

Procedure Name	Complaints Procedure – Care and Support		
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Subject Matter Expert	Alex Hicken- Director of Quality and Compliance		
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Linked Policies, Procedures and Strategies	Complaints Policy Complaints Procedure – Landlord and Property Services Unacceptable Behaviour Policy/ Procedure Diversity and Inclusion Policy Information Management Policy Data Protection Policy Compensation Policy Vulnerable Customer Policy Duty of Candour Procedure Reasonable Adjustments Policy		
Customer Information (where applicable)	Service level complaint leaflets		
Forms and Other Links (e.g. links to internal forms and documents and / or external legislation)	Template letters Appendix 4 - Step-to-step guide in logging a complaint. Appendix 5 - Investigating a Complaint		
Version Number	V6		

Version	Description of Change	Date Approved
V1	New GSA procedure specific to Care and Support	June 2021
V2	Updated to include process for services without SharePoint access	October 2021
V3	Change to procedure for assets related complaints - from April 22 will be overseen by customer care team, not C&S Removal of reference to CIW Clarification that MP enquiries relating to assets will be managed by the Customer Care Team	March 2022
V4	Removal of reference to designated person/ reference to 8 weeks before referring to Ombudsman	June 2022
V5	Annual Review – no material changes	June 2023
V6	Changes throughout to align with the Landlord complaints procedure that has been updated in line with the 2024 Housing Ombudsman complaint handling code. This includes: <ul style="list-style-type: none"> • Removing the resolve/ informal concern stage • Clarifying the difference between a service request and a complaint • Revised timescales to acknowledge and respond to a complaint. 	March 2024

Complaints Procedure

Care and Support Services

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1. Introduction

The purpose of this procedure is to provide clear guidance on how we manage complaints for our Care and Support service provision. It details how we will respond at each stage of the process and the timescales we should meet.

By managing complaints in line with this procedure we will ensure we achieve the aims set out in our complaints policy.

2. Procedure Scope

This procedure pertains to all complaints raised in relation to aspects of service delivery that are managed within the Care and Support function.

Complaints relating to GSA properties are covered by the complaints procedure for Landlord and Property Services.

3. Complaints overview

We operate a two stage complaints process. Service leaflets are available to customers that document these stages and our timescales to respond at each stage.

4. Definitions

It is important we are clear about the difference between a 'complaint' and a 'service request'. We define a complaint as:

'an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the landlord, its own staff, or those acting on its behalf, affecting a resident or group of residents.'

A service request is defined as:

'a request requiring action to be taken to put something right'.

A service request is not a complaint, but a complaint will be raised if a customer subsequently raises dissatisfaction with the response to their service request.

5. Service Requests

Examples of service requests could include:

- ◆ A request for more activities
- ◆ A request for a new key worker
- ◆ A request for us to respond to a concern of anti-social behaviour

If, however, a customer considers we failed to complete a service request or did not complete it to the required standard, this will be logged as a complaint.

Some examples are shown below:

Contact	Service Request or Complaint
I want more activities	Service request - this is a request for more activities
We ask for more activities at every resident meeting and nothing ever changes	Complaint - the customer has previously made a service request, but the issue has not been resolved
Please can you provide me information in large print?	Service request - this is a request for information in a different format

You know I need information in large print, but you continue to send information in normal text which is failing to meet my needs	Complaint - our failure to provide information in the format requested means it is an expression of dissatisfaction that we did not deliver the service requested
The carer rushed me and didn't give me chance to do my own personal care. I felt like I was on a conveyor belt	Complaint - this is an expression of dissatisfaction
My mum's clothes were dirty and stained and the staff were sat on their phones	Complaint - this is an expression of dissatisfaction
The man in the next room to me is playing loud music all night and I can smell cannabis	Service request - in the first instance, reports of ASB should be dealt with under the ASB procedure
Nothing has been done about the man next door even though you said you'd look into it, and I gave you the noise app recordings. He continues to play music all night and it's affecting my mental health and wellbeing	Complaint - the first contact to report the ASB was a service request, but the customer is dissatisfied we did not complete the agreed action

Although service requests are **not** complaints, and are not recorded as complaints, it is important we record and action service requests.

Service requests should be recorded, and full records maintained of the action taken to resolve the query.

If a customer subsequently reports that they are dissatisfied, that we failed to complete a service request or did not complete it to the required standard this needs to be logged as a complaint.

This provides more clarity on the point at which dissatisfaction may be still be classified as a service request.

Example:

A customer requests a vegan meal for their evening meal - this is a service request.

The customer subsequently calls you over to say that no vegan option is available.

