

# Complaints, Compliments and Suggestions Procedures

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## 1. Purpose

- 1.1 Langley House Trust and its subsidiaries (the Group) encourages feedback from all those who use its services.  
The use of this procedure is seen as one way to obtain feedback for us to improve the quality of services and the level of satisfaction, and to celebrate where this is currently done well.
- 1.2 The purpose of this procedure is to ensure a consistent approach to complaint handling, registering compliments and reviewing feedback.
- 1.3 The organisation is committed to complying with the Housing Ombudsman complaints handling code and will audit the complaints process against this annually completing the Housing Ombudsmans self-assessment form and will report the findings to the Trustees, including any actions to ensure compliance against the code.

## 2. Definitions.

- 2.1 For the purpose of this procedure a complaint is defined as any expression of dissatisfaction, however made, about the standard of service, actions by the organisation, its own staff, or those acting on behalf, affecting an individual client or a group of clients. The client does not have to use the word complaint in order for it to be treated as such.
- 2.2 A compliment is defined as an expression of satisfaction, with the service received. A compliment may be made about an individual staff member, team or a service as a whole.

## 3. Examples of possible issues that may result in a complaint

- 3.1 The below are examples of types of issues that may result in a complaint. This is not an exhaustive list.
- 3.2 An expression of dissatisfaction about the standard of service
- 3.3 Action on lack of action by staff affecting an individual or group
- 3.4 An allegation that staff have failed to observe proper procedures
- 3.5 An allegation that there has been an unacceptable delay in dealing with a matter.
- 3.6 An expression of dissatisfaction about how an individual has been treated by a member of staff.
- 3.7 An incident or issue raised by an external source or 3<sup>rd</sup> party (e.g. a neighbour)
- 3.8 A complaint about anti-social behaviour from a Langley House Trust client **will not** be regarded as a complaint unless it is about the organisations handling of the behaviour

## 4. Who can make a complaint

- 4.1 Anyone can make a complaint about Langley House Trusts services. This includes but is not limited to clients, clients family, friends or advocates, neighbours and other professionals the organisation works with.
- 4.2 The time limit for raising a complaint is 6 months from the occurrence of the incident.

## 5. Informal feedback.

- 5.1 The organisation welcomes feedback from clients and there are a number of ways in which this can be done. We undertake periodic feedback questionnaires and where appropriate undertake exit interviews however clients are encouraged to give feedback at any time. This can be done via feedback cards or via e-mail.
- 5.2 Each Service has '**Feedback Cards**' available and a Feedback Poster displayed. (See Appendix 3)
- 5.3 Feedback can be both positive and negative. Clients can complete the card anonymously. Clients can also indicate on the card that they would like further discussion on the issue they have raised with a staff member. This feedback will be reviewed at service level.
- 5.4 Feedback cards received locally will be scanned by the service and emailed to [feedback@langleyhoustrust.org](mailto:feedback@langleyhoustrust.org) by staff.
- 5.5 Feedback can also be sent directly via mail at [feedback@langleyhoustrust.org](mailto:feedback@langleyhoustrust.org). This e-mail is received by the Quality team.
- 5.6 Feedback whether positive or negative is audited monthly and will help shape service delivery in the future.

## 6. How to make a complaint

- 6.1 Complaints can be made verbally, in writing, via e-mail at [feedback@langleyhoustrust.org](mailto:feedback@langleyhoustrust.org) or via telephone on 03330035025 and select option 2.
- 6.2 Complaints relating to services will initially be dealt with by the relevant service management team.
- 6.3 Complaints relating to the wider organisation will initially be dealt with by the quality team.

## 7. The stages of the complaint procedure

### 7.1 Stage 1- Infomal/local issue

- 7.2 This stage aims to sort out minor problems as quickly as possible. It involves a specific discussion between clients and staff. Clients may wish to bring someone to explain their problem or complaint
- 7.3 Clients should be advised of their right to make a formal complaint if they wish to do so and informed of their rights under the Complaints Policy & Procedure.
- 7.4 There would be a clear expectation that the client's 'issue' needs a response and there is agreement regarding what is, or is not, going to happen following this discussion. A response should be given to the client within 5 working days.

7.5 All Stage 1 complaints need to be registered on the ACC incident management system and should be closed once resolved.

## **7.2 Stage 2 - Formal Stage**

7.2.1 If clients are not happy with the outcome of Stage 1 they can register a formal complaint within 30 days of Stage 1 being closed.

7.2.2 Staff can provide information and assistance or help to find someone else to do this on behalf of the client. A list of advocacy agencies is provided on the notice board within the service.

7.2.3 Complaints raised by external sources (e.g. a neighbour) will be entered as 'a formal stage 2 complaint and should be recorded as such on the ACC system.

