

## Complaints Procedure

### Procedure Statement

The Complaints Policy provides the overarching statement to inform the Complaint Procedure. The Complaints Procedure has been written to be aligned with our organisational values and the Response Way.

Copies of the policy and procedure are contained in the Welcome Pack for Response clients or can be obtained from the Complaints Team.

### Complaints Procedure

#### Informal Stage

A concern raised orally is not normally considered a complaint until it is in writing.

1. Concerns should be escalated to the relevant Manager. If they are serious, the Chief Operating Officer and relevant Director must be informed.
2. Concerns should, where possible, be resolved at this stage, usually with an action plan.
3. If an advocate is involved, verification that the person has permission to speak on behalf of someone else is required unless the advocate is making a complaint on their own behalf.
4. If agreement cannot be reached with the individual concerned on the suggested action plan, the advice to them will be to put the concern in writing in order to trigger the formal complaints procedure.
5. If there are issues which may prevent the individual making a complaint e.g. literacy or language issues, please speak to your Manager or the Complaints Team for advice.

#### Formal Stage

##### Preliminary steps

1. A complaint received by the Complaints Team will be recorded on the complaints log with an acknowledgment letter sent to the complainant within two working days. If a complaint is instead sent to any other Response directorate, it will be forwarded to the Complaints Team to be actioned.
2. The complaint will be allocated by the Complaints Team to the appropriate directorate for investigation. Usually, only posts at Manager level or above within that directorate may be nominated to undertake investigations. Exceptions must be suggested to the Complaints Team in writing for consideration for approval by either the Head of Quality or the Director of Governance & Compliance. Any complaints involving a member of staff must be investigated by someone of the same seniority or above.

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### Investigation

1. Within 28 days from receipt of the complaint, the written outcome of the investigation will be sent to the complainant and copied to the Complaints Team. If we, Response, are at fault we will apologise and take learning from the investigation to reduce the risk of issues reoccurring.
2. A meeting to discuss the outcome can be held prior to the letter being sent or an offer of a follow-up meeting once the outcome letter has been received included. Where a meeting is requested by the complainant, they should be advised about their right to be accompanied by a friend, relative or a representative such as an advocate.
3. If the issues are too complex to complete the investigation within 28 days, the complainant and the Complaints Team are informed of any extension necessary and the reasons.
4. Complainants have the right to raise their concerns at any stage to an appropriate external body, for example the relevant contract holder or in the case of CQC registered services by the Care Quality Commission.

### Appeals

An appeal is the process in which cases are reviewed, following a request from the complainant to change to a complaint outcome decision. Appeals function both as a process for error correction as well as a way of clarifying and interpreting outcomes.

1. Appeals must be submitted in writing to the Complaints Team within 14 days of the notification of the outcome from the original investigation.
2. An appeal received by the Complaints Team will be recorded on the complaints log with an acknowledgment letter sent to the complainant within two working days. If an appeal is instead sent to any other Response directorate, it will be forwarded to the Complaints Team to be actioned.
3. The appeal investigation will be carried out by a member of the Executive Director Team as directed by the Complaints Team in consultation with the Head of Quality or Director of Corporate Governance and Compliance. The Complaints Team will also notify the Chief Executive Officer of the appeal and the nominated investigative officer.
4. The Appeal outcome will be provided within 28 days of receipt of appeal.
5. If the complainant remains dissatisfied with the outcome of the appeal, they may then appeal to the Chair of the Board of Trustees.

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6. This appeal must be submitted in writing to the Complaints Team within 14 days of the notification of the outcome from the first appeal.
7. This appeal will be recorded on the complaints log with an acknowledgment letter sent to the complainant within two working days. If an appeal is instead sent to any other Response directorate, it will be forwarded to the Complaints Team to be actioned.
8. The appeal investigation will be carried out either by the Chair of the Board of Trustees or a nominated Trustee, They will be supported by wither the Head of Quality or Director of Corporate Governance and Compliance. The Complaints Team will also notify the Chief Executive Officer of the final appeal and the nominated investigative officer.
9. The Appeal outcome will be provided within 28 days of receipt of appeal.
10. Together with the outcome of the appeal, the complainant will be informed in writing that at this stage the internal procedure has been exhausted and that they have the right to raise their concerns to an appropriate external body, for example the relevant contract holder or in the case of CQC registered services by the Care Quality Commission.

### Complaints that may not be taken forward

Response will endeavour to address complaints in a way that reflects our values and so it can improve its services. Rarely, however, there are complaints that we are unable to take forward. The decision to do this will be held either by the Chief Executive Officer or Chief Operating Officer in consultation with either the Director of Corporate Governance or Head of Quality.

In these cases, the complainant will be written to by either the Chief Executive Officer or Chief Operating Officer in order to explain the decision. They will have the right to appeal directly to the Chair of the Board of Trustees using the process described above for a final appeal.

The reasons why some complaints may not be taken forward include:

1. When there is no reasonable end in sight because no further action can be reasonably taken.
2. The issues raised are outside of the control of the organisation. In this case we will seek to offer advice on how the complainant might raise these externally.
3. The complaint or precise problem is not clearly identified despite reasonable efforts made to clarify the situation.

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4. Where the substance of a complaint is frequently and seemingly unreasonably being changed whilst it is being dealt with. In this case we would seek to address the primary cause for concern for the complainant.
5. Continuous and unreasonable raising of further concerns or questions by a complainant.
6. The complainant does not adhere to reasonable standards of behaviour or other contact agreements with the organisation.

Please note that further complaints from the same complainant will be considered on an individual basis and investigated in a fair and equitable manner unless they are deemed to fulfil the same criteria as above.

### Reporting

A detailed report will be compiled by the investigating officer for submission to the Complaints Team setting out the nature of each complaint, its path and outcome. Tracking of trends and themes will be carried out by the Complaints Team to report to a sub-committee of the Board of Trustees to support monitoring and learning. This will include tracking of any complaints that cannot be taken forward.

### Staff Responsibility

Investigations of complaints or appeals are carried out by competent staff at manager level or above. The Complaints policy and procedure is included in the induction training for all staff. Failure to adhere to the timelines and guidance outlined in this procedure by staff involved in the investigation of complaints or appeals may be dealt with through the Performance Management policy and procedure.

### Complaints Team

The dedicated contact details for submission of enquiries are:

[Complaints@response.org.uk](mailto:Complaints@response.org.uk)

Complaint Team  
AG Palmer House  
Morrell Crescent  
Littlemore  
Oxford  
OX4 4SU

Telephone: 01865 397 940

### Review

The effectiveness of this Procedure is regularly monitored by the Complaints Team to determine whether any improvements are needed, and it is reviewed yearly.

## Complaints Procedure

Reviewed and signed off by the Performance Committee on 06<sup>th</sup> April 2021

**DOCUMENT CONTROL**      This Procedure must be reviewed by April 2022

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First Issued:	Approved by:	<b>Louise Packer &amp; Angelo Fernandes</b>

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