



COMPLAINTS, COMMENTS AND COMPLIMENTS POLICY

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Document Control

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Objective of Document: To set Verity Healthcare Limited's commitment and recognition of the need to create room for the public to complain, make comments and/or compliments to enable us improve on our services.		
Intended Recipients: All Organisation Staff, Clients, Councils/Metropolitan Assemblies, Residents, Voluntary & Community Sectors		
Monitoring Arrangements: Through designated Monitoring Group of Organisation's Board of Trustees, Whistle Blowing Systems, Staff Reviews, CQC & Stakeholder Monitoring Visits		
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Introduction

Verity Healthcare recognises its statutory duty to establish complaints procedures to deal with complaints and representations about the discharge of, or failure to discharge their social services functions.

We take all complaints, compliments, and comments, seriously. As part of our commitment to high-quality service, we listen to, record, provide appropriate feedback and act on information received in a timely manner. Through this process, we seek to ensure that all complaints, compliments, and comments are dealt with efficiency and professionalism.

We also recognise and respond to compliments, ensuring that staff teams and individuals are recognised when excellent service is delivered.

VHL believes that all apprentices should feel satisfied with the support, training, and overall service they receive. By the implementation of the complaint plan for apprentices, we can ensure that we maintain a high standard of training which will give our apprentices an environment in which to develop and achieve successful learning outcomes.

The new arrangements are intended to ensure that complaints are handled in such as to help improve on the quality of apprenticeship training, Verity Healthcare Limited understand and adhere to the Regulations which provide for co-operation between the different bodies so that complainants only have to deal with one lead body and receive a single co-ordinated response.

The new arrangements encourage people to indicate what they think of their care, to sort out problems more effectively and to use the opportunities to learn. To achieve this, a single approach is recommended for dealing with complaints, which gives organisations greater flexibility to respond to and encourage a culture that seeks and then uses people's experiences of care to improve quality of care.

This document sets out Verity Healthcare's policy and arrangements for handling complaints about apprenticeship training and as a guide to better customer care, Listening, Responding, Improving.

This policy provides further guidance on Verity Healthcare Limited's policy and arrangements for handling other types of customer feedback about apprenticeship training, such as comments and compliments.

1. Purpose

The purpose of this policy is to:

- ensure all apprentices are enabled to raise a complaint if they feel unhappy about the service they have received
- determine responsibilities and resources which will underpin the complaint plan

2. Scope

This policy statement covers all apprentices, learners, other service users, members of the governance board, staff, volunteers, employers, and partners of the service.

The apprenticeship standards are delivered to meet the expectations of the ESFA and inspected by Ofsted. Our complaints procedure aligns to the requirements outlined within their applicable funding rules, contract requirements, and inspection frameworks.

All apprentices, prospective apprentices, employers, parents (where applicable) and local partners will be made aware of the complaint procedure. The process is embedded into our apprentice induction, within employer contracting and published on our website. All complaints are dealt with appropriate discretion and sensitively.

In general complaints will usually relate to one of the following:

- problems accessing services
- failure to provide responses or information within agreed timescales
- behaviour or attitude of a member of staff
- disagreement with a decision
- disagreement with how a policy has been applied
- failure to provide services within agreed timescales
- standard or quality of the service provided
- incorrect use or storage of data

3. Principles

Verity Healthcare is committed to dealing effectively with complaints and other customer feedback in order to help to improve service delivery to all service users irrespective of age, race, culture, gender, sexuality or disability.

Verity Healthcare Limited's arrangements for handling and considering complaints will ensure that:

- complaints are dealt with efficiently and investigated properly;
- complainants and others involved, including staff, are treated with respect and courtesy;
- complainants receive, so far as is reasonably practical, assistance to enable them to understand the complaints process or advice on where they may obtain such assistance;
- complainants receive a timely and appropriate response; and
- complainants are told of the outcome of the consideration of their complaint and of the action which will be taken if necessary in the light of the outcome.

4. Aims

This will be achieved by:

- identifying where and how complaints can be raised
- a clear process for acknowledging, investigating, and responding to complaints
- developing a range of appropriate actions and outcomes linked to complaints
- recording all complaints and outcomes
- enabling apprentices and staff to understand and engage in actions that could reduce the potential for complaints
- linkage with the council's complaints procedures

- communicating with all apprentices and associated staff, service partners and employers to ensure they are aware of their responsibilities and standards expected.

5. Complaint Procedure

Verity Healthcare Limited's complaints handling arrangements are based on the following principles of good complaints handling which are:

- Getting it right;
- Being customer focused;
- Being open and accountable;
- Acting fairly and proportionately;
- Putting things right; and
- Seeking continuous improvement.

Effective recording, monitoring and analysis of complaints and other forms of feedback from service users, such as comments and compliments, will provide useful indicators of the quality of services being provided, the standards being applied by Verity Healthcare Limited and resource allocation and deployment.

Throughout the process, complainants will be kept informed of the progress of their complaint and of the reasons for any delays. Where delays are unavoidable, a revised timescale will be discussed and agreed with the complainant and included in the complaint plan.

This policy does not cover the following

- Matters covered by separate policies or procedures including Equal Opportunities:
- where a complaint is made and there is a separate policy the procedure in the relevant policy will be followed.
- Assessment decisions that are out of our control e.g. those made by External Performance Assessors:
- the external provider's complaints policy will be followed.

6. Who May Complain?

A complaint can be made by a person who receives apprenticeship training, staff, visitors or by any person affected or likely to be affected by the actions, decisions or omissions of our services. A representative of such a person may also make a complaint.

3.1 Accordingly, a complaint may be made by:

- A learner/apprentice
- someone who has been turned down for a service to which they think they are eligible;
- a representative of an apprentice acting with their consent;
- an employer
- anyone who is affected or is likely to be affected by the actions, decisions or omissions of the service which is the subject of the complaint.

Where a complaint is made by a representative acting on behalf of a service user, the local authority has the discretion to decide whether or not the representative is suitable to act on behalf of the service user in the service user's best interests. If Verity Healthcare Limited considers the representative to be unsuitable, the representative will be notified of the reasons for this decision and informed that no further action will be taken under the complaints arrangements.

Where there is any uncertainty about a complainant's representative being authorised by the complainant to act in this capacity and to receive, should it be necessary, confidential information pertaining to the complainant, confirmation of authorisation to act will be sought by Verity Healthcare Limited.

7. Access to the Complaints Process

The complaints process can be activated at any time by telephone, letter, feedback form, on-line via Verity Healthcare Limited's website or in person at any service delivery point. Service users or carers may wish to seek the help of others to make their complaint; this could be a friend or relative or an independent advocate (see section 8 below).

Staff can help with the submission of a complaint and give advice about how to proceed with making a complaint or facilitate access to an independent advocate. Officers of Verity Healthcare Limited cannot, however, act as the formal representative of a complainant in the progression of a complaint if, in doing so, they would be acting in their capacity as an employee.

8. The Need for the Policy

The policy has been developed to:

- Be easily accessible
- Be simple to understand and use
- Address all the points raised and provide an effective response
- Allow speedy handling with established time limits for action
- Keep people informed of progress
- Ensure a full and fair investigation
- Respect people's desire for confidentiality
- Provide information to managers so that services can be improved and "lessons learned".

9. What is a Complaint? (Definition)

A complaint is a written or verbal expression of dissatisfaction about the actions, decisions or apparent failings of a local authority's adult social care services. Complaints are distinguished from referrals for service, requests for information, or other queries and comments, which can be dealt with by a normal Organisation response.

Complaints may relate to the following:

- an unwelcome or disputed decision.
- concern about the quality or appropriateness of a service.
- delay in decision making or provision of services.
- standard of delivery or non-delivery of services.
- quantity, frequency, change or cost of a service.
- application of eligibility and assessment criteria.
- failure to follow correct procedure.

- the impact on an individual of the application of a local authority policy.
- assessment, care management and review issues; or
- attitude/behaviour of staff.

If it is possible to resolve the matter immediately, there is no need to deal with it under the Complaints Regulations.

An **'informal complaint'** is defined as an issue which an employer wishes to raise with a member of our staff, without using the formal complaints process. Informal complaints are usually quick to resolve and unlikely to require an in-depth investigation.

A **'compliment'** is an expression of praise concerning a service received.

A **'comment'** is a suggestion for how a service can be improved.

An **'Appeal'** is 'a request for a review of a decision taken by an individual or academic body charged with making decisions about apprentices' progression, assessment and awards'.

