

## STAFF GRIEVANCE POLICY

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### PURPOSE

: 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.

This policy will provide:

- guidelines for all staff that are making a complaint
- information regarding the steps to follow
- procedures to ensure complaints 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
- a framework to ensure procedural fairness and natural justice that govern the strategies and practices which include:
  - The right to heard fairly
  - The right to an unbiased decision made by an objective decision making
  - The right to have the decision based on relevant evidence

### POLICY STATEMENT

#### 1. VALUES

Wimble Street is committed to:

- Providing an 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 fairness and equity
- establishing mechanisms to promote prompt, efficient and satisfactory resolution of complaints and grievances
- maintaining confidentiality at all times.

**2. SCOPE** – This policy applies to all staff, volunteers, and the management committee.

### 3. DEFINITIONS

**Complaint:** An issue of a negligible nature that can be resolved within 24 hours, and does not require a comprehensive investigation. Complaints include a manifestation of discontentment, such as poor service, and any verbal or written complaint directly related to the Centre (including general and notifiable complaints). Complaints do not include staff, industrial or employment matters, occupational health and safety matters (except associated with the safety of children).

**Complaints and Grievances Register:** Records information about complaints and grievances received at the centre, along with the outcomes. This register must be kept in a secure file, accessible only to educators and Department of Early Childhood Education and Care. The register 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. For example: If the service is in breach of a regulation causing injury or possible harm to a child.

**Mediator:** A person who attempts to make 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 Regulation and Law, National Quality Standards 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 Department of Early Childhood Education and Care within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)).

If the Director is unsure whether the matter is a notifiable complaint, it is good practice to contact The Department of Early Childhood Education and Care 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
- 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](http://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 and Illness Record (sample form available on the ACECQA website) 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)). Records are required to be retained for the periods specified in Regulation 183.

#### **4. SOURCES AND RELATED POLICIES**

##### **Sources**

- ACECQA: <http://acecqa.gov.au/>
- National Quality Standards: <http://acecqa.gov.au/>
- Human Rights and Equal Opportunities Commission:  
<https://www.humanrights.gov.au/>
- Fair Work Australia: <https://www.fairwork.gov.au/>

##### **Service policies**

- *Code of Conduct Policy*
- *Complaints and Grievances Policy*
- *Inclusion and Equity Policy*
- *Interactions with Children Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*

#### **PROCEDURES**

**The Wimble Street (Approved Provider) is responsible for:**

- Treat all grievances seriously and as a priority
- Ensure grievances remain confidential
- Ensure grievances reflect procedural fairness and natural justice
- Discuss the issue with the complainant within 24 hours of receiving the verbal or written complaint
- Investigate and document the grievance fairly and impartially. This 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 an educator, staff member, volunteer or visitor an opportunity to respond.
- Permitting them to have a support person present during the consultation (for example: Union Representative, 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 reflects the resolution and sign in agreeance.
- 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 those 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 process using a feedback form.
- Track complaints to identify recurring issues within the Service.
- Notify the Department of Education and Communities within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised.

**The Wimble Street educators and other staff are responsible for:**

- being 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.
- raise the grievance or complaint with the Approved Provider/Management or Nominated Supervisor. If they are unable to resolve the concern, or feel uncomfortable raising the

matter directly with the person concerned. 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 followed:

**1. The aggrieved person is to contact their immediate supervisor (Room Leader, Nominated Supervisor or Licensee) 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 to act as Mediator.

**2. 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
- The procedures followed to date
- The solution(s) sought
- The recommended plan of action or resolution

**3. 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, and a copy is to be retained at the workplace.

## **Grievance Procedures**

Harmonious staff relations within Wimble Street 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, which 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, including Wimble Street committee, the following procedures are to be ensued:

- The aggrieved person(s) is/are to discuss the grievance with their immediate supervisor.
- The supervisor is to report to the Nominated Supervisor/ Licensee of the grievance.
- The Mediator will seek advice as necessary from other sources, (e.g.: unions, Work Cover and funding bodies).
- 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 Grievance Policy have been followed it may then be necessary to take disciplinary action.

### **Confidentiality**

Mediators are to use discretion and to 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 (members) is able to nominate a support person to attend any meetings with them. This person may be a union representative.

### **Educators, staff, volunteers and visitors 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 our grievance 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.

### **AUTHORISATION**

The policy was adopted by the Approved Provider of Wimble Street in September 2017

**Last Review Date: September 2019**

**Next Review Date: September 2022**