

General Warning

The purpose of this fact sheet is to give general introductory information about the complaints process. It does not contain legal advice.

WARNING: Alternative legal action should be considered before making a complaint. What is included in a complaint may be relevant to any current or future legal proceedings. If you are involved in legal action you should immediately see a lawyer and not proceed with a complaint.

If you (or the complainant, if you are complaining on their behalf) want financial compensation, support or money you should see a lawyer before making a complaint.

General complaint information

Complaints are rarely about just one thing. When you have a problem, it may be that a number of things have gone wrong. Below are some of the common areas where issues may arise that could lead to a complaint.

Discrimination	Disability and NDIS services	Policing, Custody and Detention
Seniors and Aged Care supports and services	Consumer and Business disputes	Phone and Internet services
Banking, Insurance and Superannuation	Energy and Water services	Housing and Real Estate
Health Care services	Employment issues	Education and Training providers
Government Agencies and Departments	Child Safety and Protection	State Fines and Debts
Corruption	Privacy and Access to Information	Media and Publications

There are different complaint bodies to handle different types of complaints. You should consider the different pathways available to decide the most appropriate pathway for your circumstances. One event could lead to multiple complaints. That means you may need to lodge more than one complaint to have all of your concerns addressed.

The online triage tool on this website can help you to identify the different complaint bodies that may be able to assist you.

It is usually quickest and easiest to try to resolve a complaint directly with the person or body you are having a problem with. Many complaint handling bodies will not act on a complaint unless you have tried to resolve your complaint directly. If you do not feel it is safe or appropriate to complain directly, you should contact the relevant complaint body to discuss your situation.

Complaints involving discrimination

There are state and federal complaints bodies that handle complaints that about discrimination. If your situation involves discrimination, you should consider making a discrimination complaint in addition to any other complaints. Discrimination may occur when someone is treated less favourably on the basis of: race; sex; gender; disability; age; sexuality; relationship status; pregnancy; caring responsibilities; or having or being thought to have an infectious disease.

WARNING: The state and federal bodies that handle discrimination complaints have different rules, including time limits. You can make a complaint to both the state and federal complaint bodies, but they may decide not to address your concerns if you have already complained elsewhere. For example, if you have already lodged a discrimination complaint to anti-discrimination NSW, it is likely that Australian Human Rights Commission will decide not to act on your complaint. Please carefully review the discrimination factsheets for information about your options before making a discrimination complaint.

Mental Health and Wellbeing Commission

In this fact sheet, we introduce the Victorian Mental Health and Wellbeing Commission ('**MHWC**') and outline how complaints can be made to the MHWC.

The MHWC is an independent statutory authority that holds government to account for the performance, quality and safety of Victoria's mental health and wellbeing system. The MHWC handles complaints about Victorian publicly funded mental health and wellbeing services, which include mental health and wellbeing services run and delivered by a public hospital in Victoria.

Complaints to the MHWC are often about difficulties in accessing publicly funded mental health and wellbeing services, or the treatment and care provided by them.

Legislation and Key Terms

Relevant Legislation:

The Mental Health and Wellbeing Commission (**MHWC**) is established under the *Mental Health and Wellbeing Act 2022 (Vic)* (**MHW Act**). The MHWC may also interact with other regulatory frameworks (such as the [Health Practitioner Regulation National Law](#)), but it is not established under them.

Below are links to legislation that is relevant to the Mental Health and Wellbeing Commission's complaint handling work.

- [Mental Health and Wellbeing Act 2022 \(Vic\)](#)

Key Terms: Below are key terms that appear throughout this factsheet and their meaning.

Carer: A person (often family or friend) who provides care and support to someone living with mental illness or psychological distress.

Complaint: An expression of dissatisfaction about a mental health or wellbeing service where you want or expect a response or resolution.

Complainant: A person who makes a complaint.

Consumer: A person receiving, or who has received, mental health and wellbeing services.

Independent Body: The MHWC is separate from government departments and service providers, which means it can act impartially when handling complaints.

Jurisdiction: The areas and types of services the MHWC has the legal power to deal with under the Mental Health and Wellbeing Act 2022 (Vic).

MHCSS (Mental Health Community Support Services): Non-clinical, community-based support services for people with mental illness or psychological distress.

MHW Act: The Mental Health and Wellbeing Act 2022 (Vic), which sets out people's rights and the MHWC's powers.

MHWC (Mental Health and Wellbeing Commission): The independent body that deals with complaints about Victorian public mental health and wellbeing services.

Order: A formal direction the MHWC can issue to require a service provider to take action.

Remedy: The outcome you can seek from the MHWC, such as an apology, explanation, service improvement, or systemic change.

Respondent: The mental health service provider the complaint is made against.

Rights: Legal protections under the Mental Health and Wellbeing Act 2022 (Vic), including the right to be treated with dignity, to be involved in decisions, and to receive safe and responsive care.

Service Provider: A public mental health or wellbeing service (including MHCSS) that delivers care and can be the subject of complaints.

Systemic Issues: Broader or repeated problems in the mental health system that affect many people, which the MHWC can investigate and address.

Step 1: What type of Complaints can be made to this body?

The MHWC can address a wide range of complaints about public mental health and wellbeing services in Victoria. These include complaints from people receiving services (consumers), as well as from carers, family members, or other supporters.

A) Treatment and Care Issues

Sub-category	Example
Poor quality treatment or care <i>MHW Act s431(a) & s432(a)</i>	You should complain if the care or treatment you received was inappropriate, insufficient, or below expected standards. This includes situations where staff were unhelpful, neglectful, or did not provide proper support for your mental health needs. Note: The MHWC can look into concerns about the services provided to you, including the quality and safety of your treatment and whether it met required standards. Under the law, you can complain about any matter arising out of the provision of a mental health service to you. This covers things like inadequate care, mistakes in treatment, or being treated without respect. <i>Examples</i> • <i>Gerry is a parent and carer for his daughter Sarah, a young adult. Sarah was discharged home without arrangements for support or follow up after she had harmed herself on many occasions. Gerry had continued to watch Sarah's mental health deteriorate and he was concerned that there might be a catastrophic outcome when Sarah harmed herself again. He said that each time he contacted the service provider, he felt unsupported, and he did not know how to help his daughter.</i> • <i>George is a patient of a mental health ward and found that nurses often ignored his requests for help and once gave him the wrong medication dose, making him feel sick. He felt he wasn't receiving proper care or attention.</i>
Unsafe or harmful practices <i>MHW Act s18 & 19</i>	You should complain if the service used practices that put you or others at risk of harm or was too restrictive or forceful when it wasn't necessary. For example, you should complain if you were subjected to seclusion, restraint, or heavy sedation without good reason, or if the environment was unsafe (e.g. hazards on the ward). Note: Mental health services must provide care in the least restrictive way possible, respecting your rights and dignity. They should only use restraints or other restrictive measures as a last resort. If you feel the staff's actions were unsafe, excessively forceful, or breached professional standards, the MHWC can investigate. This might include cases where safety protocols weren't followed or where you were left in a dangerous situation during care. <i>Example: During a home visit, a Crisis Assessment team arrived unannounced and physically restrained Brian in front of his friends for refusing medication, even though he wasn't violent. He felt this was</i>

