

COMPLAINTS PROCEDURE

POLICY STATEMENT

Stepping Stones North Wales is committed to providing the highest level of service in all its work across all projects and with clients, external agency partners and members of the public. Stepping Stones welcomes opportunities to resolve any concerns informally, however it also recognises its obligation to provide clear guidelines about formal complaints and how they should be made. Complaints give us an opportunity to improve our services, procedures, and governance. Stepping Stones will monitor the nature of complaints, and the outcomes of investigations, to improve the quality of our service provision. Details of the complaint's procedure will be discussed with all clients as part of the contract to deliver the service.

PURPOSE

The purpose of this procedure is to make clear how any individual wishing to make a formal complaint about Stepping Stones should proceed. This procedure also makes clear how Stepping Stones will respond to any formal complaint.

SCOPE

This policy applies to any individual, other than a member of Stepping Stones workforce who wishes to complain about any aspect of Stepping Stones' work or actions.

COMPLAINTS FROM A MEMBER OF THE PUBLIC

Stepping Stones aims to develop successful partnerships with external agencies and members of the public. If any member of the public wishes to raise a complaint about any aspect of Stepping Stones services or conduct they should follow the guidelines contained within this procedure. Stepping Stones will respond to all complaints in a fair and confidential manner.

Stepping Stones will at all times seek to provide a quality, personal and professional service. We recognise that we may not always meet the standard expected. We will receive any complaint courteously, and with a sincere wish to resolve the complaint as quickly as possible, whilst making sufficient time for everyone involved to express their point of view.

A complaint may be made by anyone who has a genuine involvement with Stepping Stones and should be made in writing and addressed to the Director. Due to Data Protection and confidentiality complaints can only be dealt with if received from such an individual and not a third-party (eg, friend or partner).

When a complaint is received, attempts should be made to resolve at the appropriate level.

COMPLAINTS FROM A STEPPING STONES CLIENT

Stepping Stones is committed to providing the highest quality of service to all our clients. If a client is not satisfied with the quality of service provided, they have the right to complain and should follow the guidelines contained within this procedure.

We will respond to all complaints promptly in a fair and confidential manner. However, there may be occasions where Stepping Stones may be required to disclose the details of a complaint to a third party. Complainants will be advised where this is necessary.

We will ensure that no client will, in any way, be disadvantaged as a result of making a complaint.

INTERNAL PROCEDURE – INFORMAL COMPLAINT

If an appropriate person (in the terms of the complaints procedure) raises an issue but it is not formally at that point a complaint, the Clinical Co-Ordinator will contact the person with a view to understanding the nature of their dissatisfaction, supporting them in resolving their issue, and ascertaining whether they wish to make a complaint. A summary of this meeting will be recorded in writing and shared with the Director and retained.

If the client does not want to make a complaint the Clinical Co-Ordinator will, if it is felt justified, talk to the individual about whom the issue has been raised, and if appropriate agree any appropriate remedial action. If the client later decides to make a complaint, then the complaints procedure will be adhered to.

Depending on the outcome it will be decided between Clinical Co-Ordinator and Director whether the formal complaints procedure should be activated.

PROCEDURE FOR MAKING A FORMAL COMPLAINT

Any complaint should be made aware within three months of an issue arising. All complaints should be received in writing if possible. In certain circumstances receiving a complaint verbally may be allowable, i.e., if the complainant has difficulties in making a written complaint due to accessibility issues etc. If a complaint is received verbally full notes of any conversation should be made and retained on file.

The complaint should be raised, in the first instance, with the Office Manager/ member of staff involved. The Office Manager will keep a log of all complaints. Where the

complaint is of a clinical nature the Office Manager will then inform the appropriate Clinical Co-Ordinator of the complaint, who will contact the counsellor and the client with a view to mutually and satisfactorily resolving the issue. If the complaint is regarding the Office Manager or other non-clinical member of the workforce, then the complaint should be raised with the Director. Where the complaint is not of a clinical nature the Director will deal with it. The Director will inform the Board of Trustees of all complaints.

The complainant will receive an acknowledgement of the formal complaint within five working days of it being received by the Director.

The appropriate person (Clinical Co-Ordinator or Director) will investigate the complaint and report the findings within 15 working days or request an extension to this period, providing an explanation of why this is necessary. Where an investigation extends beyond 20 working days, the appropriate person will inform the complainant, in writing, of the expected completion date.

Further to producing the report, the appropriate person will respond to the complainant within a further five working days and will indicate what action has been taken, or is proposed, to resolve the complaint. Alternatively, if the complaint is not upheld, the reasons for that decision will be fully explained.

Where a complainant is not satisfied with the outcome, they may appeal the decision by writing to the Board of Trustees. The appeal must be lodged, in writing, no later than ten working days after the initial outcome has been received.

The complainant will receive an acknowledgement of the appeal within five working days of it being received by the Chair of the Board of Trustees. They will investigate the appeal and will inform the complainant of the outcome of the appeal within twenty working days from the date of acknowledgement.

Where an appeal extends beyond 20 working days, the Office Manager on behalf of the Chair of Trustees will inform the complainant, in writing, of the expected completion date.

If the complaint involves either a Clinical Co-Ordinator or Director of Services the formal complaint may be made, in writing, to the Chairperson of the Board of Trustees. All other timescales indicated in these procedures will remain the same. Any subsequent appeal should be lodged with the Chairperson of the Board. In these circumstances the decision of the Chairperson is final and binding.

If the complaint involves the Chairperson of the Board and/or the Director, the formal complaint will be allocated to another board member and/or may be referred to an impartial external agency/advisor. If the complaint is about the conduct of a Trustee, it should be notified to the Chair of the Board, who will use their discretion in dealing with it or ask another Trustee to handle the complaint. All other timescales indicated in these procedures will remain the same. Any subsequent appeal should be lodged with the appointed person/external advisor. In these circumstances the decision of the Board Member/external advisor is final and binding.

The complainant has the right to escalate their complaint to the British Association of Counselling and Psychotherapy (BACP).

In all cases the documentary evidence gathered and stored will remain confidential to those involved. All complaints will be held on file for 7 years in line with Stepping Stones Data Retention Policy.

This procedure will be reviewed in line with the process for the revision of Stepping Stones' Policies and Procedures.

Approved by:	Date of approval:	Review date: