



COMPLAINT AND DISCIPLINARY POLICY AND PROCEDURES – Complaints against Certified Practicing Nutritionists

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1. INTRODUCTION

1.1 Background

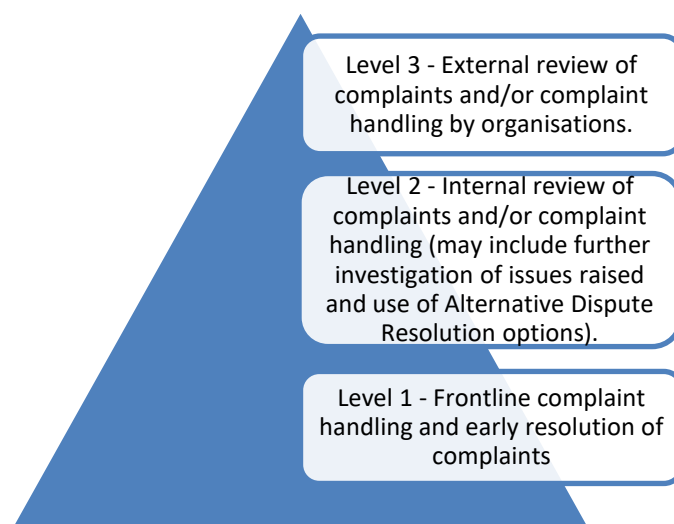
The Australasian Association and Register of Practicing Nutritionists (AARPN) Ltd as an organisation (AARPN) is committed to protecting the public by maintaining high standards of ethics, competence, and Fitness to Practice among its Certified Practicing Nutritionists (CPNs). Accordingly, this Complaints Procedure aims to:

1. Receive and respond to complaints about alleged breaches of:
 - a. AARPN Code of Conduct Part 1 – Practice Guidelines and Part 2 – Ethics,
 - b. Professional Standards,
 - c. Fitness to Practice requirements.
2. Protect the public through robust procedures that maintain trust in the nutrition profession.
3. Safeguard the reputation of AARPN, its Certified Practicing Nutritionists, and the credibility of the nutrition profession.
4. Ensuring timely, fair, and transparent handling of all complaints.
5. AARPN may also guide members of the public to State/Territory Health Complaints Commissioners (HCC) if the complaint falls outside its scope.

AARPN is committed to:

- Fair and effective complaint handling,
- Early assessment to dismiss vexatious or out-of-scope complaints and to offer mediation where possible,
- Annual reporting of relevant complaint data for public safety and quality assurance.
- AARPN seeking independent advice as needed to remain informed of its self-regulatory obligations.

1.2 The three levels of complaint handling



AARPN aim to resolve complaints at the first level, the frontline. Wherever possible representatives will be adequately equipped to respond to complaints, including being given appropriate authority, training and supervision.

Where this is not possible, AARPN may decide to escalate the complaint to the second level of complaint handling and provide for the following internal mechanisms:

- assessment and possible investigation of the complaint and decision/s already made by the

AARPN Ethics & Complaints Committee, and/or

- facilitated resolution (where a person not connected with the complaint reviews the matter and attempts to find an outcome acceptable to the relevant parties).

Where a person making a complaint is dissatisfied with the outcome of AARPN's review of their complaint, they may seek an external review of our decision (by the Ombudsman for example).

1.3 Roles and responsibilities in complaints handling

1.3.1 Role of AARPN Administration

AARPN Administration receives incoming complaints and triages to the **Chair of the Ethics & Complaints Committee**, ensures compliance with timelines, and arranges Committee meetings.

1.3.2 Role of the AARPN Association Committee

The **AARPN Association Committee** liaises with the AARPN Certification Committee and the AARPN Ethics & Complaints Committee to furnish information required for determination or investigation of the complaint. The AARPN Association Committee will oversee the implementation of membership related sanctions for CPNs that are concurrently association members of AARPN the professional body.

The AARPN Association Committee will also seek out a suitable CPN to act as a **non-legal emotional support person** for the person who is the subject of the complaint, if that person is concurrently an association member of AARPN the Professional Body. The person who is the subject of the complaint may elect to waive this provision.

1.3.3 Role of the AARPN Certification Committee

The **AARPN Certification Committee** liaises with the AARPN Ethics & Complaints Committee to furnish information required for determination or investigation of the complaint. The AARPN Certification Committee will oversee the implementation of CPN related sanctions for CPNs.

The AARPN Certification Committee will also seek out a suitable CPN to act as a **non-legal emotional support person** for the person who is the subject of the complaint, if that person is not concurrently an association member of AARPN the Professional Body. The person who is the subject of the complaint may elect to waive this provision.

1.3.4 Role of the Chair of the Ethics & Complaints Committee

The **Chair of the Ethics & Complaints Committee** plays a pivotal leadership role in determining the initial approach to handling a complaint. Their decision-making ensures that complaints are dealt with appropriately and in a manner that is fair, transparent, and consistent with AARPN's commitment to resolving complaints efficiently. The Chair of the Ethics & Complaints Committee plays a key role in the early-stage assessment of complaints. They decide whether a complaint should be resolved through mediation or conciliation, or whether it requires a formal investigation. This decision is based on the nature of the complaint, the willingness of the parties to engage in mediation, and the severity of the alleged misconduct."

Key Responsibilities of the Chair:

1. Initial Assessment of Complaints:

Upon receipt of a complaint, the Chair is responsible for performing an initial review to assess the nature of the complaint. This involves reviewing the complaint details, evaluating the severity and urgency, and determining whether the matter requires immediate intervention.

a. Decision to Mediate or Investigate:

Mediation and Conciliation: The Chair assesses whether the complaint can be resolved through less formal methods such as mediation or conciliation. Mediation is often suitable when both parties are willing to engage in constructive dialogue, and the complaint does not involve serious breaches of conduct or safety. The Chair may offer mediation as a first step if it aligns with the

principles of fairness, expediency, and the opportunity for parties to resolve issues amicably.

- b. **Formal Investigation:** If the Chair determines that the complaint involves a more serious issue, such as potential breaches of the AARPN Code of Conduct or professional standards, or if mediation is not suitable, the Chair may decide to escalate the complaint to a formal investigation. Formal investigations are initiated when the nature of the complaint warrants a thorough review, often involving witness interviews, evidence gathering, and a more in-depth assessment.

2. Ensuring Fairness and Transparency in Decision:

- a. The Chair ensures that the decision to mediate or investigate is made impartially and with due consideration for natural justice, meaning both the complainant and respondent are treated fairly, with equal opportunities to present their sides of the issue.
- b. If the Chair chooses mediation, they ensure that both parties are informed of the process and that an independent mediator (or conciliator) is appointed if necessary.

3. Oversight of Mediation or Conciliation Process:

- a. If the Chair decides that mediation or conciliation is appropriate, they oversee the process, ensuring that it is conducted in a fair and transparent manner. The Chair may appoint a neutral mediator (if one is not already available) or facilitate the process themselves, depending on the severity and nature of the issue.
- b. The Chair ensures that the mediation or conciliation process provides both parties with the opportunity to resolve the complaint amicably, with outcomes that are mutually acceptable.

