

Staff Grievance Policy



Purpose/objective

The purpose of this Policy is to establish a clear and fair process for staff to raise and settle a grievance that arises against another staff member or members. The Procedure that follows explains how to implement the Policy.

Scope

This Policy and Procedure applies to AAHE staff with grievances against fellow staff members. The Policy does not apply if the subject of the grievance relates to:

1. a matter covered by alternative internal formal review, appeal, grievance or other dispute settling procedures, nor to the outcome of a merit-based selection process
2. a decision of the Board of Directors or Academic Board
3. the content of AAHE policies approved by the Board of Directors or Academic Board
4. decisions of the CEO or any review or Appeal Committee that are stipulated as final in AAHE policies
5. improper conduct by staff as defined in AAHE's Prevention of Fraud Policy and Procedure
6. disputes over intellectual property, which are handled under the Intellectual Property Policy.

Definitions

Grievance	behaviour or action of another member or members of staff, which has or is likely to have an unreasonable negative impact on the ability of a staff member to undertake their duties
Grievance handler	an impartial person who conducts an investigation into the substance of the grievance who may be external or internal to AAHE and shall not have any prior involvement in the subject matter of the grievance
Reviewer	an impartial person who reviews an appeal against the process conducted by a Grievance Handler
Staff Grievance Contact Officer	AAHE's Human Resource Officer
Natural justice	in the handling of a grievance involves all of the following elements: <ol style="list-style-type: none">1. the opportunity for all parties involved to be heard and the right to a fair hearing2. the right to attend hearings or interviews with a friend or support person, if required3. the respondent having full knowledge of the nature and substance of the grievance4. the opportunity for all parties to respond to allegations made against them during the course of an investigation5. the right to an independent, unbiased decision-maker, and6. a final decision based solely on the relevant evidence

Policy

1. AAHE is committed to maintaining and developing a harmonious, fair and productive working environment. In pursuit of this objective this Policy aims to:
 - a) outline the means for early grievance resolution through informal mechanisms wherever possible and in accordance with the policy principles below
 - b) prevent personal conflicts from becoming entrenched
 - c) resolve grievances without unreasonable delay and wherever possible in a conciliatory and effective manner and
 - d) determine the matters in question when conciliation has not proved to be effective or possible.
2. Grievance handling processes at AAHE are guided by the following principles:
 - a) Less formal and early resolution of grievances is encouraged wherever possible.
 - b) Staff should be advised that they are entitled, if they so request, to a representative at all formal stages of the resolution procedures.
 - c) Confidentiality must be respected and maintained at all times by all parties within the constraints of the need to investigate a grievance fully, subject to any legal requirements for disclosure and consistent with the principles of natural justice.
 - d) Parties to a grievance should engage in the procedures for grievance resolution in good faith and focus on achieving resolution to the concerns raised.
 - e) The principles of natural justice will apply to all parties.
3. Procedural fairness requires that a respondent to a complaint must be provided with:
 - a) the relevant details of the complaint to enable the respondent to formulate a response in the case of an investigation
 - b) information about the process by which the matter is to be resolved, and
 - c) the opportunity to put their case and respond to the complaint during an investigation.In addition:
 - a) Any decision-maker must act impartially and without bias.
 - b) All relevant submissions and evidence must be considered, irrelevant matters must not be taken into account.
 - c) The complaint must be dealt with in a timely manner.
 - d) Victimisation of either a complainant, respondent or any other person with a legitimate involvement in a grievance resolution process will not be tolerated.
4. AAHE will not tolerate frivolous or vexatious grievances. Frivolous or vexatious grievances may be considered to be misconduct or serious misconduct and investigated under the Staff Misconduct Procedure.
5. Grievance resolution is an integral part of a supervisor's duties. It is the primary responsibility of supervisors to identify, respond to and address problems in the workplace and to take all reasonable steps to ensure that victimisation of either a complainant or a respondent does not take place. So far as reasonably practicable, supervisors should recognise the early signs of disharmony in their teams and if possible, take early, sensitive and positive steps to prevent and resolve potential or actual grievances between their staff.
6. Nothing in this policy prevents or restricts the right of a staff member to refer their grievance to an external authority at any time.

Related documents and relevant legislation

Higher Education Standards Framework (Threshold Standards) 2021 (Sections 2.3 & 6.2)
TEQSA Guidance Note: Wellbeing and Safety

Document information

Document owner: Board of Directors

Version	Approved by	Approved on	Implementation date	Changes made
1	Board of Directors	14/10/21	1/10/23	

Staff Grievance Procedure

Staff members may feel aggrieved by behaviours or decisions taken by others within the AAHE workplace. Wherever possible and appropriate, staff should endeavour to resolve concerns or difficulties directly with the person(s) involved in an open and constructive manner. Where this approach does not resolve the concerns, a staff member may lodge a grievance, in accordance with this Procedure.

