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Complaints and Feedback Policy

Organisation: Watkins Therapy Group, including UrSpace EAP
ABN: 37 826 814 954
Policy owner: Director, Watkins Therapy Group
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1. Purpose

Watkins Therapy Group (WTG), including UrSpace EAP, is committed to providing safe, ethical, respectful and high-quality services.

WTG welcomes feedback and takes complaints seriously. Complaints provide an opportunity to address concerns, improve services, strengthen professional practice and identify potential risks or systemic issues.

This policy explains:

- who may make a complaint
- how complaints can be made
- how complaints will be assessed and resolved
- how complainants will be supported
- how privacy, confidentiality and procedural fairness will be maintained
- options for internal review and external escalation.

2. Scope

This policy applies to complaints and feedback about:

- individual counselling
- couples counselling
- UrSpace EAP counselling and support
- NDIS-funded counselling or support
- Mental Health First Aid training

- workplace wellbeing services, training and profiling
- critical incident support
- administrative services
- booking, billing, cancellation or payment processes
- privacy, confidentiality or the handling of personal information
- WTG employees, counsellors, subcontractors, students, trainers and other representatives
- the accessibility, safety, quality or appropriateness of WTG services.

This policy applies to current and former clients, EAP users, NDIS participants, parents, guardians, carers, support people, advocates, referrers, organisational clients and members of the public.

Employment disputes and contractual disputes involving workers or subcontractors may be managed under a separate workplace, supervision or contractual process. However, concerns relating to client safety, service quality, privacy or professional conduct will be considered under this policy.

3. Our commitments

WTG will manage complaints in a way that is:

- accessible and easy to understand
- respectful, impartial and culturally responsive
- sensitive to trauma, disability and communication needs
- confidential, subject to legal and safety obligations
- timely and proportionate to the nature of the complaint
- consistent with procedural fairness
- focused on safety, resolution and service improvement.

A person will not be refused a service, disadvantaged, threatened or treated unfavourably because they have made, or intend to make, a complaint.

A complaint will not automatically affect a person’s access to WTG or UrSpace EAP services. In some circumstances, changes to service arrangements may be required to protect safety, confidentiality, therapeutic boundaries or the integrity of an investigation.

4. What is a complaint?

A complaint is an expression of dissatisfaction about a service, action, decision, omission, worker or process where a response or resolution is expected.

A person does not need to use the word “complaint” for their concern to be managed as one.

Feedback may include a compliment, suggestion, observation or general comment where a formal response is not necessarily required.

Where feedback raises concerns about safety, professional conduct, privacy, discrimination, abuse, neglect or possible harm, WTG may manage it as a complaint or incident even if the person does not request a formal investigation.

5. Who may make a complaint?

A complaint may be made by:

- a current or former client
- an EAP user
- an NDIS participant
- a parent, guardian or authorised representative
- a carer, family member, advocate or support person
- an organisational or EAP client
- a referrer or another health professional
- a member of the public
- a WTG worker, subcontractor, student or volunteer.

A person may make a complaint on behalf of someone else where they have the person’s consent or appropriate legal authority.

WTG may still consider information provided without consent where it identifies a serious safety concern, possible criminal conduct, abuse, neglect, exploitation, a privacy breach or another matter requiring action.

6. How to make a complaint

Complaints may be made verbally or in writing.

A complaint can be made by:

Email: admin@watkinstherapygroup.com.au
Phone: (03) 8765 2477
Post or in person:
Watkins Therapy Group
435 Nepean Highway
Frankston VIC 3199

A complaint may also be raised with:

- the person providing the service
- an administration team member
- the Director
- another WTG representative.

A person is not required to complain directly to the practitioner involved if they do not feel comfortable or safe doing so.

WTG can assist a person to document their complaint. Reasonable adjustments may also be made for people who require an interpreter, advocate, support person, communication aid or another accessible complaint method.

7. Information that may assist us

A person is encouraged, but not required, to provide:

- their name and preferred contact details
- the name of the service or person involved
- what happened
- when and where it occurred
- any steps already taken to address the concern
- relevant documents or supporting information
- the outcome they are seeking
- any communication, accessibility or safety needs.