4. Referral to the Ethics & Complaints Committee:

- a. Should the mediation or conciliation process fail to resolve the complaint, or if either party is dissatisfied with the outcome, the Chair has the authority to refer the matter to the full **Ethics & Complaints Committee** for a formal investigation and subsequent hearings. The Chair ensures that the committee is informed of all relevant details, and that proper documentation is provided for a fair investigation.

5. Documentation and Reporting:

- a. The Chair is responsible for documenting all decisions regarding whether mediation, conciliation, or a formal investigation is pursued. These records are important for maintaining transparency, monitoring the progress of complaints, and for any future reviews or appeals.
- b. The Chair also ensures that the parties involved are notified promptly of the decision to proceed with mediation or a formal investigation.

1.3.5 Role of the full Ethics & Complaints Committee

The full **Ethics & Complaints Committee** conducts formal investigations and hearings; decides outcomes, including any sanctions. It plays a central role in the formal handling of complaints within AARPN. It is tasked with ensuring that complaints are investigated thoroughly, fairly, and impartially, and that outcomes and any necessary sanctions are decided based on a comprehensive review of the facts. The Committee also plays an essential role in maintaining the integrity of the profession and the public's trust in AARPN's certification processes. In essence, the Ethics & Complaints Committee is the central body responsible for ensuring that complaints are handled thoroughly, impartially, and transparently, and that any resulting decisions or sanctions are fair and proportionate to the severity of the issue.

- **Investigates** complaints, conducts hearings, and reviews evidence.
- **Makes final decisions** about whether complaints are substantiated and determines appropriate sanctions.
- **Ensures fairness** in the complaints process by maintaining impartiality and transparency.
- **Provides guidance** on compliance with legal and ethical standards.
- **Manages appeals** and ensures that decisions made during the investigation and hearing phases are well documented.
- **Ensures public trust** in AARPN by maintaining the integrity of the complaints handling process.

Responsibilities of the Full Ethics & Complaints Committee:

1. Investigation Oversight and Decision-Making

a. Conducting Formal Investigations:

Once the **Chair of the Ethics & Complaints Committee** determines that a formal investigation is required, the full Ethics & Complaints Committee is activated to conduct the investigation. This includes reviewing all relevant evidence, conducting interviews with the complainant, respondent, and witnesses, and ensuring that the investigation process is thorough and impartial.

The Committee may appoint an **Investigation Officer** (typically a qualified CPN with relevant clinical experience) to carry out the investigation. The Committee will oversee the officer's actions to ensure the investigation is conducted properly.

b. Reviewing and Evaluating Evidence:

The full Committee is responsible for reviewing all the evidence gathered during the investigation. This includes documents, emails, records, witness statements, and any other relevant materials. The Committee evaluates the evidence in a fair, unbiased manner to determine whether the complaint is substantiated.

2. Hearing the Complaint

a. Conducting Hearings:

The full Committee may hold a hearing to allow both the complainant and the respondent to present their sides of the case. The respondent is given an opportunity to respond to the allegations, present evidence, and call witnesses.

The Committee ensures that all parties have the chance to present their case fully and that the process adheres to the principles of **natural justice**, meaning all parties are treated fairly and given an opportunity to be heard.

The Committee may also involve external experts or consumer representatives to ensure that the hearing is conducted in line with best practices.

b. Ensuring Procedural Fairness:

The full Ethics & Complaints Committee ensures that procedural fairness is maintained throughout the hearing and investigation process. This includes ensuring that:

- i. The complainant and respondent are treated impartially.
- ii. All parties involved in the complaint are provided with sufficient information about the process and their rights.
- iii. Any conflicts of interest are managed effectively.

3. Making Decisions on Complaints

a. Deciding the Outcome:

After reviewing all evidence and conducting hearings (if applicable), the full Committee decides whether the complaint is substantiated or not. This decision is based on the preponderance of the evidence (i.e., which version of events is more likely to be true).

If the complaint is substantiated, the Committee determines the appropriate sanctions based on the severity of the misconduct. These may include:

- I. A formal warning.
- II. Mandatory education or training (e.g., Continuing Professional Development or specific clinical training).
- III. Supervised practice under an approved supervisor.
- IV. Suspension or termination of AARPN membership and/or Certified Practicing Nutritionist certification.

b. **Issuing Recommendations and Sanctions:**

If the Committee finds the complaint substantiated, it may issue sanctions designed to address the misconduct and prevent future occurrences. Sanctions are chosen based on the seriousness of the behaviour and any prior disciplinary history.

The Committee may also recommend remediation steps, such as further education or mentorship, to help the respondent improve their professional conduct.

4. Ensuring Fairness and Transparency

a. **Maintaining Impartiality:**

The full Committee is responsible for ensuring that decisions are made impartially, based solely on the facts of the case and in accordance with the AARPN Code of Conduct, ethics guidelines, and professional standards.

All members of the Committee must declare any conflicts of interest, and steps must be taken to remove or replace any member if a conflict is identified.

b. **Recording and Reporting:**

The Committee ensures that accurate and comprehensive records are kept of the complaint, the investigation, the hearing (if applicable), and the final decision. These records are maintained in a confidential manner and are used for monitoring, reporting, and possible appeal processes.

The Committee is responsible for reporting the final outcomes of complaints, including any sanctions, in accordance with AARPN's public transparency policies.

5. Ensuring Compliance with Legal and Ethical Standards

a. **Adhering to Legal Requirements:**

The full Committee ensures that the complaints process complies with all relevant legal and regulatory requirements, including privacy laws (e.g., the **Privacy Act**) and natural justice principles.

The Committee also ensures that decisions are consistent with AARPN's ethical guidelines and professional standards, and it may seek independent legal or expert advice if necessary.

b. **Referring to External Authorities:**

In cases where criminal behaviour is suspected or identified (e.g., fraud or abuse), the Ethics & Complaints Committee has the responsibility to refer the matter to appropriate law enforcement or health regulatory bodies (e.g., Health Complaints Commissioners or AHPRA).

If a matter falls outside of AARPN's jurisdiction, the Committee ensures that the complainant is informed of the appropriate channels for further action.

6. Appeals Process – involvement of the Ethics & Complaints Committee

a. **Handling Appeals:**

If either the complainant or the respondent disagrees with the outcome of the Ethics & Complaints Committee's decision, they have the right to appeal. The Committee is responsible for ensuring that the appeal process is clearly outlined and followed according to the procedure set forth in this document.

The full Committee may participate in the appeals process by providing relevant documentation and evidence that supports the original decision, and it ensures that the appeal is reviewed fairly and impartially by the Appeals Panel.

1.3.6 Roles and responsibilities of the AARPN Board in the complaints process:

The AARPN Board ensures that due process is followed in the complaints handling process, providing oversight and ensuring that the process is fair, transparent, and legally compliant. The Board is responsible

AARPN CPN Practitioner Complaint Management Policy (February 2025)

for confirming or implementing the sanctions decided by the Ethics & Complaints Committee. However, the Board cannot alter the verdicts once they have been determined by the Committee. The Board also oversees the appeals process, ensuring that appeals are handled impartially and in accordance with AARPN's policies.

Summary of the AARPN Board's Role:

The **AARPN Board** serves as the governing body that ensures the integrity of the complaints handling process. The AARPN Board plays a critical role in ensuring that the complaints process is carried out with integrity and accountability, upholding the standards of the profession and protecting the public's trust.

