



audiology australia ltd

Complaints Procedures Manual

Audiology Australia: Hearing for Life

We believe that every human being has the right to communicate and interact with the world in ways that are fulfilling and meaningful to them.

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Foreword

Audiology Australia was founded in 1968 and is the peak professional body that represents over 98% of audiologists in Australia. Members of Audiology Australia aim to promote optimum hearing health care in the community through quality professional assessment, rehabilitation, education and research. Our members' commitment to quality standards of care is reflected through our Professional Practice Standards. Audiology Australia members also abide by the Code of Ethics and Code of Conduct, which are documents that provide members with a set of principles that guide professional practice of audiology in Australia.

The vast majority of members do their best to provide quality care for people seeking audiology services. Nevertheless, when issues do occur, people should have the opportunity to raise concerns in a helpful way. People who raise complaints directly with the member may have their issues resolved quickly and effectively. However, there may be circumstances where people seek assistance from Audiology Australia, as the representative professional body, to resolve complaints.

The purpose of this manual is to guide staff on how to effectively handle concerns and complaints that are received by Audiology Australia. The manual contains three sections:

- **Principles of complaints management**
- **Policies and procedures**

The Appendix in this manual contains the Ethics Committee Operating Procedures.

Complaints are recognised as a means of improving service quality in hearing health care. This manual is one way that Audiology Australia helps to promote quality practice in audiology and to ensure effective response to concerns that are raised. To aid transparency of the complaints handling process, this manual is available to all Audiology Australia members via the <http://www.audiology.asn.au/> web address. The contents of the manual are reviewed every three years and updated if required. The [Better Practice Guide To Complaint Handling \(Commonwealth Ombudsman, April 2009\)](#) was used to guide the structure of this manual.

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Terminology

Board:	The Board of Audiology Australia (formerly the Federal Executive Council).
Client:	Any person, customer, group or organisation that receives audiological services, or any person acting on behalf of a person receiving services, such as a carer, parent, guardian or under a power of attorney.
Complainant:	Any client or other person or entity affected by the action or inaction of a Member of Audiology Australia, or of an organisation that the member represents.
Complaint:	Any expression of dissatisfaction with a specific action or service of a Member of Audiology Australia, or of an organisation that the member represents. A complaint may include disclosure about the conduct or behaviour of a member that is a potential breach of the conditions of membership. Complaints may be made by telephone, in writing, by electronic mail or by web form.
Corrective Action:	The action that is taken to remove the cause of a problem.
Escalation:	A complaint that is referred to a person of greater authority within Audiology Australia.

Ethical Complaint:	A complaint that alleges a breach of the Audiology Australia Code of Ethics, and/or Code of Conduct, and has been referred to the Ethics Committee for preliminary examination. N.B. An ethical complaint may or may not be substantiated.
Ethics Committee:	The committee formed by Audiology Australia to handle matters that potentially breach Audiology Australia's Codes of Ethics or Conduct.
Member:	Any person who is a full, full CCP, affiliate, student, fellow or emeritus member of Audiology Australia.
OHS:	Office of Hearing Services (the Australian Government Hearing Services Program).
Referral:	Any complaint that is referred to the Ethics Committee, or another individual or organisation, for further advice or input.
Respondent:	Audiology Australia, or person acting on behalf of Audiology Australia, who responds to the complaint.

Section 1

Principles of complaints management

Audiology Australia's complaints handling process is built on a positive culture that values complaints and recognises their benefit to ongoing promotion of quality audiology practice in Australia. This section describes the culture and principles that underpin our complaints handling.

Culture

Value

Audiology Australia recognises the value of complaints to the delivery of quality hearing services. We acknowledge that all clients have the right to complain and to have their issues handled in a fair, sensitive and accountable way. A collaborative approach to complaints is taken to foster open communication and to maintain good relations with clients and members. Audiology Australia acknowledges the importance of timely handling of complaints, and is responsive to all matters that arise.

Commitment

All staff of Audiology Australia and members of the Ethics Committee are committed to effective complaint handling and are aware of their role in the complaints handling process. Administration staff of Audiology Australia are aware of these complaints procedures and privacy requirements for complaints handling. Staff action complaints proactively, are able to help resolve client and member issues on the spot, and know when a matter should be escalated or referred.

Management responsibility

The Board and CEO of Audiology Australia endorse the procedures included in this manual and are committed to supporting staff, members and clients by effective handling, escalation and referral of complaints, provision of adequate training and recruitment of staff if required and public reporting of complaints outcomes information. Audiology Australia takes a continuous improvement approach to complaints by monitoring and evaluating current processes, bringing matters to the Board as required, taking corrective action if needed and integrating the outcomes of complaints into improved practice.

Resources

Audiology Australia will ensure that there are sufficient staff to handle complaints, and that there are sufficient members of the Ethics Committee available to respond appropriately to matters raised with them. If complaints management is part of a staff member's day-to-day responsibility, this should be reflected in the statements of duties and responsibilities for those staff.

Audiology Australia maintains systems for recording complaints, in both electronic and hard copy form. This system enables complainant demographic information to be recorded, details of the issue(s) raised, categorisation of the issue (i.e., the type and severity of the issue, whether or not it relates to a possible ethical breach), member and/or organisation name if appropriate, respondent details, to whom the complaint was escalated to or referred (if appropriate), the date, and the time taken to resolve the issue. Confidentiality is maintained by limiting access of electronically held complaints information to staff who manage complaints. Electronic systems are password protected and there is a dedicated email address for incoming complaints that is accessible only to staff who handle complaints. Written complaints are registered electronically and referred to the CEO of Audiology Australia. Any paper records are filed securely.

Principles

Audiology Australia adheres to the following principles when handling complaints:

Fairness

Complainants, members and staff should be treated fairly, and with courtesy and respect. Complaints are judged objectively, and are based on merit and the information that is available. All complaints are treated seriously, and each party involved in a complaint should be given the opportunity to respond to issues that are raised. Complaints are fully investigated before a response is given. At resolution of a complaint, all parties should be provided with clear reasons for the action taken (if any), and be given information about how and where the complaint can be reviewed.

The right to privacy and confidentiality is crucial to appropriate management of complaints. Audiology Australia ensures that all relevant state and territory legislative requirements such as the Information Privacy Principles detailed in the Privacy Act (1988) are met during complaint management. Details of complaints should only be known by those directly involved in the complaint.

