Complaints, suggestions and comments

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1. Policy

St Mungo’s actively welcomes feedback and is committed to ensuring complaints, suggestions and comments are handled fairly, recorded accurately, and that the organisation puts issues right and learns from feedback received

2. Scope

2.1. This procedure covers the handling of complaints, suggestions and comments received from:

- Clients, including any feedback received via client feedback cards;
- Advocates, friends or family members of a client;
- A client’s MP or Councillor;
- Neighbours;
- Any third party, e.g. partner agencies, regulators, housing associations;
- Organisations we provide a service to, e.g. customers of CHAIN, Real Lettings, Real Systems;
• Those interacting with Central Support teams, e.g. suppliers, job applicants.

2.2. Where a complaint concerns the discrimination, harassment or bullying of clients or raises a safeguarding issue please seek the advice of safeguarding@mungos.org and/or see:

• B15 Preventing and Responding to Bullying and Harassment of Clients;
• B37 Safeguarding Adults;
• B46 Safeguarding Children.

2.3. For clients receiving immigration advice from St Mungo’s, a Complaints and the Office of Immigration Services Notice (A02S25) must be given at point of entry to the service.

2.4. This procedure does not cover:

• Complaints made by clients about other clients involving discrimination bullying or harassment. Such complaints may be an opportunity to express frustration or a request for support. Please see B15 Preventing and Responding to Bullying and Harassment of Clients, B37 Safeguarding Adults, B46 Safeguarding Children.
• A first request for action, e.g. a request for a repair. If a first request for action is received then this should be discussed with the client and actioned.
• Reporting of incidents. If a client wishes to report an incident, see B07 Incident Reporting.
• Complaints made by any St Mungo’s workers about the service they receive from Central Support teams. See A13 Complaints and Suggestions – Central Support Teams.
• Complaints made by staff. Staff (including apprentices) should see Human Resources (HR) procedures such as the Grievance, Dignity at Work or A04 Whistleblowing Policy and/or seek advice from their HR Partner.
• Complaints made by locums or agency workers. See Managing Locum and Agency Issues.
• Complaints made by volunteers. Volunteers can refer to the Grievance procedure held by Volunteer Services.
• Complaints for Clearing House or Fundraising. They have separate complaints systems and procedures. Complaints for these teams will be passed to the appropriate person in that team, and will not be recorded on Opal. These teams will provide figures as required to the Quality and Continuous Improvement team for organisational reporting purposes.

3. Principles

3.1. Feedback in all forms is welcomed. Complaints, suggestions and comments, feedback cards and residents meetings are valuable sources of information that help shape our services, providing staff with the chance to make improvements and resolve dissatisfaction.

Staff will:

• Have a systematic approach to complaint handling and investigation.
• Ensure clients know how they can make complaints, suggestions and comments by providing all new clients with an A02S3 Complaints overview leaflet. Outside In’s Welcome Pack also refers to A02 Complaints, suggestions and comments.
• Publicise the procedure by ensuring the A02S19 Complaints poster is on display and that copies of A02S7 Complaint, suggestion and comment form are readily available in communal areas. Services should also have feedback boxes placed in a discreet location away from the main office or reception area.
• Ensure feedback boxes are checked every other day (where staff are on site) to ensure a timely response.
• Encourage clients to make complaints, suggestions and comments and assure them that complainants are treated as favourably as those who have not complained.
• Ensure that neighbours and stakeholders are aware of, or can easily find out, who to contact to make a complaint.
• Take verbal complaints, suggestions and comments as seriously as written ones.
• Look to resolve a complaint in the most efficient way and provide excellent customer service. If this involves deviating from this procedure, this must be agreed with a member of the Quality and Continuous Improvement team.
• Take account of complaints, suggestions and comments and use the learning to improve the service.
• Be mindful that complainants may have support needs, or have previously experienced trauma, or had bad experiences with complaints in the past which may affect their ability or willingness to complain and use this awareness to inform how they communicate with complainants. Responses should be empathetic and trauma informed, person centred and geared towards a constructive outcome for each complainant.

4. Diversity implications

4.1. St Mungo’s advocates equality by committing to combat unfair discrimination on the grounds of age, disability, gender identity, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation.

4.1. All those interacting with St Mungo’s services, e.g. clients, neighbours and members of the public, have the right to complain.

4.2. St Mungo’s will offer support to clients who wish to complain, e.g. supporting a client with reading or writing or referring them to an advocacy service.

4.3. St Mungo’s will make reasonable adjustments to support disabled people to complain.

4.4. St Mungo’s acknowledge some of our clients will have faced oppression because of protected characteristic they have such as race and this may impact on their willingness to make a complaint and their trust in the process that they will be treated fairly.

