

COMPLAINTS POLICY

1. Key aims and principles

Sue Lambert Trust (SLT) is committed to listening to the needs and views of staff, volunteers and clients and we believe that they all have a key role to play in developing and improving our services.

We recognise that there may be times when mistakes are made or we get things wrong. Please let us know if this has happened so we can deal with it.

When this happens and we receive a complaint, we will deal with it professionally by taking your complaint seriously, recording it, responding in a timely manner, and taking action if appropriate.

No-one raising a complaint will be treated less favourably as a result of the complaint. All complaints will be dealt with in line with our Confidentiality and Equal Opportunities policies.

All clients are made aware of the complaints process via the website and when they start receiving services.

2. Making a complaint

- If the complaint can be dealt with informally, then please raise the issue by contacting the person responsible directly, or contact info@suelamberttrust.org.
- If the complaint is more serious, or you feel like you cannot approach the person directly, you may wish to make a formal complaint.
- Complaints can be made via email CEO@suelamberttrust.org or in writing to: CEO, Sue Lambert Trust, 6 Music House Lane Norwich NR1 1QL. If the complaint is about the CEO then please contact the Trustees at chair@suelamberttrust.org or in writing to: Chair of Trustees at the above address.
- Clients can request the support of an independent member of staff or volunteer to help them complete a complaint if they wish.
- All verbal and written feedback where there is action to be taken will be recorded and treated as a complaint on the complaints register. All complaints will be treated confidentially although it is likely that if the complaint relates to a volunteer or member of staff that person will need to be made aware of the nature of the complaint so that they can respond to the issues raised.
- Safeguarding principles will apply – and that whilst all efforts will be made to keep the complaint confidential where possible, other agencies may be notified on a need to know basis should there be a risk of harm to an individual or risk of crime.
- We will write to the complainant within 3 days to acknowledge the complaint and advise on who is leading the investigation. We aim to respond to all complaints within two weeks. If more time is required we will inform you.

- All complaints will be referred to the CEO who will identify an Appropriate Investigating Officer to lead on the investigation. A Clinically Experienced Person will be identified if the complaint is regarding clinical standards. The following actions will then take place:
 - i. Short meeting to identify the key issues within the complaint and agree the investigation plan (this may require an initial discussion with the complainant).
 - ii. Determination on whether organisation/clients/others are at immediate danger or risk and whether a period of suspension is required whilst the investigation is being undertaken.
 - iii. Investigation to conclude in writing with recommendations on the course of action to the CEO.
 - iv. CEO to write to complainant and accused with findings and proposed actions (note that if disciplinary investigation is recommended then this will be confirmed to the client, but no details of the investigation or its outcome will be reported to the client).
- If the complainant is not happy with the outcome they may appeal to the CEO CEO@suelambertrust.org or a Trustee chair@suelambertrust.org within 14 days of receiving the investigation report.
- We report to the Trustees annually on the number of and general nature of the complaints received.
- All fundraising related complaints to be recorded and reported to the Fundraising Regulator on an annual basis
- All GDPR related complaints to be recorded and reported to the ICO.

2.1 Anonymous complaints

Anonymous complaints will be logged. However they will not usually be acted upon unless:

- There is concern for the safety of an individual or the risk of a crime
- Complaints relating to the same issue have been previously logged

Anonymous complaints will be investigated as above, with the facts being established as far as possible without the complainant involvement in the process.

3. Training and communication

SLT is committed to ensuring that staff and volunteers are aware of this Policy and the Procedures. To ensure this SLT will:

- Include details of the Feedback and Complaints Policy and Procedures within the staff and volunteer induction processes
- Provide Policy updates at group supervision meetings

- All staff (especially Admin) to attend a workshop on complaint handling within SLT (including how to identify a complaint/feedback, how to record the complaint, how to implement the complaints process).

4. Monitoring and Review

4.1 Policy Review

This Policy will be reviewed bi-annually

4.2 Policy Monitoring

Performance against this Policy will be monitored by the Senior Management Team with updates going to the Board. The following information will be reported on and monitored:

- Training and communication of this Policy
- Data regarding the number of complaints made and the outcomes
- Data regarding responses made to clients
- Any service changes made as a result of suggestions, comments or complaints

5. Related guidance, policy and procedures

The Policy should be read in conjunction with the following:

- Equal Opportunities Policy
- Confidentiality Policy
- Safeguarding Policy and Procedures
- Disciplinary Procedures