If a complainant wishes to remain anonymous, it should be explained that it may be difficult to conduct a proper investigation of the complaint. The complainant should be asked how they would like their matter resolved and how they wish to be informed of the outcome.

Where a conflict of interest or potential conflict of interest is evident (e.g., a complainant makes allegations against an Audiology Australia staff member responsible for complaints handling, or a complaint is made about a member of the Ethics Committee or about the organization the Ethics Committee member works for), then these conflicts of interests are disclosed and appropriate action is taken to remove the conflict.

Particular care should be taken where handling complaints that involve allegations of ethical breaches. Such complaints are handled in confidence and with sensitivity, and are referred directly to the Ethics Committee for advice.

Accessibility

Clients and members have clear and easily accessible information about their right to complain, how, where and to whom a complaint is made, and how their complaint will be handled. Information for clients is provided on the public area of the Audiology Australia website, material is regularly provided in Audiology Now, and there are opportunities for complaints to be made by telephone, in writing, by email or by web form. Audiology Australia's Professional Practice Standards, Code of Ethics and Code of Conduct, which provide information about expected practice, clinical, professional and behavioural standards for members are also publically available on the website.

Members can access Audiology Australia's complaints procedures manual, Ethics Committee terms of reference and other material such as ethics scenarios in the members-only section of the website. Audiology Australia encourages members to discuss ethical matters with colleagues or to report potential ethical breaches to Audiology Australia if discussion with colleagues is not feasible.

Information about how to contact Audiology Australia is available in Audiology Now and on the website.

Responsiveness

Audiology Australia is committed to acknowledging all complaints in a timely way. Written complaints are acknowledged within 10 working days, and all complaints received by telephone, email or web form are acknowledged within 3 working days. When required, complaints are referred promptly. Timeframes are provided for responses to complaints, and vary according to the urgency and nature of the complaint. Complainants are told how long it will take to resolve their complaint when the complaint has been prioritised, and are kept informed of the progress of their complaint if required. Written responses to complaints are provided within the established timeframes.

Audiology Australia recognises that complainants may have particular circumstances that affect their capacity to access information or express and comprehend their complaint. In such circumstances, Audiology Australia may assist the complainant by: providing access to an interpreter service or information in another language; enable communication by TTY or in large print; or engaging the help of a complainant's family member, guardian or support person.

If a complainant is expressing unreasonable behaviour, the respondent is provided guidance, support and training as required for professional management of the complaint, and is aware of the option to refer the complaint if needed. Unreasonable behaviour may include rude, vexatious, aggressive or threatening conduct, dishonesty when explaining the complaint, unrealistic demands or unreasonable persistence with a complaint after its conclusion.

Efficiency

A complaint received by Audiology Australia should be handled efficiently. This means that complaints are:

- acknowledged and identified when they are received
- prioritised according to complexity and severity
- resolved on the spot if the matter is straightforward
- escalated or referred quickly if necessary
- handled in a way that is commensurate to the nature of the complaint.

Accountability

Audiology Australia's system for handling complaints should be open to scrutiny by members, clients and other reviewing bodies if required. Aside from making available the manual, the system should include mechanisms to generate information about complaint trends and to aggregate data about complaints, so information can be made publically available. There should also be regular reviews of the system to enable improvements to be made if necessary.

Personal attributes

Central to every complaint are the people involved. Complainants may experience a range of emotions and feelings when making their complaint, and staff that handle complaints may also experience personal reactions to the complaint. Handling complaints can sometimes be difficult or stressful. Understanding the complainant's emotional perspective can assist all parties when handling complaints. In addition, effective communication skills are crucial to successful complaints handling. Open communication with complainants can help resolve complaints effectively. Staff whose role encompasses complaints management should also be provided opportunities to debrief when necessary, to ensure an ongoing positive attitude towards complaints.

When complaints are received by telephone, the following personal attributes are important to effective complaints management:

Empathy

Communication should display warmth and an understanding of the emotions and experiences being raised by the complainant. Patience, respect and compassion are hallmark characteristics of empathetic communication, and these traits can help build rapport with the complainant while helping to resolve complaints effectively.

Listening

Sometimes, a complainant simply wants to know that their complaint has been listened to and taken seriously. A good way to do this is to allow the complainant to explain their concerns without interruption and to confirm what you have heard by reflecting the information back to the complainant in your own words ('Active Listening'). Active listening can help build trust and provide validation to the matters the complainant has raised.

Impartiality

People should always remain unbiased when handling complaints. Evidence should be viewed objectively, and all sides of the story need to be considered. Each complaint should be treated on its own merits to avoid incorrect assumptions being made and to remain fair to all parties.

Composure

Remaining calm under pressure is important, particularly when the complaint is sensitive or the complainant feels strongly about an issue. Communication that is firm, yet fair and polite can instill confidence that a positive outcome will be reached. However, uncertainty or defensiveness during communication can undermine confidence that a complaint is being handled effectively. It is also important to avoid taking criticism personally.

Decisiveness

An analytical approach to complaints handling can help reach effective resolution of a complaint. By reviewing the evidence and information available, the crux of a matter can be recognised quickly, meaning that logical decisions can be made.

Prudence

Complaints should be handled with sensitivity and care. It is important to maintain an emotional awareness of how people may react or behave under certain circumstances, and know when to escalate or refer a complaint. Being astute when handling complaints also helps determine complexity and severity of a complaint.

