCJUJ4qmC2I/edit?usp=sharing

****如未能直接使用超連結取得表格，請將連結复制到瀏覽器再開啟****

****如下載表格，請使用 PDF 格式，以方便保存格式****

檢討及更新日期：2022年4月1日

SERVICE QUALITY STANDARD 15

SOCIAL WORK SERVICES POLICY AND PROCEDURES FOR HANDLING COMPLAINTS OF SERVICE USERS AND STAFF (including LSG and LSG-related service)

1. Purpose

- 1.1 The service unit has policy and procedures related to handling complaints and are accessible to service users, staff and all interested parties..

2. Relevant Documents

- 2.1 Policy and procedures for handling complaints of service users.
- 2.2 Policy and procedures for handling complaints of staff.

3. Policy and Procedures for Handling Complaints by Service Users

3.1 Purpose of the Policy

- 3.1.1 To advise service users and/or their families about their right to make a complaint and about what actions the service unit will take to address any complaint received; and
- 3.1.2 To guide any staff members who receive a complaint and the steps they have to take to handle that complaint effectively.

3.2 Philosophy

- 3.2.1 A service user and/or his/her family who is dissatisfied with any aspect of the service delivered by the service unit (including the standard of service delivered, service policies, procedures, decisions, or the actions or attitude of any staff member), is entitled to raise a complaint with the service unit.
- 3.2.2 Any person who makes a complaint will be dealt with fairly and without prejudice.
- 3.2.3 Any person who needs to complain, whether recorded verbally or in writing, shall be treated as making a formal complaint. The unit shall then act according to the procedures for handling complaints. On the other hand if that person expresses discontent without specifying his/her intention to complain, the handling staff shall enquire if he/she wishes to do so politely at the earliest opportunity. If he/she answers in the affirmative, it will be defined as a formal complaint. On the other hand if the person indicates that he/she only intends to

draw attention or give a negative answer, his/her opinion will be treated as feedback for the unit.

- 3.2.4 All service units will actively examine any complaint received with an open mind and to resolve the complaint.
- 3.2.5 All service units shall view the complaint as a positive mechanism for reviewing service activities and identifying ways to enhance service delivery procedures.
- 3.2.6 An anonymous complaint with valid communication information (e.g. valid email address) will be regarded as a complaint.
- 3.2.7 Information provided by the complainant must be based on fact and presented clearly and legibly. When deemed necessary, a designated complaint officer will contact the complainant for further information and/or clarification before the complaint handling procedure can proceed.
- 3.2.8 Staff shall uphold the principle of confidentiality. Information related to complaint, shall be treated in the strictest confidence.

3.3 Confidentiality

- 3.3.1 When processing complaint information, the need-to-know principle shall be enforced. Its objective is to ensure that staff gain access to necessary information solely to undertake their duties.

3.4 Steps to be taken to Address Complaints

- 3.4.1 Any staff member who receives a complaint about the service unit, whether verbally recorded or in writing, shall refer the complaint to the designated complaint officer immediately (normally within 2 working days of receiving the complaint). The unit supervisor shall appoint a staff as the dedicated complaints officer and confirm it in the staff meeting for a period of one year. However, if the object of the complaint is the dedicated complaint officer or a staff of the same level or above, the senior supervisor or his authorized representative will handle it.
- 3.4.2 The designated complaint officer has to discuss the matter with the complainant aiming to resolve the issue at the earliest opportunity (normally within 7 working days of receiving the complaint from the complainant).
- 3.4.3 Suppose the matter cannot be resolved through discussion. In that case, the designated complaint officer has to inform the complainant of the proposed actions that he/she will take to address the issue and indicate a timeframe within which he/she will report the outcomes of these actions back to the complainant (normally, a reply will be made within 30 working days).
- 3.4.4 When addressing a complaint, whether substantiated or not, the service unit has to consider whether the matter indicates an opportunity to modify or enhance

procedures or communication practices to ensure that similar concerns or problems do not arise in future. This approach may assist in achieving early and satisfactory resolutions of complaints in most cases.