Its primary functions include:

- Ensuring Due Process and Governance
- Ensuring Consistency and Accountability
- Final Oversight and Appeal Process
- Ethical and Legal Compliance
- Reporting and Transparency
- Continuous Improvement

1. Ensuring Due Process and Governance

a. Oversight of the Complaints Process:

The AARPN Board is responsible for ensuring that the complaints handling process adheres to due process, ethical standards, and legal requirements. This includes ensuring that the Ethics & Complaints Committee operates transparently and fairly and follows the correct procedures throughout the complaint resolution process.

The Board ensures that any decisions made by the Ethics & Complaints Committee are consistent with AARPN's values, standards, and legal obligations.

b. Review of Disciplinary Outcomes:

While the Ethics & Complaints Committee is responsible for determining outcomes and sanctions, the AARPN Board may be involved in confirming or implementing the sanctions decided by the Committee.

The Board ensures that the disciplinary actions imposed are appropriate for the nature and severity of the violation and that they are consistent with previous outcomes.

2. Ensuring Consistency and Accountability

a. Confirming Sanctions:

The AARPN Board reviews the recommendations of the Ethics & Complaints Committee regarding sanctions (such as warnings, mandatory training, suspension, or termination of membership) to ensure that they are consistent with the organization's policies and practices. The Board may confirm, adjust, or implement these sanctions.

The Board's role here is to ensure that the sanctions are fair, proportionate, and in line with AARPN's mission to maintain high professional standards and public trust.

b. Monitoring and Reporting:

The AARPN Board is also responsible for monitoring the effectiveness of the complaints handling system and ensuring that the outcomes are communicated appropriately. This includes ensuring that the results of the complaints process (including any sanctions) are recorded and reported as required by AARPN's transparency policies.

3. Final Oversight and Appeal Process

a. Appeal Process Oversight:

If either the complainant or the respondent is dissatisfied with the outcome of the complaint handling process, they can appeal to the AARPN Board. The Board ensures that the appeal process is handled impartially and in accordance with established procedures.

The Board does not re-judge the original decision but instead ensures that the appeal is based on valid grounds (e.g., procedural errors or new evidence). The Board then reviews the appeal and determines whether the original decision should stand or if the matter should be referred back for further investigation.

4. Ethical and Legal Compliance

a. Legal and Ethical Compliance:

The AARPN Board ensures that the complaints process complies with all relevant legislation, including privacy laws (e.g., the Privacy Act) and professional conduct standards. This responsibility includes ensuring that the rights of all parties involved (complainants, respondents, and members) are protected, and that the complaints process respects natural justice and confidentiality.

The Board is ultimately accountable for ensuring that the organization adheres to its regulatory obligations and maintains high standards of professional ethics.

5. Reporting and Transparency

a. Public Accountability and Transparency:

The AARPN Board ensures that the public is informed about the outcomes of serious disciplinary actions (such as suspensions or terminations) in a manner that is consistent with AARPN's transparency policy. This includes public listing on the AARPN website and notification to any relevant external parties (e.g., health funds, regulatory bodies).

The Board may also report annually on the complaints process, summarizing the number of complaints, outcomes, and any policy revisions made in response to complaints.

6. Continuous Improvement

a. System Improvement:

The AARPN Board is involved in periodically reviewing and improving the complaints handling system. This includes considering feedback from stakeholders, reviewing lessons learned from individual cases, and implementing improvements to ensure that the process remains effective, fair, and transparent.

The Board also reviews any changes in legislation or industry standards that may require updates to the complaints policy.

Summary

AARPN Board

- Ensures due process is followed.
- Confirms and implements sanctions.
- Cannot alter verdicts once determined by the Ethics & Complaints Committee unless an appropriate and successful appeal has been made to the AARPN Board as per the appeals process set forth in this document.

1.4 Structure and composition of the AARPN Ethics & Complaints Committee

The AARPN Ethics & Complaints Committee (the "Committee") is autonomous in determining verdicts (substantiation or dismissal). Its membership is appointed by the AARPN Certification Committee and consists of:

- Certified Practicing Nutritionists (CPNs),
- External representatives (e.g., consumer advocates recruited based on the nature of the complaint),

- When required, representation from Aboriginal and Torres Strait Islander Peoples, individuals with disabilities, etc.
- Other experts and professional bodies as needed.

A quorum for the AARPN Ethics & Complaints Committee is 3 (three) with at least one Certified Practicing Nutritionist present, as per the *Terms of Reference* for the AARPN Ethics & Complaints Committee.

1.5 Terms of Reference of the AARPN Ethics & Complaints Committee

The terms of reference for the AARPN Ethics & Complaints Committee are in a separate *Terms of Reference* document that covers:

- Purpose and scope of the AARPN Ethics & Complaints Committee,
- Membership criteria of the Committee (experience, background, conflict-of-interest management),
- Procedural rules (voting methods, confidentiality, recusal in case of conflicts),
- Meeting frequency and decision-making processes.

1.6 Confidentiality, Natural Justice, and Privacy

- Confidentiality: Complainant and respondent details are shared only with those who need the information to investigate or decide the complaint.
- Privacy: Managed per relevant legislation (e.g., Privacy Act).
- Natural Justice: All parties are given a fair opportunity to be heard, respond to allegations, and present evidence.

1.7 Criminal or Civil Proceedings

- If a complaint indicates a criminal breach, the AARPN Board or the AARPN Ethics & Complaints Committee may pause its internal process and refer the matter to law enforcement.
- Once external proceedings conclude, the Ethics & Complaints Committee may resume its complaint process if matters remain relevant to professional conduct.
- The AARPN Board or the AARPN Ethics & Complaints Committee or the AARPN Association Committee may also refer the complaint to the appropriate State or Territory Health Complaints Commissioner if it falls under their jurisdiction.

1.8 Complaints about Students

- Complaints regarding students in academic programs typically fall under the purview of educational institutions.
- If the student is also an AARPN Student Member this policy will be applied for any professional conduct issues.

1.9 Lodging a Complaint

- Complaints can be lodged via:
 - Email: admin@aarpn.com or via post.
- A downloadable Complaint Form is available from the AARPN website or complaints can be freeform.
- Complaints should describe:
 - The allegation,
 - Relevant facts/evidence (including dates, records, witness details),

- The outcome sought by the complainant.

1.10 Alternative avenues for dealing with complaints

AARPN will inform people who make complaints to or about AARPN about any internal or external review options available to them (including any relevant Ombudsman or oversight bodies).

2. SCOPE OF APPLICATION

This policy:

- Applies to all AARPN representatives involved in complaints management,
- Covers any complaint about an AARPN Certified Practicing Nutritionist (CPN) alleged to have breached the Codes of Conduct, Professional Standards, or Fitness to Practice,
- Ensures legal obligations (e.g., privacy, natural justice) are upheld.

3. TERMS AND DEFINITIONS

Complaint: Expression of dissatisfaction made to or about AARPN or an AARPN Certified Practicing Nutritionist.

Complaint management system: All policies, procedures, practices, staff, hardware and software used by us in the management of complaints.

Dispute: An unresolved complaint escalated either within or outside of our organisation.