	<i>unprofessional, harmful to his reputation, and not the “least restrictive” approach.</i>
Peer workers and lived experience staff	You should complain if the support you received from a peer worker or lived experience staff member was unhelpful, inappropriate, or made you feel unsafe. This includes situations where they breached your trust, acted unprofessionally, or didn't provide the kind of support you needed as part of your mental health care. <i>Example: Jessie was receiving support from a peer worker at her local mental health service. She later found out the peer worker had shared personal details about her with another consumer. Jessie felt betrayed and unsafe continuing to use the service.</i>
B) Access and Inclusion Issues	
Difficulty accessing services (being refused or delayed care) <i>MHW Act s431(b) & s432(b)</i>	You should complain if you were denied access to a public mental health service or faced unreasonable barriers in getting help. For instance, you might complain if a hospital turned you away in a crisis, if wait times were excessively long without support, or if you couldn't access a service you needed. Note: The Commission handles complaints about access to services, including situations where you feel you should have received care but didn't. Under the law this is described as a failure to provide a mental health and wellbeing service to you when one should have been provided. Everyone has the right to receive timely and appropriate mental health care, so if you were left without help or turned away unfairly, it's a valid complaint. <i>Example: A young woman experiencing severe anxiety tried to get an appointment at a public clinic but was told they wouldn't see her because her case “wasn't serious enough.” Later, during a panic attack, the hospital also refused to admit her due to bed shortages. She feels abandoned and at risk.</i>
Lack of involvement or respect for families and carers <i>MHW Act s20</i>	Carers, family members, or other support people should complain if their role was ignored or disrespected by the service. For example, if you are a parent, partner or friend supporting a consumer and the service excluded you from important discussions (when the consumer consented to your involvement), dismissed your concerns, or failed to recognise your needs as a carer, you can raise a complaint. Note: The MHWC accepts complaints from carers, families and kin about their own experience or on behalf of the consumer. Services are expected to uphold the Family and Carers principle, meaning they should involve and support carers in care decisions whenever possible. If a mental health service did not communicate with you as a carer, failed to consider your insight, or treated you poorly, the Commission can address this. (Consumer consent may be needed if it involves personal health details, but you can discuss this with the MHWC.) <i>Example: A father caring for his adult son noticed his son's condition was worsening after hospital discharge, but the mental health team would not listen to his pleas or include him in follow-up planning. He felt dismissed and unsupported in his caring role.</i>

C) Rights, Respect and Dignity Issues

Not upholding rights, dignity, or the principles of care

MHW Act s431(c) & s432(c)

You should complain if the service did not respect your basic rights or the principles of good mental health care. This could mean you weren't treated with dignity, your autonomy or choices were ignored, or you weren't involved in decisions about your treatment. Examples include staff making decisions about you without your input, not informing you of your rights, ignoring your advance statement or treatment preferences, or treating you in a degrading way.

Note: Victorian law requires services to make "all reasonable efforts to comply with the mental health and wellbeing principles" in the Act. These principles include things like respecting your dignity and autonomy, supporting you to make or participate in decisions about your care, using the least restrictive options, and valuing your recovery and identity. If these principles (and any rights under the law) were not upheld, for instance, if you were forced into a treatment without any explanation or your views were ignored, you have grounds to complain. The Commission is empowered to address breaches of your rights or the mental health principles, and ensure the service remedies the situation.

Example: While receiving compulsory treatment, James was never consulted about his care plan. Decisions about medications and interventions were made without asking his preferences, and staff refused to consider an advance statement he had written outlining his treatment wishes. James felt his right to be involved in his own care was being violated.

Discrimination or cultural disrespect

MHW Act s25 & s26

You should complain if you believe you were treated unfairly, harassed, or given inferior care because of who you are – for example, due to your race, culture, language, gender, sexual orientation, age, disability, or other personal attributes. This includes situations where services were not culturally safe or sensitive to your needs (e.g. not providing an interpreter when needed, or making you feel unwelcome because of your background).

Note: Mental health services must be inclusive and free of discrimination. The law explicitly states that a person's diverse characteristics (culture, language, gender, etc.) should be actively considered, and services must be provided in a manner that is safe, sensitive and responsive to that diversity. If staff make derogatory comments about your identity, fail to accommodate cultural or religious needs, or if you feel you were refused appropriate care due to prejudice, you can complain to the MHWC. Such discriminatory or culturally insensitive practices violate the principles and duties under the Act, and the Commission can hold services accountable for this.

Example: A First Nations woman felt that staff at a mental health clinic were dismissive and culturally insensitive toward her. They made stereotypical comments about her community and failed to connect her with an Aboriginal health worker or culturally appropriate support. She believed she was receiving poorer service because of her background.

