



ROYAL AUSTRALIAN AND NEW ZEALAND COLLEGE OF OPHTHALMOLOGISTS COMPLAINTS FORM

Office Use Only	Date Received	Identified/Anonymous	Complaint Number	Complaint Officer

The *Royal Australian and New Zealand College of Ophthalmologists (RANZCO)* is committed to providing a safe, timely and effective mechanism for dealing with complaints.

All complaints are managed in accordance with the RANZCO Complaints Resolution Policy. A link to the Complaints Resolution Policy can be found [here](#)

RANZCO shall action your complaints within seven (7) days of receipt and shall keep you informed as your complaint progresses.

Please complete all the information including **Required Consent** below before submitting.

Required Information

About You	
Note 1	Name:
	Address:
	Phone:
	Email:
Note 2	Do you wish your Complaint to be de-identified? Yes No
Note 3	Specify which group you belong to: Fellow Trainee SIMG Other please specify:
Note 4	Specify your relationship to the subject matter of the complaint i.e. colleague, patient etc.

About the complaint	
Note 5	Describe what the complaint is about (specify all relevant facts, matters and issues):

Note 5 (cont)	Please describe the setting in which the relevant conduct occurred:
	How have you personally been affected by the relevant conduct?
	<p>Does your complaint relate to a breach of the RANZCO Code of Conduct?</p> <p>Yes</p> <p>No</p> <p>Unsure</p> <p>If yes, please provide details of any alleged breach with reference to the <i>Code of Conduct</i>:</p> <p>A link to the RANZCO Code of Conduct can be found here</p>
	<p>Does your complaint involve:</p> <p>Discrimination</p> <p>Bullying</p> <p>Harassment</p> <p>Sexual Harassment</p> <p>A link to the RANZCO <i>Discrimination, Harassment and Bullying Policy</i> can be found here</p>
	Name of the person you are making a complaint about (if known):

Note 5 (cont)

Has your complaint previously been referred to any other person, organisation, government department or agency?

Yes No

If yes, please identify:

(a) the name of the organisation/government department or agency

.....

(b) the date of complaint

.....

(c) the nature of the complaint

Is the subject matter of your Complaint the subject of any known litigation or complaints resolution process?

Yes No

If yes, please provide relevant details:

.....

Please specify the redress or solution you are seeking:

Please attach all relevant materials, documents and evidence you consider relevant to your Complaint:

Required Consent

To effectively manage your complaint, the College will need to have your complaint assessed by the College Complaints Committee and possibly the College's Code of Conduct Committee and may need to contact a third party, including the person(s) or organisation(s) that you have complained about (see Paragraph 8 of the Complaints Resolution Policy). Failure to allow disclosure of your identity to third parties or the person you have complained about will most likely severely restrict any action the College can take.

I, [insert print your full name]

permit RANZCO to disclose my identity and the details of my complaint to the Subject of the complaint and other parties as permitted under the *Complaints Resolution Policy*.

Signed:.....

Dated:

Lodging your Complaint

Please submit your signed completed form together with all materials, documents and evidence you consider relevant to your complaint to the complaints mailbox: complaints@ranzco.org

If you have not received acknowledgement of your complaint within seven (7) business days or for any queries please contact the Complaints Officer on (02) 9690 1001.

Your Privacy

This form includes personal information, including your name and contact details. RANZCO handles all personal information in accordance with the Privacy Act 1998 (Cth). RANZCO will use relevant personal information to assess your complaint and respond to you. It may be necessary for RANZCO to disclose relevant information to the person or organisation you have complained about so that they can provide a response. To enable RANZCO to effectively address your concerns, we may also disclose your personal information to employing hospitals, other institutions involved with your complaint and relevant government authorities.

Next Step

A Complaints Officer shall acknowledge receipt of your complaint. The complaint shall proceed to Initial Consideration where the most appropriate Complaints Path shall be determined. The Complaints Officer may request additional information from you to permit the Initial Consideration.

Notes:

1. If a complaint is made under the CRP, the identity of the person making a complaint shall accompany the complaint at all times unless the Complainant requests in writing de-identification of the Complainant and such de-identification is, in the opinion of the Complaints Manager, reasonably necessary and not prejudicial to any relevant interest (8.4).
2. You do not have to be a Fellow, Trainee or SIMG to lodge a complaint. A complaint can be made by anyone identified in paragraph 5.1 of the CRP.
3. You do not have to have any relationship with the subject matter of the complaint to make a complaint. If you are aware of facts, matters or issues that justify a complaint, the College welcomes your notification. The nature of the information you are able to give will however be relevant to how your complaint is handled by the College.
4. The College will not accept a complaint and shall not deal with matters that a Complaints Officer reasonably considers to be vexatious, trivial or which seeks to challenge the decisions specified in paragraph 9.1 of the CRP.