

Complaints and Other Feedback Policy

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EMT lead	Anna Headley, Executive Director for Clinical, Quality and Risk
Author(s)	Quality & Compliance Team
Ratified by	Anna Headley, Executive Director for Clinical, Quality and Risk
Signed	Anna Headley, Executive Director for Clinical, Quality and Risk
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Document change log

This document will be reviewed within 12 months or as changes in legislation dictate.

Version no	Date	Document change
New	Oct 24	Updated policy following merger
1	April 25	Timescales and MIS merged
2	April 26	Re-formatted Section 4.4.7 added to comply with new ICO guidance



Contents

Section		Page
1	Definitions	3
2	Scope	4
3	Responsibilities	5
4	Policy & Procedure	7
5	Associated Policies	37
6	Guidance	38
7	References	38

Equality statement

All customers, employees and members of the public should be treated fairly and with respect, regardless of age, disability, gender, marital status, membership or no membership of a trade union, race, religion, domestic circumstances, sexual orientation, ethnic or national origin, social & employment status, HIV status, or gender reassignment.

Trauma informed Principle of Care

This policy is underpinned and informed by SAMHSA's trauma informed principles of care. Safety – ensuring physical and emotional safety, Trust – transparency and a focus on building relationship, Choice – individuals have choice and control, Collaboration – making decisions with the individual and sharing power, Trustworthiness – respectful and professional boundaries are maintained, and Empowerment – providing an atmosphere that allows individuals to feel validated and affirmed with each contact with the service.



1. Definitions

A **Complaint** is an expression of dissatisfaction, however made, about the standard of service, actions, or lack of action by the organisation, our staff, or those acting on our behalf affecting an individual or group of individuals. The person does not have to use the word complaint in order for it to be treated as such.

A **Concern or Service Request** is a request that the organisation provides or improves a service, fixes a problem or reconsiders a decision.

A **Comment** is feedback which is neutral i.e. not an expression of dissatisfaction or a positive statement. This might be an observation or suggestion for improvement where the person making the comment isn't dissatisfied with the current service. Comments can be useful for informing service change and improvement.

A **Compliment** is positive feedback about the service provided and is normally given without wanting to receive a response. Compliments are useful for identifying when things are working particularly well, often highlighting good practice. This can help inform service change and improvement and provide positive feedback to the individuals involved.

Complainant is the person making the complaint. This may be a person who uses our services, third-party making the complaint on behalf of a person who uses our services, a representative of another organisation or a member of the public.

The **Complaint Handler** is the manager responsible for the investigation of the complaint, communication with the Complainant, and taking action to resolve the issues identified

theHub is an internal management information system used by Waythrough services for recording feedback and incidents



2. Scope

The policy and associated guidance apply to all Waythrough workers. This includes Trustees, paid workers (including full and part time workers, temporary or agency workers, contractors, trainees, interns, and freelancers) and unpaid workers, including students and volunteers. They will be referred to as 'the workforce' or 'workers' for the remainder of the policy.

The policy relates to all activities of Waythrough unless agreed partnership or contractual arrangements specify an alternative procedure.



3. Responsibilities

Workforce

- to be familiar with the content of this policy, work in line with its content, and engage in associated training.
- have a responsibility for identifying feedback and recording or passing this on appropriately.

All Management

- are responsible for ensuring that all staff within their remit work within the scope this policy.
- promote an open and transparent culture regarding the identification and management of complaints and other feedback.
- are responsible for ensuring that how to make a complaint is actively and appropriately promoted within their services
- ensure teams members are appropriately trained
- ensure learning from feedback is circulated and embedded at a service level.

Complaint Handlers

- are responsible for the investigation complaints, communication with the Complainant, taking action to resolve the issues identified (where applicable), and recording this on the relevant system.
- will have access to staff at all levels to facilitate the quick resolution of complaints.
- are also responsible for ensuring that their handling of complaints is compliant with this policy, and therefore all regulatory requirements



CQC Registered Managers

- are responsible for ensuring compliance with Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 16: Receiving and Acting on Complaints.

Quality and Compliance Colleagues

- are responsible for providing quarterly reports on complaints and other feedback.
- will annually (as a minimum) complete service inspections to ensure our complaints procedure is accessible, the policy is followed, and learning is used to improve our services.
- a member of the Quality & Compliance Team will liaise with the Housing Ombudsman to ensure compliance.

Director of Clinical Services

- will be notified of all complaints about the conduct of Waythrough clinicians and will advise of all significant concerns raised.

Member Responsible for Complaints (MRC)

- is a member of the Board who is responsible for ensuring the Board receives regular information on complaints that provides insight to the governing body on our complaint handling of complaints made by Residents. The expectations of the Role are defined by the Housing Ombudsman.

Board of Trustees

- will provide high level oversight of complaints and compliance with requirements of Regulators and Ombudsman
- will ratify the Complaints and Other Feedback Policy.