Scenario 1: you check with the kitchen and the Chef advises they have run out of the vegan option but are happy to make the customer an alternative vegan meal from a range of options. The Chef says they are sorry for the error. This can be noted as a service request as it's still been resolved.

Scenario 2: you check with the kitchen. The Chef's gone home and there's no one to make an alternative and you have nothing appropriate to make a vegan meal. The customer is hungry and unhappy. This should be recorded as a complaint.

6. Principles of effective complaint handling

6.1 Approach to complaint handling

It's important to recognise by the time customers come to us to make a complaint they may already be upset, angry or frustrated. Good complaint handling involves us ensuring:

- ◆ We deal with complaints on their merits, act independently, and have an open mind.
- ◆ We take ownership of issues and say sorry if we've made a mistake.
- ◆ Customers feel respected, taken seriously and given a fair chance to set out their position.
- ◆ We're attentive and empathetic.
- ◆ We investigate fully all of the issues raised, reviewing all relevant evidence.
- ◆ Problems are resolved within our agreed time frames.
- ◆ We learn from our mistakes and share the learning with customers and colleagues.

All colleagues are responsible for receiving complaints and managing them sensitively and confidentially.

We will assure customers they will not be adversely treated or suffer any detriment because of raising concerns with us.

6.2 Methods of complaint and access

Customers can complain using a range of methods and we're happy to accept and encourage complaints in any format including face to face, by phone, email and letter.

We should **never** require a customer to complete a form or put a complaint in writing; all colleagues should be aware of the complaints process and how to forward a complaint to the correct team. This must be without delay to ensure we can adhere to timescales to acknowledge complaints.

We will take all reasonable steps to support customers to access the complaints process and ensure their voice is heard. This will include signposting customers to local advocacy services. Subject to the relevant written consents, we will also give customers the opportunity to have a representative deal with their complaint on their behalf, and to be represented or accompanied at any meeting to discuss their complaint or aspects of service provision.

Some customers may require support to make their complaint; interpretation, signing or advocacy services for example. It's essential we establish and fulfil these individual customer needs appropriately if they are reasonable.

Further information in relation to reasonable adjustments in complaint handling is included within our Complaints and Reasonable Adjustments Policies. We must keep a record of any reasonable adjustments agreed and these must be kept under active review.

7. Overview of our complaints process

7.1 Overview of stages

Having identified a matter raised as a complaint and not a service request, it needs to be referred to the complaints process.

Our complaints process has two stages, Stage 1, and Stage 2.

All complaints will initially be considered at Stage 1 and escalated to Stage 2 if the customer remains dissatisfied with the response at Stage 1. We will not refuse to escalate a complaint to Stage 2 of the complaints procedure unless we have a valid reason to do so. Any decision not to escalate a complaint to Stage 2 must be agreed in writing by a director.

7.2 Exclusions

We do not have a blanket exclusion policy and will consider cases individually. The complaints policy outlines circumstances where we may exclude a concern from the complaints process.

When a decision is made not to deal with an issue through our complaints process, the full reasons for this will be clearly explained to the customer and they will be advised of their right to contact the relevant Ombudsman Service regarding our decision not to investigate.

Examples of exclusions include:

- ◆ The issue giving rise to the complaint occurred over 12 months ago - although we may choose to apply discretion where there is good reason to do so, e.g. the complaint relates to health and safety or safeguarding concerns or if there is a clear explanation why they were not raised within the 12 months.
- ◆ Legal proceedings have started. This is defined as details of the claim, such as the Claim Form and Particulars of Claim, having been filed at court.
- ◆ Concerns about the handling of personal data - this would be handled by the data protection team.

7.3 Timescales for acknowledgment and response

All timescales for acknowledging and responding to complaints are in line with the Housing Ombudsman Complaint Handling Code:

	Acknowledgement	Response
Stage 1	Within 5 working days of the complaint being received by the business	Within 10 working days of the complaint being acknowledged
Stage 2	Within 5 working days of the escalation request being received by the business	Within 20 working days of the complaint being acknowledged

The Housing Ombudsman Complaint Handling code defines 'acknowledgement' as acknowledged, defined and logged.

The Code refers to 'working days' and not calendar days. For the acknowledgement timescales, the day the complaint is received is day zero of the 5 working days.

If the complaint is received on a non-working day or outside of working hours, for example, a complaint received at 11pm, the date received would be counted as the next working day within our working hours. Working hours are 8am to 5pm Monday to Friday, excluding bank holidays.

In line with the Code, we are not permitted to delay sending a complaint acknowledgement beyond 5 working days which means the Stage 1 complaint response will always be due within a maximum of 15 working days from the date the complaint is received by us.