Ways of handling complaints

The following approaches to complaints handling can facilitate a positive outcome:

- Display a positive and professional attitude with complainants
- Remain well-mannered and accommodating; thank the complainant for raising the matter and welcome the information that is given
- Reassure confidentiality with the complainant, and confirm whether the complainant agrees to have matters raised with others if needed
- Advise the complainant that you will be writing down some notes during the conversation to ensure the complaint can be addressed accurately
- Ask the complainant what they would like to see done when resolving the complaint
- Where possible, offer information, advice and background to help the complainant better understand the situation
- Be honest: if applicable, offer an apology without accepting blame, and be prepared to admit shortcomings and/or say “I don’t know and will find out for you” if the complaint requires follow-up
- Work collaboratively with the complainant to reach a satisfactory conclusion to the complaint – search for common ground, such as ‘we both want to see this issue resolved quickly’
- When finishing a telephone discussion with a complainant, summarise to the complainant the issues that were raised, what issues will be followed up and when, and the timeframes involved
- Document a summary of the conversation and intended action

- Note when an action is required on a work schedule or planner, and follow up as appropriate
- Escalate or refer the complaint if needed, and debrief with others if necessary

The following approaches to complaints handling are not helpful and can make a complaint worse:

- Avoiding or ignoring complaints
- Being defensive, confrontational, retaliatory or accusatory with the complainant
- Blaming others or making excuses
- Making assumptions about a complainant or other parties affected by the complaint
- Not keeping complainant information confidential to those not involved in the complaint
- Making undeliverable promises to complainants and forgetting that not all complaints can be immediately or satisfactorily resolved
- Spending disproportionate time on minor complaints or irrelevant detail
- Providing standard responses or solutions without considering specific needs of the complainant
- Accepting harassment, threats or abuse from complainants: be fair yet firm with complainants so they clearly understand what is and isn't acceptable behaviour

Training

All Audiology Australia staff and those associated with management of complaints received by Audiology Australia receive complaints training that covers the following:

- Audiology Australia's policies and procedures regarding complaints handling
- Audiology Australia's Code of Ethics and Code of Conduct
- Legislative requirements and the procedures of other agencies that may impact upon complaints handling (e.g. whether these restrict what can be achieved in an outcome)
- General information about complaints
- Awareness and problem-solving skills
- Dealing with difficult complainants and dispute resolution models
- Managing stress
- Cultural issues and accessibility

New staff receive information on complaints handling as part of their induction process.

Section 2

Policies and procedures

Audiology Australia may receive a wide variety of complaints. The general public, members or other health practitioners may contact Audiology Australia with a complaint. The complainant might complain about any product, service or behaviour that was experienced during the course of audiological practice. Sometimes, the complainant may be contacting Audiology Australia on behalf of someone else. Complaints may be received by telephone, in writing, by email or web form.

Complaints to Audiology Australia may range in nature and severity, and be from a range of sources. Therefore, it is important to keep in mind the purpose and scope of Audiology Australia's complaints policy, and the capacity of Audiology Australia to handle certain complaints. For example, members or their employer should handle some complaints directly, whereas other agencies such as Fair Work Australia may be required for other complaints. Some complaints may relate to information or processes that could be resolved by directing a complainant to the source of that information. It is necessary to consider any statutory provisions and guidelines applicable to the jurisdiction in which the complaint investigation takes place. If a complaint involves allegations of criminal conduct (e.g., fraud or corruption) then the complaint shall be referred to the appropriate authority for investigation.

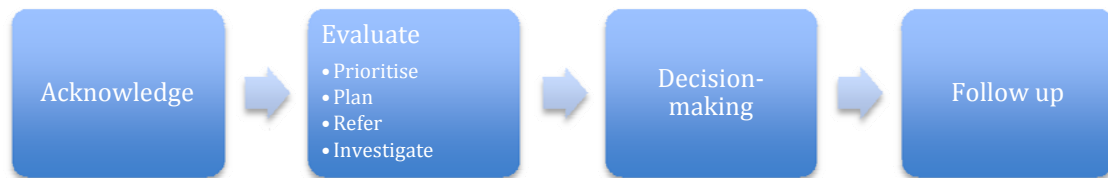
NOTE:

Audiology Australia handles complaints about Continuing Professional Development, Codes of Ethics and Conduct, and Professional Standards (Practice Operations and Clinical Standards). Other matters are referred as required.

*These procedures are an overview of how all complaints are usually handled. A subset of complaints received by Audiology Australia involves possible ethical or conduct breaches. **Any complaint about a member is immediately referred to the Ethics Committee to determine whether or not the matter constitutes a potential breach of the Code of Ethics and/or Code of Conduct.** Complaints about members that do not encompass ethical issues are referred to the CEO of Audiology Australia. **Complaints about members that encompass ethical issues remain with the Ethics Committee, and the procedures detailed in the Ethics Committee Terms of Reference and Operating Procedures are followed (see Appendix).***

How to Investigate a Complaint

There are four steps that are followed when investigating a complaint.



Step 1: Acknowledge the complaint

A complaint must be acknowledged quickly. This means that a response to the initial contact should be provided within one week of receipt of the complaint. Ideally, complaints made by telephone should be acknowledged immediately, even if the complaint itself is not resolved straight away. Complaints by email or web form could use an automated reply as an acknowledgement. Written complaints should be acknowledged in writing within 2 weeks. Acknowledging a complaint is an important stage of the complaints process as it demonstrates the complainant is respected, and help provides clarity to the expected timeframe, process and outcome. Where possible, an acknowledgement should use the same mode of contact as the initial complaint (i.e., an email acknowledgement to emailed complaints, written acknowledgement to written complaints), although there may be circumstances where acknowledgement by phone is more appropriate.

An example acknowledgement is provided in the 'Proformas' section of this manual.

Step 2: Evaluate the complaint

Evaluation of a complaint may involve a range of activities that depend on the nature of the complaint. Some complaints can be resolved quickly and require little or no follow up action, whereas other complaints are more complex, and require careful evaluation to ensure appropriate action is taken.

When evaluating a complaint:

