

## **Complaints Procedure (Wkkgz)**

G.M. Counselling & Consultancy

G.M. Counselling & Consultancy is affiliated with the complaints and dispute resolution procedure for psychological care under the Wkkgz, established by the NIP.

**The objectives** of this complaints and dispute resolution procedure are:

- a. Creating the possibility for the restoration of the relationship between the complainant and the care provider and reaching a solution to problems arising within this relationship.
- b. Doing justice to the individual complainant.
- c. Systematically collecting complaints in order to gain a better understanding of shortcomings in psychological and pedagogical care, thereby enabling a better response to the needs of the client in general and to prevent similar dissatisfaction or complaints.
- d. Monitoring and evaluating the data mentioned under c. within the framework of policy development to safeguard and promote the quality of care.

### **Article 1 Definitions**

- *Client*: the natural person who wishes to make use of, makes use of, or has made use of the care provided by the care provider. The term client is also understood to mean patient.
- *Complaint*: an expression of dissatisfaction regarding conduct by the care provider towards a client.
- *Complainant*: the person submitting the complaint, namely: the client, their legal representative, their authorized representative(s) in writing, or next of kin, as well as the person whom the care provider refuses to consider as the client's representative in the context of care.
- *Respondent*: the care provider against whom a complainant has filed a complaint.
- *Complaints Officer*: the person who, from an impartial and independent position, offers the complainant support in filing their complaint if desired, and who guides the complainant and the respondent in the handling of the complaint, aimed at problem resolution and relationship restoration.
- *Conduct*: any act or omission, as well as the taking of a decision by the respondent, that has consequences for a client.
- *Complaint mediation*: the guidance provided by the complaints officer to the complainant and the respondent in seeking a satisfactory solution to the complaint.
- *Healthcare provider*: G.M. Counselling & Consultancy, a healthcare professional working independently, who, within the framework of this scheme, implements the obligations for a healthcare provider as described in the Wkkgz (Healthcare Quality, Complaints and Disputes in Healthcare Act).

## **Article 2 General**

1. The healthcare provider is responsible for a careful, effective, and timely opportunity for handling complaints.
2. The healthcare provider shall carefully investigate the complaint, ensure the availability of expert assistance to the complainant by an independent complaints officer, and affiliate with a competent dispute resolution body.
3. The healthcare provider is responsible for making the complaints procedure (including the availability of the complaints officer and the dispute resolution body) known to its clients.

## **Article 3 Admissibility of the complainant's complaint**

1. A complaint is inadmissible if:
  - a. the complaint does not relate to the healthcare provider;
  - b. the complaint does not relate to conduct falling under the Wkkgz;
  - c. the complaint was submitted anonymously;
  - d. the complaint was submitted by a person other than the complainant(s) mentioned in Article 1;
  - e. the complaint was submitted on behalf of a client who does not consent to this (and whose consent is required);
  - f. a similar complaint from the client is already being or has been processed within the framework of this complaints procedure (either via the care provider itself or via the complaints officer);
  - g. the handling of the complaint via this complaints procedure has already been concluded and no new facts have arisen;
  - h. the complaint has already been investigated and assessed by the Disputes Committee for Independent Mental Health Care Practices.
2. If the care provider and/or the complaints officer deems the complaint inadmissible, they shall notify the complainant of this in writing as soon as possible, stating the reasons. They shall also state how and where the complainant may, if desired, have this decision regarding inadmissibility reviewed.

## **Article 4 Complaints Officer: Purpose of Function and Position**

1. The purpose of deploying a complaints officer is, among other things, to promote or contribute to an equal relationship between the complainant and the care provider and to find an effective solution to the problems that have arisen between the client and the care provider.
2. The care provider guarantees that the complaints officer appointed by him:
  - a. is not involved in the matter to which the complaint relates;
  - b. focuses on achieving the most satisfactory solution possible for the complaint when performing his duties;

- c. has the freedom to perform his duties in accordance with the law, the professional standards and job description applicable to him, and without interference by the care provider.
3. The care provider guarantees that the complaints officer made available by him meets the competencies and job requirements as described in the professional profile drawn up by the Association of Complaints Officers in Institutions for Health Care (VKIG).

