

PP049: Complaints and Feedback Policy and Procedure

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This internal Policy and Procedure has been produced as all Disability Equality Scotland staff, irrespective of their role, have a part to play in delivering a quality service. All staff should familiarise themselves with the Complaints Policy and Procedure.

Complaints Policy

1. Complaints Policy Statement

The handling of complaints is of great importance to Disability Equality Scotland (DES). We take feedback very seriously, striving to improve our business and service for the benefit of our staff, members and stakeholders. Our goal is to treat each case impartially, sympathetically and in a consistent manner with the minimal possible delay. We aim to act in a courteous, reasonable and prompt manner.

We view complaints as a potential opportunity to learn and improve our services, as well as a chance to put things right for the person or organisation that made the complaint.

It is crucial that any complaint or dissatisfaction about DES is dealt with quickly, reasonably, and a resolution is achieved whenever possible.

It is also important that positive feedback, comments and compliments are recorded and used to recognise our successes and inform future practice.

2. Policy definition for complaints

In this policy, complaints are defined as an expression of dissatisfaction by one or more members of the public or one or more members of Disability Equality Scotland and is about the organisations action or lack of action, or about the standard of service provided by or on behalf of DES. Complaints are distinctive from negative feedback in that the person advancing the complaint is asking for specific changes or action as a direct result of their complaint.

Complaints and feedback can be received from a wide range of forms including verbally in person, verbally over the telephone, posted letter and email.

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If an individual, or someone else acting on their behalf, submits negative feedback directly about DES and asks for remedial action to be taken, DES will clarify with the individual (or their representative) if the feedback should be considered as a complaint.

Remedial action as a result of a complaint is defined within this policy as: an action that must be taken to resolve, rectify or mitigate any general issue identified.

3. Policy standards for handling complaints and feedback

The Board of Directors has overall responsibility for this policy.

Complaints and feedback are reviewed on a monthly basis by the CEO to identify trends and take remedial action if necessary. Additionally, Directors review complaints and feedback every three months through quarterly Board Papers.

DES will publicise how to make a complaint or give feedback on the DES website along with an Easy Read version, as well as providing paper copy and alternative formats on request.

When dealing with complaints and feedback, DES will approach the matter in an open and transparent way and consideration of the concerns will be fair and reasonable.

Complaints will be dealt with as a matter of priority by all members of DES staff. Response deadlines to the complainer are indicated in the Complaints Procedure.

When handling complaints, confidentiality will always be respected. When investigating and recording complaints, the complainer's identity and the subject of the complaint will be kept to a 'need to know' basis by the individuals handling the information.

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Complaints Procedure

1. Introduction

It is expected that most complaints will be informally resolved to the complainer's satisfaction. This procedure has been developed to assist our staff to achieve a standard of quality and consistency when addressing complaints and feedback.

Staff should be aware that the person making the complaint may show emotions such as anger, frustration, annoyance or be extremely upset with the situation. Staff should aim not to react to their emotion by becoming angry or upset. Please try to stay calm and recognise that the person may have difficulty in expressing or communicating their dissatisfaction. The organisation has a zero-tolerance approach to abuse of our staff and DES will not tolerate abusive or threatening behaviour towards its staff, directors, or members.

You should always inform the person making the complaint of our complaint's procedure, what happens at each stage and deadlines for each stage. Providing this information gives clarity to the complainer and will help to manage their expectations of when they will receive information from DES on the outcome of their complaint. This structured approach provides transparency for the complainer and fairness towards the person or service being complained about. **Please note** deadlines for each stage are highlighted in **bold red text** within the procedures.

In the best interest of the organisation and to show fairness and transparency, the Board of Directors may delegate a complaint investigation or the appeal process to an external agency.

2. Complaint Overview

When a complaint is being made, there are three stages in which the complaint might be resolved:

• Stage 1: Resolution

• Stage 2: Investigation

• Stage 3: Appeal.

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Stage 1 - Resolution involves a complaint being received and informally resolved by a member of staff.

Stage 2 –**Investigation** occurs if the complainer feels that the complaint cannot be informally resolved at staff level. The complaint is then formally escalated to a Manager for resolution or investigation. (A formal complaint received by DES also enters the process at Stage 2.)

Acknowledgement of the complaint will be made within 5 working days from receiving the complaint. The complaint will be investigated within 28 working days of receipt. If it is going to take longer, the complainer will be advised accordingly in a timely manner. The complainer will receive a letter detailing the outcome of their complaint and identify the route for appeal.

Stage 3 – **Appeal**. If the complainer feels that their formal complaint, after investigation, is still unresolved they can submit an appeal. An appeal must be submitted within **14 working days** of the complaint outcome. The complainer will be asked to clarify what they wish the organisation to do in respect of their complaint, confirming what areas they are still dissatisfied with and why? An outcome to the complainer's appeal will be given, where possible, within **28 working days**. The appeal outcome is final and there will be no further review of the complaint from this point.

