



Complaints Policy

Nurses & Midwives Health

Nurses & Midwives Health Pty. Ltd.

ABN: 70 611 479 237

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1. Purpose of the Complaint Handling and Dispute Resolution Policy

The purpose of the Customer Complaint Handling and Dispute Resolution Policy (policy) is to set out the policy and procedures for the handling of complaints received by Nurses & Midwives Health Pty Limited ABN 70 611 479 237 (NMH) from its customers.

NMH views complaints as an opportunity to:

- (a) maintain and enhance customer loyalty and approval; and
- (b) enhance our competitiveness by continuous review and improvement.

NMH will outsource the management and operation of the Nurses & Midwives Health fund, including customer complaint handling and dispute resolution, to Teachers Federation Health Limited (ABN 86 097 030 414) (TFHL). This policy is an abridged version of the Customer Complaint Handling and Dispute Policy which is an internal document maintained by NMH.

Customers can lodge complaints in writing via post or email or over the phone with a member of our contact centre.

Phone:	1300 344 000 Monday – Thursday, 8am – 8pm (AEST) Friday, 8am – 6pm (AEST) Saturday, 8.30am – 12.30pm (AEST)
Mobile and overseas callers:	+ 61 2 8346 2134
Email:	info@nmhealth.com.au
Mail:	Nurses & Midwives Health GPO Box 3874 Sydney NSW 2001

2. Complaints handling and dispute resolution procedure

NMH categorises the level of complaints into first, second, third level resolution. The level of resolution depends on the type and nature of the complaint. This section describes each of these categories and the steps undertaken to resolve the complaint.

2.1. First Level Resolution

A First Level Resolution complaint is defined as either:

- (a) First contact resolution – the complaint is resolved at the time of contact, through the appropriate distribution channel and within 3 working days of receipt; or
- (b) Staff review – where the first contact resolution complaint has been unsatisfactorily resolved or the complaint is sensitive or complex in nature; a second level review is undertaken by an appropriately nominated staff member.

All First Level Resolution complaints must be resolved within three (3) working days of receipt of the complaint.

2.2. Second Level Resolution

A Second Level Resolution complaint is defined as follows:

- (a) Referred to Team Leader or Business Unit Manager – the First Level Resolution has failed to resolve the complaint or the complaint is more sensitive or complex in nature; the complaint is then escalated to the Team Leader or Business Unit Manager for review and consideration.

All Second Level Resolution complaints must be resolved within 14 working days of receipt of the complaint.

2.3. Third Level Resolution

A Third Level Resolution complaint is defined as:

- (a) Assisted referrals – PHIO Complaints Level 1 and Level 2.

First and Second Level complaints must be resolved within three (3) working days of receipt from PHIO. NMH must respond directly to the complainant and advise PHIO of the action taken and response provided.

- (b) Disputes – PHIO Complaints Level 3

All Third Level Resolution complaints require intervention by PHIO.

All Level 3 complaints must be resolved within 14 days of receipt from PHIO. NMH must respond directly to PHIO.

Note on PHIO

A customer making a complaint has the right to lodge their complaint with PHIO if they are not satisfied with the outcome of our processes. All relevant staff at NMH, advise customers of this right as well as the internal escalation process.

PHIO can be contacted on 1300 362 072 or a customer can write to:

Private Health Insurance Ombudsman Office of the Commonwealth Ombudsman GPO Box 442 CANBERRA ACT 2601

Phone: 1300 362 072

Email: phio.info@ombudsman.gov.au

See also PHIO website for further details.

3. Complaints about breaches of the Australian Privacy Principles

A customer can make a complaint in relation to NMH breaching the Australian Privacy Principles (APP) or the NMH Privacy Policy.

In the first instance, a customer must lodge their complaint with NMH following the procedures stated above, and if they are not satisfied with the outcome of our processes, then the complainant has the right to lodge the complaint with PHIO.

If the complainant is still not satisfied with the outcome, then the complaint may be taken to the Office of the Australian Information Commissioner (OAIC).

OAIC can be contacted on 1300 363 992 or a member can write to:

The Office of the Australian Information Commissioner

Phone: 1300 363 992

Email: enquiries@oaic.gov.au

GPO Box 5218

Sydney, NSW 2001

See also OAIC privacy complaint brochure for further details:

<http://www.oaic.gov.au/privacy/making-a-privacy-complaint>

4. Monitoring and reporting on complaints

Monitoring and reporting is an important part of the complaints handling process.

It is the responsibility of the NMH Board, the NMH Risk Committee and NMH CEO to monitor and review various aspects of the complaints handling process, appropriate to their role and responsibilities.

To this end, procedures have been established to enable appropriate monitoring, review and reporting and for continuous improvement.