
Complaint Policy

MEWA Health and Harm Reduction Unit

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| 1.Responsibility for approval of policy | <i>CEO-MEWA</i> |
| 2.Responsibility for implementation | <i>Abdalla Badhrus</i> |
| 3.Responsibility for ensuring review | <i>Abdalla Badhrus</i> |

1. Policy Statement

- 1.1. *MEWA Health and Harm Reduction Unit* is committed to taking seriously any complaint that concerned individuals have about the service. *MEWA Health and Harm Reduction Unit* believes that if an individual wishes to make a complaint or register a concern, they should find it easy to do so.

2. Purpose

- 2.1. This policy is intended to ensure that complaints are dealt with properly and that all complaints or comments are taken seriously and addressed in a professional manner.

3. Scope

- 3.1. This policy covers all actions to be taken in respect to a complaint by a concerned individual. Concerned individuals can include service users, members of the local community and concerned stakeholders (funders, external agencies, etc.). A complaint by a member of staff is addressed through the grievance process.
- 3.2. Complaints can be made against any aspect of *MEWA Health and Harm Reduction Unit*.
- 3.3. While all complaints need to be addressed, this policy is mainly concerned with complaints for which the involvement of management would be necessary.

4. Principles

- 4.1. It is *MEWA Health and Harm Reduction Unit's* policy to welcome complaints and look upon them as an opportunity to learn, adapt, improve and provide better services.
- 4.2. All complaints will be responded to and then resolved promptly, and within the timescales outlined.
- 4.3. This organisation supports the concept that most complaints, if dealt with early, openly and honestly, can be sorted out at a local level between just the complainant and the organisation.
- 4.4. Complainants should be consulted about what they would like to happen about their complaint.
- 4.5. All persons involved should be supported and given appropriate assistance throughout the process.
- 4.6. The complaints process should be well publicised. Service users should be made aware that there is an easy way to complain, and how to do it.
- 4.7. All complaints must be properly recorded in a consistent manner.
- 4.8. Complaints should be kept at a central location and monitored for quality purposes.

5. Service User Complaints Procedures

- 5.1. Who can complain?
 - 5.1.1. Anyone who is a user of the service.
 - 5.1.2. An advocate may complain on the service user's behalf provided they have the service user's written consent.
 - 5.1.3. A parent / guardian may complain on behalf of a child.
- 5.2. What can they complain about?
 - 5.2.1. A service user can complain about:
 - 5.2.1.1. Any part of the service that they have received
 - 5.2.1.2. A decision made about them that affects them
 - 5.2.1.3. Being denied a service
 - 5.2.1.4. A change in service provision
 - 5.2.1.5. A member of staff
- 5.3. Complaints involving staff
 - 5.3.1. If the complaint is about a member of staff, the complainant should immediately be referred to a manager. The service user will be supported to write the complaint. The

service user will be told that the staff member will be informed that a complaint has been lodged against them.

- 5.3.2. If the complaint is about a manager / director, the service user will be supported to write the complaint, which will be referred to a more senior person. The service user will be told that the manager / director will be informed that a complaint has been lodged against them.

5.4. Verbal complaints

- 5.4.1. All verbal complaints, no matter how seemingly unimportant, should be taken seriously. There is nothing to be gained by staff adopting a defensive or aggressive attitude.
- 5.4.2. All contact with the complainant should be polite, courteous and empathetic. At all times staff should remain calm and respectful.
- 5.4.3. A staff person who receives an oral complaint should seek to solve the problem immediately if possible. If staff cannot solve the problem immediately, they should offer to get the manager to deal with the problem.
- 5.4.4. If the suggested plan of action is not acceptable to the complainant, then the member of staff or manager should ask the complainant to complete a Complaints Record Form (Appendix I) and inform them fully about the complaints procedure.
- 5.4.5. If a complaint is made regarding a staff person, the complaint will be dealt with as described in 5.3.

