
Complaints, comments and suggestions Policy and procedure

Document reference Housing + Support 07

Approved by Chief Executive

Contents

1	Policy statement.....	1
2	Scope.....	1
3	Principles	2
4	Definitions	2
5	How to make a complaint, comment or suggestion	2
6	Stage one complaint	3
7	Reviews	4
8	Stage two complaint.....	5
9	Outcome letters.....	5
10	External appeals	6
11	Mediation	6
12	Recording complaints	6
13	Exceeding timescales	7
14	Guidance for staff on handling complaints.....	7
15	Communication with third parties.....	7
16	Advocates	8
17	Overcoming barriers to complaining	8
18	Complaints about individual members of staff	8
19	Vexatious or unreasonable complaints	9
20	Staff training.....	9
21	Monitoring complaints and organisational learning.....	9
22	Diversity impact assessment	9
23	Relevant documents	10

1 Policy statement

1.1 Evolve Housing + Support is committed to ensuring that complaints are handled fairly, recorded appropriately and that any issues are rectified. The organisation actively welcomes feedback, including comments and suggestions, and will always seek to make improvements to services based on the feedback received. Complaints are viewed by all staff as a means of service improvement.

2 Scope

2.1 This procedure covers the handling of complaints, comments and suggestions received from;

- › A customer;
- › An advocate, friend or family member of a customer;
- › Any third party (e.g. neighbours of services);

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2.2 This procedure does not cover complaints made by staff about other staff; please refer to the Grievance Procedure.

2.3 Should a complaint concern the discrimination, harassment or bullying of customers or raise a safeguarding issue please refer to the following procedures;

- › Childrens Safeguarding Policy and Procedure
- › Adults Safeguarding Policy and Procedure

3 Principles

3.1 Complaints are welcomed as an opportunity to resolve dissatisfaction and to improve our services. All staff will:

- › Ensure customers know how they can make complaints and that our neighbours and stakeholders are aware of ways to contact us easily.
- › Encourage our customers to complain if they are not happy with any aspect of the service, to welcome this feedback and to make improvements where necessary.
- › Take verbal complaints as seriously as written ones.
- › Not treat complainants less favourably than people who have not complained.
- › Look to resolve a complaint in the most efficient way and provide excellent customer service. This may occasionally involve deviating from this procedure, although any such deviation must be agreed with the Quality Manager.

4 Definitions

4.1 A complaint: An expression of dissatisfaction about the service or treatment a person is receiving. A request for action is not a complaint.

4.2 There are two stages to the complaints procedure:

- › Stage 1: Investigated and responded to locally by staff in services.
- › Stage 2: Investigated by someone outside the line management of the service and responded to by a director.

5 How to make a complaint, comment or suggestion

5.1 A complaint, comment or suggestion can be raised locally in the service in a variety of ways. These include:

- › Verbally to a member of staff
- › By completing a Feedback Form
- › In writing either via a letter or email

5.2 Team Managers are responsible for ensuring that their service has a feedback box in which customers can place completed Feedback Forms and that this box is opened daily.

Version: **1.0**
Date issued: **04-Jan-16**
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- 5.3 If the complainant does not feel comfortable making a complaint locally to the service concerned they can do so by contacting the Quality Team:
- › In writing to Quality Team, Evolve Housing + Support, Marco Polo House, 3-5 Lansdowne Road, Croydon, CR9 1LL
 - › By calling 0207 101 9960
 - › Via email to complaints@evolvehousing.org.uk
- 5.4 Complainants can not be seen at Head Office. Any complainant coming to Head Office will be directed to the service the complaint relates to or asked to contact the Quality Team using one of the methods above.
- 5.5 Complaints received centrally will be passed to the most appropriate person to investigate and respond.
- 5.6 Submitting a complaint centrally will not speed up the process and the complaint may be sent back to the service for a local manager to investigate.
- 5.7 Complaints can only be made about issues that have arisen in the previous 6 months.
- 5.8 All service staff are responsible for ensuring customers, neighbours and stakeholders are aware of how to make a complaint. This includes:
- › Distribution of complaints leaflets, including to every customer taking up the service.
 - › Publication of posters throughout the service.