Breaches of privacy or confidentiality <i>MHW Act s442, s431(c) & s432(c)</i>	You should complain if the service did not protect your private information or personal dignity. This includes cases where your confidential health information was improperly shared without consent, your records were mishandled, or your privacy was not respected during treatment (for example, sensitive discussions held in public areas, or not providing you with a private space when needed). Note: Mental health services have a duty to protect your privacy and confidentiality. Your personal health information should be kept secure and only shared in line with privacy laws or with your permission. If a service breaches your privacy, for instance, by giving out details of your diagnosis or treatment to others without consent, or losing your records, it is a valid complaint. The MHWC can look into privacy breaches as part of its role overseeing whether services follow all duties under the Act (and other applicable laws). In some cases, privacy complaints might also involve the Information Commissioner, but the MHWC can handle concerns about how a mental health service managed your information. <i>Example: After Jane was discharged, she discovered that the hospital had accidentally emailed her treatment summary to another patient with a similar name. This document contained very personal details about her mental health. Jane was distressed that her confidentiality was violated.</i>
D) Complaint Handling and Accountability Issues	
Poor handling of your complaint by the service <i>MHW Act s431(d) & s432(d)</i>	You should complain if you previously raised a concern or complaint with the mental health service itself and they handled it badly or not at all. For instance, you should complain to the MHWC if the service ignored your complaint, delayed unreasonably, provided a dismissive response, or retaliated against you for complaining. Essentially, if you're not satisfied with how the service dealt with your grievance, you can escalate it. Note: One of the MHWC's roles is to address situations "where a complaint made to a mental health service provider was handled poorly or not in line with required complaint handling standards." In fact, you can specifically complain about the manner in which the provider handled (or failed to handle) your complaint. Services are required to follow proper complaint processes and complaint handling standards, treating complainants fairly. If they did not investigate your issue, did not fix the problem, or if the internal complaint process was flawed, the Commission can intervene. This ensures that the service is held accountable for responding to complaints appropriately. <i>Example: Maria submitted a written complaint to the hospital's mental health unit about a staff member who was consistently rude to her. After waiting eight weeks, she only received a brief letter that failed to address most of her points, and no action was taken. Maria felt the hospital's response was dismissive and unhelpful.</i>
Systemic or service-wide problems <i>MHW Act s285 & s325</i>	You should complain if you notice broader issues affecting many people at the service, not just yourself. These could be systemic problems like persistent understaffing, poor facility conditions, a culture of disrespect across the ward, or an unsafe environment for all patients. Even if your concern isn't about one specific incident, you can raise it if it highlights a pattern or system failure in the service.

	Note: The Commission is empowered to address not only individual cases but also systemic issues in mental health services. If your complaint points to a widespread problem (for example, a policy that routinely breaches patients' rights or a recurring safety hazard), the MHWC can treat it seriously and may investigate on a larger scale. There is "no wrong door" for concerns. Even if your issue is broad or complex, the MHWC will either handle it or help direct it to the right place. By complaining about systemic issues, you help the Commission identify areas where multiple consumers or carers are being affected and push for service-wide improvements. <i>Example: A former patient noticed that almost every time she visited the community mental health clinic, appointments ran hours late and people in crisis were left waiting without support. She also saw that many staff appeared overworked, and communication was chaotic, leading to mistakes in care plans for various clients.</i>
Failure to make promised improvements (lack of follow-through) <i>MHW Act s502</i>	You should complain if a mental health service agreed to make improvements or take certain actions after a complaint or incident, but then failed to follow through. For example, if the service promised to implement new staff training, update a policy, or take specific steps to prevent a problem from happening again, and you later find out they haven't done so, you should notify the Commission. Note: The MHWC's job doesn't end when a complaint is resolved; it also monitors whether services actually implement the actions or improvements they agreed to. The Commission can seek formal undertakings (promises) from a service to fix issues and even issue compliance notices to ensure changes are made. If a service fails to honour an agreed improvement plan or ignores recommendations, the Commission takes that very seriously. Such a failure can itself be the subject of a complaint or a follow-up investigation by the MHWC to hold the service accountable. In short, if the service hasn't done what it said it would do to improve, the Commission can step in again to enforce those improvements. <i>Example: After several people complained about night-time safety on a psychiatric ward, the hospital agreed to install additional security cameras and provide de-escalation training for staff. Six months later, a patient's family found out these measures still hadn't been implemented, and aggressive incidents were still occurring.</i>
Improper or unprofessional conduct by staff (uncovered by investigation) <i>MHW Act s476</i>	You should complain (or alert the Commission) if you become aware of serious misconduct or unethical behaviour by mental health staff or the service, especially if this comes to light during a complaint investigation. This could include staff bullying or abusing patients, falsifying records, lying about incidents, or any conduct that grossly breaches professional standards and trust. Even if you didn't initially know about the misconduct, once it's uncovered (by you or through an investigation), it should be addressed. Note: The MHWC has powers to investigate complaints in depth, and sometimes this process reveals deeper problems or wrongdoing. The Commission can launch its own investigations into a service (or individuals within it) if needed. If improper conduct by staff is uncovered, say, evidence that staff were mistreating consumers off the record or covering up issues, the Commission can ensure that this is acted upon. This might involve recommending disciplinary action by the service, referring matters to other authorities (like a professional board or police, if laws were broken), or

	otherwise making sure the misconduct is not swept under the rug. Essentially, any serious abuse of power or trust in a public mental health service falls under what you can complain about, since it arises out of the service being provided and violates the duties under the Act. <i>Example: During the Commission's investigation into a patient's complaint about rough handling, it emerged that two staff members had been routinely mocking and belittling patients in a private staff chat group. This improper conduct was not known to the patient initially. Once uncovered, the MHWC treated it as a serious issue. The Commission ensured the service took action against the staff involved and implemented measures to prevent such unprofessional behaviour.</i>
Exclusions	
Exclusions	The Victorian Mental Health and Wellbeing Commission cannot accept the following types of complaints: • Dissatisfaction with a diagnosis alone: The MHWC cannot review or overturn a mental health diagnosis unless there is a related complaint about treatment, rights breaches, or misconduct arising from that diagnosis. • Request for a second opinion: The MHWC does not arrange or compel services to provide second opinions. These are clinical decisions and not considered complaints unless tied to rights breaches or treatment failures. • Clinical decisions made within acceptable standards: You cannot complain simply because you disagree with a decision (e.g. choice of medication or treatment plan) if the decision was made lawfully, respectfully, and in line with clinical standards and the Mental Health and Wellbeing Act 2022. • Complaints about Mental Health Tribunal decisions: You cannot complain simply because you disagree with a Mental Health Tribunal decision (like a compulsory treatment order). However, you can complain about how the decision was carried out. For example, if your rights were breached during treatment. • Involuntary treatment without accompanying rights breaches: Being placed on a compulsory treatment order is not, on its own, a valid complaint. The MHWC can only intervene if the way the treatment was provided breaches rights, principles, or duties under the Act. • Personal grievances between consumers and other patients: The MHWC cannot manage disputes or conflicts between consumers unless a service provider failed to respond appropriately or failed in their duty of care. • Requests to access or correct medical records: These are handled under health records or privacy legislation, not through a complaint to the MHWC unless the mishandling itself forms part of a broader rights or care issue. • Criminal allegations against consumers: Complaints about alleged criminal behaviour by other consumers (e.g. assault by

	another patient) must be reported to Victoria Police, unless the service provider failed to manage the situation or uphold safety.
Additional Info	• You do not need to know the exact law breached to make a complaint: You can simply describe your concern or experience in plain language. The MHWC will assess which principles, rights, or obligations may apply. • Complaints can be made anonymously or confidentially: While anonymous complaints can be accepted, they may limit the MHWC's ability to investigate or achieve outcomes. Confidential complaints protect your identity from the service provider but still allow the MHWC to act. • Complaints may be resolved informally: The MHWC often starts with early resolution or conciliation, and only conducts formal investigations where necessary or where informal resolution isn't possible. • You can still complain if you're under compulsory treatment: Being on a treatment order or admitted involuntarily does not stop you from making a complaint about how you were treated or your rights. • The MHWC can also initiate systemic investigations: Even if you don't submit a complaint, the Commission can investigate a service if they become aware of a serious or systemic issue (MHW Act s325).

