



## THE MANAGEMENT AGENCY

### AMERICAN FOULBROOD NATIONAL PEST MANAGEMENT PLAN

## Policy Document

- Policy Number:** AFB/22/0/11 - 032
- Policy Title:** **Complaints Management**
- Policy Statement:** This complaints management policy establishes procedures for the AFB PMP Management Board to effectively manage and resolve complaints from beekeepers and members of the public.
- Purpose:** The purpose of the AFB PMP complaints handling policy is to:
- Recognise and protect beekeepers rights to comment and complain.
  - Provide an efficient, fair and accessible mechanism for resolving beekeeper complaints.
  - Provide information to beekeepers on the AFB PMP Management Board's complaints handling process.
  - Demonstrate the AFB PMP Management Board's commitment to continual improvement to the quality of service to the New Zealand beekeeping community.
- Commitment:** The AFB PMP Management Board is committed to efficient and effective complaints management involving:
- Use of complaints as an opportunity to improve services.
  - Development and maintenance of an electronic record to manage complaints.
  - The adoption and promotion of this policy.
  - Reporting of complaints and resolutions at Board meetings.
- Fairness:** The AFB PMP Management Board recognises the need to be fair to both the complainant, Board member or employee/contractor against whom the complaint has been made.
- If a beekeeper complains, the AFB PMP Management Board will:
- Treat the complainant with tact, courtesy and fairness at all times.
  - Maintain appropriate confidentiality of the complaint at all times.
- Official Information Act 1993:** The complainant to be aware of this legislation.
- Complaints process:** All complaints will be referred to the National Compliance Manager who will decide how and who will action the complaint. If the complaint is



about the National Compliance Manager, the complaint will be referred to the Board Chair.

**Visibility of the Complaints Process:** The AFB PMP Management Board promotes the existence of the complaints policy and system through:

- A dedicated section on the AFB PMP website that includes a form for completion and submission.

**Access to the Complaints Process:** When a complaint is received the National Compliance Manager will:

- Attempt to resolve the complaint at the first point of contact if possible.
- Acknowledge receipt of the complaint within 5 working days.
- Where a complaint is not fully understood, the National Compliance Manager will telephone the complainant to seek clarity.
- Resolve the complaint within 20 working days of having full information about the complaint.

If the above timeframes cannot be met the National Compliance Manager will contact the complainant explaining the reasons why and providing an indication when.

The AFB PMP Board may at any time after receiving the complaint, decide not to deal with the complaint, or to stop dealing with it because:

- It does not relate to a matter the AFB PMP Management Board has power or control over.
- It is frivolous, vexatious, misconceived or lacking in substance, or,
- Having regard for the circumstances of the case, the inquiries into or the continuance of the inquiries into the matter raised in the complaint, is unnecessary or not justified.

**Effective Date:** 15 September 2022

**Review Date:** 15 September 2025



Mark Dingle  
Chairman AFB PMP Management Board

Date 15 September 2022

**Beekeeper complaints form**

The AFB PMP Management Board takes beekeeper complaints of discrimination, harassment, unethical or unfair conduct as serious matters. So the Board can properly investigate your concern, you are requested to fill in this form as completely as possible. Please use additional sheets of paper if required. After a prompt and thorough investigation into your complaint, you will be notified of the Board's decision.

**Beekeeper name:** \_\_\_\_\_

**Beekeeper registration number:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

Please describe in as much detail as possible the nature of your complaint. Please provide or identify all known persons, and witnesses to your concern. Attach copies of documents and use additional pages if required.

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**Complainant's Signature:** \_\_\_\_\_

**Date form received by Manager:** \_\_\_\_\_

**Result of investigation:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Action taken:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date complainant notified of results:** \_\_\_\_\_

**Manager's signature:** \_\_\_\_\_