6 Stage one complaint

- 6.1 A complaint will first be investigated at stage one of the complaints procedure. There may be exceptional circumstances where a complaint will proceed straight to stage two, such as if the complaint involves a member of CMT, or if the complaint is particularly serious in nature.
- 6.2 All complaints, however they are received, must be recorded on InForm (see section 12).
- 6.3 All staff in services are expected to take responsibility for receiving and recording complaints. The following members of staff within a service would normally be expected to investigate and respond to complaints at stage one:
- › Any customer facing member of staff;
 - › Team Leader;
 - › Team Manager;
- 6.4 In certain circumstances, such as if a complaint relates to a Team Manager, members of SMT or CMT may also investigate and respond at stage one.
- 6.5 Where it is possible to do so, staff should investigate and respond to a complaint immediately, and record the details on InForm, including any action taken. If a complaint can not be responded to immediately then follow points 6.6 to 6.10
- 6.6 On receipt of a complaint, the staff member allocated responsibility for investigating it should send a letter to the complainant acknowledging

receipt, and informing them who is dealing with their complaint. This should include an invitation to meet, how they can be contacted, and a timescale for when they will receive a written response. This should be done within 3 working days from when the complaint was made. (see acknowledgement letter checklist)

- 6.7 Wherever possible, all investigations should include a face to face meeting with the complainant to ascertain what their complaint is, why they are making a complaint and what outcome they wish to see. If a successful outcome can be reached through mediation, this should be done and the complaint withdrawn (see section 11).
- 6.8 Any investigation should be carried out within 10 working days from the date that the complaint was received.
- 6.9 Once the investigation is complete, a letter detailing the outcome of the investigation and any action taken as a result should be given to the complainant by the end of the 10 working days period (see outcome letter checklist).
- 6.10 If further time is required, the complainant should be contacted before the end of the 10 working day period with an update on progress, and a revised date for completion. A further deadline must be set, that is realistic and achievable.

7 Reviews

- 7.1 If the complainant is not satisfied with the outcome of Stage 1 of the procedure, or feels that the procedure has not been followed, the next stage is to ask for a review of the decision.
- 7.2 Complainants can request a review when:
 - › Any aspect of their complaint has not been upheld
 - › They are not satisfied with the method of redress (e.g. the action taken in response to a complaint)
- 7.3 Where a complaint has been investigated by a non-management member of staff, the complainant can first ask the Team Leader or Team Manager to review the response
- 7.4 All further requests for a review should be sent to the Quality Team. Requests do not need to be made in writing and verbal requests are acceptable, as are those via e-mail or telephone, advocates or others.
- 7.5 Requests for review must be received within 14 working days of the date of the complaint response. Any requests received outside of this timescale will only be considered under exceptional circumstances.
- 7.6 The Quality Team will review all requests received and check that nothing has been missed in the response. In certain situations the Quality Manager may ask that the investigation and response be reviewed at stage one, by either the original investigator or someone else, before escalating the complaint to the next stage.
- 7.7 The complaint will then proceed to stage two if:

Version: 1.0
Date issued: 04-Jan-16
Next review: 08-Jun-18
Max. time b/w reviews: 3 yrs

- › The investigation failed consider all of the reasonably available evidence; or
- › The response was not consistent with the reasonably available evidence

7.8 The Quality Manager will decide if a complaint is eligible to proceed to stage two, using the above test, in consultation with the relevant director.

8 Stage two complaint

- 8.1 If the complaint is deemed eligible to proceed to the next stage then the Quality Manager will allocate an appropriate member of staff to investigate the complaint.
- 8.2 Stage two complaints are investigated by team managers, team leaders, or a member of SMT and responded to by a director.
- 8.3 The staff member allocated responsibility for investigating the complaint should send a letter to the complainant acknowledging receipt, and informing them who is dealing with their appeal, an invitation to meet, how they can be contacted, and when they will receive a written response. This should be done within 5 working days from when the appeal was made.
- 8.4 All investigations should include a face to face meeting with the complainant to ascertain what their complaint is, why they are making a complaint and what outcome they wish to see. If a successful outcome can be reached through mediation, this should be done and the complaint withdrawn (see section 11).
- 8.5 Any investigation should be carried out and completed within 15 working days from the date that the appeal was received.
- 8.6 The Quality Manager is available to support the investigating manager throughout the process.
- 8.7 Once the investigation is complete the investigating manager should discuss their findings with the appropriate director. A letter detailing the outcome of the investigation and any action taken as a result should be sent to the complainant by the director within 5 working days of the conclusion of the investigation.
- 8.8 This letter must inform the customer of the fact that this concludes the internal stage of the complaints procedure and include details of who to contact (see section 10)
- 8.9 If the customer wishes to complain externally the organisation's staff should assist and advise them on pursuing this line of redress.
- 8.10 A list of recommendations, where relevant, should be produced by the stage two investigating manager. The Quality Manager may meet with the relevant team manager to develop an action plan to an agreed timescale following any recommendations.

