



GUIDELINE	
Grievance Resolution	
Scope (Staff):	All employees
Scope (Area):	Child and Adolescent Health Service (CAHS)

Contents

1. Introduction 2

2. Aim 2

3. Key Points 2

 3.1 Victimisation 3

 3.2 Confidentiality 3

 3.3 Employee Support..... 3

 3.4 Record Keeping..... 4

4. Roles and Responsibilities 4

5. Grievance Resolution – Informal Process..... 6

 5.1 Resolution by Complainant..... 6

 5.2 Resolution by Manager 6

6. Grievance Resolution – Formal Process 7

 6.1 Lodging a Formal Grievance 7

 6.2 Managing a Formal Grievance..... 8

7. Investigation of the Grievance 9

8. Mediation in Grievance Resolution 12

9. Withdrawal of Grievance..... 12

10. Vexatious, Frivolous or Malicious Matters 12

Related internal policies, procedures and guidelines..... 13

References..... 13

Useful resources (including related forms) 13

1. Introduction

The Child and Adolescent Health Service (CAHS) is an organisation that employs a diverse group of people with a wide range of life experiences, cultures, values, thoughts and ideas. These attributes enable CAHS to deliver high quality services to the community they serve, however, under some circumstances it is acknowledged that differences of opinion and conflict may occur.

Please note the links in this document are provided as a service. Links to documents can be volatile. If the link is broken a search for the document may need to be undertaken.

2. Aim

To ensure employees are given the opportunity to express grievances and have them resolved in a fair, equitable and prompt manner and in an atmosphere of mutual respect and cooperation².

This guideline supports the [WA Health Employee Grievance Resolution Policy](#) (the Policy) and assists managers and employees to understand the CAHS Grievance Resolution process by:

- Providing guidance on how the Policy is to be applied in CAHS.
- Defining the roles and responsibilities of all Parties.
- Making provision for feedback to both complainants and respondents on the outcomes and reasons for grievance decisions.
- Ensuring that an employee's grievance is directed to the appropriate Manager.

3. Key Points

The CAHS Grievance Resolution Guideline (the Guideline) details the process for resolving grievances both informally and formally.

The following key points underpin these guidelines.

- The Guideline must be read in conjunction with the Policy, which clearly outlines the scope, definitions and grievance resolution principles that apply.
- Grievances raised under the Policy must be resolved in compliance with the Public Sector Commission [Grievance Resolution Standard](#) (the Standard), the [Public Sector Code of Ethics](#) and the [WA Health Code of Conduct](#).
- Grievance Resolution is the process used to resolve or redress employee grievances. Grievance resolution is not a disciplinary process¹.
- This Guideline applies to all employees directly employed by CAHS, whether permanent, fixed term or casual.
- Grievance Resolution may occur informally or formally. Where appropriate, every effort should be made by the Parties to resolve a grievance informally before resorting to a formal process.
- Resolution of workplace bullying matters (other than suspected misconduct) may be managed and processed in accordance with the Policy and this guideline³.
- The line Manager managing the grievance (whether through informal or formal resolution process) should be impartial, not a party to the grievance and they should not be perceived as having a conflict of interest by any of the Parties. Further

information on perceived, potential or actual Conflicts of Interest can be found at [WA Health Managing Conflict of Interest Policy](#).

- Out of Scope matters are detailed in the Policy. If at any stage of a grievance process the employer determines the issue is out of scope, the matter is to be progressed in accordance with the relevant policy and/or procedure. Any remaining issues may continue to be addressed under the grievance resolution process. The complainant and respondent will be informed accordingly.
- The Policy and the Standard outline in detail the principles of procedural fairness that must be followed by all parties during the grievance resolution process. Managers and employees should make themselves familiar with these principles before commencing grievance resolution.

3.1 Victimisation

Victimisation is the act of subjecting, or threatening to subject, another person to any detriment where that person has lodged, or proposes to lodge a grievance. This includes any intentional unfavourable treatment. Unfair treatment or victimisation of any party during a grievance resolution process **will not be tolerated** and may result in the commencement of a disciplinary process.

3.2 Confidentiality

All Parties are required to maintain appropriate confidentiality during the grievance resolution process. Matters relating to the grievance should only be discussed with those involved in the process or who otherwise need to know. The Manager responsible for handling the grievance resolution process should ensure that this requirement of confidentiality is clearly understood by all Parties. Breaching confidentiality may result in the commencement of a disciplinary process.

