



DEALING WITH COMPLAINTS POLICY (Staff)

Feedback from families, educators, staff and the wider community is fundamental in creating an evolving Early Learning Service working towards the highest standard of care and education.

It is foreseeable that feedback will include divergent views, which may result in complaints. This Policy details our Service’s procedures for receiving and managing informal and formal complaints from staff. Educators can lodge a grievance or complaint with management with the understanding that it will be managed conscientiously and confidentially.

NATIONAL QUALITY STANDARD (NQS)

| QUALITY AREA 4: STAFFING ARRANGEMENTS | | |
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| 4.1.1 | Organisation of educators | The organisation of educators across the service supports children's learning and development. |
| 4.1.2 | Continuity of Staff | Every effort is made for children to experience continuity of educators at the service. |
| 4.2 | Professionalism | Management, educators and staff are collaborative, respectful and ethical. |
| 4.2.1 | Professional collaboration | Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other’s strengths and skills. |
| 4.2.2 | Professional standards | Professional standards guide practice, interactions and relationships. |

| QUALITY AREA 7: GOVERNANCE AND LEADERSHIPS | | |
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| 7.1.2 | Management Systems | Systems are in place to manage risk and enable the effective management and operation of a quality Service. |
| 7.2.1 | Continuous Improvement | There is an effective self-assessment and quality improvement process in place. |

| LEGISLATIVE REQUIREMENTS/EDUCATION AND CARE SERVICES NATIONAL REGULATIONS | |
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| Sec. 172 | Offence to fail to display prescribed information |
| Sec.174 | Offence to fail to notify certain information to Regulatory Authority |
| 12 | Meaning of serious incident |
| 168(2)(o) | Education and care service must have policies and procedures... for dealing with complaints |
| 170 | Policies and procedures must be followed |
| 171 | Policies and procedures to be kept available |
| 173(2)(b) | Requires an approved provider to make the name and telephone number of the person to whom complaints may be addressed clearly visible at the service |
| 176 | Time to notify certain information to Regulatory Authority |
| 183 | Storage of records and other documents |

RELATED POLICIES

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| CCS Governance Policy Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Dealing with Complaints Policy Enrolment Policy Family Communication Policy Governance Policy | Incident, Injury, Trauma and Illness Policy Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Respect for Children Policy Responsible Person Policy Student and Volunteer Workers Policy |
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for dealing with complaints (regulation 168) and take reasonable steps to ensure those policies and procedures are followed (regulation 170).

We aim to investigate all complaints and grievances with a high standard of equity and fairness. We believe in team collaboration to ensure a safe, healthy and harmonious work environment. We will ensure that all persons making a complaint are guided by the following policy values:

- procedural fairness and natural justice
- code of ethics and conduct
- culture free from discrimination and harassment
- transparent policies and procedures
- opportunities for further investigation
- adhering to our Service philosophy

PROCEDURAL FAIRNESS AND NATURAL JUSTICE

Our Service believes in procedural fairness and natural justice that govern the strategies and practices, which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker
- The right to have the decision based on relevant evidence

SCOPE

This policy applies to management, the approved provider, nominated supervisor, staff and educators of the Service.

IMPLEMENTATION

Grievances and complaints can transpire in any workplace. Handling them appropriately is imperative for sustaining a safe, healthy, harmonious and productive work environment. Our *Dealing with Complaints Policy* ensures that all persons are presented with procedures that:

- value the opportunity to be heard
- promote conflict resolution
- encourage the development of harmonious partnerships
- ensure that conflicts and grievances are mediated fairly
- are transparent and equitable.

DEFINITIONS

Complaint: Expression of dissatisfaction made to or about an organisation related to its products, services, staff or the handling of a complaint where a response or resolution is explicitly or implicitly expected or legally required [AS/NZS 10002:2014 Complaint Management Standard].

Complaints and Grievances Records: Complaints and grievances received at the service shall be recorded, along with the outcomes. Any documentation included must be securely stored, accessible only to management and the Regulatory Authority. These records can provide valuable information to the Approved Provider and Nominated Supervisor of the service to ensure children and family's needs are being met.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature. A *workplace grievance* is a complaint raised towards an

employer by an employee due to a violation of legalities (workplace policies, employment contract, national standards).

Mediator: A person who attempts to assist and support people involved in a conflict come to an agreement.

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 *Education and Care Services National Law and Regulations*, National Quality Standard 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 or Nominated Supervisor to the Regulatory Authority within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)).