10. Definitions

- **Apprentice** – an individual who receives apprenticeship training and, where applicable end-point assessment through an apprenticeship framework or standard, funded by the ESFA (ESFA definition March 2019)¹
- **Apprenticeship** – is a job with an accompanying skills development programme (ESFA definition March 2019)
- **Centre** – this refers to Verity Healthcare Limited
- **Employer** – the organisation that employs the apprentice
- **Education and Skills Funding Agency (ESFA)** – the national organisation that funds all education in England (not including higher education) including apprenticeships.
- **Workplace manager** – the direct line manager of the apprentice in the workplace
- **Off the job training (planned learning activity)** – the training received by the apprentice, during the apprentice's paid hours, for the purpose of achieving their apprenticeship (ESFA definition March 2019)
- **Observational Assessor** – an occupationally competent member of staff in the workplace who mentors and assesses the apprentice's workplace activity as part of the apprenticeship programme.
- **Centre tutor/assessor** – this is the main link person that supports, mentors and assessing the apprentices' course work as part of their apprenticeship programme. They will also delivery training in the Centre to apprentices during the taught element of off the job training.
- **Internal Quality Assurer (IQA)** – the lead person in the Centre who is responsible for overseeing the quality of the assessment process for the specific apprenticeship programme.

11. Responsibilities

a) Verity Healthcare Limited

Verity Healthcare Limited welcomes feedback to enable us to improve our services. We will respond to any dissatisfaction with our services fairly and promptly. You will receive an initial response within 48 hours of receipt of your formal complaint. Your complaint will be looked into and a response sent to you within 10 working days detailing our findings.

A further, more detailed response will be sent on conclusion of a full investigation if relevant. You may be offered a meeting with the parties involved if appropriate. All informal and formal complaints will be logged on our central log.

These will be retained for a period of 2 years following resolution and closure of the complaint at which point all information relating to the complaint will be deleted.

We take our obligation seriously and have a designate person who is responsible for ensuring compliance with the Complaints Regulations and for ensuring that action is taken if necessary in the light of the outcome of a complaint. The Complaints Manager is responsible for managing the process for handling and considering complaints. Both these roles can be delegated. In order to contribute effectively to service development, the Complaints Manager should be independent of operational services and of direct service providers.

Three Senior Managers have primary responsibility for ensuring that complaints and customer feedback for are properly handled and that complainants receive an appropriate and customer focused response. They are also responsible for ensuring that action proposed and commitments given in response to complaints are implemented.

b) The Board of Directors

The Chair or a delegated Board member will investigate complaints and report their findings to a meeting of the full Board when:

- A stage 2 complaint is against the Chief Executive Officer
- A complainant has appealed against the findings of a stage 2 complaint

At the first available meeting after an investigation carried out by a Board member as per above has been completed, the Board will hear the investigation report and consider the findings. After the meeting the Chair will write to advise the complainant of the outcome, the suggested remedy and what to do if they are still unhappy.

- The Board of Directors will review annually a complaints report in order to check performance with regards to :
- Whether the procedure was properly followed with respect to timeframes and maintaining confidentiality
- Whether all remedies were actioned satisfactorily and in a timely way
- Awareness of the policy and procedure and how to make a complaint or give feedback among service users
- Review the policy and procedure and if they remain fit for purpose or require adjustment
- Monitor any trends and agree appropriate action at an organisational level, for example training for staff and volunteers or improvements in areas of service delivery.

Day-to-day responsibility for ensuring this policy is put into practice is delegated to the Chief Executive Officer with support from the Delivery and Development Manager where appropriate.

c) Principal

Where a complaint has been made against a member of staff, the Principal will be responsible for carrying out an investigation. A letter of acknowledgement will be sent within 5 working days of receipt of the complaint.

When the investigation is complete the Principal will send a letter of explanation to the complainant within the timeframe set out in the procedure advising of the outcome, suggested remedy and what to do if they are still unhappy.

The Principal is responsible for action planning in response to where changes or improvements have been identified as needed and ensuring actions are satisfactorily completed.

d) Vice Principal /Delivery and Development Manager

The Vice Principal/Delivery and Development Manager is responsible for maintaining a Central Log of complaints, comments and compliments and for sharing information from the Log with the Chief Executive Officer and the Board as required.

e) Line Managers/Senior Leaders

All Line Managers are responsible for investigating complaints against members of staff and volunteers. A letter of acknowledgement will be sent within 5 working days of receipt of the complaint. When the investigation is complete the CEO will send a letter of explanation to the complainant within the timeframe set out in the procedure advising of the outcome, suggested remedy and what to do if they are still unhappy.

Line managers are responsible for ensuring:

- All complaints, comments and compliments are appropriately recorded.
- All staff and volunteers they manage are aware of and correctly follow the complaints, comments and compliments policy and procedure.
- Appropriate systems are in place within the services they manage to ensure that services users are aware of how to raise complaints, comments and compliments and that information about how to do this is easily accessible.
- All actions required in response to a complaint or comment within services they manage are completed in a timely and satisfactory manner.

f) Staff and volunteers

Staff and volunteers are responsible for:

- Understanding and following the complaints, comments and compliments policy and procedure
- Informing service users about how to raise complaints, comments and compliments and providing appropriate support to do this where needed
- Discussing with their line manager as soon as is possible any incident which they think has or may result in a complaint. Note that the client does not formally need to say they are complaining.

Most complaints and concerns are dealt with informally. Staff and volunteers should encourage complainants to speak to staff supporting them about their concerns at the time of their dissatisfaction. All complaints and comments and action taken, even if they are not formal complaints, must be recorded on the complaints form and submitted to the Vice Principal/Delivery and Development Manager who will enter the details onto a Central Log.

g) Apprentice/Learner:

When the apprentice/learners has a cause complain, they should:

- Raise the complaint in a timely manner
- Explain the problem as clearly and as fully as possible, including any action taken to date
- Allow the Manager a reasonable time to deal with the matter
- Recognise that some circumstances may be beyond VHL's control

Level 1: Local Level (informal resolution)

You are expected to try to resolve a complaint directly, informally and quickly with the person/department concerned. In some circumstances, in the first instance, you may prefer to

approach a different member of staff e.g. Personal Tutor, Course or Module Convener.

You should raise the complaint within 1 month of the unsatisfactory circumstances occurring, at the

latest. The sooner the matter is raised, the better.

You are expected to explain clearly what the problem is and what outcome you are seeking.

If you are dissatisfied with the outcome, you can escalate your complaint to level

If the complaint is not resolved at the informal stage, or the complainant does not wish to follow the informal complaint process, they should:

Communicate their complaint in writing to complaints@verityhealthcare.co.uk. To speak to someone in person about a complaint please contact Head Office on 0203 643 5295.

Bring their complaint to the attention of Verity Healthcare Limited within 12 weeks of the incident occurring.

Explain the concern as clearly and as fully as possible, including any action taken to date.

12. Promote the policy

The board and directors of VHL recognise the need to publicise the existence of our complaints procedure so that people – staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA etc know how to contact us to make a complaint.

We adopt effective communication with employers, staff, learners, stakeholders through regular contacts to communicate the contents of the policy – why it was created, what is the purpose, how the policy document will be utilized in the company and how and when updates to policies are being made.

Following are the ways of promoting our complaint policies to employers, staff, learners, :

h) Inform staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA up-front:

- At the beginning of developing the policy, staff are made aware of how the company policies is being developed.

- Explain why the information is vital and relevant, and what impact it will have on them.

i) Asking for feedback:

- To encourage staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA, general public involvement, by asking them for ideas regarding what they think must be included or altered in the policy manual or staff and learner/apprentice handbook.
- Include as much of the staff and learner/apprentice feedback as possible in updating the policy documents.
- Involve staff and learners/apprentices in drafting particular sections of the policy document if it makes sense.

j) Introduce the final product:

- Conduct a meeting with all staff, learners/apprentices, parents, visitors, employers, subcontractors and funding agencies e.g. ESFA where possible to announce the completed handbook or manual and review its purpose.
- Emphasize its significance and how it must be utilized.

k) Request staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA to review the policy manual:

- Give staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA a chance to ask questions.
- Distribute the manual to staff, either in a hard copy or advise them on how to access the document electronically.
- Ask staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA to give feedback on improving the document.

l) Request staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA sign-off:

- It is vital for staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA to read the document to become familiar with the company's policies.
- Request every staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA sign-off on having read the document.
- A copy of the sign-off must be placed in the staff, learners/apprentices, personnel life and files for employers, subcontractors, funding agencies e.g. ESFA.

m) Location and access to the Policy

The policy is sited at specific locations and discussed for easy access by staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies e.g. ESFA including:

- Introduced at induction sessions with staff, learners and employers and as part of the induction pack
- Published on the company website for access by everyone
- Having a summary within the staff, apprentice and employer handbook
- Adding a summary on the commitment statement
- By email from complaints@verityhealthcare.co.uk

- Storing the policy at The 365 drive – Apprenticeship policies and procedures for easy access and retrieval
- Publicise the policy company website,
- Accessible via dedicated portal,
- Discussed as part of the employer engagement, learner/apprentice assessment procedure, supervision etc

13. Getting Engagement Towards the policy

In addition to the procedures listed above, we adopt the various methods below to secure engagement towards the Complaints policy.

a) Personal Level Meetings

In a skip-level meeting, the principal meets one-on-one with employers, staff/assessors and other stakeholders the complaint policy, a complaints, compliments and concerns and how effective the policy had to address these complaints, compliments and concerns.