4. Policy & Procedure

4.1 Introduction

Waythrough aims to provide services that fully meet the needs of people who use our services, and stakeholders. Complaints and other feedback are valued as a vital tool for developing and improving our services. We receive a range of different feedback, which we categorise as either a Complaint, Concern / Service Request, Comment or Compliment.

4.1.1 Our positive approach to complaints and other feedback

Waythrough view complaints positively, as an opportunity to put things right if they go wrong and improve our services. We will encourage and support people through the complaints process and ensure complainants are not discriminated against or victimised – the service a person receives will not be negatively affected if they make a complaint, or if somebody complains on their behalf.

Our process for handling complaints and other feedback aims to be fair, proportionate, clear, straightforward, and readily accessible to people who need to follow it. We recognise that people may feel vulnerable when making a complaint and that the circumstances leading up to the complaint may be distressing or frustrating. We will ensure that complainants are treated with respect and empathy.

All staff, volunteers and others acting on the organisation's behalf will:

- take a collaborative and cooperative approach towards resolving complaints, working with colleagues across teams and departments
- act within the professional standards for engaging with complaints as set by any relevant professional body/regulator
- take collective responsibility for any shortfalls identified through complaints, rather than blaming others



4.1.2 Key Points

- All feedback received by Waythrough services will be recorded on the appropriate incident management information system.
- Complaints can be made verbally or in writing, and the word 'Complaint' does not need to be used for it to be treated as such.
- Complaints can be made by anyone who is not a current employee if the issue meets the definition of this policy.
- Complaints will not be refused unless there are valid reasons for doing so. Each complaint will be considered on its merits and reasons for not accepting these will be clearly communicated and documented.
- An appropriate Complaint Handler will be appointed, and they will be responsible for all communications with the complainant, investigating the complaint and ensuring any action needed to resolve the complaint is taken.
- We aim to contact complainants within 3 working days of receiving their feedback.
- We aim to resolve complaints within the following timescales:
 - Complaints received from Waythrough residents – 10 working days
 - Complaints received about all other Waythrough services – 20 working days
- Our Complaint process has only 2 stages. People will be signposted to alternative complaint options if they still are dissatisfied.
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4.1.3 Partnership, Sub-Contracting and Commissioner Arrangements

We work in partnership or as part of sub-contracting arrangements with other organisations. Also, some contractual arrangements require that complaints are notified to commissioners/third parties in the first instance. In these circumstances a local written procedure will be put in place to:

- Avoid any confusion about how complaints will be dealt with and by whom, including the roles and responsibilities of each organisation
- Enable oversight of complaints received and their resolution to ensure that the appropriate process is being followed, and any learning is identified, addressed and shared across the service.
- Ensure that individuals are not required to go through two complaints processes.
- Where we are the lead provider, delivery partners compliance with the agreed complaint process via contract management processes.

4.1.3 Compliance with Regulatory Body and Ombudsman Requirements

We are registered with the following regulatory bodies and ombudsman, and this policy has been cross-referenced with their requirements:

- Charity Commission
- Information Commissioners Office
- Regulator of Social Housing and Housing Ombudsman
 - The Housing Ombudsman's Complaint Handling Code 2024; a self-assessment of our compliance will be published annually and made available to all residents.
- Care Quality Commission for regulated activities associated with the provision of substance use services and mental health services.



- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 16 Receiving and Acting on Complaints
- Fundraising Regulator
 - Code of Fundraising Practice

4.1.4 Promotion of the Complaints and Feedback Policy

The Complaints and Feedback Policy will be published on the Waythrough website. Information about how to provide feedback and make complaints will be promoted to people who use our services, and other stakeholders via:

- handbooks/welcome packs for people who use our services
- posters/leaflets in reception areas
- service newsletters
- social media
- surveys

Our services will ensure that information will be made available in accessible formats and other languages on request.

People making complaints will be informed about relevant Ombudsman schemes that are available to them in line with the requirements of those schemes.



4.2 How we can receive feedback

We want to make it as easy as possible for people to provide feedback about our services and they can do so:

- In person to any member of staff or volunteer – they will pass feedback on to a manager
- By letter
- By telephone
- By email via:
 - info@waythrough.org.uk for Humankind services
 - the service's email address which is published on service specific websites. These will be forwarded on to the relevant service Manager/Director to allocate a complaint handler.
- Through our websites
 - www.waythrough.org.uk
 - or the service's specific website 'Contact Us' form
- Through another person such as a family member, friend, advocate, solicitor or other professional they are working with. We will need to have consent to discuss the complaint with that person.
- Via comments on social media

We will anticipate and remove barriers to accessing the complaints process, rather than waiting for residents to request adjustments

Any member of staff or volunteer receiving a complaint through any method, is responsible for ensuring it is passed promptly to an appropriate manager or Complaint Handler.



4.2.1 Who can make a complaint or raise a concern / service request?

We will accept complaints and concerns / service requests from:

- People who use our services or have used our services in the past; their family, friends, or anyone else making a complaint on their behalf. This could include staff from another organisation, their MP, Councillor, or Advocate.
- Members of the public who have been affected by our services
- Volunteers, including regular, one off and employer supported volunteers
- Dissatisfaction from former employees will be considered on a case-by-case basis in discussion with Human Resources and may fall within the scope of this policy where the complaint doesn't directly relate to that person's employment.
- We will record and investigate anonymous complaints and concerns to the degree that it is possible to do so.