A Manager will start the appeal process and report to the CEO. The CEO will then review the appeal findings and will decide to either uphold or dismiss the complaint. The decision to uphold or dismiss will be final.

If a complaint relates to the Chief Executive Officer or a Manager then the Board of Directors may direct the actions required under stage 2 and if necessary, stage 3. The Board of Directors has the authority to delegate duties under stage 2 and 3 to an external agency.

3. Complaint Outcome

If 'Stage 1 Resolution' was not achieved to the complainer's satisfaction the complaint will have been escalated to 'Stage 2 Investigation'. This means the complainer will receive details of the complaint outcome within the deadlines stated within this procedure and the details will include if the complaint has been upheld or not, any remedial action taken or organisational learning, the appeal process (see 'Stage 3 Appeal') and must include an apology if the complaint has been upheld.

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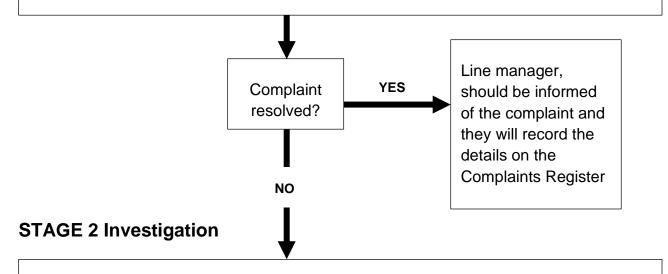
4. Complaint Process

A member of the public or DES member indicates they wish to make a complaint.

STAGE 1 RESOLUTION

Resolution

- 1. Every appropriate effort should be made by the staff member to resolve the complaint.
- 2. The complainer may request to speak directly with a Manager or CEO. The staff member will provide these details and the Manager or CEO will attempt resolution within 5 working days.



Acknowledgement of the complaint

- The complaint will be passed to a Manager or CEO who will acknowledge the
 complaint within 5 working days, (usually in the same format that the complaint was
 received), from receiving the complaint.
- If the complaint has been given either verbally or in writing to a Manager or CEO then
 they can either decide to acknowledge the complaint within 5 working days or can
 delegate this task to another member of staff.
- The Manager or CEO will update the Complaint Register and ensure all Directors are aware of any reputational or financial risk via Board Papers and Risk Management Log.

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Investigation of the complaint

- A Manager will be identified as the investigator for the complaint. The level of this manager will depend on; 1) how serious the complaint is, 2) availability of managers to carry out an investigation, 3) if the complaint relates to a person, the level of that person's position within DES.
- The complaint will be investigated within **28 working days of receipt**. If it is going to take longer, the complainer should be advised accordingly in a timely manner.



Investigation response to the complainer

- When the investigator has fully investigated and reviewed the complaint, they should provide a response within the 28 working day period to the complainer using the complainer's choice of contact format.
- The response to the complainer should; confirm the complaint made against DES, the outcome i.e. 'complaint upheld', remedial actions for resolution, an apology where a complaint has been upheld or partially upheld and details of how to make an appeal.

STAGE 3 APPEAL

Appeal

- Where the complainer feels that their complaint is still unresolved, they can submit
 an appeal. The appeal will be submitted to the Chief Executive Officer. An appeal
 must be submitted within 14 working days of the complaint outcome. The
 complainer will be asked to clarify what they wish DES to do in respect of their
 complaint.
- Depending on the nature of the complaint and who has previously been involved, the CEO can take the appeal forward or refer to relevant Manager or Director as appropriate to the complaint. This person will be known as the investigator.
- The investigator will make recommendations on their review of the complaint. The investigator will decide whether to uphold or decline the recommendations.
- An outcome to the complainer's appeal will be given, where possible, within 28
 working days. The appeal outcome is final and there will be no further review of the
 complaint from this point.

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5. Complaints Register

The Complaints Register is restricted to Managers and CEO. It is used to record the complaint and is restricted to protect the details of the complaint and staff who may be identified from the complaint. The register also holds information on actions taken and lessons learned to improve our services.

The Complaints Register is restricted and the password for this spreadsheet can be gained from the CEO. Additionally, reporting governance to the Board of Directors lies with the CEO.

Managers and CEO are responsible for updating the complaints register which will include the date complaint received, actions taken, lessons learned and for ensuring deadlines are met. No personal data will be included or held within the register and reference to the complainer should be recorded by their initials.

