

# Joint Complaint Handling Code

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## Introduction

Good complaint handling requires effective procedures and well-trained staff alongside a positive complaints culture that enables those procedures to achieve maximum impact. This code sets out what an organisation must do procedurally to handle complaints. Compliance with the code is most effective within an organisation that is fair, puts things right, and learns from outcomes.

Organisations must embrace complaints through increased transparency, accessibility, and complaint handling governance. Demonstrating that individuals are at the heart of its service delivery and good complaint handling is central to that.

Some organisations see complaints as a form of negative feedback. However, there are many benefits to be gained from having an effective and efficient complaints process:

- Good complaint handling promotes a positive relationship between an organisation and service users.
- Complaints allow an issue to be resolved before it becomes worse. Those issues not resolved quickly can take significant resource and time to remedy.
- Involvement in complaint resolution develops staff ownership, decision-making and engagement.
- Complaints provide senior staff with essential insight into day-to-day operations, allowing them to assess effectiveness and drive a positive complaint handling culture.
- Data collected about complaints can be analysed and used to inform key business decisions to drive improvement in service provision.

The Joint Complaint Handling Code ('the Code'), from the Housing Ombudsman and Local Government and Social Care Ombudsman, sets out requirements for organisations that will allow them to respond to complaints effectively and fairly. The purpose of the Code is to enable organisations to resolve complaints raised by individuals quickly, and to use the data and learning from complaints to drive service improvements. It will also help to create a positive complaint handling culture amongst staff and individuals.

Non-compliance with the Code could result in the relevant Ombudsman taking further action. The Housing Ombudsman has a duty to monitor compliance with the Code and the power to issue Complaint Handling Failure Orders. The Local Government and Social Care Ombudsman has the power to issue public reports about the actions of individual organisations.

Organisations will be asked to self-assess against the Code annually on a 'comply or explain' basis, and publish this on their website or appropriate public forum if an organisation does not host a website. The self-assessment provides a snapshot of not just compliance with the Code, but the culture of an organisation.

The Code will act as a guide for individuals setting out what they can and should expect from an organisation when they make a complaint. The requirements in the

Code also provide individuals with information about how to make a complaint and how to progress it through an organisation's internal complaints procedure.

Organisations should seek feedback from individuals in relation to their complaint handling as part of the drive to encourage a positive complaint and learning culture.

The Code supports the regulatory approach to complaints by ensuring that an organisation's approach to complaints is clear, simple, and accessible, and that complaints are resolved promptly, politely and fairly.

Organisations must have a single policy for dealing with complaints covered by the Code. Individuals must not be treated differently based on the service they are complaining about.

## **Powers**

### **The Housing Ombudsman**

The Code is statutory under the Housing Ombudsman's powers in the Housing Act 1996, as amended by the Social Housing (Regulation) Act 2023.

By issuing a statutory Code, landlords have a duty to comply with it and the Housing Ombudsman has a duty to monitor compliance against it. This will be delivered through individual investigation findings, submissions of the Code self-assessment and monitoring relevant data, including complaint handling performance.

Under paragraphs 13-15 of the Housing Ombudsman Scheme, the Housing Ombudsman has the power to issue, and publish, Complaint Handling Failure Orders (CHFOs) for failing to comply with the Code.

The Code applies to all member landlords of the Housing Ombudsman Scheme.

### **The Local Government and Social Care Ombudsman**

The Code is issued under the Local Government and Social Care Ombudsman's powers to provide "guidance about good administrative practice" to organisations under section 23(12A) of the Local Government Act 1974.

The Local Government and Social Care Ombudsman may consider failure to comply with the Code as maladministration or service failure.

The Local Government and Social Care Ombudsman considers that the Code applies to all local authorities in England, as well as other specified bodies. The Code does not replace any statutory complaint processes such as The Children Act 1989 Representations Procedure (England) Regulations 2006 or Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

## Compliance with the Code

Organisations must comply with the Code.

Where an organisation's policy does not comply with the Code the organisation must provide a satisfactory explanation for non-compliance in their self-assessment and, where appropriate, the date by which the organisation intends to comply.

Where an organisation is unable to comply with the Code when dealing with an individual complaint, the individual must be provided with a suitable explanation and signposted to the relevant Ombudsman. We describe this as 'comply or explain' throughout the Code, and this relates only to individual cases. An organisation's complaints policy and any associated procedures must comply with the Code.