4.5. Complainants can use the dedicated complaints telephone line and email address (see section 7.3) if they do not wish to complain to staff at the service. Calls and emails to this line or email address will be acknowledged within two working days.

4.6. All complaints will be investigated and responded to, regardless of any protected characteristics the complainant may have.

5. Overcoming barriers to complaining

5.1. There are many reasons why people may be reluctant to complain including fear of recrimination, not knowing how to complain or how the complaint will be handled, and feeling that they should not complain if the service received is good overall.

5.2. Staff should work to create a culture where people do feel able to complain, providing reassurance and guidance to enable people to feel confident about complaining.

6. Definitions
6.1. **A complaint**: An expression of dissatisfaction about the service or treatment a person is receiving from St Mungo’s. *Note: a request for action is not a complaint.*

6.2. **A suggestion**: Where someone would like something to change and has thought of a way it could be improved (e.g. procedure or practice).

6.3. **A comment**: An expression of someone’s view about the service or treatment being provided by a St Mungo’s service.

6.4. **Informal complaints**: Complaints about minor issues, where a complaint can be dealt with quickly, or where the complainant is happy to receive a verbal response or does not yet wish to make a stage one complaint.

6.5. **Outcomes: Upheld**: this outcome is appropriate where the evidence supports the complaint raised. **Partially upheld**: this outcome is appropriate where the evidence partially supports the complaint raised. **Not upheld**: this outcome is appropriate where the evidence does not support the complaint raised. **Not enough information to decide**: this outcome is appropriate where there is not enough evidence to draw a conclusion, e.g. two individuals are giving different reports of one situation.

6.6. **Recorded on Opal**: Complaints must be logged on Opal, by using the New Complaints form in the Complaints tab on Opal, by pressing the New Complaints button in the Complaints section of the main page for each project or each client. Ensure that all the information entered is correct, particularly the service the complaint is concerned with.

6.7. **Stage one and stage two complaints**:
   - Stage one: Complaints about more serious issues or where the complainant would like to receive a written response. Investigated and responded to locally by a Co-ordinator, Deputy Manager, Manager, Service Head or Service Director.
   - Stage two: When a stage one complaint response is appealed. Investigated by someone outside the line management of the service and responded to by a Service Director.

7. **How to raise a complaint, suggestion or comment**

7.1. First see section 2: is this a complaint? . If it is a complaint, ask the complainant if they want it to be treated as a complaint, and clarify what they are complaining about and what they would like to happen as a result. If in doubt, please email complaints@mungos.org or call 020 3856 6068.

7.2. A complaint, suggestion or comment can be raised locally in the service:
   - In writing, by letter or using an A02S7 Complaint, suggestion and comment form. This can be given to a member of staff or posted in the feedback box. Written complaints, suggestions or comments can also be made by email.
   - Verbally, either in person or over the telephone. Staff should write the complaint down, then read it back to the complainant once complete to ensure the details are correct. If the complaint is informal, a copy should be given or sent to the complainant via email or letter. If it is a stage one complaint, the A02S8 Stage one acknowledgement letter template can be used to confirm the complaint (see section 16.6).

7.3. If an individual prefers, they can raise a complaint, suggestion or comment via the Quality and Continuous Improvement team:
   - By post: Quality and Continuous Improvement team, St Mungo’s, 3 Thomas More Square, London, E1W 1YW
   - Via email: complaints@mungos.org
   - By phone: 020 3856 6068

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Online: https://www.mungos.org/contact-us/complaints-suggestions-and-comments/

The Quality and Continuous Improvement team will then pass the complaint to the most appropriate person at the relevant service or project who will investigate and respond.

7.4. Client feedback cards should be made available at every service for clients to give feedback anonymously at any time.

- Client feedback cards can be posted in the feedback box, which should be placed in a discreet location away from the main reception or office area.
- Client feedback cards should be given to clients on a regular basis for them to complete. Where a client is unable to complete the card themselves, staff can verbally go through the card with clients or see section 25.
- Any anonymous complaints from the feedback cards should be recorded on Opal (see section 14.)
- Client feedback cards should be made available at every service for clients to give feedback anonymously at any time.
- A02S23 Client feedback card (building based) and A02S24 client feedback card (non-building based) are available on MungosNet and can be printed at your service.

8. Recording and responding to suggestions and comments

8.1. Suggestions and comments will be passed on to the Service Manager or Deputy Manager of the service within two working days and recorded locally.

8.2. All suggestions need to be considered and responded to. This is essential to ‘close the feedback loop’ and ensures people feel heard.

8.3. A Manager or Deputy will respond to a suggestion or comment within a reasonable timeframe, with consideration given as to whether to do this verbally or in writing. The response should also be recorded locally.