The other leaders and manages adopt the same procedure with learners/apprentices, other staff/assessors and funding agencies, employers, local authority officials etc to stay in touch with the day-to-day realities of the business, particularly, the level of satisfaction with the apprenticeship programmes and increases the flow of information regarding the programmes.

b) Participants deliberations

We shall adopt this approach as a deliberate and deliberative effort to all those involved in the apprenticeship – staff, learners/apprentices, parents, visitors, employers, subcontractors, funding agencies but a very personal level and in a conversational way to help secure credible feedback on the apprenticeship programme and how the complaint, compliments and concerns policy should be developed, reviewed and distributed.

c) Stakeholder Meetings

We shall organise community/stakeholder meetings with a range of people, employers and other organisations to solicit a diversity of views/perspectives including minority or disadvantaged groups in 'shaping' the complaint policy documents, taking into accounts how to address a wide range of needs – influencing policy formulation and development.

d) Staff, Apprentices, Employer and Stakeholder Surveys

To secure community engagement, we conduct online surveys to help understand how we develop or make changes to existing complaint policies, we conduct surveys using SurveyMonkey.com to solicit views and engagement on how to develop, distribute and review the complaints policy

e) Conduct Exit Interviews

We conduct Exit interviews of departing staff, apprentices, employers where we can gather a treasure trove of information on 'the average' experiences with the complaint's procedure as they most likely feel able to provide genuine information of on how efficient the complaints, concerns and compliments procedure of the organisation has been. This enables us to understand how to secure engagement towards the policy.

f) Confidential Complaints Line

We are aware many employees/staff and learners/apprentices or even employers would not do speak up because they are afraid that they will suffer adverse consequences if they lodge soke out about a complaint procedures. We engage with staff, learners/apprentices and employers by offering them the alternative means of giving their feedback on how best we can secure engagement with the policy through and independent confidential line.

g) Workplace Review

The Centre manager and leaders conduct workplace reviews of several matters including how to get staff and learners/apprentice to engage with the various policies for which the complaints policy is a part. Together with workplace reviews conducted by an independent organisation, Worklogic, we are able to explore, gain practical and strategic advice to engage all stakeholders with the complaint policy and other matter. These reviews create an opportunity for staff and learners/apprentices and give them a voice to help improve the morale, efficiency, functioning and ethics of the team.

h) Deliberate Dialogue

We adopt deliberate dialogue approach to builds on dialogue and secure consensus amongst staff, learners/apprentices, employers, enabling participants to work together (often with expert input) to develop an agreed view or set of recommendations. As participants may then be involved in taking their recommendations forward to decision-makers, this can encourage shared responsibility for implementation. Examples include national dialogues on science and technology.

14. Train Employees in implementing the Policy

Our Board members and Directors have a proactive responsibility to be sure that policies and procedures are developed to cover all reasonably foreseeable occurrences and events in the facility, and that such policies have certain qualities: they are thorough and comprehensive, they are in accordance with prevailing legal standards, there is congruence between what the policies say, and actual legislative standards require.

It is our position as a Centre that policies and procedures should not simply be written but they must be understandable to the people who will follow them. Directors and Management have the responsibility to train staff members as to the contents of policies and procedures and the skills necessary to implement policies and procedures. The purpose of doing so is, again, twofold:

- to be sure that staff members are properly prepared to do their jobs, and
- to serve as a key tool in liability risk management — relating to complaints.

The legal responsibility to train applies to training of staff on policies and procedures. That responsibility is not met simply by distributing written policies and procedures to employees and expecting them to read and follow the policies. Nor is it met by asking (or requiring) employees to sign a document that indicates that they have received policies and agreed to read them and follow, or abide by, them. Such documents do not absolve management of their responsibility to train staff, and to demonstrate that training occurred and was adequate.

VHL staff training on policies and procedures has three key elements:

- training on the cognitive aspects of policies—that is, knowledge of the contents of policies;
- training on key psychomotor skills necessary to implement, or carry out, policies; and
- training on good decision-making so that staff members can properly apply policies and procedures.

All three aspects of training are important and are intended to address in a comprehensive training programme intended to ensure that all staff, learners/apprentices and employers understand the importance of the various policies.

In general, we approve and encourage the following employee trainings:

- Formal training sessions (individual or corporate)
- Employee Coaching and Mentoring
- Participating in conferences
- On-the-job training
- Job shadowing
- Job rotation

The various learning and development provisions are focused on explaining the need for the policy, scope and how the policies help the organisation to achieve its goals. The training helps all staff, learners/apprentices, employers, all stakeholders etc on how to complaint and handle complaints including how complaint investigations are held, the lessons learnt to inform training and improving the quality of services.

In this sense, staff and apprentices have to complete various tasks including discussions of scenarios, case studies etc relating to the policy intending to help them become better at their job.

15. Providing Training

Some policies and procedure may need more extensive and intensive training to make sure that employees understand how the policy applies to them, thus provide staff and learners/apprentices training, as needed. Scheduling training sessions on how to use the complaint policy would be on an on-going basis or an as-needed basis.

The specific training methods adopted to ensure staff are well acquainted with the Complaints, compliments and concerns policy include:

- Workshops
- Seminars
- Retreats
- Lectures
- Conferences
- Induction
- Supervision

These ongoing education programmes have been a great way their development

16. Complaint/Appeal about Recruitment Process and Outcome

The Centre aims to recruit apprentices onto programmes in a fair and transparent way. This will include checking for prior qualifications and experience and ensuring that, as far as is practical person circumstances are taken into account. A clear and equitable recruitment process will be followed for all those applying to undertake apprenticeship programmes through the Centre.

The Centre ensures that staff involved with admissions, selection, interviews, decision making and similar activities are well trained, professional and receive appropriate training and development in admissions and related areas.

The Centre staff participate in national learner/apprenticeship admission agendas through working parties and conferences. This facilitates the dissemination of good admissions and learner recruitment practices across the Centre. Ongoing staff development is offered to staff involved in recruitment and admissions to ensure compliance with regulations and consistency of procedures. For example, these training sessions include workshops about recruitment strategy, qualifications, interviews and entry requirements as well as technical training for staff involved in recording offers.

If an applicant is not accepted onto the apprenticeship programme or any associated programmes, they have applied for then they are able to appeal and raise a complaint in the following ways:

a) Stage One – Informal

Applicants may express concerns about any aspect of the admissions, fee waiver, bursary or scholarship scheme process on an informal basis either to a member of staff in an academic department), or to a member of an Admissions Team. Staff will make every reasonable effort to explain procedures, allay concerns or otherwise respond to the issue raised. These discussions may be by telephone, email or other contact and, as appropriate to an informal process, a written record will not necessarily be kept.

In the first instance:

- The applicants should ideally contact the [VHL Admissions Team](#) on 0203 771 5653

Applicants concerned about the reason for an unsuccessful application or financial support decision should, before appealing a decision, obtain feedback from the appropriate department about the reasons for the decision. Feedback is provided as set out in the Centre's Admissions Policy. An appeal may be submitted subsequently if the applicant believes the decision contained any element of unfairness or error.

b) Stage Two – Formal

Complaints and appeals must be made in writing relevant Head of Admissions, Miss Ruth Nzilamosi.

Complaints and appeals will be accepted as either a dated hardcopy letter or an email. To ensure receipt, the Centre would advise submission in both formats.

They must provide:

- applicant name, address and Centre ID
- course title
- specific details of the complaint/appeal with any supporting evidence, documents or correspondence
- a statement of the action/remedy sought if the complaint/appeal is successful

The Vice Principal have expertise in all admissions matters but are not normally involved in individual decision-making. They will therefore review all cases independently. They will determine the nature of the investigation required in each case and are responsible for securing departmental cooperation with agreement on outcomes. Given that most applicants are not present on campus, face to-face meetings will not normally be expected as part of any investigation.

