

Adelaide Hills Inclusive Counselling

Date of issue: 19/04/2021

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Complaints Management and Resolution Procedure for NDIS Participants

1. STATEMENT

This procedure for the management of complaints is in accordance with the National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018.

This service aims to provide respectful and validating care for all. If the service fails in any way to achieve the highest standard of care for any client, we welcome the opportunity to be made aware of the complaint and resolve it to the best of our ability. If we fail to provide a satisfactory resolution to the complaint, this document sets out further steps the client may take to resolve the matter.

2. PURPOSE

This document specifies how NDIS participants may make a complaint and how we will document and manage complaints. It also provides a means for reviewing and revising work practices to reduce the risk of similar complaints in the future.

3. FREQUENTLY ASKED QUESTIONS

- Do I have the right to complain?
 - While the service provider is not a registered National Disability Insurance Scheme (NDIS) provider, a NDIS participant has the right to make complaints about our services and supports at any time, as follows.
- Who can help me make a complaint?
 - We would be happy to help, if you wish. Otherwise, we can organise an independent advocate for you to help you make a complaint and have it resolved.
- Who can make a complaint?
 - Anyone can, whether it is you as the NDIS participant, a family member, a carer, or other significant people.

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- You may ask another person to make the complaint for you, such as a family member, carer, friend, advocate, advisor, or any other person
- Must I give my name in a complaint?
 - No, a complaint to the NDIS Commissioner may be anonymous.
- How do I make a complaint?
 - There are several ways for you to make a complaint:
 - By talking to us face to face
 - By calling us by phone
 - Using your preferred Augmentative or Alternative Communication device
 - By email
 - By text message
 - If you are unable to gain satisfaction by approaching the NDIS service provider, or feel uncomfortable doing so, you may make your complaint directly to the NDIS Commission using a [Complaint and Feedback form](#) (see below)
- Must the complaint be in English?
 - No. You may make your complaint in your preferred language
- Who should I complain to?
 - You may make your complaint directly to me, as the private practice service provider: Stephanie Russell, email: scrussell56@gmail.com; phone: (08) 7079 4324.
 - You may prefer to make your complaint to the NDIS Commission using the following form: [NDIS Complaint Form PDF](#). The completed form may be emailed to: feedback@ndis.gov.au, or posted to National Disability Insurance Agency, GPO Box 700, Canberra ACT 2601, or drop your form off at any National Disability Insurance Scheme office: [Office locations](#). Alternatively, you may use any of the means listed on the [NDIS Complaint site](#) (including calling 1800 035 544, or using TTY on 133 677).
 - Since the practice is registered with Psychotherapy and Counselling Federation of Australia (PACFA), and must adhere to the [PACFA Code of Ethics](#), complaints of ethical malpractice may be addressed by filing a [complaint of misconduct](#).
 - You can also raise your concerns with the Health Care Complaints Commission or health department in your state or territory. We would be happy to help you connect with the relevant body.
- What can I complain about?
 - You can complain about any issue related to the provision of services, such as:
 - whether services were provided in a safe and respectful way
 - whether the service has been delivered at an adequate standard
 - whether your complaint has been treated appropriately
 - how the service provider has responded to a carer or advocate of the NDIS participant
- If I make a complaint, will it affect how I am treated?
 - Categorically no.
- Will my complaint be treated confidentially?
 - Yes. We will only share the information if we are obliged to by law, by the regulator, by the insurer, or if you give us written consent.

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- How long will records of the complaint be kept?
 - We will keep records of the complaint for at least 7 years, in accordance with NDIS requirements, including information about the complaint itself, actions taken, and outcomes of actions taken.
 - We may need to keep records longer than 7 years if required to do so by PACFA or by State or Territory health care authorities.

4. PROCEDURE

If we receive a complaint from you, we will do the following.

1. Send you a written message with the following information:
 - Confirm in writing the receipt of your complaint
 - Tell you what is being done about the complaint, and when you may expect to hear back from us.
 - Offer to talk to you at a time of your convenience
 - Tell you, and the person with disability (if different), how to raise the concern with the NDIS Commissioner
 - Explain to you any other options you have for raising your concerns
 - Offer to help you raise concerns with the NDIS Commissioner, or other body of your choice.
2. We will assess your complaint by talking with you and any other person who was involved, and by reviewing any relevant notes or documentation.
3. We will work with you to fix the issue, and will keep you informed of the situation and of any action taken. We will try to resolve the issue within 20 business days, or otherwise inform you of why that is not possible, and when to expect a resolution.
4. We will respond to the complaint in an appropriate way, which may include, for instance:
 - a. No further action
 - b. Issue you an apology
 - c. Issue you with a partial or full refund of fees
 - d. Change our policies and procedures to help ensure the issue will not recur
 - e. Help the NDIS participant transfer to another provider
 - f. Undertake additional training to help avoid the issue from recurring
 - g. We will seek advice from our Supervisor over how to proceed and how to avoid the issue in the future
5. If you are still not happy with our decision, we can recommend further courses of action for your complaint to be addressed to your satisfaction, including raising the complaint with:
 - the NDIS Commissioner
 - PACFA
 - the Health Care Complaints authority in your State or Territory

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5. REVIEW OF THIS DOCUMENT

This document will be reviewed annually to ensure it is fit for purpose.

6. DISTRIBUTION OF THIS DOCUMENT

A copy of this document will be made available to every person with disability seeking services from us through the NDIS, their family, carers and advocates (as appropriate).

5. FURTHER DETAILS

Further details of complaint management requirements and procedures may be found in the following documents:

[*National Disability Insurance Scheme \(Complaints Management and Resolution\) Rules 2018*](#)

[*NDIS Quality and Safeguards Commission Complaints Management and Resolution Guidance*](#)

[*National Disability Insurance Scheme Act 2013*](#)