#### **Article 5 Duties of the complaints officer**

The Complaints Officer has the following duties:

1. Providing an accessible reception point for complaints.
2. Providing information regarding this complaints procedure and other complaint options.
3. Advising and assisting the complainant in submitting and formulating the complaint, clarifying their objectives when submitting the complaint, and determining an appropriate handling of the complaint.
4. With the complainant's consent, disclosing the complaint to the defendant and requesting the defendant's cooperation in the (further) handling of the complaint.
5. Guiding and advising both the complainant and the defendant regarding the further handling of the complaint and a clear conclusion of this process.
6. Keeping the complainant and the defendant informed of the progress of the handling of the complaint.
7. Identifying bottlenecks, both solicited and unsolicited.
8. Contributing to the quality policy of the defendant.

#### **Article 6 Procedure for submitting, handling, and closing a complaint**

1. The complainant has the choice to submit the complaint (first) to the defendant themselves or to the complaints officer. They may do so verbally, by telephone, and/or in writing (by email or letter). The defendant and/or complaints officer will confirm receipt of the complaint within 2 working days.
2. When the complaint is submitted to the defendant, the defendant will endeavor to provide a verbal or written (initial) response to the complaint within a reasonable period (preferably 7 working days).
3. If, in the complainant's view, this does not lead to a satisfactory outcome, the defendant will inform the complainant of the possibility of engaging the complaints officer. The complainant will receive the contact details of the complaints officer and will be requested to submit their complaint, if possible, via the complaint form (available via, among others, the NIP website).
4. In the event that the complaint is submitted to the complaints officer, the complaints officer will contact the complainant directly as soon as possible and no later than within 4 working days, after confirmation of receipt.

5. The complaints officer will explore the complaint, any preliminary proceedings, the complainant's goals, and possible further steps to resolve the complaint with the complainant. The complaints officer will support the complainant, if necessary, in formulating the complaint and his goals. If necessary, the complaints officer will refer the complainant to other, more appropriate options for raising the complaint. The complainant decides whether he wishes to take further steps towards the defendant and whether he wishes to involve the complaints officer in this process.
6. If the complainant agrees to (re)submit the complaint to the defendant, the complaints officer will contact the defendant for this purpose. The complaints officer will inform the defendant about the complaint and the goals intended by the complainant. He asks the defendant for his view on the events and explores his goals with him regarding the further handling of the complaint. The complaints officer consults with the defendant and advises him on the further steps for handling the complaint and the defendant's contribution thereto.
7. If requested, the defendant provides (again) an explanation of his actions regarding the complaint and cooperates in the further handling of the complaint.
8. In consultation with the complainant and the defendant, the complaint is further handled with the involvement of the complaints officer appropriate to the case.
9. The complaints officer acts as process facilitator for the complainant and the defendant during their further contacts and, if desired, facilitates a mediation meeting between the complainant and the defendant. In the context of the role as process facilitator, the complaints officer may forward correspondence regarding the procedure between the complaints officer and the complainant or the defendant to the other party.
10. The complaints officer monitors the progress of the complaint handling and informs the complainant and the respondent about this.
11. Within 6 weeks of submitting the complaint to the care provider, the complainant receives a reasoned written message from the care provider (whether or not via the complaints officer) indicating the outcome of the handling of the complaint. In doing so, the care provider indicates whether, and if so which, decisions and/or measures have been taken in response to the complaint and within what timeframe the decided measures will be implemented.
12. The aforementioned period may be extended by 4 weeks if necessary, or a longer period if the careful handling of the complaint requires it. The complainant receives written notification of this extended period (from the care provider, possibly via the complaints officer), stating the reasons for the extension and the intended completion date.