The Principal will acknowledge all formal complaints/appeals within 5 working days of receipt and is responsible for communicating a timescale for any investigation to the applicant.

A full written statement of the outcome of any investigation will be provided to the applicant. This will normally be within 4 weeks of a final decision.

c) Stage Three – Review by Principal

If an applicant is not satisfied with the decision taken in respect of a complaint/appeal under Stage 2 above, he or she may request that the case is looked at by the Principal. Such a request should state the grounds for appeal, which should meet one of the following criteria:

- that there were procedural irregularities in the investigation of the complaint by the Principal
- that the finding of the investigation was inappropriate in light of the evidence

Requests must be made by dated letter or email to the Director of Policy, Planning and Compliance within 14 days of receipt of the outcome of a Stage 2 complaint or appeal.

The Principal is responsible for establishing whether the Stage 2 investigation was conducted fairly and that all decisions relating to it were reasonable and justified in the light of the evidence. New evidence will not normally be permitted at this stage. The decision by the Principal on whether any new information may be submitted is final. They may call upon the assistance and expertise of other Apprenticeship accredited staff members to inform their judgement but are not required to do so. Their decision on a complaint/appeal is final and there is no further right of or process for appeal within the Centre.

d) Retention of records

All records are held in line with the [Centre's Retention of Records Policy](#).

Recording of complaints and appeals will be held by the relevant Head of Admissions. They will carry out statistical reporting of these to the Principal on an annual basis.

17. Complaint about Apprenticeship Training Provision

The Centre aims to provide high quality training that is:

- Meeting the apprenticeship standard/framework being undertaken
- Planned and delivered by occupationally competent staff who maintain their occupational and educational professional development through regular updates.
- Builds knowledge, skills and behaviours to enable the apprentices to undertake end point assessment (where required).
- Timely marking and return of assignments or other work used to support progression towards end point assessment.
- Provides training study days as planned with minimum disruption.

The apprentice can raise a complaint about the quality of the training being provided where they think it is impacting on their ability to them gaining the knowledge, skills and behaviours required to enable them to progress in their apprenticeship programme and to timely completion.

in the following ways:

a) Stage One – Informal

Learners may express concerns about any aspect of the quality of apprenticeship provision on an informal basis to a member of staff in an academic department) especially the assessor/lecturer. Staff will make every reasonable effort to resolved any complaints/concerns or refer the matter to a more appropriate individual within the Centre to help. These discussions may be by telephone, email or other contact and, as appropriate to an informal process, a written record will not necessarily be kept.

In the first instance:

- The applicants should ideally contact the [VHL Programmes Team](#) on 0203 771 5653

All matters concerning apprenticeship provision would be investigated by obtaining feedback from the appropriate department about the reasons for the decision. Feedback is provided as set out in the Apprenticeship Delivery Policy. An appeal may be submitted subsequently if the applicant believes the decision contained any element of unfairness or error.

b) Stage Two – Formal

Complaints and appeals must be made in writing relevant Senior Leader – Apprenticeship Standard provision, Dr Barbara Esther Ofori-Kyereh.

Complaints and appeals will be accepted as either a dated hardcopy letter or an email. To ensure receipt, the Centre would advise submission in both formats.

They must provide:

- applicant name, address and Centre ID
- course title
- specific details of the complaint/appeal with any supporting evidence, documents or correspondence
- a statement of the action/remedy sought if the complaint/appeal is successful

The Vice Principal has expertise in resolving matters relating to apprenticeship provision. They will therefore review all cases independently and determine the nature of the investigation required in each case, conduct investigations and reach outcomes.

A full written statement of the outcome of any investigation will be provided to the applicant. This will normally be within 4 weeks of a final decision.

c) Stage Three – Review by Principal

If an applicant is not satisfied with the decision taken in respect of a complaint/appeal under Stage 2 above, he or she may request that the case is looked at by the Principal. Such a request should state the grounds for appeal, which should meet one of the following criteria:

- that there were procedural irregularities in the investigation of the complaint by the Principal
- that the finding of the investigation was inappropriate in light of the evidence.

Requests must be made by dated letter or email to the Director of Policy, Planning and Compliance within 14 days of receipt of the outcome of a Stage 2 complaint or appeal.

The Principal is responsible for establishing whether the Stage 2 investigation was conducted fairly and that all decisions relating to it were reasonable and justified in the light of the evidence. New evidence will not normally be permitted at this stage. The decision by the Principal on whether any new information may be submitted is final. They may call upon the assistance and expertise of other Apprenticeship accredited staff members to inform their judgement but are not required to do so. Their decision on a complaint/appeal is final and there is no further right of or process for appeal within the Centre.

d) Stage Four – Complain to the Education and Skills Funding Agency (ESFA)

If the complainant is still dissatisfied with the Stage 3 of the complaint procedure, they should complain to the Education and Skills Funding Agency (ESFA) about how your complaint regarding the [apprenticeship schemes](#)

The ESFA does not deal with complaints about employment issues (for example, a problem with your contract if you're working as an apprentice).

The complainant must contact the ESFA within 12 months after the issue happened.

Email or post your complaint to the ESFA complaints team.

ESFA complaints team

complaints.ESFA@education.gov.uk

Complaints team

Education and Skills Funding Agency

Cheylesmore House

Quinton Road

Coventry

CV1 2WT

The ESFA will reply to let you know what will happen next.

If you're unhappy with the ESFA response

You can [contact the Department for Education](#) if you're unhappy with how the ESFA has dealt with your complaint.

e) Retention of records

All records are held in line with the [Centre's Retention of Records Policy](#).

Recording of complaints and appeals will be held by the relevant Head of Admissions. They will carry out statistical reporting of these to the Principal on an annual basis.

This complaints policy also relates to training provision provided by sub-contractor training such Functional Skills. The sub-contractor will have a complaints/appeals policy and the apprentices will be provided with this, where applicable.

18. Complaint/appeal about assessment of mandatory qualification

Some apprenticeship programmes include a mandatory qualification within it that require regular on the job assessment in the workplace and completion of an online portfolio of assessed evidence.

Where this is the case the awarding bodies maintain a complaints process that is separate to this policy. The awarding body complaints/appeals policy will be given to apprentices at the start of their programme and also placed onto the online e-portfolio system.

An apprentice may raise a complaint/appeal regarding:

- The assessment process, including planning and clear written feedback on progress that helps them complete a high standard of work.
- Timely assessment of submitted work as part of the mandatory qualification
- Appeal against decision on work submitted not passing assessment
- Appeal against decision to remove them from the apprenticeship programme.

If an apprentice wants to raise a complaint then they should follow the process set out above for complaints.

If an apprentice wants to appeal a decision made regarding assessment or removal from the apprenticeship programme then they should follow the appeals process set out below.

19. Appeals process

Where an apprentice is deemed not to have achieved the required standard of competence as set out in the mandatory qualification assessment criteria they should write to request a meeting with the Lead internal quality assurer (IQA) for the apprenticeship programme being undertaken.

- The Lead IQA records the appeal on the complaints and appeals log.
- A meeting with the Lead IQA and the apprentice must be held within 5 working days (where off duty permits) or as soon as is practical where off duty means the apprentice is not able to make a meeting in that timescale.

- Following the meeting the Lead IQA will confirm in writing to the apprentice an outline of the discussion and what action the Lead IQA will take to investigate the appeal.
- The Lead IQA will investigate the assessment decision made and respond in writing what activity they undertook to investigate the appeal to the apprentice with their decision on the outcome within 5 working days.
- If the apprentice is satisfied with the outcome, they will reply, in writing, to the Lead IQA to confirm this. If they are not satisfied with the outcome they are able to escalate their appeal to the Centre manager within 5 working days of the Lead IQA decision.
- The apprentice must write to the Centre manager within 5 working days of receiving the written response from the Lead IQA.
- The Centre manager will undertake further investigation and respond in writing what activity they undertook to investigate the appeal to the apprentice with their decision on the outcome within 5 working days.
- If the apprentice does not accept the Centre manager's decision then the apprentice may appeal to the awarding body's External Quality Assurer (EQA) who will investigate following the Awarding Body's appeals process.
- Where the apprentice does not accept the EQA decision they may appeal in writing directly to the Awarding Body. Pearson are the current Awarding Body and their appeal documents can be found here <https://www.pearson.com/delivering-our-qualifications/centre-development/centre-document-library/policies-and-procedures/appeals>

If the Awarding Body upholds the apprentices appeal, the Centre will make all effort to rectify the error made during the assessment and verification of the apprentices' work to ensure the apprentice is not disadvantaged in completing the apprenticeship programme.

