

Complaints and Comments ~ Policy and Procedure

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Records of Review and Amendments made:

Date of Review:	Changes:
	V2 Added Appendix One & Appendix Two
06.03.2013	V3 None
	V4 Addition of management to deal with client complaints
Nov 2018	V5 change of job role names. Changes to logging complaints on Oasis Extension of client complaint outcome form



Dec 2020	V6 Dealing with complaints: timeline to respond amended. All complaints to be recorded not just formal. Complaints relating to Under 18-year-olds or safeguarding concerns to be referred to safeguarding lead. Stages of complaints revised.
Nov 2023	V7 Definition of complaints inserted. Distinction made between formal and informal complaints; Time frame for investigating complaints amended. Complaints appeal process amended. Third party appeal amended

Ratification and Review

This policy has been ratified for implementation by the Board of Trustees. It will be reviewed on a regular basis to ensure that it continues to comply with WAL's legal and other obligations and meets the needs of The Organisation.

PART ONE - POLICY

- 1.1 WAIL is committed to achieving the highest standards in all its activities but acknowledges that from time-to-time things may go wrong or users of the service may be dissatisfied and that any agency or individual using or agency referring to our service may wish to complain.
- 1.2 WAIL aims to operate effective and fair procedures ensuring it works within the framework of equal opportunities and in a non-discriminatory and non-judgmental way.
- 1.3 WAIL is committed to encouraging service users and stakeholders to come forward with any complaints and comments about the services delivered to make sure that quality is protected, and client's needs are appropriately met.
- 1.4 WAIL will take complaints seriously so that we can consistently improve the quality of our services and will ensure that complaints are responded to promptly, courteously, and effectively.

- 1.5 WAIL also undertakes to monitor all comments and complaints to ensure that they are used to improve the range and quality of service delivery on a continuous basis.
- 1.6 WAIL will also ensure that all clients have access to clear information on how to voice complaints and comments. Service Users will be provided with the support they need to make their views known. WAIL will also ensure that no service users are disadvantaged or treated less favourably because of complaining or making comments.

1.7 **Definition of a complaint**

A complaint is an expression of dissatisfaction by a person, whether justified or not.

An individual may complain about:

- An experience of services (such as the quality or range of services we provide, our external relationships and partnerships, staff conduct, WAIL's ethos and our decision-making processes).
- The decisions taken by staff (such as those related to referrals and the provision of accommodation and support services).
- We welcome complaints and comments from clients, residents, relatives, neighbours and also members of the public or local community. We also welcome comments and/or complaints from other stakeholders such as partner agencies, officers and members of local authorities, funders, and Members of Parliament. However, where a complaint relates to a third party, we will require the consent of that person to investigate the complaint and to provide feedback.
- In exceptional circumstances, we may need to investigate a comment as a complaint without the person's consent, especially where this exposes, or appears to expose, a significant risk or staff misconduct.
- We reserve the right not to investigate a complaint if this is made by someone who is alleged to be a perpetrator of abuse or violence.

PART TWO – PROCEDURAL GUIDANCE

Dealing with complaints and comments from clients

INFORMAL COMPLAINTS

- 2.1 If a service user wishes to make a complaint about the services she is receiving, or any other aspect of her service then the following action is to be taken.
- Service Users can raise a complaint regarding the service at any time but no later than 6 months of the occurrence of the incident and will often do so verbally.
 - This may be expressed as a seemingly casual comment made to any member of staff or in
 - the form of a statement made specifically to a member of staff or manager.
 - Staff should acknowledge the concern immediately and document what was said.
- 2.2 Many verbal complaints may be minor and wherever possible, staff should seek to resolve a complaint informally and immediately by way of local resolution. However, it would be wrong to assume that a verbal complaint is automatically of a minor nature, even if it is delivered in a casual way.
- 2.3 It is important for all staff to be familiar with the Complaints Procedure and take steps to understand the nature and implications of a complaint and resolve it properly. It is vital for staff to determine whether a verbal complaint may actually be more serious and should be escalated to a formal complaint. If a concern cannot be addressed informally, we should treat the complaint as a formal complaint.
- 2.4 Any informal complaint submitted by a service user should be logged on the complaints and comments log by a member of the Senior Leadership Team so that we can monitor trends in service user experience.