Step 2: What is the Jurisdiction of the complaints body?

Jurisdiction	Description
State	The MHWC has the power to hear complaints under the <i>Mental Health and Wellbeing Act 2022 (Act)</i> which is a Victorian piece of law. MHWC is established under Chapter 9 of the Act. Part 9.2 of the Act provides for the complaints process discussed in this information sheet. Part 9.4 of the Act provides for investigations that the MHWC can conduct either due to a complaint or of its own initiative.
Geographical Scope	The limitation is that the services complained about must be funded by the Victorian Government. This generally means they are designed to be provided in Victoria but not necessarily. Please contact the MHWC to discuss if you are not sure.
Time limitations ¹	A person is not entitled to make a complaint to the MHWC: • more than 12 months after the matter occurred which is the subject of the complaint; or • if the mental health and wellbeing service was not provided, more than 12 months after the mental health and wellbeing service was sought.

¹ Section 434 of the Act.

	However, MHWC may exercise discretion to deal with a complaint lodged after the end of the 12-month period if MHWC is satisfied that the circumstances of the complaint so require.
Exclusions	The MHWC cannot handle: • Services outside Victoria: The MHWC only handles complaints about public mental health and wellbeing services delivered within Victoria. If the treatment or service occurred in another state or territory (or overseas), the MHWC has no jurisdiction, even if the provider is also registered in Victoria. • Private mental health services or federal programs: Although this overlaps with respondent type, it is jurisdictionally relevant: the MHWC cannot accept complaints about services funded or managed by the Commonwealth Government (such as Medicare-funded psychologists or aged care mental health programs), or services delivered solely by the private sector. • Events that occurred more than 12 months ago: In most cases, the MHWC cannot investigate complaints about events that occurred more than 12 months before the date of the complaint. ○ Exceptions may apply if the Commission considers it reasonable, such as where the person was unwell, fearful of retaliation, or unaware they could complain. • Anticipated or hypothetical complaints: The MHWC cannot accept complaints about something that has not yet happened, such as a worry about future treatment unless there is an active policy or decision that is already impacting the person. • Out-of-scope service locations: If a service was delivered in a non-mental health setting (e.g. a general hospital ward, prison, school, or NDIS-funded service), the MHWC may lack jurisdiction unless the service provided was funded or designated as a public mental health service under Victorian law.
Exercise of discretion	The MHWC does not have to investigate every complaint it receives. When deciding whether to investigate, the MHWC can consider any matters it considers appropriate or relevant. Some of the factors that will commonly be considered include whether: • the MHWC is satisfied that the complaint is misconceived, lacking in substance or otherwise does not warrant action; or • the MHWC is satisfied that the complaint is not made in good faith; or • the MHWC is satisfied that the complaint is made for an improper purpose;

- the MHWC does not have jurisdiction to deal with the complaint; or
- the complainant has not complied with the procedure for making complaints; or
- the complainant does not comply with a request for more information within the time specified by the MHWC; or
- the MHWC is satisfied that there is no reasonable prospect of resolving the complaint by the use of a complaint resolution process and the complaint should not be investigated; or
- the subject matter of the complaint comes within the jurisdiction of a court, tribunal or other body; or
- the subject matter of the complaint is before a court, tribunal or other body or has been determined by a court tribunal or other body; or
- the mental health and wellbeing service provider that is a party to the complaint has taken action that the MHWC, after considering any advice from the complainant, is satisfied has resolved the complaint; or
- the complaint has been withdrawn; or
- the MHWC otherwise considers it appropriate to do so.

If the MHWC does not accept your review application the MHWC will send you a letter telling you that MHWC has declined to accept, or has dismissed, your application and explain why.

Example: After a hospital apologised and retrained staff following a previous complaint, Jake tried to complain again about the same issue. MHWC decided not to reopen it because the matter had already been resolved.

Step 3: Who can you make a complaint against?

The MHWC has the power to act on complaints about the conduct of complaints about Victorian publicly funded mental health and wellbeing services.

Respondent	Description
Individuals	Mental health professionals, support workers, peer workers, and other staff members delivering mental health or wellbeing services funded by the Victorian Government. This includes doctors, nurses, allied health practitioners, case workers, admin staff, and outreach workers, as long as they work in a public setting or under a government-funded program.
Non-clinical – Public Victorian	Organisations funded by the Victorian Government to deliver non-clinical support, also known as Mental Health Community Support Services (MHCSS). These services focus on psychosocial support,

mental health and wellbeing service	recovery, community participation, and wellbeing, rather than medical treatment.
Clinical – Public hospitals and mental health care facilities	Public hospitals and designated mental health care facilities that provide clinical services such as assessment, diagnosis, treatment, and medication management. These are often referred to as "area mental health services" and are managed by general health services or public health networks.
Mental Health and Wellbeing Locals	New local hubs funded and overseen by the Victorian Government that provide early intervention, recovery-focused support, and wellbeing care for people aged 26 and over. These include both clinical and non-clinical staff and operate under the public mental health system.
Youth Area Mental Health and Wellbeing Services	Designated youth-focused public services delivering care to young people (generally ages 12–25), funded by the state. Complaints can be made about services delivered in youth inpatient units, outpatient teams, and community outreach programs.
Aged Persons Mental Health Services	Public services that support older adults with mental illness, including inpatient units, residential programs, and community-based assessment teams, when funded and operated under the public system.
Specialist or forensic mental health services	Public services that provide mental health care to people involved in the justice system (such as those in prisons or forensic hospitals), as long as those services are funded or designated by the Victorian Government.
Mobile support and intervention services	Crisis Assessment and Treatment (CAT) Teams and similar mobile response services that respond to people in mental health crisis in the community. These are public services and fall within MHWC's scope.
Designated mental health service providers	Any organisation or entity formally designated by the Secretary to the Department of Health under the Act as a mental health and wellbeing service provider. This designation brings them within the jurisdiction of the MHWC.
Exclusions	These are people or services the MHWC cannot investigate because they fall outside its legal jurisdiction, even if they are involved in mental health care. • Private hospitals and private mental health clinics: Privately operated facilities providing psychiatric care or psychological treatment without Victorian Government funding. Complaints about these services should be directed to the Health Complaints Commissioner (HCC). • Private psychiatrists, psychologists, counsellors, and general practitioners (GPs): Independently practising clinicians who operate outside the public system or are only funded through Medicare, private health insurance, or out-of-pocket billing. These are not within MHWC's jurisdiction.