A complaint will not be rejected solely because all information is not available when it is first raised.

8. Anonymous complaints

WTG accepts anonymous complaints.

Anonymous complaints will be assessed based on the information available. However, anonymity may limit WTG's ability to:

- verify information
- obtain further details
- provide procedural fairness to the person involved
- advise the complainant of the outcome
- complete a full investigation.

WTG will still take reasonable action where an anonymous complaint raises concerns about safety, professional conduct, abuse, privacy or systemic service issues.

9. Support during the complaint process

A complainant may have an advocate, interpreter, family member, lawyer or support person assist them.

WTG may request written authority before discussing personal or clinical information with another person.

A support person may assist the complainant but should not disrupt the complaint process, intimidate another person or interfere with an investigation.

10. Complaint-handling process

10.1 Receiving and acknowledging the complaint

WTG will aim to acknowledge a complaint within two business days.

The acknowledgement will generally include:

- confirmation that the complaint has been received
- the name or role of the person managing the complaint
- an outline of the next steps
- an expected timeframe
- a request for any additional information required.

For this policy, a business day is Monday to Friday, excluding Victorian public holidays.

10.2 Initial assessment and risk screening

The complaint will be assessed to determine:

- the nature and seriousness of the concern
- whether anyone may be at immediate risk
- whether urgent protective action is required
- whether the matter is also a clinical incident, privacy breach or safeguarding concern
- whether mandatory reporting or notification obligations may apply
- whether the complaint should be referred to an external authority
- who is appropriate to manage or investigate the complaint
- whether there is an actual or perceived conflict of interest.

Complaints involving immediate danger or a serious risk of harm will be prioritised. Emergency services may be contacted where necessary.

10.3 Early resolution

Where appropriate, WTG may seek to resolve a complaint through:

- clarification or further information
- correcting an error
- discussing the concern with the complainant
- providing an explanation
- reviewing an administrative or billing decision
- changing a communication or service arrangement
- facilitated discussion or mediation
- acknowledging the complainant's experience
- providing an apology where appropriate.

A complaint will only be considered resolved when the complainant has been informed of the proposed outcome. Agreement with the outcome is not required for WTG to close the complaint.

10.4 Investigation

A formal investigation may be undertaken where:

- the complaint cannot be resolved informally
- the allegations are serious
- professional or ethical conduct is questioned
- there is a potential risk to clients or the public
- the complaint involves privacy, discrimination, abuse, exploitation or neglect
- there are conflicting accounts requiring further examination
- a pattern of similar complaints has been identified.

The investigator may:

- speak with the complainant
- speak with the person who is the subject of the complaint
- review relevant correspondence, policies, booking records and clinical or administrative information
- obtain advice from a clinical supervisor, professional association, insurer, lawyer or external expert
- request additional documents or information
- consider whether broader service improvements are required.

Only information reasonably necessary to assess and resolve the complaint will be accessed.

10.5 Procedural fairness

A person who is the subject of a complaint will generally be:

- informed of the substance of the allegations
- given a reasonable opportunity to respond
- advised of any adverse findings that may affect them
- given an opportunity to provide relevant information
- treated fairly and without a presumption that the complaint has been substantiated.

WTG may withhold identifying or sensitive information where disclosure would create an unreasonable safety or privacy risk. This may limit the findings that can be made.

10.6 Outcome and response

WTG will aim to provide an outcome within 20 business days of receiving the complaint.

Where the matter is complex or requires external information, WTG will provide an update and a revised expected timeframe.

The outcome may include:

- an explanation of what was considered
- whether the complaint was substantiated, partially substantiated, not substantiated or unable to be determined
- actions taken or proposed
- service or administrative changes
- supervision, education or additional training
- review of policies or procedures
- referral to an insurer, professional body, regulator or authority
- corrective or disciplinary action
- an apology or acknowledgement
- review of a fee or charge
- information about internal review and external complaint options.

Privacy and employment obligations may prevent WTG from disclosing specific action taken in relation to a worker or subcontractor.