Dissatisfaction from current employees can be addressed via the Grievance Policy and will not be recorded as a complaint.

Feedback passed on to us via Regulators or Ombudsman will be recorded as a complaint, investigated and an update provided in line with the required timescales.

Requests from Regulators or Ombudsman for information about we have dealt with a specific event will be recorded as an incident.



4.3 Identifying and Addressing Concerns / Service Requests

A **Concern / Service Request** is a request that the organisation provides or improves a service, fixes a problem or reconsiders a decision.

We encourage staff to proactively resolve issues at the earliest opportunity, to the person's satisfaction. This can prevent the need for a complaint to be made. All concerns / service requests will be recorded to allow monitoring and review of trends.

Examples of concerns/service requests:

- 'My appointment was cancelled at short notice'
- 'The people who fixed the leak in my home left all their rubbish in the bathroom'
- 'The bins in the testing area smell of urine and need emptying'

Our staff speak to people who use our service every day. We encourage people to discuss any issues they have, as we can often reach a quick and effective resolution to dissatisfaction.

When concerns / service requests are raised, staff will:

- Thank the person for bringing the matter to our attention and ask what they would like to happen to resolve the concern / service request.
- Speak to line management if it seems likely the issue can be handled as a concern / service request and confirm this course of action.
- Attempt to resolve the issue immediately to the person's satisfaction. Where this isn't possible there and then, inform the person when action will be taken, or that the concern / service request will be considered in ongoing review of the service, as appropriate.
- Recorded as a Concern / Service Request
- The process of appeal does not apply to concerns / service requests. If the person is not satisfied with the action taken or our approach to resolving their concern / service request, they will have the opportunity to make a complaint.



4.4 Complaints

4.4.1 Identifying Complaints

A **Complaint** is an expression of dissatisfaction, however made, about the standard of service, actions, or lack of action by the organisation, our staff, or those acting on our behalf affecting an individual or group of individuals.

The person does not need to use the word 'complaint' or submit it in writing for it to be treated as such. We will use the language chosen by the person, or their representative, when they describe the issues, they raise. We will always speak to people to understand the issues they raise and how they would like us to consider them. All complaints will be accepted unless there is a valid reason not to do so.

4.4.2 Reasons that Complaints will not be Accepted

All complaints will be accepted unless there is a valid reason not to do so. In which case, we will provide a clear explanation and either address the issues through a more appropriate process or signpost to alternative complaint routes and provide contact details for Ombudsman where applicable. The following are not considered to be a Complaint, and an alternative policy should be followed. Appendix 1 contains further guidance on categorising feedback.

- Something that happened, or which the individual knew happened more than 12 months ago. This does not include complaints about safeguarding or Health and Safety issues which will always be investigated. We will use discretion to accept complaints made outside of this time limit if there are good reasons to do so.
- Repeat complaints about the same or related issues which have already been fully through the complaint process.
- Complaints that are made without sufficient grounds and are intended to cause upset, annoyance or inconvenience.
- An initial request for a service or change in service where this isn't linked to the standard of service provided. For example, a request for



a female worker rather than a male worker or a request for a repair to a residential property.

- Asking for explanation of a policy or decision: for example, someone asking why visits should be conducted by two members of staff, or why their prescription was changed.
- Reports of anti-social behaviour (ASB) will be dealt with under our Anti-Social Behaviour Policies. However, dissatisfaction with how we have dealt with ASB will be dealt with as a complaint.
- For Legacy Richmond Fellowship services reports from people who use our service about harassment from another people who use our services will be dealt with under the Harassment Policy.
- An appeal against a decision where an appeal process is in place in relation to that decision, for example, the Housing Allocations and Education Assessment processes and accepting referrals to a service which give people a right to appeal and explain how to request one.
- Expressions of dissatisfaction by our staff. These should be raised formally or informally through the organisation's Grievance procedures.
- Legitimate concerns from staff that are classed as 'qualifying disclosures' under the Disclosures in the Public Interest (Whistleblowing) Policy.
- Where other bodies are already investigating aspects of the complaint, for example the police, or local authority safeguarding teams. Our complaint procedure may be suspended until those public bodies have completed their investigations.
- If a claim against the organisation has been filed at court for an issue related to the complaint. This does not include Pre-Action Protocol for Housing Conditions which are not classified legal proceedings. The issues raised should be investigated thoroughly using the Complaints Process as this can usually enable both parties to reach a resolution. If the case reaches legal proceedings, the court will look to see if our complaints process has been followed, and action taken



by the organisation to resolve the issues. If a resident initiates this protocol any existing complaint relating to the issues will continue and where such a complaint has not been recorded, one will be opened.

If a person explicitly states that they wish to make a complaint, but the complaint is not accepted on the above grounds, we will provide a clear and detailed response and details of the relevant Ombudsman (where applicable).