	• Services funded solely by the Commonwealth Government: This includes programs run by Primary Health Networks (PHNs), Head to Health centres, and federally funded aged care mental health programs. • NDIS providers and disability services (unless also funded for mental health): The MHWC cannot deal with complaints about NDIS services unless the provider is separately funded by the Victorian Government to deliver public mental health and wellbeing services. • Unregistered or informal community groups: Volunteer peer groups, social media support forums, and community collectives that are not contracted or funded by the Victorian Government to provide mental health services. • Complaints that are solely about a regulated health practitioner's professional conduct: If a complaint relates solely to a registered clinician's conduct (e.g. ethical breach, boundary violation), and not to the service as a whole, it must be referred to Ahpra and the relevant National Board under the National Law.
Additional information you need to know	If you are not sure if your complaint is within the jurisdiction of the MHWC you can discuss your situation with the MHWC by calling 1800 246 054 (free call) between 9:00 am and 4:30 pm, Monday to Friday, except for public holidays. More information about the types of complaints MHWC can and cannot handle can also be found on their website here.

Step 4: Are you eligible to make a complaint?

Eligibility	Description
Who can make a complaint?	Anyone can make a complaint to the Mental Health and Wellbeing Commission (MHWC), you do not need to be an Australian citizen or permanent resident. Making a complaint won't affect your visa, and your privacy will always be protected. If you are a consumer (someone receiving mental health care) You can make a complaint about: • The care or support you received from a public mental health or wellbeing service. • A time when you should have received help, but didn't. • The way you were treated, especially if your rights, dignity, or needs weren't respected. • How the service responded (or failed to respond) when you made a complaint to them.

	If you are a carer, family member, or supporter of a consumer You can make a complaint about your own experience, for example, if you were ignored, disrespected, or not supported while caring for someone using a public mental health service. You can complain if: • The service didn't follow the principles in the law (e.g. by excluding you from planning or failing to communicate with you). • The service didn't deal properly with a complaint you made about your experience as a carer or support person. If your complaint is about your experience as a carer, you don't need the consumer's consent. If your complaint involves their medical information, you will usually need their consent. If the MHWC needs to look at the consumer's health details to handle the complaint, you will need their consent.
Pre-requisite steps	No specific pre-requisite steps apply, however before making a complaint to the MHWC, it is useful to contact the organisation your complaint relates to first to discuss the issue. Talking to the agency or Minister is often a quick and easy way of resolving issues or understanding why something has occurred. It allows you to communicate directly with organisation, so they understand your concerns and what you want. If the issue isn't resolved, you can then make a complaint to the MHWC.
Can a complaint be made on behalf of someone?	You can make a complaint on someone's behalf from carers, family members and supporters about their own experiences or on behalf of a consumer. Consumer consent may be required depending on the nature of the complaint, please contact the MHWC to discuss.
Exclusions	These exclusions apply when a person wants to make a complaint to the MHWC but is not eligible based on their relationship to the complaint or their ability to provide the necessary consent. • A person making a complaint on behalf of someone else without their consent (when consent is required): If you're making a complaint on behalf of a consumer and the MHWC needs to access their personal information to resolve it, but the consumer does not give permission, then your complaint may be excluded. ○ Exception: If the consumer lacks capacity (e.g. due to age or mental illness), the MHWC may accept complaints from guardians, legal representatives, or those with appropriate authority. • A person with no direct experience of the service: The MHWC will not generally accept complaints from someone who has no direct involvement — such as someone who simply “heard about” an incident but is not the consumer,

	carer, family member, supporter, or someone with legal standing. ○ Exception: If the information points to a serious risk or systemic issue, the MHWC may still initiate its own inquiry. • Complaints made by anonymous individuals, if necessary details cannot be confirmed: Anonymous complaints are allowed, but if the MHWC cannot verify key details or follow up due to lack of information, the complaint may not be progressed. • Complaints made with malicious intent or not in good faith: If a person makes a complaint solely to harm someone's reputation, harass staff, or for a purpose unrelated to improving care or resolving issues, the MHWC may dismiss it as an abuse of process. • Where the complainant has already made the same complaint and it has been dealt with: If you've already made the same complaint to the MHWC or the provider and it has been properly resolved, the MHWC may not take it further.
Additional information you need to know	The MHWC's services are free. You do not need a lawyer for the complaint process, but you can seek legal advice at any time. The MHWC has some powers with respect to preliminary options for responding to a complaint. These include: • Provide advice to the complainant about the options available to resolve the complaint; or • Attempt early resolution of the complaint with all or any of: the complainant, the Service Provider, or the consumer (if they are not the complainant). The MHWC may use any process it considers appropriate for this early resolution. Some bodies are able to refer complaints to the MHWC about mental health and wellbeing services provided (or refused) to a consumer. These include: • the Australian Health Practitioner Regulation Agency; • the Health Complaints Commissioner; • the Disability Services Commissioner; • the Commissioner of the Victorian Equal Opportunity and Human Rights Commission; • the NDIS Quality and Safeguards Commission, among others.

Step 5: What remedies are available at this body?

Power	Description
Warm/direct referral	The MHWC may refer your complaint to another organisation (such as the Health Complaints Commissioner or Ahpra) if it is better suited to deal with your concerns. You may also be referred back to the service provider to try to resolve the issue directly, with support or guidance from the MHWC.
Self-Resolution Support	The MHWC can give you advice on how to raise your complaint directly with the service, including what to say and who to contact. You can choose to try this option on your own or with MHWC support.
Assisted Referral	If you do not want to approach the service yourself, the MHWC can contact the service provider on your behalf and ask them to contact you to resolve the issue. The MHWC will check back with both parties to confirm progress or outcome.
Early or Informal resolution	The MHWC tries to resolve most complaints using the least formal approach possible, often through phone calls or written communication. Outcomes may include: explanation, apology, agreement to review decisions or practices, or a commitment to improve service delivery.
Formal resolution	If a complaint is more complex or informal resolution isn't appropriate, the MHWC can begin a formal resolution process. This may involve: • Developing a written complaint summary and resolution plan • Requesting a written response from the provider • Sharing records or documents (e.g. medical notes, policies) • Facilitating meetings with the provider If improvements are agreed to, these can be documented and followed up.
Conciliations	Conciliation is a private, voluntary, and confidential process where both parties agree to meet with an MHWC-appointed conciliator to work through the complaint. It promotes understanding and resolution in a safe and respectful setting. Legal representation or support people are allowed. Any agreement reached in conciliation is confidential and cannot be used elsewhere.

