

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

Purpose

The purpose of this policy is to provide guidance for receiving and dealing with complaints and grievances at MEYM and the 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.

Policy Statement

MEYM is committed to:

- a) Providing an environment of mutual respect and open communication, where the expression of opinions is encouraged
- b) Complying with all legislative and statutory requirements
- c) Dealing with disputes, complaints and complainants with fairness and equity
- d) Establishing mechanisms to promote prompt, efficient and satisfactory resolution of complaints and grievances
- e) Maintaining confidentiality at all times;
- f) Maintain a service culture free from discrimination and harassment.

Scope

This policy applies to:

- a) The Approved Provider (MEYM) or Persons with Management or Control,
- b) Nominated Supervisor;
- c) Persons in Day to Day Charge;
- d) Educators;
- e) Staff;
- f) Students on placement;
- g) Volunteers;
- h) Parents/guardians;
- i) Children; and
- j) Others attending the programs and activities of MEYM.

Background

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

Complaints or grievances may be received from anyone who comes in contact with 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 Approved Provider. 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', the Approved Provider must notify Department of Education and Training (DET) of the complaint or grievance. The Approved Provider 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 the Approved Provider about a complaint they have received, the Approved Provider will still have responsibility for investigating and dealing with the complaint or grievance as outlined in this policy, in addition to co-operating 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

Relevant legislation and standards include but are not limited to:

- Charter of Human Rights and Responsibilities Act 2006 (Vic)
- Children, Youth and Families Act 2005 (Vic)
- 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)
- Information Privacy Act 2000 (Vic)
- National Quality Standard, Quality Area 7: Governance and Leadership
- Privacy Act 1988 (Cth)
- Privacy Regulations 2013(Cth)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

The Approved Provider or Persons with Management and Control 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 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 and in a confidential manner;
- Providing a *Complaints and Grievances Register* (refer to *Definitions*) and ensuring that staff record complaints and grievances along with outcomes
- Complying with the service's *Privacy and Confidentiality Policy* and maintaining confidentiality at all times (Regulations 181, 183);
- Establishing a Grievances Subcommittee or appointing an investigator to investigate and resolve grievances (refer to Attachment 1 – Sample terms of reference for a Grievances Subcommittee/investigator);
- 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 Grievances Subcommittee/investigator;
- Informing DET in writing within 24 hours of receiving a notifiable complaint (refer to *Definitions*) (Act 174(4), Regulation 176(2)(b)) ;
- Receiving recommendations from the Grievances Subcommittee/investigator and taking appropriate action;
- Ensure all complaints and grievances are documented and stored safely and confidentiality.

The Nominated Supervisor, Persons in Day to Day Charge, educators and other staff are responsible for:

- Responding to and resolving issues as they arise where practicable;
- Maintaining professionalism and integrity at all times;

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

- 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*);
- Notifying the Approved Provider 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 the Approved Provider e.g. written reports relating to the grievance;
- Complying with the service's *Privacy and Confidentiality Policy* and maintaining confidentiality at all times (Regulations 181, 183);
- Working co-operatively with the Approved Provider and DET in any investigations related to grievances about , its programs or staff.

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 Approved Provider, via the Nominated Supervisor/educator or through the Grievances Subcommittee/investigator
- Maintaining complete confidentiality at all times;
- Co-operating with requests to meet with the Grievances Subcommittee and/or provide relevant information when requested in relation to complaints and grievances.

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;
- Notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

Definitions

The terms defined in this section relate specifically to this policy and procedure. For commonly used terms e.g. Approved provider, Nominated Supervisor, Regulatory Authority etc. refer to General definitions section in the policy and procedure folder.

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. Services do 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 (neutral party) who attempts to reconcile 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 the Approved Provider 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 a nominated member of the Grievances Subcommittee/investigator
- Any other relevant information.

Written notification of notifiable complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.cecqa.gov.au or submitted via ACECQA's online portal NQA-ITS

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

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 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.

Supporting Documents and Templates

- Attachment 1: Sample terms of reference for a Grievances Subcommittee/investigator
- Attachment 2: Dealing with a complaint
- Attachment 3: Complaint Notification Record
- Attachment 4: Complaint and Issue Resolution Procedure

Sources

- ACECQA: <http://www.acecqa.gov.au>
- Department of Education and Training (DET) – Regional Office details are available under ‘Contact Us’ on the DEECD website: www.education.vic.gov.au
- ELAA Early Childhood Management Manual: www.elaa.org.au
- *The Kindergarten Guide* (Department of Education and Early Childhood Development) is available under *early childhood / service providers* on the DET website: www.education.vic.gov.au^{SEP}

Service policies

- Code of Conduct Policy
- Incident, Injury, Trauma and Illness Policy
- Inclusion and Equity Policy
- Interactions with children Policy
- Privacy and Confidentiality
- Staffing policy

Policy Control

Approving Authority	Moreland Early Years Management Board
Date Approved	March 2020
Date Effective	March 2020
Policy Category	Organisational

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

Edition	V2
Review Date	2022

This policy and its contents was referenced from Early Learning Association Australia (ELAA)

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

Attachment 1

Sample terms of reference for a Grievances Subcommittee/investigator

DATE ESTABLISHED: [Date]

Purpose

[Choose one that is appropriate]

- A Grievances Subcommittee has been established by the Approved Provider of to investigate and resolve grievances lodged with .
- An investigator/panel of investigators has been appointed by the Approved Provider of to investigate and resolve grievances lodged with .