Where an organisation is unable to comply with the Code due to exceptional circumstances, such as a cyber incident they must inform the relevant Ombudsman and provide information to individuals who may be affected, and publish this on their website if they have one. Organisations must provide a timescale for returning to compliance with the Code.

Where the relevant Ombudsman finds an organisation has deviated from the Code without good reason, it may use its powers to put matters right and ensure compliance with the Code. The Code must be considered along with accompanying guidance setting out how each Ombudsman will use its powers in relation to this Code.

## The Complaint Handling Code

### The complaints process

#### 1. Definition of a complaint

- 1.1 Effective complaint handling enables individuals to be heard and understood. The starting point for this is a shared understanding of what constitutes a complaint.
- 1.2 A complaint must be defined as:  
*'an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the organisation, its own staff, or those acting on its behalf, affecting an individual or group of individuals.'*
- 1.3 An individual does not have to use the word 'complaint' for it to be treated as such. A complaint that is submitted via a third party or representative must still be handled in line with the organisation's complaints policy.
- 1.4 Organisations must recognise the difference between a **service request** and a **complaint**. This must be set out in their complaints policy. A service request is a request from an individual to the organisation requiring action to be taken to put something right. Service requests are not complaints, but must be recorded, monitored and reviewed regularly. A complaint must be raised when the individual expresses dissatisfaction with the response to their service request, even if the handling of the service request remains ongoing. An organisation must not stop its efforts to address the service request if the individual complains.
- 1.5 Where an organisation asks for feedback about its services through a survey, it must provide details of how individuals can complain so they can pursue any dissatisfaction if they so wish.

#### 2. Exclusions

- 2.1 An organisation must accept a complaint unless there is a valid reason not to do so. If the organisation decides not to accept a complaint it must be able to evidence its reasoning. Each complaint must be considered on its own merits.
- 2.2 Organisations must accept complaints referred to them within 12 months of the issue occurring, or the individual becoming aware of the issue. Organisations must consider whether to apply discretion to accept complaints made outside this time limit where there are good reasons to do so.
- 2.3 Organisations must not exclude complaints about safeguarding or health and safety issues.
- 2.4 A complaints policy must set out the circumstances in which a matter might not be considered or escalated. Organisations must ensure that these are reasonable, and in line with guidance issued by the relevant Ombudsman.

Members of the Housing Ombudsman can refer to the Scheme for explanations about exclusions.

- 2.5 If an organisation decides not to accept a complaint, a detailed explanation must be provided to the individual setting out the reasons why the matter is not suitable for the complaints process and the right to take that decision to the relevant Ombudsman. If the relevant Ombudsman does not agree that the exclusion has been fairly applied, the Ombudsman may tell the organisation to take on the complaint.
- 2.6 Organisations must not take a blanket approach to excluding complaints; they must consider the individual circumstances of each complaint.

### **3. Accessibility and awareness**

- 3.1 Organisations must make it easy for individuals to complain by providing different channels through which they can make a complaint. Organisations must consider their duties under the Equality Act 2010 and anticipate the needs and reasonable adjustments of individuals who may need to access the complaints process.
- 3.2 Individuals must be able to raise their complaints in any way and with any member of staff. This includes complaints made directly to the organisation via social media. All staff must be aware of the complaints process and be able to pass details of the complaint to the appropriate person within the organisation.
- 3.3 High volumes of complaints must not be seen as a negative, as they can be indicative of a well-publicised and accessible complaints process. Low complaint volumes are potentially a sign that individuals are unable to complain.
- 3.4 Organisations must make their complaint policy available in a clear and accessible format for all individuals. This will detail the number of stages involved, what will happen at each stage, and the timeframes for responding. The policy must also be published on the organisation's website.
- 3.5 The policy must explain how the organisation will publicise details of the complaints policy, including information about relevant Ombudsman schemes and this Code.
- 3.6 Organisations must give individuals the opportunity to have a suitable representative deal with their complaint on their behalf, and to be represented or accompanied at any meeting with the organisation.
- 3.7 Organisations must provide individuals with information on their right to access the relevant Ombudsman service and how the individual can engage with the relevant Ombudsman about their complaint.