If the Approved Provider/Nominated Supervisor is unsure whether the matter is a notifiable complaint, it is good practice to contact the [Regulatory Authority](#) for confirmation. Written reports 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 (or Nominated Supervisor)
- any other relevant information.

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au and logged using NQA ITS (National Quality Agenda IT System).

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 centre in contravention of the Regulations or is mistakenly locked in/out of the centre premises (Regulation 12).

A serious incident should be documented in an *Incident, Injury, Trauma Record* as soon as possible and within 24 hours of the incident. The Regulatory Authority must be notified within 24 hours of a serious incident occurring at the centre (Regulation 176(2)(a)). These records are required to be retained for the periods specified in Regulation 183. The Approved Provider will notify the regulatory authority of any incident where there is a reasonable belief that physical and/or sexual abuse of a child has occurred or is occurring at the service, or any allegation that sexual or physical abuse of a child has occurred or is occurring at the service.

We acknowledge that conflict is a natural part of the work environment. It is important that all conflict is resolved as unresolved conflict can lead to tension, stress, low productivity, bitter relationships, excess time off, ill health, anxiety and many other destructive emotions. When conflict is addressed and handled constructively the outcome results in a harmonious working environment.

Positive communication between educators is vital to the smooth running of the Service and to ensure a positive environment for children. Educators are expected to treat other educators with respect, accept differences and share ideas. It is every staff member's responsibility to contribute to the development of an open, healthy and constructive work environment. All grievances and complaints, whether considered minor or not, are to be dealt with promptly, professionally and thoroughly.

The Service's employees are expected to look at conflict in a positive way, ready to learn something new, reflect on good quality practice, improve work relationships and ultimately provide better care and education for children.

Employees are also to be aware of their responsibility to be a good role model for children, and appropriately and professionally handle conflict with work colleagues, children, parents, and other associates.

Employees should regularly reflect on *Early Childhood Australia's Code of Ethics* for guidance of appropriate behaviour when dealing with conflict. The Code of Ethics states that all team members should "*make every effort to use constructive methods to resolve differences of opinion in the spirit of collegiality.*"

Privacy and Confidentiality: Management and educators will adhere to our *Privacy and Confidentiality Policy* when dealing with grievances and complaints. However, if a grievance or complaint involves a staff

member or child protection issues, a relevant government agency will need to be informed (See: Reportable Conduct Scheme in *Child Protection Policy*).

Conflict of Interest

It is important for the complainant to feel confident in

- being heard fairly
- an unbiased decision-making process

Should a conflict of interest arise during a grievance or complaint that involves the Approved Provider or Nominated Supervisor, other Management will be nominated as an alternative mediator.

Our Service may also engage the resources of an Independent Conflict Resolution Service to assist with the mediation of a dispute. We will ensure that throughout the conflict resolution process the Service's Code of Conduct is adhered to.

THE APPROVED PROVIDER/ NOMINATED SUPERVISOR /RESPONSIBLE PERSON WILL:

- ensure staff and educators are aware of the person to whom complaints can be made and the processes required
- treat all grievances and complaints seriously and as a priority
- ensure grievances and complaints remain confidential
- ensure grievances and complaints reflect procedural fairness and natural justice
- ensure people feel safe or comfortable when making a complaint, including children
- discuss the issue with the complainant within 24 hours of receiving the verbal or written complaint
- investigate and document the grievance or complaint fairly and impartially
- comply with legislation for any allegations or convictions of child abuse or child related misconduct of any staff member, volunteer or contractor and notify the Commission for Children and Young People (CCYP) as part of the Reportable Conduct Scheme.

The investigation will consist of:

- reviewing the circumstances and facts of the complaint (or breach) and inviting all affected parties to provide information where appropriate and pertinent
- discussing the nature of the complaint (or breach) and giving the accused educator, staff member, volunteer or visitor an opportunity to respond

- permitting the accused person to have a support person present during the consultation (for example: Union Representative or family member; however, this does not include a lawyer acting in a professional capacity).
- providing the employee with a clear written statement outlining the outcome of the investigation.
- Advise the complainant and all affected parties of the outcome within 7 working days of receiving the verbal or written complaint.
 - management will provide a written response outlining the outcome and provide a copy to all parties involved
 - if a written agreement about the resolution of the complaint is prepared, all parties will ensure the outcomes accurately reflect the resolution and sign in agreement
- should management decide not to proceed with the investigation after initial enquiries, a written notification outlining the reasoning will be provided to the complainant
- keep appropriate records of the investigation and outcome and store these records in accordance with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*
- monitor ongoing behaviour and provide support as required
- ensure the parties are protected from victimisation and bullying
- request feedback on the grievance or complaint process
- track complaints to identify recurring issues within the Service
- notify the Regulatory Authority within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised.
- Notifications of any allegation that sexual or physical abuse of a child has occurred or is occurring at the service must be made to CCYP.