7.2.4 The Manager of the service will have initial responsibility for dealing with all complaints and making sure proper records are kept. Where the complaint involves the Service Manager, their line manager or another senior manager will have responsibility for dealing with it.

7.2.5 All formal complaints need to be logged using ACC system and complainants will receive a written acknowledgement from the Project Manager within 5 working days using the template in Appendix 1

7.2.6 Our aim is to investigate all complaints properly and give complainants a reply within 10 working days from receipt of the complaint, setting out how the problem has been dealt with.

7.2.7. Where this is not possible, an interim response will be made informing complainants of action in progress or being considered.

7.2.8 At the end of the investigation complainants will be given a written response about the outcome of the issue raised using the template in Appendix 2

7.2.9 If complainants are not happy with the outcome of Stage 2 they can request a further review within 30 days of Stage 2 being closed.

## **7.3 Stage 3 Review of complaint Stage**

7.3.1 If the complainant is not satisfied with the response to Stage 2, they can ask for the complaint to be reviewed. It will be reviewed by a different member of staff to the one who initially investigated the complaint.

7.3.2. The review will be by an independent peer to the original complaint investigator or escalated to someone at a more senior level. A formal response will follow within 20 days of the review being acknowledged.

7.3.3 If complainants remain dissatisfied after review, they have the right to refer externally. This would normally need to be within 30 days of Stage 3 being closed (which is the end of the internal complaints process).

## **8 Closing Complaints**

8.1 A complaint will be considered closed when the complainant has been written to, outlining what has been done to resolve the complaint, actions to rectify the complaint have been agreed and the client has indicated that they are satisfied with the outcome.

8.2 The complainant must be written to informing them that the complaint is closed and giving opportunity to feedback further or to escalate the complaint externally using the template in appendix 2.

## **9. Referring a Complaint Externally**

### **9.1 Independent Housing Ombudsman Scheme**

9.1.1 If clients remain dissatisfied, they have the right to refer their complaint to the Independent Housing Ombudsman Scheme. This can be done by clients in all type of service provision.

9.1.2 The Ombudsman will investigate a complaint, but generally will not do so unless the internal complaints procedure has been completed first

9.1.3 The Ombudsman can be contacted directly at:

The Housing Ombudsman Service,  
81 Aldwych, London, WC2B 4HN  
Telephone: 02074213800.  
E-mail: [info@housing-ombudsman.org.uk](mailto:info@housing-ombudsman.org.uk)

### **9.2 Care Quality Commission**

9.2.1 Clients who are in accommodation in care services can complain to the Care Quality Commission.

9.2.2 If clients feel dissatisfied with the service then an independent complaint can be made to the Care Quality Commission.

9.2.3 The National contact details for the Care Quality Commission are:

Care Quality Commission National Correspondence,  
Citygate, Gallowgate, Newcastle upon Tyne, NE1 4PA  
Telephone: 03000 616161  
E-mail: [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

### **9.3 Safeguarding Authorities**

9.3.1 If clients have been abused (which can include physical, mental or sexual abuse) and feel they cannot speak to Group staff then the safeguarding authority can be contacted directly.

9.3.2 The contact details of the local safeguarding authority are on the notice board of the service.

### **9.4 Advocacy/Support**

9.4. SOVA Support for Vulnerable Adults (<http://www.sova.org.uk/>) does not handle complaints but has worked with the Group client groups as advocate/support.

## **10. Formal Complaints received from External Agencies**

10.1 Where appropriate we would encourage external agencies to raise concerns initially with the local service or department however we recognise that external agencies may feel that this is not appropriate and would like to raise a concern formally.

10.2 External agencies with concerns about service delivery should do so initially to the Quality Department.

10.3 The contact details for the team are:

[feedback@langleyhousetrust.org](mailto:feedback@langleyhousetrust.org)

or

PO Box 6364, Coventry CV2 2QJ  
Or 03330035025 option 2.

- 10.4 The quality team will open the complaint on the ACC system and will acknowledge receipt of the complaint within 3 working days.
- 10.5 The quality team will investigate the complaint and will send a written response within 15 working days of the complaint being opened.
- 10.6 If the complainant is dissatisfied the complaint will be escalated to the Director of Quality and Compliance or another Director in their absence. This should be done within 30 days of the initial response being received
- 10.7 The Director will review the complaint and the response and will issue a final viewpoint letter within 10 working days of the escalation notification being received.
- 10.8 Once the Langley House Trust internal procedures are concluded the external agency can refer to an external regulatory body. These regularity bodies are documented in section 5 of this procedure.