Certain occasions may exist where confidentiality cannot be maintained, particularly in situations where the safety of an individual (employee, patient, client, and/or visitor) is at risk. Managers must ensure the relevant Parties are aware of these circumstances.

3.3 Employee Support

Support Person

- Each party involved in a grievance process is entitled to have a support person of their choice to accompany them to meetings (for example a friend/family member, union representative, or colleague).
- The role of a Support Person is to provide support and advice to the Employee, but not to actively participate in the process, such as answering questions on the Employee's behalf. The selected Support Person must be independent to the grievance, for example must not be a witness.
- Employees from culturally diverse groups, such as those from non-English speaking or Aboriginal and Torres Strait Islander background, may require the support of someone from their cultural group in working through the grievance resolution process.
- Each party also has the right (at their own cost) to have a suitably qualified person to advise or support them in dealing with the grievance. Managers should inform employees of this right and give them reasonable time to organise it.

Employee Assistance Program (EAP)

- The CAHS EAP provides a free confidential counselling service to employees and their immediate families on a range of workplace and personal issues. More information on the EAP providers can be found on the CAHS Intranet.

3.4 Record Keeping

Accurate and detailed documentation of each grievance resolution process should be kept to ensure the process is transparent and capable of review.

Informal Grievance Records

Where a Manager provides assistance in resolving an informal grievance, it is important that they keep records. This may include a file note of events, copies of relevant emails or letters, along with brief notes of important telephone calls and verbal conversations. It is important to ensure any file notes or records are made in a timely manner to ensure accuracy and currency.

Formal Grievances Records

All documentation relating to the formal grievance, investigation and resolution should be kept in a secure confidential file located in Human Resources (HR). Meetings and discussions should be recorded in writing in a timely manner having regard to accuracy and currency. Information should include:

- How and when employees were informed of their rights and responsibilities.
- How the issues to focus on were identified and examined.
- Key activities undertaken during the process, including discussions with all parties.
- Copies of any correspondence relating to the grievance.
- What actions were taken to address or resolve the issue/s.
- How and when employees were informed of any delays in the process.
- The basis for the final decision and how it was communicated to the Parties.
- Notification in writing to the Parties of the outcome with advice that they may make a Breach of Standard claim in relation to the reviewable decision.

Documentation should be maintained having due regard for Public Sector record keeping practices, the provision of the [General Disposal Authority for State Government Information](#) and the requirements of the Freedom of Information Act 1992.

4. Roles and Responsibilities

Role	Responsibility
Complainant and Respondent (the Parties)	<ol style="list-style-type: none"> 1. Familiarise themselves with the WA Health Grievance Resolution Policy and this Guideline. 2. Where possible, attempt to resolve the grievance informally before resorting to a formal process. 3. Provide sufficient information to enable the employing authority to assess the grievance. 4. Maintain confidentiality and conduct themselves in a manner that will not reflect adversely on CAHS, its employees or the wider WA Health. 5. Participate in the resolution process in good faith and undertake any actions reasonably necessary to achieve a timely and fair resolution.

Manager	<ol style="list-style-type: none"> 1. Familiarise themselves with the WA Health Employee Grievance Resolution Policy and this guideline. 2. Responsible for the grievance resolution process for employees within their area of responsibility. 3. Consider grievances seriously and deal with them fairly, sensitively and as soon as possible. 4. Inform the Parties of their rights and responsibilities in the grievance resolution process, including access to a support person/representation and the Employee Assistance Program (EAP). 5. Ensure the principles of procedural fairness (outlined in the Policy) are applied throughout the process. 6. Take action to ensure the lodgement of a grievance does not result in unfair treatment or victimisation of any party to the grievance process. 7. Ensure that confidentiality is maintained at all times throughout the process. 8. Maintain appropriate documentation including file notes, notes of discussions, records of meetings and correspondence. 9. Keep relevant parties informed during the process and inform them of the outcome, proposed resolution action(s) and provide reasons for the decision reached. 10. Engage HR in the event of a formal grievance to assist with the facilitation of the process.
Decision Maker	<ol style="list-style-type: none"> 1. Familiarise themselves with the WA Health Grievance Resolution Policy and this guideline, ensuring compliance. 2. Ensure they have the delegated authority to make decisions in regard to commencing, progressing, reaching a finding and determining CAHS response to an employee grievance. Refer to the CAHS Authorisation Schedule. 3. Declare any perceived, potential or actual conflict of interest with respect to any parties associated with the grievance process before agreeing to undertake the role. 4. Ensure a proper assessment is conducted, allowing a genuine and thorough examination that takes into account all relevant facts and circumstances that are reasonably available and known at the time of the decision. 5. If necessary, consider appointing an investigator, in consultation with HR, to independently gather evidence. 6. Base any decisions on supporting evidence and be impartial and act without bias when making a determination, finding or decision about the grievance.
Human Resources (HR)	<ol style="list-style-type: none"> 1. Provide advice about the grievance resolution process. 2. Facilitate and advise managers in achieving resolution to the grievance. 3. Responsible for the secure storage of formal grievance records.