If the appeal decision is not upheld by the Awarding Body and an apprentice has been deemed not to have satisfactorily followed the Awarding Body rules (such as plagiarism) or not completed work to a satisfactory standard the Awarding Body can chose to suspend or remove the apprentice from the mandatory qualification.

If the apprentice will not be able to complete the mandatory qualification they will be unable to meet gateway requirements for end point assessment and therefore will be unable to complete the full apprenticeship programme. They will therefore cease undertaking the apprenticeship programme with immediate effect.

20. Complaint/appeal about end point assessment

This section only applies to apprentices who are undertaking an apprenticeship standard (not a framework).

The final part of an apprentices programme is to undertake end point assessment. The Centre training team will work with the apprentices to prepare them for end point assessment, using the guidance provided by the end point assessment organisation (EPAO).

An apprentice may complain about the quality of the end point assessment preparation provided by the Centre if they think it did not adequately prepare them to submit written

work required e.g. a written portfolio of work, written examinations or workplace observations/interviews.

An apprentice may complain/appeal about the outcome of end point assessment using the EPAO complaints/appeals process and procedure. The apprentices will be given a copy of the EPAO complaints/appeals policy and a copy will also be on the online e-portfolio system.

21. Complaint about member of Centre training team

The Centre staff are expected to maintain high standards of professionalism at all times in the classroom setting, in when in the workplace when assessing apprentices or meeting with apprentices and managers. Standards of professionalism should also extend to the way in which Centre staff respond in writing or when during conversations on the phone.

If an apprentice or their manager is unhappy with the way in which a member of Centre staff has behaved they are able to raise a complaint following the process outlined above.

22. Complaints - Working with Employers and Subcontractors

While the majority of the feedback shared with us by employers is positive, we recognise that on occasions employers may wish to express concern or dissatisfaction about aspects of our apprenticeship delivery, including by subcontractors.

Our commitment to high quality learning and development extends to the way we work with employers to resolve issues and concerns that they wish to raise. This procedure has been developed to provide a step-by-step guide to employers to ensure that concerns relating to VHL apprenticeship programme delivery are resolved successfully at the earliest possible opportunity.

23. Time Limit for Making a Complaint

Verity Healthcare need not to consider complaints made more than 12 months after the date on which the matter being complained about occurred or the date on which the matter being complained about came to the notice of the complainant. However, such complaints may be considered if the complainant had good reasons for not making the complaint within the 12 months' time limit and it is still possible to consider the complaint in a way that would be effective and fair to all those involved i.e. there is likely to be sufficient access to information and/or individuals involved at the time.

Full account will be taken of all the circumstances before a decision is taken by officers that a complaint is out of time and complainants will be given clear reasons for such a decision. Responsibility for deciding whether a complaint is out of time rests with the relevant Designated Complaints Officer or the Complaints Manager.

24. Advocacy

Advocacy is the name given to the many ways in which people can be helped to get their message across. Advocates provide independent and confidential information, advice, representation and support to apprentices. They work one-to-one with individuals to help them gain confidence and support them in potentially stressful situations such as when making a complaint.

At any time during the complaints process, complainants can have the assistance of an independent advocate. Verity Healthcare Limited will support any requests for such assistance by providing information about the availability of advocacy services in the relevant area as a matter of good practice. Advocates will need to show that a complainant has requested their assistance.

A variety of advocacy schemes exist. Their services are independent, confidential and free. Information about advocacy is available from Verity Healthcare Limited and other organisations.

25. Remedies and Redress

Attempts to resolve complaints should continue even when the complaint has withdrawn from the complaints process.

A remedy should, as far as possible, put the complainant back into the position that they would have been in if the situation giving rise to the complaint had not occurred. The remedy should also be appropriate and proportionate to the circumstances and to any injustice caused. It should take account of the complainant's views and desired outcomes and the effect of the complainant's own actions, such as delay on their part.

The response to a complaint may require Verity Healthcare Limited to:

- give an explanation for its actions;
- carry out a reassessment of needs;
- reconsider an issue;
- change a decision;
- amend practice/procedures;
- consider financial redress; or
- make an apology.

Any of these actions by Verity Healthcare Limited in response to a complaint does not automatically render Verity Healthcare Limited liable in law.

26. What is not required to be dealt with under the Complaints Regulations?

Under the 2009 Complaints Regulations Verity Healthcare Limited is not required to consider complaints falling into the following categories:

- the person wishing to complain does not meet the requirements of “who may complain” and is not acting on behalf of such an individual;
- the complaint is not in regard to the actions or decisions of Verity Healthcare Limited, or any body acting on its behalf;
- the same complaint has already been dealt with under the Complaints Regulations or under the former 2006 Regulations;
- the complaint has already been dealt with by the Local Government Ombudsman;
- there are other more appropriate channels for dealing with the matter such as independent tribunals, the matter complained about has already been the subject of court proceedings;
- it relates to criminal investigations where court action is pending;
- the complaint is made by another organisation or statutory body or by someone employed by such an organisation acting in a professional capacity; or

- it is a staff complaint about personnel / employment issues.

In matters which have been or are before the courts, any challenge to evidence submitted, or to a court decision, should be made as part of the legal process. Verity Healthcare Limited's complaints process cannot be used to reconsider, or attempt to overrule decisions made by the courts or any other quasi-judicial bodies, including tribunals, or the Ombudsman.

Where a complainant states in writing that they intend to take legal action or have instigated legal action, the complaints handling process will normally be suspended pending the conclusion of any legal process. The complainant will be advised that they can ask for the complaints process to be restarted once the legal process has been completed.

If a complaint is submitted via solicitors (but they are not taking legal action), the complainant will be asked to agree to the solicitors remaining in the background until the complaint has been investigated. The complaints process is not intended to be an adversarial process and cannot be operated effectively without the direct involvement of the complainant.

Complaints from other agencies/professionals about the actions of Verity Healthcare Limited and its staff will require a management response.

Complaints made by employees of Verity Healthcare Limited are dealt with under Verity Healthcare Limited's Grievance Procedure and other Equal Opportunity policies

a) Informal Stage

It is recognised that some concerns are raised informally, and these can and should be dealt with immediately. An informal complaint should be raised directly with the relevant Tutor or Mentor.

Any such concerns should then be raised promptly and directly with the individual against whom there is a concern where relevant.

We aim to resolve informal concerns quickly and effectively.

If concerns are not satisfactorily resolved in this way complainants should follow Verity Healthcare Limited's formal Complaints process as outlined below.

b) Formal Stage

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

27. Dealing with Unreasonably Persistent and Vexatious Complaints

Verity Healthcare Limited is committed to dealing with all complaints fairly and impartially and to providing a high quality service to those who complain. However, there are a small number of complainants who, because of the frequency of their contact with the Authority or their failure to engage fully with the complaints process, hinder consideration of their own complaints. Such complainants often make the same complaint repeatedly (with minor differences) but never accept the outcome or seek unrealistic outcomes.

An unreasonably persistent complaint is likely to include some or all of the following:

- the complaint arises from a historic and irreversible decision or incident;
- contact with the local authority is frequent, lengthy, complicated and stressful for staff;
- the complainant behaves in an aggressive manner or is verbally abusive or threatening;
- the complainant changes aspects of the complaint partway through the authority's consideration of the complaint;
- the complainant makes and breaks contact with the local authority on an ongoing basis; or
- the complainant persistently approaches the local authority through different routes about the same issue in the hope of getting different responses.

Where the Authority has attempted to progress the complaint, but the complainant has either refused or delayed such progression through excessive objection to the process rather than addressing the substantive issues of the complaint, the complainant will be advised that this is causing delay and is unreasonable.

If the complainant does not co-operate with the consideration of their complaint but continues to correspond, the correspondence will be carefully considered to see if it raises any new matters or presents significantly new information. If no new matters are raised or new information presented, the complainant will be informed that the Authority cannot proceed under the complaints arrangements and will not enter into any further correspondence about the matter. The complainant should be advised of any other courses of action which may be open to them, e.g. Local Government Ombudsman, Judicial Review, or the Courts.

If the complainant still continues to correspond and the further correspondence does not present significantly new matters, the correspondence will only be acknowledged rather than acted upon. The complainant should again be advised of any other courses of action which may be open to them.

Where all options for resolving the complaint have been exhausted and it is considered that the Authority cannot offer further assistance, this will be explained to the complainant and confirmed in writing. Once confirmation has been given that the matter is closed, no further correspondence will be entered into unless the complainant is raising a fresh complaint which is not related to that which has already been through the complaints process.

