

Dealing with Complaints Policy and Procedure

Quality Area 7



Purpose

The *Education and Care Services National Regulations* require approved providers to ensure their services have policies and procedures in place for dealing with complaints and take reasonable steps to ensure those policies and procedures are followed. This Policy details our Service's procedures for receiving and managing informal and formal complaints. Families, children, parents, visitors, students and members of the community can lodge a grievance or complaint with management in the understanding that it will be managed conscientiously and confidentially.

Scope

This policy applies to children, families, staff, volunteers and visitors at the service

Background

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

In most cases, dealing with complaints and grievances will occur at the service through the Nominated Supervisor. All complaints and grievances, when lodged, will be taken seriously and respect the privacy and confidential nature of the matter raised. All concerns raised are assessed to determine whether they are notifiable complaints as required under the National Law and Regulations.

When a complaint or grievance has been identified as 'notifiable', the Approved Provider must notify the Department of Education (DE) of the complaint or grievance and action taken to work through the concerns along with any resolution. The Approved Provider and Nominated Supervisor 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 DE.

There may be occasions when the complainant reports the complaint or grievance directly to DE. If DE 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 cooperating with any investigation by DE.

DE 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*.

Principles

MACSEYE is committed to ensuring procedural fairness and natural justice in the management of all concerns or matters raised which includes:

- Ensuring all parties are given the right to be heard fairly
- Provide a confidential 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 transparency and equity
- Establishing mechanisms to promote prompt, efficient and satisfactory resolution of complaints and grievances
- always Maintaining confidentiality
- Ensure the right to an unbiased decision made by an objective decision maker based on the evidence available

Roles and responsibilities

The Approved Provider or Persons with Management and Control are 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
- ensuring the name and telephone number of the person to whom complaints can be made is clearly visible at the service
- ensuring information about our Dealing with Complaints Policy is easily accessible to all families
- treating all grievances and complaints seriously and as a priority
- ensuring grievances and complaints remain confidential
- ensuring grievances and complaints reflect procedural fairness and natural justice
- discussing the issue with the complainant within a reasonable timeframe of receiving the verbal or written complaint
- investigating and documenting the grievance or complaint fairly and impartially. addressing potential concerns before they become formal complaints/grievances
- 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: a 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.
- 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.
- should management decide not to proceed with the investigation after initial enquiries, a written notification outlining the reasoning will be provided to the complainant
- keeping appropriate records of the investigation and outcome and store these records in accordance with our Privacy and Confidentiality Policy and Record Keeping Policy
- monitoring ongoing behaviour and providing support as required
- ensuring the parties are protected from victimisation and bullying
- tracking complaints to identify recurring issues within the Service
- notifying the Regulatory Authority within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised. Notification must include 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. If the Nominated Supervisor and/or the Approved Provider is unsure whether the matter is a notifiable complaint, it is good practice to contact the Regulatory Authority for confirmation.
- Ensure that written reports 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 Nominated Supervisor
 - any other relevant information.
- Maintaining a Complaints and Grievances Register and ensuring staff record complaints and grievances along with any outcomes or agreed resolutions
- Ensuring that any feedback is recorded in the service Quality Improvement Plan along with any actions.
- Ensuring that the management and educators will adhere to the Privacy and Confidentiality Policy and maintain confidentiality at all times

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

- 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)