9. Ineligible complaints

9.1. All complaints on issues that have arisen during the previous 6 months will be considered.

9.2. A complaint made outside of this timescale may still be considered if there are exceptional circumstances for the delay, e.g. serious staff allegations, ill health, a period of street homelessness, postal delays.

9.3. Complainants cannot use the complaints procedure at the same time as taking legal action against St Mungo’s on the same issue, or whilst there is a related, ongoing police investigation. In this case, the complaints process will be paused and the complainant informed in writing.

9.4. If, after legal action or police investigations are complete, there are still outstanding issues related to the complaint, e.g. related to service delivery, these outstanding issues will be investigated and responded to at that time.

10. Complaints or comments made using social media, e.g. Twitter, Facebook

10.1. Social media is monitored by the Communications team and complainants will be encouraged to use non-public methods, e.g. direct message or telephone, to give services a fair chance to handle the complaint or comment.
10.2. The Communications team will provide social media complainants with contact details for the Quality and Continuous Improvement team (complaints@mungos.org and 020 3856 6068) if they believe a complaint is being made.

10.3. Staff will notify the Communications team if they become aware of complaints or negative comments on social media, via communications@mungos.org.

11. Information sharing

11.1. When responding to complaints staff should be mindful of disclosing information about anyone else in their response. This would include staff information and information about the client in question and other clients involved.

11.2. Staff should not disclose:

- Whether or not a staff member will be subject to HR processes as a result of the complaint.
- Any information about support or health or other sensitive categories for any clients who are not the complainant.
- Any action that might be taken against clients, e.g. an Acceptable Behaviour Commitment, injunction or evictions or any other procedural or legal process. See B17 Responding to Challenging Behaviour (Accommodation Services) or B17A Responding to Challenging Behaviour (Non-Accommodation Services).

11.3. Staff can respond with actions that the organisation takes within its internal processes e.g. in these cases the matter will be investigated and appropriate action taken. Seek advice from the Quality and Continuous Improvement or Information Security team if unsure.

12. Communication with third parties representing clients

12.1. Where a complaint is made on behalf of a client, e.g. a friend, family member or advocate or another client, signed consent should be obtained from the client before any information about them is shared. An A02S22 Data consent form should be used for this purpose. Staff should seek to ensure clients are aware of the full implications of giving consent, and are not being coerced into making a complaint. It should be made clear to clients that they can change or withdraw their consent preference at any time.

12.2. In the case of MPs:

- Under the Data Protection (Processing of Sensitive Personal Data) (Elected Representatives) Order 2002, sensitive personal information can be disclosed to Members of Parliament (MPs) where it is necessary to help with their functions, without having to obtain the explicit consent of the individual concerned. Consent must still be obtained if the disclosure would be outside the likely expectation of the complainant, where such disclosure could cause the complainant distress. In these cases, an overview of information will be provided in order to respond to the complaint, however specific details about the client may not be provided. Specific details could include:
  - Detailed support needs, e.g. which substances are used, or any health diagnoses
  - The value of arrears on someone’s rent account

  This still stands where an MP has given information about any of these details specifically.

- The Policy and Public Affairs team are available to help draft letters to MPs. All correspondence to an MP from St Mungo’s staff, about complaints or anything else, should be approved by the Policy and Public Affairs team. Contact them on publicaffairs@mungos.org.

12.3. Information must be provided on a ‘need to know’ basis and not all information obtained as part of an investigation will be shared.
12.4. The Information Security team can be consulted if there is any question about what information can be shared, via infosec@mungos.org. If there is a data breach involved please see J11 Data breach procedure.

12.5. Do not disclose information about staff or clients without the necessary consent. If you are unsure, please contact Information Security or refer to the Code of Conduct.

13. Advocacy

13.1. Friends, family members, other clients or support staff from other organisations may advocate on behalf of a complainant. The advocate’s name should be logged as the complainant on Opal.

13.2. Signed, written consent to communicate with all advocates, including a client’s next of kin, should be obtained, where possible, before any information is shared. In lieu of this we can accept verbal consent direct to us from our client, with a record made of the conversation. See section 11 for more information. If a client signs consent and staff are concerned about how, what or why consent was given, they should consult Information Security.

13.3. Solicitors or persons working in the media cannot act as an advocate for complainants, if they are acting in their professional role.

13.4. St Mungo’s staff cannot advocate on behalf of clients who are making a complaint against St Mungo’s. Staff may guide complainants through the complaints procedure and can assist them to make their complaint, e.g. by writing it down, but staff cannot complain on their behalf as this could create a conflict of interest.

13.5. If a complainant would like an advocate to complain on their behalf, then staff should refer them to the local Citizens Advice Bureau or a local advocacy service. Information about local advocacy services should be made available by each service.

