

QA7 – GRIEVANCE AND COMPLAINTS PROCEDURE

INFORMATION

It is natural for grievances and complaints to arise when a group of people are working alongside one another. It is vital that everyone understands that raising complaints and grievances in a mature and responsible way is welcomed, and is critical for resolving issues, and creating a cohesive, productive and supportive environment.

We will approach all complaints and grievances with the following values:

- **Impartiality** - Both sides will have a chance to tell their side of the story.
- **Timeliness** - All complaints will be dealt with as quickly as possible.
- **Confidentiality** - Information will only be shared with parties involved.
- **Fairness** - All parties will be treated fairly, and no one will be victimised for making a complaint.
- **Respect** - All parties are expected to act respectfully and consider alternative views and opinions.
- **Participation** - All parties are expected to fully participate in the grievance process.

RESPONSIBILITIES

All team members, visitors, students and volunteers must comply with this procedure.

PROCEDURE

RAISING A CONCERN

- If any individual has a grievance or complaint, they are encouraged to raise their concerns with the person directly.
- If no resolution can be reached, or if the person does not feel comfortable talking to the person involved, they should raise their concern with the Nominated Supervisor/Management. It is recommended that information and facts about the issue, and any previously tried strategies, or possible future strategies that could be used, should be documented and shared with the Nominated Supervisor/Management.
- To lodge a formal complaint, the individual should report the complaint verbally, and in writing, to the Nominated Supervisor/Management, and the receipt of this complaint will be confirmed via writing to the complainant.

CONSULTATION

- Management will determine the best way to quickly address and resolve the concern to the mutual satisfaction of all parties.
- A meeting may be held with the relevant parties. All involved will:
 - Have the right to have a support person present at all stages of the process
 - Be advised not to discuss the issue with anyone other than Management

- Be advised that no action will be taken until all parties have had the opportunity to be heard.

INVESTIGATION

- Management may investigate the complaint, and this may involve conducting interviews and obtaining documentation. At all times, documentation will be kept confidential.
- During the investigation period consideration will be given to rostering and any other issues to help ensure a harmonious and stress-free environment is maintained for staff, families and children.
- Depending on the nature of the complaint, the issue may have to be referred to the Police and/or the Regulatory Authority.
- **Please note:** If the complaint alleges that a serious incident has occurred or is occurring while a child was or is being educated and cared for by the service, the Regulatory Authority will be notified.

RESOLUTION

- Following an investigation, Management will determine an appropriate outcome and will advise both parties in writing of this.
- In some instances, disciplinary action such as formal warnings or dismissal may be taken.
- If the situation does not warrant dismissal, behaviours may be monitored going forward and checks may be made at regular intervals to ensure the inappropriate behavior has ceased.
- Staff may be offered ongoing support and assistance, and this may include referring staff to the Employee Assistance Program.
- Families may be referred to external agencies for further support or assistance if required.
- If a parent is unhappy with the resolution they can refer the complaint to the Regulatory Authority in their state.

ACKNOWLEDGEMENTS, REFERENCES AND RESOURCES

ACECQA (2018). *Guide to the National Quality Framework*. Retrieved July 2023

<https://www.acecqa.gov.au/national-quality-framework/guide-nqf>

Queensland Human Rights Commission. (2019). *Sample complaints policy*. Retrieved 8 July, 2019

from <https://www.qhrc.qld.gov.au/resources/for-employers>

DOCUMENT CONTROL

Date Reviewed	Modifications
September 2019	Reviewed and created new policy document
18 th January 2022	Reviewed no changes
July 2023	Link to updated NQF guides