



Quick Guide

Your options following injury in Victorian healthcare.

We're Sorry,

If you are reading this guide, chances are that you or a loved one has suffered harm whilst receiving healthcare in Victoria. For what you have been through, and for the difficult road ahead: we are sorry. We wrote this guide to provide you with useful information; from accessing your healthcare information, to making a complaint, seeking an apology, or understanding the realities of the medical negligence compensation system as it exists today.

Australians are proud of their universal healthcare system and the overall standard and quality of care provided by our nurses, midwives, doctors, allied health professionals and the support staff that work hard every day to deliver that care. And we should be. Our healthcare system is one of the safest in the world. But we also know how difficult it is to come to terms with unintended harm that has been caused by your healthcare provider. We also know how unique and isolating it can be for anyone wanting to know what went wrong and why, and to seek accountability and change.

You are not alone. Each year, it's estimated that about 10% of hospital patients are affected by one or more adverse events, with half (5%) considered preventable. The impact of these injuries varies as much as the type of error that can occur. The FairCare Alliance exists because too many of you feel alone, confused and let down by a system that meant you no harm.

Healthcare safety has come a long way in Australia, as it has in other parts of the world. However, wherever there are complex systems with many moving parts (such as healthcare) the risk of human error will exist. While we hope and trust that our healthcare safety and quality systems keep improving, there will always be a need to support the next person who experiences a life-changing medical error. For that reason, we believe there will always be a need for FairCare.

We hope this guide informs your decision-making, helps you feel less alone and reduces the burden for your recovery and your journey ahead.

In support,



Vickie Veitch

Founder



Nick Mann

Co-Founder



FairCare Alliance Ltd

Registered Charity

ACN: 656 196 324

What's most important to you?



Maybe it's all the above?

Where do I start?

Who can help me?

Obtaining your health information

If you or a loved one has had a serious healthcare injury or complication, it's always a good idea to obtain a complete copy of your healthcare records. Having a record of your care allows you to:

- Start to understand the events surrounding your care from the health provider's perspective.
- Plan your future treatment options.
- Seek a professional independent review of your care or seek a second opinion of the treatment received.
- Start to 'establish the facts' about your care
- Provide this information to a family member, trusted friend, advocate or a legal representative whom you wish to act on your behalf.

Do you own your medical records?

Most people assume that they own their medical records. After all, the records contain immensely personal information about our health and medical treatment.

Almost 25 years ago the High Court of Australia determined that medical records are owned by the doctor, hospital or other health professional who creates and maintains that medical record, but that a patient had a general right to access those records.

States and territories across Australia have confirmed that right of access in legislation. In Victoria, you can access your health information with a written request under:

the *Freedom of Information Act 1982* (for public hospitals and health services); and the *Health Records Act 2001* (for individual doctors, health professionals and private hospitals).

These laws are supported by Australian privacy standards which establish a general rule that organisations are required to provide you with access to personal information (such as medical records) held about you.

Is it free to access my records?

Providers are not required to charge and may choose to provide you with a copy of your health information without charging.

However, private health providers and organisations are entitled to charge fees for access (including for collation and copying records), according to a specific schedule published in the *Health Records Act*.

The fees which apply to accessing information under the Health Records Act are subject to limits.

For accessing information from public hospitals, the cost involved will vary according to each request. In some instances, the application fee normally payable for a *Freedom of Information* (FOI) request may be waived if you can provide evidence of financial hardship, Health Care Card or Pension Card.

Most requests for health information cost less than \$200.

To help keep the cost down, make sure you only request what you need/want and ask them to exclude duplicates.

Make sure your Request is valid

To access your healthcare records, your request must meet these three conditions:

- 1 Your request must be made in writing, and
- 2 You must prove that you have authority to make the request (because you are the patient or the patient's legal guardian), and
- 3 You must provide sufficient information about the documents you are requesting so that the public agency can identify and locate the relevant information.

What to ask for

It's best to ask for all healthcare records pertaining to the admission when your healthcare injury occurred, or to limit your request to a certain time period.

This can help to keep down the cost of accessing your health information. For example: you would ask for

"...a copy of all the healthcare records made or held about me during my admission to hospital dated dd/mm/yyyy, including all documentation, scans, tests and examinations, results, operation records, summaries, opinions, referrals and reviews".

Timeframes

Generally, health providers can take between **45 days** (for private health providers) to **60 days** (for public health providers) after receiving a valid request to provide you with a copy of your health information.