EDUCATORS AND STAFF WILL:

- be aware of the possible ramifications of their actions when dealing with staff issues
- raise the grievance or complaint directly with the person they have grievance with, in a professional manner and at an appropriate time. Both parties should try to resolve the issue and develop solutions to ensure the problem does not happen again. Discussions should be based on the principles of privacy, confidentiality, respect and open-mindedness, will not involve other educators, staff, volunteers or visitors (e.g. parents) and will take place away from children.
- if the person is unable to resolve the issue or feels uncomfortable raising the matter directly with the person concerned, the grievance or complaint must be raised with the Approved Provider / Management or Nominated Supervisor. The Approved Provider or Nominated Supervisor (or other manager) may ask for the issue to be put in writing.

- provide all relevant information, outlining the issue, identifying any other person involved in the problem, and any suggested solution
- communicate openly about the issue with the relevant parties
- raise any grievance involving suspected or actual unlawful activity (including bullying) with the Approved Provider or Nominated Supervisor immediately and privately
- maintain confidentiality at all times
- maintain professionalism at all times.

When the persons involved cannot resolve the grievance between them in a constructive and professional way the following steps will be taken.

The aggrieved person is to contact their immediate supervisor (room leader, nominated supervisor or director) who will act as mediator.

The Mediator will have an interview with the persons involved and clarify the facts, work out whether advice is needed from other sources, discuss options available, and help to formulate a plan of action. If an employee does not feel comfortable in approaching their supervisor, or the conflict is with their immediate supervisor, they can contact the next level of management or the Approved Provider to act as Mediator. The Approved Provider can nominate a suitable person to mediate if unavailable.

If an amicable resolution does not occur at this meeting the Mediator is to present a report to the next level of management outlining:

- the nature of the grievance or complaint
- the procedures followed to date
- the solution(s) sought
- the recommended plan of action or resolution.

If an agreement is reached the mediator is to present a report to the next level of management outlining:

- the nature of the grievance
- the procedures followed to date
- the solution(s) agreed upon
- the plan of action to reach this solution and review time if warranted
- a copy of this report is to be provided to all persons involved in the grievance or complaint, and a copy is to be retained at the workplace.

GRIEVANCE/COMPLAINT PROCEDURES

Harmonious staff relations within the Service largely depend on staff feeling satisfied that their professionalism is being acknowledged by their involvement in appropriate decision-making processes. The quality of industrial relations is likely to be substantially better in a workplace if the decision-making processes adopted permit staff to have input into decisions that affect the nature and quality of their professional work.

Management and staff within the organisation will work together to develop and implement appropriate strategies to facilitate consultative and collaborative decision-making processes within the workplace. Where staff feel these processes have failed and are in conflict with decisions made by Management, the following procedure is to be followed:

- the aggrieved person(s) will discuss the grievance with their immediate supervisor
- the supervisor is to report the grievance to the Nominated Supervisor/ Director
- the Mediator will seek advice as necessary from other sources, (e.g. unions, Work Cover and/or The Fair Work Commission)
- the Mediator will then advise Management of the possible solutions.

Meetings are to be arranged with the aggrieved person(s) as necessary throughout the process. The outcome of the grievance must be reported to the aggrieved person within a week of the decision.

RESOLUTION OF GRIEVANCES

Grievances are considered resolved when all persons involved agree to a solution, when the cause of the grievance has been removed or resolved, and when arrangements have been made, if appropriate, to repair any damage and distress suffered by the persons involved. Strategies agreed upon by both parties are to be put in place to help avoid further conflict.

UNRESOLVED CONFLICT

If resolution of the conflict is unsuccessful after all procedures in the *Dealing with Complaints Policy* have been followed it may then be necessary to take disciplinary action.

CONFIDENTIALITY

Mediators are to use discretion and do their utmost to maintain confidentiality. Any breach of this confidentiality could result in a charge of misconduct. However, confidentiality cannot be guaranteed in the following situations: if it is considered that someone is in danger, if disciplinary action or criminal investigation might be necessary; or if employer liability might be involved.

