



Complaints and Appeals Policy and Procedure

1. CONTEXT

The VET Quality Framework is aimed at achieving greater national consistency in the way providers are registered and monitored and in how standards in the vocational education and training sector are enforced.

Red Cross First Aid & Mental Health (herein referred to as 'FAMH'), as a Registered Training Organisation (RTO), must comply with the VET Quality Framework.

The VET Quality Framework comprises of:

- a) the Standards for Registered Training Organisations 2015;
- b) the Australian Qualifications Framework;
- c) the Fit and Proper Person Requirements;
- d) the Financial Viability Risk Assessment Requirements;
- e) the Data Provision Requirements.

This Policy should be read in conjunction with the NVR Standards for Registered Training Organisations 2015. This policy is informed by *Standard 6: Complaints and Appeals are recorded, acknowledged and dealt with fairly, efficiently and effectively*. Details of this standard are available on the Australian Skills Quality Authority [\(ASQA\) website](#).

2. SCOPE

This policy applies to all FAMH stakeholders.

3. DEFINITIONS

Appeal	Means a request to review a decision that has been previously made. Appeals can be made for any part of a client's involvement with FAMH.
Complaint	Means a stakeholder's expression of dissatisfaction with any service provided by FAMH.
NVR	National VET Regulator (Australian Skills Quality Authority [ASQA])
SRTO	Standards for Registered Training Organisations 2015



4. STATEMENT OF POLICY

4.1 Complaints and appeals system

- 4.1.1 FAMH will endeavour to provide satisfactory services to all its stakeholders during their course of their interaction with the Training Department.
- 4.1.2 Despite all efforts of FAMH to provide satisfactory services to its stakeholders, complaints may arise requiring formal resolution.
- 4.1.3 FAMH is committed to developing and maintaining an effective, timely, fair and equitable complaints and appeals system which is easily accessible and offered to complainants and appellants at no charge. FAMH ensures:
- (i) a culture that views complaints and appeals as an opportunity to improve the organisation and how it works;
 - (ii) a complaints and appeals system that is client focused and helps FAMH to prevent these events from recurring;
 - (iii) complaints and appeals are resolved promptly, objectively, with sensitivity and in complete confidentiality;
 - (iv) that the views of each complainant, appellant and respondent are respected and that any party to complaint or appeal is not discriminated against nor victimised;
 - (v) that there is a consistent response to complaints and appeals;
 - (vi) that students are fully informed of their right to lodge a complaint or appeal; and
 - (vii) person(s) responsible for investigating the complaint will not be the subject of the complaint or appeal.
- 4.1.4 All formal complaints, appeals and their outcomes will be recorded in the Complaints & Appeals Register. In addition, the register will be regularly reviewed and used as an opportunity for improvement and reflection.

4.2 Nature of complaints and appeals

4.2.1 Complaints and appeals may be made in relation to any of FAMH activities and decisions such as:

- (i) the application or enrolment process and decision;
- (ii) the quality of education provided, including access or lack of access to resources and facilities;
- (iii) the content or structure of a course and its delivery;
- (iv) training and assessment matters, including student progress, assessment (see 4.3), curriculum and awards;
- (v) access to personal records;
- (vi) decisions made by FAMH.;
- (vii) unethical practices or criminal behaviour undertaken by a FAMH staff member or student; and
- (viii) allegations by staff or students of harassment, bullying or discrimination.

4.3 Assessment appeals

4.3.1 Students have the right to make an appeal against the academic decisions made by FAMH.

4.3.2 Grounds for appeal against an assessment decision may only be made on limited grounds:

- (i) the student was not provided with a sufficient course outline explaining the assessment process;
- (ii) the assessment process was not carried out inline with the course outline provided to the student;
- (iii) the student's needs (e.g. LLN issues, disability) were not taken into consideration where appropriate;
- (iv) the assessment process did not meet the requirements of the relevant training package;
- (v) the student genuinely believes there has been an administrative error in the calculation of their assessment mark;
- (vi) alleged bias or incompetence of the trainer/assessor; and
- (vii) faulty or inappropriate equipment or facilities provided to undertake the assessment.

4.4 Resolving issues before they become a complaint

4.4.1 Students, clients and FAMH staff are encouraged, wherever possible; to resolve concerns or difficulties directly with the person(s) concerned to deal with the issue before it becomes a formal complaint. FAMH staff will be available to assist complainants resolve their issues at this level.

4.5 Lodging complaints and appeals

- 4.5.1 All formal complaints, internal appeals and assessment appeals can be received by phone, email or in writing.
- 4.5.2 The complaint or appeal will be formally registered into the complaints register. This triggers an investigation and corrective action process involving relevant FAMH managers and staff. The process is tracked through to resolution and complaint closure using the complaints register.
- 4.5.3 All parties are encouraged to approach matters with an open view and attempt to resolve problems through discussion and conciliation. FAMH acknowledges the need for an appropriate independent party to mediate where an appropriate outcome cannot be reached internally
- 4.5.4 Appeals must be made within ten (10) working days of the original decision having been made.

