

Title	Complaints Policy		
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### **Policy Statement**

We aim to give our customers the best service we can but know that sometimes things can go wrong. Our overall aim is to put things right and use the learning from all complaints to help improve our services.

We have adopted the following definition of a complaint 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 resident or group of residents'.

Complaints can be raised by anyone in section 1.2 of the policy about their home or the services that we or our contractors have provided. We also recognise complaints can come in many forms without the term 'complaint' being used such as from our customer surveys or you believe we have not met our service standards.

Anyone who raises a complaint or a complaint on behalf of someone else can expect us to:

- Treat individuals with dignity, respect and courtesy.
- Be objective and impartial.
- Listen to individuals and not make assumptions.
- Not let the complaint affect our future relationship with individuals.
- Manage complaints in an open and transparent way.
- Be honest and say sorry when we get things wrong and let individuals know how we plan to put things right.
- Provide a written explanation if we decide not to accept a complaint.
- Provide contact details for other organisations who can help at any time during the complaint or if you are unhappy with the complaint decision.

We will ensure our complaints process is accessible and we will support any individual who needs help to make a complaint. We will also provide information in alternative formats and signpost to advocacy services. Information about the complaints policy will also be provided as part of any new tenancy, licence or at the start of any care and support in a format to suit individual communication needs.

Our complaints policy has 2 stages comprising of a thorough investigation (stage 1) and a review (stage 2). If you are dissatisfied with the outcome of your complaint at stage 1, we will provide details of how to request a stage 2 review along with other organisations who can be contacted.

## 1. Purpose and scope

- 1.1 To ensure that NCHA provides an effective complaint management service and high quality response to complainants in line with our corporate values and priorities, regulatory requirements and service standards.
- 1.2 This policy sets out NCHA's commitments to responding to complaints and seeks to ensure:
  - Complainants are treated consistently and fairly with dignity, respect and courtesy.
  - Complainants are not discriminated against or victimised for making a complaint.
  - Complainants are provided with assistance and advice to make a complaint.
  - Effective, early and where possible, positive resolution of complaints with an apology where appropriate.
  - Complaints are thoroughly investigated within timescales.
  - Compliance with regulatory and commissioning arrangements.
  - Organisational learning is identified to improve services, prevent similar service failures and correct mistakes quickly.
- 1.3 Complaints within the scope of this policy include those from:
  - Complainants including tenants, service users or leaseholders.
  - Someone who receives or requests a service from us.
  - Someone who is affected by a decision or action taken by us.
  - Someone who is affected by our services such as relatives, neighbours, agents, groups, stakeholders or professionals (eg health or social care).
  - Someone (includes NCHA C&S colleagues) acting on behalf of any customer where there is signed a consent giving permission, or, where they are acting in line with the Mental Capacity Act.
- 1.4 The following are not within the scope of this policy:
  - Where a complaint relates to care and treatment in registered or regulated activity services as a result of a notifiable safety incident which is covered by the Care and Support Duty of Candour Policy.
  - Complaints from colleagues which should be referred to line managers.

### 2. Responsibilities and risk

## 2.1 Responsibilities

- All colleagues for receiving and recording of initial complaints.
- All operational managers for investigation of complaints and updating of systems as required.
- All senior managers for review of complaints and updating of systems as required.
- Customer Satisfaction Manager for preparation of performance management information and reporting requirements.
- Head of Customer Contact for the delivery of Customer Satisfaction service.
- Assistant Director of Homes and Wellbeing for ownership of the policy.

#### 2.2 Risk

2.2.1 Failure to comply with this policy and the regulatory requirements contained within it could result in a financial penalty, regulatory downgrade, reputational damage, issue of a Complaint Handling Failure Order and requirement to implement remedies within given timescales.

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### 3. Policy details and guidance

## 3.1 What is a complaint?

- 3.1.1 We define a complaint 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 resident or group of residents' (Housing Ombudsman).
- 3.1.2 Complaints can be raised by anyone in section 1.2 of the policy about their home or the services that we or our contractors have provided. We also recognise complaints can come in many forms without the term 'complaint' being used such as from our customer surveys.
- 3.1.3 The following issues are not classed as complaints:
  - Requesting a service from us for the first time, for example reporting a repair would go through the usual repairs reporting process.
  - Requests for information about our services.
  - Reporting a problem with a neighbour or another resident which is covered by our Anti-Social Behaviour Policy or the Care and Support Service User Grievance Policy. Exceptions to this will be where the report includes a complaint about our response to the report.