- 3.4.5 Suppose, after receiving outcomes from the designated complaint officer, if the complainant remains dissatisfied, the complainant may request review within one month. The review will be referred to the next higher rank in the line of authority up to the Service Head appointed staff or the Service Head of relevant service at Headquarters, and the decision is final (normally, a reply will be made within 30 working days).
- 3.4.6 If a complaint received is against Senior Social Work Supervisor rank or above, the complainant will be referred to the next higher rank in the line of authority up to Chief Executive. Suppose the complaint is against the Chief Executive or a member of the Caritas Board of Management. In that case, the matter will be referred to the Chairman of the Caritas Board of Management for action and reply with the Board's advice.
- 3.4.7 Working days – as defined by related FSA.

3.5 Attitude to Receiving Complaints

- 3.5.1 Any staff member who receives a complaint about the service shall receive the complaint openly and courteously.
- 3.5.2 Any staff member who receives a complaint has to inform the complainant of the action that he/she proposes to take (i.e. referral to designated complaint officer) and of the timeframe within which the complainant can expect to receive an initial response (normally, being contacted by the designated complaint officer).
- 3.5.3 All verbal or written communication to service users, their family members and other relevant persons making a complaint have to be made in clear, simple language, avoiding jargon or abbreviations.

3.6 Documenting Complaints

- 3.6.1 Any staff member receiving a complaint has to record the nature of the complaint, date of complaint received and action taken (e.g. referral to the designated complaint officer) in the Complaint Register.
- 3.6.2 The designated complaint officer shall record the outcomes of the complaint in the Complaint Register.
- 3.6.3 Copies of correspondence and any other documents relating to the complaint have to be kept in the Complaint File.
- 3.6.4 The designated complaint officer will prepare an annual report (Annex 1) on the general nature and number of complaints received and actions taken to resolve complaints and enhance service delivery.
- 3.6.5 The Complaint Register and Complaint File are to be maintained by the Senior

Social Work Supervisor. Copies of complaints related documents shall only be placed on the files of individual service users or staff members if deemed necessary by the Senior Social Work Supervisor.

3.7 Keeping Staff Members and Service Users & their Families Informed about the Complaint Policy and Procedures of the Service Units

3.7.1 Any new staff members and service users/families will be informed of the complaints' channel.

4. Policy and Procedures for Handling Complaints by Staff

4.1 Purpose

4.1.1 To advise staff about their right to make a complaint and about what actions the Social Work Services Division (hereinafter as “Division”) will take to address any complaint received; and

4.1.2 To guide staff members who receive a complaint and the steps that they shall take to handle that complaint effectively.

4.2 Philosophy

4.2.1 Any staff who is dissatisfied with any aspect of Caritas Social Work Services Division (including services delivered, service policies, procedures, decisions, administration and management, employment contract as well as the behaviors or attitude of any staff member) is encouraged to raise their concerns and recommendations to his/her immediate supervisor in the Service/Division (Note: If the complaint is against the complainant's immediate supervisor, the complaint may be made to the next higher rank in the line of authority).

4.2.2 Any staff who makes a complaint will be dealt with fairly and without prejudice.

4.2.3 The Division will actively examine any complaint received with an open mind and to resolve the complaint.

4.2.4 The Division views the complaint procedures as a positive mechanism for reviewing service activities and identifying ways to enhance service delivery.

4.2.5 Any staff expressing needs to complain, whether recorded verbally or in writing, will be treated as a formal complaint. The immediate supervisor shall then act according to the procedures for handling complaints. If that staff expresses discontent without specifying his/her intention to complain, the immediate supervisor has to enquire if he/she wishes to do so politely at the earliest opportunity. If he/she answers in the affirmative, it will be defined as a formal complaint. If the person indicates that he/she only intends to draw attention or give a negative answer, his/her opinion will be treated as feedback.

- 4.2.6 An anonymous complaint with valid communication information (e.g. valid email address) will be regarded as a complaint.
- 4.2.7 Information provided by the complainant must be based on fact and presented clearly and legibly. When deemed necessary, the supervisor will contact the complainant for further information and/or clarification before the complaint handling procedure can proceed.
- 4.2.8 Staff shall uphold the principle of confidentiality. Information related to complaint shall be treated in the strictest confidence.

4.3 Confidentiality

- 4.3.1 When processing complaint information, need-to-know principle shall be enforced. Its objective is to ensure that staffs gain access to necessary information solely to undertake their duties.