5. Grievance Resolution – Informal Process

The informal grievance resolution process is where the Parties involved attempt to resolve the matter with minimal intervention through informal discussions and meetings.

Many grievances can be dealt with satisfactorily at an informal level, with the result more likely to be accepted and committed to by both Parties. If necessary, the Manager may become involved in discussing the matter with the Parties and attempting to informally negotiate a satisfactory solution. Corrective measures to resolve the situation should ideally be gained by consensus.

The following sections are suggested options to resolve a grievance informally.

5.1 Resolution by Complainant

Wherever possible, the Complainant should first seek to resolve a grievance by talking directly to the person with whom they have a grievance. For example:

- The Complainant should talk directly to the person responsible if the grievance is about the behaviour of that person; or
- Where the grievance is about a decision, process or activity of the health service that they believe adversely affects them, the Complainant should talk to the person with management responsibility for that decision, process or activity.

If the Parties reach agreement on their own, the grievance is resolved and no further action is required, other than to implement any actions that were agreed to by the Parties.

5.2 Resolution by Manager

Where an issue has not been resolved by speaking to the person directly (or the Complainant is not comfortable doing so) they may involve their Manager to facilitate an informal resolution to their grievance. If the Complainant believes that a situation exists which makes it difficult for them to raise the issue of concern with their line Manager, they should approach that person's manager or HR.

The following points are suggested actions to assist the Manager in resolving the grievance informally.

5.2.1 Preliminary Assessment of the Grievance

- When an employee raises an issue of concern, the information needs to be assessed to determine the nature and severity of the complaint and whether the issue is within the scope of the [WA Health Employee Grievance Policy](#). If the assessment indicates the complaint is within scope go to 5.2.2 below.
- If the assessment indicates the complaint is out of scope of the Policy the matter is to be progressed in accordance with the applicable legislation, standard or relevant policy.
- If the Manager suspects that the complaint may be vexatious, frivolous or malicious they should seek advice from HR before taking any further action. Refer to section 11 of this document.

5.2.2 Clarify Issues and Concerns

Meet separately with the Parties as soon as possible to:

- a) Explain that the purpose of the grievance process is to achieve a resolution; it is not a disciplinary process.
- b) Explain their rights and responsibilities in grievance resolution ([refer to Roles and Responsibilities](#)) including the right to have a support person at all meetings, confidentiality requirements and the availability of the EAP.

- c) Clarify the Complainant's issues and concerns and what they are seeking from the process; OR explain the details of the grievance to the Respondent and provide them with the opportunity to respond.
- d) Explore/discuss any actions which may assist in resolving the matter.

5.2.3 Finalise Informal Grievance Process by either:

- a) Negotiating a resolution with each party separately;
- b) Gaining the consent of both parties to attend facilitated meeting/s to resolve the grievance;
- c) Making a final decision based on consideration of all available facts and circumstances. The Complainant and Respondent must be advised of the decision and the basis for the decision; or
- d) Recommending mediation or another alternative dispute resolution method which may assist in achieving agreement on a resolution. HR is available to provide advice on alternative dispute resolution methods.

If resolution is achieved, the grievance process is complete. If the grievance is not resolved informally, or if it is too complex or the Complainant or the Manager believes informal resolution is inappropriate, the formal resolution process should commence.

6. Grievance Resolution – Formal Process

A formal grievance resolution process is initiated when:

- a) An informal grievance resolution has been unsuccessful;
- b) A complainant informs their line Manager that they wish to progress the matter as a formal grievance; or
- c) The seriousness or complexity of the issue makes informal resolution unsuitable.

All documentation relating to formal grievance, investigation and resolution should be kept in a secure confidential file by HR.

The following steps are provided as a guide and may not have relevance in all situations.