1. Prioritise
2. Plan
3. Refer
4. Investigate

1. Prioritise

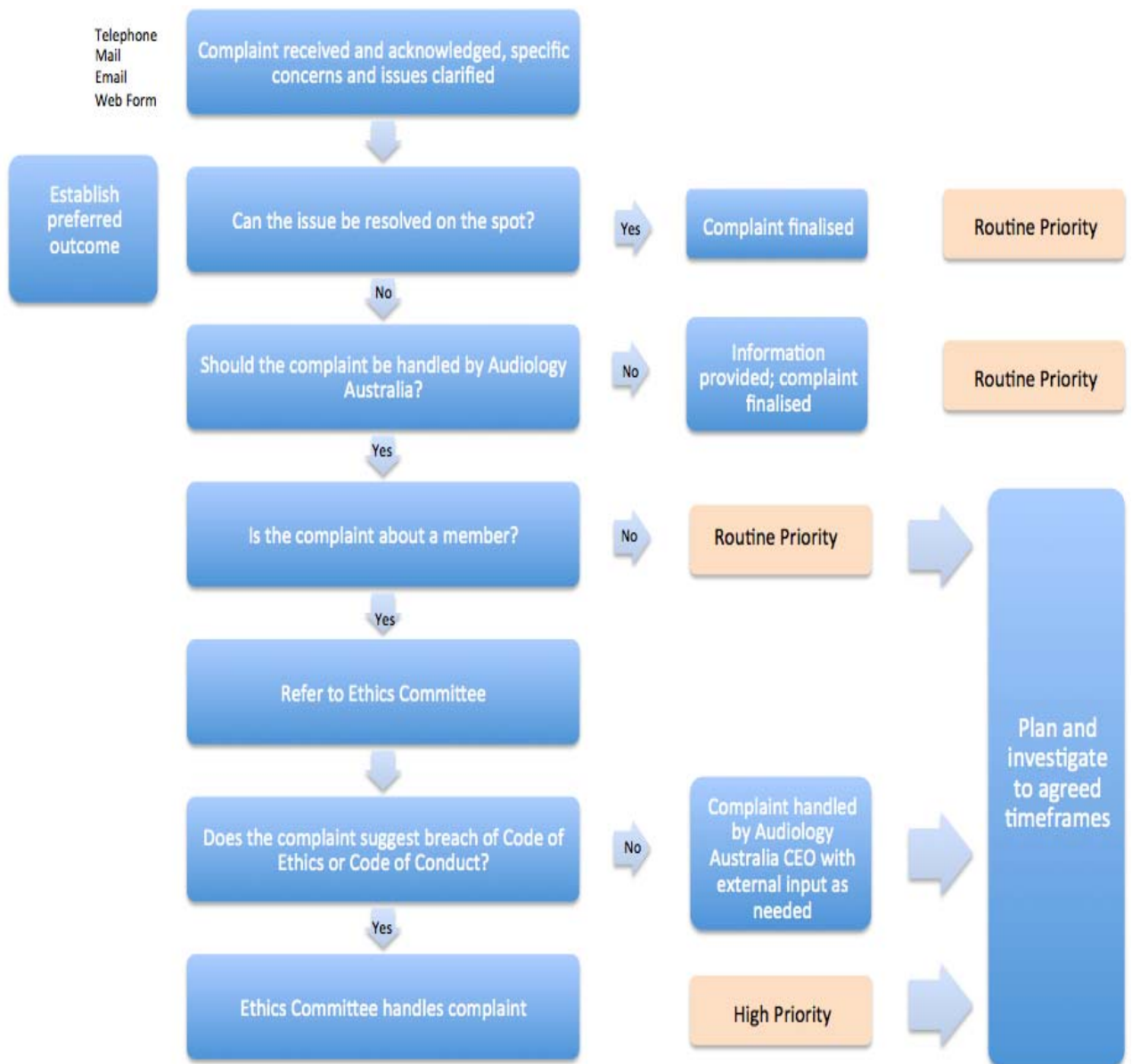
After acknowledging a complaint, each complaint should be assessed to determine its nature. Some complaints can be resolved straight away, for example if it relates to a simple misunderstanding that can be remedied by providing information on the spot. More complicated complaints require further investigation to reach a conclusion.

To help prioritise a complaint, ask yourself the following questions:

- Is the complaint about a specific member? ***If so, refer the complaint to the Ethics Committee.***
- What are the specific concerns and issues raised by the complainant?
- How serious or urgent is the complaint?
- Is it something Audiology Australia should handle? If not, refer the person to another agency.
- Does the complaint require immediate action? How much time has elapsed between the event being described and the complaint being made? Time delays may increase or decrease the urgency of a matter, or the capacity to take action, depending on the issue.
- What are the risks and possible consequences of not taking action? Is there a risk to the wellbeing or safety of clients; does the complaint allege a code of ethics or code of conduct breach; does the complaint highlight systemic flaws in the operations of Audiology Australia?
Priority is given to complaints of an ethical nature.

- What outcome does the complainant want? This information can help clarify the complexity of the issues raised and whether the complainant has realistic expectations for outcome.

Flowchart that shows how complaints are prioritised:



Example complaints with prioritisation

Priority	Case manager	Example	Possible action	Timeframe
Routine	Audiology Australia administration staff.	<p>Member phones up complaining about not receiving Audiology Now.</p> <p>Client complains about the quality of hearing aids from the hearing service provider and thinks Audiology Australia should have standards for hearing aids.</p>	<p>Confirmed member details (eg address), resent Audiology Now.</p> <p>Checked if client had spoken with their service provider and/or OHS (if OHS client), gave information about agency who sets standards for hearing aids.</p>	<p>On the spot</p> <p>On the spot, or follow up within 7 days after confirming correct information.</p>
Routine/ High	CEO or other person nominated by CEO.	<p>GP writes a complaint about promotional practices of a member in the local area: the GP's patients are requesting to have hearing tests even though the patient has no difficulties. The member did a talk at the local bowls club and said <i>'anyone over 65 needs to have a hearing test and I can do them for free, just go to your GP and get them to sign an application.'</i></p>	<p>Written acknowledgment to GP. Ethics Committee reviews whether or not the matter breaches the codes or poses risk to clients. Contact with member to discuss or clarify the promotional activity ONLY if concerns are apparent. Inclusion of advice or information from other agencies if required (e.g. employer, OHS). Consideration given to escalation depending on investigative findings.</p>	<p>Acknowledgment within 7 days. Written response to GP based on findings (28 days).</p>
High	Ethics Committee. Audiology Australia CEO.	<p>Intern member complains confidentially about supervisor member falsifying supervision documentation to hasten independence rating of intern, and is not comfortable to discuss the matter directly with the member.</p> <p>Employee member complains about sexual harassment by employer member.</p> <p>GP complains about member not referring client for medical treatment, instead deciding to sell the client hearing aids.</p> <p>Client family member complains about member being rude and aggressive to</p>	<p>Each example requires consideration of potential risk, breach and/or systemic problem. Also to be considered is whether involvement of external agencies is required.</p> <p>For each complaint, ask the following sorts of questions:</p> <p>What is the specific ethical breach, or specific item in the code of conduct has been breached?</p> <p>What other agencies should be involved or avenues pursued (eg health services commissioner, fair work</p>	<p>Acknowledgment within 7 days depending on the mode of contact. Referral to Ethics Committee within 24 hours of complaint being received, once the complaint has been determined to be high priority.</p>