Additional guidance on categorising and dealing with feedback and concerns which do not meet the definition of a complaint or concern, is provided in Appendix 1: Categorising Feedback

4.4.3 Support and Assistance to Complain

We will ensure that reasonable adjustments are made to accommodate an individual's needs. We will ask what reasonable adjustments people need and not make assumptions. Support to complain, could include:

- using their preferred method of contact
- giving more time than usual to provide information or comments
- encouragement to make their views known
- practical support like arranging interpretation or signing services
- complainants may also be represented or accompanied by a suitable person at any meeting with us

We will record reasonable adjustments on the complaint record and keep these under review to ensure they continue to meet the person's needs.

Complaints from third parties acting on behalf of complainants will be accepted with the consent of the complainant, or where the person who uses our services cannot complain unaided and cannot give consent because they lack capacity within the meaning of the Mental Capacity Act 2005.

People will be provided with information about other local and national organisations who can support them to make a complaint. We will make



information about how to raise concerns outside of the organisation available, for example to relevant Ombudsman schemes, service commissioner or CQC where applicable.

4.4.4 Withdrawn Complaints and Disengagement

People may withdraw their complaint at any time. We reserve the right to continue looking into the issues raised if there is an indication of staff misconduct, or where there is an opportunity for learning to be identified. We will respect complainants' wishes if they no longer want to be involved in the investigation or be informed about the outcome.

It is sometimes the case that a Complainant does not engage with the process, beyond providing the initial feedback. We will make reasonable attempts to contact the Complainant and offer support to engage with the process; this should not cause the investigation to exceed our timescales for resolving complaints. If attempts to contact the Complainant are unsuccessful, consideration should be given to investigating the complaint as fully as possible, based on the available information.

4.4.5 Complaints relating to more than one of our Teams or Services

If the complaint relates to more than one of our services or teams, one Complaint Handler should be appointed to investigate all the concerns and act as a single point of contact for the Complainant. The Complaint Handler will liaise with the relevant teams and provide a coordinated response to reduce frustration and confusion for the Complainant. Complaint Handlers will identify as early as possible, if it will be necessary to extend the timescales for complaints which relate to more than one team.

4.4.6 Complaints involving Multiple Organisations

When reviewing complaints which include issues relating to other organisations outside of a partnership, Complaint Handlers should clarify with the complainant, which of the key points our organisation is



responsible for investigating. The complainant should be supported to raise other concerns with the relevant organisation.

4.4.7 Complaints Relating to Data Protection

A data protection complaint is any expression of dissatisfaction about how the organisation has collected, used, shared, stored, retained, or otherwise processed personal data. This may include concerns about delays or dissatisfaction with responses to data subject rights requests, such as requests for access or erasure; concerns arising following a personal data breach; or issues relating to the accuracy or security of personal data held by the organisation.

Individuals may raise a data protection complaint directly with the organisation through a wide range of channels, including by email, by telephone, by post, or in person. Complaints do not need to be submitted using a specific form in order to be valid and will be accepted and considered however they are received.

In line with statutory ICO requirements, the organisation will acknowledge receipt of and investigate and respond to all complaints in line with the timeframes laid out within this policy. The complaint will be investigated and responded to without undue delay, including making appropriate enquiries where necessary. Where an investigation is ongoing, the organisation will keep the complainant informed of progress.

The organisation will maintain appropriate records of all data protection complaints received and how they have been handled. These records support accountability and the organisation understands that they may be requested by the Information Commissioner's Office as part of its regulatory oversight. Staff are trained to recognise data protection complaints and to escalate them promptly to the Information Governance Team or the Data Protection Officer, where applicable.



Waythrough expects to be the first point of contact for data protection complaints prior to individuals contacting the Information Commissioner's Office. If an individual remains dissatisfied after receiving a response, they may contact the Information Commissioner's Office via its website at <https://ico.org.uk> or by telephone on 0303 123 1113.

Feedback and trends arising from data protection complaints are used to improve the organisation's data handling practices, reduce risk, and strengthen compliance with data protection law.

4.4.8 Complaints Relating to Data Protection: Data Controller and Data Processor Accountability

In the case of complaints that have a data protection element (such as an alleged breach or infringement of the data protection act) and where our organisation is the Data Processor; the service must notify the Data Controller organisation of the complaint without undue delay and the outcome of investigation must be updated to the Controller. The outcome letter should also be signed off by the Controller as any negative repercussions could create a high risk for the Controller who is ultimately legally responsible for protecting the data and complying with the Data Protection Act.

4.4.9 Allocating Complaint Handlers

Most complaints can be handled by a manager of a team or Service, however depending on the nature and seriousness of the complaint, it may be investigated by a more senior manager, or a manager from another service.

To prioritise complaint handling, all staff will be suitably trained; have protected time to avoid delays; and consideration will be given to any planned leave any actual or perceived conflict of interest. Complaints will not be handled by any staff member that the complaint relates to. The Complaints and Other Feedback Guidance include guidance for staff on appointing an appropriate complaint handler.