We will write to the complainant to confirm where we will not consider a complaint for these issues and explain our reasons.

### 3.1.2 All complaints will be considered unless:

- The issue(s) being complained about took place over 12 months before.
- The same issue from the same complainant has been investigated and closed.
- The issue is part of any legal proceedings or where the same issue is part of a case that has been referred to court.
- We have evidence that the complaint is based on false information.
- Demands are made that are persistent, unreasonable or distressing.
- We have acted where regulatory, policy or legislative restrictions apply.

We will write to the complainant to confirm where a complaint will not be considered for these issues and explain our reasons.

### 3.2 How to make a complaint and support available

- 3.2.1 Complaints can be made in a range of ways:
  - In writing via letter or using our 'We're Listening' card to 12-14 Pelham Road, Nottingham, NG5 1AP.
  - By telephoning us on 0800 013 8555.
  - By email to <u>info@ncha.org.uk</u>
  - By using the form on our website <u>www.ncha.org.uk</u>
  - By using any of our social media platforms complaints made in this way will be handled confidentially in line with our policy and procedures.
  - In person to any NCHA colleague.
  - Anonymously.
  - To a local Member of Parliament or local authority Councillor.
  - Directly to commissioning organisations such as the local authority or health service if the complaint is about the social care services we provide.

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- 3.2.2 We will ensure our complaints policy is accessible to all customers and we will also include information as part of any new tenancy, licence or at the start of any care and support service in a format to suit individual communication needs.
- 3.2.3 Information is available in alternative formats if required and we can signpost to suitable, non-chargeable advocacy services.
- 3.2.4 Further advice and support is available during any stage of the complaints process from the following organisations as appropriate:
  - Housing Ombudsman Service
  - Local Government and Social Care Ombudsman
  - Parliamentary and Health Service Ombudsman
  - Office of the Children's Commissioner
  - Relevant commissioning authority for complaints about social care
  - Care Quality Commission
  - Healthwatch

## 3.3 How we manage complaints

- 3.3.1 When a complaint is made we aim to resolve and put right any issues when we are first contacted which will be recorded as a first contact resolution. If this is not possible or we are asked to deal with the issue as a formal complaint we will:
  - Write to acknowledge the complaint within 3 working days. This will include our understanding of the complaint and the outcomes being sought.
  - Ensure issues that cannot wait until the complaint is investigated will be dealt with alongside the complaint investigation.
  - Manage expectations from the outset and be clear where the desired outcome is unreasonable or unrealistic.
- 3.3.2 There are two stages in our complaints policy:
  - Stage 1 is a thorough investigation by an Investigating Manager.
  - Stage 2 is a review by a Senior Manager of the stage 1 decision upon request.
- 3.3.3 Stage 1: The Investigating Manager will complete a thorough investigation of the complaint which will be confidential, objective and impartial. The Investigating Manager will:
  - Consider what has happened, what should have happened, what lessons have been learned and what needs to change.
  - Make contact from the outset to discuss the concerns and make further contact if more information is needed.
  - Provide updates with the progress of the complaint investigation and agree the preferred way to communicate.
  - Give the opportunity to outline the position and comment on any findings before a final decision is made.
  - Provide a full response within 10 working days with an outcome, details of what action we
    plan to take, remedies available, how to escalate the complaint and how to get further
    help.

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- Make contact if we cannot give a full response within 10 working days to make an
  agreement to extend the time by a further 10 working days and confirm this in writing. We
  will provide the contact details of the relevant Ombudsman if an agreement to extend
  cannot be reached.
- 3.3.4 Stage 2: Complainants can request a review of the complaint if they are unhappy with the stage 1 decision and outcome. All stage 2 reviews are carried out by a Senior Manager who will:
  - Write to acknowledge the complaint review request within 3 working days. This will include our understanding of the reasons for the review and the outcomes being sought.
  - Provide a full response within 10 working days with an outcome, the reasons for any decisions made, details of what action we plan to take, remedies available and how to get further help.
  - Make contact if we cannot give a full response within 10 working days to make an
    agreement to extend the time by a further 10 working days and confirm this in writing. We
    will provide the contact details of the relevant Ombudsman if an agreement to extend
    cannot be reached.
- 3.3.5 We will not unreasonably refuse a stage 2 review request and if we do refuse, we will explain why in writing and who the complainant can contact if they do not agree with this decision. Reasons for not agreeing to a review can include:
  - The request is over 20 days from the date of the complaint investigation outcome without a reasonable explanation.
  - New issues have been included that were not part of the stage 1 investigation.

