

Revised Service Charter¹

OUR COMMITMENT TO YOU

The Health Complaints Commissioner (HCC) helps people in Victoria when they have a complaint about their health service provider. We also handle complaints about the management of health information under the [Health Records Act 2001](#).

We are independent and conduct our work in a fair and unbiased manner. We are here to listen to your complaints and to try to help you resolve or investigate them to make sure that all Victorian health service providers operate safely and in an ethical way.

Our Service Charter explains how we do our work and how you can expect us to treat you. It also explains what we need from you when you are involved with our service.

This Service Charter is our commitment to you.

OUR VALUES

At the HCC we have made a commitment to the following values, in addition to public sector core values, when conducting our work:

Act with integrity – We operate in an impartial and independent way and always maintain high professional standards.

Be respectful – We respect others and always take a person-focussed approach.

Be supportive – We focus on protecting and promoting the health and wellbeing of our people and the community. We strive to equip people to help themselves thrive.

Be innovative – We are committed to continuous learning and improvement in the health services sector and in the way we operate every day.

HCC staff are subject to the Code of Conduct for Victorian Public Sector Employees of Special Bodies.

WHAT WE DO

- receive and manage complaints about health services and the handling of health information in Victoria

¹ For the purposes of the Act the Service Charter refers to the requirements under section 124 of the Health Complaints Act 2016 that relate to a practice protocol.

- investigate matters not suitable for complaint resolution or where a general health service provider has contravened the Code of Conduct or may pose a risk to the health, safety or welfare of a person or the public
- work with other regulatory and non-regulatory agencies in the best interests of an individual and the wider community
- track and review trends in complaints data and use this knowledge to inform quality improvement opportunities within health services and the health system
- provide a free, independent, and accessible alternative to legal proceedings for advice and complaint resolution
- educate and inform consumers and health service providers about best practices in complaint handling, healthcare rights and responsibilities.

WHAT WE ARE UNABLE TO DO

- force or compel health service providers or complainants to take part in the complaint resolution process
- always get an outcome that satisfies all parties
- discipline practitioners registered with the Australian Health Practitioner Regulation Agency ([Ahpra](#))
- act as an advocate or take sides for a complainant or health service provider
- provide legal advice or operate outside the legislation that governs us.

WHEN YOU SEEK OUR HELP, WE WILL:

- ensure our service is accessible to you and help you to put together your complaint
- explain our functions and what we can and cannot do to help you
- guide you to organisations that may be able to help if we can't
- acknowledge written complaints within three (3) working days²
- explain how we will manage your complaint and what will help to resolve it
- work with you to identify your key issues of concern
- treat you with fairness and respect
- notify Ahpra if your complaint is about a registered health practitioner.

WHEN YOU BRING A COMPLAINT TO US, WE NEED YOU TO:

- first talk to your health service provider, tell them about your complaint, if appropriate, so that they have a chance to address the issue. We understand that in some circumstances you may not feel comfortable talking to your health service provider
- treat our staff and the health service provider with respect
- tell us of any assistance you need to participate in our processes
- provide us with factual information in a timely way.

IF YOU ARE A HEALTH SERVICE PROVIDER, WE NEED YOU TO:

- show you have acted consistently with the Complaint Handling Standards when you addressed the complaint
- treat our staff and the people who make a complaint with dignity and respect

² Consistent with ISO 9000:2015 [3.9.3]. AS 10002:2022 Guidelines for Complaint Management in organisations (ISO 10002:2018, NEQ), Published 25 March 2022. This Standard is compatible with AS/NZS 9001, *Quality Management Systems – Requirements* and AS/NZS 9004:2011, *Managing for the sustained success of an organization – A quality management approach*. AS 10002:

- provide us with factual information and respond to complaint issues in a reasonable timeframe, and tell us about any delay.

WHEN RESOLVING COMPLAINTS, WE WILL:

- tell you as soon as possible if we cannot assist you with your concern
- work with you to agree on the key issues of your complaint and/or concerns
- only discuss the complaint with relevant people and use the information given to us only for the purposes for which it was gathered
- tell you if we have a conflict of interest
- work with you to agree on how we will communicate with you about the progress of your complaint
- tell you what will happen next and when, as well as what to expect from our process and the estimated time frame
- tell you if we cannot resolve your complaint within the expected time frame, unless it is not practical or appropriate to do this
- assess your complaint and take timely action to reduce any risk to a person or public safety
- do what is reasonable to resolve your complaint as quickly and informally as possible
- keep you updated about progress at regular intervals
- do our best to make a decision on at least 80% of all complaints within 90 days
- do our best to answer at least 80% of telephone calls to our office, and within 10 minutes
- when it is reasonable to do so, promptly contact the health provider to ask them to respond to the key complaint issues
- work in a way that is fair, transparent, and impartial to everyone involved
- provide all parties with a final outcome and reasons for decisions
- invite you to give us feedback about our service and offer information about the ways you can have your outcome reviewed.

WHEN DO WE INVESTIGATE?

We deal with most complaints through our complaint resolution process.

The Commissioner decides what complaints may be investigated. The Commissioner may decide to investigate matters not suitable for complaint resolution, or where a general health service provider has contravened the Code of Conduct or may pose a risk to the health, safety or welfare of a person or the public.

A complaint resolution process that did not achieve the complainant's desired outcome is not grounds for an investigation.

When the Commissioner decides to investigate a complaint, we will:

- give notice of the investigation to all those involved as soon as possible, whenever we can
- act as quickly and informally as possible and within our capabilities
- act within the principles of natural justice
- provide an affected person or entity with an opportunity to make submissions before making a decision that affects them..

FEEDBACK ABOUT OUR SERVICE

If you are unhappy with our service, first talk to your case officer. We will listen to your feedback and use your feedback for continuous improvement.

If we cannot resolve your concern about our service, you can find information on your appeal rights and our internal review process **here**. Your options may include:

- internal review of your complaint and how it has been managed.
- raising your concerns with the Victorian Ombudsman.

If you are concerned about the way we have managed your personal information:

- Contact the case officer.
- If not resolved, complain to the Victorian Information Commissioner (Phone: 1300 006 842).

Appeal Rights: You can apply for a VCAT review of an Interim Prohibition Order or Prohibition Order.

Extra Info: Learn more about appeals and reviews on our website.