Reasons for your request

You do not have to provide a reason for your request. Unfortunately, because of the adversarial nature of the medical negligence litigation process, we know that if a healthcare service suspects that a former patient may make a claim against them (to access compensation), they may actively commence defensive practices that could result in months of delays or 'sensitive' information being omitted (not made available to you) or redacted (blacked out). For this reason, if you are considering making a claim for compensation, you can choose to say nothing or something like, "I am requesting this information so that I have a complete record of my personal and health information on file" (which is of course true).

Can they refuse?

A healthcare organisation can only refuse to provide access to your health information for a limited set of circumstances.

For instance, a health service may refuse to provide health information deemed inappropriate because it conflicts with the confidentiality right/s of another person (or people), or because the health service believes that release of that information would pose a risk of harm to you (particularly in relation to notes by mental health providers).

In some circumstances a hospital will refuse access to documents where providing the records would interrupt your care, such as where you are still an inpatient at a hospital.

They may also refuse to provide you with access to documents that relate to internal investigations, correspondence with their insurer or lawyers or documents which are before the State Coroner.

Enforcing your right to access

There are a number of laws and agencies that help protect your right to access healthcare information.

The Office of the Victorian Information Commissioner provides information, guidance and support for FOI requests made to a public Victorian agency. This can be found at: <https://ovic.vic.gov.au/freedom-of-information/for-the-public/>

The Victorian Health Complaints Commissioner (HCC) handles complaints about both public and private healthcare organisations but will also investigate potential breaches of the Health Records Act 2001 (which relate to private health services) on your behalf <https://hcc.vic.gov.au>.

Freedom of Information Request Form (and instructions) is available for download from the Office of the Victorian Information Commissioner's (OVIC) website at: www.ovic.vic.gov.au.

Reporting a health professional

Concerns relating to the conduct or practice of a health professional should be reported to the Australian Health Practitioner's Regulation Agency (AHPRA), as well as the healthcare facility (which may also report the professional). AHPRA investigates all notifications in order of priority, based on report severity and potential risk to the public.

You can also look up the registers on the AHPRA website to check if a health professional is currently registered, has any limitations placed on their practice by AHPRA, or has been cancelled, disqualified or prohibited to practice as a registered professional.

People's experiences with AHPRA investigations can vary widely – and while there is no guarantee that an AHPRA complaint will produce the outcome you are seeking, we believe that health and regulatory systems can only improve if people are prepared to lodge a complaint when something has gone wrong.

Any member of the public can raise a concern. AHPRA relies on reports from members of the public and other health professionals to build their knowledge and act where necessary to keep the public safe from harm. We therefore encourage anyone with a genuine concern to contact AHPRA at <https://www.ahpra.gov.au>.

If you believe your complaint relates to intentional misconduct or a crime, you should contact Victoria Police to report the incident.



First step – try to resolve the issue early

It may be best to start a complaint process 'locally', meaning as close to the provider or area that directly provided the service. For example, if your complaint is related to care you received on a surgical ward, you could try contacting the Manager of that ward and speaking or writing to her/him/them directly. This may result in the issue being resolved quickly and satisfactorily.

If that makes you feel uncomfortable or vulnerable, or if it does not provide the outcome you were seeking, making a complaint to the 'Consumer Liaison Officer' will be the next step.

Consumer Liaison/Feedback Officers

All Victorian health services must have a dedicated officer whose role is to receive, process and resolve feedback or complaints. These officers are sometimes called 'Patient/Consumer Liaison Officer', 'Consumer Feedback Officer', 'Consumer Representative' or 'Patient Advocate'. Small or rural hospitals may require you to contact more senior personnel, such as a 'Quality Manager', 'Director of Nursing' or 'Director of Clinical Governance'. If you are unsure, you can call the service reception and ask for the name and contact details of the most appropriate person to direct your complaint.

While it might feel daunting to make a complaint, these officers are used to receiving and handling all types of feedback and they are usually well trained to do so in an unbiased way. You will certainly not be the first person to complain to a health service and if you feel that your complaint has not been handled correctly, there are ways to escalate this concern as well (more on that later).

Getting clear on the outcome you want

There are many reasons to provide feedback and your reasons will depend on many factors, including what you are wanting/needing to achieve. You are allowed to complain or provide feedback for any reason that is important to you. Everyone is different – what's important to you may not be as important to someone else – but that shouldn't matter. A health service should take all feedback it receives seriously and investigate them within a reasonable timeframe.