28. Unacceptable Behaviour

Staff of Verity Healthcare Limited are expected to be patient and courteous at all times. However, staff are not expected to tolerate behaviour which is abusive, threatening or offensive. When it is anticipated that complainant may put up 'unacceptable behaviour' with regards to the investigation process, the matter will be transferred to the Local Authority and where necessary to the Local Government Ombudsman for further action.

Restricting Access

If Verity Healthcare Limited considers that a complainant's behaviour is unacceptable, the complainant will be informed of this and of the reasons why the behaviour is unacceptable and be asked to change it. If the unacceptable behaviour continues, a decision may have to be taken to restrict access to the complaints process and to Verity Healthcare Limited's staff and offices. The decision to restrict access will be taken by the relevant Designated Complaints Officer and the Complaints Manager in liaison with legal services and will only be taken following a prior warning to the complainant.

The options which may be considered are:

- requesting contact in a particular form (for example by letter only);
- requiring contact to take place with a named officer;
- restricting telephone calls to specified days and times; or
- asking the complainant to enter into an agreement about their behaviour and/or future contact with Verity Healthcare Limited

Depending on the circumstances, a time limit may be set on the duration of any restrictions applied.

If the complainant does not adhere to the restriction imposed, they will be informed that Verity Healthcare Limited will not be taking any further action and that any further correspondence which does not present significantly new matters or new information will be kept on file but not necessarily acknowledged.

In certain cases, Verity Healthcare Limited may consider referring the complaint to the Local Government Ombudsman before the complaints process has been exhausted or advise the complainant that it cannot assist further and inform them of their right to approach the Local Government Ombudsman themselves.

All those involved in the complaint, be they complainants, their representatives or local authority staff, must be treated with respect. Behaviour which is abusive, offensive or threatening will not be tolerated. In accordance with Verity Healthcare Limited Prevention of Violence at Work policy, staff who are subjected to such behaviour will record the incident and report it to their line manager.

In extreme cases where the behaviour threatens the safety and welfare of staff, the matter will be reported to the Police and legal action will be considered. The complainant will not be given any prior warning in such cases.

29. Recording/Monitoring

Effective recording, monitoring and analysis of complaints are vital if the complaints process is to be seen as a positive contribution to improving service provision.

The ESFA guidance and the Regulations require that Verity Healthcare Limited keeps a record of all social care complaints received, including the nature of complaints, the action taken, the outcome, and those instances where timescales agreed with complainants have not been met.

All complaints are recorded electronically and categorised using a standardised computer database known as the customer feedback database. The customer feedback database is also used for recording comments and compliments, as well as other feedback about service users' experience of contacting Verity Healthcare Limited obtained via the "Your Views Count" leaflet.

30. Annual Report and Evaluation

In accordance with DH guidance and Regulations, on a yearly basis Verity Healthcare Limited's data and the effectiveness of its complaints handling arrangements are reviewed and a full anonymised report covering the council year is presented to senior managers.

The Annual Report is a publicly available document and includes information on:

- the number of complaints received and any that were considered by the Local Government Ombudsman;
- which service user groups made complaints;
- the subject matter of complaints and their outcomes;
- compliance with agreed timescales;
- learning points and service improvements;
- a summary of statistical data about age, gender, disability and ethnicity of service users involved in complaints;
- details of advocacy services provided; and
- the number and type of comments and compliments received.

Regular analysis of collated data is undertaken and discussed by appropriate management teams who consider any action needed to respond to trends. In addition, Verity Healthcare Limited's Business Intelligence Group has a role in identifying learning points from complaints investigations, exploring issues with DCOs and reporting to the Senior Management Team accordingly. This is an important part of the process of using customer feedback to promote continuous improvement.

Retention and Disposal of Complaints Records/Data Protection

All aspects of Verity Healthcare Limited's complaints handling arrangements must adhere to the requirements of the Data Protection Act 1998 and the Freedom of

Information Act 2000. Any personal information obtained in relation to a complaint will only be used for the purpose of considering the complaint.

Complaints files will be retained and destroyed in accordance with legal requirements and Verity Healthcare Limited's policy and procedures for the retention and destruction of records.

Electronic records of individual complaints held on the customer feedback database will also be retained and destroyed in accordance with legal requirements and Organisation policy. Statistical reports that do not identify individuals will be retained indefinitely in order to assist with analysis of trends over time.

Summary Of Complaints Handling Arrangements

On Receipt of a Complaint

Listening

Complaints are received in a variety of formats, e.g. by letter, email, feedback form, on-line, telephone or in person at a office of Verity Healthcare Limited. However they are received, every effort will be made to resolve complaints at their source of origin. If it is possible to resolve the matter almost immediately, i.e. the same day or by the following day, there is no need to use the complaints process.

If the complaint is made orally and is not one which can be resolved immediately, the person to whom the complaint is made will write it down and provide a copy of the written complaint to the complainant.

All complaints must be acknowledged in writing no later than three working days after receiving it. If known at this point, the acknowledgement will give the name and contact details of the person who will deal with the complaint. Complaints will usually be investigated either by the staff who have been dealing with the complainant or by the local manager with direct responsibility for the case or service in question. If this is not appropriate, they will be referred to the Designated Complaints Officer.

If the complaint involves both health and social care services, Verity Healthcare Limited will contact the relevant health body to agree which body will take the lead in investigating the complaint and responding to the complainant. The complainant will be informed of which body will take the lead and will be asked for their permission to send a copy of the complaint to the lead body. (See Part I, section 12).

The manager responsible for looking into the complaint will contact the complainant, either by telephone or a personal visit, to plan with the complainant the best way to deal with the complaint and to agree a timescale for doing it. The responsible manager will listen carefully to what the complainant has to say and find out what the complainant wants to see happen as a result of their complaint.

If the responsible manager is unable to meet the agreed timescale once they have started looking into the complaint, the complainant will be informed of the reasons for the delay and kept informed of progress. A revised timescale will be negotiated. All

complaints, regardless of how complex, should be concluded at the latest within six months of receipt.

Resolving/Investigating a Complaint

Responding/Improving

The information obtained following discussion with the complainant will enable the manager to produce a [complaint plan](#). In addition to details about the elements of the complaint and the complainant's desired outcomes, the plan will include the method chosen to try to resolve the complaint. The DH guidance encourages local authorities to be creative about how they resolve complaints. There are a range of options and more than one option may be tried to resolve the complaint. However, the **Apprenticeship guidance advises that the method for resolving the complaint needs to be proportionate to the issues raised in the complaint, achievable and cost effective.**

If the complainant does not accept the offer of a discussion and/or does not agree the complaint plan, the responsible manager will, in any event, determine the method and timescale for dealing with the complaint and inform the complainant accordingly.

Possible resolution options are:

- apology / good will gesture;
- written explanation of action/policy;
- reassessment by a different worker from the team involved with the case or by a different team;
- detailed investigation by local manager;
- case review;
- mediation;
- off-line or external investigation.

The complaint plan will be updated as the investigation of the complaint progresses and the complainant will be kept informed of progress as far as reasonably practicable.

Once the details of the complaint are clear, we will assess the severity of the complaint and its impact on both the complainant and the local authority. For example, we will consider how serious are the issues being complained about and how likely are they to re-occur. This assessment will enable Verity Healthcare Limited to select the most appropriate option for resolving the complaint and determine how long it is likely to take.

Complaints and other feedback about adult social care services give Verity Healthcare Limited a valuable opportunity to learn and improve. The response to the complainant, following the consideration of their complaint, will clearly set out Verity Healthcare Limited's decision in relation to each element of the complaint and the action which will be taken with timescales for implementation. If the complaint is not upheld, Verity Healthcare Limited will give clear reasons for this conclusion. If this is the final sign-off letter, i.e. Verity Healthcare Limited considers that there are no further options for

resolving the complaint, the response will advise the complainant of their right to refer their complaint to the Local Government Ombudsman (see section 3 below).

Off-line-Investigations

In certain circumstances Verity Healthcare Limited may decide to undertake an off-line or external complaint investigation. This may be appropriate if the complaint is particularly complex or serious or concerns services provided by more than one agency. It may also be offered in cases where repeated attempts to resolve the complaint locally have been unsuccessful or where the complaint has become vexatious. The decision as to whether an off-line or external investigation is appropriate will rest with the Designated Complaints Officer in liaison with the Complaints Manager.