14. Anonymous complaints

An anonymous complaint will be treated as a normal complaint, with the following differences in the way they are handled.

- They should be recorded on Opal, using the name Anonymous.
- If raised locally at a service, a response cannot be given to the complainant directly.
- A full investigation must be carried out. The response should be drafted and held on file in case the client or any third party should make contact about the complaint in the future.
- If the complaint is made to the Quality and Continuous Improvement team, the complainant can choose to share their details with the team who will maintain their anonymity. This enables a response to be shared with the complainant once the investigation has taken place.

15. Recording and responding to an informal complaint

15.1. Informal complaints are complaints about minor issues or where the complainant does not wish the complaint to be dealt with at stage one.

15.2. Any staff member can investigate and respond to an informal complaint, though they should discuss each complaint with their Manager or with the team if appropriate.

15.3. Informal complaints must be investigated and responded to verbally or in writing within five working days.
15.4. Informal complaints must be logged on Opal within two working days, with full details included. Any action taken as a result of the complaint must be recorded within 10 working days. Recording informal complaints in this way enables all complaints to be reviewed easily and reported on accurately.

15.5. Ensure that the overall outcome of the complaint, as recorded on Opal, is reflective of the content of the different aspects of the complaint. That is, if all aspects are upheld then the overall outcome is upheld; if some aspects are upheld then the overall outcome is partially upheld; if none are upheld then the overall outcome is not upheld.

15.6. All services should record on Opal, apart from those Criminal Justice Services who cannot access Opal (who should record their complaints locally and provide figures to the Quality and Continuous Improvement team when required). NHS Commissioned services should record on Opal where possible using non identifiable information such as the RIO ID reference number.

15.7. Complainants can be encouraged to deal with the matter informally at first. However, they can choose to make a stage one complaint at any time and can do so without making an informal complaint first.

15.8. Where a complaint cannot be resolved informally, staff will inform the complainant of their right to make a stage one complaint and give them an A02S3 Complaints overview leaflet and an A02S7 Complaint, suggestion and comment form.

15.9. Services will review the learning from complaints as soon as possible after they are responded to, to identify themes and agree improvements that should be made to help avoid recurrence in the future.

16. Recording and responding to a stage one complaint

16.1. Stage one complaints are complaints about more serious issues or where the complainant would like to receive a written response.

16.2. Where a complaint raises immediate concerns for an individual's safety, please consider calling 999 and/or contacting the individual's keyworker or Service Manager to ensure immediate safety. If there are any safeguarding concerns, see B37 Safeguarding Adults or B46 Safeguarding Children.

16.3. Stage one complaints will be investigated and responded to by the service’s Deputy Manager or Manager, except where the complaint concerns a Deputy Manager, Manager, Service Head or Service Director. If a complaint is about the Deputy Manager, the Manager will respond to the complaint; if a complaint is about the Manager, the Service Head will respond; if a complaint is about the Service Head, the Service Director will respond. If a complaint is about a Service Director, the Executive Director of Services will respond. If in doubt about who should respond, contact complaints@mungos.org or call the complaints line on 020 3856 6068.

16.4. If the complaint involves a decision made by a Service Manager or Service Head, e.g. an eviction or warning, then the complaint must be heard by someone equally senior who was not involved in that decision. Note that an appeal of an eviction, warning or exclusion is not a complaint and should be dealt with in accordance with B17 Responding to Challenging Behaviour (Accommodation Services) or B17A Responding to Challenging Behaviour (Non-Accommodation Services).

16.5. If a complainant has strong grounds for not wanting a specific individual to hear their complaint, e.g. no response to a previous complaint, that specific individual's line manager can investigate and respond.

16.6. Stage one complaints must be dealt with as follows:
• Acknowledged within two working days of receipt. The acknowledgement should note all the points of a complaint and identify what the complainant is seeking, e.g. an apology or something specific to be changed. A02S8 Stage one acknowledgement letter template is a useful template or guide.

• Logged on Opal within two working days of receipt. For ease, consider copying and pasting the acknowledgement letter or email into Opal. The original complaint should be stored on the Manager’s personal drive to protect the privacy of the complainant. All services should record on Opal, apart from those Criminal Justice Services who cannot access Opal (who should record their complaints locally and provide figures to the Quality and Continuous Improvement team when required). NHS Commissioned services should record on Opal where possible using non identifiable information such as the RIO ID reference number.

• Investigated and responded to in writing within 15 working days of receipt. Use of A02S9 Stage one response letter template is recommended.

16.7. For all stage one complaints the following apply:

• Ensure that the overall outcome of the complaint, as recorded on Opal, is reflective of the content of the different aspects of the complaint. That is, if all aspects are upheld then the overall outcome is upheld; if some aspects are upheld then the overall outcome is partially upheld; if none are upheld then the overall outcome is not upheld.