All health services will be able to provide you with information on their complaints handling process and the expected timeframes.

It can be more helpful to put your complaint in writing so that there is a clear record of communications and to ensure that each of your concerns are addressed. We've put together the following list of suggestions to help you think about and prepare your feedback.

It goes without saying that your feedback should always be made respectfully. Although easier said than done, try to avoid guessing, Unjustified opinions or unnecessary conclusions about events or people that you're not sure about. If you do wish to claim/allege/blame someone, be careful to include the facts as you observed and experienced them, as this will help to back-up or justify your claim.

You might find it helpful to have a trusted friend or family member go over your letter of complaint with you. It might also be helpful to review your complaint for a day or so before you send it. A fresh set of eyes or perspective can give you the opportunity to question and target what you want to say.



Main reason for your complaint

- What is the main reason for your complaint?
- What are the less important reasons (if any)?
- What is the sequence of events that led up to, included and followed the main issue?
- In as much detail as you can, include dates, times, places, names/roles

Explain what happened

- What did you observe and/or experience at each point? (Include the facts)
- What did you see and hear?
- What were you told?
- How did it make you feel?
- For bodily issues, detail where, type of sensation and severity (e.g., "I experienced severe nerve-type pain below my left knee immediately after the operation")
- What actions did the service take, if any?
- What actions did you take, if any?

Describe how you were affected

- What is the impact (or outcome) of these events on you?
- How long have these impacts affected you (or the person you are caring for)?
- What have you needed to do to treat/respond/act because of these events/issues?
- Include evidence where possible, e.g., medical report, second opinion

Be clear about what you would like them to do (the outcome you want)

Processes:

- Investigate (events and/or people)?
- Explain what happened and/or why it happened?
- Acknowledge or apologise?
- Correct your medical record?
- Report a health professional?
- Change (or start/stop) a system or process?
- Consider your suggestions and get back to you?

Quality of care:

- Improve the problem with further investigations, care or treatment?
- Consider alternative care or treatments?
- Provide a second opinion?
- Provide a referral?
- Other desired outcome?

Escalating your complaint

If you are not satisfied with the response or handling of your complaint, there are ways you can formally escalate your concerns.

- Contact the Victorian Health Complaints Commissioner
- Refer the matter to the Victorian Department of Health
- Write to your local MP, Victorian Minister for Health or the Victorian Premier

Lastly, make sure you keep a record of communications and summary outcomes of those communications. A simple table such as the example below will help you keep track of all the communications and actions (which can add up quickly). It can also be used as evidence later if needed.

Record of Communications			
Date	To / From	Description	Outcome / Notes / Update
2 Oct	To Liason Officer	Complaint Letter	Awaiting Reply
3 Oct	To AHPRA	My Written Report of Dr X	Need to Supply Doc X
6 Oct	From HCC	Advice on FOI Access	FOI Form Provided

To:

Liason Officer

LETTER OF COMPLAINT

Dear Consumer Liaison Officer,

I'm writing to raise a complaint about an incident that happened with my frail, elderly mother while she was admitted at your hospital between 10 and 16 August 2022, on the cardiac ward.

My mothers name is Betty Boo and her UR number is xxx xxx. I am listed as her carer. The incident occurred on 11 July 2022 around 8:20pm. A male nurse insisted that mum take her diuretics because the medication record showed that this medication was not given to her earlier in the day. My mum is frail but is not confused and has always been in charge of her medication. My mum tried to explain that she had been given the medication a bit late but the nurse did not believe her.

My mum also explained that in any case, she can't take diuretics at night because she's afraid she will not be able to get to the bathroom quick enough in the middle of the night when they start working. The nurse insisted and waited until my mum put the medication in her mouth.

My mum did so but as soon as the nurse left, she spat them out and put them in the bin. She was then too afraid to tell anyone the next day about the incident.

I'd like to:

- **Understand why this occurred**
- **Know why the nurse decided to not believe my mother**
- **Have an explanation as to why the nurse insisted on giving my mother diuretics at night**
- **Understand what the hospital will do to make sure this is not repeated.**

Kind regards

Ms Boo.

Seeking an explanation, apology or assurance

A new piece of Victorian legislation is coming into effect from 30 November 2022, which will require all Victorian health services, ambulance services and mental health service providers to comply with a legally binding “Statutory Duty of Candour”, among other requirements. The legislation is called the *Health Legislation Amendment (Quality and Safety) Act 2022*¹.