9 Outcome letters

- 9.1 At each stage of the process an outcome letter should be given to the complainant, detailing the findings. Wherever possible, this must be in person

Version: **1.0**
Date issued: **04-Jan-16**
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- 9.2 The letter should detail what decision has been reached, how and why that decision was made, what action will be taken if the complaint was upheld and the further actions available if the complainant is not satisfied. (See outcome letter checklist)

10 External appeals

- 10.1 If a complaint has not been resolved at the end of our internal complaints procedure our customers can either:
- › Refer the matter to a designated person OR
 - › Wait 8 weeks and refer the matter directly to the Housing Ombudsman.
- 10.1.1 Our customers are able to ask for their complaints to be considered by a 'designated person' when our internal complaints procedure is finished.
- 10.1.2 A designated person can be an MP, a local Councillor, or a Tenant Panel.
- 10.1.3 A designated person will help resolve the complaint in one of two ways; they can try and resolve the complaint themselves or they can refer the complaint straight to the Ombudsman.
- 10.1.4 The designated person can try to put things right in which ever way they think may work best. If the problem is still not resolved following the intervention of the designated person either they or our customer can refer the complaint to the Ombudsman.
- 10.1.5 See <http://www.housing-ombudsman.org.uk/directory/designated-persons/> for further details
- 10.2 If someone other than one of our customers has exhausted our internal complaints process, their external method of appeal will be via the commissioning authority. Contact the Quality Manager if these details are required.

11 Mediation

- 11.1 In some circumstances the use of mediation may be identified as a useful means of trying to resolve a complaint. In this case, agreement from all parties concerned must be gained before bringing in a mediator.
- 11.2 In most cases mediation will be an informal process involving a neutral third party. This could be a member of staff from another service or from Head Office.

12 Recording complaints

- 12.1 All staff are responsible for keeping appropriate records of all aspects of a complaint, including ongoing communication with complainants or advocates.
- 12.2 InForm must be used to record details of all complaints, whether received in writing or verbally. Please refer to the InForm guidance document for full details.
- 12.3 Where available, completed complaints forms or written responses to complaints must be uploaded alongside the relevant record.

Version: 1.0
Date issued: 04-Jan-16
Next review: 08-Jun-18
Max. time b/w reviews: 3 yrs

- 12.4 If the complaint contains sensitive information, such as a serious allegation against a member of staff, only the basic details of the complaint should be recorded on InForm. If a complaints form or written response contains sensitive information they should not be uploaded to InForm. The record should direct the reader to the location of these e.g. held by manager.
- 12.5 Any staff that are unsure of what can and can't be recorded on InForm should speak to their line manager or contact the Quality Manager.

13 Exceeding timescales

- 13.1 If further time is required, the complainant should be contacted within the investigation timescale and provided with an update on progress, and offered a revised date for completion.
- 13.2 Where a complainant fails to participate or respond to requests to participate the investigating manager can stop the clock.
- 13.3 If the complainant fails to respond after 10 working days the complaint should still be investigated with the information available and a response provided where possible.

14 Guidance for staff on handling complaints

- 14.1 All staff should view complaints as a positive opportunity to learn more about what our customers want from us and as an opportunity for service improvement.
- 14.2 When investigating and responding to complaints, staff should make every effort to meet with the complainant during the course of any investigation.
- 14.3 Any staff member investigating a complaint should take a problem-solving approach and not be defensive. The primary purpose will be to find a satisfactory resolution and to learn and take positive action in relation to the organisation's policies and procedures.
- 14.4 When a local neighbour makes a complaint team managers or team leaders must:
- › Contact the neighbour and offer to meet with them.
 - › Provide reasonable contact details, such as a 24hr project number or a direct work email address to the manager.

15 Communication with third parties

- 15.1 Where a complaint is made on behalf of or about a customer (e.g. by family, friend or advocate), signed consent must be obtained from the customer before any information can be disclosed (use Permission to share personal data template)
- 15.2 In the case of MPs, sensitive personal information can be disclosed where it is necessary to help with their functions and without having to obtain the explicit consent of the individual concerned.
- 15.3 The Quality Manager should be contacted if staff have any questions about what information can be shared.

- 15.4 Disclosure of information without consent is a breach of the Data Protection Act and may result in disciplinary action.

16 Advocates

- 16.1 This procedure allows for complaints to be registered by a relative, friend, or other individuals on behalf of a customer. Such complaints will be treated in the same way as those made by customers themselves.
- 16.2 Staff must remember to seek consent before disclosing any information (see above)
- 16.3 If an advocate/representative pursues a complaint in an unreasonable manner, we may refuse to deal with them and may ask the customer to pursue the complaint themselves or seek another advocate/representative.
- 16.4 Staff cannot advocate for customers with complaints against the organisation. Staff should guide customers through the complaints procedure and can assist them to make their complaint (e.g. by writing it down), but cannot complain on their behalf as this would create a conflict of interest.
- 16.5 Where an advocate is sought by a customer, staff should direct them to the Citizens Advice Bureau or a local advocacy service, and this information should be made available within each service.