6.1 Lodging a Formal Grievance

Whilst it is preferable that the Complainant submits their grievance in writing, a verbal complaint can be recorded in writing by the receiving officer. If the Complainant considers that it is inappropriate to lodge their grievance with their immediate line manager they can lodge it with that person's Manager or HR.

A formal grievance should contain the detail and circumstances of the grievance. For example:

- What was said or done
- Persons involved
- Date and time
- Place
- Witnesses
- Action taken to date in an attempt to resolve the grievance informally
- Outcomes

6.2 Managing a Formal Grievance

Upon the receipt of a formal grievance the Manager is responsible for managing the grievance through to resolution provided they have the ability and delegated authority to resolve or redress a particular grievance. The [CAHS Authorisation Schedule – for Chief Executive functions](#) states the minimum tier level manager that can approve:

- 1) the initiation of an investigation of an employee grievance by an internal reviewer
- 2) the initiation of an investigation of an employee grievance by an external investigator
- 3) a determination of an employee grievance.

Managers should contact their line Manager or HR if they have any issues or concerns in relation to their role in a grievance process.

6.2.1 Preliminary Assessment

The Manager should undertake a preliminary assessment of the available information to examine the nature of the complaint. If the grievance has not gone through any informal process, the Manager should meet with the Complainant to clarify the issues raised and outcomes sought.

In consultation with HR, the Manager shall determine whether the complaint falls within the scope of the Policy. If the complaint is within scope of the grievance process the Manager together with HR will determine a course of action.

If the complaint is outside the scope of the grievance process the matter is to be progressed in accordance with the relevant policy and/or procedure.

6.2.2 Appointment of an Internal Reviewer

If able to be investigated internally, the delegated authority in consultation with HR shall appoint an internal reviewer.

When considering which internal officer should undertake the investigation, consideration should be given to the following:

- a) The knowledge and expertise of the internal officer.
- b) The impartiality of the person – ensuring they are not a party to the grievance nor have a perceived or actual conflict of interest.

If the most appropriate identified internal reviewer is the Tier 4 Manager, the delegation of authority to endorse recommendations and make decisions will then be escalated to the Tier 3 Manager.

6.2.3 Appointment of an External Investigator

Under the Policy, CAHS may elect to appoint an external consultant. In instances where an external investigator is engaged CAHS will provide them with the Terms of Reference and a clear scope of work. The person conducting the investigation must be provided copies of all relevant documents including a copy of the Policy and this Guideline. All Parties must be informed of the decision to engage an External Investigator.

External Investigators must be contracted in consultation with HR and in line with the [Whole of Government Common Use Agreement \(CUA\) - Human Resources Investigation Services](#).

7. Investigation of the Grievance

The following information applies to an appointed investigator (internal or external). It is an expectation of CAHS that the appointed investigator is required to record identified issues and determine how to gather facts, for example, what information needs to be reviewed, who needs to be interviewed and the order in which information will be sought. These must be kept on file along with the documented responses.

The Public Sector Commission has developed the following two documents to assist with investigations of grievances:

- [The 4 Step Approach to Investigating Grievances](#) (This has formed the basis for the CAHS steps as outlined below).
- [Checklist – Considering Grievances](#)

Step 1. Clarify the Issues and Concerns

- a) Contact the **Complainant** as soon as possible to arrange a meeting with them. During the initial contact with the Complainant:
 - Explain the purpose of the grievance resolution process; importantly that it is not a disciplinary process.
 - Advise that they are entitled to have a support person accompany them to any meetings that are held and that confidentiality must be maintained throughout the process.
 - Inform them of the steps that will be applied during the grievance resolution process. This may include information on the meetings that will take place, the purpose of the meetings, and the type of questions that will be asked, how long their interview will take, where it will be held, who will be attending, how they will be informed of progress and how the final decision will be made.
 - Explain the investigators role during the process.

- b) During the meeting with the **Complainant**:
 - Explain their rights and responsibilities in grievance resolution ([refer to Roles and Responsibilities](#)) including the right to have a support person at all meetings, confidentiality requirements and the availability of the EAP. Provide them with a copy of the Policy and the Guideline.
 - Re-iterate the Key Requirements and Principles that relate to the process.
 - Clarify their concerns and identify the issues and document these accordingly:
 - What does the Complainant believe to be the problem?
 - Who or what is perceived to be the cause of the problem?
 - Where, when and why did the problem/s occur (dates, time) and how often?
 - Is there any evidence (documentary, statistical or other)?
 - What effect does the issue have on the complainant, their colleagues or patients?
 - Clarify their desired resolution to the problem.
 - Clarify what attempts, if any, have been made to resolve the problem to date?
 - Advise the Complainant that if their grievance relates to another employee, then the employee (the Respondent) will be given an opportunity to respond.
 - Ask the Complainant to identify any documents or information that can support their version of events, or to identify any person that can assist with inquiries.