This means that if a patient suffers a Serious Adverse Patient Safety Event (SAPSE), the health service must be open and honest with the patient or carer about what happened.

Under this new law, health services will be required to provide:

- A written account of the facts relating to the SAPSE event
- A description of the health service’s response to the event
- An apology for the harm suffered by the patient
- The steps taken to prevent re-occurrence of the event (quality assurance)

This is wholly good news. However there is a controversial disadvantage for injured patients who pursue their legal right to access compensation for losses caused by the harm. The ‘duty of candour’ includes some additional legal protections for the apology and for any admissions made by the hospital about the event, including the contents of the written report.

This means that the apology, hospital admissions or written report about the event cannot be used as ‘an admission of fault’ (liability) for the harm or death or used in any civil or disciplinary proceedings including a claim for compensation (civil proceeding) or as evidence if a health professional is reported to AHPRA (disciplinary proceeding).

These protections are seen to be required to allow health services and professionals to come forward with disclosures about adverse events, without fear of litigation (which is of course the only way a seriously injured patient can access compensation in Australia).

¹ <https://www.legislation.vic.gov.au/as-made/acts/health-legislation-amendment-quality-and-safety-act-2022>

How will the Duty of Candour be implemented?

Under an existing *Australian Open Disclosure Framework*², health services are expected to openly disclose and apologise for healthcare errors to their patients and carers. As of 30 November, the new *Statutory Duty of Candour* (SDC) provisions for all SAPSE events will require Victorian health services to follow the Victorian Duty of Candour Guidelines – which have been endorsed by the Victorian Minister for Health to become a set of enforceable regulations by 30 November 2022.

There will be penalties for Victorian health services failing to do what is required.

Under the SDC, Victorian health services will have 9 legal requirements for SAPSE errors:

- 1 Apologise to a patient/family within 24 hours of identifying that a SAPSE has occurred.
- 2 Arrange within 3 days to meet with the patient/family for the SDC meeting
- 3 The SDC meeting should occur within 10 days of the SAPSE being identified.
- 4 The meeting must contain an apology, explanation, opportunity for patient/family to relate their experience or questions, explain any implications of the SAPSE, details of a review into the SAPSE that will be undertaken, and any improvements already made.
- 5 Provide a copy of the SDC meeting notes within 10 days of the meeting.
- 6 Complete a clinical review of the SAPSE and improvements to be made at the service.
- 7 Provide a full SAPSE Report within 50 to 75 days of the SAPSE being identified.
- 8 Keep records of the SAPSE events and associated requirements as they are completed.
- 9 Report its compliance with the SDC, as legally required.

More information on the SDC is available at Safer Care Victoria, including a copy of the Victorian Duty of Candour Guidelines: <https://www.safercare.vic.gov.au/support-training/adverse-event-review-and-response/duty-of-candour>

² <https://www.safetyandquality.gov.au/our-work/open-disclosure/the-open-disclosure-framework>

Accessing compensation in Victoria

A claim for compensation after a healthcare injury is widely recognised as challenging and intimidating. Litigation and compensation have a stigma associated with them, which makes the task of bringing a claim all the more daunting. Despite these challenges, pursuing a compensation claim against a healthcare provider is your right, and can be a way of seeking answers and justice for harm caused because of medical treatment. It is also the only way that an injured patient or their family can access compensation for the financial (and other) losses caused by the injury and to pay for future treatment.

The law in medical negligence claims

To make a claim for compensation for medical negligence you and your law team need to prove:

Breach of Duty – that the treatment you received was negligent.

Causation – that the negligence caused damage which would otherwise not have occurred.

Damage – that you have suffered an injury because of the negligence.

Claims for medical negligence sometimes include claims for “failure to warn” of a risk of the treatment. These claims are very difficult to prove and can only succeed if a Court accepts that you would have refused treatment if you’d been properly warned.

Clients sometimes ask: can’t I just claim for the negligence? The short answer is no.

Each of the ingredients needs to be present to bake the cake. So, you need to prove all three points above, before you can commence a claim. Unless you can prove that some or all your damage and loss would have been avoided with reasonable treatment, the cake won’t rise to the level needed for a compensation claim.

Medical negligence compensation

The purpose of making a medical negligence claim is to be fairly compensated. A claim cannot be pursued unless there is a loss, such as:

- medical treatment expenses
- care expenses
- wage loss, or
- noneconomic loss (also called pain and suffering).



Some of these amounts are capped by law.

To claim compensation for your pain and suffering (your non-economic loss), you must have suffered a 'significant injury'.