5.5. Written complaints

- 5.5.1. All complaints that need management to resolve them should be lodged in writing.
- 5.5.2. A completed copy of the Complaints Record Form should be given to the project manager. This should include information on the following:
 - 5.5.2.1. The nature of the complaint.
 - 5.5.2.2. Why the original response to the complaint was unsatisfactory, if there was one.
 - 5.5.2.3. What the complainant's desired outcome would be.
- 5.5.3. The manager will proceed to investigate the complaint. If necessary, further details may be requested from the complainant. If the complaint is not made by the service user but on the service user's behalf, then the consent of the service user, preferably in writing, must be obtained from the complainant.
- 5.5.4. Where a complaint involves two or more individuals, all parties will have the opportunity to give their side of events to the manager/senior officer (who will choose whether those involved should meet or should be meet separately).
- 5.5.5. If the complaint involves a member of staff, they will be requested to attend to discuss the issues. They will be given reasonable notification which enables them time to organise to bring a colleague or trade union representative with them if they wish to.
- 5.5.6. The manager will complete the investigation within ten days (unless otherwise agreed) and the complainant will be informed of any outcomes in writing and verbally.
- 5.5.7. If the complaint involves potentially serious matters, advice should be sought from a legal advisor. If legal action is taken at this stage, any investigation by the organisation under the complaint's procedure should cease immediately.

5.6. Outcomes and actions

- 5.6.1. Outcomes and actions initiated because of the complaint should be recorded on the Complaints Recording Form.
- 5.6.2. If the complainant is found to be rightly aggrieved, an apology should be offered by the organisation in writing signed by the service manager. All steps should be taken to ensure that any problems arising from the original cause for complaint are addressed.
- 5.6.3. If the service user is not satisfied with the outcome of the investigation, a meeting should be set up with *MEWA Health and Harm Reduction Unit* within four weeks. The complainant will be entitled to bring a family member or an advocate. The outcome of this meeting will be communicated in writing within 5 working days.

6. Other Concerned Individuals Complaints Procedures

- 6.1. Who can complain?
 - 6.1.1. Any member of the local community,
 - 6.1.2. Any external stakeholder (funders, external agencies, etc.).
- 6.2. A concerned individual can complain about any aspect of the service that has impacted on them or the organisation they represent in a way that they perceive to be negative.
- 6.3. All complaints by members of the community or other stakeholders should be referred to *MEWA Health and Harm Reduction Unit*.
- 6.4. Verbal complaints
 - 6.4.1. All verbal complaints, no matter how seemingly unimportant, will be taken seriously.
 - 6.4.2. All contact with the complainant should be polite, courteous and sympathetic.
 - 6.4.3. A manager will be contacted to respond to any oral complaints. If the suggested response is not acceptable to the complainant, then the manager should ask the complainant to put their complaint in writing and give them a copy of the complaints policy and form for completion.
 - 6.4.4. All complaints should be recorded noting: date; time; name of person/project making the complaint; nature of the complaint; and name manager handling the complaint. Contact details for the complainant should also be recorded.
- 6.5. Written Complaints
 - 6.5.1. A completed copy of the Complaints Record Form, or a complaint letter should be given to *MEWA Health and Harm Reduction Unit*. This should include information on the following:
 - 6.5.1.1. The date, time, and name and contact details of the person/organisation making the complaint
 - 6.5.1.2. The nature of the complaint
 - 6.5.1.3. What the complainant's desired outcome would be
 - 6.5.1.4. The name of the manager handling the complaint
 - 6.5.2. If a complaint has been received by letter or email, the manager should contact the complainant in writing within five working days to acknowledge receipt of the letter. The *MEWA Health and Harm Reduction Unit* representative (i.e. Centre Manager) may be required to ask additional questions to ensure the information outlined in the Complaints Recording Form is available. The letter should be attached to a copy of the form.
 - 6.5.3. The *MEWA Health and Harm Reduction Unit* representative should inform the complainant that the complaint has been lodged, and the matter will be investigated and a reply given in ten working days.
 - 6.5.4. The *MEWA Health and Harm Reduction Unit* representative will proceed to investigate the complaint. If necessary, further details should be requested from the complainant.
 - 6.5.5. If the complaint involves a member of staff, they will be requested to attend to discuss the issues and will be given reasonable notification which facilitates them to bring a colleague or trade union representative.
 - 6.5.6. The *MEWA Health and Harm Reduction Unit* representative will complete the investigation within ten days (unless otherwise agreed) and the complainant will be informed in writing.
 - 6.5.7. If the complaint raises potentially serious matters, advice should be sought from a legal advisor to the establishment. If legal action is taken at this stage any investigation by the establishment under the complaint's procedure should cease immediately.
 - 6.5.8. If the complaint involves the service manager, then the process should be passed to the management committee.

7. Outcomes and Actions

- 7.1. Outcomes and actions initiated as a result of the complaint should be recorded on the Complaints Recording Form.

