

# Complaints Policy

## Section 1 - Purpose

(1) This document sets out Charles Sturt University (the University) policy on the management of complaints and the purpose of this Policy is to:

- a. ensure that the University environment is harmonious and free from intimidation,
- b. promote clear, honest and open communication;
- c. provide a timely and effective mechanism for staff, students and others to express their concerns or make complaints when they occur so that options for a resolution can be identified as soon as possible;
- d. define what complaints can be handled under this Policy;
- e. ensure concerns and complaints are handled impartially, justly, confidentially and with the appropriate sensitivity;
- f. define the responsibilities and rights of staff, students, visitors and managers in resolving concerns and complaints;
- g. identify liaison with the Division of People and Culture in the management of staff complaints.

### Scope

(2) This Policy applies to all members of the University.

(3) This Policy acknowledges the close collaboration and relationship with the Division of People and Culture in the management of complaints involving staff members.

(4) This Policy does not apply to decisions of the University Council or the Academic Senate.

(5) This Policy recognises the full context of complaint and grievance management with matters raised at the lowest level possible and the potential to escalate to the University Ombudsman.

(6) The Policy acknowledges that where matters are raised with a respondent and there is a declared or perceived conflict of interest the matter will be referred to the University Ombudsman for assessment and advice.

## Section 2 - Glossary

(7) A complaint is an expression of concern, dissatisfaction or frustration with the quality or delivery of service, a policy or procedure, or the conduct of another person. A complaint is not a routine enquiry or clarification of process.

(8) Academic determinations and matters of student academic misconduct are not managed under this Policy.

(9) A Public Interest Disclosure (PID) is a specific type of complaint managed via the [Public Interests and Other Disclosures Policy](#). A PID is information disclosed to a nominated disclosure officer, external body such as the Independent Commission Against Corruption or NSW Ombudsman, the Auditor-General, a politician or journalist (within the restrictions of the [Public Interest Disclosures Act](#)):

- a. made by a public official (i.e. University staff);
- b. made voluntarily; and
- c. concerning matters of corrupt conduct, maladministration, serious and substantial waste

## **Section 3 - Policy**

### **Part A - Responsibilities**

(10) The Vice-Chancellor is responsible for:

- a. providing leadership in demonstrating a commitment to the resolution of complaints made to the University; and
- b. ensuring there is an effective, timely, impartial, and just system for dealing with complaints.

(11) The University Ombudsman is responsible for:

- a. management and monitoring of complaints, acknowledging that this Policy is one aspect of complaint management within the University;
- b. providing independent and impartial advice and assistance to managers or supervisors who have received and are handling a complaint;
- c. providing independent, impartial and confidential information to complainants about the procedure for dealing with complaints including listening to the issues and helping the person clarify the facts;
- d. conducting internal reviews of complaints in both process and content;
- e. identifying systemic issues arising from complaints and making recommendations to management for the purpose of continuous institutional improvement;
- f. ensuring strong liaison regarding staff-related matters is maintained with the Division of People and Culture and participating collaboratively with the Division of People and Culture to address staff concerns; and
- g. maintaining contact with the Division of People and Culture at regular intervals to ensure management of matters is not duplicated across the two entities.

(12) Managers and supervisors are responsible for:

- a. exercising primary responsibility for receiving and resolving complaints and any conflict in their areas in a timely and fair way;
- b. advising people of their right to make a complaint where appropriate; and
- c. providing advice and assistance to people who have a complaint.

(13) Complainants and Respondents are responsible for:

- a. providing a clear and honest account of their concerns and their expectations for the outcome of their complaint, including providing all relevant information and documents to assist in the investigation and/or resolution of the matter;
- b. engaging openly in the complaint handling process, including participating in discussion with other parties to resolve the concerns;
- c. responding to University requests for information in a timely manner; and
- d. respecting those individuals involved in the complaint handling process.

