



**ACT**  
Government

## Lifetime Care and Support Scheme

### Making a Complaint or a Dispute

The ACT Lifetime Care and Support Commissioner is committed to providing quality services-and this includes being open to receiving complaints and resolving disputes. You can make a complaint if you are not satisfied with the Scheme or a service or product that is paid for by the Scheme. A dispute is when someone disagrees with a decision.

#### How to make a complaint?

To make a complaint you should first contact the service provider or your coordinator to raise your concern. If you don't feel comfortable doing this, or if you've tried this and are still not satisfied with the result, you can contact the NSW LTCSA Feedback and complaints:

Complete an online complaint form: [Feedback and Complaints form | icare](#)

Phone: 1300 738 586 (cost of a local call)  
Fax: 1300 738 583  
Email: [care-requests@icare.nsw.gov.au](mailto:care-requests@icare.nsw.gov.au)  
Mail: Lifetime Care | Workers Care  
GPO Box 4052  
Sydney NSW 2001

You'll need to provide the following information:

- Your name and contact details
- How you would like to be contacted
- Details of what you are not happy with. It will help if you include what action could be taken to resolve the problem.

You can make an anonymous complaint. In this situation, there may not be enough information to investigate your complaint and we will not be able to inform you of the outcome of our inquiries.

#### How to raise a dispute?

If we have made a decision about your eligibility for either 'interim participation' (for an initial two years) or 'lifetime participation' (for life) in the Lifetime Care and Support Scheme, this can be the basis for dispute.

You can lodge a dispute if you disagree with our decision about whether your injury meets the criteria specified in the Lifetime Care and Support Guidelines for participation in the Scheme (medical eligibility). Eligibility for participation in the Scheme can be disputed on either medical or legal grounds. For example, whether your injury is a 'motor accident injury' which is whether it meets the legal definition of a motor accident (legal eligibility).

An independent assessment panel of medical and healthcare professionals will be established to resolve the dispute about whether your injury meets the criteria for participation in the Scheme.

The dispute needs to be lodged within six months of receiving a decision from us. Lodgement can be by you, your relative or friend or a service provider (for example, attendant care provider, advocate, or solicitor, on your behalf). An insurer can also lodge a dispute.

### **Can I get help making the dispute?**

Yes. You may be able to get an advocate to help you with your dispute. For information on advocates, see *Information Sheet: Advocacy* or the Scheme's website, [LTCS Scheme ACT](#)

### **How is the dispute handled?**

Once we've received your dispute notice, it will be assessed by either an independent assessment panel of dispute assessors who are experienced medical and health professionals (eligibility dispute) or a panel of claims assessors who are experienced legal professionals (motor accident injury dispute).

You can provide additional information to the panel throughout the process. It's important to make sure the panel has access to the relevant information as early as possible.

Once a decision has been made, you'll be notified of the outcome in writing with a certificate outlining the panel's reasons. You may be able to request a review of the assessment panel's decision depending on the nature of the dispute.

### **How else can have my concerns addressed?**

If you are still unhappy with the resolution of your complaint or dispute, you may refer your concerns to the ACT Ombudsman [www.ombudsman.act.gov.au](http://www.ombudsman.act.gov.au) or telephone on (02) 5117 3650.

**For more information or to obtain copies of information sheets or the Lifetime Care and Support Guidelines, contact the Lifetime Care and Support Scheme**