**Grievance Record**

**Purpose**

The Grievance Record is used to record how each report or complaint received is processed, and to ensure that each step in the procedure is followed. This record can be shared with management, and others concerned with oversight.

If the HRDD committee records the data in these tables, it can report on:

* Whether a grievance is responded to in accordance with procedure
* The age and gender of people who report a grievance
* The type of human rights issues being reported

Note that the use of a reference for the grievance means it is not necessary to share personal information about the person who made the complaint.

See below for the template and a worked example.

**Grievance Record**

Complete this table for each grievance report received.

|  |  |
| --- | --- |
| **Reference** | *[enter reference of grievance report***]** |
| **Person responsible** | *[Enter name of team or committee member responsible*] |
| **Grievance procedure** | **Timeline** | **Date completed (DD-MM-YY)** | **Notes** |
| Complaint is received | 0 hours / day 1 |  |  |
| 1. Receipt of the complaint is acknowledged (unless anonymous) | 96 hours (4 days) |  |  |
| 2. Assess if person is at risk and needs safeguarding  | 96 hours (4 days) |  |  |
| 3. Review the complaint to check it is admissible | 96 hours (4 days) |  |  |
| 4. Record data about the gender, age and human rights issue in the Remediation Plan | Within 4 weeks |  |  |
| 5. Investigate to establish what has happened and verify the complaint | Within 4 weeks |  |  |
| 6. Communicate the findings to the person who made the report | Within 4 weeks |  |  |
| 7. Develop and implement the Remediation Plan (immediate and root cause measures) with consent of the affected person | Within 6 weeks |  |  |
| 8. Record the measures in the Remediation Plan, and monitor progress | 6 weeks |  |  |
| 9. Complete the remediation measures and communicate progress to the person who made the complaint | Within 12 weeks |  |  |
| 10. Complete the longer-term improvement measures to address root causes of the problem | Within 52 weeks |  |  |
| 11. Review data about who uses the grievance mechanism, and issues reported to inform continuous improvement  | Annual |  |  |

**Example**

Below is an example to illustrate how this form can be used.

Users adapt this table and use it in a manner that is relevant to their local situation.

|  |  |
| --- | --- |
| **Reference** | *[A1.01.01.2024***]** |
| **Person responsible** | *[Name*] |
| **Grievance procedure** | **Timeline** | **Date completed (DD-MM-YY)** | **Notes** |
| Complaint is received | 0 hours / day 1 | Jan 1 2024 | [name]  |
| 1. Receipt of the complaint is acknowledged (unless anonymous) | 96 hours (4 days) | Jan 2 2024 | [name] in person with affected person X |
| 2. Assess if person is at risk and needs safeguarding  | 96 hours (4 days) | Jan 2 2024 | [name] confirmed no risk to X |
| 3. Review the complaint to check it is admissible | 96 hours (4 days) | Jan 2 2024 | [name] confirmed |
| 4. Record data about the gender, age and human rights issue in the Remediation Plan | Within 4 weeks | Jan 25 2024 | [name] recorded details |
| 5. Investigate to establish what has happened and verify the complaint | Within 4 weeks | Jan 2-20 2024 | [name] led research and discussed findings with committee |
| 6. Communicate the findings to the person who made the report | Within 4 weeks | Jan 25 2024 | [name] spoke in person to X  |
| 7. Develop and implement the Remediation Plan (immediate and root cause measures) with consent of the affected person | Within 6 weeks | Jan 25 – Feb 7 2024 | [committee] and [ stakeholders] develop plan and discuss with X |
| 8. Record the measures in the Remediation Plan, and monitor progress | 6 weeks | Feb 10 2024 | [name] recorded details |
| 9. Complete the remediation measures and communicate progress to the person who made the complaint | Within 12 weeks | March 1 2024 | [name] confirms immediate measures completedWeekly discussions with X |
| 10. Complete the longer-term improvement measures to address root causes of the problem | Within 52 weeks | June 1 2024October 1 2024 | [name] confirms long-term measures completed in 2 phases Monthly updates with X |
| 11. Review data about who uses the grievance mechanism, and issues reported to inform continuous improvement  | Annual | October 15 2024 | [committee] review case and monitor  |

END