If an extension to the response timescale is needed when considering the complexity of the complaint at Stage 1, we must inform the customer of the expected timescale for response. Any extension must be no more than 10 working days without good reason, and the reason(s) must be clearly explained to the customer. At Stage 2, the extension must be no more than 20 working days.

Where a response to a complaint will fall outside the timescales set out in this procedure, we must agree with the customer suitable intervals for keeping them informed about their complaint. A record of this discussion and agreement must be kept on the file.

7.4 “The complaint definition”

When a complaint is logged at Stage 1 or escalated to Stage 2, we must set out our understanding of the complaint and the outcomes the customer is seeking. If any aspect of the complaint is unclear, the customer must be asked for clarification.

When a complaint is acknowledged at either stage, we must be clear which aspects of the complaint we are and are not responsible for and clarify any areas where this is not clear.

7.5 Responses

Complaints responses should be written in plain language and should contain the following information:

	Stage 1 Responses	Stage 2 Responses
a)	The complaint stage	The complaint stage
b)	The complaint definition	The complaint definition
c)	The decision on the complaint	The decision on the complaint
d)	The reasons for any decisions made	The reasons for any decisions made
e)	The details of any remedy offered to put things right	The details of any remedy offered to put things right
f)	Details of any outstanding actions	Details of any outstanding actions
g)	Details of how to escalate the matter to Stage 2 if the individual is not satisfied with the response.	Details of how to escalate the matter to the Ombudsman Service if the individual remains dissatisfied.

All complaint responses, at both Stage 1 and Stage 2 must:

- ◆ show empathy and respect
- ◆ address all points raised in the complaint definition and provide clear reasons for any decisions, referencing the relevant policy, law, and good practice where appropriate
- ◆ be evidence-based with due regard with available records
- ◆ be provided in line with any reasonable adjustments agreed
- ◆ consider any known vulnerabilities we should have considered in service delivery and complaint handling
- ◆ consider performance against our policies, procedures, service standards or other legal or contractual obligations (including obligations set out in the tenancy or occupancy agreement)

A complaint response must be provided to the customer even when the answer to the complaint is known, not when the outstanding actions required to address the issue are completed.

Outstanding actions must still be tracked by the service area using the Continuous Improvement Action Plan (CIAP) and actioned promptly with appropriate updates provided to the customer. They should also be detailed on the SharePoint complaint log.

7.6 Putting things right

Where something has gone wrong, we must acknowledge this and set out the actions we have already taken, or intend to take, to put things right.

These can include:

- ◆ Apologising
- ◆ Acknowledging where things have gone wrong
- ◆ Providing an explanation, assistance or reasons
- ◆ Taking action if there has been delay
- ◆ Reconsidering or changing a decision
- ◆ Providing a remedy
- ◆ Changing policies, procedures or practices

7.7 Complaint Records

Within C&S, all complaints are administered through a dedicated SharePoint site.

The SharePoint site must be used to maintain a full record of the complaint and the outcomes at each stage. This must include the original complaint and the date received, all correspondence with the customer, correspondence with other parties, and any relevant supporting documentation such as reports, photographs or accounts from colleagues.

7.8 The Complaints Coordinator

We have a dedicated Complaints Coordinator (CC) in C&S who oversees all complaints.

The purpose of this role is to co-ordinate and administer the complaint, by acknowledging the complaint and assigning a suitable Investigating Officer (IO).

The Complaint Coordinator will monitor the progress in responding to the complaint and ensure any delays are communicated to the complainant (either by the CC or the IO).

The Complaint Coordinator will quality check all complaint letters prior to issue and ensure:

- ◆ They respond to all matters in the complaint.
- ◆ The letter is appropriately addressed and formatted
- ◆ The tone and content of letters is professional and courteous

The Complaint Coordinator will oversee any escalations to the next stage of the procedure and ensure any Stage 2 responses are reviewed before issue by the Director of Quality (or equivalent). They will also oversee any information returns to an Ombudsman service.

The Complaint Coordinator will provide performance data on complaints and ensure learning outcomes are disseminated as required through directorate-wide learning logs.

8. Complaint Stages

8.1 Complaints at Stage 1

As an issue is reported to us, we must first determine if it is a service request or a complaint.

Where we have determined issues fall within the definition of a complaint, and are not a service request, they will be referred to Stage 1 of the complaint procedure.