#### **Article 7 Complaint regarding another healthcare provider**

1. If the complaint submitted by the complainant (via the healthcare provider and/or complaints officer) concerns exclusively another healthcare provider or institution, the healthcare provider or the complaints officer, respectively, shall facilitate its careful

transfer to the relevant healthcare provider or institution. To this end, he shall refer the complainant to the appropriate complaints procedure or transfer the complaint to the relevant healthcare provider or institution (with the complainant's consent).

2. If the complaint submitted by the complainant also concerns the actions of another healthcare provider or institution, the healthcare provider or the complaints officer, respectively, shall ensure a careful transfer of the complaint regarding the other healthcare provider or institution to the latter and shall coordinate with this healthcare provider or institution in order to achieve a combined complaint handling and conclusion of this complaint handling.
3. Such a transfer and (consultation regarding) combined complaint handling and conclusion is only possible if the complainant has been informed thereof in advance and agrees thereto.
4. If the complainant does not give their consent, the complaint will be handled separately, which will then only concern the complaint regarding the care provider (to which this complaints procedure applies).

#### **Article 8 Submission to the Disputes Committee for Independent Mental Healthcare Practices**

1. If the outcome of the complaint handling via the care provider and/or complaints officer does not lead to a satisfactory outcome for the complainant, the complainant has the right to submit the complaint as a dispute for assessment to the Disputes Committee for Independent Mental Healthcare Practices.
2. This option is also available if a complaint concerns (partly) a request for compensation (up to a maximum amount of € 25,000) and the complainant has not reached an agreement regarding this with the care provider or the care provider's liability insurer.
3. The complainant may also submit the complaint for assessment to the Disputes Committee for Independent Mental Healthcare Practices if the complaint handling takes longer than the term stated in the Wkkgz or agreed upon with the complainant.
4. The care provider informs the complainant of the possibility of submitting the complaint as a dispute to the Disputes Committee for Independent Mental Healthcare Practices and provides the complainant with the correct contact details and information regarding the submission deadline and costs.
5. The Regulations of the Disputes Committee for Independent Mental Healthcare Practices form an integral part of these regulations and can be viewed at [vgp-reglement.pdf](#).

#### **Article 9 Registration, reporting, archiving, and retention**

1. The care provider or the defendant retains the data regarding complaints relating to him and the handling of these complaints, separate from the client files he maintains.
2. The complaints officer maintains a complaint file and a register of key data regarding the complaint and the handling of the complaint. The record-keeping, registration, and

retention of the complaint file and complaint registration are carried out in such a way that the privacy of complainants and defendants is safeguarded.

3. The care provider/defendant and the complaints officer shall destroy data traceable to the person (of the complainant or defendant/care provider) within 2 years after the conclusion of the complaint handling, unless there are compelling reasons to retain them longer.

#### **Article 10 Confidentiality**

All persons who, by virtue of their position or otherwise, are involved in the handling of complaints submitted to/concerning the care provider, are obliged not to disclose anything that has come to their knowledge in that capacity to a greater extent than is required for the performance of their duties.

#### **Article 11 Dissatisfaction with the complaints officer or the disputes committee**

If the complainant or the defendant is dissatisfied with the conduct of the complaints officer or the disputes committee referred to in this regulation, he is deemed to first address this with the relevant body to raise the matter.

If this leads to an unsatisfactory outcome, the complainant or the accused may submit their dissatisfaction to the NIP and will receive information regarding the further handling of their dissatisfaction.

#### **Article 12 Final Provision**

In cases where the provisions of these regulations lead to ambiguities regarding the handling of the complaint and the parties involved cannot resolve the matter through mutual consultation, they shall contact the NIP regarding this. The Director of the NIP shall subsequently make a decision regarding an appropriate interpretation or amendment of the regulations.

Thus adopted by

G.M. Counselling & Consultancy

on May 2026