

## Grievance Dispute and Resolution Procedures

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**These Procedures are to be read in conjunction with the Staff Grievance Dispute Resolution Policy and the Complaints and Grievance Policy**

### Dealing with a complaint in the first instance

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

- Make a determination if the complaint can follow an informal or formal process depending on the type of complaint. Refer to Grievance Flow Chart
- Refer to the Appropriate Award with regards to any specifics in the award that relates to grievances
- 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
- Area Manager and/or the General Manager to be advised of the complaint
- 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.
- The Approved Provider will meet with relevant parties to offer a right of reply, determine the crux of the issues and explore appropriate resolutions to issues raised in the complaint. Agree on an outcome.
- The Approved Provider will communicate the outcome of this meeting to the complainant and record in the register.

### 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 determine the seriousness of the complaint to determine the best course of action. For example if the complaint is in relation to Harassment and Bullying a formal investigation will need to happen. If it can be resolved through discussion with the person(s) the complaint is about strategies will then be developed and put in place. The complainant will then be advised of this.
- If it is determined that an investigation should take place a Grievances Subcommittee/investigator will be engaged to assess the grievance to determine if it is a notifiable grievance. (refer to *Definitions*) and carry out a formal investigation.
- if the grievance is notifiable, the Approved Provider will be responsible for notifying DE. This must be in writing within 24 hours of receiving the complaint (Regulation 176(2)(b))
- the written report to DE needs to be submitted using the appropriate forms from ACECQA and will include:

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- 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
- if the Approved Provider is unsure if the complaint is a notifiable complaint, it is good practice to contact DE for confirmation.

### **Grievances Subcommittee/investigator responsibilities and procedures**

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

- Convene as soon as possible to deal with the grievance in a timely manner;
- 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 DE of the grievance and explain the role that DE 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/investigator must handle any grievance in a discreet and professional manner;
- 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 Grievances 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 DE staff, if required, and provide additional information as requested

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- Review relevant information and documents;
- Obtain any other relevant information or documentation that will assist in resolving the grievance;
- 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*
- *The Kindergarten Guide* (refer to Sources) 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 DE and the outcomes of any investigation by DE. The Approved Provider will review the report and any subcommittee/investigator 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;
- Follow up to ensure the parties involved are satisfied with the outcome and monitor progress on any actions taken by the Approved Provider.

### Policy Control

Approving Authority	MEYM Board
Date Approved	April 2023
Date Effective	April 2023
Policy Owner	MEYM Board of Management
Policy Category	Organisational
Edition	V2

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Review Date	2025
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This policy and its contents were referenced from Early Learning Association Australia (ELAA).