## 11. Time Frames for responding to complaints

<b>STAGES</b>	<b>Initial response time frame</b>	<b>Resolution response time frame</b>	<b>Director review for external agencies</b>
<b>Stage one- Informal/Local Issue</b>	When issue is raised		
<b>Stage two- Formal Complaint</b>	<b>5 working days</b>	<b>10 working days</b>	
<b>Stage three – Review of Complaints stage</b>	<b>5 working days</b>	<b>20 working days</b>	
<b>External Agencies</b>	<b>3 working days</b>	<b>15 working days</b>	<b>10 working days</b>

## 12 Compliments

- 12.1 Our aim is to use compliments about a service or an individual staff member to celebrate and share good practice throughout the organisation and encourage staff to provide an excellent service.
- 12.2 Compliments can be verbal, written including on the feedback cards available at projects or e-mailed to [feedback@langleyhousetrust.org](mailto:feedback@langleyhousetrust.org)

## 13. Monitoring and Lessons Learnt

- 13.1 The organisation is committed to developing a positive complaints handling culture where transparency and accountability is embedded.
- 13.2 All complaints and compliments will be audited by the quality team on a monthly basis to monitor outcomes and to ensure that they are being dealt with appropriately and within the set time frames, and to monitor and address any trends. The organisation will report on the management of complaints through monthly key performance indicators.

- 13.3 The organisation is committed to learn from issues that have been raised and to take steps to review and improve services and/or internal processes. This will be done as part of quality review process including lessons learnt meetings.
- 13.4 The organisation will feed back to clients any themes from complaints reporting as well as any wider learning and improvements that have resulted from complaints received.

## **14. Equality, Diversity & Inclusion**

- 14.1 The Group upholds the principle of equality for all as a framework that enables individuals to access opportunity, participate and contribute in ways that are fair and inclusive, avoiding discrimination and challenging inappropriate attitudes.
- 14.2 Recognising that it works with and serves individuals in a diverse society, the Group seeks to act in a fair and equitable way to all.
- 14.3 In respect of complaints, compliments and suggestions the Group will monitor all returns to highlight any patterns of discrimination or harassment against particular groups including by gender, ethnicity, age and disability.
- 14.4 The Group recognises that some clients require assistance to complain, give a suggestion or compliment due to learning disabilities, language or literacy difficulties.
- 14.5 The organisation will ensure that the complaints process is available in easy read and also in video format for clients to access.

## **15. Client Involvement**

- 15.1 The Group restates its commitment to the genuine and meaningful involvement of clients in the formation and review of all policies which have an impact on service delivery. Following the scheduled Group committee approval, this procedure will be referred for input from clients

## **16. Data Protection and Confidentiality**

- 16.1 As part of its work, Langley House Trust and its subsidiaries (the Group) will collect, hold and use information about people who receive services from or who work with or for the Group. This will include the Group's clients, staff, supporters, volunteers, partners and suppliers and those applying to the Group for services or employment.
- 16.2 The Group upholds the rights of data subjects to have their information processed in a lawful, transparent and fair manner, in accordance with the Data Protection Act 1998 and the requirements of the General Data Protection Regulation 2018 and will process all personal information in line with its own Data Protection and Confidentiality Policy and Procedures. Failure to do so or to report a potential breach of data confidentiality may be investigated under the Group's Disciplinary Procedures.

# DOCUMENT CONTROL

## Document Information

<b>Version Number</b>	Version 8
<b>Dated</b>	18 <sup>th</sup> February 2022
<b>Author / Lead</b>	Corporate Director Quality and Compliance
<b>Date of Last Review Date</b>	April 2019
<b>Date of Next Formal Review</b>	February 2023
<b>Contact</b>	Head of Quality

## Revision History

<b>Version Number</b>	<b>Date Version</b>	<b>Nature of Change</b>	<b>Date Approved</b>
2	14 <sup>th</sup> May 2010	Minor updates	May 2010
3	11 <sup>th</sup> Nov 2011	Split policy and procedures and made minor amendments to section 9	
4	13 <sup>th</sup> Nov 2014	Procedure changed to incorporate feedback from the OCC dated 20.09.12. Also incorporated freepost and e mail information	
5	September 2016	Updated information on CQC notifications. Changed 'Service User' to 'Client'. Re wording Section 4 for complaint handling and recording New Section 8 introduced to note how 'Suggestions' may be considered. Appendix 3 provides Client summary for making a 'complaint'	
6	June 2017 Interim update only	Included deadline (30 days) for complainant to respond to latest correspondence – item recommended by internal audit Jan/Feb17 Section 10 notes Disciplinary and Grievance procedures (10.5) Added Appendix 4 – guide for external partners needing to complain Interim amendments are in response to Internal Audit review of Communications (Jan'17)	June 2017 (APO)
7	April 2019	Minor terminology updates for scheduled review.	April 2019 (APO & ET)
8	February 2022	Review and changed to ensure compliance with Housing Ombudsman complaint handling	

		code. Definition of complaint updated. Added how to make a complaint, closing a complaint and lesson learnt section. Complaints stages clarified and clarity given on the team responsible for overseeing complaints.	
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