• They must be visible to the right level of staff. If a Manager thinks that a complaint contains sensitive information, e.g. staff allegations, the visibility on Opal should be restricted. To ensure staff involved cannot see the complaint, e.g. if it is about a Service Manager restrict the visibility to Service Head.

• The response must include all aspects of the complaint and give an outcome for each aspect: upheld, partially upheld, not upheld, or not enough evidence to decide. Support around this can be sought from the Quality and Continuous Improvement team.

• The response should say what will be done to resolve the complaint and to improve the service as a result of the complaint. The response letter should also mention the complainant’s right to appeal. See A02S9 Stage one response letter template.

• If the timescales cannot be met, the complainant must be informed in writing of when they will receive a response.

16.8. The final response should be recorded on Opal within 20 working days, or otherwise as soon as possible after that. The text of the response letter or email can be copied and pasted into Opal. Those Criminal Justice Services who cannot access Opal should record their complaints locally, and provide figures to the Quality and Continuous Improvement team when required. NHS Commissioned services should record on Opal where possible using non identifiable information such as the RIO ID reference number.

16.9. When a complaint is of a very serious nature, has potentially serious implications or may harm the reputation and/or contractual relations of St Mungo’s, immediately notify the relevant Service Head, contact communications@mungos.org and contact complaints@mungos.org or call the complaints line on 020 3856 6068.

16.10. If there is potential press interest, or other media involvement (such as social media), then the St Mungo’s Communications team must be informed, via communications@mungos.org. See section 10.

16.11. If an MP is or is likely to become aware of a complaint, inform St Mungo’s Policy and Public Affairs team must be informed, via publicaffairs@mungos.org. See section 12

17. Progress through the stages of the complaints procedure
17.1. Complainants may appeal when:

- Any aspect of their complaint has been not upheld or partially upheld.
- They are not satisfied with the method of redress (i.e. action or compensation as a result of the complaint).

17.2. Appeals will only be considered if received by the Quality and Continuous Improvement team within two months of receipt of the complaint response. An appeal received outside of this timescale may still be considered if there are exceptional circumstances for the delay, e.g. seriousness of complaint, ill health, postal delays.

17.3. The Quality and Continuous Improvement team will acknowledge receipt of an appeal within two working days. An A02S4 Stage two complaints leaflet will be sent to the complainant along with the acknowledgement.

17.4. The Quality and Continuous Improvement team will review the response that is being appealed to check that it has covered all the complaints made. If the response has missed anything, they will direct the person who responded to investigate and respond to the outstanding issues at stage one. In that case:

- A full response to the outstanding aspects of the complaint must be provided no later than 12 working days from receipt of the appeal request.
- If the complainant is still not satisfied with the response they can appeal.

17.5. A complaint will proceed to stage two, as the result of an appeal, if:

- The investigation failed to consider all the reasonably available evidence; or
- The response was not consistent with the reasonably available evidence.

17.6. The Quality and Continuous Improvement Manager or the Head of Quality and Information Security will decide if a complaint is eligible to progress to stage two. The number of appeals, whether successful or not, will be reported to the Board.

17.7. When a complaint response has been appealed, the Quality and Continuous Improvement Manager or the Head of Quality and Information Security will write to the complainant with the decision and an explanation within 10 working days of receipt of the appeal.

17.8. When an appeal does not proceed to stage two the complainant will be referred to external organisations to whom they can take their complaint, as the internal procedure will have been exhausted (see section 20).

18. Managing a stage two complaint

18.1. Stage two complaints are investigated by someone outside the Service that the complaint relates to and responded to by the relevant Service Director.

18.2. If a complaint is eligible to go to stage two as a result of an appeal, the Quality and Continuous Improvement team will:

- Write to the complainant, within 10 working days of receipt of the appeal request,
  - confirming that a stage two investigation will take place
  - explaining the process
  - advising who will investigate
  - identifying the points that will be responded to at stage two.
- Inform the relevant Service Director of the complaint and the timescales for responding.
- Follow the steps detailed in A02S15 Stage two action checklist for Quality and CI Advisor.
• Appoint an Investigating Officer. See A02S12 Investigation officer role description.
• Utilise A02S15 Stage two action checklist for quality and ci advisor within two working days of writing to the complainant.
• Appoint an Investigating Officer and refer them to A02S12 Investigation officer role description for more information.
• Ensure that the investigation is completed and written up in a report within 25 working days of notifying the complainant that their complaint is going to stage two.
• Review the report to check the investigation has been carried out well, is objective, and covers all aspects of the complaint(s) made.
• Support the Service Director to respond in writing within five working days of the investigation report being produced, ensuring that each aspect of the complaint has an outcome (upheld, partially upheld, not upheld or not enough evidence to decide).
• Where the timescales cannot be met, inform the complainant in writing when they will receive a response.
• Organise a meeting to include themselves, the Head of Quality and Information Security, the relevant Service Head, and a member of Outside In (if possible) to discuss any recommendations made, or learning identified in the stage two report. The Service Head will ensure any recommendations relating to the relevant service are taken forward. The Head of Quality and Information Security will take organisational recommendations forward.

