



Services Complaints Protocol

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Overview

Owner	Quality, Compliance and Planning
Commencement Date	April 2020
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Overview	This protocol gives clear, contextual guidance to Services staff and managers so that they may put the organisational Complaints Policy into effective operation. It covers the relevant processes and procedures, such as response timescales and who is responsible for investigating, recording and reviewing complaints.
Purpose	To ensure staff are clear about how we handle and manage complaints; to put into effect our commitment to handling complaints fairly and promptly, always with a view to learning, improving and putting things right when we have got things wrong.
Scope	This policy applies to all our advice and support services. We have a number of regulatory and funder requirements to adhere to and the protocol has been developed to help make sure we are compliant with these requirements. However, there may be some additional measures that service areas will need to apply to meet specific requirements. Justice services have local procedures that need to be followed alongside Shelter's core policy. You can find information here .

Introduction

Shelter welcomes feedback from people about our work, whether that's just a general comment or observation, or a specific complaint. We seek to learn from all comments and complaints as we want to maintain the high standard we set ourselves as an organisation.

Whilst we always aim for this high standard, we recognise that sometimes things will not work well. We acknowledge that people who take the time to comment or complain when something we do has caused them upset, inconvenience or harm are providing us with an opportunity to:

1. Listen, learn and try and put things right for that individual as far as we can.
2. Identify how we may improve the ways we work.
3. Act to prevent things going wrong in the future.

As such, when dealing with complaints our focus is on learning and improving rather than apportioning blame or mounting a defence of our actions.

Our complaints process is open to anyone who comes into contact with Shelter services, including people who have been unable to access a service and third parties we have been in contact with on a client's behalf, such as council officers or landlords. Where a complaint is received from a third party, staff will need to make sure we observe our [Confidentiality](#) policy and [Data Protection and Services](#) guidance.

Staff and volunteer complaints are dealt with under the [Whistleblowing policy](#) or [Grievance procedure](#) and do not fall under this protocol.

Definition of a complaint

People comment on our work all the time, and this provides a rich source of feedback and an excellent source of insight and learning for the organisation. But just because someone wants to comment, it does not mean they wish to complain.

This protocol will apply where someone explicitly asks for the issue they are raising to be treated and responded to as a complaint. There may be other situations which trigger a member of staff to investigate and address an issue, even if the person has not asked for it to be treated as a complaint. These situations will not fall under this policy.

Examples of complaints include:

- Where someone believes that our standard of service has fallen short of what could be expected, for example, a lack of communication, the behaviour of our staff etc.
- Where someone believes there has been incorrect or negligent advice or support, including instances where there may be a material loss to the client.
- Where someone believes they have been treated unfairly, including any allegation of harassment or discrimination.
- Any complaints about safeguarding incidents or the Shelter safeguarding policy.
- Where someone seeks an improvement in the service generally.

This list is not exhaustive, and each complaint must be examined on the available information and the circumstances giving rise to the problem.

Principles

These core compliance standards need to be observed:

1. Services log all complaints and keep records updated:
 - Service staff able to recognise and identify a complaint.
 - All complaints logged/updated in CCRM (with appropriate access rights for notes/documents).
2. Complaints are handled promptly according to this protocol and Shelter's Complaints Policy:
 - Correct information given to people about how to complain and what to expect.
 - Complaints allocated to appropriate level of authority to resolve.
 - Complaint records show issue handled following designated procedures, within recommended timescales.
3. There is an annual review of Services complaints:
 - The last review is dated within the last 12 months. (We do this at a Services Operational level but each service is encouraged to review its own complaints at least annually.)
 - Learnings and recommendations from complaints are progressed/acted on.
 - Wider organisational learning escalated to appropriate level via Complaints Steering Group.

These Quality Principles especially apply when seeking to resolve complaints and issues that could give rise to a complaint:

Treat people fairly and communicate clearly:

- Be upfront, fair and clear about what the service can and can't offer.
- Take responsibility: don't pass people around or leave them hanging; do what you say you'll do.
- Understand diverse needs: bring the service to where people are and make reasonable adjustments, don't make people jump through hoops or put access barriers in place.
- Be transparent and flexible: ensuring the people you work with can reach you easily is better than using resources to filter out people who don't fit.
- Communicate with people in the ways they want, that work best for them; use normal plain language not jargon.
- Support staff in individual improvement through regular feedback, coaching and recognition of good work.