- Advise the expected next steps and, where possible establish timeframes.

Confirm the details in writing to the Complainant confirming the scope of their grievance and what they are seeking from the process in order for their grievance to be resolved (HR can assist in drafting the letter).

Sometimes a decision may be made to not examine a particular issue. For example, the matter has already been considered by CAHS or is part of another process. Any decision not to examine a particular issue/s should be clearly communicated to the Complainant.

- c) Contact the **Respondent** as soon as possible to inform them that a grievance has been lodged, and explain the grievance resolution process. Refer to Step 1 a) in relation to the initial contact requirements.
- d) Meet with **Respondent**. During this meeting:
 - Explain their rights and responsibilities in grievance resolution ([refer to Roles and Responsibilities](#)) including the right to have a support person at all meetings, confidentiality requirements and the availability of the EAP. Provide them with a copy of the Policy and the Guideline.
 - Re-iterate the Key Requirements and Principles that relate to the process.
 - Explain the details of the grievance, providing a copy in writing.
 - Provide the Respondent with an opportunity to respond to the grievance. Also inform them that they will be provided with sufficient time to prepare a response to the grievance if they choose not to respond at the meeting.
 - Ensure the Respondent has enough information to fully understand the allegations as they relate to them. Issues may be provided in writing or the respondent may agree to further meetings to have allegations explained.
 - Ask the Respondent to identify any documents or information that can support their version of events, or to identify any person that can assist with inquiries.
 - All information must be documented.

Step 2. Develop plan outlining how the facts and circumstances will be evaluated

- a) Record the identified issues and determine how the facts will be gathered. For example, identify what material needs to be reviewed (documents, files, emails) and who needs to be interviewed.
- b) Formulate questions that will help explore the issues raised.
- c) Provide the Complainant and Respondent with sufficient prior notice relating to any further meetings to give them time to prepare.
- d) Record important facts during any interviews and prepare a written record of any meetings and/or statements gathered. The Parties must sign them as confirmation as a correct record of the discussions.
- e) If the Parties have identified any relevant person to support their version of events, then those individuals should be interviewed independently. Although it is not necessary to interview everyone it is important that any decision not to interview a particular person is well considered and documented.
- f) The investigator may identify other persons or witnesses who have knowledge of the matter to gain a better understanding of the issues. Any additional person identified to provide information should be communicated to the Parties to ensure any issues around conflict of interest can be identified.
- g) Provide regular updates on progress or delays to the Complainant and Respondent throughout the resolution process.

- h) Document the process thoroughly. Records should include when, what and how the information was conveyed to the Parties.

The investigator completes the final report and submits it to the Decision Maker.

Step 3. Evaluate information and present preliminary views to the Parties for comment

After evaluating and considering all the information gathered from the investigation, the Decision Maker:

- a) May feedback any preliminary views to the Parties for comment and/or to check the facts.
- b) Should consider any criticisms or concerns raised by the Parties and whether these need to be addressed to ensure the process is transparent and conducted in consideration of the principles of procedural fairness and grievance resolution.
- c) Should determine if any additional work is required based on any discussions with the Parties. This may include additional interviews or document reviews or whether any areas of the investigation need to be reconsidered to ensure accuracy. If additional investigation required repeat Step 2.
- d) Will evaluate the information gathered during the discussions and all other available relevant evidence; and
- e) Identify and consider various options for resolving the grievance, having regard for the implications including cost, industrial, policy or precedent implications, and advantages and disadvantages of identified options. All selected options must be compliant with relevant legislative, regulatory and/or award/industrial agreement provisions.