6. Special Conditions

(Chief Executive Officer and the Board of Directors)

There may be occasions where the complaint is against the Chief Executive Officer. In such cases, the Appeal process will be undertaken by the organisation's Board of Directors. The Convenor of the Board may appoint a Trustee(s) to lead the review of the complaint, or in certain cases, may appoint an unrelated external agency to carry out the review. The Trustee(s) or external agency will then make recommendations to the Convenor of the Board who will decide whether to uphold or decline the recommendations. This decision will be final. Complaints against the Convenor will go to another Board Director.

Feedback

We will always welcome positive and negative feedback from our service users as it lets us know what they think about our services. This will allow us to look at where our services are working well, and also where we need to improve. We will take feedback seriously as it allows DES to ensure that we are providing the best possible service.

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7. Feedback Process Chart

A member of the public or service user gives positive or negative feedback.

Thank the person for their feedback

Always thank the person for their feedback. This should be done in the same format
in which you received the feedback i.e. verbally thanking the person or returning a
response of thanks to their e-mail or letter if the feedback was written format.



Record the Feedback

- You should now record the feedback on the Compliments and Feedback spreadsheet which is located in the organisation's server.
- This spreadsheet is available to all staff and line managers should ensure that their staff are aware of any feedback.
- For positive feedback Ensure staff are recognised for the excellent work they have delivered.
- For negative feedback consider how to improve the service or behaviour within your team. Line managers may have to consider supporting individual staff with improvements or behavioural changes during their performance review meetings.



Why is feedback important?

- Feedback is reported to the Board of Directors on a quarterly basis. This is a transparent process and allows managers to see where things are going well, identify best practice and highlight areas for improvement.
- Feedback is also important as most of our funders require reassurance through
 quality feedback statements that their funding is being used well. When we receive
 negative feedback, we want to show our funders that we will improve our services
 and how our future services will be delivered to meet the needs of our service users

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Data Protection, Confidentiality and Communication

8. Storage of Complaints and Feedback

Storage of, and access to, copies of feedback, complaints and any relevant associated correspondence will be kept in accordance with the organisations GDPR Privacy Policy, Confidentiality Policy and Data Protection Act 2018 Policy.

9. Personal Identifiable Information

Staff have the right to request sight of Personal Identifiable Information (PII) held by DES in any recorded complaint and have the legal right to request that PII be removed or corrected if the complaint is not upheld, is inaccurate or if the record is not up to date. DES work in accordance with the Information Commissioner's Office (ICO) guidelines on personal data.

Any decision to hold complaint data that identifies any DES staff will be relayed to the person involved and the reasons why this decision was made will be explained in writing by the person who made the decision. This written explanation will provide a timeframe set out as to when the situation will be reviewed. Unless there is an expectation of legal action this will never extend beyond six months.

10. Confidentiality

Confidentiality will be respected at all times. Information concerning complaints will only be shared with individuals who are engaged in the process outlined in this procedure, on a 'need to know' basis. Any inappropriate breach of confidentiality may result in disciplinary action.

11. Communication

Wherever possible, appropriate and where our complaints procedure allows, we will involve the person complained about in the discussions relating to the resolution of a complaint in issues:

- which are at an early stage in the process, the issue is straightforward and can be resolved easily and require little or no investigation
- where the complainer and the person complained about both have a willingness to assist the resolution of the complaint through discussion

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If the complaint resolution is used, then it may take the form of:

- a direct discussion between the complainer and the person complained about (if both are willing for this to happen)
- an impartial third person who is acceptable to all parties conveying information between those involved
- an impartial third person who is acceptable to all parties helping those involved to talk to each other and find a solution

As part of a complaint investigation, we will always arrange for the person complained about to provide their response to the issues raised in the complaint.

Wherever possible, the person complained about will be given the opportunity to comment on the information provided by the complainer, and to offer any additional information to support their response.

The person complained about will receive a copy of any decision outcome sent to the complainer, and this will be provided (wherever possible) at the same time as it is sent to the complainer.

Irrespective of whether a complaint is upheld or not, the person complained about will be told straight away about any implications relating to the decision, including any potential 'next steps' and what this might mean for them.

The person complained about will be involved in any learning or actions which result from the complaint outcome decision. We will also give the person complained about the opportunity to discuss their experience with a Manager as to how we have dealt with the complaint and how this has impacted on them.

Unacceptable Actions

We believe that complainers have a right to be heard, understood and respected. We work hard to be open and accessible to everyone. Occasionally, the behaviour or actions of individuals using our services makes it very difficult for us to deal with their complaint. In a small number of cases the actions of individuals become unacceptable because they involve abuse of our staff or our process.

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When this happens, we have to take action to protect our staff. We also consider the impact of the behaviour on our ability to do our work and provide a service to others.

12. Unreasonable demands

A demand becomes unacceptable when it starts to (or when complying with the demand would) impact substantially on the work of the office:

- repeatedly demanding responses within an unreasonable timescale,
- insisting on seeing or speaking to a particular member of staff when that is not possible,
- repeatedly changing the substance of a complaint or raising unrelated concerns.

