

## GRIEVANCE POLICY

### AIM

To ensure principals of natural justice and procedural fairness are applied in circumstances of grievance. This includes the right to be heard fairly, the right to an unbiased decision made by an objective decision maker, and the right to have the decision based on relevant evidence.

To ensure a harmonious service culture free from discrimination and harassment.

#### Parents/caregivers will:

- Be aware of their responsibilities under the Parent Code of Conduct.
- Raise grievances with the staff member involved and if required set a time where the matter can be discussed appropriately. Grievances at this level will normally be resolved by discussion and clarification of the needs or wishes of the family or by clarification of the Centre procedures or policies. The Director will subsequently be notified about the grievance and its outcome.
- Raise their grievance with the Team Leader, if the previous step does not produce a satisfactory outcome. Upon resolution Director will be subsequently notified about the grievance and its outcome.
- If the grievance is still not resolved, it shall be referred to the Director to research the grievance/ situation and work towards reaching a satisfactory outcome for all parties involved. A management report form will be used to record any issues that arise and are unable to be resolved immediately.
- If the grievance is unable to be resolved at the site level, can contact the Department for Education, Customer Feedback Team on 1800 677 435. The Feedback Team aims to respond to any grievance within 20 days.
- Can contact Ombudsman SA if they feel their complaint has not been resolved by the site or the Department or if they feel the process needs external review.
- Be aware that they can opt to remain confidential when making a complaint, but this may impact on the ability of the complaint manager to seek sufficient information to respond/resolve incident.



#### The Centre Director will:

- Ensure all staff are aware of their responsibilities when addressing or raising grievances.
- Ensure, where a complaint is raised, all parties involved are aware of their responsibilities and able to access support during the process (union, legal representation, support person, EAP)
- Confer with the Department's Ethical Conduct Team when overseeing management of grievances between staff members.
- Encourage staff to identify family concerns and ensure such concerns are addressed at the earliest opportunity.
- Investigate all grievances promptly and keep the complainant well informed of progress towards resolution of the grievance.
- Maintain privacy and confidentiality to maximum extent possible and assure families and staff of this.
- Give families written information concerning the Grievance Procedure at enrolment, and explain the policy to families in a positive, welcoming manner.

- Communicate with families how the problem arose, what action was taken by the site to rectify and address the grievance and what steps have been taken to ensure it does not occur again.
- Ensure all complaints are documented and stored securely on site
- Keep copies of all written grievances and parent complaints.
- Ensure information about raising a complaint is available at the site and on the site's website.
- Liaise with the Department's Customer Feedback Team if a grievance raised by a family is unable to be resolved at the site level.
- Contact the Department to limit escalation of a situation if they feel the complaint is unreasonable or the proposed solution by complainant is not achievable or reasonable.
- Set timelines for review of documents or directions that come about through complaint resolving process.

**Where managing an investigation and resolution of a possible grievance, the director shall consider:**

- The seven guiding principles for Department complaint resolution: commitment (to resolving complaints), accessibility (the feedback process is inclusive and accessible), transparency (complaint process is clear and publicly available), objectivity and fairness (complaints are addressed with integrity, impartiality and within clear timeframes), privacy (information is kept confidential and only disclosed to those who need to know), accountability (explanations are provided for decisions made and subject to review) and continuous improvement (feedback and complaint data is acted on and used for reflection and improvement).
- The need for procedural fairness i.e. acting fairly and without bias, findings are based on facts and evidence, and ensuring employees likely to be negatively impacted by a decision are provided with the opportunity to present their case, with their response taken into consideration before a decision is made.
- Any legal requirements relating to the complaint e.g. if the complaint is related to a child protection issue, procedural follow up is mandated by legislated requirements (see child protection policy).
- Notification to regulatory authority via the online Incident and Response Management System (IRMS).
- Necessity of recording observations to ensure information relevant to the grievance is evidence based.
- Counselling opportunities for individuals involved in the mediation process.
- Analysis of the occurrence, frequency and nature of grievances and complaints.
- The consistency of outcomes.
- Both complainant and respondent are protected from victimisation and/or any detrimental effect from raising an issue or sharing evidence.

**All staff will:**

- Respond in a positive manner when a parent chooses to raise a concern and maintain confidentiality.
- Acknowledge any complaints or concerns including arranging a time with families or other staff to discuss their complaint (face-to-face, phone)
- Seek support from Leadership including escalating the complaint to Leadership level if unable to resolve or requested by the family.
- Communicate in a professional and supportive manner when referring to other members of the staff team or where making reference to the school staff team. Where parents raise an issue about another staff member they should be listened to without judgement and encouraged to approach the staff member directly or line manager if support is required to do so.
- Inform Director upon receiving a grievance communicating either resolution or need for further action.
- Raise grievances between themselves and other staff members directly with the other staff member to attempt resolution.
- Where further support is required to resolve the grievance, raise the grievance with their Team Leader who will initially mediate the dispute addressing the work practices at a site level where appropriate.
- Raise grievances as close to the first incident as possible (within three months of incident).
- Not speak in negative terms about staff to other staff members. If a staff member does raise an issue about another staff member, they should be redirected to either address the staff member directly or speak with the line manager if they need support in doing so.

- Raise any parent-related grievance with their Team Leader prior to addressing the grievance with the parent/guardian.
- Be aware that they can opt to remain confidential when making a complaint, but this may impact on the ability of the complaint manager to seek sufficient information to respond/resolve incident.
- Can contact the Department Employee Assistance Program for support with mental wellbeing during complaint resolution process, as either a complainant or respondent.
- If unhappy with outcome proposed by complaint management, can ask for a review within 14 days of outcome.

**Team Leaders will:**

- Mediate grievances between staff members in their room.
- Bring grievances to the Director/Leadership if they cannot be resolved.

**EVALUATION:**

This policy is viewed to be working effectively when:

- The correct procedures are being undertaken by staff and parents in addressing grievances.

**Procedure:**

- Documentation of grievance
- IRMS procedure to reporting

**National Quality Standards:**

7. 2.1. There is an effective self-assessment and quality improvement process in place.

**Record of Policy Adoption and Amendment:**

Version	Date	Details	Author	Approver
1.0	Jan 2011	Policy adopted.	Ocean View CC Polices	Governing Council
1.1	June 2012	Policy circulated to Policy Review Committee and staff for review and suggested amendments identified, including; <ul style="list-style-type: none"> <li>• NQF regulations</li> <li>• DECD phone numbers</li> <li>• Facilitators inclusion</li> </ul>	K Cook	
2.0	Nov 2012	Suggested amendments put to Policy Review Committee and adopted, including; <ul style="list-style-type: none"> <li>• As above</li> </ul>	K Cook	Policy Review Committee
2.1	Feb 2015 Dec 2016	Reformatted Added section about Team Leaders and reformatted further.	P Murray	Policy Review Committee
	May 2020 Oct 2021	Added additional information as per latest Dept advice Added information about Customer Feedback Unit as per Dept policy update	P Murray	Policy Review Committee

**Review:** To be reviewed biannually by the Assistant Director and any recommended amendments endorsed by the Policy Review Committee

**Last Reviewed:** November 2022

**Source:** Parent Guide to raising a concern or complaint. DECD 2012.