

AOAC ACCREDITATION SERVICES COMPLAINT HANDLING GUIDELINES

August 2018

Accreditation Services Complaint Handling Guidelines

Name of Policy	Accreditation Services Complaint Handling Guidelines- for complaints against Education Provider or Program of Study	
Description of Policy	These guidelines describe the principles and processes surrounding the handling of complaints related to accredited osteopathy programs and education providers in accordance with the <i>Health</i> <i>Practitioners Regulation National Law Act</i> 2009	
Category	Accreditation Services	
Audience	These guidelines apply to Accreditation Services for the handling of complaints related to accreditation function under the <i>National Law</i> ; monitoring processes under <i>Section 50</i> of the <i>National Law</i> ; or compliance with the <i>Quality Framework</i> .	
Status	🛛 New policy	□ Revision of existing policy
Last Revised		·
Next Review	August 2021	

Cleared by	Accreditation Committee	Date:
Responsible Officer	Executive Officer	
Author		
Approved by	Board	Date:
Signed		

Related Documents	 National Accreditation Guidelines Health Practitioners Regulation National Law Act 2009 (the National Law)
	 Quality Framework for the Accreditation Function Health Professions Accreditation Councils' Forum - Management of complaints relating to accreditation functions under the National Law – a guidance document Privacy At 1988 (Cth)

1. Purpose

- 1.1 The purpose of these guidelines is to ensure AOAC handles complaints related to accredited osteopathy programs and education providers in a transparent and equitable way that is consistent with requirements of *the Health Practitioners Regulation National Law Act 2009* (National Law).
- 2. Scope
- 2.1 These guidelines apply to Accreditation Services for handling systemic complaints regarding accredited osteopathic education programs and/or the education provider.

3. Complaints Management Process

3.1 AOAC will acknowledge all complaints quickly

Before acknowledging the complaint AOAC will identify if the complaint is within AOAC's scope.

Within scope

AOAC will acknowledge receipt of the complaint within five business days. The complainant will be provided with information regarding complaint management policy and guidelines as well as the name and contact details of the Executive Officer.

AOAC observes the privacy principles set out in privacy legislation (*Privacy Act 1988* (Cth)) when collecting, storing, using and disclosing personal information obtained in complaint handling. The Executive Officer will create a record of the complaint adhering to the Privacy Act and observing the importance of maintaining confidentiality and security.

Outside scope

AOAC will acknowledge receipt of the complaint within five business days. The complainant will be notified that the complaint is not within AOAC's scope. Where possible the complainant will be directed to the appropriate agency to handle their complaint.

3.2 AOAC will assess the complaint and prioritise

The complaint is referred to the Executive Officer for assessment to determine the urgency and if required, allocate an investigator to manage the complaint investigation. If the issues identified in the complaint are potentially generating a high or extreme risk to the safety of the public, AOAC will provide early notice of the issue to the Osteopathy Board of Australia (OsteoBA).

3.3 AOAC will plan the investigation

AOAC will plan the investigation according to the complexity of the complaint:

- define what is being investigated and map against the accreditation standards
- determine the steps involved in investigating the complaint and seek further information from the complainant if required
- note any special considerations that apply to the complaint for example if the complainant has asked for their identity to be withheld or if there is sensitive or confidential information that needs to be safeguarded
- advise Chair of the Accreditation Committee of complaint under investigation

3.4 AOAC will investigate the complaint

The investigation aims to resolve factual issues and consider options for complaint resolution. This will be carried out following the three principles of fair investigation¹:

- 1. impartiality each complaint should be approached objectively
- 2. confidentiality a complaint should be investigated in private, and care taken when disclosing any identifying details
- 3. transparency a complainant should be told about steps in the complaint process

AOAC will write to the education provider to notify them a complaint has been received. The details of the complaint are mapped against the relevant accreditation standards and provided to the education provider.

AOAC requests a reply in relation to the complaint from the education provider, this allows for right of reply. The reply from the education provider is assessed by the investigating employee. If the reply is deemed to be satisfactory or the complaint unsubstantiated AOAC will write to the education provider and the complainant to advise the outcome of the investigation.