Whoever receives a complaint, should ensure that it is logged on the SharePoint system without delay, noting that the time to acknowledge commences from the moment the complaint arrives in the business. **Appendix 4 is a step-to-step guide in logging a complaint.**

Where a colleague without access to SharePoint receives a complaint, it should be passed to a supervisor to log.

When a complaint is logged on SharePoint, the Complaint Coordinator will, in conjunction with operational colleagues, identify an appropriate Investigating Officer (IO) and acknowledge the complaint within **5** working days of the complaint being received in the business. In acknowledging the complaint, we will define the complaint and the resolution the customer is seeking.

The most appropriate person to investigate a Stage 1 complaint will usually be a Supervisory Manager (e.g. Deputy Manager/ Care Manager/ Service Manager/ Registered Manager/ Business Support Manager).

There may, however, be circumstances where the Manager is potentially implicated in the complaint and for impartiality, the stage 1 complaint needs to be investigated by a more senior role or from a colleague in an independent team (e.g. a member of the Quality and Compliance team).

Where complaints are complex, sensitive, or considered high risk, the CC will liaise with the most appropriate Director as to the most appropriate IO.

The Investigating Officer will be allocated the case through a SharePoint link.

The Investigating Officer is responsible for:

- ◆ Making contact with the complainant, offering assurance that the matter is being dealt with and, as necessary, clarifying any areas of the complaint.
- ◆ Arranging to review any necessary records.
- ◆ Arranging to speak to any staff/witnesses.
- ◆ Logging all actions on SharePoint* - please see [Appendix 5 – Investigating a Complaint](#)
- ◆ Drafting an objective evidence-based response that considers each area of the complaint, where it is upheld and whether there are any learning outcomes.
- ◆ Communicating any justifiable delays** to the complainant or ensuring that this communication is made by the CC on their behalf.
- ◆ Ensuring the draft is returned to the CC in time for quality checks prior to issue.
- ◆ Ensuring procedural timescales are met - complaints should be responded to within 10 working days of acknowledgment.
- ◆ Maintaining clear records of all investigation so, in the event of escalation to Stage 2, evidence can be reviewed by the Stage 2 Investigating Officer.
- ◆ Ensure learning outcomes are identified and recorded.

**Justifiable Delays - examples include:

- ◆ The matter has been referred to safeguarding or the Police and is subject to delays outside our control.
- ◆ A key witness is on annual leave or absent.

It is not justifiable for complaint responses to be delayed by a lack of planning and organising on behalf of the IO - for example, leaving it to day 8 and realising people are on days off.

There may be some circumstances where other Senior Managers, or the Lead Investigator asked to carry out investigations.

Where customers raise additional complaints during the investigation, these must be incorporated into the Stage 1 response if they are related, and the Stage 1 response has not been issued. Where the Stage 1 response has been issued, the new issues are unrelated to the issues already being investigated or it would unreasonably delay the response, the new issues must be logged as a new Stage 1 complaint.

The Stage 1 response must be issued to the complainant within **10** working days of the acknowledgement and time should be allowed for quality checks by the Complaint Coordinator.

Complaints that can be resolved quickly:

There may be some complaints that can be resolved quickly at a local level.

It is important however, in line with the updated Housing Ombudsman Complaint Code, that all expressions of dissatisfaction within the scope of the policy are logged as a Stage 1 complaint and an acknowledgment and response are provided to the customer even where issues can be easily resolved. **Please refer to the flow chart at Appendix 1**

In some instances, the acknowledgement and response may be possible in one communication where issues are quickly and easily addressed. **Please see Appendix 2 as a sample communication.**

All complaints, including those resolved quickly, will be logged as complaints on SharePoint, and case, volumes monitored by the Complaint Coordinator, as with all Stage 1 complaints. The Complaint Coordinator will check all responses prior to issue.

All Stage 1 responses must include details on how the complaint can be progressed to Stage 2. We will ordinarily ask a customer to contact us within 20 working days if they wish to escalate their complaint. We will exercise discretion outside the 20 working days.

8.2 Complaints at Stage 2

Customers must not be required to explain their reasons for requesting an escalation to Stage 2 and it is our responsibility to make reasonable efforts to understand why a customer remains unhappy.

On receipt of any request to escalate a complaint to Stage 2, the Complaint Coordinator, will determine the most appropriate Investigating Officer following discussion with Heads of Service/ Directors. The Stage 2 IO will be someone without prior involvement in the situation or Stage 1 response, and someone with the appropriate skills and knowledge to respond to the issues raised.

The CC will acknowledge the Stage 2 escalation within **5 working days**, confirming to the complainant the name and role of the person undertaking the review at Stage 2.