1. Early resolution

- 1.1 Where a staff member has a grievance, the staff member should raise the concern(s) with their supervisor, or the supervisor's supervisor, as soon as practicable. The supervisor will initiate discussions with the staff member and the aims of the discussions will be to determine whether a genuine grievance exists, to gather information (as required) to assist with the resolution of the grievance, and either resolve the grievance, or arrange mediation or conciliation in an attempt to resolve the grievance.
- 1.2 Where a staff member brings a serious issue to the notice of a supervisor or manager, even if not lodging a formal grievance, the supervisor or manager is required to clarify the issue and follow up to resolve the matter effectively. It is not necessary for a staff member to lodge a formal grievance to prompt a supervisor or manager to act, where a concern is serious in nature and warrants intervention.
- 1.3 Effective local action focussed around early intervention and conciliation is likely to prevent the need for more formal processes to resolve grievances. Indeed, the lack of early intervention and/or effective conciliation may itself be the prompt for a formal review rather than the original grievance.
- 1.4 A staff member who feels that the grievance has not been resolved through early resolution may then initiate a formal grievance.
- 1.5 Complainants who are considering lodging a complaint with an external jurisdiction (e.g. Victorian Equal Opportunity and Human Rights Commission, Australian Human Rights Commission, Fair Work Commission, Fair Work Ombudsman) should note that specific timeframes may apply. Complainants should inform themselves of any such timeframes that may be applicable by contacting the relevant external jurisdiction directly.

2. Principles for managing grievances

- 2.1 AAHE expects that grievances will be lodged promptly and not after a lengthy delay or in relation to matters that would reasonably be seen as historical. AAHE will manage grievances sensitively and as quickly as possible by AAHE's responsible officers. Unless otherwise stated, timeframes provided in this Procedure are a guide and matters will vary due to complexity.
- 2.2 The parties involved in grievances are expected to participate in good faith, have regard to facts, policies, procedures, and the particulars of the circumstances. Grievances will be reviewed in the spirit of achieving resolution, procedural fairness, sensitivity to the parties and confidentiality.
- 2.3 Where a grievance is serious in nature or highly complex or technical, AAHE may appoint two people to review a grievance collaboratively. In such circumstances, one reviewer is likely to be the staff member's supervisor or manager and a second person from another area in AAHE or external to AAHE. Where two people are reviewing a grievance, and where possible, there should be a gender balance.

- 2.4 Where a grievance is raised against a supervisor or manager, the responsible Officer (normally the Dean or COO, or CEO if the matter involves the COO) will appoint someone outside the reporting line to undertake either conciliation or to review the grievance.
- 2.5 Action will not be taken under the grievance resolution procedures in response to anonymous grievances. Where appropriate, actions may be taken under AAHE's *Prevention of Fraud Policy*, which sets out AAHE's whistleblower protections.
- 2.6 Personal disappointment with the determination and recommendations of a grievance investigator will not normally be sufficient reason to warrant a further review.

3. Record keeping

- 3.1 Notes should be taken at all stages of the grievance resolution process, including where a staff member raises a concern and the supervisor or manager intervenes to resolve it without otherwise receiving a formal grievance document.
- 3.2 Records or notes made by the supervisor, manager, or other parties tasked with resolving a staff grievance, and copies of relevant communication during the grievance resolution process should be stored on a confidential file.
- 3.3 For statistical purposes and trend analysis, AAHE may require persons facilitating grievance resolution to keep data on the number and type of grievances and report this to the Human Resources Officer.
- 3.4 Staff grievance data will be included in reports to the Board of Directors on work health and safety.

4. Stages of formal grievance resolution

Stage One - Formal grievance

- 4.1 Where a grievance has not been resolved through the early resolution process detailed in clauses 1.1 to 1.4 above, a staff member may formally request that their supervisor or manager (hereafter called the Grievance Handler) take action to review and resolve the grievance in accordance with stage one – Formal Grievance Resolution.
- 4.2 In cases where the supervisor or manager is the focus of the grievance, the staff member may seek advice from the Chief Operating Officer, or the Chief Executive Officer if regarding the COO, or from the HR Officer on how best to proceed. In some cases, AAHE may appoint an external Grievance Handler.
- 4.3 In submitting a formal grievance, the staff member must specify in writing:
 - what the grievance is, identifying the facts and issues; and
 - an indication of what resolution is being sought (for example: discontinuing certain behaviour, apology from a staff member).
- 4.4 Within two (2) working days of receiving a formal grievance, the Grievance Handler will clarify the details of the grievance with the staff member and, where appropriate, subsequently advise any other parties to the grievance of the particulars of the grievance.
- 4.5 Within a further ten (10) working days, the Grievance Handler will ascertain the nature and merits of the grievance, providing all relevant parties with information and the opportunity for input, maintaining impartiality in an effort to understand the issues as seen by the various parties. The Grievance Handler will gather any documentation or supporting material and take such notes as necessary to objectively represent the issues.

