



COMPLIMENTS AND COMPLAINTS

QUALITY AREA 7 | ELAA version 1.1

PURPOSE

This policy will provide guidelines for:

- receiving and dealing with compliments and complaints at St John's Kindergarten.
- procedures to be followed in investigating complaints.

Note: This policy does not address complaints relating to staff grievances or employment matters. The relevant awards provide information on the management of such issues.

POLICY STATEMENT

VALUES

St John's Kindergarten is committed to:

- providing an environment of mutual respect and open communication
- recognising excellence and gratitude
- complying with all legislative and statutory requirements
- dealing with disputes, complainants with fairness and equity
- establishing mechanisms to respond to complaints in a timely way
- treating information in relation to complaints with sensitivity.

SCOPE

This policy applies to the approved provider, persons with management or control, nominated supervisor, persons in day-to-day charge, early childhood teachers, educators, staff, students, volunteers, parents/guardians, children, and others attending the programs and activities of St John's Kindergarten.

RESPONSIBILITIES	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/ guardians	Contractors, volunteers and students
	R indicates legis	lation requirement	and should not be	e deleted	
Being familiar with the Education and Care Services National Law Act 2010 and the Education and Care Services National Regulations 2011, service policies, constitution, and procedures	R	V	V	1	J
Acknowledge compliments and thank complementor for their interest and feedback	1	1			
Save compliments and sharing with relevant parties	V	V			
Ensuring that compliments and complaints are monitored and used to continually improve the quality of the service	R	J			
Identifying, preventing and addressing potential concerns before they become formal complaint	R	J	J		V
Ensuring that the name and telephone number of the responsible person (refer to Staffing Policy) to whom complaints may be addressed are displayed prominently at the main entrance of the service (National Law: Section 172, Regulation173(2)b))	R	V			
Ensuring that the address and telephone number of the Authorised Officer at the DET regional office are displayed prominently at the main entrance of the service (Regulation 173(2)(e))	R	√			
Advising parents/guardians and	R	V			

any other new				
members of [Service				
Namel of the				
Compliments and				
Complaints policy and				
procedures upon				
enrolment				
Ensuring the				
complaints processes				
is child focused,				
understood broadly				
(including by children,				
their families, staff and	R	√		
volunteers), culturally				
safe and compliant				
with privacy laws,				
reporting obligations				
and employment law				
Ensuring that the				
management of a				
complaint that alleges				
a child is exhibiting harmful sexual				
	<u></u>	1		
behaviours is child	R	√		
focused, culturally safe				
and compliant with				
privacy laws, reporting				
obligations and				
employment law				
Ensuring that children				
have access to age				
appropriate				
information, support				
and complaints	R	V	√ √	√
processes in ways that	11	·	•	•
are culturally safe,				
accessible and easy to				
understand				
Ensuring that this				
policy is available for	5	,		
inspection at the	R	√		
service at all times				
(Regulation 171)				
Being aware of, and				
committed to, the				
principles of				
communicating and	R	1		
sharing information	К	√		
with service				
employees, members				
and volunteers				
Responding to all				
complaints in the most				
appropriate manner	R	V	V	√
appropriate manner and at the earliest	П	V	V	ν -
opportunity				

Treating all					
complainants fairly and	R	\checkmark	√		
equitably	1	•	•		
Discussing minor					
complaints directly					
with the party involved					
as a first step towards					
resolution (the parties				_	
are encouraged to	R	$\sqrt{}$	√	√	
discuss the matter					
professionally and					
openly work together					
to achieve a desired					
outcome)					
Communicating					
(preferably in writing)					
any concerns or					
compliments relating		,	,	,	,
to the management or		\checkmark	√	√	√
operation of the service					
as soon as is					
practicable					
Providing a Complaints					
Register (refer to					
Definitions) and	_	,			
ensuring that staff	R	$\sqrt{}$			
record complaints					
along with outcomes					
Providing information					
as requested by the					
approved provider e.g.		√	√	√	√ V
written reports relating		·	v	V V	•
to the complaint					
Notifying the approved					
provider if the					
complaint is a notifiable					
complaint (refer to					
Definitions) or is unable		\checkmark	√	√	√
to be resolved					
• • • • • • • • • • • • • • • • • • •					
appropriately in a timely manner					
Complying with the					
service's <i>Privacy and</i>					
	R	_1	V	√	_1
Confidentiality Policy at	К	√	٧	√	√
all times (Regulations					
181, 183)					
Establishing a					
Complaints					
Subcommittee or					
appointing an					
investigator to	V	\checkmark			
investigate and resolve					
complaints as required					
as determined through					
established processes.					
(refer to Attachment 1)					
Referring notifiable	√	V			
complaints (refer to					

