

Issue Number: 05	April 2023	Author/Revised By: MA – Quality & Risk Systems Coordinator	Approved By: NB – Chief Executive
		Doc Lead: MA/NB (Interim)	Last Full Review: December 2022

1.0 PURPOSE

Make giving feedback as easy and accessible as possible

Enable staff to seek feedback from clients as part of day-to-day support, checking with clients how best we can support them to achieve their individual goals

Provide feedback opportunities that suit the abilities and preferences of individual clients

Maximise the number of clients who provide feedback

Enable clients to have a key role in ensuring we deliver excellent quality services

Use client experiences as a valuable asset in delivering high quality support services that meet the needs of individuals

Ensure clients understand the value we place on feedback

Identify and share good practice and innovation, both within and outside the organisation

Be able to demonstrate the impact of the services clients have received from Southdown

2.0 INTRODUCTION

Southdown wishes to comply with good practice guidelines issued by the regulatory authorities and the National Housing Federation.

The RSH's (Regulator of Social Housing) Consumer Standard requires Registered Provider to have procedures in place for dealing promptly and fairly with complaints from residents about services.

Care homes and supported living schemes are required by the Care Quality Commission to have a publicly available complaints procedure. It is also a requirement of contracting authorities and health trusts, for housing support, mental health recovery and community wellbeing support services.

3.0 RESPONSIBILITIES

All staff must be aware of this policy and, where appropriate, receive training in receiving and dealing with feedback in a positive manner.

Complaints will be investigated by Managers skilled in dealing with complaints.

Records of formal complaints will be held by the Quality and Risk Systems Administrator.

Lessons learnt meetings will take place following investigation of a complaint. Responsibility for this varies, as per the procedure, depending on the stage of the complaint and who the complaint is about.

Feedback may be verbal or in writing, but complaints must be recorded in writing. It does not have to be the client who writes the complaint down.

4.0 POLICY - GENERAL

Feedback will be accepted from anyone, including external individuals and organisations, in person, by telephone, letter, email, via our website and social media.

This policy covers issues for which Southdown holds responsibility.

Where people provide positive or negative feedback about things beyond the scope of Southdown's responsibility, the service manager will discuss with the person giving the feedback how to proceed.

Southdown encourages feedback and sees this as essential as a learning organisation.

Feedback will be viewed positively, be part of monitoring and improving service quality, and will be dealt with promptly, efficiently and in a fair manner and take into account all relevant circumstances including contradictory views.

Staff emails and all communication about individual cases must be kept concise, factual and contain only what is needed.

Southdown will respond as requested to comments or compliments, but acknowledges the nature of formal complaints and has a Complaints Procedure 1.10b.

5.0 COMPLAINTS

A complaint is defined as *"an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by Southdown, its own staff, or those acting on its behalf, affecting an individual client or group of clients."*

In some limited circumstances we may not deal with a complaint via our Complaints Procedure. These circumstances include but are not limited to:

- Where the issue being complained about happened more than 6 months ago (unless the complaint is about a recurring issue and some instances occurred more recently than 6 months ago)
- Where the complainant has already started legal proceedings to address the issues being complained of, the issue will be dealt with as part of the legal process.
- Where the issue being complained about has already been dealt with via our Complaints Procedure.
- Where the complaint is the first report of anti-social behaviour relating to a Southdown property or tenant. Complaints which relate to Southdown's handling of previous reports of anti-social behaviour are deemed to be within scope of the complaints process, subject to the above exclusions.

If we decide not to accept a complaint, a detailed explanation must be provided to the complainant explaining the reasons why the matter is not suitable for the complaints process and the right for tenants to take that decision to the Housing Ombudsman.

When dealing with a complaint, the Investigating Officer will:

- Deal with the complaint on its own merits
- Act independently and with an open mind
- Take measures to address actual or perceived conflict of interest
- Consider all information and evidence carefully
- Keep the complaint confidential as far as possible, with information only disclosed if necessary to properly investigate the matter or to resolve issues raised.

Where a complaint investigation highlights a failing, the remedy offered will reflect the extent of the failure and the level of detriment caused to the complainant as a result. This can include:

- acknowledging where things have gone wrong
- providing an explanation, assistance or reasons
- apologising
- taking action to redress an issue
- reconsidering or changing a decision
- amending a record
- providing a financial remedy
- changing policies, procedures or practices.

If a complainant is unhappy with the stage 1 complaint investigation and wishes to escalate to stage 2, they should do so within 30 days of receiving our response letter.

Clients will not be discriminated against because they have made a complaint.

All Feedback will be treated confidentially and information will only be shared with those who 'need to know' or who are being consulted, except where explicit permission is given to share information.

All records and documentation will be held securely.

6.0 Compliments

A compliment is defined as *“a direct, significant expression of praise from a client or tenant, their family member or a member of the public, which they have initiated and would like recorded, regarding a service provided by Southdown or the specific behaviour of a member of Southdown staff”*.

Compliments must be recorded locally by divisional services, as per procedure 1.10c, and will be collected for periodic reporting.

We use compliments to:

- understand that our service is to the clients', families' and stakeholders' particular satisfaction
- provide positive feedback to our staff
- influence our organisational and service development
- inform us on ways that we might adjust our procedures or practices to incorporate lessons learnt from good practice

7.0 REASONABLE ADJUSTMENTS

We will make all reasonable adjustments to meet clients'/tenants' specific needs where possible. If a translator or a sign-language interpreter is needed to assist in making a complaint, we will make reasonable attempts to help with this.

Clients/tenants may be supported by advocates, interpreters or other appropriate facility or person they choose, to help give their feedback.

We will assist clients/tenants to make a complaint in a way easiest for them. We will not insist on complaints being made in writing but will record complaints as dictated by clients where needed.

We will consider requests from clients/tenants for more time to comply with our complaints procedure if they feel they would otherwise be unfairly disadvantaged as a result of their disability.

8.0 MONITORING

In line with the Housing Ombudsman's Complaint Handling Code, we will complete a self-assessment of our Housing complaints policy, procedure and complaints statistics annually. This will also be presented to the board.

Related documents

[1-10b Complaints Procedure](#)

[1-10c Client Compliments Procedure](#)

[4-04a Safeguarding Adults at Risk Policy](#)

[4-04b Safeguarding Adults at Risk Procedure](#)

[4-10 Equality, Diversity and Inclusion Policy](#)

[4-13a Child Protection and Safeguarding Policy](#)

[4-13b Child Protection and Safeguarding Procedure](#)

[8-15 Integrity at Work Policy](#)

[8-27 Disciplinary Policy and Procedure](#)

[8-32 Confidential Reporting \(Whistleblowing\) Policy](#)

[8-33 Anti Fraud and Corruption Policy and Procedure](#)