

Age UK Kensington and Chelsea

Title	Complaints Policy	
Policy author and owner	Board	
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Age UK Kensington and Chelsea Policy - Complaints

Age UK Kensington and Chelsea (AUKC) aims to provide high quality of services to all clients. However, we are aware that there may be times when the service falls short of the standards we set ourselves and it is important that we receive, handle and respond appropriately to complaints and comments to address concerns. We look upon complaints as an opportunity to learn, adapt, improve, and provide better services.

We are committed to ensuring that the complaints process is brought to the attention of clients, and those acting on their behalf in a suitable, accessible manner and format. We will facilitate access to an independent advocacy service for those who lack the capacity or means to make a complaint without such assistance.

Our aim is to deal promptly and effectively with any complaints so that individuals feel confident that their complaint and worries are listened to and acted upon. All written complaints will be acknowledged, investigated and action taken as necessary. If a complaint is made verbally, it will be examined to determine whether it should be investigated.

We follow national guidance on complaints handling which uses a three-stage model - *local resolution*, *complaint review* and *appeal*. We work on the basis that wherever possible - complaints are best dealt with directly with the client and via our Service managers who will arrange for appropriate enquiries to be made in line with the nature of the complaint. If the complaint remains unresolved, a complainant has right to escalate the concern and appeal the matter.

Should the complainant be dissatisfied with the response, an appeal can be lodged with the responders line manager.

In the event of a complaint involving alleged or suspected abuse, the matter will be immediately referred to the local Safeguarding Adults authority in line with our Safeguarding policy.

Principles

Our policy is based on the following principles:

1. If a client or anyone acting on their behalf or in their best interests, wishes to make a complaint, they should find it easy to do so; and
2. Most complaints, if dealt with early, openly, and honestly, can be sorted at a local level by the people immediately involved; and
3. We respect the right of individuals to make a complaint and there must be no victimisation, or inferior or substandard service provided to an individual who has raised their concerns; and
4. If the complaint is being made on behalf of a client by an advocate it must first be verified that the person has permission to speak on their behalf, especially if confidential information is involved.

This policy is not intended to apportion blame. However, there may be occasions where investigation of the complaint highlights a case to answer which may then be dealt with in line with other procedures including our Disciplinary policy.

AUKC recognises the right to dismiss a complaint if it is considered wasteful, discriminatory or vexatious.

Application

This policy applies to all persons working for AUKC or on our behalf - including trustees, employees at all levels, whether permanent or temporary, directors, officers, agency workers, seconded workers, volunteers, interns, agents, contractors, external consultants, third party representatives and business partners (collectively referred to as AUKC colleagues). Complaints about trustees are to be referred in the first instance to the Chief Executive who will liaise with the Chair as necessary.

Standards

We will maintain the following standards:

1. A complaints notice will be displayed prominently in public areas and copies of the complaints procedure included in the information given to clients. Alternative formats in line with communication needs will be made available; and
2. Each complaint must be recorded formally; and
3. Written complaints will be acknowledged normally within five working days. The complaint will be investigated and a full response given within 28 days; and
4. Investigations will be carried out by a competent person; and
5. Each stage of the Complaint's procedure will, so far as circumstances allow, be managed within published time scales. The complainant will be advised of any delay; and
6. Patterns of consistent failure of a service will be highlighted and addressed; and

7. A summary of all complaints and their outcomes will be periodically reported to the Quality, Performance, Development and Human Resources Committee.

Responsibilities

The Board of Trustees is responsible for receiving and considering reports provided by the Chief Executive outlining the number, type and outcome of complaints received.

The Chief Executive is responsible for ensuring the good management of complaints and for reporting to the Board.

The Executive team is responsible for discussing complaints and how they have been resolved, identifying trends, and considering and reacting to learning. Service managers are responsible for ensuring that complaints have been correctly recorded including in the Incidents folder on the m:drive. They are further responsible for Stage 1 management of the complaint within required time scales.

All staff are responsible for responding to complaints in a polite, courteous and sympathetic way and for bringing complaints, whether verbal or written to the attention of the Service manager.

A complaint about a trustee will be dealt with by the Chief Executive and Chair directly.

Legislation

This policy is based on UK legislation as follows:

1. Safeguarding Vulnerable Groups Act 2006; and
2. The Equality Act 2010; and
3. Data Protection Act 2018; and
4. Serious Incident Reporting to the Charity Commission; and
5. Pan London Safeguarding Strategy.

Definition

A verbal complaint - an expression of dissatisfaction with a service provided or an individual and will be considered to ascertain whether full investigation is necessary. At the very least, an opportunity to discuss concerns may lead to resolution.

A written complaint - will be treated as formal and be investigated through the procedure that accompanies this policy - even if it is not considered to be of a serious nature.

Procedure

An outline of the process for clients and a procedure for staff accompanies this policy. Other procedures (for example, Safeguarding or Accident/Incident reporting) must also be followed where applicable.

Responsibility and review of this policy

Responsibility for this policy rests with the Chief Executive (AUKC) and appointed Executive Lead. The policy was approved in December 2021. It is due for review in December 2024 or sooner if circumstances demand otherwise.