No action will be taken against the person about whom a formal complaint is lodged until they are made aware of any allegations so that they may respond.

SUPPORT PERSON

A Staff member is able to nominate a support person to attend any meetings with them. This person may be a union representative, impartial friend, or family member.

EDUCATORS AND STAFF WILL NOT

- become involved in complaints or grievances that do not concern them
- raise complaints with an external complaints body, such as a court or Tribunal, without exhausting the Service’s grievance procedures.

CONTINUOUS IMPROVEMENT/EVALUATION

Complaints provide our Service with opportunities for learning and improvement. We encourage regular and ongoing feedback from staff, children and families and the community.

TO ENSURE COMPLAINTS AND GRIEVANCES ARE HANDLED APPROPRIATELY, THE NOMINATED SUPERVISOR WILL:

- evaluate each individual complaint and grievance as recorded in the *Complaints and Grievance Management Register* to assess that a satisfactory resolution that has been achieved
- review the *Dealing with Complaints Policy (Staff)* and other related policies annually
- consider feedback from staff, educators and families regarding the policy and procedure.

RELATED RESOURCES

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| Complaints / Grievance Procedure Compliant / Grievance Investigation Guide and Form Complaints Grievance Form | Complaints / Grievance Management Form Complaints / Grievance Register |
|---|---|

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
ACECQA-[Using Complaints to support continuous improvement](#). (2023).
Australian Human Rights Commission: <https://www.humanrights.gov.au>
[Education and Care Services National Regulations](#). (Amended 2023).
Fair Work Australia: <https://www.fairwork.gov.au/>
Guide to the National Quality Framework. (2017). (Amended 2023)

Queensland Government- Guide for effective complaints management

<https://earlychildhood.qld.gov.au/legislationAndGuidelines/Documents/effective-complaints-management-guide.pdf>

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

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|---------------------|--|------------------|-------------|
| POLICY REVIEWED BY: | Megan Hipkiss | Centre Support | July 2024 |
| POLICY REVIEWED | AUGUST 2023 | NEXT REVIEW DATE | AUGUST 2024 |
| VERSION NUMBER | V11.08.23 | | |
| MODIFICATIONS | <ul style="list-style-type: none"> • annual policy review • sources checked for currency and links repaired where required • Child Care Centre Desktop related resources added | | |
| POLICY REVIEWED | PREVIOUS MODIFICATIONS | NEXT REVIEW DATE | |
| AUGUST 2022 | <ul style="list-style-type: none"> • policy maintenance • additional section added- Continuous Improvement/Evaluation • link to Western Australian Education and Care Services National Regulations added in 'Sources' • minor formatting edits within text • hyperlinks checked and repaired as required | AUGUST 2023 | |
| FEBRUARY 2022 | <ul style="list-style-type: none"> • additional information regarding allegations against a staff member, volunteer or contactor included- Reportable Conduct Scheme. | AUGUST 2022 | |
| AUGUST 2021 | <ul style="list-style-type: none"> • Policy name changed to meet ACECQA guidelines- <i>Dealing with Complaints Policy (Staff)</i> • additional related legislation added • related policies added • definition of 'complaint' amended to align with ACECQA's definition guidelines • notification requirement for physical or sexual abuse added • inclusion of terminology- complaint added where required • sources checked for currency and updated where required | AUGUST 2022 | |
| AUGUST 2020 | <ul style="list-style-type: none"> • Minor editing changes • reference to Reportable Conduct Scheme added • related policies added | AUGUST 2021 | |

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|--------------|--|-------------|
| | <ul style="list-style-type: none"> • links to Regulatory Authority added | |
| AUGUST 2019 | <p>Grammar, punctuation and spelling edited. Sentences reworded/refined. Related policies alphabetised. Sources checked – incorrect URLs replaced. URLs added to sources as required. Sources/references alphabetised.</p> | AUGUST 2020 |
| AUGUST 2018 | No significant changes required | AUGUST 2019 |
| OCTOBER 2017 | Updated the references to comply with the revised National Quality Standard | MAY 2018 |
| AUGUST 2017 | <ul style="list-style-type: none"> • Changes made with the addition to • Definitions of terminology to ensure a clear understanding when dealing with a compliant and grievance. • Maintaining confidentiality and professionalism • Update of sources and relevant websites | AUGUST 2018 |