Investigation	If the complaint is serious, systemic, or unresolved, the MHWC may launch a formal investigation. Investigations are in-depth and may take significant time. They can lead to findings of non-compliance, recommendations, or formal enforcement actions. While MHWC cannot award compensation, it can require the service to change its practices, improve safety, or issue apologies or public reports following an investigation
Undertakings	The MHWC may accept a formal undertaking (a written promise) from a service provider to take specific remedial action. If accepted, the MHWC may decide not to take further action unless the undertaking is breached.
Compliance notices	The MHWC may issue a compliance notice requiring a provider to fix a problem, especially where: • An undertaking was not followed • The provider has broken the law or regulations • The provider admits to wrongdoing but does not offer an undertaking The notice sets out what must be done, by when, and requires the provider to report back to the MHWC.
Systemic Follow-up or Monitoring	Even after a complaint is closed, the MHWC may follow up with a provider to check that agreed changes have been implemented. In some cases, the MHWC may monitor broader service practices or initiate systemic reviews based on complaints data.
Exclusions	The MHWC cannot offer: • Compensation or damages: The MHWC cannot force a provider to pay you money. For financial compensation, you should seek legal advice or contact other legal pathways. • To change legal orders or diagnoses: The MHWC cannot change decisions made by the Mental Health Tribunal, such as compulsory treatment orders, or overturn a diagnosis made by a clinician.
Additional information you need to know	Every resolution process aims to achieve some or all of the following outcomes, known as the “4As” of resolution outcomes: • Acknowledgement: Recognising the person’s experience and how it affected them. • Answers: Providing clear explanations of what happened and why. • Actions: Taking steps to fix the issue and prevent it from happening again.

- Apology: Offering a genuine apology to validate the person's experience.

Withdrawal of complaints

A person who made a complaint to the MHWC is able to withdraw the complaint at any time, orally, or in writing. However, the MHWC may continue to deal with the complaint if it reasonably believes that:

- the health, safety, or wellbeing of a consumer may be adversely affected; or
- the complaint was withdrawn due to victimisation, intimidation, coercion, or duress; or
- it is in the public interest to deal with the complaint.

Step 6: Preparing your complaint. What should your complaint look like? What should it include?

Requirement	Description
Format	Complaints can be lodged in writing or verbally as follows: • By phone: 1800 246 054 (free call) between 9:00 am and 4:30 pm, Monday to Friday, except for public holidays. • Online: fill in the online form available here. The online form usually takes 15-20 minutes to complete. The form logs out after 30 minutes. • By email: by filling out the form here and emailing it to help@mhwc.vic.gov.au. • By post: by printing, filling out and sending the form (link here) to Mental Health and Wellbeing Commission, Level 26, 570 Bourke Street, Melbourne, 3000 The MHWC recommends first contacting them by phone to discuss the complaint. Urgent or time-sensitive matters are best handled by phone. If you're not sure whether the MHWC can help, if you'd like to speak with the MHWC about your concerns or if you need help completing the complaint form, then please don't hesitate to contact the MHWC. If you would like the assistance of an interpreter or translator this can be arranged by the MHWC free of charge. Please send your inquiry to help@mhwc.vic.gov.au.
Personal Details	Generally speaking, to make a complaint, you should include: • First and last name • Contact number • Email or postal address

	The MHWC's online complaint form will not progress unless you complete the above person details fields. However, if you would like to remain anonymous, you can include fake details or simply write "anonymous" in the fields requesting your personal information. The MHWC has limited options in that case You can ask MHWC to keep your identity confidential, and this may affect how the Service Provider is able to respond to the complaint. Where the MHWC is satisfied that there are special circumstances and it is in the complainant's interest that information about them is kept confidential, the MHWC can keep information about the complainant confidential.
Respondent's Details	You should provide the name of the service provider and location you complaining about. The MHWC can help you identify the correct Service Provider.
Relevant Facts	You should provide details of: • Service name & location (if known) • Brief summary of what happened • Does the service know? • What are some of the things that would help to resolve this complaint? (Acknowledgement / Answer / Action / Apology) • Additional information about the complaint and yourself (e.g. help with communication or any assistance required, preferred contact times) • Who received the service (ie yourself or another person) You should provide as much detail as possible to help MHWC understand your complaint. The MHWC suggests considering 'the 4 As of complaint resolution': Acknowledgement, Answers, Action and Apology – when you think about the resolution of the complaint. If you are not the consumer involved in this complaint, you should provide details of that consumer, the service concerned (what happened, when). You also need to explain your relationship to the consumer. If you have any documents to support your complaint they should be provided, including any correspondence you had with the service provider about your complaint. If you lodge your complaint through MHWC's online complaint form you can attach supporting documents with a maximum size per attached file of 20MB and a maximum combined size for all attachments on this complaint is 50MB.
What NOT to include	Do not make false or misleading statements.

Additional information you need to know

The complaint form has a section setting out that the MHWC collect and use personal and health information provided to it to respond to concerns raised. A copy of the privacy policy is available [here](#).

The MHWC has an obligation under the Act, to provide reasonable assistance to someone making a complaint. This includes, helping the person to identify the correct parties to the claim.

Step 7: Lodging your complaint and next steps.

Step	Description
Where to lodge your complaint	Complaints can be lodged in writing or verbally as follows: • By phone: 1800 246 054 (free call) between 9:00 am and 4:30 pm, Monday to Friday, except for public holidays. • Online: fill in the online form available here. The online form usually takes 15-20 minutes to complete. • By email: help@mhwc.vic.gov.au. • By post: Mental Health and Wellbeing Commission, Level 26, 570 Bourke Street, Melbourne, 3000 The MHWC recommends first contacting them by phone to discuss the complaint. Urgent or time-sensitive matters are best handled by phone. If you're not sure whether the MHWC can help, if you'd like to speak with the MHWC about your concerns or if you need help completing the complaint form, then please don't hesitate to contact the MHWC. If you would like the assistance of an interpreter or translator this can be arranged by the MHWC free of charge.
Receipt	While there is no fixed time period for when the MHWC must provide a receipt acknowledging your complaint, the MHWC must decide whether to accept the complaint and notify you of the complaint resolution process in a reasonable time having regard to the complexity of the complaint. However, in practice: • Online and email: If you lodge your complaint online or by email, it will generally be acknowledged in a immediately (if an email address is provided). Once a case manager has been assigned, they will contact you for additional information. • Phone: If you lodged your complaint by phone, the MHWC will discuss details and provide you with acknowledgement over the phone and by email (if an email address is provided). • By post: If you lodge your complaint by post, it will generally be acknowledged in a reasonable time and by the method chosen by the complainant (e.g. by email if an email address is provided) If the MHWC accepts your application, you will be provided with a case reference number. When your complaint is acknowledged you