18.3. The Service Director receiving the investigation report will:
• Work with the Quality and Continuous Improvement team to ensure the complainant receives a written stage two response within 30 working days of the complainant being informed that their complaint will go to stage two.
• The stage two response should
  o Respond to each point of the stage two complaint
  o explain what will be done (if anything) to improve the service as a result of the complainant’s feedback
  o state that the St Mungo’s complaints process has been exhausted, and direct them to the appropriate Ombudsman; see section 19.

19. External routes for complainants
19.1. If the complainant has exhausted St Mungo’s internal complaints process, they will be informed of external bodies they can refer their complaint to, as follows.
• For residents or tenants of services not registered with the Care Quality Commission, the Housing Ombudsman.
• For clients of services regulated by the Care Quality Commission, the Local Government and Social Care Ombudsman.
• For complaints concerning immigration this would be the OISC (Office of Immigration Services Commissioner).
• Most complainants will also be able to refer their complaint to the Commissioner of the service to which their complaint relates. They can do this at any stage of the process.

20. Compensation
Compensation can be awarded, in line with A02S11 Compensation guidelines. If compensation is awarded at stage one, it is possible for the decision regarding compensation to be appealed and more might be awarded at stage two.

21. Exceeding timescales for complaints

21.1. If any of the timescales detailed in this procedure cannot be met, the complainant must be informed in writing.

21.2. If the complainant does not participate in the investigation, or fails to respond to requests for them to participate, the complaint must still be investigated based on the evidence available within the normal timescales. Staff should make no less than two and no more than three attempts to contact the complainant before completing the investigation without them (if those attempts were not successful). The complaint response should state that the investigation was completed without the input of the complainant because the investigator was not able to contact them, or to involve them in the investigation.

21.3. It is a Solid Foundations non-negotiable that complaints records show appropriate action is taken within expected response times. Solid Foundations complaints RAG (red, amber, green) ratings are based on the percentage of complaints responded to on time. 'Red' ratings indicate that 0-59% of complaints were responded to on time, 'amber' 60-74%, and 'green' 75% or more.

22. Complaints Involving allegations against staff members

22.1. If the complaint contains sensitive information which should not be available to all staff members then reduced visibility on Opal should be selected. E.g. if there is an allegation against a Service Head, then the Service Director should select the option on Opal which restricts visibility to Service Directors and above.

22.2. If a complaint raises any concerns about the capability or conduct of a staff member, this will be a stage one complaint and their line manager should seek advice from their HR Partner.

22.3. If any formal conduct or capability processes are to be followed as a result of a complaint the Manager should write to the complainant to inform them that the complaints process for that aspect of their complaint will be paused while these formal processes are followed. The Manager is responsible for keeping the complainant informed of progress and will investigate any outstanding aspects of the complaint once these formal processes are complete. Be mindful of staff confidentiality in your communications to the complainant. The Information Security and/or Quality and Continuous Improvement teams can help with this.

22.4. Any aspects of the complaint that do not relate to the staff conduct or allegation that will be investigated in line with HR processes can be investigated and responded to within normal stage one complaints timescales.

22.5. If a complaint highlights any safeguarding issues, please email safeguarding@mungos.org to notify them of that, and follow B37 Safeguarding Adults or B46 Safeguarding Children as appropriate.

22.6. Being involved in a complaint investigation can be a stressful experience for members of staff. Support should be provided by the Manager where possible, although this may not be appropriate if the Manager if also involved in the complaint. All staff about whom a complaint has been made should be advised that they can seek support from the Employee Assistance Programme and/or Workplace Supporter Scheme.

23. Complaints made by neighbours
23.1. St Mungo’s has a strong commitment to developing positive relationships with neighbours and communities. With this in mind, in the event of a complaint from a neighbour Managers should follow procedure and also consider doing the following:

- Contact the neighbour and offer to meet with them within 5 working days to discuss the issues, where possible. It is important to apologise for any impact the relevant issues have had on them and to explain that you want to work closely with neighbours and the local community to ensure St Mungo’s is having a positive impact on the community and to work to rectify any issues. In apologising, be careful not to
  - share any personally identifiable information about clients or staff; or
  - admit any fault.

The evidence needs to be fully considered before deciding whether or not to uphold the complaint, and/or which other processes might need to be followed.

