

### Purpose:

Vative Healthcare has a defined complaints and appeals process that will ensure Learners and Clients appeals, complaints and grievances are addressed effectively and efficiently. Vative Healthcare strives to ensure that each candidate is satisfied with their learning experience and outcome.

In the unlikely event that this is not the case, all Complainants' have access to a rigorous, fair and timely appeals, complaints and grievances process, which are outlined in this section of the policy and procedures document. Any appeals, complaints and grievances will be reviewed as part of the continuous improvement process and where corrective action has been highlighted it will be implemented as a priority.

### Standards and Conditions:

The following table represents areas which this policy and procedure relates to in accordance to Federal and State contract guidelines.

ASQA: Standards	Delegate Requirements	HESG: VET Funding Contract
Standard 2.2 (b)	R2.2	Clause 12
Standard 6		Schedule 1, clause 1.6

### Responsible Parties:

A grievance, complaint or appeal is deemed to be formal when it is made in writing to the RTO Manager (Public Enquiries) or the Chief Executive. The RTO Manager will support the Chief executive in ensuring the grievance, complaint or appeal is handled in accordance to this policy.

### Policy Outline:

Definitions outlining this policy:

- *Appeal:* In law, an appeal is a process for requesting a formal change to an official decision
- *Complaint:* A statement that a situation is unsatisfactory or unacceptable.
- *Grievance:* An official statement of a complaint over something believed to be wrong or unfair.

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If a Learner or Client is dissatisfied with any aspect of the training being undertaken, it should first be discussed directly with the Facilitator, or if that is not appropriate with the RTO Manager.

All appeals, complaints and grievances will be handled in an unbiased manner and will adopt the principles of natural justice and procedural fairness.

If the issue is unable to be resolved within 5 working days or it is not appropriate that the RTO Manager or Facilitator deal with it, the matter would be referred to the Chief Executive Officer of Vative Healthcare.

Where Vative Healthcare considers more than 60 calendar days are required to process and finalise the complaint or appeal. Vative Healthcare will:

- Inform the Complainant in writing, including reasons why more than 60 calendar days are required; and
- Regularly update the Complainant on the progress of the matter

Where a grievance, complaint or appeal cannot be resolved through discussion and conciliation Vative Healthcare acknowledges the need for an appropriate external and independent agent to mediate between the parties, whose details are listed below.

#### Disputes Settlement Centre

A Division of the Department of Justice

4 / 456 Lonsdale St, Melbourne, Victoria, 3000

Phone: 1300 372 888

Fax: 8684 1311

Email: [dscv@justice.vic.gov.au](mailto:dscv@justice.vic.gov.au)

The Dispute Settlement Centre of Victoria (DSCV) can help you resolve a wide range of disputes without having to resort to taking legal action. They offer practical strategies, mediation services, education programs and lots more, and their service is free.

Learners and Clients have the right to present a complaint and to appeal any decisions (including assessment decisions), and to be treated fairly in the process. Vative Healthcare will treat all appeals, complaints and grievances in confidence.

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### Procedure Outline:

All complaints and appeals, no matter how they are received are to be logged within the Complaints & Appeals Register. Emails and file notes in relation to complaints and appeals are also kept within the following location: Compliance\ASQA\Complaints & Appeals

In the event of a Formal Complaint or Appeal the following steps will be taken:

1. Formal complaints and appeals must be made via the 'Appeals, Complaints and Grievances Form' or sent via email detailing the complaint.
2. The 'Appeals, Complaint and Grievances form' is located in the student handbook, website or upon request.
3. The 'Appeals, Complaint and Grievance form' is to be addressed to the RTO Manager of Vative Healthcare.
4. Upon receipt of the complaint (via complaints form or email) the RTO Manager will acknowledge the complaint in writing and will investigate within 5 working days and the complainant notified of the result of the investigation.
5. The RTO Manager will inform those involved in the allegation and provide an opportunity to present their side of the matter.
6. The RTO Manager will make contact with the Complainant and commence the processes for resolution.
7. The RTO Manager will provide the Complainant with his/her recommendations and outcome including reasons for the decision/s made with reference to 'Appeals, Complaint and Grievances form'.

Whereby a Complainant telephones Vative Healthcare:

1. The person taking the call will be professional and convey confidence at all times regarding Vative Healthcare and the service products offered by Vative Healthcare.
2. The person taking the call will refer the complaint to the RTO manager who will respond to the Complainant within 48 hours.

Refer to the attached Appeals, Complaints and Grievance Form on the following page.

Substantiated complaints will also be logged on the Improvement Register for further investigation to identify any potential causes and ensure appropriate action is taken to mitigate or remove the cause.

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Vative Healthcare			
<b>Appeals, Complaints, Grievance Form</b>			
Name of Person Reporting:		Company (if applicable):	
Reported to	Appeal	<input type="checkbox"/>	Date:
<b>RTO Manager</b> <input type="checkbox"/>	Complaint	<input type="checkbox"/>	
<b>Chief Executive Officer</b> <input type="checkbox"/>	Grievance	<input type="checkbox"/>	
Description of Issue			
Expected Outcome			
Action already taken by person reporting issue			
Appellant/Complainant	Signed:	Date:	
RTO Manager/CEO	Signed:	Date:	

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