- C ///)					
<i>Definitions)</i> , or					
complaints that are					
unable to be resolved					
appropriately and in a					
timely manner to the					
Complaints					
Subcommittee/investi					
gator					
Co-operating with					
requests to meet with					
the Complaints					
Subcommittee and/or	√	V	$\sqrt{}$	√	√
provide relevant					
information when					
requested in relation to					
complaints					
Informing DE in writing					
within 24 hours of any					
complaints alleging					
that a serious incident					
(refer to Definitions) has					
occurred at the service	П	D			
or that the Education	R	R			
and Care Services					
National Law has been					
breached (National					
Law: Section 174,					
Regulation 176(2)(b))					
Working cooperatively					
with the approved					
provider and DET in					
·					
any investigations	√	√	$\sqrt{}$	√	\downarrow
related to complaints					
about St John's					
Kindergarten, its					
programs or staff.					
Receiving					
recommendations from					
the Complaints	√	V			
Subcommittee/investi					
gator and taking					
appropriate action					
Analysing complaints,					
concerns and safety					
incidents to identify					
	J	-1			
causes and systemic	٧	٧			
failures to inform					
continuous					
improvement					
Maintaining					
professionalism and					
integrity at all times	J	V	V		\downarrow
	V	٧	V		٧
(refer to Code of					
Conduct policy)					



BACKGROUND AND LEGISLATION

BACKGROUND

Compliments are expressions of praise, encouragement or gratitude about service, staff, management and program. Compliments provide valuable feedback about the level of satisfaction with service delivery and are a valuable indicator of the effectiveness of a service. Compliments impart useful insights about the aspects of service that are most meaningful to children, families and stakeholders, and provide an opportunity to recognise the efforts of staff, foster a culture of excellence and boost morale.

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

In most cases, dealing with complaints will be the responsibility of the approved provider. All complaints, when lodged, need to be initially assessed to determine whether they are a general or a notifiable complaint (*refer to Definitions*).

When a complaint has been assessed as 'notifiable', the approved provider must notify the Department of Education and Training (DET) of the complaint. The approved provider will investigate the complaint and take any actions deemed necessary, in addition to responding to requests from and assisting with any investigation by DET.

There may be occasions when the complainant reports the complaint directly to DET. If DET 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 as outlined in this policy, in addition to cooperating with any investigation by DET.

DET will investigate all complaints 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.*

LEGISLATION AND STANDARDS

Relevant legislation and standards include but are not limited to:

- Charter of Human Rights and Responsibilities Act 2006 (Vic)
- Children, Youth and Families Act 2005 (Vic)
- Education and Care Services National Law Act 2010
- Education and Care Services National Regulations 2011
- Information Privacy Act 2000 (Vic)
- National Quality Standard, Quality Area 7: Governance and Leadership
- Privacy Act 1988 (Cth)
- Privacy Amendment (Enhancing Privacy Protection) Act 2012 (Cth)
- Privacy Amendment (Notifiable Data Breaches) Act 2017 (Cth)
- Privacy and Data Protection Act 2014 (Vic)
- Privacy Regulations 2013(Cth)

The most current amendments to listed legislation can be found at:

- Victorian Legislation Victorian Law Today: <u>www.legislation.vic.gov.au</u>
- Commonwealth Legislation Federal Register of Legislation:
 www.legislation.gov.au



DEFINITIONS

The terms defined in this section relate specifically to this policy. For regularly used terms e.g. Approved provider, Nominated supervisor, Notifiable complaints, Serious incidents, Duty of care, etc. refer to the Definitions file of the PolicyWorks catalogue.

Complaint: (In relation to this policy) 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.

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.

Complaints Register: (In relation to this policy) records information about complaints 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.

Compliment: a compliment is an expression of praise, encouragement or gratitude. It may relate to an individual staff member, a team, the program or the service.

Dispute resolution procedure: The method used to resolve complaints, disputes or matters of concern through an agreed resolution process.

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.