Feedback: Opinions, comments and expressions of interest or concern, made directly or indirectly, explicitly or implicitly, to or about AARPN, or an AARPN Certified Practicing Nutritionist, or complaint handling where a response is not explicitly or implicitly expected or legally required.

4. COMPLAINT PATHWAYS

4.1 Overview of Complaint Pathways

Complaints about AARPN or about an AARPN Certified Practicing Nutritionist can be made:

- a. Directly to the AARPN Board for complaints about AARPN or an AARPN Certified Practicing Nutritionist.
- b. Directly to the relevant State Health Complaints Commissioner (HCC) and/or to the relevant law enforcement agency for a complaint about an AARPN Certified Practicing Nutritionist.
- c. If a complaint received by AARPN falls within the scope of an HCC (for example, broader healthcare system issues or consumer complaints), AARPN will forward the complaint to that HCC for investigation.
- d. If a complaint involves criminal conduct (e.g., fraud, physical harm, or any other illegal act), AARPN will immediately notify the relevant Federal or State law enforcement agency.
- e. Complaints about AARPN or its Certified Practicing Nutritionists will first be assessed for the potential to be resolved through mediation or informal resolution processes, prior to initiating formal investigations or disciplinary measures. Mediation is encouraged where appropriate and feasible, allowing for cooperative and amicable resolution.
- f. If the complaint does not fall under criminal law or HCC jurisdiction, and cannot be appropriately resolved through mediation or informal resolution processes, the AARPN Ethics & Complaints Committee will conduct a detailed investigation (including interviews, fact-finding, and professional mediation) and may impose disciplinary actions based on the severity of any substantiated misconduct:

- Formal warning,
- Further education requirements,
- Mandatory supervised practice under an AARPN Ethics & Complaints Committee approved supervisor,
- Suspension of AARPN association membership and/or CPN certification (and all associated rights), or
- Termination of AARPN association membership and/or CPN certification (and all associated rights).

4.2 Health Fund Fraud

In cases of Health Fund fraud, AARPN will notify the relevant Health Fund(s). If the complaint is substantiated, AARPN will revoke the CPN member's provider status for a period determined by the affected Fund(s).

4.3 Health Complaints Commissioners (Australia)

Each Australian state or territory has a Health Complaints Commissioner (or equivalent) serving as an independent ombudsman. The Commissioner:

- Strongly emphasizes conciliation to resolve complaints between providers and patients,
- Investigates serious complaints,
- May recommend improvements to health services,
- May determine if a serious complaint affecting standards of care should be referred to the Australian Health Practitioner Regulation Agency (AHPRA) (for AHPRA registered professions only).

Below are links to each State/Territory HCC:

- **ACT Health Services Commissioner:** hrc.act.gov.au/health/
- **Health Complaints Commissioner (Tasmania):** healthcomplaints.tas.gov.au
- **Health Complaints Commissioner (Victoria):** hcc.vic.gov.au
- **Office of the Health Ombudsman (Queensland):** oho.qld.gov.au/make-a-complaint/
- **NSW Health Care Complaints Commission (New South Wales):** hccc.nsw.gov.au
- **Health & Community Services Complaints Commissioner (Northern Territory):** hcscc.nt.gov.au/about/
- **Health & Community Services Complaints Commissioner (South Australia):** hcscc.sa.gov.au

5. SUMMARY OF THE COMPLAINT PROCESS

1. Formal Documentation

Complainants complete the standardized complaint form or submit a freeform complaint via post or email to admin@aarpn.com. Upon receipt, AARPN assigns a unique reference number and refers the complaint to the AARPN Certification Committee's Ethics & Complaints Committee for review.

2. Initial Consideration & Preliminary Management

The Ethics & Complaints Committee assesses whether the complaint is valid and within AARPN's jurisdiction. If the complaint is deemed invalid or vexatious, it is dismissed with an explanation. If the complaint involves criminal activity or falls under the jurisdiction of a Health Complaints Commissioner (HCC), it is referred to the appropriate external authority. If the respondent is a Certified Practicing Nutritionist (CPN) and the complaint involves an association member of AARPN, the complaint is also shared with the AARPN Association Committee.

3. Opportunity for Reply

To ensure Natural Justice, the respondent/practitioner is informed of the allegations and usually given 21–28 days to respond in writing. The respondent may submit supporting documentation, witness details, and AARPN CPN Practitioner Complaint Management Policy (February 2025)

additional evidence for review.

4. Mediation & Conciliation

After considering the respondent's reply, the Chair of the Ethics & Complaints Committee assesses whether the complaint is suitable for mediation and conciliation as an alternative resolution method before proceeding to a formal investigation. If mediation is successful, the process ends, and no further action is required. If mediation is unsuccessful or not appropriate, the complaint proceeds to a formal investigation.

5. Investigation

An Investigation Officer (holding at least 1-year AARPN CPN certification and 5 years of clinical experience) may be appointed to conduct a formal investigation. The officer collects statements, interviews relevant parties, and gathers supporting records (e.g., emails, session notes). Both the complainant and respondent receive updates every 4–6 weeks regarding the investigation's progress.

6. Hearing by a Hearing Panel

A subset of the Ethics & Complaints Committee or a specially convened Hearing Panel reviews the investigation report. The respondent may attend the hearing (in person or virtually) to present a verbal defence, call witnesses, or provide clarifications. A support person (not a lawyer or barrister) is allowed but cannot officially represent the respondent.

7. Determination of Outcome

After reviewing all available evidence, the Ethics & Complaints Committee determines whether the complaint is substantiated. If no breach is found, the complaint is dismissed. If a breach is substantiated, appropriate sanctions are imposed proportionate to the severity of the misconduct. Possible sanctions include:

- Formal Warning
- Further Education (CPD)
- Supervision
- Suspension or Termination of Membership

8. Appeal Process

Either party may file an appeal within 14–28 days based on procedural errors or new evidence. The Appeals Panel reviews the case within 4–6 weeks and may uphold, modify, overturn the decision, or reopen the investigation. If no appeal is filed, the decision stands as final.

6. PRELIMINARY MANAGEMENT OF COMPLAINTS

6.1 Acknowledgment, Early Assessment and Early Resolution

6.1.1 Timeframes for Preliminary Management

1. Acknowledgment of complaint: within 10 working days.
2. Assessment decision (e.g., vexatious or proceed): typically, within 4 weeks of receipt.
3. The AARPN Ethics & Complaints Committee will advise people as soon as possible if it is unable to deal with any part of their complaint and provide advice about where such issues and/or complaints may be directed (if known and appropriate). It will also advise people as soon as possible when it is unable to meet indicated time frames for responding to their complaint and the reason for the delay.

6.1.2 Acknowledgement

The AARPN Ethics & Complaints Committee acknowledges receipt within 10 working days and will provide an overview of next steps (where possible).

6.1.3 Early Assessment

The Chair of the Ethics & Complaints Committee will engage early assessment and may offer mediation or conciliation as an initial step, based on their assessment of the complaint's nature. If mediation is deemed appropriate, it will be offered before any formal investigation is initiated. In cases where mediation is unsuccessful or inappropriate, the complaint will proceed to a formal investigation.