Some complaints may require further investigation and depending on the complexity of the complaint and information provided to date, an assessment team may be assembled to continue the investigation. Further evidence from the education provider will be requested and may include:

- documents
- site visit
- meetings/interviews with individuals or groups including representative from the education provider
- other reporting requirements.

The evidence collected is assessed by the investigating employee/team. If the evidence collected indicates that the program continues to meet the accreditation standards, AOAC will close the investigation and write to the education provider and the complainant to advise the outcome.

If the complaint is found to be substantiated, the investigating team will prepare Outcome of Complaint Report for the Accreditation Committee to review and provide recommendations to the AOAC Board regarding reporting requirements, conditions or other outcomes for the education provider/program.

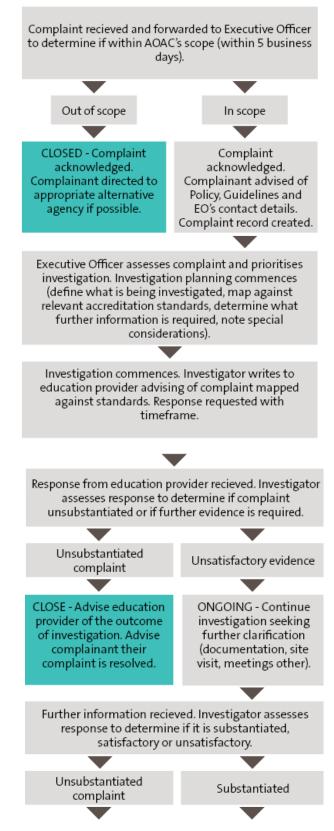
If the recommendation of the Accreditation Committee is for conditions or revoking of accreditation, the Executive Officer will brief the Board before further action is taken.

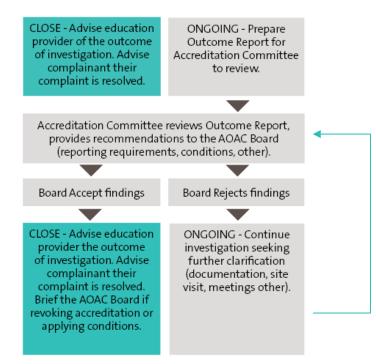
When the matter has been resolved AOAC will write to the education provider and complainant to notify them of the outcome of the investigation.

¹ Better practice Guide to Complaint Handling, Commonwealth Ombudsman, 2009.

3.5 AOAC will consider if the investigation identified any internal systemic issues

AOAC will consider any internal administrative issues identified in the investigation of the complaint to determine if any remedy or action is indicated. This may occur during the management of the complaint.





4. Dispute process

If the education provider disputes the findings from the investigation, an independent complaints review team may be appointed to review the evidence and findings.

If appointed, the independent review team will review the complaint and all documentation relating to the complaint. The team may request further evidence and/or conduct a further site visit.

Upon conclusion of the review, the investigating team will prepare a report for the relevant Accreditation Committee with recommendations regarding reporting requirements, conditions or other outcomes.

The Accreditation Committee considers the report and makes recommendations to the AOAC Board.

When the matter has been resolved AOAC will write to the education provider and complainant to notify them of the outcome of the investigation.

5. Key Definitions

5.1 National Law – refers to the Health Practitioner Regulation National Law Act 2009

Personal Complaint - in which the complainant seeks to have a matter investigated and addressed so as to bring about a change to their personal situation. This would include, for example, matters such as selection, recognition of prior learning/experience, training post allocation, assessment outcomes, or dismissal from training.

Systemic Complaint - which may evidence some systemic matter which could signify a failure of a program or provider to meet accreditation standards.

Quality Framework - Quality Framework for the Accreditation Function (Quality Framework). Accreditation authorities, National Boards and AHPRA have agreed to the Quality Framework as the principal reference document to assess the work of accreditation authorities.

Abbreviations

5.2 AOAC – Australasian Osteopathic Accreditation Council

OSTEOBA – Osteopathy Board of Australia

6. Roles and Responsibilities

6.1 The Executive Officer is responsible for implementing and ensuring compliance with this policy through creation and maintenance of effective procedures.