- responding to and resolving issues as they arise where practicable
- listening to the view of the complainant without judgement
- clarifying and confirming the grievance or complaint documenting the facts
- supporting the complainant to seek a balanced understanding of the issue
- discussing possible resolutions that may be available including any actions to be taken by the service or involvement of external support options.
- encouraging and supporting the complainant to determine a preferred resolution
- recording the meeting in writing and confirming the details and agreed resolution with the complainant at the end of the meeting
- maintaining professionalism and integrity at all times
- ensuring that the name and telephone number of the Responsible Person to whom complaints and grievances may be addressed are displayed prominently at the main entrance of the service
- recording all complaints and grievances in the Complaints and Grievances Register
- notifying the Approved Provider in writing, if the complaint escalates and becomes a grievance, is a notifiable complaint 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
- working co-operatively with the Approved Provider, DE and any other relevant third parties in any investigations related to grievances about the Service, its programs or staff.
- ensuring the Dealing with Complaints Policy is easily accessible to all families.
- maintaining confidentiality at all times
- referring families to policies that may assist in resolving the grievance or concern
- referring the grievance to the Approved Provider where it cannot be resolved for further investigation
- collecting relevant written evidence. This evidence will be treated in strict confidence and will be held in a secure place
- involving the Approved Provider in the conflict resolution as required
- Should the grievance or complaint be lodged against another person(s), these persons, will be interviewed separately and impartially. Individuals must be given the opportunity to respond fully to the allegations and may have another person present, as a support person, if they wish. If after investigation, it is concluded that the grievance is substantiated:
 - both parties will be told of the decision and the reason for it
 - immediate and appropriate steps will be taken to prevent the grievance from recurring
 - if after investigation, it is concluded that the grievance is not substantiated both parties will be notified of the decision and the reason
 - the family will be informed that if they are not satisfied with any decision relating to the grievance procedure they should consult with an external body for further advice such as the Regulatory Authority
 - if the grievance or complaint is of a serious nature, or there is a reasonable belief the complaint is an allegation of harm, or sexual or physical abuse the Approved Provider is responsible for informing the Regulatory Authority.

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 Nominated Supervisor/educator
- maintaining complete confidentiality at all times

Induction and ongoing training

This policy will be accessible by service staff via the intranet and by families via the website. A hard copy of the policy will be available through the Service. Nominated supervisors are responsible for ensuring staff access to the policy and any supporting documents and undertake induction training prior to the policy being implemented. All service staff are responsible for understanding and complying with this policy and ongoing training will be provided using a range of learning platforms.

Monitoring, evaluation and review

Monitoring of compliance with this policy and the related procedure will be overseen by the policy owner. The review process for this policy will begin eight (8) weeks prior to the scheduled review date and include a consultation period with families, educators, compliance team and any other relevant stakeholders and will be facilitated by the Policy Officer.

All service staff will receive communication about any changes in or review of the policy or procedure. Training will be provided where required to ensure an understanding of the changes. Families will be notified of any changes 14 days prior to the implementation. Breaches of this policy will be dealt with in line with the MACSEYE Code of Conduct.

Related policies

Child Safety and Wellbeing Policy
 Code of Conduct Policy
 Enrolment and Orientation Policy
 Governance and Management Policy
 Interactions with Children, Family and Staff Policy
 Payment of Fees Policy
 Privacy and Confidentiality Policy
 Record Keeping and Retention Policy
 Responsible Person Policy

Legislative requirements

NATIONAL QUALITY STANDARDS (NQS)

Quality Area 6	Collaborative partnerships
Quality Area 7	Governance and leadership

EDUCATION AND CARE SERVICES NATIONAL LAW ACT

Sec. 172	Offence to fail to display prescribed information
Sec.174 (2)(b)	Offence to fail to notify certain information to Regulatory Authority

EDUCATION AND CARE SERVICES NATIONAL LAW REGULATIONS

12	Meaning of serious incident
84	Awareness of child protection law
149	Volunteers and students
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
172	Notification of change to policies or procedures
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
173	Prescribed information to be displayed- education and care service
176	Time to notify certain information to Regulatory Authority
183	Storage of records and other documents

RELATED LEGISLATIONS

Child Care Subsidy Secretary's Rules 2017
A New Tax System (Family Assistance) Act 1999
Family Law Act 1975
Child Care Subsidy Minister's Rules 2017
Charter of Human Rights and Responsibilities Act 2006 (Vic)
Child Wellbeing and Safety Act 2005 (Vic)
Information Privacy Act 2000 (Vic)
Privacy Act 1988 (Cth)
Privacy Regulations 2013(Cth)

Definitions

Term	Meaning
Complaint	<p>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).</p> <p>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.</p>
Complaints and Grievances Register	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	<p>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:</p> <ul style="list-style-type: none"> • 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

Term	Meaning
	<ul style="list-style-type: none"> any other relevant information. <p>Written notification of notifiable complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au or submitted via ACECQA's online portal NQA-ITS</p>
Serious incident	<p>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 <i>Incident, Injury, Trauma and Illness Record</i> (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.</p>

Policy information

Policy information			
Policy title:	Dealing with Complaints Policy		Version: 1.0
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Approving authority:	Managing Director	Approval date:	6/9/2024
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Version control		
Version	Date	Changes
1.0	6/9/2024	Policy developed