- Offer to explain the positive work the Service does and ask if they would like to visit, if appropriate.
- Provide contact details for reporting any future concerns e.g. number for the Service, mobile numbers and email addresses for the Manager and Deputy.
- Respond as quickly as possible to communication received.
- Maintain a clear record of every contact or communication with the neighbour.
- Discuss with the Service Head whether your commissioner needs to be made aware of these complaints.

23.2. Community meetings can be a very constructive tool when (re)building neighbour relationships in the locality of a service. Consider arranging and meeting and inviting the local ASB Officer, a member of the Safer Neighbourhood team, and potentially the local councillor. Strong relationships with these professionals are important and we recommend you meet them regularly. Success of the community meetings can also be enhanced by agreeing, ahead of the meeting:

- A meeting Chairperson
- An agenda
- Acceptable behaviour standards, and nominee to communicate these at the beginning of the meeting.

23.3. If neighbours make multiple complaints, consider putting clear boundaries in place to manage expectations and reduce the time needed to attend to these complaints (see section 24).

23.4. Neighbours may use offensive or inappropriate language when interacting with St Mungo’s staff or clients. Staff have a right to dignity at work (see the Dignity at Work policy on MungosNet). Where complainants are communicating or behaving inappropriately, consider the following options.

- Send a calm, direct letter to the neighbour addressing the way they are communicating with staff, reminding the individual about the right of our staff to work without fear of bullying or abuse.
- If the abuse continues or escalates then the Service Manager should consider banning the individual from attending the service in person. This should be communicated in writing.
- In complaint responses, quote the exact wording of complaints from neighbours including the abusive language used using quote marks. This is an effective way of highlighting the language used and contrasting it with our professional language. See A02S18 Neighbour example response.
• If staff feel they are in immediate danger in any situation, from anyone including neighbours, they should call the police.

• For an example of a response to a challenging neighbour which utilises some of the techniques mentioned above, see A02S18 Neighbour example response.

23.5. Where St Mungo’s clients have a tenancy rather than a licence, neighbours can become dissatisfied when they feel St Mungo’s is not taking sufficient action to address reported antisocial behaviour. As a social housing provider, the actions available are limited. A02S20 AST ASB initial response template is a useful guide for how to communicate this to neighbours.

24. Persistent complainants

24.1. A complainant may become persistent, or may seek to use the complaints process in a way that is not consistent with its aims or purpose. E.g. they may complain repeatedly about matters that:
  • do not fall within the scope of this procedure; or
  • have been covered by previous complaints.

24.2. Other approaches a persistent complainant might take are to:
  • request that the complaint is dealt with in ways which are incompatible with the complaints procedure or good practice.
  • substantially change the complaint whilst the complaint is being addressed.
  • harass or verbally abuse staff dealing with their complaint.
  • decline to co-operate with the complaints investigation process whilst still wishing for their complaint to be resolved.
  • decline to accept that issues are not within the remit of the Complaints procedure or within the power of the organisation to investigate, change or influence.
  • make the same complaint repeatedly, or only with minor differences, insisting that these minor differences make it a new complaint which should be put through the full Complaints procedure.
  • decline to accept the outcome of the complaints process after its conclusion, repeatedly arguing the point, complaining about the outcome and/or denying that an adequate response has been given.

24.3. The reasons for this persistence may be connected with a complainant’s support needs (if any). While managing these situations can be difficult, staff at the relevant St Mungo’s service should reflect on how best to support the complainant to seek (and hopefully achieve) the outcome they seek. The outcome sought may not be immediately obvious, but a conversation with the complainant might throw some light on the matter.

24.4. When managing complaints from persistent complainants, consider the following.
  • Consider the reasons that may be driving their behaviour and work with your team to seek ways of addressing these.
  • When a complainant is making multiple complaints it can become very time consuming to investigate and respond to each complaint individually. Local boundaries can be put in place to ensure the Manager or Deputy Manager responds to each of the complaints in the most time efficient way possible.
  • Plan how often, given the number of complaints received, it would be effective to respond to the complainant. This might be on a fortnightly or monthly basis. It is important to ensure that this arrangement is adhered to, to build trust with the complainant. The
complainant may be required to submit their complaint in writing only (if they are able to) or only to a specified person.