1. Check jurisdiction: If the complaint is clearly within an HCC or criminal scope, AARPN forwards or refers it to the appropriate body.
2. Check validity: If the complaint is vexatious, frivolous, or unrelated to AARPN's remit, AARPN may dismiss it, giving reasons to the complainant.
3. Preliminary Resolution: AARPN may offer mediation or conciliation before formal escalation to try resolving issues quickly and collaboratively. Where appropriate, AARPN will offer mediation or conciliation as an initial step in resolving complaints before formal investigations or disciplinary actions are considered. This allows for the possibility of resolving disputes cooperatively and promptly, especially when both parties are willing to engage in dialogue and find an acceptable outcome.

6.1.4 Early Resolution

Where possible, complaints will be resolved at first contact with the AARPN Ethics & Complaints Committee.

AARPN will promptly acknowledge receipt of complaints. It will assess and prioritise complaints in accordance with the urgency and/or seriousness of the issues raised. If a matter concerns an immediate risk to safety or security the response will be immediate and will be escalated appropriately.

AARPN as an organisation is committed to managing people's expectations, and will inform them as soon as possible of the following:

- the complaints process,
- the expected time frames for its actions,
- the progress of the complaint and reasons for any delay,
- their likely involvement in the process, and
- the possible or likely outcome of their complaint.

7. GUIDING PRINCIPLES



7.1 Facilitate complaints

7.1.1 People focus

AARPN as an organisation is committed to seeking and receiving feedback and complaints. Any concerns raised via stakeholder feedback or complaints will be dealt with within a reasonable time frame.

People making complaints will be:

- provided with information about our complaint handling process.
- provided with multiple and accessible ways to make complaints.
- listened to, treated with respect by the AARPN Board, and its respective Committees, and actively involved in the complaint process where possible and appropriate, and

- provided with reasons for our decision/s and any options for redress or review.

7.1.2 No detriment to people making complaints

The AARPN Board and the AARPN Ethics & Complaints Committee (a subsidiary of the AARPN Certification Committee) will take all reasonable steps including de-identifying data and restricting access to the principal investigating person(s), to ensure that people making complaints are not adversely affected because a complaint has been made by them or on their behalf. Any feedback given will be kept private as per this Policy document and the AARPN Code of Conduct Part 1 – Practice Guidelines and Part 2 - Ethics.

7.1.3 Anonymous complaints

AARPN will accept anonymous complaints and will carry out an investigation of the issues raised in the complaint where there is enough information provided.

7.1.4 Accessibility

AARPN will ensure that information about how and where complaints may be made to or about AARPN is well publicised through availability of a downloadable feedback form/complaint form on the AARPN website. AARPN will ensure that its systems to manage complaints are easily understood and accessible to everyone, particularly people who may require assistance.

If a person prefers or needs another person or organisation to assist or represent them in the making and/ or resolution of their complaint, AARPN will communicate with them through their representative if this is their wish. Anyone may represent a person wishing to make a complaint with their consent (e.g. advocate, family member, legal or community representative, member of Parliament, another organisation).

7.1.5 No charge

Complaining to AARPN is free.

7.2 Respond to Complaints

7.2.1 Objectivity and fairness

AARPN will address each complaint with integrity and in an equitable, objective and unbiased manner.

AARPN will ensure that the person handling a complaint is different from any person whose conduct or service is being complained about.

Conflicts of interests, whether actual or perceived, will be managed responsibly. Internal reviews of how a complaint was managed will be conducted by a person other than the original decision maker.

7.2.2 Responding flexibly

AARPN is empowered to resolve complaints promptly and with as little formality as possible. AARPN will adopt flexible approaches to service delivery and problem solving to enhance accessibility for people making complaints and/or their representatives.

AARPN will assess each complaint on its merits and involve people making complaints and/or their representative in the process as far as possible.

People making complaints will not be adversely affected by opting for mediation or conciliation, as these processes are designed to resolve issues without the need for formal disciplinary measures.

7.2.3 Confidentiality

AARPN will protect the identity of people making complaints where this is practical and appropriate.

Personal information that identifies individuals will only be disclosed or used by AARPN as permitted under the relevant privacy laws, secrecy provisions and any relevant confidentiality obligations.

7.3 Manage the parties to a complaint

7.3.1 Complaints involving multiple agencies

Where a complaint involves multiple organisations, AARPN will work with the other organisation/s where possible, to ensure that communication with the person making a complaint and/or their representative is clear and coordinated.

Subject to privacy and confidentiality considerations, communication and information sharing between the parties will also be organised to facilitate a timely response to the complaint.

Where a complaint involves multiple areas within our organisation, responsibility for communicating with the person making the complaint and/or their representative will also be coordinated.

Where our services are contracted out, AARPN expect contracted service providers to have an accessible and comprehensive complaint management system. AARPN take complaints not only about the actions of itself and its practitioner members, but also the actions of service providers to AARPN.

7.3.2 Complaints involving multiple parties

When similar complaints are made by related parties AARPN will try to arrange to communicate with a single representative of the group.

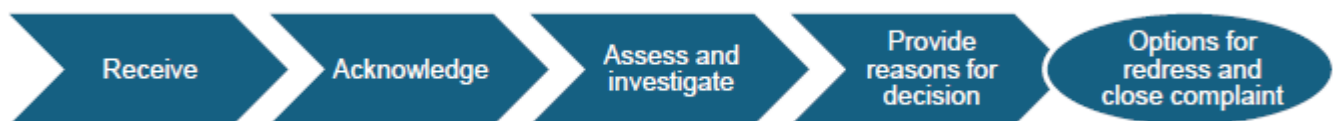
7.3.3 Managing unreasonable conduct by people making complaints

AARPN is committed to being accessible and responsive to all people who approach it with feedback or complaints. At the same time our operations depend on:

- AARPN's ability to perform its functions in the most effective and efficient way possible,
- The health, safety and security of AARPN's representatives, association members, and Certified Practicing Nutritionists,
- AARPN's ability to allocate its resources fairly across any complaints it receives.

If people behave unreasonably in their dealings with AARPN, their conduct can significantly affect the progress and efficiency of AARPN's work. As a result, AARPN will take proactive and decisive action to manage any conduct that negatively and unreasonably affects AARPN and will support our representatives and when appropriate, our Certified Practicing Nutritionists, to do the same.

8. Complaint Management System



8.1 Introduction

The five key stages in AARPN's complaint management system are set out below.

8.2 Receipt of complaints

Unless the complaint has been resolved at the outset, AARPN will record the complaint and its supporting information. AARPN will also assign a unique identifier to the complaint file.

The record of the complaint will document:

- a. the contact information of the person making a complaint,
- b. issues raised by the person making a complaint and the outcome/s they want,

- c. any other relevant information, and
- d. any additional support the person making a complaint requires.

8.3 Acknowledgement of complaints

AARPN will acknowledge receipt of each complaint promptly, and preferably within 10 working days.

Consideration will be given to the most appropriate medium (e.g. email, letter) for communicating with the person making a complaint.

8.4 Assessment and addressing of complaints

8.4.1 Initial assessment

After acknowledging receipt of the complaint, AARPN will confirm whether the issue/s raised in the complaint is/are within our control. AARPN will also consider the outcome/s sought by the person making a complaint and, where there is more than one issue raised, determine whether each issue needs to be separately addressed.