#### 4. **Complaint handling staff**

- 4.1 Organisations must have a person or team assigned to take responsibility for complaint handling, including liaison with the relevant Ombudsman and ensuring complaints are reported to the governing body (or equivalent). This Code will refer to that person or team as the “*complaints officer*”. This role may be in addition to other duties.
- 4.2 The complaints officer must have access to staff at all levels to facilitate the quick resolution of complaints and report on complaint handling performance. They must also have the authority and autonomy to act to resolve disputes quickly and fairly.
- 4.3 Organisations are expected to prioritise complaint handling and a culture of learning from complaints. All relevant staff must be suitably trained in the importance of complaint handling. It is important that complaints teams are seen as a core service, and not given any additional roles that impact their ability to handle complaints effectively.

#### 5. **The complaint handling process**

- 5.1 Organisations must have a single policy for dealing with complaints covered by the Code. Individuals must not be treated differently based on the service they are complaining about.
- 5.2 The early and local resolution of issues between organisations and individuals is key to effective complaint handling. Organisations must ensure that there is one policy in place for complaints covered by this Code. It is not appropriate to have extra named stages (such as ‘stage 0’ or ‘informal complaint’) as this causes unnecessary confusion.
- 5.3 When an individual expresses dissatisfaction, organisations must register the issue as a complaint. Organisations must then set out their understanding of the complaint and the outcomes the individual is seeking. This Code will refer to this as “the complaint definition”. If any aspect of the complaint is unclear, the individual must be asked for clarification.
- 5.4 The complaint handler must:
  - a) clarify with the individual any aspects of the complaint they are unclear about;
  - b) deal with complaints on their merits, act independently, and have an open mind;
  - c) give the individual a fair chance to set out their position;
  - d) take measures to address any actual or perceived conflict of interest; and
  - e) consider all relevant information and evidence carefully.

- 5.5 When defining a complaint, organisations must be clear which aspects of the complaint they are, and are not, responsible for and clarify any areas where this is not clear.
- 5.6 Communication with the individual must not identify individual members of staff or contractors, except in exceptional circumstances, as their actions are undertaken on behalf of the organisation.
- 5.7 Where a response to a complaint will fall outside the timescales set out in this Code the organisation must agree with the individual suitable intervals for keeping them informed about their complaint.
- 5.8 Organisations must make reasonable adjustments for individuals where appropriate under the Equality Act 2010. Organisations must keep a record of any reasonable adjustments agreed, as well as a record of any disabilities an individual has disclosed. Any agreed reasonable adjustments must be kept under active review.
- 5.9 Organisations must not refuse to escalate a complaint through all stages of the complaints procedure unless it has valid reasons to do so. Organisations must clearly set out these reasons, and they must align with the exclusions permitted under section 2 above.
- 5.10 A full record must be kept of the complaint, and the outcomes at each stage. This must include the original complaint and the date received, all correspondence with the individual, correspondence with other parties, and any relevant supporting documentation such as reports or surveys.
- 5.11 Organisations must have systems in place to ensure that a complaint can be remedied at any stage of its complaints process. Organisations must ensure that appropriate remedies can be provided at any stage of the complaints process without the need for escalation.
- 5.12 Organisations must have policies and procedures in place for managing unacceptable behaviour from individuals and/or their representatives. Organisations must be able to evidence reasons for putting any restrictions in place and must keep an individual's restrictions under regular review.
- 5.13 Any restrictions placed on an individual's contact due to unacceptable behaviour must be proportionate and demonstrate regard for the provisions of the Equality Act 2010.

## **6. Complaints stages**

### **Stage 1**

- 6.1 Organisations must have processes in place to consider which complaints can be responded to as early as possible, and which require further investigation. Organisations must consider factors such as the complexity of the complaint and whether the individual is vulnerable or at risk. Most stage 1 complaints can

be resolved quickly and an explanation, apology or resolution provided to the individual.

