

Complaints and feedback

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Introduction

Stakeholders, such as employees, employee representatives or employers, may provide positive or negative feedback about different aspects of claims. For example, they may provide feedback about an outcome or something that Comcare or a service provider did. They may also provide feedback about our timeliness or responsiveness in managing their claim, or they may provide feedback about something else.

Feedback is a valuable learning opportunity that helps us continuously improve as we strive to have a positive impact and achieve excellent service delivery.

Comcare values feedback and recognises that effective complaint handling reassures our stakeholders that we are committed to resolving issues, acting with integrity and respect, improving our service delivery, and being accountable and transparent in our decision making.

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What is a complaint?

The Comcare [Complaints Handling Framework](#) defines the following types of feedback:

- Negative feedback - detailing dissatisfaction about some aspect of the service, functions or conduct of Comcare, or its representatives, that can be managed routinely by the team involved and does not require a formal written response.
- Operational issue - some aspect of Comcare's service delivery or functions that requires action, but the communication about the issue is not expressed as negative feedback or as a complaint and can be managed routinely by the team

involved.

- Complaint - an expression of dissatisfaction about some aspect of the services, functions or conduct of Comcare, or its representatives, where a formal written response or resolution is explicitly or implicitly expected or legally required and cannot be managed routinely.

You can talk to your Assistant Director or contact the [Claims Complaints and Feedback team](#) if you need help differentiating between or resolving negative feedback, operational issues or complaints.

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Roles and responsibilities

Complaints and Feedback team

Claims feedback and complaints in Comcare are handled by the **Claims Complaints and Feedback** team, a team within the Claims Client Experience team of Claims Management Group.

The team is responsible for registering and coordinating responses to complaints made by employees, service providers and other stakeholders relating to the claim's aspect of Comcare's work.

The progress of complaints handled by Claims Complaints and Feedback team is tracked using a SharePoint database and Pracsys.

Other responsibilities by other roles are outlined below.

All staff

All Claims Management staff must be aware of the [Complaints Handling Framework](#) and its importance to our work. All staff must be able to:

- recognise and differentiate between [negative feedback, operational issues and complaints](#), and take appropriate action in relation to them including acknowledging and resolving issues where possible
- advise people [how to make a complaint](#)
- understand and engage with the [complaint assessment process](#), including providing information to respond to the complaint
- inform Assistant Directors, Directors and the Claims Complaints and Feedback team about complaints.
- recognise the Claims Complaints and Feedback team as the point of contact if they receive a complaint.

You can seek guidance from the Assistant Director or the Claims Complaints and Feedback team if you need help to differentiate between negative feedback, operational issues or complaints, or to resolve negative feedback.

Assistant Directors and Directors

Where the complaint relates to a specific claim, the Claims Operations Director or Contracted Claims Services Director for delegated claims is the key contact in Claims Management Group for responding to the Claims Complaints and Feedback team about the complaint. The Director may nominate an Assistant Director to perform this role.

The Assistant Director and/or Director is responsible for:

- ensuring a complaint summary and chronology is prepared with input from all teams involved in the issue
- coordinating responses requested by the Claims Complaints and Feedback team on behalf of CMG in the required timeframe
- reviewing draft complaint outcomes and providing comments to the Claims Complaints and Feedback team within the agreed timeframe
- Ensuring that any actions required as a result of the complaint are completed and that any broader issues are identified and actioned.

Delegated claims

For complaints relating to delegated claims, the third-party service provider will respond to the complaint in the first instance. If it cannot be resolved, the Claims Complaints and Feedback Team responds to the complaint.

Commonwealth Ombudsman

An employee may also ask the Commonwealth Ombudsman to investigate concerns about the management of their claim.

The Commonwealth Ombudsman will ask Comcare for a response and does not investigate unless the employee has first attempted to resolve their complaint with Comcare directly.

Members of Parliament (MP)

Ministerial and parliamentary requests are triaged by the Director Statutory Oversight and the Senior Director, Claims, copying in the relevant team Director. Negative feedback and operational issues will be handled by the relevant team, while complaints will be handled by the Claims Complaints and Feedback team.

For more information on the process of managing Ministerial and Parliamentary Requests, refer to the [Complaints Handling Framework](#).

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How do stakeholders make complaints?

Our stakeholders (employees, dependants, employers and providers) can make complaints directly to Comcare or through a representative such as their lawyer, a treating health provider, union or a Member of Parliament. They may also ask the Commonwealth Ombudsman to look into an issue for them.

Comcare has a web page you can direct stakeholders to if they wish to leave feedback called [Provide feedback](#).

The Claims Management Group receives complaints in a range of ways. Complaints can come through directly to the Claims Manager or others in the team, for example through the [general enquiries](#) mailbox. Or they may come through the Claims Complaints and Feedback Team, our Practice Support and Account Management teams, or our legal providers. And sometimes people write to the Chief Executive Officer (CEO) or their office. Complaints made through a Member of Parliament also go to the CEO's office.

Complaints may be received by:

- telephone
- email
- fax
- ordinary mail
- in person.

Complaints received via the Contact Centre are referred directly to the Claims Complaints and Feedback team.

When you receive a complaint, keep accurate written records of any conversations with the person making the complaint and of internal discussions about it.