11. Complaints involving the Director

A complaint involving the Director or Principal Therapist will not be investigated solely by the person who is the subject of the complaint.

Where appropriate, the complaint will be referred to an independent and suitably qualified person, such as:

- an external clinical supervisor
- an independent senior practitioner
- a professional consultant
- a lawyer
- another appropriately qualified external investigator.

The external reviewer will be required to maintain confidentiality and disclose any potential conflict of interest.

12. Complaints involving a counsellor or practitioner

Complaints about a counsellor may involve both WTG's internal process and the complaints process of the counsellor's professional association.

Where appropriate, WTG may:

- seek information from the practitioner
- review relevant professional and ethical obligations
- require additional supervision, education or training
- temporarily alter the practitioner's duties
- restrict or suspend referrals
- notify the practitioner's professional association, insurer or another authority
- terminate or vary a subcontracting or employment arrangement.

Any immediate action taken while a complaint is investigated is precautionary and does not necessarily indicate that an allegation has been substantiated.

13. EAP complaints and confidentiality

An employee or eligible family member using UrSpace EAP may make a complaint without their employer being informed of their identity.

WTG will not disclose to an employer:

- whether a particular employee has made a complaint
- clinical information

- counselling notes
- the content of counselling sessions
- personal information about the complainant

unless the person provides informed consent or disclosure is required or authorised by law.

De-identified and aggregated information may be used in EAP reporting or service reviews where it does not reasonably identify an individual.

An organisational EAP client may raise concerns about contractual, reporting or service delivery matters. Those complaints will be managed without compromising the confidentiality of individual EAP users.

14. NDIS complaints

NDIS participants have the right to raise concerns safely, access assistance to make a complaint, remain involved in the process and receive information about decisions and actions taken.

Complaints relating to NDIS-funded services may also be made directly to the NDIS Quality and Safeguards Commission. A participant is not required to withdraw an external complaint before WTG considers the matter internally.

All NDIS providers are expected to maintain effective complaint-management practices, and registered providers must have a documented complaints management and resolution system. The NDIS Commission also expects complaint processes to support anonymous and accessible complaints, include a specific process for complaints involving organisational leaders, and protect people from threats or retaliation.

15. Privacy and confidentiality

Complaint information will be handled confidentially and shared only with people who reasonably need the information to:

- assess or investigate the complaint
- respond to the allegations
- manage safety or clinical risk
- obtain professional, legal, insurance or regulatory advice
- meet legal, contractual or reporting obligations
- implement an agreed or necessary resolution.

Complaint information will not be disclosed to an EAP employer or another third party merely because they funded or referred the service.

Confidentiality cannot be guaranteed where:

- there is a serious or imminent risk to a person
- there are concerns involving child abuse, family violence, abuse, exploitation or neglect
- a criminal offence may have occurred
- a court, regulator or other authority lawfully requires information
- notification is required under professional, insurance, privacy, NDIS or other legal obligations.

Privacy complaints will be managed in conjunction with WTG's Privacy Policy and any applicable data-breach response process.

16. Complaint records

WTG will maintain a secure complaint register and appropriate records of:

- the complaint
- relevant communications
- the assessment and risk level
- evidence considered
- actions taken
- findings and outcomes
- internal or external referrals
- service improvements arising from the complaint.

Complaint records will generally be stored separately from clinical notes. Relevant information may be included in a clinical record where necessary for continuity of care, safety, risk management or legal compliance.

Complaint records will be retained for at least seven years, or longer where required by legislation, clinical record-retention requirements, insurance arrangements or contractual obligations.

Access to complaint records will be restricted to authorised people.

17. Internal review

A complainant who is dissatisfied with the outcome may request an internal review.

The request should generally be made within 20 business days of receiving the outcome and explain:

- why the person believes the outcome should be reviewed
- whether relevant information was overlooked
- whether new information is available
- the outcome being sought.

Where practicable, the review will be completed by a person who was not responsible for the original decision.

WTG will aim to acknowledge the review request within two business days and provide a review outcome within 15 business days.