	may be asked for more information or documentation to help with the MHWC's assessment.
Initial assessment	When the MHWC receive a complaint, the MHWC first look at whether the MHWC or another organisation is best suited to deal with it. If the MHWC assess that another organisation is better suited to dealing with some of your concerns, the MHWC will provide you with contact information for them. During this stage, the MHWC may ask whether you have already tried speaking with your mental health and wellbeing service provider first (the service provider) as this may be an effective way to resolve your issues. The MHWC can offer you support on how to speak with your service provider if you prefer to do so yourself.
Referral	If you don't wish to contact your service provider, the MHWC can make an assisted referral and ask that staff from the service contact you to discuss your concerns. As part of the process, the MHWC will contact the service to confirm the progress or the outcome of your complaint. If you are not satisfied with the outcome, you can contact the MHWC to discuss your options.
Early resolution	Early resolution is often the quickest way to resolve a complaint. In most cases, the MHWC discuss the complaint with both parties over the phone to clarify the problem and identify options for resolution. The MHWC will ask you about the outcomes you are seeking. There may be some outcomes that we cannot progress. If no resolution is reached, the MHWC may be unable to assist you further. The MHWC can also provide advice to you about other organisations that may be able to assist you.
Conciliation	If the process chosen is conciliation, the notice of complaint resolution process will specify: • When conciliation is meant to start; • The Commission's powers in the conciliation; • The obligations of the parties in the conciliation; and • Information about some offences under the Act about: keeping information and documents about the conciliation confidential, and obligations to produce documents if required. Conciliation can not be commenced unless: • Each party to the complaint has agreed to participate in the conciliation; • Written notice of the conciliation (including the rights and obligations of parties) was given to each party before the party agreed to participate. Further:

	• Conciliations are held in private. They are confidential and parties must not disclose anything said, done, or produced, in the course of conciliation. This is an offence. Any information or documents shared cannot be used in court unless the parties agree. • The MHWC must take reasonable steps to ensure the conciliation is conducted in a manner that promotes the wellbeing of the consumer. • During a conciliation, a party can be represented or accompanied by another person. However, the MHWC must authorise this, if the representative is a qualified Australian lawyer. A party can have a lawyer and one other person at a conciliation. • In a conciliation, a mental health and wellbeing provider can be required by the MHWC to produce certain documents or other evidence to the Commission. These can include documents about the consumer involved in the complaint, about policies of the provider, or about investigations or reviews which are relevant to the complaint. Such documents generally have to be provided within 20 days but the MHWC can extend this time. It is an offence not to comply with a written notice given to produce these documents. When conciliation ends, the MHWC must give each party written notice of the outcome of conciliation.
Formal resolution	If the MHWC assess that the matters are complex or that there are further steps that can be taken to resolve your concerns, the MHWC may progress to formal resolution, or decide to initiate an investigation. The formal resolution process involves a series of steps, each of which helps find a solution for your concerns. First, the MHWC ask about the outcomes you are seeking and work with you to develop a resolution plan. The MHWC may support you in writing down your complaint. There may be some outcomes that we cannot progress. If this is so, we will let you know. The MHWC then send the formal description of the complaint to the service provider for a response. The resolution plan may include requesting meetings with the service provider, and access to sections of medical records, reports and policies and procedures. If the service provider agrees to make improvements in response to a complaint, these agreements can be put in writing and shared with all parties. The MHWC may also make recommendations for service improvements. The MHWC may check with the service provider later to confirm whether these improvements have been made or why they have not been made if this is the case. If no resolution is reached, the MHWC may be unable to assist further. The complaint may also be considered for investigation.

Undertaking and compliance notices	During a complaint resolution process, the MHWC can either: • Accept an undertaking (a promise) from the mental health and wellbeing provider to take remedial action in respect of the complaint and the MHWC will take no further action in respect of the complaint; or • Serve a compliance notice which requires the Service Provider to take specific action. If the MHWC accepts an undertaking from the Service Provider, then: • MHWC can monitor the Service Provider in relation to the complaint; and • Require the Service Provider to report to the MHWC in writing on the remedial actions taken (which report is generally required within 12 months).
Investigations	At any stage, the MHWC may choose to investigate a complaint. Investigations can be initiated following the assessment of the issues and possible outcomes. An investigation is a formal detailed and resource-intensive examination, often used in handling large or highly complex matters and may take over a year to complete.
Investigation hearing	In certain circumstances, the MHWC can hold investigation hearings to identify what happened. The Commission has powers to require a person to: • produce documents or other evidence; • to attend the investigation hearing and give evidence or produce documents; and • to attend before the Commission and give evidence or produce documents. Anyone required to attend a hearing or produce documents or evidence, will be given a notice in a specific format which will explain: • failing to comply with the notice without a reasonable excuse is an offence; • examples of what are reasonable excuses for not complying; and • any other information the law requires.
Compliance notice	The MHWC can serve a compliance notice on a service provider if the Commission is satisfied that: • the service provider has not complied with an undertaking they gave to take remedial actions to fix the issue; • after conducting an investigation, the Service Provider has breached the Act or the regulations that apply; or

	- the Service Provider has admitted it has breached the Act or the regulations that apply, or else, has not given an undertaking to take remedial actions. The notice can: - identify the action to be taken by the Service Provider to ensure compliance with an undertaking and specify a time for these actions to be taken; and - require the Service Provider to report to the Commission within a specified time on carrying out those actions. A Service Provider has the right to apply to VCAT to review the MHWC's decision to issue a compliance notice. They must do so within 20 business days of the notice being served. It is an offence not to comply with a compliance notice.
Complaint resolution agreements	If the parties are able to reach agreement using a complaint resolution process, the MHWC must make a written record of the agreement and provide a copy of this to each party.
Additional information you need to know	Withdrawal of agreement to participate If at any time during a complaint resolution process, a party withdraws from a complaint resolution process, the MHWC may: - Cease the complaint resolution process and instead commence an investigation; or - Decide to take no further action. Termination of complaint resolution process The MHWC can terminate a complaint resolution process if the Commission is satisfied that it is no longer appropriate in the circumstances. Compensation orders The MHWC do not have the power to award compensation. You may find it helpful to seek legal advice about your options for making a claim for damages outside of the MHWC's process. More information regarding the complaints process is available here.