		<p>client in from of a full waiting room. Client felt intimidated, upset and threatened. They were then sent claim information to sign.</p> <p>s Audiology Australia about their being systematic roting of OHS, overcharging, double-billing services not performed. Claims of evidence and a database of USB stick.</p>	<p>Australia)?</p> <p>Who should provide further advice or input (eg legal, Workcover authority)?</p> <p>What legislation might be applicable (eg Fair Work Act, Privacy Act)?</p>	
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2. Plan

Complaints that are resolved on the spot may not require further action. For those that do, developing a plan of action can be of benefit. A written plan can clarify the issues of importance that need to be resolved and help identify further detail that might be needed to assist the investigation. Planning also helps determine to whom a complaint should be escalated or referred (if required), and provides useful background to assist with the complaint handover. A plan should have the following information:

- Complainant details
- A summary of what the complaint is about
- Dates of events (if possible)
- Brief explanation of the matters to be investigated (including person(s) or organisation(s) if applicable)
- List of possible sources of information
- Timeframes for resolution of the complaint
- The complainant's requested outcome and whether that is achievable
- Details about sensitivity and confidentiality
- Person(s) responsible for handling the complaint

Example complaint planning:

A client family member complains about the member being rude and aggressive to the client in front of a full waiting room of other people. Client felt intimidated, upset and threatened. They were then sent OHS claim information to sign.

Complainant name	Joe and Mary Bloggs
Summary of complaint	Joe Bloggs has complained about his mother Mary's treatment in the waiting room at the hearing provider. He was with her mother at the time. He and Mary complain that when they arrived 5 minutes late the member said to them loudly 'I can't see you now because you're late. I've already got someone else waiting.' Then when they disputed this and said 'we also need to get the hearing aid checked' the member allegedly threw the hearing aid back at them and said 'get out of here, I'm not seeing you.' Two weeks later, Mary received a claim form to sign, which was for a full hearing assessment and hearing aid adjustment service, that Joe and Mary allege was not performed.
Date of events	The incident was reported to have taken place on 2 December 2013.
Matters to be investigated	Alleged breach of Code of Ethics (not respecting rights, needs, well-being and autonomy; not acting with integrity). Alleged breach of Code of Conduct (not respecting rights; not prioritising client welfare; not acting with fairness, honesty and integrity; not complying with code of ethics).
Possible information sources	Joe and Mary Bloggs. The member in question. The member's employer and/or staff.
Timeframe for resolution	Acknowledgment within 7 days; referral to Ethics Committee within 24 hours; response sought from member (28 days); recommendation made by Ethics Committee to the Board within 28 days
Requested outcome	Joe and Mary Bloggs want the member to be called to account for the behaviour, they want to change to a different practice.
Sensitivity and confidentiality	Joe and Mary are willing for Audiology Australia to approach the member with the complaint and to take action, but are not willing to be identified to the member by name.
Person(s) responsible for handling the complaint	Audiology Australia staff initially took the complaint and escalated to CEO. CEO referred to Ethics Committee. Ethics Committee Other agency(ies) as discussed among Ethics Committee/CEO

3. Refer

When a complaint requires immediate action and/or detailed investigation, it should be escalated to the CEO of Audiology Australia. The CEO will then liaise with the Ethics Committee for investigation.

Complaints handled by Audiology Australia **administration staff** are:

- Issues that can be resolved on the spot, or by provision of information

(routine priority)

Complaints escalated to the **CEO** of Audiology Australia are those that:

- Require immediate action or detailed investigation

(routine and high priority)

Complaints handled by the **CEO** with input from/collaboration with specific members and/or **Board members** are those that:

- Do not appear to breach the code of ethics or code of conduct, but identify flaws in Audiology Australia processes that need action
- Suggest a risk to the wellbeing and safety of clients
- Require external input (e.g. legal)

(high priority)

Complaints that are referred to the **Ethics Committee**, by and with input from CEO, are those that:

- Allege a breach of the code of ethics or code of conduct
- May also suggest a risk to the wellbeing and safety of clients, and/or require external input (e.g. legal)

(high priority)

NOTE

A complaint may begin as a routine priority matter but become higher priority at a later time. These categories are a guide to help determine when a complaint should or should not be referred. A written plan and record of the complaint is also important to ensure accountability of the system, assist staff and to aid training and development of staff in the area of complaints handling.

4. Investigate

Investigation of a complaint involves gathering information for the purpose of reaching a satisfactory resolution to the matters raised. There may be circumstances where one or more parties may not find the outcome of a complaint satisfactory. Therefore, all investigations should be:

- **Impartial** – each complaint should be approached objectively, and findings are based on the weight of evidence from all parties, not on assumptions or conjecture.
- **Confidential** – Privacy is paramount when investigating complaints. Investigators must be mindful of applicable legislation when investigating complaints, and all parties to a complaint shall have their confidentiality respected at all times. In situations where disclosure of information may be required (for example, if a complaint is escalated or referred), the information is only provided to those who need to know.
- **Transparent** – All parties to a complaint should be provided information about the complaint process. Timeframes associated with the investigation should be provided and parties should be aware of the steps involved in handling the complaint. Before a complaint is finalised, all parties should be given the opportunity to present information that may be of use in the investigation, and to respond to allegations made against them.

In addition, complaints investigation should involve:

- Written records of any discussion that took place with parties to a complaint.
- Gathering of evidence to substantiate claims and to justify findings.
- Secure retention and storage of all written records and evidence.
- Consideration being given to alternative ways of resolving a complaint, if there is a 'neater' solution.

Sometimes, a complaint may be raised against a member who has been complained about before. It is important to maintain impartiality in such circumstances. Nevertheless, consideration should be given to previous action that had been taken against the member as a consequence of the earlier matter(s).

In the example given above, several allegations have been made that would require investigation. Breaches of the Code of Conduct and Code of Ethics appear to have occurred, and may also indicate the need for other agencies to be informed (e.g. health services commissioner, police). Below is how this complaint might be investigated.