Membership

[If a Grievances Subcommittee is established]

Three people are nominated by the Approved Provider, and membership must include a minimum of one Responsible Person (refer to *Definitions*).

[If an investigator or a panel of investigators is appointed]

[Specify the membership.]

Time period nominated

The Grievances Subcommittee/investigator shall be appointed for [insert time frame e.g. one year].

Meeting requirements

The subcommittee convenor/investigator is responsible for organising meetings as soon as is practicable after receiving a complaint or grievance.

Decision-making authority

The subcommittee/investigator is required to fulfil only those tasks and functions as outlined in these terms of reference.

The Approved Provider may decide to alter the decision-making authority of the subcommittee/investigator at any time.

Budget allocation

All expenditure to be incurred by the subcommittee/investigator must be approved by the Approved Provider. A request in writing must be submitted by the subcommittee/investigator.

Reporting requirements of the committee

- The subcommittee/investigator is required to keep minutes of all meetings held. These are to be kept in a secure file.
- The convenor is required to present a written report to the Approved Provider about the grievance, ensuring that privacy and confidentiality are maintained according to the service's *Privacy and Confidentiality Policy*.

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

Tasks and functions of the Grievances Subcommittee/investigator

- Responding to complaints in a timely manner
- Investigating all complaints received in a discreet and responsible manner
- Implementing the procedures outlined in Attachment 2 – Dealing with complaints and grievances
- Acting fairly and equitably, and maintaining confidentiality at all times
- Informing the Approved Provider if a complaint is assessed as notifiable
- Keeping the Approved Provider informed about complaints that have been received and the outcomes of investigations
- Providing the Approved Provider with recommendations for action
- Ensuring decisions are based on the evidence that has been gathered
- Reviewing the terms of reference of the Grievances Subcommittee/investigator at commencement and on completion of their term. Suggestions for alterations are to be presented to and approved by the Approved Provider

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

Attachment 2

Complaint Notification Form

Please complete the required information and email to MEYM within 24 hours of the complaint, grievance or issue being made.

Please tick one option

- Complaints alleging that the Law has been contravened^[1]
- Complaint alleging that a serious incident has occurred or is occurring

Service name	
Details of the person submitting the form (including Name & Role in Early Years Service)	
Date complaint received	

COMPLAINANT DETAILS

Complainant name and contact details	
--------------------------------------	--

DETAILS OF CHILD/CHILDREN TO WHOM THE COMPLAINT RELATES IF RELEVANT

Name of child/children	
Gender	
Date of Birth	

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

Please supply the following information:

A Copy of the complaint (or written summary) and any other relevant documentation (including correspondence, photographs, statements, etc.)

Steps taken/ actions/ strategies in response to the complaint

Complaints and Grievances Policy [Mandatory] (QA 7 Governance and Leadership)

Attachment 3

MEYM Statement in relation Complaints or Grievances – To be displayed at Individual services.

All early childhood teachers and educators at MEYM are committed to service excellence, high quality programs and service delivery. The early childhood teachers and educators encourage families, external early years liaisons and the community for feedback about any concerns or complaints they may have about the health, wellbeing and safety of children being compromised, the program and service delivery, and any alleged contravention of the Education and Care Services National Law 2010 and Education and Care Services National Regulations 2011.

Clear, open and ongoing communication can clarify misunderstandings and prevent the escalation of potential conflicts.

If you are concerned about a MEYM education, care or licensed children's service, you should raise your concerns with the service first. Please direct your query to the Nominated Supervisor or Service Coordinator in the first instance. MEYM early childhood teachers, educators and staff are available to support and assist in the resolution of any issues. All concerns, feedback and complaints will be communicated with the MEYM General Manager.

We acknowledge every complaint, concern and feedback as an opportunity to reflect and continue to improve quality in our early years services.

When an issue cannot be resolved **directly by the early years' service early years teachers, educators** and staff, it is of a sensitive nature, or you would like to discuss any matters further please contact:

Moreland Early Years Management (MEYM)

2A Marigold Crescent Gowanbrae, Victoria 3043

Phone: 9081 6986

email: gm@meym.org.au

MEYM will endeavour to deal with and respond to your complaint in a discreet, effective and timely manner.

The Department of Education and Training will be notified within 24 hours if your complaint alleges that a child's health, safety or wellbeing has been compromised while a child/children is/are being educated and cared for by the approved education and care service and the relevant legislation has been contravened.

Direct complaints can be made to the Department of Education and Training in relation to the health and safety of children or relevant legislation has been contravened.

Department of Education and Training (DET)

900/1 McNab Avenue Footscray, Victoria 3011

Phone: **1300 333 232**

Further information can be found on the Department of Education and Training website under Early Childhood.