- 7.2. If the complainant is found to be rightly aggrieved, an apology should be offered by the organisation in writing signed by *MEWA Health and Harm Reduction Unit* representative and all steps should be taken to ensure the cause is appropriately addressed.
- 7.3. If the complainant's proposed outcome is not judged satisfactory by the organisation, the complainant will be provided with a written rationale for the decision.
- 7.4. If the complainant is not satisfied with the outcome of the investigation, they have a right to appeal, though this should be done within ten working days from receipt of official correspondence.
- 7.5. The *MEWA Health and Harm Reduction Unit* representative must then contact the chairperson of *MEWA Health and Harm Reduction Unit* to instigate the establishment of an appeal committee and process.
- 7.6. The appeal should involve two members of the management committee who have not previously been involved in the process.
- 7.7. The decision of this committee is final.

8. Anonymous Complaints

- 8.1. Anonymous complaints or complaints made under false names raise both practical problems and issues concerning fairness. The reason for this is that an investigation can not be undertaken. Of particular importance is the fact that a staff member cannot properly respond to the issues raised. The manager will also not be in position to undertake any remedial actions where there is not a full agreement on the issue as described in the complaint.
- 8.2. If an anonymous complaint is received *MEWA Health and Harm Reduction Unit* will note the issues raised and, where necessary try and resolve them appropriately. An anonymous complaint may be referred for investigation:
 - 8.2.1. If there was good reason why the complaint was being made on an anonymous basis, for example, if there was a concern by the complainant that if their identity was revealed it could lead to negative consequence on their health or well-being. This may depend on the seriousness of the allegation being made and should be at the discretion of the manager. If the allegation involves the manager, it should be referred to the chair of the management committee.
 - 8.2.2. If the allegation can be properly investigated either by talking to a third-party witness, or with evidence provided with the complaint, and where there is no need for further contact with the anonymous complainant.
 - 8.2.3. Any complaint involving a minor will be investigated and handled in a confidential manner according to the Child Protection Policy.
- 8.3. In the case that a complaint can not be fully investigated, the complaint will not be referred to in the staff file or will not in any other way impact upon working process or roles etc, except where this has been agreed by all involved including the person named in the complaint.
- 8.4. If the complaint relates to the general service delivery this will be referred to *MEWA Health and Harm Reduction Unit* and remedial action will be implemented if appropriate.
- 8.5. A record of all complaints will be kept in the complaints file.
- 8.6. If anonymous complaints are received, as far as possible, the organisation will promote the complaints procedure and ensure appropriate supports are in place to facilitate complaints being made.

The complainant's desired outcome would be:

Signed

Complainant: _____ Date: _____

Manager: _____ Date: _____

Thank you for your comments. Complaints are valuable in helping to maintain and improve the service of *MEWA Health and Harm Reduction Unit*.

How is the complaint being dealt with? (To be completed by *MEWA Health and Harm Reduction Unit*)

Actions and outcomes (to be reported by the *MEWA Health and Harm Reduction Unit*)

Complaints Process – Information for Service Users

Who can complain?

- 1) Anyone who is a user of the service.
- 2) An advocate may complain on the service user's behalf provided they have the service user's written consent.
- 3) A parent / guardian may complain on behalf of a child.

What can you complain about?

- 1) Any part of the service that you have received
- 2) A decision made about you that affects you
- 3) Being denied a service
- 4) A change in service provision
- 5) A member of staff

Important things to note:

- 1) You have the right to complain when you are unhappy with the service.
- 2) If staff cannot address your issue then they will help you write down your complaint so it can go to the manager.
- 3) If you make a complaint then you will not be treated differently following the complaint. The service sees complaints as a way to improve what we do.

Complaints involving staff:

If you wish to make a complaint about a staff member

- Tell one of the team and you will be referred to a manager, who will help you follow the process.
- Note that the staff member will be informed that a complaint has been made against them.
- If you want to complain about the manager then the complaint can go to someone more senior, again let a member of staff know.

Complaint Process

- All complaints will be taken seriously.
- If you tell a staff member about a complaint, the staff member will try to resolve the issue with you. If this does not happen and you are still unhappy then the staff member will help you complete a Complaints Record Form or write a complaint letter, which will be given to the manager.
- Once you have written down the complaint the manager will investigate the problem and get back to you in 10 working days with a response.
- If you are unhappy with the response, let the manager know and a meeting can be set up with someone more senior in the organisation (within four weeks).
- You can bring a family member or other advocate to this meeting. Following this meeting you will be informed of an outcome after three days.