Complainant name	Joe and Mary Bloggs	
Summary of complaint	Joe Bloggs has complained about his mother Mary's treatment in the waiting room at the hearing provider. He was with her mother at the time. He and Mary complain that when they arrived 5 minutes late the member said to them loudly 'I can't see you now because you're late. I've already got someone else waiting.' Then when they disputed this and said 'we also need to get the hearing aid checked' the member allegedly threw the hearing aid back at them and said 'get out of here, I'm not seeing you.' Two weeks later, Mary received a claim form to sign, which was for a full hearing assessment and hearing aid adjustment service, that Joe and Mary allege was not performed.	
Step 1:	Telephone discussion with Joe and Mary Bloggs. Summary of telephone call to be documented. Encourage Joe and Mary to provide written evidence. For example, they may write a statement confirming the allegations made by phone; they may provide a copy of the claim form.	
Step 2:	Develop plan, timeframe, inform complainants of relevant information, note confidentiality requirements, escalate and refer. Track response and follow up as required.	
Step 3:	A complaint of this nature involves the Ethics Committee. Refer to Ethics Committee to determine specific breaches against allegations.	
Step 4:	When evidence received, write to the member in question to seek a response within timeframe. NB: Joe and Mary Bloggs are willing for Audiology Australia to contact the member, but do not want their name used. Therefore, correspondence to the member must be deidentified, but also include details of specific allegations. In addition, evidence of fraud such as the claim form cannot be investigated because this would identify the client, therefore this cannot form part of the letter to the member. Joe and Mary would need to understand this.	
Step 5:	When or if a reply from the member is received, this evidence is weighed up against allegations made, and a decision is made about whether the complaint can be substantiated. Further clarification may be required from both the complainant and the	

	member. Information from external sources (e.g. legal advice) should be sought. Substantiation will depend on the evidence provided and whether it is sufficient to determine an outcome (e.g. that a breach has taken place).
Step 6:	Recommendations made by the Ethics Committee that substantiates a code breach may affect the member's membership status in some way (for example, compulsory CPD in a specific area).
Step 7:	To accord natural justice, the member should be given the opportunity to respond to allegations.
Step 8:	A decision that affects a member's membership of Audiology Australia must follow protocols established in the Ethics Committee Terms of Reference and the Audiology Australia constitution. The member should also be given the right to appeal.
Step 9:	Joe and Mary Bloggs want (i) the member to be called to account for the behaviour, and (ii) to change to a different practice. The latter may require the client to contact the member's practice, or another agency such as the Office of Hearing Services, if a formal relocation to another practice is required. The client should instigate this process. Regarding 'calling the member to account', fair treatment of the member would require the complaints manager to provide information about member accountability in general terms only. Advice such as 'we are following up the matter with the member' is sufficient information.
Step 10:	Allegations and evidence of fraud may be difficult for Audiology Australia to follow up directly, as the client did not give permission for names to be revealed. However, the client should be provided further information about how to take their complaint further, such as the Health Services Commissioner or Workcover.

Step 3: Make a decision on the complaint (if appropriate)

On completion of the investigation, a decision is reached. Decisions should be accountable and as fair as possible on all parties, giving consideration to the possibility that one or more parties might be adversely affected by a decision. When a decision is made, information should be communicated clearly to all parties. Complainants have a legitimate interest to know their complaint has been addressed, to show that the complaint has been taken seriously and that steps have been taken to prevent similar occurrences in future. ***The Audiology Australia Board approves decisions about ethical complaints, based on recommendations provided by the Ethics Committee.***

Information relayed to the complainant should respect other parties' right to privacy and should protect their personal information. This may sometimes mean that specific information relating to aspects of an outcome is not provided to a complainant, but instead presented in more general terms.

Information that is communicated should be presented in a way that is easy to understand, is relevant, and refers only to the matters raised in the complaint.

Most decisions can be conveyed to the complainant by telephone, but for more complicated or serious matters, a written response is preferred, especially if the initial complaint was made in writing. Individual circumstances of the complaint must be taken into account when deciding the extent of information released to a complainant, and how best to provide that information. An example written response is provided in the Proformas section.

For the majority of complaints, a decision should be made and the complaint finalised within 28 days. A complaint is finalised if:

- The complaint is resolved
- Agreement has been reached, with an outcome that is acceptable to all parties
- A decision has been made and all parties have been notified of the decision
- The complaint has been referred to an external agency

If a complaint is reconsidered or an appeal is made in response to a decision, the complaint is reopened. This may happen if one or more parties are not satisfied with the decision, if circumstances change following the decision, or if further evidence that may affect the decision is submitted. Reconsideration of a decision shall be made in writing and is addressed to:

The CEO, Audiology Australia, PO BOX 504, Brentford Square, Vic, 3131.

If a complainant is not satisfied with the outcome of a review, he/she may be able to appeal the decision through the Administrative Appeals Tribunal / Health Ombudsman in the jurisdiction.

The process for reconsideration and appeal of decisions made on ethical complaints are described in the Ethics Committee Terms of Reference (see Appendix).

Step 4: Follow up the complaint

Some routine and high priority complaints may require follow up after finalisation. For example, follow up may be appropriate when a complainant was advised to seek assistance from another agency to resolve the complaint, or where the complainant's circumstances remained problematic following finalisation. Complainants should be encouraged to contact Audiology Australia at a later date if they were not satisfied with the outcome.

When following up complainants, it is good practice to ask complainants about how their complaint was handled and whether they felt the outcome was satisfactory. If the complainant was not happy with the outcome, the complaint should be escalated to the CEO and/or discussed with the Ethics Committee to determine the course of action to take.

Systemic issues may become apparent when following up complaints. For example, complainants may be dissatisfied with an outcome if their complaint was not properly investigated, if the outcome was not resolved in a timely way, or if advice provided was not accurate. Actions such as staff training or a review of procedures may therefore be of benefit under these circumstances.

Analysis and review of complaints

Complaints are beneficial because they may highlight aspects of a program, service or procedure that need improvement. This is the case for audiological practice of members as well as Audiology Australia’s own internal processes. To promote quality practice, Audiology Australia is mindful of the need to recognise gaps in specific areas of practice so that standards are upheld and corrective action (if appropriate) can be considered.