- Communicate this arrangement to the complainant in writing, highlighting that each complaint will be considered and responded to appropriately, but that a response will be sent addressing all current complaints on a regular basis. Normal timelines still apply.
- Each complaint, whether received by text, email, Facebook, Instagram, Twitter, telephone or in person, should be collated in one place by the Service Manager or Deputy. Ensure each complaint is reviewed to assess whether it is a request for action or a complaint. Ensure that direct action is taken to ensure the safety of clients and neighbours, and organise any necessary remedial action, e.g. call the police, raise a safeguarding alert or organise the removal of rubbish.
- The boundaries should strike a balance between limiting the impact these types of complaints have on staff whilst still ensuring all complaints are taken seriously.
- Details of such arrangements should be shared with the Quality and Continuous Improvement team if they have had contact with the complainant.
- The Service Head should also be informed. They should consider whether they should meet with the complainant to discuss the complainant's behaviour and explain why it is causing St Mungo’s concern. If the complainant is a client, they should be asked to adjust their behaviour and offered extra support, as appropriate.
- The complaint response(s) will detail: the date each part of the complaint was received, the nature of each part of the complaint; any action taken as a result of the complaint, and the outcome of each part of the complaint. See A02S18 neighbour example response.

24.5. Where someone has made persistent complaints in the past, it cannot be assumed that future complaints will be similar in nature or persistence. Each complaint must be considered separately and objectively.

25. Complaints which are made under the influence of drugs and alcohol

25.1. If a complaint is made when a complainant is intoxicated, the complaint will be recorded as usual.

25.2. Once the client is sober, or in a more functioning or self-aware state, the staff member who took the complaint should remind the client that they had made a complaint. They should go through the complaint with the client and check whether they wish to continue with it.

25.3. If they wish to continue, the complaint will be investigated in line with normal procedure. If the complainant wishes to retract their complaint, then this should be recorded as an Action on Opal, and the complaint should be deleted with the help of Opal Support.

26. Individuals who may struggle to make a complaint due to support needs

There may be individuals who struggle to make a complaint due to certain support needs, e.g. mental health needs, learning difficulties, language barriers, literary support needs. Staff should consider whether there are extra measures which can be put in place to ensure that these individuals are not excluded from the Complaints procedure. Extra measures could include:

- Writing down the complaint on behalf of the complainant;
• Meeting with complainants to hear complaints, and giving a response verbally as well as in writing;
• Using language line translation services, https://www.languageline.com/uk. Note this will be funded by the service budget.
• Referring complainants to advocacy services.

27. Complaints which are outside the remit of St Mungo’s

When the complaint is about something beyond the control of St Mungo’s, e.g. if it concerns outstanding repairs by another landlord, it should be clearly explained to the complainant that St Mungo’s are not able to investigate or respond to it. Guidance and/or support should be offered to the complainant so that they can direct their complaint to the appropriate organisation or person. This should be confirmed in writing or by email.

28. Learning from complaints, suggestions and comments

28.1. The Quality and Continuous Improvement team will review complaints made and share learning with the organisation through:

• An annual complaints report sent to the Board and the Executive Directors;
• A quarterly monitoring report;
• Discussion at the Organisational Learning Group.

28.2. Ownership of progression of recommendations from stage two complaint investigations is held by the Service Head for local recommendations and by the Head of Quality & Information Security for organisational recommendations.

28.3. St Mungo’s Service Excellence Standards require the learning from complaints, comments and suggestions, client feedback cards, and residents meetings to be reviewed on a quarterly basis in team meetings with any concrete actions recorded in the minutes. The team should consider whether these actions or projects should be reflected in the service’s work plan. Managers should ensure the focus is on learnings for the service; any focus on an individual’s practice should take place in supervision.

28.4. Communicate to clients how they have responded to their feedback, e.g. through “you said, we did” boards, house meeting minutes or a client newsletter. Communication methods should be decided in consultation with clients and should be consistent and regular (at least quarterly).

29. Relevant procedures and documents

Quick guide A02S1
Complaints overview leaflet A02S3
Stage two complaints leaflet A02S4
Complaint, suggestion and comment form A02S7
Stage one acknowledgement letter template A02S8
Stage one response letter template A02S9
Compensation guidelines A02S11
Investigation officer role description A02S12
Stage two action checklist for quality and ci advisor A02S15
Neighbour example response A02S18
Complaints posters A02S19
AST ASB initial response template A02S20
Local boundaries example A02S21
Data consent form A02S22
Client feedback card (building based) A02S23
Client feedback card (non-building based) A02S24
Complaints and the Office of Immigration Services Notice A02S25

Preventing and Responding to Bullying and Harassment of Clients B15
Responding to Challenging Behaviour (Accommodation Services) B17
Responding to Challenging Behaviour (Non-Accommodation Services) B17A
Safeguarding Adults B37
Safeguarding Children B46
Data Breach Procedure J11

This procedure was developed in consultation with:

1. Staff members a variety of services including a men’s hostel, a women’s hostel, a mixed hostel, young peoples’ services, a semi-independent accommodation, a day centre and a registered care home.

2. Clients from Outside In, and a variety of services including a mixed hostel

3. Staff from Central Support Teams.

4. The St Mungo’s diversity networks