- 4.6 The Grievance Handler will attempt grievance resolution, often through conciliation, at which time if successful the matter will be deemed resolved. Where conciliation does not provide grievance resolution, the Grievance Handler may make a determination in accordance with clause 4.7 below.
- 4.7 The Grievance Handler will make a determination based upon the material gathered as to the merits of the grievance and make recommendations on options to resolve the grievance. Options may include:
- dismissal of the grievance, through the affirmation of the decisions and actions that prompted a grievance
 - upholding the grievance
 - referral of the grievance to some other AAHE policy or process (where appropriate)
 - recommending one or more parties apologise
 - requesting parties seek mediation
 - recommending performance discussions occur, or
 - recommending training or further development to mitigate against certain issues or behaviours.
- 4.8 In some cases disciplinary action or criminal investigations may be warranted and the grievance will be referred for further action in accordance with the appropriate process.
- 4.9 The findings and recommendations of the Grievance Handler will be communicated in writing to the staff member who lodged the grievance and other parties, if appropriate.

Stage Two - Review of formal grievance resolution

- 4.10 Subject to the completion of stage one, where a staff member is not satisfied that the recommendations made at stage one resolved the grievance, the staff member may seek a review of the grievance outcome or process with the responsible Officer or delegate as applicable (the Reviewer). A request for review must be lodged within five (5) working days of the Grievance Handler's written advice.
- 4.11 The staff member must lodge the request for a review in writing, stating:
- how or why the process at stage one did not resolve the grievance; and
 - what remedy the staff member seeks.
- 4.12 Within two (2) working days of receiving the request for review, the Reviewer will have clarified the details of the staff member's dissatisfaction with the initial grievance determination, and, where appropriate, subsequently advise any other relevant parties of the particulars of the review.
- 4.13 Within ten (10) working days, the Reviewer will assess the process that was followed during stage one to determine the merits of the initial grievance, providing the opportunity for any additional input, and maintaining an open mind. The Reviewer will re-assess any documentation or supporting material and may seek further material (if required).
- 4.14 Having regard to the original facts, issues and any additional information provided or discovered, the Reviewer will decide if the initial determination of the grievance was valid or should be set aside. However, it is not intended, that the Reviewer intervene to overturn a finding of the Grievance Handler unless the Reviewer has found that there has been a significant flaw or other serious error in the process followed at stage one. In some cases, the Reviewer may require the Grievance Handler to conduct the stage one process again, giving

guidance on the process. Alternatively, the Reviewer may request that an alternative Grievance Handler conduct the stage one process again.

- 4.15 The decision and recommendations of the Reviewer are to be communicated in writing to the staff member who lodged the request for review and other parties, if appropriate.

Stage Three - Final review

- 4.16 In cases where a grievance is against a senior staff member of AAHE, or where a staff member remains dissatisfied with the determination after stage two, a review request may be lodged with the Chief Operating Officer (or CEO if the matter involves the COO).
- 4.17 The staff member must lodge the request for a stage three review in writing, stating:
- the facts and issues with the process followed during stage one and stage two, stating how and why the previous stages have failed to resolve the grievance OR, where the matter relates to a grievance against a senior staff member, what the grievance is, identifying the facts and issues
 - what remedy the staff member seeks.
- 4.18 In the case of review of previous stages, the staff member's request must be lodged within five (5) working days of the Reviewer's written advice.
- 4.19 Within two (2) working days, the Chief Operating Officer (or CEO if the matter involves the COO) will clarify the details of the grievance against a senior staff member or the dissatisfaction with the earlier stages and, where appropriate, subsequently advise any other parties of the particulars of the stage three review.
- 4.20 Within ten (10) working days, the Chief Operating Officer (or CEO if the matter involves the COO) will assess the details or process that occurred during stage one and stage two, to determine the merits of the grievance, providing the opportunity for any additional input, and maintaining impartiality and confidentiality. The Chief Operating Officer (or CEO if the matter involves the COO) will assess/re-assess any documentation or supporting material and seek further material, as required.
- 4.21 Having regard to the facts, issues and any additional information provided or discovered, the Chief Operating Officer (or CEO if the matter involves the COO) will make a determination on the grievance or review of the earlier stages.
- 4.22 The Chief Operating Officer (or CEO if the matter involves the COO) may make a determination for an original grievance involving a senior staff member. Where the matter pertains to the review of findings from stage one or two, it is not intended that the Chief Operating Officer (or CEO if the matter involves the COO) will overturn a finding unless a flaw in process or other serious error has been identified. In some cases, the Chief Operating Officer may require a Grievance Handler, or Reviewer to conduct their part of the grievance resolution process again, giving guidance if appropriate. Alternatively, the Chief Operating Officer (or CEO if the matter involves the COO) may request that an alternative Grievance Handler or Reviewer conduct the process, and this may include referring the matter to an external mediator or consultant.
- 4.23 The decision and recommendations of the Chief Operating Officer (or CEO if the matter involves the COO) will be communicated in writing to the staff member who lodged the request for review and other parties, if appropriate.

Document information

Document owner: Registrar

Version	Approved by	Approved on	Implementation date	Changes made
1.1	Board of Directors	14/10/21	1/10/23	