Analysis of complaints information can identify trends and point to recurrent or systemic problems that can be more effectively addressed if they are identified early. Therefore, the CEO of Audiology Australia should analyse complaints bimonthly and report general information at the bimonthly Board meeting, such as numbers of complaints received, whether the complaint was routine or high priority, how they were resolved and apparent trends or patterns in the analysis. The Chair of the Ethics Committee must raise any matters that require discussion at the Board meeting with due consideration given to Privacy Principles, confidentiality requirements and possible conflicts of interest.

This table helps clarify the analysis of complaints information:

Item	How obtained	How reported
Number of routine and high priority complaints	Manual count Electronic system reporting	At bimonthly BOARD meeting
Number of completed complaints	As above	As above
Number of open complaints	As above	As above
Complaint trends	Review of type/topic of complaint (i.e. is there a trend for complaints about (i) an individual member or organisation, (ii) a specific aspect of service (e.g. internship supervision), or (iii) a type of complaint (e.g. self-interest above client welfare)	
Issues associated with complaints management	Are there any identified training needs, documentation requirements or other needs that have arisen from complaints management	

A useful way of identifying whether complaints have been handled adequately is by periodic review of the complaints system itself. The table below identifies the key features of the complaints system that should be reviewed:

Feature	Description	Evaluation	Recommendation
Accessibility	Do members, other health practitioners and the general public have sufficient information about how to make a complaint?		
Identification	Do Audiology Australia staff, CEO and Ethics Committee know how to identify a complaint?		
Procedures	Are staff aware of the complaints manual and the steps required to handle a complaint?		
Privacy and Confidentiality	Are staff familiar applicable privacy legislation and ensure individual complaints are handled according to privacy requirements?		
Timeliness	Are timeframes met for each step of the complaints process?		
Prioritisation	Are complaints prioritised accurately? (low, routine, high)		
Record keeping	Are complaints recorded accurately and with sufficient information?		

A record of each complaint received by Audiology Australia is kept on an electronic database. This database is used for storage of all complaints (routine and high priority) and enables data to be extracted for the analysis. Information pertaining to specific members can be cross-linked from this database to the database that holds member information. The information on this database is securely stored, kept confidential and is backed up daily. Complaints of high priority that relate to ethical breaches and are referred to the Ethics Committee are briefly noted on the database, but specific records for these complaints are kept confidentially and held by the CEO.

An example spreadsheet is below:

COMPLAINTS REGISTER												
Complaint Reference #	Date Received	Received From	Format (person/ phone/ mail/ email)	Type of complaint	Priority of complaint (low / routine / high)	Staff member managing complaint	Brief summary of complaint	Action taken (eg referred to ethics committee)	Other agency(ies) involved	Resolution Required by (date)	Actual resolution date	Comments

Record-keeping

Keeping a written record of each complaint is essential to effective complaints management. Routine priority queries and complaints that are resolved on the spot may not require extensive documentation. Routine and high priority complaints that require further action and/or investigation should have the following information recorded:

- Complainant name and contact details
- Who or what the complaint is about (e.g. product, member, organisation)
- Confidentiality information
- Description/summary of initial complaint
- Evidence that is provided and any more that is required
- The specific matter(s) to be investigated
- Case manager / to whom the complaint was referred
- Priority (routine, high) and Timeframe
- Complaint status (open, closed)
- Proposed action
- Action taken
- Outcome / resolution

NOTE

Records of complaints are stored for a period of 7 years.

Confidentiality

Privacy and confidentiality is paramount when handling complaints. Complainants have the right to expect their privacy will be respected when their complaint is investigated. The Audiology Australia Professional Practice Standards (Part A – Practice Standards) provides information about privacy and confidentiality in health care settings and links to applicable legislation. These requirements are applicable to all complaints handled by Audiology Australia.

Information offered to Audiology Australia by a whistleblower (a person who exposes misconduct in an organisation) should be handled sensitively and in confidence. Whistleblowers may be protected by the Public Interest Disclosure Bill (2013) if they are a government employee. The Australian Standard AS 8004 'Whistleblower Protection Programs for Entities' may protect other individuals against reprisals for disclosure of information. It is important, however, for whistleblowers or potential whistleblowers to be mindful that disclosure of information to Audiology Australia may not protect the complainant against reprisal, and there may be restrictions on the extent to which supplied information can be used when handling a complaint.

Office of Hearing Services

Audiology Australia has a Memorandum of Understanding with the Office of Hearing Services that enables an exchange of information about the membership status of members. Sometimes, complaints about members may relate to services that were performed under the Office of Hearing Services Program. This information should be established as part of the preliminary evaluation of the complaint. The Office of Hearing Services requires its contracted hearing service providers to have an internal procedure for managing complaints, and also has its own process for managing complaints about its qualified practitioners and service providers. Therefore, the hearing service provider or the Office of Hearing Services may be in a better position to handle such complaints.

The complainant could be asked the following questions:

- Are you an Office of Hearing Services client? / Did you receive these services as an Office of Hearing Services client?
- Have you raised these concerns with your service provider / audiologist / Office of Hearing Services?
- (If no) It may be better for you to discuss your concerns with them first, because they would be better able to understand how to resolve the (difficulties you are describing). Please contact us again though if you are not happy with their advice.
- (If yes, and complaint remains unresolved) Ok, let's see how we can help.

It is important to refer complainants to their practitioner, service provider or the Office of Hearing Services if the complaint is best handled by them. Such complaints may relate to problems with their hearing aids, difficulties accessing appointments or wanting to change from one provider to another for one reason or other. However, complaints that relate to the ethical behaviour or conduct of a member who performed services on behalf of the Office of Hearing Services should be investigated.

References

Commonwealth Ombudsman Better Practice Guide to Complaint Handling
<http://www.ombudsman.gov.au/docs/better-practice-guides/onlineBetterPracticeGuide.pdf>

Procedures for the management of complaints: re members. Templates, tools and checklists. Enterprise Care.

<http://www.enterprise care.com.au/publications>

Audiology Australia Professional Practice Standards (Part A: Practice Operations)

Appendix

The ETHICS COMMITTEE TERMS OF REFERENCE is a commercial in confidence document.

