

RECOVERY FOCUS
Group Operational Policy
Feedback (Complaints, Comments and Suggestions) Policy

1. Policy Aim/Purpose

Recovery Focus Group partners aim to provide services to high quality standards in a non-discriminatory manner. All partners follow a key principle of co-production and as such, under-pinning everything we do, we work with the people we support and other stakeholders.

However, we recognise that there may be occasions when people have suggestions to make, are dissatisfied or wish to give helpful feedback through comment. This may sometimes take the form of a **complaint**. For the purposes of this policy, a complaint shall be defined as *‘an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the organisation, its own staff, or those acting on its behalf, affecting an individual in receipt of services provided by the Group.’*

The policy ensures we uphold our key value of being a listening organisation. To this end, we always seek to:

- Pro-actively solicit feedback on services and activities;
- Deliver a complaints service that meets legal and regulatory obligations;
- Use feedback to facilitate continuous improvement and organisational learning.

2. Scope

This Policy applies to all who do business with a Recovery Focus provider partner, but is principally aimed at:

- People currently using a service provided within the Group and/or their advocates or self-defined family members
- People who want to access a service provided by the Group
- People who commission or fund our services
- Existing local stakeholders and provider partners

This policy does not apply to complaints from staff or volunteers. Any such complaints should be submitted through the *grievance policy* and its associated procedures.

Who can give feedback?

- Anyone currently or recently using one of our services, or someone acting for them
- Relatives, carers or anyone else concerned with the welfare of people we support
- An individual or agency wishing to use a service provided by the group
- An organisation acting for a person or group of people currently accessing or recently having accessed a service which the group is involved with providing.

Complaints may be made in person, by email, letter or by phone. There is no requirement for it to be a written complaint nor for the word ‘complaint’ to be used as part of the contact, for it to be treated as such. Third party complaints made on behalf of a person

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(or people) in one of our services (or wishing to use one) must have the written consent of the individual(s) on whose behalf the feedback is being given.

Some feedback forming a complaint may be considered to be “out of time” particularly if records no longer exist and cannot reasonably have been expected to be retained.

Where a complaint is not upheld, the landlord must write to the complainant explaining why alongside advising that their continued right exists to refer this decision to the Ombudsman for further consideration.

Complainants, who make premises related complaints where the Recovery Focus group partner is not the landlord, will be supported to access that landlord’s complaints procedure.

3. Legal and or Regulatory Framework

- Health and Social Care Acts and Regulations and the Mental Capacity Act 2005
- Regulatory Standards and Framework for Social Housing (notably the Tenants Involvement and Empowerment Standard)
- Codes of Governance (NHF and Charity Commission)
- Equality Act 2010 and Human Rights Act 1998
- Housing Acts and the Localism Act 2011
- Housing Ombudsman’s Complaints Handling Code, 2022
- Social Housing (Regulation) Act 2023

This is currently a fast-changing area of regulatory guidance and legislation so all relevant current statutory and regulatory obligations must be met.

Recovery Focus is committed to treating people with dignity and respect in accordance with the Equality Act 2010 and Human Rights Act 1998. Throughout the production of this policy due regard has been given to the elimination of unlawful discrimination, harassment and victimisation (as cited in the Equality Act 2010).

4. Principles

The policy is based on the following guiding principles:

- To pro-actively encourage all feedback, in order to help us learn, share that learning and thereby achieve continuous improvement;
- To work collaboratively with a complainant, alongside partner delivery organisations and other agencies involved in providing the service as necessary to coordinate a comprehensive outcome to all complaints;
- To facilitate the effective and early resolution of complaints using a “right first time” approach;
- To record, monitor and transparently report on complaints (both internally and as necessary and appropriate externally) received and to use the analysis of complaints to help to improve services across the group;
- To handle and manage all complaints fairly in an open and accountable way;
- To recognise that some people who wish to complain may need support in doing so i.e., advocacy;

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- To have a single point of contact for each complaint who will keep anyone giving feedback informed of how their complaint is progressing;
- To empower our staff to resolve complaints quickly and take remedial action arising from the learning;
- To respect the confidentiality of the complaint and complainant;
- To ensure that this policy allows feedback can be given and recorded easily without unnecessary formality.

5. Policy Monitoring and Reporting

The overall operation of this Policy will be managed and monitored in RF by the Quality and Compliance Team supported by other parts of the directorate of the Executive Director of Operations, Quality and Housing. The directorate will work collegiately to ensure that the information gathered is used to further improve all services that the group provides.

Similar arrangements will be made by the Head of Service, Aquarius, to ensure all partners in the group are responding according to the principles of this policy.

Periodic reports on feedback are a vital part of ensuring safe and effective services. The Group Leadership Team will review these regularly (and no less than annually) in turn, and share as an assurance and risk management tool, with the RF and Aquarius Boards. Complex issues arising will be resolved under the oversight of the Service Improvement Governance Group (SIGG) with the involvement of the relevant Community of Practice to ensure that in delivering this policy, we are putting people at the heart of everything we do and can demonstrate the improvements made as a result of the feedback. We will also follow a regular self-assessment process to review how we are performing in this area, using the guidance from the Ombudsman (but extending this review beyond people we support in residential services). This assessment will be made available publicly, again following regulatory guidance and the Ombudsman's Code.

Each provider partner in the group will pursue a programme of continuous feedback from people currently using our services, as well as seeking feedback from people we support as they prepare to leave the service. Regional Operational Leads will test that significant issues raised through this policy, are isolated and not endemic and report to the Operational Leadership Team who will triangulate findings against other available information to ensure that the Communities of Practice and GLT are clear on the risk(s) posed by significant issues being raised. This is to ensure provider partners are able to maximise their ability to deliver quality improvement.

6. Associated policies and procedures

This list is not exhaustive, but refers to several policies/procedures which may inter-relate with the principles in this policy:

- Quality Framework
- Code of Conduct for staff
- Whistleblowing
- Feedback procedure and flowchart
- Template acknowledgement letters

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