- 6.2 Complaints must be acknowledged and logged at stage 1 of the complaints procedure **within five working days of the complaint being received**.
- 6.3 Organisations must issue a full response to stage 1 complaints **within 10 working days** of the complaint being received.
- 6.4 Organisations must decide whether an extension to this timescale is needed when considering the complexity of the complaint and then inform individuals of the expected timescale for response. Any extension must be no more than 10 working days without good reason, and the reason(s) must be clearly explained to the individual.
- 6.5 When an organisation informs an individual about an extension to these timescales, they must be provided with the contact details of the relevant Ombudsman.
- 6.6 A complaint response must be sent to the individual when the answer to the complaint is known, not when the outstanding actions required to address the issue are completed. Outstanding actions must still be tracked and actioned promptly with appropriate updates provided to the individual.
- 6.7 Organisations must address all points raised in the complaint definition and provide clear reasons for any decisions, referencing the relevant policy, law and good practice where appropriate.
- 6.8 If an organisation has got something wrong it must record the complaint as being upheld, even if there are elements of the complaint it has not upheld. It is not appropriate to record a complaint as being partially upheld.
- 6.9 Where individuals raise additional complaints during the investigation, these must be incorporated into the stage 1 response if they are related and the stage 1 response has not been issued. Where the stage 1 response has been issued, the new issues are unrelated to the issues already being investigated, or it would unreasonably delay the response, the new issues must be logged as a new complaint.
- 6.10 Organisations must confirm the following in writing to the individual at the completion of stage 1 in clear, plain language:
  - a) the complaint stage;
  - b) the complaint definition;
  - c) the decision on the complaint;
  - d) the reasons for any decisions made;
  - e) the details of any remedy offered to put things right;
  - f) details of any outstanding actions; and

g) details of how to escalate the matter to stage 2 if the individual is not satisfied with the response.

6.11 Organisations must have systems in place to ensure that a complaint can be remedied at any stage of its complaints process. Individuals must not be required to escalate a complaint in order to get an appropriate remedy.

### **Stage 2 Review**

6.12 If all or part of the complaint is not resolved to the individual's satisfaction at stage 1, it must be progressed to stage 2 of the organisation's procedure. Stage 2 is the organisation's final response and must be sent by a staff-member authorised to speak on its behalf.

6.13 Requests for stage 2 must be acknowledged and logged at stage 2 of the complaints procedure within five working days of the escalation request being received.

6.14 Individuals must not be required to explain their reasons for requesting a stage 2 consideration. Organisations are expected to make reasonable efforts to understand why an individual remains unhappy as part of its stage 2 response.

6.15 Stage 2 consideration must be a review of the adequacy of the stage 1 response, as well as any new and relevant information not previously considered. Stage 2 must not be a more thorough, detailed investigation of the complaint. It is expected that this will have happened at stage 1.

6.16 On receipt of the escalation request, organisations must set out their understanding of any outstanding issues and the outcomes the individual is seeking. If any aspect of the complaint is unclear, the individual must be asked for clarification.

6.17 The person considering the complaint at stage 2 must not be the same person that considered the complaint at stage 1.

6.18 Organisations must issue a final response to the stage 2 review **within 20 working days** of the complaint being escalated by the individual.

6.19 Organisations must decide whether an extension to this timescale is needed when considering the complexity of the complaint and then inform individuals of the expected timescale for response. Any extension must be no more than 20 working days without good reason, and the reason(s) must be clearly explained to the individual.

6.20 When an organisation informs an individual about an extension to these timescales they must be provided with the contact details of the relevant Ombudsman.

6.21 Organisations must confirm the following in writing to the individual at the completion of stage 2 in clear, plain language:

- a) the complaint stage;
- b) the complaint definition;

- c) the decision on the complaint;
- d) the reasons for any decisions made;
- e) the details of any remedy offered to put things right;
- f) details of any outstanding actions; and
- g) details of how to escalate the matter to the relevant Ombudsman Service if the individual remains dissatisfied.

6.22 If a complaint is upheld at stage 1, and the stage 2 response agrees with those findings, the complaint must be recorded as upheld. This is the case even if the stage 2 response finds no fault in the way the stage 1 complaint was handled.

### **Further stage**

6.23 Stage 2 is the organisation's final response and must involve all suitable staff members needed to issue such a response.

6.24 A process with more than two stages is not acceptable under any circumstances as this will make the complaint process unduly long and delay access to the relevant Ombudsman.

6.25 Where an organisation's complaint response is handled by a third party (e.g. a contractor) or independent adjudicator at any stage, it must form part of the two stage complaints process set out in this Code. Individuals must not be expected to go through two complaints processes.