4.4.10 Unreasonable Complainant Actions

Dealing with complaints is generally straightforward, but on occasion, behaviour or actions by the complainant can unreasonably interfere with the investigation and resolution of complaints.

Unreasonable actions are those which, because of the nature or frequency of contact with an organisation, hinder the organisation's delivery of services or consideration of complaints. (Local Government and Social Care Ombudsman, 2024).

4.4.11 Recognising Unreasonable Actions

There is no universal measure for when actions may be classed as unreasonable. The circumstances of each complaint and complainant will be considered when determining if actions are unreasonable.

Anger, disappointment and frustration are understandable, and to some degree, acceptable emotions when people are dissatisfied. We acknowledge that poor experiences with other services in the past and/or dealing with current issues can also impact a complainant's behaviour or communication.

Unreasonable actions can often be prevented through effective complaint handling. Further information for staff can be found in the Complaints and Other Feedback Guidance.

Any behaviour that is aggressive, violent, threatening or abusive; or which involves harassment or the use of offensive or discriminatory language is unacceptable. Where appropriate, these incidents will also be reported to the police. We will always endeavour to complete complaint investigations, while ensuring measures are in place to safeguard our staff, volunteers and people who use our services. In very exceptional circumstances, the nature of unreasonable behaviour may be such that a decision is made to not proceed further with an existing complaint investigation, or to take forward a new complaint.



This decision must be made in agreement with the member of the Group Executive Management responsible for this policy and should only be considered when attempts to positively manage behaviour have been exhausted. In these circumstances the complainant will be advised of the appropriate external body to raise further concerns to.

Complaint Handlers will recognise the potential impact of making a complaint on people and will handle complaints with due regard to this. We will make reasonable adjustments to support people to express their dissatisfaction and to engage with the process and document these. If there is an increased risk to the person or others because of the complaint, we will assess and manage this in line with our policies. It may be necessary to share information with other teams and organisations working with the person to safeguard their welfare and explore other ways in which they can be supported.

The following actions should not by themselves be considered as unreasonable:

- Raising legitimate queries or criticisms of how the complaint is being handled, e.g. if timescales are not met and we have not kept the complainant updated and agreed revised timescales with them
- Seeking to appeal the outcome of a complaint. Our process allows for one appeal of a complaint outcome, and we will provide people with information on alternative complaint resolution options e.g. Ombudsman or Commissioners if they remain dissatisfied with the outcome of an appeal.
- Where the person is being assertive, determined or advocating for themselves.

Examples of action that may be considered unreasonable (this list is not exhaustive):

- Refusing to co-operate with the complaints investigation process while still wishing their complaint to be resolved.
- Refusing to accept when issues are not within our power to investigate, change or influence, for example when something is the responsibility of another organisation.



- Making excessive demands on the time and resources of staff with lengthy phone calls, emails to numerous staff, or detailed correspondence every few days or more often, and expecting immediate responses.
- Submitting repeat complaints with minor additions / variations which the complainant insists make these 'new' complaints.
- Insisting on the complaint being dealt with in ways which are outside of our Complaints and Other Feedback Policy.
- Making unjustified complaints about Complaint Handlers who are trying to deal with the issues and seeking to have them replaced.
- Frequently changing the basis of the complaint as the investigation proceeds.
- Raising many detailed but unimportant questions and insisting they are all answered.

4.4.12 Managing Unreasonable Actions

Complaint Handlers will first ensure that

- Reasonable adjustments for equality, diversity and inclusion have been fully considered and there are no cultural, language, health or disability barriers which still exist that explains the unreasonable behaviour.
- The complaint is being, or has been investigated properly
- Communications with the complainant have been adequate

Complaint Handlers should warn complainants of the consequences of their actions, to allow them the opportunity to reflect on their actions and modify them. Where necessary, Complaint Handlers may take immediate action such as terminating phone calls, asking someone to leave the premises or pausing communication.

We do not usually limit the contact that people have with the organisation, however where a complainant's actions meet the definition of unreasonable actions, we may need to put reasonable restrictions on



contact about the complaint to allow us to properly investigate it and resolve the issues, which could include:

- Restricting contact about the complaint to the named Complaint Handler and ensuring that the person is always directed back to the Complaint Handler if they approach other staff about it.
- Setting limits for the timing and length of phone calls and meetings.
- Limiting communication to written contact only (having regard to agreed reasonable adjustments).
- Drawing up an agreement with the complainant that sets out a code of behaviour.
- Saving correspondence without acknowledgment or reply. The correspondence should still be reviewed to ensure the contents do not contain significant new information or raise any safeguarding concerns.

Restrictions will be specific to the complainant and situation, be proportionate to address the unreasonable actions in each case and have regard to the provisions of the Equality Act 2010. They will be recorded and kept under review and the complainant will be informed of any restrictions in place. Restrictions on contact about the complaint should not impact on a complainant's access to any services they are already receiving. Challenging Behaviour Policies may be followed to deal with unreasonable behaviour from a complainant who uses our services.