When determining how a complaint will be managed, AARPN will consider:

- a. Whether a resolution requires the involvement of other organisations such as HCC or law enforcement agencies,
- b. How serious, complicated or urgent the complaint is,
- c. Whether the complaint raises concerns about people's health and safety,
- d. The risks involved if resolution of the complaint is delayed, and
- e. How the person making the complaint is being affected.

8.4.2 Addressing complaints

The Chair of the Ethics & Complaints Committee, after assessing the complaint, will determine whether the matter should be handled through mediation or proceed to formal investigation. If mediation is selected, the Chair will oversee the process, ensuring it is conducted fairly and impartially. If mediation fails or is not deemed appropriate, the Chair will refer the matter for a formal investigation.

After initially assessing the complaint, Chair of the Ethics & Complaints Committee will consider how to manage it. To manage a complaint Chair of the Ethics & Complaints Committee may:

- a. Give the person making a complaint information or an explanation,
- b. Gather information from the person or area that the complaint is about,
- c. Seek to resolve the matter through mediation or conciliation, with both parties' consent, before proceeding to a formal investigation. This step is intended to facilitate a resolution without the need for formal disciplinary measures.
- d. Appoint to the Ethics & Complaints Committee, an Investigation Officer (with at least one year experience as an AARPN member and at least 5 years clinical experience as a Clinical Nutritionist) to investigate the claims made in the complaint.

In a complaint process, Natural Justice requires that each person that is a party to the complaint is informed about the allegations and has an opportunity to respond to them. When investigating a complaint, an AARPN appointed Investigation Officer will:

- a) connect with the Complainant(s) on behalf of AARPN;
- b) connect with the Accused/Respondent(s) against whom the allegation refers at an appropriate time and give the
- c) Respondent an opportunity to:
 - I. hear the allegation(s) against him/her/it in full;
 - II. explain or respond to the allegation(s), either orally, in writing or both;
 - III. identify any witnesses and supporting evidence in favour of the Respondent;

- IV. invite a support person or advisor, who must not be qualified as a lawyer or barrister, to attend any meeting with the person investigating; and
- V. be provided support (for example, professional counselling) if necessary;
- d) obtain a signed statement and record of interview from the Respondent;
- e) contact any witnesses and obtain written and signed statements outlining details of the complaint/allegation; and
- f) obtain other information that could assist in deciding on the complaint/allegation.
- g) convene separate meetings with the parties (as appropriate) and discuss the outcomes of the investigation; and
- h) determine and implement a plan for managing feedback and counselling to the parties as appropriate.

AARPN will keep the person making the complaint up to date on its progress, particularly if there are any delays. AARPN will also communicate the outcome of the complaint using the most appropriate medium. Which actions AARPN decides to take will be tailored to each case and consider any statutory requirements.

8.5 Disciplinary outcomes

If the complaint is not a criminal or Health Fund matter and sits outside the scope of the HCC, the Chair of the Ethics & Complaints Committee will examine the complaint and where possible and appropriate, seek to professionally mediate a satisfactory outcome between the parties concerned.

If mediation or conciliation is successful, the complaint may be resolved amicably without the need for disciplinary actions. If mediation is unsuccessful or not deemed suitable by the Chair, the complaint will be escalated for formal investigation by the full Ethics & Complaints Committee, and disciplinary actions may ensue.

If a complaint is substantiated, the full Ethics & Complaints Committee will decide on appropriate sanctions. The AARPN Board will then review these sanctions to ensure they align with the organization's policies and confirm or implement them. The Board cannot alter the verdict but may adjust or enforce the sanctions where necessary.

The form of disciplinary measures that may be imposed on an individual found to have engaged in misconduct will depend on:

- a) the nature, criminality, and seriousness of the behaviour or incidents and the risk posed to public safety;
- b) the wishes of the Complainant;
- c) if the Respondent knew or should have known that their action/behaviour constituted misconduct;
- d) level of contrition of the Respondent;
- e) if there have been relevant prior warnings or disciplinary action; or
- f) if there are any mitigating circumstances such that the Respondent should not be disciplined so severely, and of least consideration,
- g) the effect of the proposed disciplinary measures on the Respondent including any personal, professional or financial consequences.

8.5.1 Available Outcomes

1. Mediation / Conciliation:

- For disputes that can be resolved cooperatively, barring serious public safety concerns.

2. Dismissal of Complaint:

- If no breach is found or the complaint is vexatious/invalid.

3. Sanctions:

- a. Formal warning,

- b. Specific requirement for further education (CPD, formal training),
- c. Mandatory Supervision or mentoring (e.g., 6 months of practice under an approved supervisor),
- d. Suspension of AARPN Association membership and/or Certified Practicing Nutritionist certification and all rights and privileges that these confer on the individual (time-limited, e.g., 6–12 months, with specified re-entry conditions), or
- e. Termination of AARPN membership and Practicing Nutritionist registration and all rights and privileges that these confer on the individual.

8.6 Implementation of sanctions

A written sanction letter will be provided by email and by registered post to the defendant that contains:

- a. The nature of the misconduct,
- b. The type and duration of the sanction,
- c. Any conditions for reinstatement (e.g., re-training, completion of specified CPD),
- d. The effective date of suspension/termination.

8.7 Providing reasons for decisions

Following consideration of the complaint and any investigation into the issues raised, AARPN will contact the person making the complaint and advise them:

- a. the outcome of the complaint and any action AARPN took
- b. the reason/s for our decision
- c. the remedy or resolution/s that AARPN have proposed or put in place, and
- d. any options for review that may be available to the complainant, such as an internal review, external review or appeal.

If during investigation, AARPN make any adverse findings about a particular individual, AARPN will consider any applicable privacy obligations under the *Privacy and Personal Information Protection Act 1998* and any applicable exemptions in or made pursuant to that Act, before sharing our findings with the person making the complaint.

In cases where mediation or conciliation resolves the complaint, AARPN will provide a written summary of the agreement reached. No further disciplinary action (aside from the issuance of a warning letter where appropriate) will be necessary unless a new concern arises, in which case the complaint may be escalated to a formal investigation.

8.8 Appeal

If the Complainant or the Respondent/Accused is not satisfied with the outcome of the outcome of the Ethics & Complaints Committee's decision, either party may appeal to the AARPN Board of Directors on the basis that an error of process has occurred, or new evidence that was not available during the initial investigation. The Appellant (who may be the original Complainant or the original Respondent) is required to submit a Notice of Appeal to the AARPN CEO at which time an independent Appeal Panel will be created whom will consider whether the appeal is valid.

9. APPEALS PROCESS

The AARPN Board ensures that the appeal process is fair, impartial, and in accordance with AARPN's policies. The Board's decision on the appeal is final.

9.1 Grounds for Appeal

- Either party can appeal if they believe there was a procedural error or if new evidence has emerged that was not available during the initial hearing.

- a. Procedural Error: The Appellant (complainant or respondent) contends that a significant error occurred during the investigation or hearing—for example, a conflict of interest was not disclosed, or the respondent was not given sufficient opportunity to respond.
 - b. New Evidence: The Appellant has new, relevant information that was not available or could not reasonably have been obtained during the initial hearing.
- A separate Appeals Panel appointed by the AARPN Board (independent from the original Hearing Panel) reassesses procedural aspects and any new information.
 - The Appeals Panel's decision is final.