6.26 Organisations are responsible for ensuring that any third parties handle complaints in line with the Code.

## **7. Putting things right**

7.1 Where something has gone wrong an organisation must acknowledge this and set out the actions it has already taken, or intends to take, to put things right. These can include:

- Apologising;
- Acknowledging where things have gone wrong;
- Providing an explanation, assistance or reasons;
- Taking action if there has been delay;
- Reconsidering or changing a decision;
- Amending a record or adding a correction or addendum;
- Providing a financial remedy;
- Changing policies, procedures or practices.

7.2 Any remedy offered must reflect the impact on the individual as a result of any fault identified.

7.3 The remedy offer must clearly set out what will happen and by when, in agreement with the individual where appropriate. Any remedy proposed must be followed through to completion.

7.4 Organisations must take account of the guidance issued by the relevant Ombudsman when deciding on appropriate remedies.

## 8. **Self-assessment, reporting and compliance**

8.1 Organisations must produce an annual complaints performance and service improvement report for scrutiny and challenge, which must include:

- a) the annual self-assessment against this Code to ensure their complaint handling policy remains in line with its requirements.
- b) a qualitative and quantitative analysis of the organisation's complaint handling performance. This must also include a summary of the types of complaints the organisation has refused to accept;
- c) any findings of non-compliance with this Code;
- d) the service improvements made as a result of the learning from complaints;
- e) any annual report about the organisation's performance from the relevant Ombudsman; and
- f) any other relevant reports or publications produced by the relevant Ombudsman in relation to the work of the organisation.

8.2 The annual complaints performance and service improvement report must be reported to its governing body (or equivalent) and published on the on the section of its website relating to complaints. The governing body's response to the report must be published alongside this.

8.3 Organisations must also carry out a self-assessment following a significant restructure, merger and/or change in procedures.

8.4 Organisations may be asked to review and update the self-assessment following an Ombudsman investigation.

8.5 If an organisation is unable to comply with the Code due to exceptional circumstances, such as a cyber incident they must inform the relevant Ombudsman, provide information to individuals who may be affected, and publish this on their website if they have one. Organisations must provide a timescale for returning to compliance with the Code.

## 9. **Scrutiny & oversight: continuous learning and improvement**

9.1 Organisations must look beyond the circumstances of the individual complaint and consider whether service improvements can be made as a result of any learning from the complaint.

- 9.2 A positive complaint handling culture is integral to the effectiveness with which organisations resolve disputes. Organisations must use complaints as a source of intelligence to identify issues and introduce positive changes in service delivery.
- 9.3 Accountability and transparency are also integral to a positive organisational culture. Organisations must report back on wider learning and improvements from complaints to stakeholders, such as citizens' or residents' panels, staff and relevant committees.
- 9.4 The organisation must appoint a suitably senior executive to oversee its complaint handling performance. This person must assess any themes or trends to identify potential systemic issues, serious risks, or policies and procedures that require revision.
- 9.5 In addition to this a member of the governing body (or equivalent) must be appointed to have lead responsibility for complaints to support a positive complaint handling culture. This person is referred to as the Member Responsible for Complaints (The Member).
- 9.6 The Member will be responsible for ensuring the governing body receives regular information on complaints that provides insight on the organisation's complaint handling performance. This person must have access to suitable information and staff to perform this role and report on their findings.
- 9.7 As a minimum, the Member and the governing body (or equivalent) must receive:
- a) regular updates on the volume, categories, and outcomes of complaints, alongside complaint handling performance.
  - b) regular reviews of issues and trends arising from complaint handling; and
  - c) the annual complaints performance and service improvement report.
- 9.8 Organisations must have a standard objective in relation to complaint handling for all relevant employees or third parties that reflects the need to:
- have a collaborative and co-operative approach towards resolving complaints, working with colleagues across teams and departments;
  - take collective responsibility for any shortfalls identified through complaints, rather than blaming others; and
  - act within the professional standards for engaging with complaints as set by any relevant professional body.



## Appendix A – Self-Assessment

This self-assessment must be completed and must be shared with the organisation’s governing body (or equivalent) annually as part of the complaints performance and service improvement report.

Evidence must be included to demonstrate compliance in practice as part of the other elements of the annual complaints performance and service improvement report with additional commentary as necessary. For example, this could include records of quality assurance checks on complaint responses, exclusions and feedback from relevant staff. If the failure to meet a requirement only relates to one service area or department this must be made clear in the commentary section.