4.6 Resolution timeframes

- 4.6.1 All formal complaints and appeals will be responded to efficiently to ensure an effective resolution within a reasonable timeframe.
- 4.6.2 FAMH will acknowledge receipt of formal complaints and appeals to the complainant/appellant within two (2) working days upon receive such a complaint or appeal.
- 4.6.3 FAMH will endeavour to resolve formal internal complaints and appeals within twenty (20) working days or as soon as practicable upon receipt of the formal complaint or appeal. However in some cases, particularly if the matter is complex, the resolution may take longer, in which case, complainants and appellants will be advised of an extended timeframe.
- 4.6.4 FAMH is unable to define a resolution timeframe where a matter has been taken before an external appeals process.

4.7 Enrolment status

- 4.7.1 Where a student chooses to access this policy, FAMH will maintain the student's enrolment while the internal complaints and appeals process is ongoing.
- 4.7.2 Where the student chooses to access this policy, and the matter has been taken before an external appeals process, FAMH is not obliged to maintain the student's enrolment during the external appeals process.



4.8 Continuous improvement cycle

4.8.1 Where the complaint or appeal is identified as an area for improvement, FAMH will link the complaint or appeal to the continuous improvement cycle and action according to *RCPOL06 Continuous Improvement Policy*.

4.9 Record keeping and confidentiality

4.9.1 A written record of all complaints, appeals and outcomes handled under this policy shall be maintained for a period of two (2) years to allow all parties to the complaint or appeal appropriate access to those records.

4.10 Non-limitation of policy

4.10.1 This policy and the related procedures do not replace or modify those or any other responsibilities which may arise under policies or under statute or any other law. Nothing in this policy and the related procedures limits the rights of the individuals to take action under Australia's Consumer Protection laws.

4.10.2 This policy does not circumscribe an individual's rights to pursue other legal remedies.

PROCEDURE

1.0 Informal complaint

	Action	Details	Responsibility
1.1	Making an informal complaint	Complainants/appellants are encouraged to resolve concerns or difficulties directly with the person(s) concerned to deal with the issue before making a formal complaint. FAMH staff should be available to assist in resolving issues at this level.	Complainant

2.0 Formal complaint

	Action	Details	Responsibility
2.1	Making formal complaint/appeal in writing	Formal complaints/appeals can be made in writing through email, letter or the FAMH Complaints and Appeals form. Where a complaint/appeal is made verbally, advise the customer to submit it in writing. When making a complaint/appeal, the customer should provide as much information as possible to enable FAMH to investigate appropriately and determine an appropriate solution.	Complainant
2.2	Acknowledge receipt	Acknowledge receipt of the complaint or appeal to the customer and email to the Quality Team within two (2) working days upon receipt of the written complaint.	Quality Team
2.3	Record complaint	Enter complaint details into the Complaints & Appeals Register. Assign responsibility for resolving the complaint to the relevant FAMH manager/ staff member and advise of timeframe.	Quality Team
2.4	Investigate and review complaint	Investigate and review complaint. This may include delegating the process to a more appropriate person, however the assigned staff retains responsibility for ensuring the process has been followed through. Request further details from the complainant and respondent as required. This may be sought via written or verbal request, or meetings with the parties individually. Where a meeting has been requested, the complainant has the right to have another person of their choice present at the meeting. Make a record of any corrective actions taken, resolutions reached or continual improvement actions using the complaints and continual improvement registers.	Quality And or Delegated Manager

3.0 Management review

	Action	Details	Responsibility
3.1	Discuss Continual improvement actions at each Quality Team meeting	The Continual improvement register is to be reviewed as a regular agenda item at Quality Team meetings: <ul style="list-style-type: none"> • progress report on continual improvement actions resolved and not yet resolved; • discuss escalation process where assigned continual improvement actions have not been resolved within the allocated timeframe; • where a continual improvement action has not been allocated or its priority set, decide on what action is required, including an agreement about the timeframe and responsible staff for its implementation. 	Quality Team
3.2	Management review	Where appropriate or required, provide updates on Continual Improvement progress to the FAMH leadership team.	Quality

POLICY ADVISOR

- Quality & Content Manager

RELATED POLICIES AND LEGISLATION

- RCPOL07 Audit Policy and Procedure
- RCPOL06 Continuous Improvement Policy and Procedure
- RCPOL10 Records Management Policy and Procedure
- COPOL02 Client Feedback and Evaluation Policy

PUBLISHING DETAILS

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