Step 8: Post-complaint – what if you are not happy with the outcome of your complaint?

Avenue	Description
Provide Feedback	You can provide feedback about your experience with the MHWC by: - Email to feedbackaboutus@mhwc.vic.gov.au or by phone (1800 246 054) - asking to speak to the MHWC Internal Complaints Officer to make a confidential complaint about the MHWC by calling 1800 246 054

	making complaint about the MHWC to the Victorian Ombudsman.
Internal review	If you're not happy with the MHWC's response to your complaint, you can make an anonymous complaint to MHWC Internal Complaints Officer by phone between 9am – 4.30pm on weekdays on 1800 246 054.
Victorian Ombudsman	You can make a complaint to the Victorian Ombudsman about any decisions made by the Mental Health and Wellbeing Commission.

Step 9: Overlapping or Related Jurisdiction to the complaints body?

Jurisdiction	Description
Mental Health Tribunal (MHT)	The MHT is the independent tribunal established to decide whether consumers need compulsory mental health treatment and protect consumer rights by conducting hearings to identify the least restrictive way people can receive the treatment they need. Phone: 1800 242 703 Visit: www.mht.vic.gov.au Access contact forms here
Second Psychiatric Opinion Service (SPOS)	SPOS offers an independent second psychiatric opinion to people who are being treated as a compulsory, forensic or security patient under the MHW Act. Second psychiatric opinions can give people additional information to challenge or participate in treatment decisions. You can ask for a second psychiatric opinion at any time or your Nominated Support Person, carer, family member or supporter can ask for a second psychiatric opinion on your behalf. Phone: 1300 503 426 Visit: www.secondopinion.org.au Access the contact form here
Victorian Health Complaints Commissioner (HCC)	The HCC can take complaints about health services such as a public or private hospitals, GP clinics, community health services, or about an individual health practitioner. The HCC can consider complaints about social workers and other unregistered health practitioners (eg counsellors) Phone: 1300 582 113 Visit: www.hcc.vic.gov.au Access the complaints form here
Victorian Ombudsman	The Victorian Ombudsman handles complaints about the general conduct of Victorian government organisations, local councils, statutory authorities, and Victorian universities and TAFEs.

	Phone: 03 9613 6222 or 1800 806 314 (Regional) Visit: https://www.ombudsman.vic.gov.au/ Access the complaints from here
Australian Health Practitioner Regulation Agency (AHPRA)	AHPRA can take complaints about registered health practitioners including concerns about clinical care, treatment, their behaviour or about a health problem that might be affecting the practitioner's safe care of others. AHPRA works in partnership with 16 National Health Practitioner Boards in implementing the National Registration and Accreditation Scheme. It ensures the community has access to a safe health workforce across the above professions. Phone: 1300 419 495 Visit: www.ahpra.gov.au Access the complaints form here
Commonwealth Ombudsman	The Commonwealth Ombudsman protects the interests of private health insurance consumers and has a free and independent complaint handling service. Phone: 1300 362 072 Visit: www.ombudsman.gov.au Access the complaints form here
Aged Care Quality and Safety Commission	The Aged Care Quality and Safety Commission's role is to protect and enhance the safety, health, wellbeing and quality of life of people receiving aged care. It promotes high quality care and services to safeguard everyone who is receiving Australian Government funded aged care. Phone: 1800 951 822 Visit: https://www.agedcarequality.gov.au/ Access the complaints form here
NDIS Quality & Safeguards Commission	This Commission is an independent agency established to improve the quality and safety of NDIS supports and services. It regulates NDIS providers, promotes safety and quality, resolves problems and identifies areas for improvement. Phone: 1800 035 544 Visit: www.ndiscommission.gov.au Access the complaints form here
Victorian Disability Worker Commission (VDWC)	The VDWC can receive any enquiry, complaint or notification about any disability worker in Victoria. Phone: 1800 497 132 Visit: www.vdwc.vic.gov.au Access the complaints form here

Office of the Victorian Information Commissioner (OVIC)	OVIC deals with complaints regarding a Victorian government agency or local council's failure to comply with one or more of the Information Privacy Principles. They are Victoria's primary regulator and source of independent advice about how the public sector collects, uses and shares information. Phone: 1300 006 842 Visit: www.ovic.vic.gov.au Access the contact page here
Independent Broad-based Anti-Corruption Commission (IBAC)	IBAC's role is to prevent and expose public sector corruption, and investigate police misconduct in Victoria. Phone: 1300 735 135 Visit: www.ibac.vic.gov.au Access the complaints form here
Victorian Equal Opportunity and Human Rights Commission (VEOHRC)	VEOHRC is an independent organisation with responsibilities under Victoria's human rights laws. It resolves complaints and undertakes education, engagement, investigations and independent reviews. VEOHRC advocates for stronger protections and greater respect for human rights and equality. Phone: 1300 891 848 Visit: www.humanrights.vic.gov.au Access the complaints from here
Courts and Tribunals	Unlike the MHWC, courts and tribunals can make binding and enforceable determinations. You may want to seek legal advice about the option of pursuing your complaint at court if it relates to: compensation (including workers compensation claims), development application decisions, orders made by local councils, decisions, fines and orders of regulators and licensing authorities and disputes over expert assessments.

Need help?

Organisations that can help you make your complaint, provide support or advocacy or give you more information

Organisation	Contact Details	How they can help
MHWC	Website: https://www.mhwc.vic.gov.au/ Email: help@mhwc.vic.gov.au Telephone: 1800 246 054 (free call) between 9:00 am and 4:30 pm, Monday to Friday, except for public holidays.	You can contact MHWC directly if you have any further questions or need assistance with your complaint.
Translating and Interpreter Service	Website: www.tisnational.gov.au Telephone: 131 450	Provides interpreting and translation services for people if English is not their first language.
National Relay Service	Website: www.accesshub.gov.au	Provides a range of services to support people who are deaf or have a hearing or speech impairment to communicate.

Self-help tools and additional resources

Resource	How this helps
Where to make a complaint	Guidance from MHWC on how to make a complaint.
Law Society: Know Your Rights	Guidance for individuals who are uncertain about where to start when seeking legal advice.
Call It Out	Online register for racism/discrimination experienced or witnessed towards First Nations Australians. Not an official complaints body.