When completing the self-assessment, organisations should not focus on the number of complaints received. Recording a high number of complaints may be an indication that the organisation welcomes complaints and that individuals are able to access the complaints process easily. Organisations should focus on timescales for responding to complaints and complaint outcomes.

Members of the Housing Ombudsman must submit a copy of their self-assessment as part of their annual complaints performance and service improvement report, following the guidance for submissions. The submissions will be used to assess the organisation’s compliance with the Code in line with the Housing Ombudsman’s duty to monitor against this.

The Local Government and Social Care Ombudsman may consider the complaints performance and service improvement report as part of an investigation or its own annual review of complaints.



## Self assessment

### Section 1 - Definition of a complaint

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
1.2/ 1.4	Complaints are defined in line with the Code and we recognise the difference between a service request and a complaint.			
1.3	Complaints submitted via a third party or representative are handled in line with our complaints policy.			
1.5	Individuals completing surveys are made aware of how to complain.			

## Section 2 – Exclusions

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
2.1	Our policy clearly states that complaints will be accepted unless there is a valid reason not to do so.			
2.2	Complaints are accepted when referred to us within 12 months of the issue occurring, or the individual becoming aware of the issue.			
2.3	We do not exclude complaints about safeguarding, or health and safety issues.			
2.4	Our policy sets out the circumstances in which a matter might not be considered or escalated.			
2.5	Where we decline to consider a complaint we explain our reasons to the individual and signpost them to the relevant Ombudsman.			

### Section 3 - Accessibility and awareness

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
3.1	We provide different channels through which individuals can make a complaint. We have considered our duties under the Equality Act 2010 and anticipated the needs of individuals who may need to access the complaints process.			
3.2	Individuals can raise their complaints in any way and with any member of staff. This includes complaints made directly to the organisation via social media. All staff are aware of the complaint process and able to pass details of the complaint to the appropriate person.			
3.3	We do not view high volumes of complaints as a negative. We analyse areas where there are low volumes of complaints to ensure individuals are able to complain.			

<b>Code section</b>	<b>Code requirement</b>	<b>Comply: Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
3.4	Our complaints policy is available in a clear and accessible format for all individuals. The policy is published on our website.			
3.5	Our complaints policy explains how we will publicise details of the complaints policy and information about the relevant Ombudsman schemes.			
3.6	We give individuals the opportunity to have a suitable representative deal with their complaint on their behalf, and to be represented or accompanied at any meeting with us.			
3.7	We provide individuals with information on their right to access the relevant Ombudsman service and how the individual can engage with the relevant Ombudsman about their complaint.			

## Section 4 - Complaint handling staff

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
4.1	We have a person or team assigned to take responsibility for the complaint handling process, including liaison with the relevant Ombudsman and ensuring that complaints are reported to our governing body (or equivalent).			
4.2	The complaints officer has access to staff at all levels to facilitate the quick resolution of complaints and report on complaint handling performance. They have the authority and autonomy to act to resolve disputes quickly and fairly.			
4.3	We prioritise complaint handling and a culture of learning from complaints.  All staff are suitably trained in the importance of complaint handling.  Complaints teams are seen as a core service and not given additional roles that impact their ability to handle complaints effectively.			

## Section 5 - Complaint handling process

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
5.1	We have a single policy for dealing with complaints covered by the Code.			
5.2	We do not have extra named stages (such as 'stage 0' or 'informal complaint').			
5.3	<p>We register complaints when an individual expresses dissatisfaction.</p> <p>We then set out our understanding of the complaint and the outcomes the individual is seeking.</p> <p>We seek clarification from individuals if the complaint is unclear.</p>			

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
5.4	<p>Our complaint handlers:</p> <ul style="list-style-type: none"> <li>a) clarify with the individual any aspects of the complaint they are unclear about;</li> <li>b) deal with complaints on their merits, act independently, and have an open mind;</li> <li>c) give individuals a fair chance to set out their position;</li> <li>d) take measures to address any actual or perceived conflict of interest; and</li> <li>e) consider all relevant information and evidence carefully.</li> </ul>			
5.5	We are clear with individuals about which aspects of the complaint we are not responsible for.			
5.6	Our communication with individuals does not generally identify individual members of staff or contractors.			