FORMAL COMPLAINTS

- 2.5 A formal complaint should be put in writing via letter or email and sent to Women's Aid in Luton 32- 42 Duke Street, Luton LU2 0HH or info@womensaidinluton.org
- 2.6 The complaint must be made by the complainant, if the complaint is made by a person acting on behalf of the complainant, written confirmation from the complainant will be required.
- 2.7 Formal complaints should be made within 6 months of the occurrence of the incident or issue. The complainant must provide their full name and address details.

- 2.8 A formal complaint must be acknowledged by the Service Manager in writing within five working days of receipt. All complaints must be investigated thoroughly, and the conclusion provided in writing to the complainant within 28 days. Where appropriate the Service Manager should meet with the complainant to discuss the outcome. If the Service Manager is not available, the investigation should be undertaken by another senior manager. If a complaint requires further investigation that will exceed the 28 days' timescale the manager should inform the complainant of the delay and give reasons for this.
- 2.9 The manager assigned to the complaint will then decide to meet with the client concerned in order to establish the facts directly from the client(s) and establish what outcome the client(s) are looking for.
- 2.10 Additionally, Where the complaint involves a member of staff the following process will apply;
- The manager will meet with the member of staff concerned to get their response to the complaint.
 - If necessary, the manager will then meet with any other members of staff or clients who may have witnessed the incident to obtain corroborating evidence.
 - Once the evidence is gathered a report and response to the client will be drafted, outlining what action will be taken to rectify the issue and to ensure that there is no recurrence.
 - If the complaint is against a member of staff, about a child that is under the age of 18 years or is of a safeguarding concern, then this needs to be referred immediately to the designated safeguarding lead, who will then follow the relevant safeguarding protocols.
 - If evidence of wrongdoing on the part of the staff member is identified, then the necessary processes will be followed in line with WAIL's policies and procedures.
- 2.11 All concerns or learning from complaints should be fed back to staff. Where appropriate further discussions should take place during supervision, staff meetings and/or shared learning across the organisation.

APPEALS PROCESS

- 3.1 If the complainant is not happy with the response, then the complainant must appeal in writing within 10 working days for the outcome being notified to the Chair of the Board of Trustees

Any appeal must contain the full grounds on which the complainant wishes to appeal.

The appeal will be acknowledged in writing within 5 working days of receipt.

If the acknowledgement did not include an invite to a hearing, the complainant may be invited to a meeting within 10 working days of receipt of the written appeal.

The complainant may be informed that the Board of Trustees do not wish to meet with complainant as they may have provided the full facts, and they can review the facts from the previous meeting.

If the complainant is invited to a meeting this will be with 2 members of the Board of Trustees.

Dealing with Third Party Complaints

- 3.2 The procedure for dealing with complaints and comments from agencies, funders and/or members of the public will follow the steps set out above, except that these complaints and comments should be addressed to Women's Aid in Luton – Chief Executive Officer who will allocate the appropriate investigation manager.
- 3.3 Matters relating to individual clients remain confidential. In dealing with any complaint concerning the service provided to an individual client, confidentiality and the safety of the client will be paramount. This principle also applies to former clients.

Neither senior managers nor the Board will enter into any discussion with any third party concerning the details of the service provided to any individual client, or former client, unless the complainant is acting on behalf of and with the explicit and recorded permission of the client or WAIL is legally required to disclose the information.

Monitoring complaints and comments and using feedback to improve services

- 3.4 Each time a complaint or comment is made by a service user, it should be logged on the client case record by the member of staff who received it and then passed on to a member of the senior leadership team who will complete the complaints and comments log. Any formal complaints should be logged on the complaints and comments log by a member of the Senior Leadership Team
- 3.5 A review of the complaints and comments log should take place in the Risk and Governance committee annually or where required sooner and

the results should inform an ongoing review of processes and procedures and service development including:

- Annual Business Planning, particularly in terms of:
- Identifying and prioritising changes and improvements to existing services
- Identifying gaps in service provision
- Service Reviews (Timing will be dependent on the cycle of review)
- Reviews of Policies and procedures

3.6 The results of the complaints record should also be presented at least annually to:

- any service user participation groups
- the board of trustees
- WAIL funders where requested for audit purposes

PART THREE - LEGISLATION AND ASSOCIATED DOCUMENTS

The documents below the internal documents associated or linked with this policy.

Internal associated documents

- Data Protection Policy
- Employee handbook