(14) Division of People and Culture is responsible for:

- a. management and monitoring of complaints, acknowledging that this Policy is one aspect of complaint management within the University;
- b. providing independent and impartial advice and assistance to managers or supervisors who have received and are handling a complaint;
- c. providing independent, impartial and confidential information to complainants about the procedure for dealing with complaints including listening to the issues and helping the person clarify the facts;
- d. identifying systemic issues arising from complaints and making recommendations to management for the purpose of continuous institutional improvement;
- e. ensuring strong liaison regarding staff related matters is maintained with the University Ombudsman and participating collaboratively with the University Ombudsman to address staff concerns that are raised as complaints under this Policy;
- f. maintaining contact with the University Ombudsman at regular intervals to ensure management of matters is not duplicated across the two entities; and
- g. managing matters addressed through the Enterprise Agreement.

## Part B - Complaint Handling Principles

(15) The following principles underpin the University's complaint handling processes, whether they are managed through this Policy or through local processes:

- a. Access: this Complaints Policy and its associated procedures should be easily accessible, simple to understand and well-publicised to ensure ease of implementation. All members of the University community should understand how to receive and pass on complaints. The complaint will be handled in a timely manner, taking into account the complexity and seriousness of the issues raised; to ensure that all parties have access to an appropriate resolution and that opportunities for further concerns to arise are minimised. All members of the University community will be supported in trying to resolve complaints at the lowest level possible (where appropriate) to ensure timely and efficient handling and reduce the potential for unnecessary escalation of concerns. Each local complaints handling process shall abide by the Principles espoused in this overarching Policy.
- b. Natural Justice and Procedural Fairness: all parties will be afforded natural justice and procedural fairness in the handling of complaints by the University including:
  - i. ensuring that all parties to a complaint know what to expect during the complaint handling process;
  - ii. carrying out the complaint handling process in a transparent manner, ensuring records are maintained;
  - iii. providing all parties with equal opportunity to participate in the process;
  - iv. treating all parties in a respectful manner; and
  - v. providing reasons for decisions made.
- c. Equity: actions and decisions in relation to complaints will be made having regard to the age, culture, disability, language, religion, gender and sexuality of the parties. The University will always endeavour to investigate concerns raised with it, regardless of the manner in which they are expressed, having regard for clause 18 of this Policy. A complainant will not be disadvantaged through lodging a complaint in good faith, regardless of the outcome. Complainants and respondents will be entitled to be assisted by a support person.
- d. Confidentiality and Recording: the privacy and confidentiality of parties will be respected to the extent practicable and appropriate; with acknowledgment that matters may be subject to production under the [Government Information \(Public Access\) Act](#) or may be subject to subpoena. Accurate records will be kept by each staff member dealing with the complaint, including recording of reasons for all significant decisions; (refer Part F).
- e. Resolution: where it is within the University's responsibility, and under the appropriate delegated authority, fair and reasonable remedies will be offered where appropriate. There will be regular monitoring, review and

reporting of complaints received, and actions taken. The operation of the complaints handling process and findings will be reported to management to improve the University's service delivery and workplace environment. Preventative and corrective action will be taken to eliminate the causes of complaints and to improve the quality of the University's policies and operating environment.

- f. Authority: individuals involved in handling complaints will have the necessary authority and management support to carry out the process effectively, and will have (where specific skills are required, such as mediation) access to appropriate training and resources to fulfil their role.
- g. Conflict of Interest: individuals involved in the handling of a complaint, or investigating or adjudicating on a complaint, must not act in any complaint in which they have a conflict of interest.

(16) The University will generally not act on anonymous complaints unless the issues raised are of a serious nature and sufficient information is provided to initiate an investigation.

## **Part C - Rights of Staff Involved in Complaint Handling**

(17) University staff are entitled at all times to be treated with respect and courtesy when handling complaints.

(18) Where a person involved in a complaint behaves in a threatening, rude or harassing manner toward staff, the Vice-Chancellor may decline to further consider the complaint and institute proceedings for misconduct against the person under applicable rules or policies of the University or refer the matter to an external agency.

