



Harrietville Bush Kinder

Complaints and Grievances Policy

Mandatory – Quality Area 7

Purpose

This policy will provide guidelines for:

- receiving and dealing with complaints and grievances at Harrietville Bush Kinder
- procedures to be followed in investigating complaints and grievances.

Note: This policy does not address complaints relating to staff grievances or employment matters. The relevant awards provide information on the management of such issues.

Our Commitment

Harrietville Bush Kinder is committed to:

- providing an environment of mutual respect and open communication, where the expression of opinions is encouraged
- complying with all legislative and statutory requirements
- dealing with disputes, complaints and complainants with fairness and equity
- establishing mechanisms to promote prompt, efficient and satisfactory resolution of complaints and grievances
- maintaining confidentiality at all times.

Scope

This policy applies to all members of the Harrietville Bush Kinder community; this includes the Service Manager, Nominated Supervisor, Educators (Certified Supervisor), the Committee of Management and subcommittee members, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Harrietville Bush Kinder.

Background

Complaints or grievances may be received from anyone who comes in contact with Harrietville Bush Kinder including parents/guardians, volunteers, students, members of the local community and other agencies.

In most cases, dealing with complaints and grievances will be the responsibility of the Harrietville Bush Kinder. All complaints and grievances, when lodged, need to be initially assessed to determine whether they are a general or a notifiable complaint (refer to *Definitions*).

When a complaint or grievance has been assessed as 'notifiable', Harrietville Bush Kinder must notify the Department of Education and Training (DET) of the complaint or grievance. Harrietville Bush Kinder will investigate the complaint or grievance and take any actions deemed necessary, in addition to responding to requests from and assisting with any investigation by DET.

There may be occasions when the complainant reports the complaint or grievance directly to DET. If DET then notifies Harrietville Bush Kinder about a complaint they have received, Harrietville Bush Kinder will still have responsibility for investigating and dealing with the complaint or grievance as outlined in this policy, in addition to cooperating with any investigation by DET.

DET will investigate all complaints and grievances it receives about a service, where it is alleged that the health, safety or wellbeing of any child within the service may have been compromised, or that there may have been a contravention of the *Education and Care Services National Law Act 2010* and the *Education and Care Services National Regulations 2011*.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Charter of Human Rights and Responsibilities Act 2006 (Vic)*, as amended 2011
- *Children, Youth and Families Act 2005 (Vic)*, as amended 2011
- *Children, Youth and Families Act 2005 (Vic)*, as amended 2012
- *Education and Care Services National Law Act 2010*: Section 174(2)(b)
- *Education and Care Services National Regulations 2011*: Regulations 168(2)(o) and 176(2)(b)
- *Health Records Act 2001 (Vic)*, as amended 2011
- *Information Privacy Act 2000 (Vic)*, as amended 2011
- *National Quality Standard, Quality Area 7: Leadership and Service Management*
 - Standard 7.3: Administrative systems enable the effective management of a quality service
 - Element 7.3.4: Processes are in place to ensure that all grievances and complaints are addressed, investigated fairly and documented in a timely manner
- *Privacy Act 1988 (Cth)*
- *Privacy Regulations 2006 (Cth)*

Definitions

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Complaint: (In relation to this policy) a complaint is defined as an issue of a minor nature that can be resolved promptly or within 24 hours, and does not require a detailed investigation. Complaints include an expression of displeasure, such as poor service, and any verbal or written complaint directly related to the service (including general and notifiable complaints).

Complaints do not include staff, industrial or employment matters, occupational health and safety matters (unless related to the safety of the children) and issues related to the legal business entity, such as the incorporated association or co-operative.

Complaints and Grievances Register: (In relation to this policy) records information about complaints and grievances received at the service, together with a record of the outcomes. This register must be kept in a secure file, accessible only to educators and Responsible Persons at the service. The register can provide valuable information to the Approved Provider on meeting the needs of children and families at the service.

Dispute resolution procedure: The method used to resolve complaints, disputes or matters of concern through an agreed resolution process.

General complaint: A general complaint may address any aspect of the service e.g. a lost clothing item or the service's fees. Harrieville Bush Kinder does not have to inform DET, but the complaint must be dealt with as soon as is practicable to avoid escalation of the issue.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature e.g. the service is in breach of a policy or the service did not meet the care expectations of a family.

Mediator: A person who mediates, especially one who reconciles differences between disputants.

Mediation: An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

Notifiable complaint: A complaint that alleges a breach of the Act or Regulation, or alleges that the health, safety or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider to the secretary of DET within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)). If Harrieville Bush Kinder is unsure whether the matter is a notifiable complaint, it is good practice to contact DET for confirmation. Written reports to DET must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of the Harrieville Bush Kinder Service Manager or a nominated member of the Committee of Management
- any other relevant information.