4.4 Steps to be taken to Address Complaints

- 4.4.1 A complaint on a service unit's internal affairs will be handled by a Social Work Supervisor in the first place. If it cannot be solved after discussion, the complaint will be handled by a Senior Social Work Supervisor or his/her delegate.
- 4.4.2 Senior Social Work Supervisor or his/her delegate who receives a complaint, whether verbal or in writing, from staff, has to discuss the matter with the complainant in person to seek to resolve the issue at the earliest opportunity (normally within 7 working days from receipt of the complaint).
- 4.4.3 Suppose if the matter cannot be resolved through discussion, the Senior Social Work Supervisor or his/her delegate has to inform the complainant of the proposed actions that he/she will take to address the issue and indicate a timeframe within which he/she will report the outcomes of these actions back to the complainant (normally, a verbal complaint will be replied verbally, and written complaints will be replied in writing within 30 working days).
- 4.4.4 After receiving the outcome from the Senior Social Work Supervisor or his/her delegate, if the staff making a complaint remains dissatisfied, he/she may request for a review. The review procedure shall refer to the agency's "Guidelines on Disciplinary and Grievance Procedures" (revised on 1 April 2013) [see Appendix 18 of Human Resources Management Manual].
- 4.4.5 When addressing a complaint, whether substantiated or not, the Service/Division will consider whether the matter indicates an opportunity to modify procedures or enhance communications to ensure that similar concerns or problems do not arise in future. This approach may assist in achieving early and satisfactory resolutions of complaints in most cases.

- 4.4.6 If contents of the complaint are related to disciplinary matters, the agency's "Guidelines on Disciplinary and Grievance Procedures" (revised on 1 April 2013) [see Appendix 18 of Human Resources Management Manual] has to be referred to.
- 4.4.7 Complaints related to harassment and/or sexual harassment should refer to the agency's "Guidelines on Anti-Harassment / Anti-Sexual Harassment" (issued on 21 September 2021) [see Appendix 41-b of Human Resources Management Manual].
- 4.4.8 Working days – as defined by related FSA.

4.5 Attitude to Receiving Complaints

- 4.5.1 Any staff member who receives a complaint about the service shall receive the complaint openly and courteously.
- 4.5.2 Senior Social Work Supervisor or his/her delegate, who receives a complaint, has to inform the complainant of the action that he/she proposes to take and of the timeframe within which the complainant can expect to receive an initial response.
- 4.5.3 All verbal and written communication to the staff making a complaint has to be made in clear, simple language, avoiding jargon or abbreviations.

4.6 Documenting Complaints

- 4.6.1 Any staff member receiving a complaint has to record the nature of the complaint, date of complaint received and action taken (e.g. referral to Senior Social Work Supervisor or his/her delegate) in the Staff Complaint Register.
- 4.6.2 Senior Social Work Supervisor or his/her delegate shall record the outcomes of the complaint in the Staff Complaint Register.
- 4.6.3 Copies of correspondence and any other documents relating to the complaint have to be kept in the Staff Complaint File.
- 4.6.4 The designated complaint officer will prepare an annual report (Annex 2) on the general nature and number of staff complaints received and actions taken to resolve complaints and enhance service delivery.
- 4.6.5 Copies of correspondence, action taken, and any other documents relating to the complaint have to be kept on the Staff Complaint File and copied to the Service Head for information.
- 4.6.6 The Staff Complaint Register File and Staff Complaint File are to be maintained by the Senior Social Work Supervisor or his/her delegate, and copies of

complaints related documents shall only be placed on the files of individual staff members if deemed necessary by the Service Head.

4.7 Keeping Staff Members Informed about the Complaint Policy and Procedures of the Service Units

4.7.1 All staff members will be informed of the complaints' channel via Administrative Guidelines .

Date of Review and Revision: 1 April 2022

Opinion/Complaint Record Form (Form_sqs15_01e)

https://docs.google.com/document/d/1bLgXInjRx-IY7CH9HiQj_G2TNea6pez8anXs8ZSveQ/edit?usp=sharing

****If you cannot use the hyperlink to get the form directly, please copy the link to your browser and open it****

**** If downloading the form, please use the PDF format for the convenience of saving the format****

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