## **Part D - Charles Sturt University May Decline Complaints**

(19) The University may decline to deal with a complaint at any time where:

- a. the University Ombudsman forms the view that the complaint is:
  - i. frivolous;
  - ii. vexatious;
  - iii. not made in good faith;
  - iv. misconceived;
  - v. lacking in substance; or
  - vi. lacking in currency;
- b. the complaint is declined by the Vice-Chancellor under clause 18;
- c. a claim has been commenced (either by the complainant or the University) in a court or before another judicial authority;
- d. the complainant has threatened legal action against the University (in the general or particular) verbally or in writing;
- e. the University forms the view that legal action may be commenced by another party at a future time and in the circumstances is of the view that resolution of the matter through this Policy is not appropriate;
- f. the subject matter is arising under, or in relation to, a contract between the University and a third party (not including an employment contract) where there is an agreed dispute resolution process under the contract;
- g. the subject matter of the complaint has been lodged with an external agency and it is more appropriate for the matter to be dealt with by that agency;
- h. the subject matter of the complaint may be more appropriately dealt with by an external agency, in which case the University may refer the complaint to that agency;
- i. the University has already dealt with the substance of the complaint in the past;
  - i. Note: at (a) to (h) all internal processes should be completed and implementation of recommendations not unduly delayed.

j. the complainant is unwilling to participate in the complaint management process.

(20) A decision by the University to decline a complaint does not preclude the University, in its absolute discretion, from seeking to resolve the complaint in accordance with this Policy or through another appropriate resolution process where the University is of the view that this is appropriate. For the avoidance of doubt, nothing in this Part D shall be interpreted to compel or require the University to seek resolution of a complaint that has been declined unless the University determines it is appropriate to do so.

(21) An Internal Review is not available where the complaint has been declined under this Part D or clause 18.

## **Part E - Referral of Complaints**

(22) In general, the University will consult with the complainant to identify how the complainant wishes the complaint to be handled and the outcomes the complainant is seeking without reference of the matter to third parties.

(23) However, where the conduct complained about amounts to serious misconduct or a serious risk to the health or safety of staff or students, to a criminal offence, or where mandatory reporting is legislated, the University has an obligation to deal with the matter under the relevant rules and to refer the matter to the Police or other appropriate external agency for investigation e.g. WorkCover.

## **Part F - Records**

(24) All records shall be stored under the University's electronic document management system.

(25) Only the people who are directly involved in the complaint, or in helping to resolve it, are to have access to information about the complaint.

(26) Complaint documentation is to be kept separate from personnel or student administration files, and these should be annotated only where a person has had a penalty imposed as result of disciplinary action as an outcome under this Policy.

## **Part G - Time Limits**

(27) The time limit set out in the procedures approved under this Policy must be complied with if reasonably practicable. It is recognised that time delays may be experienced where communication is required off-campus or with other contracted service providers. In exceptional circumstances, where it is not possible for an action to be completed within the time limit, steps must be taken to ensure that the process is completed within a reasonable time. Under such circumstances the complainant will be kept informed of the progress.

(28) While staff must endeavour to comply with time limits, no action or determination made under the procedures is invalidated simply because a time limit is exceeded.

(29) A reference to days means working days, that is, days on which the University ordinarily opens for business, unless otherwise stated.

## **Part H - Decision-making**

(30) The overriding intent of this Policy and its associated procedures is to ensure that complaints are dealt with in a fair and impartial manner and that complaints are resolved in a timely and effective way.

(31) Where the application of this Policy, or the procedures made under this Policy, would lead to a process or result that is inconsistent with the principles of natural justice or procedural fairness, or the adoption of a different approach would lead to a more timely and efficient resolution of a complaint, the staff member handling the complaint may vary

the procedures to the extent necessary. In general, a decision to adopt procedures that are inconsistent with the procedures established by the University will be discussed with the University Ombudsman before implementation, or as soon as practicable and communicated to the parties, including the reasons for the decision to vary the procedure.

(32) An Internal Review will be managed according to the [Complaints Procedure - Internal Review](#) and may be requested under the following conditions:

- a. there was a failure by the manager or supervisor involved in handling the complaint to deal with the matter in accordance with the principles of procedural fairness; or
- b. the decision was manifestly unreasonable; or
- c. new information has come to light that a party did not have at the time of the decision, or could not by reasonable diligence have obtained at that time, and that the information is likely to have affected the decision made by the decision maker. With the production of new information the matter may be referred back to the original decision maker.

(33) An Internal Review is not available where the complaint has been declined under clause 18 or Part D.

## **Section 4 - Procedures**

(34) This Policy is supplemented by a number of procedures which are listed in the Associated Information page. Please refer to these for further instruction.

## **Section 5 - Guidelines**

(35) Nil.

## Status and Details

<b>Status</b>	Current
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