This is defined as a permanent impairment of more than 5% of the whole person for physical injuries (more than 4% for spinal injuries) or more than 9% of the whole person for a psychiatric injury. This is assessed by an independent medical expert who must use the American Medical Association Guides to the Evaluation of Permanent Impairment³.

In most claims, the assessment cannot be done until the injuries are stable. That is, until your ongoing impairment is unlikely to substantially change. This can be particularly challenging for people who require additional treatment because of the original injury or for those with a long recovery period ahead.

You can claim for past and future wage loss and past and future medical and care costs that arise because of the negligence. Claims for these (economic) losses can be made whether you are able to establish that you have suffered a significant injury or not. But you still need to prove breach of duty, causation and damage.

Because of the time and challenges involved in bringing a medical negligence claim, unless your loss attributed to wages, medical expenses and care is significant (i.e. \$50,000.00 or more), it is not worth making a claim for compensation for those losses alone.

³ <https://www.ama-assn.org/delivering-care/ama-guides/ama-guides-evaluation-permanent-impairment-overview>



How long does it take?

The amount of time that a medical negligence compensation claim can take depends on the circumstances, and the attitude of the healthcare provider and its insurer. Generally speaking, a medical negligence claim takes between 2–3 years, but can take longer.



What are the costs?

Most medical negligence lawyers will offer to act for people on a 'No Win No Fee' basis. While you may be required to pay for some of the bills in the case (such as the cost of medical reports), you should only need to pay for work done by your lawyer if you win your case and receive compensation.

The costs you need to pay should never outweigh the compensation awarded. Be sure to ask your lawyer questions about their fees so that you are aware of your rights and obligations, as well as the costs and risks before beginning a claim.



What's the rate of success?

This is hard to say because there is a lack of transparent data about medical negligence claims in Australia. However, the following figures can be used as a rough guide:

- Only about 25% of enquiries to medical negligence lawyers are potentially viable.
- About 40% of those will have evidence to support their claims.
- And about 80% (of the 40%) will be successful.

All in all, around 5–10% of people harmed who call a lawyer obtain compensation.

Why are medical negligence claims so legally difficult?

Let's look at a comparison: Julie and Andrea

Perhaps the best way to give a sense of the difference between medical negligence claims and other injury compensation, is to look at two scenarios, then spot the differences between them.



Julia:

goes to hospital with an injured knee and has surgery. She has a poor outcome and is left with a limp and ongoing pain.

Andrea:

was in the hospital bed next to Julia, after being knocked off her bike by a car that didn't give way. She's got the same injuries, has the same surgery and has the same outcome.

Why will Julia's claim for compensation be more difficult than Andrea's?

Factual disputes and a lack of witnesses

The circumstances of Andrea's accident are likely to be well known and undisputed. Andrea is likely to be able to give evidence about the driver's negligence. Witnesses, dash cam footage, CCTV, police reports and accident reconstructions all help paint a clear picture about what happened and who was at fault. By comparison, it is likely the surgeon and her assistant are the only witnesses to the injuries Julia suffered in surgery.

Public perception and sympathy

Few people have much sympathy for bad drivers on our roads. By comparison, there is rightly a huge amount of respect for our public health systems. There is likely to be some stigma associated with a claim against a public hospital, involving medical staff trying their best to protect the public. Insurers know this, and factor it in when considering whether to take a case to Court or to try and negotiate a settlement of the claim before it goes to Court.

Pre-existing injuries

Like almost all people attending hospital, Julia came in with a pre-existing condition. Because of this, there will always be some dispute about how much of her ongoing problems were caused by the surgery, and how much were going to develop because of her pre-surgery problems. By contrast, Andrea was fit and well and riding a bike before she was negligently injured. All her ongoing problems are because of the crash caused by the driver.

Negligence or a complication?

We recognise that not everyone that has medical treatment gets better to the extent that they'd hoped. Some patients will have poor outcomes even with gold standard treatment. Complications can arise in surgery that aren't a result of anyone's carelessness or error. In Andrea's case, her injuries are clearly caused by a negligent driver. Julia on the other hand, will need to prove that her outcome was because of surgical negligence, rather than because of a recognised complication of the surgery.

Reputations to be protected

The negligent driver is far less likely than a surgeon to dispute or defend a claim in order to protect their reputation. Health providers feel understandably defensive about any allegation that they provided substandard care. This often results in protracted disputes about what went wrong and why, with the medical treatment provided, and can also increase the costs and risks of litigation.