4.5 Complaint Handling Procedure

4.5.1 Complaint Handling: Stage 1

4.5.1.1 Acknowledging Complaints

All complaints will be acknowledged in writing, by letter or email, within 3 working days. This letter will include:

- Our understanding of the complaint – we may need to contact the person to gather further details
- The outcome that the person would like
- What will happen next and by when
- The name and contact details of the Complaint Handler

Template letters for acknowledging the receipt of a complaint are available to Complaint Handlers and should be used and adapted as needed to suit the needs of the complaint/complainant.

4.5.1.2 Timescales

We aim to resolve complaints within the following timescales:

- Complaints received from Waythrough residents – 10 working days
- Complaints received about all other Waythrough services – 20 working days

Occasionally, it will not be possible to meet those timescales, for example, if the complaint relates to more than one team or is complex and requires a longer investigation. Where this is the case, we will explain to the complainant and agree a revised timescale for keeping them updated. Any extension should not exceed 10 working days and should not delay actions to put things right.

Complaint Handlers will identify complex complaints as early as possible to prevent unnecessary delays. They will consider any vulnerability of the



person and associated risks when agreeing a revised timescale with the complainant. Actions to mitigate any immediate risks will be considered.

In the case of revised timescales for complaints from Housing residents, contact details for the Housing Ombudsman will always be provided.

4.5.1.3 Responsibility

The Complaint Handler is responsible for the investigation of the complaint, communication with the Complainant, and taking action to resolve the issues identified (where applicable). The Complaint Handler will be a manager, who has completed training and has sufficient authority to put any issues right, should the complaint be upheld. This will usually be the manager of the team or service that the complaint relates to but may be another manager if they are better suited or able to handle the complaint.

Complaint handlers will:

- deal with complaints on their merits
- act independently and have an open mind
- take measures to address any actual or perceived conflict of interest
- consider all information and evidence carefully
- keep the complaint confidential as far as possible, with information only disclosed if necessary to properly investigate the matter
- record the investigation, outcome and all correspondence with the complainant on the relevant recording system.
- consider the complaint in relation to relevant organisational policy, regulations, published guidance, and occupancy agreement.



4.5.1.4 Investigation

The goal of investigation is to establish the facts and decide whether the service provided has fallen below the level that could be reasonably expected. The complaint handler should seek to establish:

- What happened
- What should have happened
- The cause of any identified failings
- What can be done to put right any failings – where possible we will do this when they are identified, without the need to wait for the outcome of the complaint.

The investigation will include:

- Speaking with the complainant to ensure that we:
 - fully understand the issues raised and the outcome they would like
 - identify if the person needs reasonable adjustments/additional support through the complaint process
 - agree how and when we will keep them updated
 - explain what happens next and what evidence we plan to review
- Speaking to witnesses or others who could help establish the facts, including staff
- Review other information, such as written information, case records or CCTV footage.

Additional complaints raised by the complainant during the investigation will be incorporated into the investigation if they are relevant and the outcome to the investigation has not been issued. Where the outcome of the investigation has been issued, or it would unreasonably delay the response, the complaint will be logged as a new complaint. This will be very clearly communicated to the complainant.



4.5.1.5 Complaints Relating to the Conduct of a Staff Member

Our communication with complainants will not usually identify individual members of staff or volunteers.

Most complaints about the conduct of a staff member can be investigated and resolved using the complaints process. If a complaint includes indicators of behaviour which meets the organisation's definition of Gross Misconduct, Complaint Handlers will consult with Human Resources.

In exceptional circumstances, it may be necessary to extend the timescales for the complaint to allow for a disciplinary investigation to take place. The complainant handler will keep the complainant informed of any extensions to the complaint timescales.

Further information about complaints relating to staff conduct can be found in the staff guidance.

4.5.1.6 Support to Staff Members Who the Complaint Relates to

Regardless of whether the disciplinary process is followed, we recognise the impact on staff of being named in a complaint. Line managers should ensure that staff are supported and engaged in the complaints process, including the learning that can be gained. Staff should be signposted to internal staff support networks and employee assist programmes where appropriate.

4.5.1.7 Deciding the Complaint Outcome (Stage 1)

The conclusion reached must be based on objective review of evidence. An outcome for each of the key points should be determined, which will inform the overall outcome of the complaint. Following investigation, a complaint may be found to be Upheld, Partially Upheld or not Upheld.

- A Complaint is **upheld** when it is concluded that the service provided which led to the complaint fell below the standard that could be reasonably expected, in relation to all points of the complaint
- A Complaint is **partially upheld** when it is concluded that the service provided that led to the complaint fell below the standard that could



reasonably be expected, in relation to some points of the complaint but not others.

- A Complaint is **not upheld** when it is concluded that the service provided did not fall below the standard that could reasonably be expected in relation to all points of the complaint.

4.5.1.8 Communication to the Complainant

We aim to speak to the complainant in person or over by phone/online meeting in the first instance. This is to give the complaint handler the opportunity to answer any questions the complainant may have or give clarity if needed. This should help reduce the likelihood of the complainant being dissatisfied with the outcome of the complaint.