SOURCES AND RELATED POLICIES

SOURCES

- ACECQA: <u>www.acecga.gov.au</u>
- Commonwealth Ombudsman Better practice complaint handling guide: <u>www.ombudsman.gov.au/publications/better-practice-guides</u>
- Better-practice-complaint-handling-guide
- Department of Education and Training (DET) Regional Office details are available under 'The Department': www.education.vic.gov.au
- ELAA Early Childhood Management Manual: www.elaa.org.au
- Kindergarten Funding Guide: <u>www.education.vic.gov.au</u>
- Victorian Ombudsman Complaints: Good Practice Guide for Public Sector Agencies September 2016:

https://assets.ombudsman.vic.gov.au/assets/Best-Practice-Guides/Complaints-Good-Practice-Guide-for-Public-Sector-Agencies.pdf?mtime=20191217165914

RELATED POLICIES

- Child Safe Environment and Wellbeing
- Code of Conduct
- Enrolment & Orientation
- Governance & Management of the Service
- Incident, Injury, Trauma and Illness
- Inclusion and Equity
- Interactions with Children
- Privacy and Confidentiality
- Staffing

- Staff Grievance and Dispute Resolutions
- Supervision of Children

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 as recorded in the Complaints 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
- notifying all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk (Regulation 172 (2)).



ATTACHMENTS

• Attachment 1: Dealing with complaints



AUTHORISATION

This policy was adopted by the approved provider of St John's Kindergarten in March 2025

REVIEW DATE: November 2026

ATTACHMENT 1. DEALING WITH COMPLAINTS

DEALING WITH A COMPLAINT

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

- inform the complainant of the service's Compliment and Complaint Policy
- encourage the complainant to resolve the complaint with the person directly, or to submit their complaint in writing
- the staff member receiving the formal complaint will record all relevant details in the Complaints Register (*refer to Definitions*) together with the outcome
- assess complaint for severity, safety, complexity, impact and the need for immediate action
- inform the approved provider if the complaint is a notifiable complaint (*refer to Definitions*) or is unable to be resolved appropriately in a timely manner.
- comply with the service's *Privacy and Confidentiality Policy* with regard to all meetings/discussions in relation to a complaint
- the approved provider must inform the service's Complaints Subcommittee, if there is one, or appoint an investigator(s) to investigate the matter
- the Complaints Subcommittee will assess the complaint to determine if it is a notifiable complaint (refer to Definitions)

DEALING WITH A NOTIFIABLE COMPLAINT

When a formal complaint is lodged with the service:

- if the complaint is notifiable, the approved provider will be responsible for notifying DET. This must be in writing within 24 hours of receiving the complaint (*Regulation 176(2)(b)*)
- the written report to DET needs to be submitted using the appropriate forms from ACECQA and will include:
 - o details of the event or incident
 - o the name of the person who initially made the complaint
 - o if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
 - o contact details of a nominated member of the Complaints Subcommittee/investigator
 - o any other relevant information
- If the approved provider is unsure if the complaint is a notifiable complaint, it is good practice to contact DET for confirmation.

EXECUTIVE COMMITTEE RESPONSIBILITIES AND PROCEDURES

In the event of a complaint being lodged, the Executive Committee will:

- convene as soon as possible to deal with the complaint in a timely manner
- disclose any conflict of interest relating to any member of the committee. Such members must stand aside from the investigation and subsequent processes
- consider the nature and the details of the complaint
- identify which service policies (if any) the complaint involves
- •
- if the complaint is a notifiable complaint (*refer to Definitions*), inform the complainant of the requirements to notify DET of the complaint and explain the role that DET 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 complaint
- respect the confidential nature of information relating to the complaint. The approved provider must handle any complaint in a discreet and professional manner
- store all written information relating to complaint securely and in compliance with the service's *Privacy* and Confidentiality Policy.

INVESTIGATING THE COMPLAINT AND GATHERING RELEVANT INFORMATION

When investigating the complaint and gathering relevant information, the Executive Committee 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 Executive committee to discuss the complaint and provide additional information where relevant
- The President will inform the complainant of the procedures for dealing with the complaint 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 DET staff, if required, and provide additional information as requested
- review relevant information and documents
- obtain any other relevant information or documentation that will assist in resolving the complaint
- seek advice, where appropriate, from individuals and organisations that may be able to assist in resolving the complaint (any cost in seeking advice will require Executive Committee to vote to approve

FOLLOWING THE INVESTIGATION

Once the investigation of the complaint is complete, the Executive Committee will:

- meet to discuss the information gathered and determine further action,
- 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
- advise the complainant and other relevant parties of any decisions made by the Executive Committee in relation to the complaint
- follow up to ensure the parties involved are satisfied with the outcome and monitor progress on any actions taken by the approved provider.