Bringing a Compensation Claim – Factors to consider

When considering whether to investigate a medical negligence claim, there are a number of factors which need to be weighed up:



Law

Does the law support your claim so that you have reasonable prospects of winning?



Time Limits

Can your claim be made in time, or can you get an extension?



Compensation

What can you receive if you win?



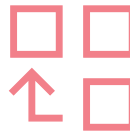
Timing

How long will the process take?



Costs

Will the compensation that you might receive outweigh the costs?



Alternatives to compensation

Is a complaint a more appropriate option?

To properly consider these factors, you should get free initial legal advice from a lawyer who specialises in medical negligence, armed with the following questions:

- **Do I have a chance of winning this claim? What are my chances?**
- **What compensation might I get if I win?**
- **What happens if I lose?**
- **If I win, what will be the costs that I need to pay?**
- **How long will the claim take?**
- **Can I get an apology if I win?**

What support is available to me during this process?

There isn't a single group or body that has oversight of, or coordinates support for, people who engage a private lawyer/law firm to bring a medical negligence claim for compensation.

That's why we established the FairCare Alliance Charitable Foundation, which exists to support injured patients and their unique interests.

FairCare partner law firms

A quality law firm will take the time to understand your unique needs. Your legal representative/s should provide the information you need, in the way that you need it, and time to consider your options. They should give you ample time to ask questions, make you feel heard and well prepared during your legal claim process. You should feel comfortable raising questions and you should always feel confident that your legal representative is acting on your behalf.

At FairCare, we have partnered with several high-quality specialist law firms with standards of practice that demonstrate their focus on the needs of injured patients. They have partnered with us to offer free initial legal advice to our members. We will always encourage you to consider alternatives, but we feel confident that our highly specialised partner law firms have your best interests at heart. **Visit faircare.org.au to access more information and free support.**

FairCare Support Group

We have established a private Meta (Facebook) support group for injured patients and their families to feel heard and supported by the common wealth of lived experience.

You can access the support group and more by visiting faircare.org.au.



Advocate for others

Many people who suffer medical treatment injury, including family or carers, feel compelled to support and/or advocate for others who find themselves in the same situation. Some lend their lived experience to contribute to local or statewide patient safety program and policy development, or project advisory groups. Becoming a consumer representative or patient safety advocate can be a rewarding and constructive way to move on from the harm while adding value to consumer-based co-design initiatives.

The Health Issues Centre (HIC) is a long-standing (over 35 years) peak health consumer organisation in Victoria. The HIC provides training in consumer advocacy and representation, and links consumers with lived experience to public policy makers, health services and research organisations. You can

find out more about this registered charity, including their Facebook community network (called 'Health Connect') at <https://hic.org.au>.

Safer Care Victoria (SCV) is the State's expert healthcare safety and improvement agency. It's an Administration Office that reports to the Minister for Health (Vic) through the Secretary of the Victorian Government Department of Health. SCV offers regular opportunities for health consumers to partner with them in all aspects of their work. More information is available at <https://www.safercare.vic.gov.au>.

In the interests of integrity, Vickie Veitch, Founder of FairCare Alliance and co-author of this guide, declares that she is employed by SCV.

About FairCare Alliance

FairCare is based in Melbourne and is borne out of the journey of 1 injured patient. At the end of that journey, her and her lawyer felt compelled to do more for people tragically harmed or coping with a loss resulting from care received in a Victorian public or private hospital.

FairCare has four aims:

Build a community of support for injured patients in Victoria

Arrange direct support for injured patients and their carers.



Increase public awareness on the experiences and needs of injured patients.

Advocate for legal and structural reform on behalf of injured patients and their families.

Join

If you've suffered from healthcare injury in Victoria, please join our private Facebook support group <https://www.facebook.com/groups/2994451750865574> and join us at <https://www.faircare.org.au> for free legal advice.

We value your experience and will work to:

- Empower our members
- Share your stories
- Define the issues and priorities that matter most to you, and
- Demand system reform in the interests of injured patients and patient safety.

Donate to help build support

If you found this resource helpful, please donate so we can build our community, support those who need it most and make a difference.

<https://faircare.org.au/donations>

For more information on how you can make a lasting difference, please visit FairCare.org.au. We want to work with our partners to achieve great outcomes.

FairCare Alliance Ltd is a recognised Charitable Organisation with Deductible Gift Recipient (DGR) status by the Australian Tax Office. All donations \$2 or more are tax-deductible.