The decision/outcome will then be confirmed in writing to the complainant. Template letters for confirming the receipt of a complaint will be used and amended to suit the needs of the complaint/complainant.

All contact with the complainant will be recorded on the relevant information management system, and correspondence uploaded as attachments.

When communicating the outcome, Complaint Handlers will:

- Confirm that the issues were investigated under our complaint process
- Address all the points raised, and explain whether the service provided fell below the standard that could be reasonably expected
 - What happened, with reference to the evidence
 - What should have happened, quoting relevant regulations, standards, policies, published guidance, relevant legal obligations and if they were met.
 - If there is a difference between what happened and what should have happened, explain what this is and the impact it has had.



- Explain the overall outcome of the complaint and the reason for this
- Provide a suitable apology
- Describe the offered remedy, including:
 - action that has already been taken
 - details of any outstanding actions and when they will be completed
 - explanations of what lessons have been learnt, and offer to involve the person in the changes that take place as a result of their complaint
 - information about how they can escalate the matter to the Appeal Stage of the complaints process if they are not satisfied with the response
 - details of the relevant ombudsman, where applicable. A list of Ombudsman and their contact details is contained in Appendix 3.



4.6 Appeal Handling: Stage 2

If the complainant is unhappy with all or part of the response to their complaint, we will progress their complaint to the Appeal Stage. Complaints can only be appealed once; this is the final stage of our Complaint Process before the complaint is closed.

We will allocate an Appeal Handler to review of the adequacy of the initial response, as well as any new and relevant information not previously considered. The appeal stage is not a more thorough, detailed investigation of the complaint. The person does not need to give a reason for appealing the outcome, but Appeal Handlers are expected to make reasonable efforts to understand why the person remains unhappy with the initial outcome.

We will always accept an appeal request, unless there is a valid reason not to do so which will be communicated to the complainant and recorded on the complaint record on the relevant recording system.

4.6.1 Timescales

The complainant can appeal the outcome of a complaint within 10 working days of receiving notification of the decision.

All appeal requests will be acknowledged in writing, by letter or email, within 3 working days. This letter will include:

- Our understanding of why the person remains dissatisfied with the complaint outcome – we may need to contact the person to gather further details
- The outcome that the person would like
- What will happen next and by when
- The name and contact details of the Appeal Handler

The appeals process, and communication to the complainant will be completed within 10 working days. If these timescales cannot be met due to the complexity of the complaint, the Appeal Handler will explain to the complainant and agree a revised timescale for keeping them updated.



Any extension should not exceed 10 working days and should not delay actions to put things right.

Where extensions are agreed with Housing residents, we will also provide contact details for the Housing Ombudsman.

4.6.2 Responsibility

An Appeal Handler should be appointed as soon as an appeal is requested. The Appeal Handler will be a manager more senior than the Complaint Handler and have the authority to resolve the issues highlighted within the complaint and appeal.

The Appeal Handler is responsible for investigating the appeal, communicating the outcome, and putting in place actions to resolve the issues identified, where appropriate.

4.6.3 Communicating the Appeal Outcome

The Appeal Handler's response will include:

- the complaint stage and that this is the final response from the organisation about the complaint
- all points of the complaint
- what happened, with reference to the evidence
- what should have happened, quoting relevant regulations, standards, policies published guidance, or legal obligations and if they were met
- the appeal decision and a clear explanation for the decision
- the details of any remedy offered to put things right
- details of any outstanding actions
- details of alternative complaint pathways eg relevant Ombudsman schemes



Our residents will always be provided with details of how to escalate the matter to the Housing Ombudsman Service if the individual remains dissatisfied.

A template letter for the outcome of an appeal should be used and adapted to suit the needs of the complaint appeal and complainant.



4.7 Redress (Putting things right)

Redress can take a number of forms. We will always consider the complainant's wishes and try to meet these where possible or, where this is not appropriate, providing a full explanation of our position.

There are limits to our ability to provide certain remedies, and complainant's wishes may not always be reasonable. Any failings should be acknowledged and remedied quickly and fairly and in a way that best reflects the extent of the problems encountered by the complainant. This can be arranged at any stage of the process and does not need to wait until the complaint has been closed. Appropriate redress should include an apology, an explanation and correcting the error.

Generally, where service failings have been identified which have disadvantaged the person, attempts should be made to put the complainant back in the position they were in before the error occurred.

Our management teams will look to improve procedures or systems or deliver further staff training to address service failures highlighted by the complaint where this is appropriate. The complainant will be told about action taken but not details that affect individual staff members.

Any further actions that need to be completed after the person has been informed of the outcome will continue to be tracked, actioned promptly and updates provided to the person.

4.7.1 Putting Things Right for Complaints from Residents

When considering redress for complaints from our residents, the guidance issued by the Housing Ombudsman should be referred to in addition to the relevant Compensation Policy.