Within Verity Healthcare Limited, off-line investigations are usually carried out by Senior Managers. This means that such investigations are carried out independently of the service and staff being complained about. Occasionally an external investigator may be appointed if a particular expertise is required or if demand exceeds the group's capacity to deal with the volume of investigations at a particular time.

The Investigating Officer will review the complaint plan and the action taken so far to try to resolve the complaint. The Investigating Officer will then commence the detailed investigation of the complaint in liaison with the complainant, the Designated Complaints Officer and relevant staff. The Investigating Officer will plan how the investigation is to be carried out and will ensure that all those concerned in the process understand it and are kept informed of progress. The Investigating Officer has access to all relevant records and staff.

Upon completion of the investigation, the Investigating Officer will produce a report with recommendations and forward it to the relevant Designated Complaints Officer. The DCO will consider the report and recommendations and respond to the complainant with a copy of the Investigation Report. The response will set out the Designated Complaints Officer's decision in relation to each element of the complaint and the action which will be taken with timescales for implementation. If the complaint is not upheld, Verity Healthcare Limited will give clear reasons for this conclusion. The response will also advise the complainant of their right to refer their complaint to the Local Government Ombudsman (see section 3 below).

Mediation

Mediation is a voluntary and confidential process which aims to help people in dispute to reach agreement in order to resolve their complaint. The process is managed by an impartial and independent mediator whose role is to promote communication between the parties to encourage a better understanding of the issues affecting them. Mediation does not set out to find fault, assign blame or punish anyone; it focuses instead on problem-solving and reaching agreement.

If, during discussion of the complaint plan, the manager dealing with the complaint and the complainant consider that mediation may be a way of resolving the complaint, this will be offered.

All mediators are trained professionals who will be independent of the service being complained about. A mediator will arrange to meet with the complainant independently to discuss the complaint, identify what the complainant hopes to gain from the process and seek their agreement to continue with mediation.

The mediator will then arrange a mutually suitable venue to meet both parties. The meeting will commence by sharing and summarising information. Both parties will agree the areas for discussion and be encouraged to contribute to the discussion.

At the close of the meeting, an agreement will be produced outlining the areas that have been agreed which both parties will sign up to as the resolution of the complaint.

Links to Other Procedures

There are other procedures which have a significant bearing on Verity Healthcare Limited's complaints policy and handling arrangements, for example Safeguarding Adults' Procedure, Deprivation of Liberty Safeguards (DoLS), disciplinary procedures. It is essential that complaints falling under other procedures are clearly identified so that joint action can be taken where required.

If a complaint made to Verity Healthcare Limited relates to services operated by another authority or agency, or has implications for the services operated by another authority or agency, the complaint will be sent to that agency, subject to the complainant agreeing to the release of any confidential information.

Most letters from councillors and Members of Parliament are regarded as referrals/requests for information and are dealt with through a separate process which is outlined in an MP Protocol (link to staff guidance). If an MP or councillor wishes to assist their constituent to make a complaint under this policy, the MP or councillor will be informed of the process that will be followed and then, subject to the agreement of the complainant, they will be advised of the outcome once the complaint has been through the complaints process.

Local Government Ombudsman

If the complainant remains dissatisfied with Verity Healthcare Limited's final response to their complaint or they consider that Verity Healthcare Limited has not responded within a reasonable time, they can complain to the Local Government Ombudsman who is completely independent of Verity Healthcare Limited.

The Ombudsman may investigate complaints jointly with the Health Service Ombudsman if the complaint was about joint services.

The Ombudsman can be contacted at:

LGO Advice Team
PO BOX 4771

Coventry CV4 0EH

Tel: 0300 061 0614

Email advice@lgo.org.uk

Website www.lgo.org.uk

How to complain to ESFA

The ESFA only accept complaints in writing, by email or letter, except where they are required to make reasonable adjustments. Please let them know if this applies to you, either through a third party or by calling them, and they will arrange for someone to handle your complaint accordingly.

If you have difficulties in providing details in writing or if you are under 18, they will consider complaints made on your behalf by a third party. You will need to confirm that they can communicate with that third party on your behalf. If the complaint is on behalf of more than one person, they will need written permission from everyone.

The Education and Skills Funding Agency is responsible for registering and regulating organisation providing apprenticeship training. Complaints may be sent to:

Service Desk
Education and Skills Funding Agency
Cheylesmore House
Quinton Road
Coventry
CV1 2WT

Process for Monitoring Compliance/Effectiveness

The purpose of monitoring is to provide assurance that the agreed approach is being followed – this ensures we get things right for patients, use resources well and protect our reputation. Our monitoring will therefore be proportionate, achievable and deal with specifics that can be assessed or measured.

Key aspects of the procedural document that will be monitored:

What aspects of compliance with the document will be monitored	What will be reviewed to evidence this	How and how often will this be done	Detail sample size (if applicable)	Who will co-ordinate and report findings (1)	Which group or report will receive findings
The quality and timeliness of the responses to complaints or appeals received within an academic year.	The log of complaints & appeals. The written information regarding complaints/appeals	Annually, at the end of July (end of academic year)	10% of complaints raised within an academic year	Centre Manager	Education and Workforce Strategy Group

Monitoring and Evaluation

Customer feedback informs the Self – Assessment and Quality Improvement Planning Process and informs performance against Matrix Standards

Feedback is collected throughout the year and in addition to complaints, compliments and comments includes:

- Apprenticeship progress reviews
- Programme evaluations
- Apprentice and Employer surveys
- Employer Engagement Monitoring Visits
- All apprentice learning sessions
- Learner Voice

Complaint Plan

Name of Complainant:.....

Name of service user/carer
(if different from above).....

Complainant contact details:

Address :

.....
.....
.....
.....

Postcode:.....

Telephone Home.....

Work:

Mobile.....

Service User Group..... Service User District.....

Service area complained about (e.g. finance; domiciliary care;
equipment/adaptations; day care; residential; etc)

.....
.....
.....
.....

Date complaint received in adult social care.....

Date of written acknowledgment [**must be within 3 working days after date of receipt
of complaint**]

.....

Date of contact with complainant (**can be by telephone or visit.**)

.....

Summary of

complaint.....

.....

.....

.....

.....

.....

Complainant's expectations/desired outcomes

.....

.....

.....

.....

.....

Method of dealing with complaint.....

Manager dealing and contact details.....

.....

.....

.....

Timescale for responding to complaint

.....