(Note: Disagreement with the decision alone does not constitute valid grounds for appeal.)

9.2 Notice of Appeal

The Appellant must submit a Notice of Appeal in writing to the AARPN CEO (admin@aarpn.com) within 14–28 days of receiving the original decision. The AARPN Board will review the appeal to ensure that it meets the grounds for appeal and will oversee the appeal process. The Notice of Appeal should clearly state:

- Which grounds (procedural error or new evidence) the appeal is based on,
 - A detailed description of the alleged procedural error or new evidence,
 - Any supporting documents (if available).
1. Acknowledgment: The AARPN Ethics & Complaints Committee or its representative will acknowledge receipt of the appeal within 5 working days, outlining the next steps and indicative timelines for the appeal process.

9.3 Appeals Panel Composition

1. Independence: The Appeals Panel is composed of individuals who did not participate in the original Hearing Panel. This ensures impartiality and fairness.
2. Membership: Typically, the Appeals Panel will have 3 members, including at least one Certified Practicing Nutritionist (CPN) and one external/consumer representative.
3. Conflict of Interest: Panel members must declare any conflicts of interest. If a conflict is identified that member must be replaced to maintain objectivity.

9.4 Appeal Consideration and Hearing

1. Preliminary Review

- The Appeals Panel first reviews the Notice of Appeal to confirm it meets the grounds for appeal.
- If the Panel deems the appeal lacks merit (e.g., the evidence is not new or no procedural error is identified), it may dismiss the appeal without proceeding to a hearing.
- If accepted, the Panel proceeds with a formal review.

2. Investigation of Procedural Claims

- For procedural error appeals, the Panel reviews all relevant records (hearing transcripts, investigation reports) to determine whether due process was followed and whether any error affected the fairness of the original decision.

3. Review of New Evidence

- For new evidence appeals, the Panel assesses if the material is indeed new and if it significantly impacts the outcome.
- The Panel may schedule an oral hearing if clarification or additional testimony is needed.

4. Oral Hearing (if required)

- The Appellant (and Respondent, if applicable) may be invited to present statements or further clarification.
- The Appeals Panel may question both parties on procedural issues or new evidence.
- Parties may have a support person (not a lawyer/barrister) but no cross-examination typically occurs unless the Panel deems it necessary for fairness.

9.5 Possible Outcomes of an Appeal

After reviewing all information and conducting any required hearing, the Appeals Panel may:

1. Uphold the Original Decision: Conclude no procedural error occurred or the new evidence does not materially alter the findings.
2. Modify the Original Decision/Sanction: If a procedural error or new evidence reveals an oversight or warrants a lesser or alternative sanction, the Appeals Panel may adjust the outcome accordingly.
3. Overturn the Decision: If a serious procedural error is identified or the new evidence fundamentally changes the nature of the case, the Appeals Panel may reverse the initial decision.
4. Refer the Matter for Further Investigation: If the Panel deems more information is needed or a significant oversight occurred, it may send the complaint back to the Ethics & Complaints Committee for re-investigation or a new hearing with a different Hearing Panel.

9.6 Notification and Finality

1. Appeals Decision Letter: The Appeals Panel's final decision is documented in writing and sent to all parties, typically within 4–6 weeks (or longer if complexities arise).
2. Final and Binding: The Appeals Panel's decision is final. No further internal appeal processes exist.
3. Implementation of Outcome: If a sanction is upheld or revised, the AARPN Board (or delegated officer) ensures the sanction is promptly recorded, communicated, and publicly listed as applicable.

9.7 Record-Keeping and Confidentiality

1. Appeals Register: A separate appeals register is maintained, documenting the appeal grounds, review steps, outcome, and rationale.
2. **Confidentiality:** All appeal documents and discussions remain confidential, disclosed only to individuals who require the information to implement or review the decision.

9.8 Timeframes

- Appeals are typically reviewed within 4–6 weeks. Extensions apply if multiple parties or large volumes of new evidence are involved.
- Complex cases (e.g., multiple parties, international witnesses, large volumes of evidence) might extend beyond indicated timelines.
- Expected delays and the reasons will be communicated to the parties by the AARPN Ethics & Complaints Committee or their representative (e.g., waiting on external documents, scheduling witness interviews).

10. PUBLIC LISTING

10.1 Public Listing and Reporting to Authorities

The AARPN Board ensures that suspensions, terminations, and other significant sanctions are publicly

listed on the AARPN website for transparency and public safety. The Board also ensures that relevant external authorities, such as health funds or regulatory bodies, are notified when necessary.

- Suspensions or Terminations:
 - Public listing on the AARPN website (e.g., name, sanction, and effective date) for transparency and public safety.
 - Notification to external agencies (e.g., Health Funds) if they require AARPN certification for practice or provider status.
- Reporting:
 - If a practitioner is found guilty of criminal activity or severely unethical conduct, the AARPN Board will notify Health Complaints Commissioners, and other relevant regulatory bodies, or law enforcement if not already involved.

(AARPN will seek independent advice on the level of detail disclosed publicly when required.)

11. RECORDING AND REPORTING OF COMPLAINTS DATA

11.1 Complaints Register

A confidential **Complaints Register** is maintained with:

- De-identified data (unless public listing is required),
- Key timelines,
- Outcome details,
- Any recommended improvements or policy changes.

11.2 Annual Reporting

AARPN will compile and make available to relevant authorities, **de-identified** summary data of complaints annually including:

- Number of complaints received,
- Types of issues (Code breaches, Fitness to Practice, etc.),
- Outcomes (dismissal, mediation, sanctions, terminations),
- Any revisions to policies and procedures implemented in response to complaints.

12. CLOSING THE COMPLAINT

AARPN will keep comprehensive records about:

- How AARPN managed the complaint
- The outcome/s of the complaint (including whether it or any aspect of it was substantiated, any recommendations made to address problems identified and any decisions made on those recommendations, and
- Any outstanding actions that need to be followed up.

The AARPN Ethics & Complaints Committee will ensure that outcomes are properly implemented, monitored and reported to the AARPN Board of Directors.

13. ACCOUNTABILITY AND LEARNING

13.1 Analysis and evaluation of complaints

The Ethics & Complaints Committee will ensure that complaints are recorded in a systematic way so that information can be easily retrieved for reporting and analysis such that regular reports can be run on:

- the number of complaints received
- the outcome of complaints, including matters resolved at the frontline
- issues arising from complaints
- systemic issues identified, and
- the number of requests AARPN receive for internal and/or external review of its complaint handling.

The AARPN Board is responsible for reviewing and evaluating the analysis of complaints data, ensuring that the complaints handling process is effective and aligned with AARPN's goals. The Board also monitors trends and systemic issues arising from complaints and works to improve the process where necessary.

13.2 Monitoring of the complaint management system

AARPN will continually monitor its complaint management system to:

- ensure its effectiveness in responding to and resolving complaints, and
- identify and correct deficiencies in the operation of the system.
- Monitoring may include the use of audits, complaint satisfaction surveys and online listening tools and alerts.