<b>Code section</b>	<b>Code requirement</b>	<b>Comply: Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
5.7	Where a response to a complaint will fall outside the timescales set out in the Code we agree with individual suitable intervals for keeping them informed about their complaint.			
5.8	We make reasonable adjustments for individuals where appropriate under the Equality Act 2010. We keep a record of agreed reasonable adjustments and keep these under review.			
5.9	We do not refuse to escalate complaints unless there are valid reasons for doing so.			
5.10	We keep a full record of the complaint, and the outcomes at each stage. This includes the original complaint and the date received, all correspondence with the individual, correspondence with other parties and any relevant supporting documentation such as reports or surveys.			
5.11	We have systems in place to ensure that a complaint can be remedied at any stage of our complaints process.			



Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
5.12	We have a policy and procedure in place for managing unacceptable behaviour from individuals and/or their representatives. We are able to evidence reasons for putting any restrictions in place and keep these restrictions under review. Restrictions are subject to an annual review as a minimum.			
5.13	Any restrictions placed on an individual's contact due to unacceptable behaviour are proportionate and have regard to the provisions of the Equality Act 2010.			

## Section 6 - Complaint stages

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
Stage 1				
6.1	We have processes in place that allow us to identify whether complaints can be responded to quickly or whether they require further consideration.			
6.1	We take account of the complexity of the complaint and whether individuals are vulnerable or at risk when deciding how quickly we should respond to a complaint.			
6.2	Complaints are acknowledged and logged within five working days of receipt.			
6.3	We issue a final response to stage 1 complaints <u>within 10 working days</u> of the complaint being received.			

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
6.4	<p>Any extension to this timescale is taken in line with the “comply or explain” principles set out in the Code and clearly communicated to the complainant.</p> <p>Extensions to timescales for responding do not exceed 10 days.</p>			
6.5	<p>When we inform an individual about an extension to these timescales we provide them with the contact details of the relevant Ombudsman.</p>			
6.6	<p>A complaint response is sent to individuals when the answer to the complaint is known, not when the outstanding actions required to address the issue are completed. Outstanding actions are tracked and actioned promptly with appropriate updates provided to the individual.</p>			

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
6.7	We address all points raised in the complaint definition and provide clear reasons for any decisions, referencing the relevant policy, law and good practice where appropriate.			
6.8	Where we have got something wrong we record the complaint as “upheld” even if there are elements of the complaint which are not “upheld”. We do not record complaints as being “partially upheld”.			
6.9	We deal with additional complaints raised during the investigation or after a stage 1 response has been issued in line with the requirements of the Code.			

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
6.10	<p>We confirm the following in writing to individuals at the completion of stage 1 in clear, plain language:</p> <ul style="list-style-type: none"> <li>a. the complaint stage;</li> <li>b. the complaint definition</li> <li>c. the decision on the complaint;</li> <li>d. the reasons for any decisions made;</li> <li>e. the details of any remedy offered to put things right;</li> <li>f. details of any outstanding actions; and</li> <li>g. details of how to escalate the matter to stage 2 if the individual is not satisfied with the response.</li> </ul>			
6.11	<p>We have systems in place to ensure that a complaint can be remedied at any stage of our complaints process.</p>			

Stage 2 Review				
6.12	We progress complaints to stage 2 where all or part of the complaint has not been resolved to the individual's satisfaction. This is sent by a staff-member authorised to speak on behalf of the organisation.			
6.13	Requests for stage 2 are acknowledged and logged at stage 2 of the complaints procedure within five working days of receipt.			
6.14	Individuals do not have to explain their reasons for wanting a stage 2, simply that they remain unhappy.			
6.15	Stage 2 consideration is a review of the adequacy of the stage 1 response as well as any new and relevant information not previously considered. Stage 2 is not a more thorough, detailed investigation of the complaint.			

6.16	<p>If any aspect of the complaint is unclear, we ask the individual for clarification.</p> <p>On receipt of the escalation request, we set out our understanding of any outstanding issues and the outcomes the individual is seeking.</p>			
6.17	The person considering the complaint at stage 2 is never the same person that considered the complaint at stage 1.			
6.18	We respond to the stage 2 reviews <u>within 20 working days</u> of the complaint being escalated by the individual.			
6.19	Extensions to the stage 2 timescale are taken in line with the “comply or explain” principles set out in the Code and clearly communicated to the complainant.			
6.19	Extensions to the timescale for a response do not exceed 20 working days.			