Written notification of complaints must be submitted using the appropriate forms, which are available from the Harrieville Bush Kinder front desk or can be found on the ACECQA website: www.acecqa.gov.au

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the Regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available from the Harrieville Bush Kinder front desk or on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DET) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

Responsibilities

The Nominated Supervisor or Committee of Management is responsible for:

- being familiar with the *Education and Care Services National Law Act 2010* and the *Education and Care Services National Regulations 2011*, service policies and constitution, and complaints and grievances policy and procedures;
- identifying, preventing and addressing potential concerns before they become formal complaints/grievances;
- ensuring that the name and telephone number of the Responsible Person (refer to *Staffing Policy*) to whom complaints and grievances may be addressed are displayed prominently at the main entrance of the service (Regulation 173(2)(b));
- ensuring that the address and telephone number of the Authorised Officer at the DET regional office are displayed prominently at the main entrance of the service (Regulation 173(2)(e));
- advising parents/guardians and any other new members of the complaints and grievances policy and procedures upon enrolment;
- ensuring that this policy is available for inspection at the service at all times (Regulation 171);
- being aware of, and committed to, the principles of communicating and sharing information with service employees, members and volunteers;
- responding to all complaints and grievances in the most appropriate manner and at the earliest opportunity;
- treating all complainants fairly and equitably;
- providing a *Complaints and Grievances Register* (refer to *Definitions*) and ensuring that staff record complaints and grievances along with outcomes;
- ensuring that staff record all verbal complaints in the *Complaints and Grievances Register* (refer to *Definitions*);

- complying with the service's *Privacy Policy* and maintaining confidentiality at all times (Regulations 181, 183);
- establishing a Grievances Subcommittee through the Committee of Management to investigate and resolve grievances (refer to Attachment 1 – Terms of reference for the Grievances Subcommittee)
- referring notifiable complaints (refer to *Definitions*), grievances (refer to *Definitions*) or complaints that are unable to be resolved appropriately and in a timely manner to the Committee of Management;
- ensure DET is informed in writing within 24 hours of receiving a notifiable complaint (refer to *Definitions*) (Act 174(4), Regulation 176(2)(b)); and,
- receiving recommendations from the Grievances Subcommittee and taking appropriate action.
- providing professional development and training opportunities for staff/carers to improve their conflict resolution skills once a year.
- supporting staff/educators with enhancing conflict resolution through professional development, strong mentoring and open discussions at staff meetings.

The Nominated Supervisor, Certified Supervisors, educators and other staff are responsible for:

- with the Service Manager, responding to and resolving issues as they arise where practicable;
- maintaining professionalism and integrity at all times;
- discussing minor complaints directly with the party involved as a first step towards resolution (the parties are encouraged to discuss the matter professionally and openly work together to achieve a desired outcome);
- informing complainants of the service's *Complaints and Grievances Policy*;
- recording all complaints and grievances in the *Complaints and Grievances Register* (refer to *Definitions*);
- recording all verbal complaints in the *Complaints and Grievances Register* (refer to *Definitions*);
- notifying the Service Manager / Committee of Management if the complaint escalates and becomes a grievance (refer to *Definitions*), is a notifiable complaint (refer to *Definitions*) or is unable to be resolved appropriately in a timely manner
- providing information as requested by Service Manager / Committee of Management e.g. written reports relating to the grievance
- complying with the service's *Privacy Policy* and maintaining confidentiality at all times (Regulations 181, 183)
- working co-operatively with Harrierville Bush Kinder and DET in any investigations related to grievances about Harrierville Bush Kinder, it's programs or staff.
- attending professional development and training opportunities that improve their conflict resolution skills where necessary.

Parents/guardians are responsible for:

- raising a complaint directly with the person involved, in an attempt to resolve the matter without recourse to the complaints and grievances procedures;
- communicating (preferably in writing) any concerns relating to the management or operation of the service as soon as is practicable;
- raising any unresolved issues or serious concerns directly with the Service Manager / Committee of Management;
- maintaining complete confidentiality at all times; and,
- co-operating with requests to meet with the Committee of Management and/or provide relevant information when requested in relation to complaints and grievances.