An example of such impact would be that the demand takes up an excessive amount of staff time and in so doing disadvantages other complainers and prevents their own complaint from being dealt with quickly, and/or if the impact on staff time detracts the organisation from delivering on its core business.

13. Unreasonable levels of contact

Sometimes the volume and duration of contact made to our office by an individual cause's problems. This can occur over a short period, for example, a number of calls in one day or one hour. It may occur over the lifespan of a complaint when a complainer repeatedly makes long telephone calls to us or inundates us with copies of information that has been sent already or that is irrelevant to the complaint.

We consider that the level of contact has become unacceptable when the amount of time spent talking to a complainer on the telephone, or responding to, reviewing and filing emails or written correspondence impacts on our ability to deal with that complaint, or with other people's complaints.

14. Unreasonable refusal to co-operate

When we are looking at a complaint, we will need to ask the individual who has complained to work with us. This can include agreeing with us the complaint we will look at; providing us with further information, evidence or

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comments on request; or helping us by summarising their concerns or completing a form for us.

Sometimes, an individual repeatedly refuses to cooperate and this makes it difficult for us to proceed. We will always seek to assist someone if they have a specific, genuine difficulty complying with a request. However, we consider it is unreasonable to bring a complaint to us and then not respond to reasonable requests.

15. Unreasonable use of the complaints process

Individuals with complaints about DES have the right to pursue their concerns through a range of means. They also have the right to complain more than once about the organisation if subsequent incidents occur. This contact becomes unreasonable when the effect of the repeated complaints is to harass, or to prevent the organisation from pursuing a legitimate aim or implementing a legitimate decision. We consider access to a complaints system to be important and it will only be in exceptional circumstances that we would consider such repeated use is unacceptable – but we reserve the right to do so in such cases.

16. How we let people know we have made this decision

When a DES employee makes an immediate decision in response to offensive, aggressive or abusive behaviour, the complainer is advised at the time of the incident. When a decision has been made by a Manager or CEO, a complainer will always be given the reason in writing as to why a decision has been made to restrict future contact, the restricted contact arrangements and, if relevant, the length of time that these restrictions will be in place. This ensures that the complainer has a record of the decision.

17. The process for appealing a decision to restrict contact

It is important that a decision can be reconsidered. A complainer can appeal a decision to restrict contact. If they do this, we will only consider arguments that relate to the restriction and not to either the complaint made to us or to our decision to close a complaint.

An appeal could include, for example, a complainer saying that: their actions were wrongly identified as unacceptable; the restrictions were

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disproportionate; or that they will adversely impact on the individual because of personal circumstances.

A Manager or CEO who was not involved in the original decision will consider the appeal. They have discretion to quash or vary the restriction as they think best. They will make their decision based on the evidence available to them. They must advise the complainer in writing that either the restricted contact arrangements still apply, or a different course of action has been agreed.

We may review the restriction periodically or on further request after a period of time has passed. Each case is different. We will explain in the letter setting out the restriction what review process will be in place for that restriction and in what circumstances they could request this be reconsidered.

How we record and review a decision to restrict contact

We record all incidents of unacceptable actions by complainers. Where it is decided to restrict complainer contact, an entry noting this is recorded. Each quarter a report on all restrictions will be presented to our Board of Directors so that they can ensure the policy is being applied appropriately. A decision to restrict complainer contact as described above may be reconsidered either on request or on review.

Definitions

Complaint - defined as 'a statement that something is unsatisfactory or unacceptable'. Complaints are distinctive from feedback. There is normally an expectation of a personalised response. Complaints can be used to improve future procedures and training. There are some subjects DES will not deal with through our complaints handling procedure. These include: an explanation of policy or procedure; a Subject Access Request.

Feedback (including Comments and Compliments) - 'information or a statement of opinion about a service that has been received'. Feedback can be negative, positive or neutral. Normally, there is no expectation of a personalised response to feedback. Feedback can be used to improve service delivery.

Remedial Action - There may be occasions were a complaint or feedback will result in a remedial action. This is an action you had to take to rectify or mitigate any general issue identified. Any action must be recorded as it may later be identified as best practice and could influence future procedures.

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Date approved by Board of Directors: 26 October 2020

Date implemented and communicated to all employees: 26 October 2020

Review Date: October 2022

Signed:

Linda Bamford Interim Convener

I Sampl

Morven Brooks
Chief Executive Officer

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Appendix 1: Complaints Register

Complaint Number	Date received	Complainer (initials only)	Investigator	Upheld (Yes or No)	Outcome / Letter date	Action Completed (Yes or No)	Closed (Date & initials)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							

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Appendix 2: Compliments and Feedback Record

Date	Name, Phone, Email	Compliments / Feedback	Action Taken	Date Actioned and by Who

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