Melanie Weeks Occupational Therapy
Australian Business Number: 97930347965

NDIS PROVIDER COMPLAINTS MANAGEMENT AND RESOLUTION SYSTEM (POLICY DOCUMENT)

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Main points

- At Melanie Weeks Occupational Therapy, we do our best to help people. But sometimes, you, or someone else, might not be happy with us. For example, you might not be happy with some of our services and supports.

- We are a National Disability Insurance Scheme (NDIS) provider. As such, you have the right to make complaints about our services and supports at any time.

- If you want to make a complaint, we want to help you to make it quickly and easily, and without stress.

- We will do our best to deal with any complaint fairly and quickly.

- This document explains how to make a complaint to us, and to the NDIS Commissioner and others, about us.

- The NDIS laws make us keep records about complaints so they can check that we are following the law and doing a good job for NDIS participants.

Who can make a complaint?

Anyone.

This includes people who are receiving supports or services from us. It also includes family members, carers and other people. Anyone at all can make a complaint about our supports or services.

Do you have to give your name to make a complaint?

No.

You can you make a complaint anonymously.

How can you make a complaint?

We want to make sure it is as easy as possible for you to make your complaint.

We will give support and help to anyone who wants to make, or who has made, a complaint, about us.

To make a complaint, you can fill in our **Complaint and Feedback Form**. But you don't need to if you prefer to make your complaint in a different way.

You can make your complaint:

- by talking with us face-to-face;
- by calling us on the phone;
- through your preferred Augmentative or Alternative Communication device or method;
- by email; or
- by text message.

To protect your privacy, we do not recommend using social media like Facebook, Twitter or Instagram to make a complaint. But, if you make a complaint this way, we will still treat it as a complaint.

Can you ask someone for help to make a complaint about us?

Yes.

You can have a family member, carer, friend, advocate, advisor, or any other person make the complaint for you.

Does your complaint have to be in English?

No.

You can make your complaint in your preferred language.

Who should you contact to make a complaint?

So that we can respond to your complaint quickly and fairly, we suggest making or sending your complaint directly to Melanie Weeks: melanie@melanieweeks.com.au or phone: 0493 139 859.

If you would prefer not to contact Melanie for any reason, you can make your complaint to any of our staff.

Can you report your complaint about us to anyone else?

Yes.

You can also report your complaint to:

- the NDIS Commissioner; and
- AHPRA (Australian Health Practitioner Regulation Agency)

You may also be able to make a complaint to your State or Territory Health Care Complaints authority.

If you would like to do this, we will support you. For example, we will show you how to contact the right people at the NDIS and AHPRA.

What will happen when you make a complaint? How do we ensure the process is fair?

To make sure everyone is treatment fairly, we will follow these steps for all complaints about our supports and services:

First, we will send you a **message in writing.** The message will**:**

- tell you that we have received your complaint; and
- tell you what we are doing to look into the complaint, when you can expect to hear from us, and who you can contact to discuss the complaint; and

- tell you and any person with a disability affected by the issue in your complaint how to raise the complaint with the NDIS Commissioner; and
- offer to help you to contact the NDIS Commissioner about the complaint.

(Note: If you make an anonymous complaint, we will not be able to do this because we won't know who you are.)

Second, we will **assess** your complaint. This means we will look into your complaint by reviewing what happened, talking to you, NDIS participants, and any staff members who were involved, and looking at any documents or other records we have that might give us information about what happened.

Third, we will work with you to try to **resolve** the complaint. If appropriate, we will keep you involved in the resolution process. We will also keep you informed on the progress of the complaint, including any action taken. We will do our best to do this in a fair way that doesn't take too long. We will try to resolve your complaint within 21 business days. If this isn't possible, we will let you know why not in writing and give you an estimate of how long it will take for us to respond. (Note: If you make an anonymous complaint, we will not be able to do this because we won't know who you are.)

Fourth, we will **respond appropriately** to your complaint. Depending on the complaint and the results of our assessment and attempts to resolve the complaint, this may include a range of responses. For example, our response may be that:

- no further action is required; or
- you are owed an apology; or
- you are entitled to a part or full refund of fees; or
- we need to change our policies and procedures to ensure similar events don't happen again; or
- it would be appropriate for us to support you or an NDIS participant to transfer to a different provider (at our cost for the handover); or
- we undertake to ensure the staff involved receive additional training and/or supervision, as appropriate.

We will tell you our decision and the reasons for our decision. (Note: If you make an anonymous complaint, we will not be able to do this

because we won't know who you are.) We will also make sure that any recommended improvements or changes are put into place.

At each stage in the process, we will do our best to make sure everyone is treated fairly.

What if you are unhappy about our decision?

If you are not satisfied with our response to your complaint, let us know and we will try to schedule a time to meet with you to discuss your ongoing concerns with a view to resolving the matter in a friendly way.

If you are not happy with our response, you have other options. You can take your complaint to:

- the NDIS Commissioner; and/or
- AHPRA; and/or
- the Health Care Complaints authority in your State or Territory.

We will help you to contact the right people at these organisations (if you would like us to).

More information about making a complaint to the NDIS Commissioner or AHPRA:

NDIS Commissioner:
https://www.ndiscommission.gov.au/about/complaints-feedback/complaints

AHPRA:
https://www.ahpra.gov.au/Notifications/Concerned-about-a-health-practitioner.aspx

Will your complaint affect how you and others are treated by us?

Absolutely not.

Your complaint will not affect the care we give you or anyone else.

Will your complaint be treated confidentially?

Yes.

We will only share the information in your complaint if the law makes us share it, or if we need to for risk management purposes (e.g. if we need to contact our insurer or a regulator).

For example, in some cases, a complaint may require us to notify a regulator, professional body, and/or an insurer, e.g. if your complaint includes allegations of criminal, or professional misconduct, or leads us to anticipate a claim for compensation or other litigation. This may become clear only after we have completed our preliminary investigation of your complaint.

How long will we keep records of your complaint?

We are required by law to keep appropriate records of all complaints received in our capacity as an NDIS provider for **at least 7 years** from the date a record is made. These include, where appropriate:

- information about complaints;
- any action taken to resolve complaints; and
- the outcome of any action taken.

We are also required by law to collect complaints-related information to enable us to review issues raised in complaints, identify and address systemic issues raised through the complaints management and resolution process and, if requested, to report information relating to complaints to the NDIS Commissioner.

Please note: In some cases, State and/or Territory health records laws require us to keep information that constitutes health records for longer than 7 years. We have to follow these laws, too.

Review of Complaints Management and Resolution System

This system will be reviewed periodically - at least once a year – to ensure it is effective.

Status of this Document

This policy is intended to document this provider's complaints management and resolution system as required by the National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018.

Distribution of this Document

This policy forms part of the provider's compliance system. A copy is provided to:

- each person with a disability receiving support or services from us as an NDIS provider, and their family, carers, and advocates (as appropriate); and
- each person employed or otherwise engaged by us (our **staff**).

Who is responsible for making sure this system is followed?

Each staff member of the provider must comply with the system as documented in this policy. This policy forms part of the provider's compliance system with respect to the NDIS.

Melanie Weeks (owner) has primary responsibility for training all provider staff to comply with the requirements of this system, including making sure clients and others are aware of their rights to complain.

Melanie Weeks also has primary responsibility for the oversight and review of the complaints management and resolution system.

Thank you

Complaints (and compliments) give us useful information about the quality of our services. Resolving complaints in a friendly way gives us the opportunity to improve our services and to learn from our mistakes.

We take all complaints very seriously and will work hard to address and resolve them efficiently to your satisfaction as set out in this policy.