17 Overcoming barriers to complaining

- 17.1 There are many reasons why customers will not complain, including fear of recrimination, not knowing how to complain or how the complaint will be handled, and feeling that if most of the service is good, one shouldn't complain about that part which isn't so good.
- 17.2 Staff should therefore be conscious of creating a culture where customers do feel able to complain, and should provide reassurance and guidance to customers to enable them to feel more confident about complaining.
- 17.3 By having a procedure for complaints, comments & suggestions, customers have the opportunity to register their suggestions as well as their complaints, for example if their complaint relates to only one aspect of an otherwise good service.

18 Complaints about individual members of staff

- 18.1 If a complaint is made about the service provided by an individual member of staff which is found to be legitimate following investigation, the line manager will work with that member of staff to ensure that the service is either revised or, if appropriate, that the area of their work which has been complained about is brought up to an agreed standard.
- 18.2 The situation will be used as an opportunity to learn and improve. This may involve coaching or training, and the co-operation of the staff member will be essential.

- 18.3 If a complaint investigation raises a concern over the conduct or capability on the part of a member of staff, further investigation will take place under the disciplinary or capability procedures.

19 Vexatious or unreasonable complaints

- 19.1 We may refuse to consider a complaint, or may deal with it in a different way from that detailed in this policy and procedure, where it is more appropriately considered by another organisation, is vexatious in its nature, is pursued unreasonably, or where circumstances otherwise merit it.
- 19.2 Where a complaint is deemed to be vexatious or is being pursued unreasonably staff should make local arrangements to effectively manage the complaint. This can include requiring the complainant to correspond only in writing (if able), and to a specified person at a specific time each week.
- 19.3 These boundaries should be clearly communicated to the complainant and consistently enforced. They should strike a balance between investigating and responding to complaints whilst limiting the impact that they have on service delivery.
- 19.4 The Area Manager should always be informed of any vexatious or unreasonable complaints at the earliest opportunity.

20 Staff training

- 20.1 Line managers are responsible for ensuring their staff receive an introduction to the role and purpose of this procedure.
- 20.2 All service facing staff will receive complaints handling training.
- 20.3 All staff should undertake the Dispute Resolution e-training available on the Housing Ombudsman Services' website at <http://www.housing-ombudsman.org.uk/home/>.
- 20.4 Training will be provided to all managers and team leaders, and other staff where appropriate, in carrying out complaints investigations

21 Monitoring complaints and organisational learning

- 21.1 Services should review complaints quarterly to identify themes and issues and to consider any changes or improvements that can be made in response.
- 21.2 Complaints will be monitored on a quarterly basis by CMT and the Customer Scrutiny Panel, and an annual assessment of complaints made to the customers and Board annually.
- 21.3 The organisation will review complaints annually to also test the effectiveness of this procedure, and to identify learning points to be addressed as part of the Corporate and Team planning process.

22 Diversity impact assessment

- 22.1 Evolve recognises that within society certain groups are unfairly discriminated against and as a result are disadvantaged in terms of their access to services. We are committed to taking positive action where necessary to help redress the effects of this discrimination.

Version: **1.0**
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- 22.2 Complaints will be monitored annually by the demographics of the complainant to ensure fair and equal treatment. Staff are trained to assist customers with literacy or other needs in making complaints. Safeguards such as a centralised number are in place to ensure that complainants always have somewhere to go.
- 22.3 We will operate an open and accountable Complaints Procedure to ensure all complainants receive a fair and impartial consideration of the complaint and a fully investigated response in an agreed period of time.
- 22.4 We will operate a clear, simple and widely publicised procedure, which suits customers, with guidance on how to complain.
- 22.5 We will promote a positive culture about complaints to ensure that staff understand both policy and procedure, are trained and supported, and that front-line staff, where appropriate, are able to resolve matters directly and speedily to the satisfaction of the complainant. Training will incorporate a sense of shared responsibility for service delivery across all disciplines.
- 22.6 We will accept complaints verbally, either in person at a service or by telephone, or in writing by letter or on the standard form, or in any other reasonable format which meets complainants' needs (e.g. audiotape).

23 Relevant documents

- › Feedback Form and Policy Summary
- › Complaint Process Flowchart
- › Complaint Acknowledgement Letter Checklist
- › Complaint Outcome Letter Checklist
- › Permission to Share Personal Data
- › InForm Guidance – Complaints

This procedure was developed in consultation with:

1. The Customer Scrutiny Panel completed a report into complaints within Evolve in July 2014. This contained a number of recommendations, which have been incorporated into this procedure.
 2. Staff members (including service staff and managers, area managers, directors and HR)
 3. The Housing Ombudsman and The Local Government Ombudsman.
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