Notes for use:

Modify and update this template Compliments and Complaints Policy before use.

Steps:

1. Update and change text in [Square brackets and red text]
2. Remove the Watermark – Click Page Layout > Watermark > Remove Watermark
3. Delete this cover page
4. Save the document

# [INSERT CLINIC/ORGANISATION NAME] Compliments and Complaints Policy and Procedure

### 1. Our Aim

[Name of clinic / organisation] is committed to providing a quality service and working in an open and accountable way that builds trust and respect. One of the ways in which we can continue to improve our service is by listening and responding to the views of our clients and stakeholders, and in particular by responding positively to complaints, and by putting mistakes right.

Therefore we aim to ensure that:

* making a compliment or complaint is as easy as possible
* we welcome compliments, feedback and suggestions
* we treat a complaint as a clear expression of dissatisfaction with our service which calls for an immediate response
* we deal with it promptly, politely and, when appropriate, confidentially
* we respond in the right way - for example, with an explanation, or an apology where we have got things wrong, or information on any action taken etc.
* we learn from complaints, use them to improve our service, and review annually our complaints policy and procedures

We recognise that many concerns will be raised informally, and dealt with quickly.

Our aims are to:

* resolve informal concerns quickly
* keep matters low-key
* enable mediation between the complainant and the individual to whom the complaint has been referred

This policy ensures that we welcome compliments and provide guidelines for dealing with complaints from members of the public about our services, facilities, staff and volunteers.

### 2. Definitions

A compliment is an expression of satisfaction about the standard of service we provide.

A complaint is defined as any expression of dissatisfaction, however, it is expressed. This would include complaints expressed face to face, via a phone call, in writing, via email or any other method. All staff should have sufficient knowledge to be able to identify an “expression of dissatisfaction” even when the word “complain” or “complaint” is not used.

### 3. Purpose

We are always glad to hear from people who are satisfied with the services we offer. All compliments are recorded, acknowledged, and a copy is sent to the relevant service manager to provide feedback to the member of staff or service.

### 4. Complaints

The formal complaints procedure is intended to ensure that all complaints are handled fairly, consistently and wherever possible resolved to the complainant's satisfaction.

### 5. Responsibilities

[Name of clinic / organisation] responsibility will be to:

* acknowledge the formal complaint in writing;
* respond within a stated period of time;
* deal reasonably and sensitively with the complaint; and
* take action where appropriate.

A complainant's responsibility is to:

* bring their complaint, in writing, to [name of clinic / organisation]’s attention normally within 8 weeks of the issue arising;
* raise concerns promptly and directly with a member of staff in [name of clinic / organisation];
* explain the problem as clearly and as fully as possible, including any action taken to date;
* allow [name of clinic / organisation] a reasonable time to deal with the matter, and
* recognise that some circumstances may be beyond [name of clinic / organisation]’s control.

### 6. Confidentiality:

Except in exceptional circumstances, every attempt will be made to ensure that both the complainant and [name of clinic / organisation] maintain confidentiality. However the circumstances giving rise to the complaint may be such that it may not be possible to maintain confidentiality (with each complaint judged on its own facts). Should this be the case, the situation will be explained to the complainant.

### 7. Complaints Procedure:

Written records must be made by [name of clinic / organisation] at each stage of the procedure.

#### Stage 1

In the first instance, staff member(s) must establish the seriousness of the complaint. An informal approach is appropriate when it can be achieved. But if concerns cannot be satisfactorily resolved informally, then the formal complaints procedure should be followed.

#### Stage 2

If the complaint cannot be resolved informally, the member of the public should be advised that a formal complaint may be made and the following procedure should be explained to them. It may sometimes be appropriate for a different member of staff, preferably a member of the Management Team, to make this explanation.

1. A formal complaint can be made either verbally or in writing. If in writing the attached form should be used. If verbally, a statement should be taken by a member of the Management Team, staff member or a supervisor.
2. In all cases, the complaint must be passed on to [responsible person]. In the event of a complaint about [the responsible person] the complaint should be passed to [the responsible person’s superior], and if the complaint is about [the responsible person’s superior] this must be passed on to [eg. the Chair of the Trustee Board.].
3. [The responsible person] or [responsible person’s superior], depending on the nature of the complaint, must acknowledge the complaint in writing within one week of receiving it.
4. One of the above will investigate the complaint. Any conclusions reached should be discussed with the staff member involved and their Line Manager.
5. The person making the complaint will receive a response based on the investigation within four weeks of the complaint being received. If this is not possible then a letter must be sent explaining why.

#### Stage 3

1. If the complainant is not satisfied with the above decision then a sub-group [e.g. of the Trustee Board] will be convened.
2. The sub-group will examine the complaint and may wish to carry out further interviews, examine files / notes. They will respond within four weeks in writing. Their decision will be final.

#### Stage 4

1. If the complainant is not satisfied internally, inform the client:
2. on a durable medium that they cannot settle the complaint with the client;
3. of the client’s right to complain to the Legal Ombudsman in connection with the solicitor who worked on the matter;
4. of the name and web address of an ADR approved body which would be competent to deal with the complaint, should both parties wish to use the scheme, and whether the clinic/solicitor intends to use that ADR approved body.

The Law Society has produced the following draft wording that clinics can use:

*We have been unable to settle your complaint using our internal complaints process. You have a right to complain to the Legal Ombudsman, an independent complaints body, established under the Legal Services Act 2007, which deals with legal services complaints. You have six months from the date of this (our final) letter in which to complain to the Legal Ombudsman.*

*Legal Ombudsman*

*PO Box 6806*

*Wolverhampton*

*WV1 9WJ*

*Telephone: 0300 555 0333*

*Email address: enquiries@legalombudsman.org.uk*

*Website: www.legalombudsman.org.uk*

*Alternative complaints bodies (such as […..]) exist which are competent to deal with complaints about legal services should both you and our firm wish to use such a scheme.*

*We [state whether the solicitor] agrees to use [include name of scheme].*

For information concerning the details of ADR approved bodies please look at the Law Society’s website.

### 8. Data Protection:

We need your consent to use your personal information. Our use of that information is subject to the General Data Protection Regulation 2016. If you think that we have used or got your information wrong, please tell us so that we can put it right. If you have any concerns about the way we handle your information, you can also tell the Information Commissioner <https://ico.org.uk/concerns/handling/>.