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COMPLIMENTS/ COMPLAINTS RESOLUTION PROCEDURE

1.0 Introduction

- 1.1 Musica is committed to achieving the highest standards in all its activities but acknowledges that from time to time complaints will arise. This procedure provides direction to staff who are receiving, recording and responding to complaints. It is also intended to confirm to those using Musica's services and the wider public that they have a right to make a complaint about the organisation.
- 1.2 The Fundraising Standards Board requires charities to have a complaints procedure, and the Code of Governance for the Voluntary and Community Sector also makes this a requirement. The Charities Commission has highlighted the advantages for charities in having a complaint procedure. The Charities Commission states that a complaint procedure can assist the charity in dealing with difficult complaints and therefore be resource effective. A complaint procedure also demonstrates that the charity operates openly and transparently and is accountable to its users, other stakeholders and the public in general.
- 1.3 Musica defines a complaint as 'an expression of discontent by a person or persons receiving a service from the charity that cannot be immediately resolved at the point of delivery, and about which the complainant desires that follow-up action is taken, and a response provided'. A record should be kept of all complaints made in this way, whether the complaint is justified or not, as a means of demonstrating that the organisation is responsive to the concerns.
- 1.4 Staff using the complaints procedure should be familiar with the organisations other policies and procedures that sometimes overlap with and take precedent on the complaint procedure. These concern child and adult protections issues, which should be referred to the manager.
- 1.5 The procedure is available to all those using Musica's services, including Musica's volunteers, those affected by Musica's activities.

2.0 The Procedure

- 2.1 All Musica staff have a responsibility to resolve complaints as quickly as possible, and as near to the point of service delivery as possible. A complaint can often be resolved by an early acknowledgement that something has gone wrong, followed by an explanation and / or an apology for it.
- 2.2 Complainants are entitled to raise a complaint in their preferred method of communication. Some complainants may choose to raise their complaint directly, whereas others may seek support from a relative, a friend or a member of staff. Staff should be aware of advocacy services operating for their particular service area and be prepared to assist a service user in locating an advocate should they need this assistance in order to make a complaint.
- 2.3 A system of recording complaints and compliments must be in place, showing a trail of response and actions taken.
- 2.4 When a complaint is made, the member of staff receiving the complaint should record it in the complaints file and include a reference to the outcomes desired by the complainant. Care should be taken to make sure that complainant's concerns and wishes have been properly understood, if necessary by reading the record back to the complainant, or by providing the complainant with a copy of the record.
- 2.5 All complaints should be acknowledged within 5 working days of the complaint being received. Complainants should be advised of any immediate action being taken in response to their complaint and given an indication of when they should expect to receive a full response to it.
- 2.6 Whilst it is anticipated that most complaints will be resolved quickly at the point of service delivery, it is apparent that some issues will be too complex or sensitive to be dealt with in this way. In such cases the manager should ensure a communicative dialogue is maintained throughout.
- 2.8 When a formal investigation is required the complainant should be informed of the individual who will be dealing with their complaint. A brief note of the complaint and subsequent investigation should be recorded in the complaint file of the service concerned, although more detailed records may need to be retained by the manager undertaking the investigation. Managers should be aware of the requirement for their investigation to be completed within 25 working days unless a longer timeframe is agreed with the complainant.
- 2.9 On some occasions a service user may choose to raise a complaint directly with the line manager for a service. When this occurs, the manager receiving the complaint should decide whether to initiate a formal investigation or refer the complaint back to the front-line manager

- concerned for their attention. In either case the existence of the complaint should be noted in the service's complaints file.
- 2.10 Staff should respond to a complaint in the most appropriate form to meet the communication needs of the complainant. This may involve arranging a meeting to discuss a problem and / or writing a more formal letter stating what action is being taken in response to the complaint. Staff should not respond to complaints that relate directly to themselves but should refer them to their line manager.
- 2.11 When replying to a complaint, staff should ascertain if the complainant is satisfied with the response, and outline what further action the complainant may take should they remain dissatisfied. This may involve referring the complainant to the line manager for the service, the service's Regulation Inspector, the local authority that has commissioned the service, the host authority and/or the local authority Ombudsman. The response to the complainant and the outcome for the complainant should both be noted in the complaints file.
- 2.12 All parties involved in or investigating a complaint should be aware of the need to maintain confidentiality when dealing with personal information.
- 2.13 Complainants should not be assured of total confidentiality concerning their complaint but should be advised that information about it will only be shared with those who need to know about the complaint in order to help resolve it.

3.0 Monitoring and Quality Assurance

- 3.1 Managers are responsible for ensuring that complaints are dealt with in accordance with this procedure. They should ensure that complaints are responded to within the stated timeframe, and that information about the complaint and its outcome are properly recorded in the complaint file.
- 3.2 The manager should review the contents of the complaints/compliments file on at least four occasions a year to ensure compliance with this procedure. This review should also consider the number and nature of the complaints received by the area of activity concerned as part of its quality assurance procedures, and to ensure appropriate learning and improvements in services are taking place where necessary.

4.0 Formal Investigations

4.1 A formal investigation is required for complaints that are considered to be too complex or sensitive to be dealt with adequately by the day or

- residential care establishment, school, shop, fund raising activity etc, where the complaint has arisen.
- 4.2 The role of the investigator will be to interview all the relevant people involved with the complaint, including the complainant; review all relevant documentation, and prepare a report on the complaint. The investigator should be informed that he / she has 25 working days in which to complete their investigation and submit a report to the Head of Division, unless a longer timeframe is agreed with the complainant.
- 4.3 At the conclusion of a formal investigation the relevant person should provide a response to the complainant on the outcome of their complaint, together with a copy of the investigating officer's report.

5.0 Appeal

- 5.1 If the complainant is not satisfied that a formal investigation has resolved their complaint they may appeal for the outcome to be reviewed. Complainants wanting a review should be asked to put the reasons for their request in writing.
- 5.2 Another nominated representative may conduct the appeal in the form of a paper review of the documentation concerned with the complaint, or by inviting the complainant to a personal hearing by an Appeals Panel.
- 5.3 The panel should be administered and serviced by the manager (Investigations), who should provide all attendees with relevant documentation two weeks in advance of the date set for the hearing. Complainants may be accompanied at the hearing by a family member, a friend or other advocate of their choosing.
- 5.4 The panel will start the proceedings by asking the complainant or their advocate to state the reasons why they remain dissatisfied with the outcome of their complaint. The manager will be asked to respond to the complainant's remarks. The panel may ask either party to elaborate on their remarks as required. The panel should confine itself to the complaint at issue and the reasons for the appeal and should not attempt to reinvestigate the complaint or consider any new complaints that have not been previously been investigated. At the conclusion of these presentations the panel will go into a closed session to consider its findings.