An internal review may confirm, vary or reconsider the original outcome.

18. External complaint options

A person may contact an external complaint body at any time. They do not need WTG's permission.

Depending on the nature of the complaint, external options may include:

Health Complaints Commissioner Victoria

Complaints about health services provided in Victoria may be made to the Victorian Health Complaints Commissioner. The Commissioner generally encourages people to raise the matter with the provider first where this is possible and safe. The current complaint telephone number is 1300 582 113

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For services delivered outside Victoria, the relevant state or territory health complaints body may be contacted.

PACFA

Complaints about a counsellor or psychotherapist listed on the PACFA National Register may be made through PACFA's ethical grievance and complaint process. PACFA requests the complainant's details, the therapist's name, a description of the concern and the date of the incident.

Australian Counselling Association

Complaints about an ACA-registered counsellor may be lodged through the Australian Counselling Association. ACA requires the counsellor's name and the complainant's name and contact information and does not process anonymous complaints.

NDIS Quality and Safeguards Commission

An NDIS participant, family member, advocate or another person may report concerns about NDIS supports, services, providers or workers to the NDIS Quality and Safeguards Commission.

Office of the Australian Information Commissioner

Privacy complaints may be made to the Office of the Australian Information Commissioner where WTG has not responded within 30 days or the complainant is dissatisfied with WTG's response. Privacy complaints to the OAIC must be made in writing.

Consumer complaints

A person may seek assistance from Consumer Affairs Victoria or the relevant consumer protection agency in their state or territory. Consumer issues may also be reported to the Australian Competition and Consumer Commission, although the ACCC does not generally resolve individual disputes.

Police and emergency services

Where a complaint involves immediate danger, suspected criminal conduct or an urgent threat to safety, the person should contact emergency services on 000.

19. Unreasonable, abusive or threatening conduct

WTG understands that people making complaints may be distressed, frustrated or angry.

WTG will remain respectful and will make reasonable efforts to understand and respond to the substance of a complaint. However, WTG does not accept:

- threats or intimidation
- discriminatory or abusive language
- harassment
- deliberate misinformation
- unreasonable demands for personal contact
- repeated contact that prevents the complaint from being managed effectively
- conduct that places clients, workers or members of the public at risk.

Where necessary, WTG may set reasonable boundaries, nominate one contact person, restrict communication to writing or limit the frequency of communication.

Any restrictions will be proportionate and will not prevent WTG from considering legitimate concerns.

20. Continuous improvement

WTG will periodically review complaints and feedback to identify:

- recurring concerns
- potential safety or quality risks
- gaps in policies, communication or training
- accessibility barriers
- opportunities to improve client experience
- professional development or supervision needs
- systemic issues requiring corrective action.

Complaint trends may be reported internally in a de-identified format.

Where a complaint identifies a broader concern, improvements may be implemented even where the individual complaint cannot be fully substantiated.

21. Responsibilities

Director

The Director is responsible for:

- ensuring this policy is implemented
- appointing an appropriate complaints officer or investigator
- managing conflicts of interest
- ensuring serious concerns are escalated
- monitoring complaint trends and improvement actions
- arranging external investigation where required.

Complaints officer or investigator

The person managing a complaint is responsible for:

- communicating respectfully and clearly
- assessing risks and conflicts of interest

- maintaining appropriate records
- providing procedural fairness
- keeping relevant people informed
- making findings based on available information
- recommending proportionate outcomes and improvements.

Workers, counsellors and subcontractors

All WTG representatives must:

- understand how complaints may be made
- respond respectfully when a concern is raised
- promptly forward complaints to the appropriate person
- preserve relevant documents and information
- participate honestly in complaint processes
- maintain confidentiality
- avoid any form of retaliation or adverse treatment.

22. Policy availability and review

This policy will be available to clients, EAP users, NDIS participants, organisational clients, workers and members of the public.

WTG will review this policy:

- at least annually
- following a serious complaint or incident
- when legislation, regulatory requirements or professional standards change
- When complaint trends identify a need for improvement.

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