Step 4. Make a Final Decision

After following Steps 1-3, and assessing all gathered facts, and ensuring any recommendations are made in consideration of those facts, the Decision Maker should:

- a) Decide if it is possible to achieve a resolution. This may be achieved by bringing the Parties together to jointly decide upon a solution that will lead to a successful outcome. (Mediation may assist in this step – refer to [Mediation in Grievance Resolution](#) below); or
- b) Negotiate a resolution with each party separately (this may include moving staff, reallocation of work, changing of work processes etc); or
- c) Make a final decision based on consideration of all available facts and circumstances. A decision that one or more of the Parties is unhappy with is not necessarily the wrong decision, provided it has been made with all the available facts and given due consideration. Not all grievances can be resolved to the complete satisfaction of all the Parties.

Step 5. Document the basis for the decision and notify the Parties of the outcome.

Grievance resolution decisions are open to review by the Public Sector Commission and it is a requirement that there is appropriate documentation kept on file to explain:

1. The decision that was made; and
2. The grounds that led to the final decision being made.

A quality check of the process should be undertaken to ensure the key steps have been undertaken and sufficient documentation of the process has been recorded to understand why a particular decision has been made.

The Complainant and Respondent must be notified in writing of the outcome at the conclusion of the grievance process.

Once a reviewable decision is reached, the process used to determine the outcome is appealable against the Standard. The Parties should be provided with written notification of their right to lodge a breach of standard claim against the Standard, including breach of standard claim details.

8. Mediation in Grievance Resolution

Mediation is confidential, voluntary and impartial and assists Parties to identify and resolve issues themselves. An appropriately skilled mediator assists people in conflict to identify and isolate issues under dispute, and to identify and if possible agree on potential options to resolve those issues. Some key points when engaging in mediation:

- a) Mediators are neutral assistants, who do not make judgments. Both Parties need to be able to accept the mediator as being independent and having no vested interest in the outcome of the mediation.
- b) They can be a manager or an external professional Mediator. When choosing a Mediator, the occupations of the Parties should be considered to ensure that the Mediator has the appropriate skills and qualifications.
- c) During mediation, the Mediator aims to assist the Parties to find their own solution and may, in some instances, offer suggestions for resolution.
- d) The Mediator does not influence a decision or provide advice about likely outcomes, rather they support the Parties in solving their own problems and making their own decisions.
- e) All Parties to a grievance need to agree to mediation.
- f) Even if agreement is not reached on all issues in dispute, Parties are assisted to discuss their grievances in a constructive manner, and to reach an understanding of each other's position.

9. Withdrawal of Grievance

A Complainant may withdraw their grievance at any stage of the resolution process, with all aspects of confidentiality being maintained throughout. Formal grievances should be withdrawn in writing and the Parties to the grievance advised.

The withdrawal of a formal grievance does not however preclude management taking action on serious concerns where it is necessary to meet their duty of care.

10. Vexatious, Frivolous or Malicious Matters

While the great majority of employee grievances are motivated by genuine concern about perceived inappropriate or unfair behaviour or actions, on some occasions a grievance may be vexatious, frivolous or malicious, that is, designed to harass or annoy, to cause delay or detriment, or for any other wrongful purpose. Employees should be made aware that if a grievance is investigated and found to be vexatious, frivolous or malicious, then a disciplinary process may commence.

Employees who believe they are the subject of a vexatious, frivolous or malicious grievance are encouraged to seek advice from their Manager or HR.

Related internal policies, procedures and guidelines
Employee Grievance Resolution (WA Health Policy)
CACH Above the Line, below the line guideline
WA Health Code of Conduct

References
1, 2, WA Health Employee Grievance Resolution Policy
3 Prevent and Responding to Workplace Bullying Policy
The Vancouver style referencing is as per CAHS Library and Information Service.

Useful resources (including related forms)
Public Sector Commission - 4 Step Approach to Investigating Grievances
Public Sector Commission - Considering Grievances Checklist http://www.publicsector.wa.gov.au/document/checklist-considering-grievances
Managing workplace behaviour – A guide for Agencies – Frequently Asked Questions

This document can be made available in alternative formats on request.

File Path:	W:\Safety & Quality\CAHS\Policy\POLICY MANAGEMENT - Area Health Service\CAHS Policy_Word\CAHS.HR.EmployeeGrievanceResolution.docx				
Document Owner:	Executive Director, Organisational Development				
Reviewer / Team:	Workforce Services				
Date First Issued:	August 2017	Last Reviewed:	N/A	Review Date:	August 2020
Approved by:	Corporate Governance Committee			Date:	
Endorsed by:	Executive Director, Organisational Development			Date:	
Standards Applicable:	NSQHS Standards:  NSMHS: 8				
Printed or personally saved electronic copies of this document are considered uncontrolled					