

SHREWSBURY HOUSE

COMMUNITY ASSOCIATION

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Complaints Policy & Procedure

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Contents Page

1.0 Summary	4
2.0 Introduction and Objectives	4
3.0 Scope.....	4
4.0 Definitions	4
5.0 The Complaint Process for SHCA	5
6.0 Vexatious Complaints	8
7.0 Training and Awareness.....	9

Appendix 1: Flowchart of Complaints Process: Shrewsbury House Community Association

1.0 Summary

SHCA sets out to provide high quality accessible services to the community we serve. We are keen to know if things go wrong and learn from complaints raised so that we can improve services at the Centre. This policy ensures that any complaints are dealt with quickly and efficiently to ensure the smooth running of the Centre and that they are managed fairly and lessons learned.

2.0 Introduction and Objectives

The purpose of this policy is to provide guidance to the organisation about promptly managing complaints raised and ensure the organisation learns from any of these cases that may occur.

3.0 Scope

This policy applies to all employed staff, members of the public, users of the Community Centre and Trustees at Shrewsbury House Community Association.

SHCA aims to ensure there is a simple and clear complaints process that is easily accessible. It is published on the SHCA website and is part of the induction and training of staff.

This policy should be used in conjunction with the following Policies:

- Safeguarding Policy
- Whistleblowing Policy
- Health & Safety Policy
- Lone Working Policy
- Equality & Diversity Policy

4.0 Definitions:

A complaint is:

‘An expression of dissatisfaction, whether justified or not.’

A third party* is any person or organisation acting on behalf of or making enquiries for the complainant (e.g. advice organisations, social workers, family or friends).

- This requires written consent to that effect from the complainant.

5.0 The Complaints Process for SHCA

Stage 1.

1. Complaints received must be reported to the Manager in the first instance.

Staff must be report immediately if the concerns relate to the safety, integrity or reputation of the Centre or its users.

Verbal complaints are not considered as complaints unless they are put in writing.

The complaint will be logged and kept on file in line with Data Protection Law. Any small issues will be dealt with immediately and the outcome recorded and feedback given to the complainant.

(See Point 10 below for any concerns or complaints relating directly to the Manager.)

2. Complaint details, outcomes and actions are recorded and used for service improvement.
3. If the issues cannot be resolved immediately, the Manager will investigate further and respond accordingly, liaising with employees, users and Board Trustees where applicable.
4. The Manager will acknowledge the complaint within 5 working days of receipt of complaint and aim to investigate and give a written response within **15 working days** of the complaint being recorded.
5. In the event that the organisation is unable to resolve a complaint to the agreed timescale, the complainant will be informed of the reason for the delay by The Manager and kept up to date with progress until the issue is resolved.
6. All matters relating to the complaint/concern will be treated as strictly confidential, in line with the Data Protection Act 2018.
7. If a complaint is made about an individual member of staff, that member of staff will be informed. Organisations have an equal duty of care to members of staff complained about as well as complainants.

Stage 2

8. Right to appeal

If the complainant feels that the Manager has not dealt with the complaint appropriately, they have the right to appeal in writing within **10 working days** of the Manager's letter.

The Board Complaints Panel meeting will be convened within **15 working days** of the appeal letter.

The Board Complaints Panel will review the investigation and the Manager's response to the complaint to establish whether the outcome is proportionate and fair.

The report from the Board Complaints Panel will then be heard by the full Board of Trustees at the next scheduled Board meeting and their decision will be final. A written reply will be sent to the complainant and all parties involved **within 15 working days** of the full Board meeting.

Stage 3

In exceptional circumstance, The Board can authorise an independent review of the complaint if though to be appropriate.

A complainant can further refer to the Charity Commission if still not satisfied with the organisation's response. www.charitycommission.gov.uk Tel: 0300 066 9197

9. Any breaches of confidentiality throughout this process will be subject to disciplinary procedures as per the conditions of our Confidentiality Policy. Trustees comply with the Code of Confidentiality.
10. If the matter relates directly to the Manager, then the matter will progress immediately to Board Complaints Panel. (See Stage 1.1. above)
11. The Manager will provide an annual report on all complaints received and the outcome from investigations to ensure the organisation learns from these as broadly as possible. Details of complaints are also included in the SHCA Annual Report & Accounts.
12. When we get things wrong we will seek to redress the matter and
 - act to accept responsibility and apologise,
 - explain what went wrong and why and put things right by making any changes required
 - learn lessons from mistakes and change policies and practices where proportionate and sensible to do so.
 - ensure further training for staff if required