The CC will escalate the complaint to the Stage 2 IO on the SharePoint system and the Stage 2 IO will:

- ◆ Review the Stage 1 investigation and response.
- ◆ Seek any additional clarification from the Stage 1 IO.
- ◆ Carry out any additional investigation as required.

The Stage 2 response letter, unless there are justifiable delays, should be issued to the complainant within **20 working days** of the acknowledgment. As this is the final stage, details of the option for the complainant to escalate the issues to the relevant Ombudsman Service must be given in the resolution letter.

As this is the final stage in the internal complaints procedure, all Stage 2 responses should be quality checked by the Director of Quality and Compliance or Director of Care and Support.

To facilitate this, the CC will request that, wherever possible, the response is provided to the CC by day 16 to allow for the required quality checks and clarifications.

9. External Review

If a customer exhausts our internal complaint process and believes their complaint remains unresolved, they can refer the matter directly to the relevant Ombudsman Service.

Customers need to refer their complaints to the Ombudsman within six months of receiving our final response.

The relevant Ombudsman will depend on the service type and nature of the complaint.

For example, complaints raised by tenants of GreenSquareAccord in relation to landlord or property services would be referred to the Housing Ombudsman. For customers who receive care and support services, concerns relating to adult social care can be referred to The Local Government and Social Care Ombudsman.

The Housing Ombudsman Service (HOS) is set up by law to look at complaints about the housing organisations registered with them. The service is free, independent, and impartial for customers and we are members of the scheme. We must follow the HOS Complaint Handling Code and publish our Self-Assessment on complaints on our website and annually review this.

Any liaison with an Ombudsman will be centrally coordinated by the Complaints Coordinator.

For services regulated by the Care Quality Commission (CQC), the customer retains the right to contact CQC regarding their concerns, as well as raising these issues directly with GreenSquareAccord.

Although CQC will not investigate individual complaints, they will use the feedback to link into how they monitor and inspect our services.

Users of adult social care services can also approach Commissioning authorities with any concerns in relation to care and support provision.

10. MP and Councillor Enquiries

We will handle Members Enquiries (from MPs or Councillors) in the same way we handle contact made by a customer. Often, Members Enquiries start as enquiries and lead to service requests being raised.

The Housing Ombudsman Complaint Handling Code states it is reasonable for landlords to have an opportunity to respond to Members Enquiries as service requests for issues reported for the first time. Where we decide to respond in this way, the Member should be informed of the decision and the next steps.

If Members express dissatisfaction on behalf of a customer with our approach to resolving the substantive issue, or the outcome, the customer must be given an opportunity to make a complaint. The complaint should be raised at Stage 1 of the complaints procedure and will follow the same complaints timescales.

We should continue our efforts to resolve the service request even if a complaint has been made. We should not wait for the outcome of the complaint investigation to progress the service request.

Where we receive Members Enquiries and our file shows previous repeat contact from a customer about the same issue, this indicates they are still dissatisfied with the handling or outcome of the issue/concern, and they have had to escalate the matter to try and get it resolved. We should contact the customer to explore the reasons they remain dissatisfied and ask if they would like the matter investigated as a complaint. We can still respond to the Members Enquiry to explain the action we have taken.

All third-party enquiries from MPs or Councillors or information about a customer must be made in writing to ensure the request is authentic.

An MP or Councillor enquiry case will be created and used to record and monitor all action taken. All relevant case documents will be saved in the electronic case file; a scanned copy of the enquiry letter and a copy of our response, for example.

Each draft response needs to be reviewed and approved by the Data and Performance Manager before it's sent to the MP or Councillor. A Director should sign off all responses which are:

- ◆ high profile
- ◆ complex or
- ◆ involve reputational risk

11. Complaints made by third parties

Where a complaint is made through or by a third party (a relative, friend or advocate for example), we need to establish the third party is acting with the consent of the individual concerned and obtain a signed consent form before proceeding if the complaint includes reference to personal information. This request will be processed by the C&S Complaint Coordinator.

In cases where the person affected is assessed as lacking capacity to consent, we will ask the third party to provide evidence of an appropriate Lasting Power of Attorney (LPA). If they don't have the relevant power of attorney, we would make a best interest's decision as to whether the information should be shared. The organisation's Caldicott Guardian must be consulted in such circumstances caldicott.guardian@greensquareaccord.co.uk.

In the case of a person affected who has died, the third party must have the relevant legal authority to be identified as an individual's personal representative. A personal representative is usually the person who holds the probate documentation (such as the Grant of Probate or Letters of Administration) or is named as executor in the will. GDPR does not apply to the deceased, but the common law duty of confidentiality does; any queries on data sharing should be referred to the Caldicott Guardian.