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What to do if you receive a complaint

When someone expresses dissatisfaction about any aspect of our claim management service or our providers:

- actively listen and recognise the person's right to complain about Comcare's service
- treat the person with respect and courtesy in line with [Comcare's values](#) (which are located with the claims management strategy) and the [APS Values and Code of Conduct](#)
- try to resolve the issue
- if you are unable to resolve the issue, speak with your Assistant Director to seek guidance
- if the person is still dissatisfied or indicate they want to complain (or have already complained) through another avenue (e.g. CEO, MP, Ombudsman):
 - provide information about our complaints process
 - offer to refer them to our Claims Complaints and Feedback team
 - provide details so they can contact the Claims Complaints and Feedback team directly
 - inform your Assistant Director and Director.
- keep an accurate record of all conversations in Pracsys
- treat all information confidentially.

Always inform the following about any complaint immediately:

- your Assistant Director and Director
- the [Claims Complaints & Feedback team](#)

In addition, please refer the following types of complaints and enquiries for assessment and action as follows:

Type of complaint	Refer to:
If you receive a call or correspondence directly: <ul style="list-style-type: none">• from a Member of Parliament (or their office)• from the Commonwealth Ombudsman• addressed to the Chief Executive Officer, or that looks like the CEO should be informed (e.g. mentions the CEO or an MP).	Your Assistant Director and Director immediately, who will then brief the Claim Complaints and Feedback team, the Senior Director, General Manager and the Office of the CEO as necessary to respond to the communication.
Complaints regarding Medical Practitioners or Independent Medical Examiners (IME)	The Claims Complaints and Feedback team, who will work with the Injury Management and Return to Work (IM & RTW) team for assessment and resolution. If the specialist's conduct triggers a mandatory notification the IM & RTW team will consider whether to report the conduct to the Australian Health Practitioner Regulation Agency (AHPRA) in accordance with their guidelines.
Rehabilitation providers	Provider Frameworks and RTW team for assessment and action.

	Injury Management and Return to Work (IM & RTW) team for assessment, resolution or escalation to Provider Frameworks and RTW team.
Legal Service Providers or Legal Service Directions	Legal Practice Management (LPM) who will manage these under the Model Litigant complaints process.
Privacy complaint	Privacy – Statutory Oversight team – for assessment and action. The Privacy Team will consider if the Office of the Australian Information Commissioner needs to be notified and manage this – contact Comcare Privacy team

Please include the [Complaints and Feedback](#) team when referring the above matters.

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Complaint record-keeping

When dealing with a complaint, ensure you keep records of all conversations.

The Director (or Assistant Director) ensures that both the following are completed:

- complaint summary

- complaint chronology.

Key events for the complaint chronology relate to the subject of the complaint. For example, if someone complains about a delay, it should record:

- when the person first made the request
- what steps were taken to action the request, when and by whom, including any follow-up
- any communication with the person who made the request including progress updates.

Several teams may need to contribute to the chronology. Teams should not create separate chronologies but contribute to the same document so that there is one record of all actions taken that are relevant to the complaint.

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Unreasonable complainant conduct

There may be instances where claims teams receive calls or correspondence from complainants with unreasonable demands or behaviours.

Examples of unreasonable conduct include:

- raising the same issues that have been assessed previously without presenting new evidence
- being abusive towards staff (e.g. swearing and threatening behaviour)
- unreasonable persistence regarding outcomes
- unreasonable demands relating to timeframes for resolutions
- complaints that are frivolous, vexatious or not made in good faith.

If an employee making a complaint becomes unreasonable, Claims Managers should escalate the complaint to their Assistant Director or Director, or refer the complainant to the [Claims Complaints and Feedback team](#) for support (see Procedure to manage complaints in Claims Operations).

Resources are also available in [Communicating with employees](#) to support Claims Managers with handling and de-escalating difficult conversations.

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Procedure to manage complaints in Claims Operations

The following procedure outlines the steps associated with identifying, responding to, or referring a complaint for action:

Step 1: Identify the type of issue raised

- Determine whether it is a [complaint, negative feedback or an operational issue](#).
- If the matter refers to the CEO, Commonwealth Ombudsman or a Member of Parliament/Minister, refer it directly to the Assistant Director or Director, and Claims Complaints and Feedback team.
- Review the [Types of complaints and referrals table](#) to determine if the complaint needs to be referred to a specific team.

Step 2: Determine whether the issue can be resolved by the Claims Manager

- If yes, continue to **Step 3**.

- If no, escalate to an Assistant Director in the first instance.
 - If they are able to resolve the issue, continue to **Step 3**.
 - If the Assistant Director is unable to resolve the issue, continue to **Step 4**.

If it is unclear whether an issue raised constitutes a complaint, or if it is unclear what the complaint relates to, please speak with your Assistant Director or Director in the first instance.

You can contact the [Claims Complaints and Feedback](#) team for guidance or refer to the [Complaints Handling Framework](#).

Step 3: If the Claims Manager/Assistant Director is able to resolve the issue

- Detailed written notes of a conversation should be recorded in Pracsys (MCOM) as a claim comment or correspondence uploaded as an electronic file.
- The complaint chronology template, sensitive claim summary and feedback/template form should be completed.
- The Assistant Director should be advised of the complaint and outcome for awareness but also to debrief and discuss any learnings.

Step 4: If the Claim Manager or the Assistant Director is unable to resolve the issue

- Provide the contact details for the [Claims Complaints and Feedback](#) team for the complainant to make contact should they wish to.
- If the issue is raised in a call, transfer the call to the Claims Complaints and Feedback team with a warm transfer, providing a brief summary of the issue and what has been discussed to date.
- Record detailed written notes in Pracsys as a claim comment (MCOM), or correspondence should be uploaded as an electronic file.

End the procedure here.

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