14. CONTINUOUS IMPROVEMENT

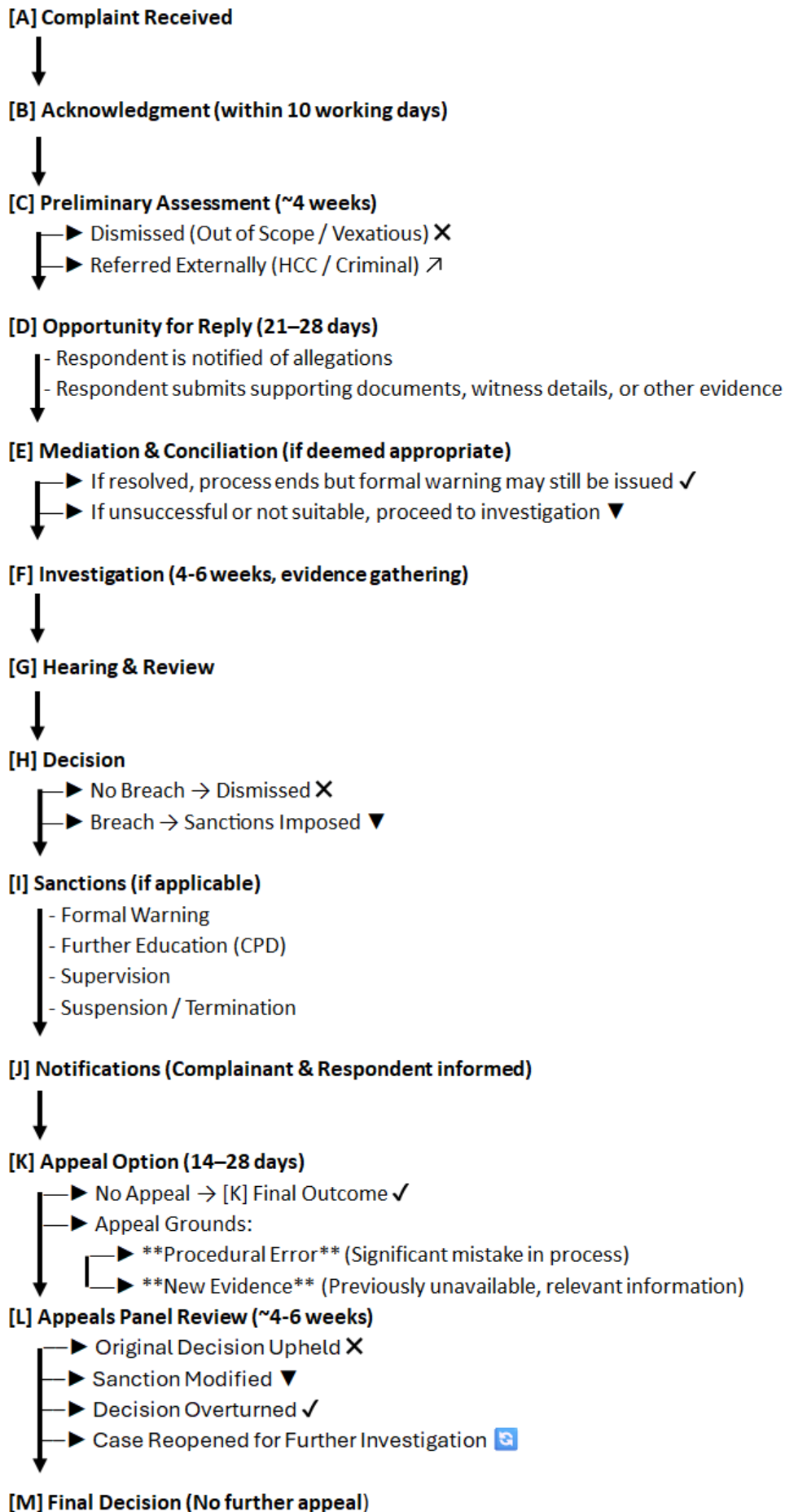
The AARPN Board will review the Complaints Policy annually and leads efforts to incorporate lessons learned from individual cases, stakeholder feedback, and updates in legislation or relevant guidelines. The Board is responsible for overseeing the continuous improvement of the complaints handling process to ensure its effectiveness, fairness, and compliance with legal and ethical standards. Changes to the Complaints Policy must aim to strengthen protections for the public and ensure fair, transparent processes for practitioners.

15. PUBLIC AWARENESS AND ACCESSIBILITY

- Complaint Forms are available on the AARPN website with clear timelines and contact details.
- AARPN will provide alternative formats (e.g., large print, plain language summaries, other languages) on request to admin@aarpn.com.
- To provide transparency for healthcare consumers and stakeholders, serious sanctions (e.g., suspension, termination) will be listed publicly on the AARPN website www.aarpn.com.

To lodge a complaint with AARPN
Email: admin@aarpn.com

16. PROCESS DIAGRAM



16.1 Process Diagram Explanation

- The **AARPN Complaint Handling Process** follows a structured approach to ensure transparency, fairness, and accountability in resolving complaints. The process begins with **Complaint Received (A)**, where AARPN registers the complaint and assigns a reference number. Within **10 working days**, the complainant is notified in the **Acknowledgment (B)** stage. Next, during **Preliminary Assessment (C)** (which takes approximately **4 weeks**), the complaint is evaluated for validity and jurisdiction. If the complaint is out of scope or vexatious, it is **dismissed**. If it involves criminal conduct or falls under the jurisdiction of a **Health Complaints Commissioner (HCC)**, it is referred externally. Otherwise, CPN is given the **Opportunity to Reply (D)**. If mediation or conciliation is appropriate, AARPN facilitates resolution, and if successful, the process ends (**E**). Otherwise, the complaint proceeds to **Investigation (F)**, which typically takes **4-6 weeks**. An **Investigation Officer** gathers evidence, interviews relevant parties, and provides updates every few weeks.
- Following the investigation, the case moves to **Hearing & Review (G)**, where the **Ethics & Complaints Committee** assesses all collected evidence. At the **Decision (H)** stage, if no breach is found, the case is dismissed. However, if a breach is identified, sanctions are imposed under **Sanctions (I)**, which may include a **Formal Warning, Further Education (CPD), Supervision, Suspension, or Termination** of membership. After a decision is made, both the **Complainant and Respondent are notified (J)**. At this point, the respondent has **14-28 days** to file an **Appeal (K)** if they believe a procedural error occurred or if new evidence has emerged. If no appeal is submitted, the case reaches **Final Outcome (L)**, and the imposed sanctions stand.
- If an **Appeal (K)** is submitted, the case is escalated to the **Appeals Panel Review (L)**, which takes approximately **4-6 weeks**. The **Appeals Panel** then evaluates the case, considering whether the original decision should be upheld, modified, overturned, or reopened for further investigation. The possible **Appeal Outcomes** include: (1) **Original Decision Upheld**, where the initial ruling stands; (2) **Sanction Modified**, where the penalty is adjusted; (3) **Decision Overturned**, where the appeal results in a complete reversal; or (4) **Case Reopened for Further Investigation**, if significant procedural errors or new critical evidence are found. Once the **Final Decision (M)** is made by the **Appeals Panel**, the process concludes, and no further internal appeals are permitted.