In the case of a child, the representative must be a parent, guardian or other adult person who has care of the child. Where the child is in the care of a local authority or a voluntary organisation, the representative must be a person authorised by the local authority or the voluntary organisation.

If authorisation is not received within two weeks, the Complaint Coordinator will send a reminder restating why it's needed and asking for it to be returned. Both the Complaint Coordinator and the investigating officer will need to consider the customer's wishes and their responsibility to investigate matters of concern brought to their attention. The response to the investigation cannot be shared with the third party until the appropriate consents have been received.

12. Concerns raised by regulators

There may be occasions where concerns are raised directly by regulators; most usually where they have been contacted directly by persons raising concerns about aspects of service delivery.

While these do not need to be logged on the SharePoint system, the Complaint Coordinator should be made aware in order that the enquiry can be logged.

The concern should be responded to within the timescale provided by the regulator and the response should be checked by a Head of Service.

In any instance where the concern has been raised directly to the Nominated Individual, the response must be checked by the Director of Quality and Compliance or Director of Care and Support prior to return. The Director of Quality and Compliance will ensure the Nominated Individual has the necessary oversight of the response.

The Director of Quality and Compliance or Director of Care and Support should also check any responses to concerns that are complex or high risk.

13. Potential safeguarding concerns

Where a complaint relates to a potential safeguarding matter, it is important the agreed safeguarding reporting processes are followed, as detailed in our Safeguarding Policy and Procedure.

In such cases, we are unable to start any investigation until we have received confirmation from the relevant Local Authority safeguarding team that we are the lead agency for investigation purposes. Any resulting delays must be communicated to the complainant.

All such complaints must be logged at the point of receipt, with notes to explain that investigations cannot start until we are instructed to do so by the relevant external agency.

In matters referred to the Police, this may require Police approval.

14. Complaints about Contractors or Third Parties

In any circumstance where a complaint is made about a Contractor, it will usually be investigated and managed by us through liaison with the Contractor.

In Care and Support, this may include complaints in regard to agency staff; in this scenario, we would be responsible for the complaint response, but HR processes would sit with the Agency.

As a member of the Housing Ombudsman scheme, we are responsible for ensuring any third parties handle complaints in line with the Code.

15. Unacceptable Behaviour

We have a policy and procedure in place for managing unacceptable behaviour from customers and/or their representatives.

Any restrictions placed on contact due to unacceptable behaviour must be proportionate and demonstrate regard for the provisions of the Equality Act 2010. We must be able to evidence reasons for putting any restrictions in place and must keep restrictions under regular review.

16. Learning

We want to demonstrate a culture of learning and continuous improvement. Underpinning this are principles of honesty and transparency; acknowledging where we have got things wrong and taking steps to learn from incidents to reduce the risk of recurrence. It is also important we learn lessons from cases which occur in other organisations, taking proactive action to review implications for us and taking action to address any risks or issues.

All Investigating Officers are required to identify learning outcomes following complaints and services maintain service-based learning logs.

The Quality and Compliance team collates and shares learning from complaints across teams, to drive service improvements and to inform changes to policies and procedures. On a quarterly basis (or sooner if required) learning logs are shared across the Directorate and are cascaded through meeting structures. Where necessary, any systems, processes or staff training is updated as a result.

Themes and trends on complaints are monitored and reported as a routine part of performance monitoring.

Where there are serious or complex complaints with opportunities for wider reflection and learning, a member of the Quality and Compliance team will lead an Evergreen session to review complex/serious complaints with those involved and will collate/track actions necessary for service improvement.

On a quarterly basis, a thematic report will be shared across the business, focused on learning from themes identified in complaints and determinations made by an Ombudsman Service. We will use operational newsletters and colleague communications including the Voice of the Customer webinars to share themes and learning.

Themes and trends on complaints, including wider learning and improvements are monitored and reported on. The Board, Care and Support, Homes and Customer Experience and Health and Safety Committees and Customer Panel will receive a regular report, containing updates of complaints, including the actions agreed and taken.

17. Monitoring and Review

We want to know the complaints service we're providing meet our customers' needs, and the targets we set ourselves ensure we're always striving for service improvement. Performance on complaints is reported using the KPI Dashboard and through more detailed reporting by the Care and Support Quality and Compliance teams. This includes reporting to Care and Support Committee.

We will produce an annual complaints performance and service improvement report for scrutiny and challenge, which must include:

- a. a qualitative and quantitative analysis of our complaint handling performance.
- b. any findings of non-compliance by the Ombudsman.
- c. the service improvements we have made because of the learning from complaints.