The Board Complaints Panel

The Board Complaints Panel comprises of:

- The Chair of SHCA or Vice Chair
- Two Board Trustees (One of whom should be the Safeguarding Lead)
- The Centre Manager (Unless the complaint involves the Centre Manager directly)

SHCA aims to ensure

- All complaints are dealt with in a timely manner
- All complaints are investigated fairly and thoroughly.
- Complainants will be treated courteously and respectfully and fairly.
- Complainants will not be treated less favourably than anyone else because of an individual's sex, legal marital or same-sex partnership status, gender, sexual orientation, race, religious or political beliefs, or any other unjustifiable factor (e.g. language difficulties, age, pregnancy and maternity)
- Complaints are generally investigated by someone within the organisation, who is independent of the events complained about.
- In exceptional circumstances the Board may decide it is necessary for an independent person outside of the organisation to be asked to investigate a complaint.
- During an investigation all relevant evidence will be reviewed and this may include speaking to individuals complained about as well as complainants and any third party involved.
- Responses to complainants will include provide clear, evidence based reasons for decisions taken (whether the complaint is upheld or not) and ensure that decisions made are proportionate, appropriate and fair. This involves responding to all substantive points raised within a complaint and explaining why the organisation considers these points are justified or not.
- The organisation will acknowledge if things have gone wrong and take proportionate action to put things right, including apologising. This will include telling the complainant about the lessons learnt and any changes made to the services, guidance and policy as a result of the complaint.
- Complaints are reported to the Trust Board as part of the Managers Report and Annual Report and all learning from them is specified. Complaints are regarded as a source of learning and improvement.
- The organisation aims to undertake regular annual review of complaints to ensure wider learning and identify any trends.

6.0 Dealing with vexatious complaints

We may receive complaints that are deemed vexatious or repetitive. By the term vexatious this refers to activity that is likely to cause distress or irritation, to vex a person to whom it is directed. However, It is important to recognise that all complaints from a single source should not be deemed as vexatious just because some may have been so previously.

In such cases we will consider the following issues:

- Could the complaint fairly be seen as obsessive?
- Is the complainant harassing or causing distress to staff?
- Does the complaint appear to be designed to cause disruption or annoyance?
- Does the complaint lack any serious purpose or value?
- The context and history of the complaint and other complaints made by the complainant

- Is the tone of the complainant confrontational or haranguing?
- Is the complainant having a negative effect on the health and wellbeing of our staff or other users of the centre?
- Does it cause a safeguarding issue to users of the centre?
- Has behaviour of the complainant become abusive aggressive or threatening to our staff on one or more occasion?

Complainants who harass, or have been abusive, aggressive or threatening on one or more occasion toward our staff, or their families or associates – directly or indirectly – will be considered unreasonable.

Any threats or acts of violence will cause direct contact with the complainant to be discontinued. Violence includes behaviour or language (written, oral or in tone or otherwise) that may cause staff to feel afraid, threatened or abused. Examples of unacceptable behaviour includes but not exhaustively threats, verbal abuse, derogatory remarks, rudeness, racist, sexist, homophobic or other harassment based on personal remarks and where complainants are known to have recorded meetings or telephone conversations without consent.

Where complaints are deemed as vexatious, the complainant will be notified in writing that no further correspondence will be entered into on the matter in question.

If further harassment of staff continues the matter will be directly referred to the police or appropriate authority and the organisation may consider taking legal action against the complainant if necessary.

7.0 Training & Awareness:

Staff will participate in Complaints training as part of the overall training schedule and as identified through Staff Appraisal. Users of the Centre will be made aware of SHCA policies and procedures by the Centre Manager as part of the introduction to using the Centre. Policy documents are readily available on the SHCA website. Trustees will attend Complaints Handling Training as part of the ongoing training opportunities for Board Trustees.

Date Policy approved by Board:

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Signature of Chair:

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References:

The Fundraising Regulator Guidance on Complaints Handling for Charities
www.fundraisingregulator.org.uk

Ore Community Centre Complaints Policy

Data Protection Act 1998

Charity Commission Guidance

LBG Complaints Process