4.8 Comments and Compliments

Comments are neutral feedback, i.e. neither positive nor negative. This might be an observation or suggestion for improvement where the person making the comment isn't dissatisfied with the current service. Comments can be useful for informing service change and improvement.

Compliments are positive feedback about the service received. Compliments are useful for identifying when things are working particularly well, often highlighting good practice. This can help inform service change and improvement and provide positive feedback to the individuals involved.

4.8.1 Responsibility

Comments and Compliments can be handled by the person receiving the feedback

4.8.2 Recording

They should be recorded on the incident management information system.

4.8.3 Review

Comments and compliments should be reviewed regularly by management to enable trends and learning to be identified.



4.9 Promoting a Learning Culture

4.9.1 Training

All employees and volunteers will complete training in identifying and responding to complaints, concerns and other feedback in line with the requirements of their role.

All managers will complete complaint handling training before they act as a Complaint Handler.

4.9.2 Recording

Complaints, Concerns / Service Requests, Comments and Compliments will be recorded on the relevant recording system. This allows us to:

- report on the number and type of feedback being received
- identify trends
- drive improvement in service delivery

Recording will be in line with the GDPR 2018 and our Data Management and Information Governance Policies.

4.9.3 Governance, Monitoring and Review

Complaints, Concerns / Service Requests, Comments and Compliments will be monitored and reviewed through our governance meetings and reporting structures.

We will:

- prepare quarterly reports on the number and type of complaints, outcomes, trends and learning, and any complaints we have refused to accept.
- monitor compliance with this policy through regular service inspections



- review records of reasonable adjustments and restrictions used at least annually
- liaise with relevant Ombudsman to ensure compliance with the requirements of their schemes
- publish an annual report and self-assessment against the Housing Ombudsman's Complaints Handling Code including a response from our Board and any reports or publications around non-compliance from the Ombudsman will be included. Our self-assessment will be updated following any significant changes or at the request of the Ombudsman.

Reports will be shared with our Boards of Trustees as part of our assurance and risk management processes.

Each service will review complaints and other feedback quarterly within integrated governance or management meetings where applicable. This review should include consideration of trends and learning.

Complaint volumes and trends will be interpreted in context and alongside other indicators. An increase in complaints may indicate that residents feel confident to raise concerns, while low volumes may signal barriers to access

Changes made as a result of feedback will be promoted to people who use our services and other stakeholders, including within newsletters, information within reception areas, websites, groups, panels and councils of people who use our services.

We will provide service commissioners and regulatory bodies with appropriate information in relation to complaints received, in line with the requirements of that body. In relation to the CQC, we will provide within 28 days of request a summary of complaints received, our response, correspondence and other relevant information.

Where we are unable to comply with the Housing Ombudsman's Complaint Handling Code due to exceptional circumstances (such as a cyber incident), we will inform the Housing Ombudsman, communicate



this to affected residents, publish the information on our website, and set out a clear timescale for returning to compliance

5 Associated Policy

This policy should be read in conjunction with the following policies:

- Equality & Diversity Policy
- Safeguarding Adults Policy
- Child Protection Policy
- Data Protection Policy
- Duty of Candour Policy

5.1 Equality and Diversity

- We positively promote Equality and Diversity, delivering our services in line with the Equality Act 2010. Should complaints or concerns / service requests indicate potential discrimination in relation to an individual's protected characteristics, or other issue which suggests failure to meet the requirements of the Act, these will be handled formally in line with our Equality and Diversity policies and with due regard to the Equality Act 2010.

5.2 Safeguarding

- We work to effectively safeguard both adults and children. Should a complaint indicate potential failings in relation to the organisations' safeguarding responsibilities, including allegations of abuse, these allegations will be handled formally and in line with organisational safeguarding policies and procedures. We will involve relevant external bodies as appropriate, including the Local Authority Designated Officer (LADO), PIPOT, CQC and the Police.

5.3 Data Protection

- We will handle complaints and other feedback in line with the General Data Protection Regulations (GDPR) 2016, and our organisational Information Governance requirements including in relation to consent, confidentiality and the appropriate recording, management and sharing of information.



We will notify the Information Commissioner's Office (ICO) should a breach meeting the threshold for notification occur.

5.4 Duty of Candour

- We will act in accordance with Regulation 20: Duty of Candour in respect of complaints about care and treatment that have resulted in a notifiable safety incident within our group CQC registered delivery.

6 Guidance

The following guidance should be consulted:

- Guidance: Duty of Candour

7 References

This policy is informed by the following legislation and guidance:

- Care Quality Commission – Regulation 20: Duty of Candour, Information for all providers: NHS bodies, adult social care, primary medical and dental care, and independent healthcare. (March 2015)
- Being Open, National Service user Safety Agency, November 2009 <http://www.nrls.npsa.nhs.uk/resources/collections/being-open/>
- Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2015
- The Mid Staffordshire NHS Foundation Trust Public Inquiry: final report available at www.midstaffpublicinquiry.com/report
- Seven Steps to Service user Safety, National Health Service Litigation Authority (NHSLA, 2004)
- NHS Standard Contract 2013–14.