For Landlord complaints, please refer to the Landlord and Property procedure; we are required to complete specific annual monitoring in line with Housing Ombudsman Complaint Handling Code. This also requires us to complete a self-assessment against the code.

18. Training

It is important we prioritise complaint handling and embed a culture of learning from complaints across the organisation.

There is a clear expectation that all colleagues:

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

All relevant colleagues will be suitably trained in the importance of complaint handling. This training will be dependent on role and will vary from complaint awareness for all colleagues to more in-depth training for colleagues involved in complaint handling.

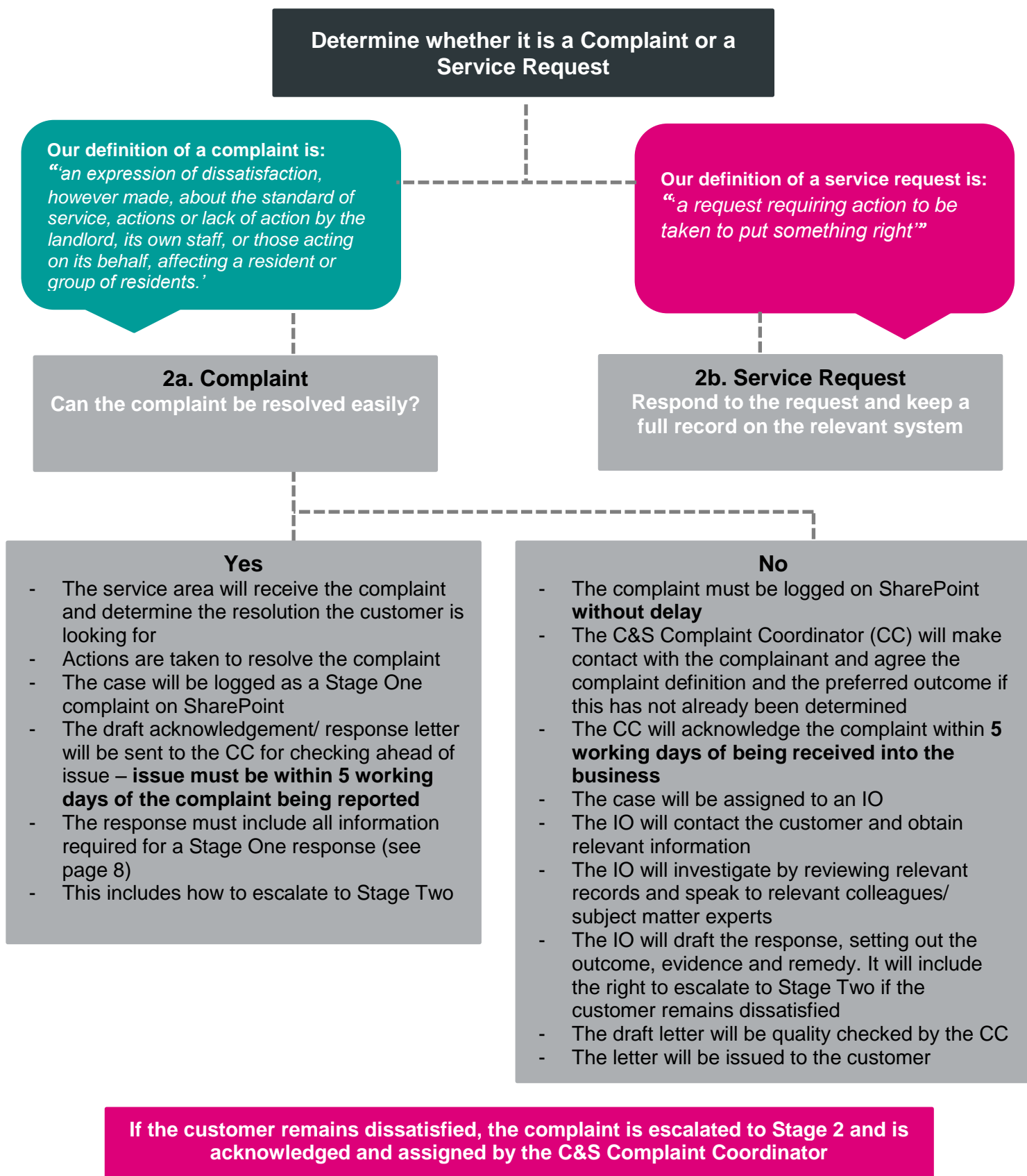
19. Responsibilities

The responsibility for the delivery of our complaints service is not limited to one team, it spans across all departments of the business and post holder levels. This table sets out the different process owners and parts they are responsible for.

