



Moving Circle

Feedback and Complaints Policy

Purpose and Scope

- This policy and procedure outlines the way that Mioi Forster-Nakayama will respond to complaints/feedback.
- This policy and procedure applies to Mioi Forster-Nakayama and all clients who access therapeutic services from her, including parents/guardians of children and young people who participate in therapy.

Definitions

Client: a person who receives therapeutic services from Mioi Forster-Nakayama. Where the client is a child or young person, this term also applies to their parent/guardian.

Complainant: the person who makes a complaint

Policy

Providing opportunities for complaints and feedback ensures that clients feel valued and respected and enables me to improve the quality of my service. Clients are informed that they can provide feedback or make a complaint at their first appointment and are provided with a copy of my Feedback and Complaints Policy. A copy of my Feedback and Complaints Policy is also available on my website or by request.

I will manage all complaints and feedback received from clients promptly, sensitively and fairly and will:

- listen to the complaint/feedback and take it seriously
- respond to the complainant with an outcome in a timely manner
- clearly document and securely store decisions and actions taken in response to complaints and feedback
- make sure that procedural fairness is followed at all times

Submitting Feedback or Complaints

Compliments, complaints or feedback should be directed to me, either in person, by telephone on 0493 764 845, via email at mioi@movingcircle.au or via the Feedback and Complaints Form at <https://www.movingcircle.au/> (Appendix A)

How Complaints are Handled

1. I will send an acknowledgement of receipt of the complaint via email.
2. I will take the complaint to a third person, who is my clinical supervisor(s). They have expertise in the field of dance movement psychotherapy and counselling and my conversations with them are bound by confidentiality. They are knowledgeable and experienced in handling incidents and complaints. They will help me to reflect on the complaint, ensure that I am accountable and support me in responding.
3. I will send a written response to the complainant.

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4. If the written response is not satisfactory for the complainant, they will be offered the opportunity to meet with me to discuss the complaint further.
5. The discussions will be recorded and securely stored.

Where my response about a complaint is not considered sufficient or appropriate, further advice/support can be obtained through the following agencies:

- Dance Movement Therapy Association of Australasia: Online: www.dtaa.org.au Tel: 0419 531 218
- Psychotherapy and Counselling Federation of Australia: Online: www.pacfa.org.au Tel: 03 9046 2270
- Health and Community Services Complaints Commissioner 08 8226 8666 or Australian Health Practitioners Regulation Agency 1300 419 495
- Australian Human Rights Commission Online: www.humanrights.gov.au Tel: 1300 656 419
- South Australian Equal Opportunities Commission (for complaints relating to discrimination) Online: www.eoc.sa.gov.au Tel: 08 8207 1977.

Related Policies and Procedures

- Child Safe Environments Policy

Policy Review

I will, at a minimum, review this policy and the related procedures once every 5 years.

Version Control

Version Number	Date Issued	Changes or Updates
Version 1	30/01/2024	

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APPENDIX A – Feedback and Complaints Form

Moving Circle - Feedback and Complaints Form

Your feedback and complaints are confidential (in accordance with Privacy Act 1988). You can obtain a copy of Moving Circle’s Complaints Procedure at <https://www.movingcircle.au/>

Details of the person who is submitting this feedback/complaint:

Name:

Address:

Email:

Phone:

Details of any other representative of the person submitting feedback/complaint:

Name:

Address:

Email:

Phone:

Relationship to the person above:

Details of Feedback / Complaint:

Details of any Supporting Documents

How would you like to see your complaint resolved?

Name: _____

Signature: _____

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