6.20	When we inform an individual about an extension to stage 2 timescales they are provided with the contact details of the relevant Ombudsman.			
6.21	<p>We confirm the following in writing to the individual at the completion of stage 2 in clear, plain language:</p> <ul style="list-style-type: none"> <li>a. the complaint stage;</li> <li>b. the complaint definition;</li> <li>c. the decision on the complaint;</li> <li>d. the reasons for any decisions made;</li> <li>e. the details of any remedy offered to put things right;</li> <li>f. details of any outstanding actions; and</li> <li>g. details of how to escalate the matter to the relevant Ombudsman Service if the individual remains dissatisfied.</li> </ul>			



6.22	If a complaint is upheld at stage 1, and the stage 2 response agrees with those findings, we record the complaint as upheld. This is the case even if the stage 2 response finds no fault in the way the stage 1 complaint was handled.			
Further stages				
6.24	Our complaint process has no more than two stages.			
6.25	Complaints handled by third parties on our behalf (e.g contractors) follow the two stage process set out in the code. Individuals are not expected to go through two complaints processes.			
6.26	We ensure that any third parties handle complaints in line with the Code			

## Section 7 - Putting things right

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
7.1	Where something has gone wrong we acknowledge this and set out the actions we have already taken, or intend to take, to put things right.			
7.2	Remedies offered reflect the impact on the individual as a result of any fault identified.			
7.3	Remedies offered clearly set out what will happen and by when, in agreement with the individual where appropriate. Any remedy proposed is followed through to completion.			
7.4	Remedies take account of the guidance on remedies issued by the relevant Ombudsman when deciding on appropriate remedies.			

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
8.1	<p>We produce an annual complaints performance and service improvement report for scrutiny and challenge, which include:</p> <ul style="list-style-type: none"> <li>a) the annual self-assessment against this Code to ensure their complaint handling policy remains in line with its requirements.</li> <li>b) a qualitative and quantitative analysis of the organisation's complaint handling performance. This must also include a summary of the types of complaints the organisation has refused to accept;</li> <li>c) any findings of non-compliance with this Code;</li> <li>d) the service improvements made as a result of the learning from complaints;</li> <li>e) any annual report about the organisation's performance</li> </ul>			

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
	<p>from the relevant Ombudsman; and</p> <p>f) any other relevant reports or publications produced by the relevant Ombudsman in relation to the work of the organisation.</p>			
8.2	<p>Our annual complaints performance and service improvement report is reported to our governing body (or equivalent) and published to residents.</p> <p>The governing body's response to the report is published alongside this</p>			

**Section 8 - Self-assessment, reporting and compliance**

## Section 9 – Scrutiny & oversight: Continuous learning and improvement

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
9.1	We look beyond the circumstances of the individual complaint and consider whether any service improvements should be made as a result of any learning.			
9.2	We use complaints as a source of intelligence to identify issues and introduce positive changes in service delivery.			
9.3	We report back on wider learning and improvements from complaints in an annual report and more frequently to other stakeholders, such as individuals, staff and relevant committees or panels.			
9.4	A suitably senior executive oversees our complaint handling performance. They assess any themes or trends to identify potential systemic issues, serious risks or policies and procedures that require revision.			

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
9.5	A member of the governing body (or equivalent) has been appointed to have lead responsibility for complaints to support a positive complaint handling culture.			
9.6	The appointed person ensures the governing body (or equivalent) receives regular information on complaints that provides insight on the organisation's complaint handling performance. This person has access to suitable information and staff to perform this role and report on their findings.			
9.7	Our governing body (or equivalent) receives the information required under this section of the Code.			

Code section	Code requirement	Comply: Yes/No	Explanations and Commentary	Evidence
9.8	<p>We have a standard objective in relation to complaint handling for all employees that reflects the need to:</p> <ul style="list-style-type: none"> <li>• have a collaborative and co-operative approach towards resolving complaints, working with colleagues across teams and departments;</li> <li>• take collective responsibility for any shortfalls identified through complaints rather than blaming others; and</li> <li>• act within the professional standards for engaging with complaints as set by any relevant professional body.</li> </ul>			

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