The complainant is responsible for actioning the complaint/grievance in the following manner:

- if the complaint is about an Educator, it should be referred to the Service Manager responsible for the service;
- if the complaint is about the Service Manager, it should be referred to Harrierville Bush Kinder Committee of Management;

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

Evaluation

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness;
- monitor complaints and grievances as recorded in the Complaints and Grievances Register to assess whether satisfactory resolutions have been achieved;
- review the effectiveness of the policy and procedures to ensure that all complaints have been dealt with in a fair and timely manner;
- keep the policy up to date with current legislation, research, policy and best practice;
- revise the policy and procedures as part of the service's policy review cycle, or as required; and,
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

Dealing with Complaints and Grievances

Dealing with a complaint

When a complaint is received, the person to whom the complaint is addressed will:

- inform the complainant of the service's Complaints and Grievances Policy
- encourage the complainant to resolve the complaint with the person directly, or to submit their complaint in writing
- enter the complaint in the Complaints and Grievances Register (refer to Definitions) together with the outcome
- comply with the service's Privacy and Confidentiality Policy with regard to all meetings/discussions in relation to a complaint
- inform the Approved Provider if the complaint escalates and becomes a grievance (refer to *Definitions*), a notifiable complaint (refer to *Definitions*) or is unable to be resolved appropriately in a timely manner.

Dealing with a grievance

When a formal complaint or grievance is lodged with the service:

- the staff member receiving the formal complaint or grievance will record all relevant details regarding the grievance in the Complaints and Grievances Register (refer to Definitions) and immediately inform the Approved Provider;
- the Approved Provider must inform the service's Grievances Subcommittee;
- the Grievances Subcommittee will assess the grievance to determine if it is a notifiable grievance (refer to Definitions);
- if the grievance is notifiable, the Approved Provider will be responsible for notifying DET. This must be in writing within 24 hours of receiving the complaint (Regulation 176(2)(b));
- the written report to DET needs to be submitted using the appropriate forms from ACECOA and will include:
 - details of the event or incident
 - the name of the person who initially made the complaint
 - if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
 - contact details of a nominated member of the Grievances Subcommittee – any other relevant information
- if the Approved Provider is unsure if the complaint is a notifiable complaint, it is good practice to contact DET for confirmation.

Grievances Subcommittee responsibilities and procedures

In the event of a grievance being lodged, the Grievances Subcommittee will:

- convene as soon as possible to deal with the grievance in a timely manner (but no more than 14 days after the grievance has been received);

- disclose any conflict of interest relating to any member of the subcommittee/panel of investigators. Such members must stand aside from the investigation and subsequent processes;
- consider the nature and the details of the grievance;
- identify which service policies (if any) the grievance involves; inform the Approved Provider if their involvement is required under any other service policies;
- if the grievance is a notifiable complaint (refer to Definitions), inform the complainant of the requirements to notify DET of the grievance and explain the role that DET may take in investigating the complaint;
- maintain appropriate records of the information and data collected, including minutes of meetings, incident reports and copies of relevant documentation relating to the grievance;
- respect the confidential nature of information relating to the grievance. The Approved Provider and the subcommittee must handle any grievance in a discreet and professional manner; and,
- store all written information relating to grievances securely and in compliance with the service's *Privacy and Confidentiality Policy*.

Investigating the grievance and gathering relevant information

When investigating the grievance and gathering relevant information, the Grievance Subcommittee/investigator will:

- meet with individual witnesses, and give right of reply to the person against whom the allegations are made in relation to any accusation or information relating to an alleged incident;
- offer the complainant the opportunity of meeting with the subcommittee/investigator to discuss the complaint and provide additional information where relevant;
- nominate a subcommittee member to inform the complainant of the procedures for dealing with the grievance if the complainant does not take up the opportunity to attend a meeting;
- document the time, date and detail of meetings/discussions, and follow this up with a letter to the complainant outlining the information discussed;
- be available to meet with DET staff, if required, and provide additional information as requested;
- review relevant information and documents;
- obtain any other relevant information or documentation that will assist in resolving the grievance; and,
- seek advice, where appropriate, from individuals and organisations that may be able to assist in resolving the grievance (any cost in seeking advice will require prior approval by the Approved Provider).

Following the investigation

Once the investigation of the grievance is complete, the Grievances Subcommittee/investigator will:

- endeavour to resolve the grievance by mutual agreement of the parties involved;
- meet to discuss the information gathered and determine further action, including generating recommendations to be presented to the Approved Provider;
- ensure that any recommendations or actions are in accordance with relevant legislation and funding requirements including, but not limited to:
 - *Education and Care Services National Law Act 2010*
 - *Education and Care Services National Regulations 2011*
 - *Victorian kindergarten policy, procedures and funding criteria*
- report outcomes that may include relevant information gained in investigations and consultations to the Approved Provider and, where required, provide any recommendations for consideration by the Approved Provider;
- inform the Approved Provider on the involvement of DET and the outcomes of any investigation by DET. The Approved Provider will review the report and any subcommittee recommendations and will be responsible for making decisions on the action to be taken (if any), including relevant review mechanisms;
- advise the complainant and other relevant parties of any decisions made by the Approved Provider in relation to the grievance; and,
- follow up to ensure the parties involved are satisfied with the outcome and monitor progress on any actions taken by the Approved Provider.