## 3.4 Putting things right

- 3.4.1 At both stage 1 and stage 2 of the complaint, we can offer resolutions where the complaint is partially or fully upheld. We will consider the following factors when offering a resolution:
  - The severity of any service failure or omission and the level of detriment caused as a result.
  - The length of time that a situation has been ongoing.
  - The frequency with which something has occurred.
  - The number of different failures.
  - The cumulative impact on the complainant.
  - The complainant's particular circumstances or vulnerabilities.
- 3.4.2 We will manage the expectations of the complainant and will not make promises we cannot deliver or would cause unfairness to other customers.
- 3.4.3 Compensation and/or disturbance payments can also be considered as a resolution and we will follow our compensation and disturbance policies for resolutions that fall within their scope.
- 3.4.4 In some cases a complainant may have a legal entitlement to redress. The Investigating Manager can still offer a resolution where possible following legal advice regarding any offer of resolution.

#### 3.5 Training

3.5.1 Colleagues will receive complaints training appropriate to their role to ensure complaints are managed effectively, sensitively and fairly.

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## 4. Supporting documentation and key legislation

4.1 Forms

None

#### 4.2 Guidance

FIX / FIX 2 User Guides, support and templates

## 4.3 Legislation and regulation

- Localism Act 2011
- Regulator of Social Housing, Consumer Standards: Tenant Involvement and Empowerment Standard
- The Local Authority Social Services and National Health Service Complaints (England)
  Regulations 2009
- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 16
- Social Housing White Paper Social Charter for Social Housing Residents
- The Housing Ombudsman's Complaint Handling Code
- Accessible Information Standard (health and social care providers)
- <u>The Supported Accommodation (England) Regulations 2023:</u> Regulation 31 (young people aged 16-17)

### 4.4 Related policies

- NCHA Compensation Policy
- NCHA Feedback and Compensation Service Standard
- NCHA Disturbance Policy
- Care and Support Service User Consultation Policy
- Care and Support Duty of Candour Policy

### 5. Monitoring and reporting

- 5.1 Complainants will receive a satisfaction survey regarding complaint handling and asking how the process may be improved.
- 5.2 The Customer Satisfaction Manager will monitor the status of open complaints on a daily basis and will email managers to progress and close any complaint if it is overdue.
- 5.3 The Customer Satisfaction Manager will produce reports for the following meetings to ensure sharing of good practice, identify learning and continuous improvement:
  - Senior leaders will monitor and review complaints performance on a monthly basis.
  - Departmental team meetings will monitor and review all complaints on a monthly basis.
- 5.3.1 Where required, Directors, Departmental Heads or Heads of Service will email individual Investigating Officers where response timescales have not been met, requiring a written explanation and justification. Investigating Officers may also be required to attend the NCHA Board, Pelham Homes Board or the Care Committee to discuss their performance on complaint management.

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- 5.4 NCHA's Board will review complaints performance annually and the Customer Committee will review complaints performance reports quarterly. The reports will include the number of complaints received during the period, year to date figures, analysis of trends and service improvements identified.
- 5.5 Complaints will be reviewed against protected characteristics on a bi-annual basis by the NCHA ED&I panel and actions agreed.
- 5.6 NCHA's website will include an analysis of complaints received, trends and actions taken to improve services in addition to an annual self-assessment against the Housing Ombudsman Complaint Handling Code. This information will also be published annually in NCHA customer magazines such as LINK, VoiceBox and Leaseholder LINK.
- 5.7 We will review satisfaction survey results and complaints performance to identify areas for improvement with recognised customer groups on a quarterly basis.

#### 6. Definitions

**Complaint** - 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 resident or group of residents.

## 7. Equality and diversity

7.1 This policy has been written in line with NCHA's Equality, Diversity and Inclusion Policy and Equality Statement. An Equality Impact Assessment has been completed.

## 8. Appendices

None

## 9. Policy approval

**9.1** This policy has been approved prior to issue by the Director of Homes and Wellbeing or if applicable, by NCHA's Board, Customer or Care Committees.