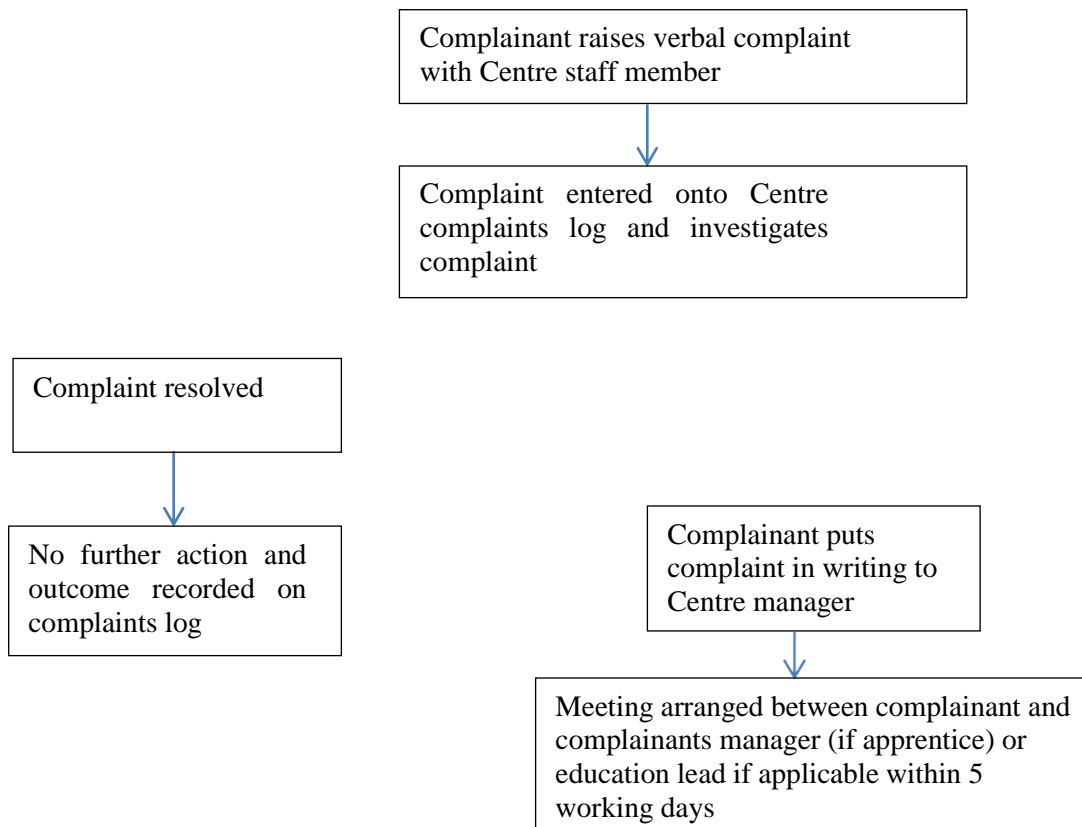
Signed

Complainant _____ Date: _____20____

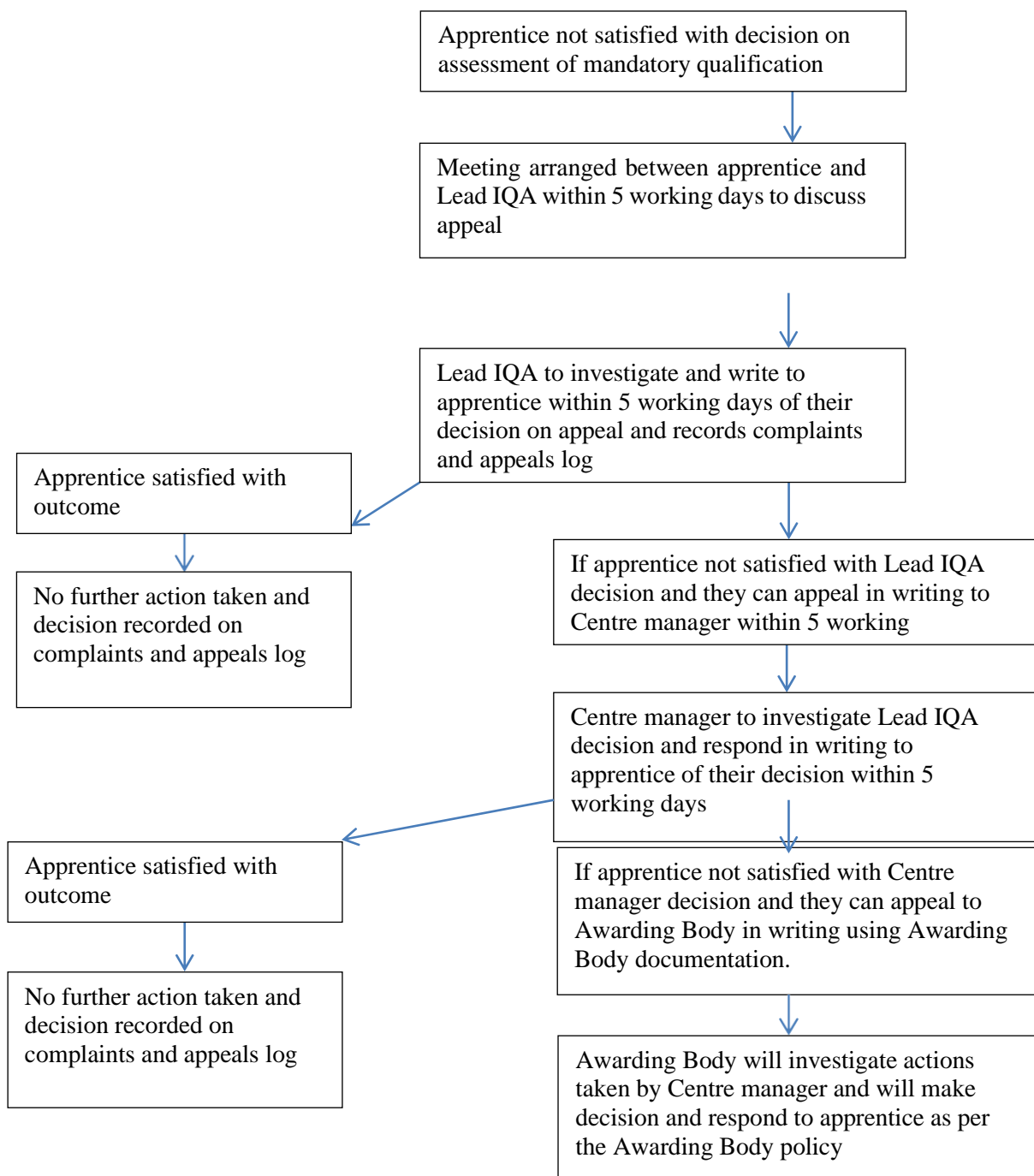
Officer/ Manager _____ Date : _____20____

[Copy signed and returned by complainant]

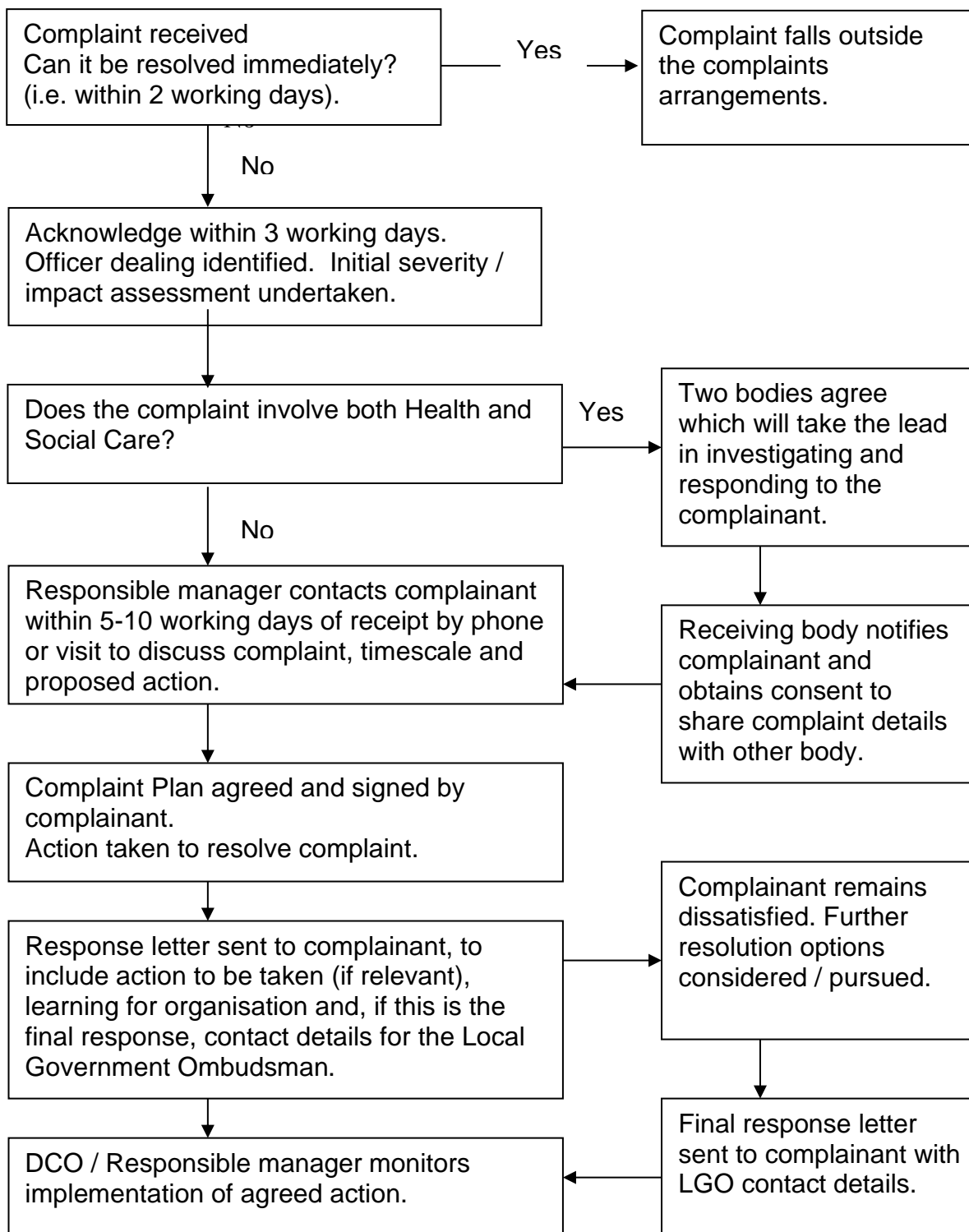
Complaints process



Appeals Process



Complaints Process Map



Annex 3

Comments and Compliments Process Map