The person/s receiving the complaint are responsible for the following:

- acknowledging any written complaints within five working days;
- indicating to the complainant the proposed timeframe required to resolve the complaint as early as possible in the process;
- informing the complainant of progress towards resolving the complaint;
- It is important that those handling complaints should be independent of the issue of the complaint. If a conflict of interest arises for a staff member involved in the receipt or management of a complaint, the relevant person should be informed and alternate arrangements should be made.
- To protect confidentiality and privacy, staff involved in handling complaints resolution must ensure that information is restricted only to those who genuinely need to know in order to deal with the complaint.

Some information about the specific complaint may need to be disclosed to others during its resolution. The complainant should be made aware that this might occur.

- Complainants should be reassured that their complaint will not lead to discrimination.
- The person or room about whom the complaint is made shall have the right to be advised of the identity of the complainant and the complaint.
- Complainants with special needs must be offered reasonable assistance to make their complaint. Information on the process should be readily available, expressed in plain English and in other community languages where possible, in large print or through audio-visual means.

Attachments

Attachment 1: Terms of reference for the Harrierville Bush Kinder Grievance Subcommittee

Authorisation

This policy was adopted by the Harrierville Bush Kinder Committee of Management of Management 05/12/2018

Policy review

- The service will review the Grievances and Complaints Management Policy and procedures every 12 to 18 months or earlier as required.
- Families are encouraged to collaborate with the service to review the policy and procedures.
- Staff/educators are essential stakeholders in the policy review process and will be encouraged to be actively involved.

Review date

This policy shall be reviewed in 05/12/2020 (or earlier as required).

Attachment 1

Purpose

- A Grievance Subcommittee has been established by the Harrietteville Bush Kinder Committee of Management (the CoM) to investigate and facilitate the resolution of any disputes lodged as per the Harrietteville Bush Kinder Grievance Policy.
- The Grievance Subcommittee shall act fairly and equitably, and maintain confidentiality at all times.

Membership

- The Grievance Subcommittee shall comprise three [3] persons drawn from the CoM of which one will be the President. One of the three members shall be appointed as the Chair of the Subcommittee. The Service Manager shall also be a member of the subcommittee.
- The role of the chairperson is to receive any grievances submitted to the CoM and to ensure the Harrietteville Bush Kinder procedure described in Section 22 of the Harrietteville Bush Kinder Constitution and in the Harrietteville Bush Kinder Grievance Policy is followed.

Time period nominated

- The Grievances Subcommittee shall be appointed at the beginning of each year by the CoM for a period of one [1] year.

Meeting requirements

- The Chair of the Subcommittee is responsible for organising meetings as soon as is practicable after receiving a complaint or grievance but no more than fourteen [14] days.
- Any delegations must be made in accordance with section 40 of the Harrietteville Bush Kinder constitution.
- Minutes of each meeting must be taken and submitted to the Secretary after each meeting is held.
- The quorum for meetings of the Subcommittee shall be one half of its members, but no less than two [2].

Decision-making authority

- The Subcommittee is required to fulfil only those tasks and functions as outlined in these terms of reference.
- The CoM shall make a determination on each grievance, which may include confirming or modifying the recommendations of the Subcommittee.
- The CoM may decide to alter the decision-making authority of the Subcommittee at any time.

Urgent Matters

- Where an urgent matter arises and a meeting it is impractical to hold a formal meeting the Chair or their delegate must make every reasonable effort to contact the remaining Subcommittee members in writing and/or by telephone. The quorum for decisions made in these cases is as if a formal meeting was held [2].
- Notes documenting the process followed and discussions held in these cases must be submitted to the Secretary within three [3] working days.
- In the case that a determination is required prior to the next scheduled Committee meeting the President may seek the approval of the Committee Executive (or in their absence a quorum of Committee members) to delegate determination powers to the subcommittee for the purpose of a specific grievance. This delegation shall cease once the specific grievance is resolved.
- Notes documenting the process followed and discussions held in these cases must be submitted to the Secretary within three [3] working days.

Budget allocation

- All expenditure to be incurred by the Subcommittee must be approved by the President, Treasurer or Service Manager. A request in writing must be submitted by the Subcommittee.

Tasks and functions of the Grievance Subcommittee

- Investigate and facilitate the resolution of any disputes lodged as per Section 22 of the Harrietville Bush Kinder Constitution and the Harrietville Bush Kinder Grievance Policy.
- Present its recommendation to the CoM at the conclusion of the investigation, including recommending any action under the rules or otherwise that must be taken arising from the grievance.