Who	What
Board and Executive Team	<ul style="list-style-type: none"> • Policy approval and ensuring Code compliance. • Approval of annual Self-Assessment and Complaint Performance and Service Improvement report (Landlord complaints). • Implementation of actions arising from Ombudsman determinations. • Performance scrutiny by reviewing quarterly Board Reports.
Care and Support Committee	<ul style="list-style-type: none"> • Oversight of all complaints data and learnings themes through quarterly report. • Responsibility to escalate issues and concerns to the Board.
Senior Lead Person responsible for complaint handling	<ul style="list-style-type: none"> • They must assess any themes or trends to identify potential systemic issues, serious risks, or policies and procedures which require revision. • This is the Director of Quality and Compliance.
Member Responsible for Complaints ('the MRC'); a member of the governing body	<ul style="list-style-type: none"> • This is a requirement of the Code and is focused on landlord complaints. This is the Chair of the HCX Committee and they have lead responsibility for complaints to support a positive complaint handling culture. • The MRC is responsible for ensuring the GSA Board has information which provides insight on complaint handling relating to landlord services.
Director of Quality and Compliance Data and Performance Manager	<ul style="list-style-type: none"> • Annual review of the C&S Complaint procedure. • C&S Annual Complaint Report. • Reporting in relation to C&S complaints • Internal audits of complaints
Director of Customer Services / Head of Customer Voice	<ul style="list-style-type: none"> • Annual review of Complaints Policy. • Annual review of the Landlord Complaint Procedure. • Completion of the Annual Self-Assessment and annual complaints performance and service improvement report.
Leadership Team	<ul style="list-style-type: none"> • Promote a positive complaint culture.

	<ul style="list-style-type: none"> • Lead, support and implement policy change. • Performance scrutiny through Performance Committee. • Legislation and regulation compliance.
Health & Safety Committee	<ul style="list-style-type: none"> • Overview of complaints relating to Health and Safety.
Customer Panel	<ul style="list-style-type: none"> • Consultation and engagement on Landlord complaint processes.
Complaint Coordinator (C&S)	<ul style="list-style-type: none"> • Oversee and monitor C&S complaints. • Quality check complaints. • Produce reports on complaint volumes and trends.
C&S Managers	<ul style="list-style-type: none"> • Complete complaint investigations where assigned to do so, ensuring appropriate communication with the customer. • Ensure learnings from complaints are monitored for completion.
Customer facing colleagues	<ul style="list-style-type: none"> • Customer service delivery. • Resolution focus. • Effective customer communication.
All colleagues	<ul style="list-style-type: none"> • Provision of information where required to complete complaint investigations, in line with timescales. • Openness and transparency with a focus on learning and improvement.

Appendix 1: Flowchart



Appendix 2: Example of a complaint which can be resolved quickly by acknowledging and responding in one communication.

Thank you for coming to the office to see me yesterday, 28 February 2024.

Complaint definition: Dissatisfaction that your care call was missed yesterday, causing you to miss an appointment.

Resolution requested: To ensure scheduled care calls are delivered.

We have logged this as a **Stage 1** complaint under our procedure, and this email is an acknowledgement of your complaint and a response to issues raised.

I am sorry we failed to attend your care call yesterday morning, resulting in you missing an appointment. When I spoke to you yesterday, I was not able to confirm why this error had occurred as I needed to speak with the team on duty and investigate it further.

Having reviewed the records and spoken to colleagues, I can see that unforeseen colleague absence meant that calls were reallocated to other colleagues, and, in an administrative oversight, your call missed and not reallocated.

We are sincerely sorry for this error and the impact it had on your scheduled health appointment. As I discussed with you, we are happy to provide any assistance in rebooking this appointment, and if you need us to adjust your call time to accommodate the appointment, we will be happy to do this.

I have spoken to the team and reminded them that, on such occasions where we need to reallocate calls due to unforeseen absence, a secondary check must be undertaken to ensure no calls are missed.

Once again, I am sorry for the service failure you experienced, and I thank you for the opportunity to resolve it for you.

If you remain dissatisfied with this response, you have the right to proceed to Stage 2 of our procedure. A copy of the customer complaint procedure is attached.

The complaint should be logged on SharePoint and a draft copy of the response must be forwarded to the C&S Complaint Coordinator as a Step 1 complaint prior to issue. In this example, the case should be logged as received on 28 February 2024 and recorded as acknowledged and responded to on 29 February 2024 (if the Complaint Coordinator has approved it).

Appendix 3

Summary of Process: Complaints

