HEALTHGUARD FIRST AID
TRAINING SERVICES

Complaints and Appeals Policy and Procedure

POLICIES AND PROCEDURES

First aid, not pretty aid!

1. PURPOSE

To purpose of this policy is to outline how Healthguard First Aid will collect, process and respond to complaints and appeals relating to training and assessment services, and business services in general.

2. POLICY STATEMENT

Healthguard is committed to providing quality services to our clients and to continuous improvement where actions or outcomes are found to be unsatisfactory. We acknowledge the right of learners and clients to complain when services do not meet the agreed standard. All staff are required to follow this policy and procedure to ensure complaints and appeals are appropriately logged, addressed and resolved in a transparent, just and timely manner.

3. SCOPE OF POLICY

This policy applies to all Healthguard staff and Co-providers who are involved in communication or other activities with our learners and clients, as well as for use by enrolled learners or clients.

4. POLICY PRINCIPLES

1.1 Complaints and Appeals

1. Complaints relate to services provided by Healthguard and behaviour of Healthguard Staff, Co-Providers or other learners.
2. Appeals relate to issues with the assessment process or assessment outcome of a learner undertaking a training course with Healthguard.

1.2 Using a transparent, fair and just process

3. The Healthguard Complaints and Appeals policy and procedure is based upon the principles of natural justice and procedural fairness.
4. The Complaints and Appeals policy and procedure will be freely available via the Healthguard website, as well as in the Student handbook. The handbook and complaint/appeal forms are also available in the main Healthguard Training Room.
5. The Complaints and Appeals form has been designed to be easy to read and complete, to encourage feedback and resolution of any issues.
6. Learners, clients, Healthguard staff and Co-Providers have the right to express a concern and lodge a complaint if they believe services or behaviour of a person do not meet the required standard.
7. All complaints and appeals will be treated seriously and managed promptly, impartially, sensitively and confidentiality. They will be managed on an individual case basis as they arise.
8. The complaint resolution procedure is based on the understanding that no action will be taken without consulting the complainant and respondent, using a process of discussion and conciliation.
9. The complaint resolution procedure emphasizes mediation and education while acknowledging that in some instances formal procedures and disciplinary action may be required.
10. Actions that may be taken include:
    a. Discussing the issue with the complainant and other persons involved
    b. Engaging persons involved in mediation on an informal level as appropriate
    c. Seeking preferred outcomes and actions from persons involved

1.3 Documentation

1. Negative verbal feedback is encouraged by staff to be recorded in the Continuous Improvement register.
2. All formal complaints and appeals are to be recorded on the Complaints and Appeals form and logged in the Continuous Improvement Register.

3. A complaint or appeal received is to be acknowledged in writing by the Healthguard CEO.
4. The investigation, outcome and resolution of the complaint or appeal is to be documented in the Continuous Improvement register, with any other relevant notes recorded on student and staff files.
5. Information documented should include:
    a. The nature of the complaint/appeal
    b. The persons in involved in the compliant/appeal and management of the issue
    c. How the complaint/appeal was managed and the outcome of the process
    d. Timelines for the process
    e. Identified causes of any issues and continuous improvement actions as a result of the complaint/appeal

1.4 Confidentiality

1. Information and documentation relating to complaints or appeals is to be restricted to those Healthguard Staff members who are involved in the management and resolution of the issue.
2. Complaints and appeals remain private and will not affect or bias the progress of a learner/client in any current of future training.

1.5 Timelines

1. Complaints can be received at any point in time.
2. Appeals against assessment should be submitted within 7 days of the learner being notified of the assessment outcome.
3. Complaints should be reviewed and resolved within 28 calendar days.
4. Appeals should be reviewed and outcome provided within 14 calendar days.
5. If the complaint or appeal will take in excess of 60 calendar days to finalise Healthguard will inform the complainant in writing, providing the reasons why more time is required. The complainant will also be provided with regular updates on the progress of the complaint.

1.5 Outcomes

6. The final decision will be made by the Healthguard CEO or independent party to the complaint/appeal.
7. If the complainant is dissatisfied with the process or outcome of their complaint/appeal, this can be reviewed by an independent third party, with the costs of the review advised to the complainant.

5. PROCEDURE

The procedure for managing a complaint or appeal is very similar. This is documented in Annex A of this document.

6. RESPONSIBILITIES

Ensuring compliance with this policy is the responsibility of all Healthguard Staff involved in work with learners and clients.

The CEO is the designated person responsible for complaint and appeal resolution, supported by the Operations Manager and Compliance Officer.

7. MONITORING AND EVALUATION

The Compliance Officer will monitor changes to any requirements by ASQA relating to payment and management of fees and recommend updates to this policy as required. Review of the this policy forms part of the annual self-assessment audit and scheduled audit activities during each year.

The policy is to be reviewed annually to ensure currency with ASQA and business requirements, and to be updated as changes to relevant conditions or Healthguard procedures occur.

The policy must also be reviewed and evaluated following any complaints relating to payment and management of fees.

8. DOCUMENTATION

Document control	
Version and Creation Date	Version 1.3 June 2025
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Review Due Date	• Reviewed June 2025 • June 2026 – to ensure currency – with any redesign as required • As updates occur to relevant legislation
Creation Contact	Kathryn Burke - Compliance Officer
Final Approval	Cheryl Connolly - Owner/CEO

ANNEX A: Complaints and Appeals Process