Operating Procedures for referral to the Ethics Committee

These operating procedures are to be used as a guide for members who seek to raise a complaint against another member about ethical matters or professional conduct. Non-members (i.e., members of the public, other health professionals) who wish to make an ethical complaint should follow the procedure described on the Audiology Australia website. Complaints that allege a breach of the Code of Ethics or Code of Conduct are treated seriously, as they may expose a risk to the safety and wellbeing of clients, and/or have an adverse impact on the reputation of Audiology Australia members in the broader community.

Before reporting ethical or conduct issues to Audiology Australia, a complainant should first consider whether he/she is able to approach the colleague to discuss the matter in a helpful way. This may not be an easy thing to do for members who work closely with one another or who have an employee-employer relationship. If a member is not able to approach the colleague, or if the matter is not resolved by discussion between members, then the member should notify the Ethics Committee via Audiology Australia. Disputes between members may or may not be a breach of the Code of Ethics or Code of Conduct, and if the member is uncertain then the matter should be referred directly to the Ethics Committee in the first instance. The Ethics Committee uses the following procedure for handling ethical complaints by members and non-members:



1. Initiation of complaints

The complainant should telephone, email or write their concerns to the Audiology Australia Ethics Committee (contact details below). The details of the complaint should include the specific statements or principles of the Code of Ethics or Code of Conduct that is alleged to have been breached. Initial telephone contact with Audiology Australia should be followed up with written correspondence. The complainant must identify themselves to the Ethics Committee and correspondence must be factual, signed and dated.

2. Preliminary examination of complaints

The Ethics Committee does not investigate matters that do not relate to ethical breaches. However, a preliminary examination of the complaint is necessary, to ascertain whether the Ethics Committee should investigate the complaint or whether the CEO handles it with the involvement of specific members and/or Board members. The Ethics Committee completes this examination within one week of receipt of the complaint.

Complaints that do not appear to breach the code are not referred to the Ethics Committee and are handled by the CEO and/or Audiology Australia staff as per the procedures described in this manual.

3. Referral of complaints to Ethics Committee

If the matter appears to be an ethical breach, the Ethics Committee will investigate the complaint. The complaint must be circulated to the Ethics Committee in confidence within 24 hours of the decision to investigate. This is usually done by email. A quorum (2/3rds majority) of the Ethics Committee must be available to investigate the complaint. If this is not possible, nominated members of the FEC are to act on behalf of the unavailable Ethics Committee member.

4. Written evidence

Where possible, complainants should state their concerns in writing. The Notice of Complaint (see Proformas) should be used for this purpose. Statements should include information that relates to specific statements or principles of the Code of Ethics or Code of Conduct. In the event of genuine capacity barriers (e.g. language or literacy) that prevent the use of the Notice of Complaint, the Ethics Committee will accept correspondence in other forms.

5. Investigation

To investigate the complaint, the Chair of the Ethics Committee should convene a meeting (usually teleconference) to discuss the nature of the complaint, specific breaches, and the proposed action. Ethics Committee members should prepare for this meeting by reviewing the allegations that were made against the Codes of Ethics and Conduct. Consideration should also be given to what additional information or evidence may be required from the complainant, and whether additional advice or information should be sought from external agencies (eg legal advice). Evidence must be obtained legally. The BOARD should be consulted for interdisciplinary complaints.

Should the committee be satisfied that a possible breach has arisen, the member who is the subject of the complaint shall be provided a written summary of the complaint and details of the specific allegations in a letter. This letter should be prepared within 28 days following the meeting.

The member will be given the opportunity to provide a written response to the allegations within 28 days, and should also be given contact information of the Audiology Australia CEO if they wish to discuss the matter before providing a written response.

6. Management of requests for anonymity

While anonymous complaints are accepted by Audiology Australia, anonymous complaints by a member about another member are discouraged. The Ethics Committee cannot properly investigate anonymous complaints without knowing the identity of the complainant. For circumstances where identity protection is sought by the complainant, the Ethics Committee will determine if the matter can be adequately investigated with such a constraint. Complainants are offered protection from disclosure as all ethical complaints are treated confidentially and adhere to legislative requirements relating to privacy.

7. Review of evidence

The Ethics Committee will review evidence from all parties following receipt of the member's response (if this is provided), including any additional information that had been sought and received in relation to the complaint.

8. Decision and response

A decision will then be made based on the evidence. When a decision is made, the member will be advised of the decision in writing, including any proposed penalties or conditions that are placed on the member's membership.

9. Appeal of decisions

The member has a right to appeal the decision of the Ethics Committee. The member will also be advised of their rights to appeal the decision within 28 days of the preliminary determination notification. The Ethics Committee shall follow the review process detailed in the Ethics Committee Terms of Reference, Clause 2.4. Penalties will not apply until after the review period has lapsed or until the review has concluded. Reviews may only be heard once. If a penalty proposes termination of membership, the process described in Clause 23 of the Audiology Australia Constitution will be followed.

10. Dismissal of complaints

Should a complaint be dismissed, the parties will be advised accordingly and the matter is closed.

11. Administrative powers of the Ethics Committee

The Ethics Committee will convene either in whole or in part dependent upon the decision of individual members to stand aside based on conflicts of interest. In the event that a quorum cannot be gathered from sitting committee members, the Ethics Committee may choose to enlist temporary committee members from the Board or State Branch Committees. Should specialist knowledge be required, the Ethics Committee may also choose to enlist temporary members to the Ethics Committee from within the general membership, or from a specialist in the area who is not a member, if required.

12. Penalties available for upheld complaints

The penalties available to the committee may include one or more of the following:

- Private admonishment and counseling
- Public admonishment via publication of its determination in an official Audiology Australia publication
- Orders to cease and desist
- Admonish the member to full or partial redress to the complainant
- Apology to the complainant
- Direction to undertake specific training
- Requirement to meet a set of recommendations
- Suspension of membership for a defined period, including publication of the penalty in an official publication of the society
- Suspension of membership for a defined period, including publication of the penalty in an official publication of the society, and in one or more mainstream journals
- Termination of membership, including publication of the penalty in an official publication of the society and in one or more mainstream journals

CONFIDENTIAL

The Ethics Committee

Telephone: 03 9877 2727

Email: ethics@audiology.asn.au

Mail: Audiology Australia, PO BOX 504, BRENTFORD SQUARE, VIC, 3131