- Be accountable: mistakes and poor customer experiences can happen, and the important thing is to own it, learn and improve rather than trying to shift responsibility or explain it away.

The main purpose of any complaints process is to ensure that problems are resolved quickly at the earliest possible stage. Our experience is that usually, prompt action taken at the initial contact to listen, to understand what matters to the person, and to discuss with them how we may put things right and/or apologise will be enough to help resolve the matter swiftly and effectively to the person's satisfaction.

Any expression of dissatisfaction should therefore be addressed constructively as soon as possible to prevent it becoming a complaint. Issues dealt with at this early stage, before someone has asked for it to be escalated into a formal complaint, do not need to be logged or responded to under this policy.

Formal complaint responses will include looking at what could have been done to rectify the issue being complained about at this early stage, and what can be learned about how to address concerns more effectively without a complaint arising.

It is important that staff and volunteers accept the outcome of any investigation, whether they agree or not, and act appropriately and in accordance with any decisions or recommendations made at any stage.

Complaint information

People contacting Shelter services should be given information about how they can complain and who to contact. This may be in the form of the client care leaflet or letter, or the [Have Your Say](#) leaflet and poster (these can be ordered through [Ichor](#)) but if this is not possible, can be done verbally.

Information about making a complaint generally is also available on the [Shelter website](#).

Making a complaint

There is no set format for making a complaint; people may complain by speaking to someone in person, over the phone, by email, by letter or through an on-line contact including social media.

Whilst we may choose to develop standard templates and webforms to help people submit a complaint, it is not necessary for someone to:

- call a specific number.
- put a complaint in writing.
- fill in a form.

If someone is placed at a substantial disadvantage in making a complaint due to their disability, we recognise our responsibility to make reasonable adjustments to provide additional aids or services to support that person to make a complaint.

The Shelter website directs people who wish to complain to the [Supporter Help Desk](#), who can direct complaints to the relevant service manager. If the service cannot be identified, the complaint will be directed to [Quality, Compliance and Planning](#) who will decide how the complaint should be handled.

Services complaints procedure

Complaint resolution should start by establishing the person's needs or wishes and then as far as possible seeking to meet them. Throughout the process:

- Aim for prompt resolution. The timescales below are guidelines rather than hard and fast rules but should be kept to as much as possible.
- Keep the person complaining (and relevant staff and managers) informed of progress, especially if the timescales below are being exceeded.
- Allocate the complaint promptly to an appropriate person to handle and ensure that person knows what they are being asked to do and by when.

- Allow the person time to express their dissatisfaction, and take the time to listen to them, as this will often help to quickly get to the heart of the complaint and find a suitable resolution.
- Reassure clients who need further or ongoing assistance that this will continue to be provided and will not be impacted by making a complaint (but see below).

Occasionally it may not be appropriate for help to continue due to the nature and circumstance of the complaint. This is a matter of judgement that should be exercised with careful consideration by the responsible manager. If we are not able to provide further assistance, we should communicate this clearly to the client and take steps to actively refer or signpost them to alternative sources of help.

Note: There are some situations for solicitors in which a mistake is capable of remedy by us, but the solution cannot be adopted, and the client must be referred to another provider. This is even when the client and our insurers agree with the solution. This is because of the solicitor regulator and a recent [decision](#).

Stage 1 – Formal complaint resolution

At this stage, the complaint is best dealt with by a person within the service who is in a position to understand what has happened and what the best options are for resolution and who also has the authority to implement those. If a complaint is about someone in one of these roles, an alternative equivalent or more senior manager should take responsibility. Please see [Who is responsible for complaints?](#) below.

If the complaint is of a serious nature, complex, requires in-depth investigation or for some other reason the complaint may be escalated to a more senior level. [Quality, Compliance and Planning](#) will be able to advise. If the complaint involves a data protection breach, this must be reported to the Data Protection Manager immediately because we may be required to report the breach to the Information Commissioners Office within 72 hours. Complaints of this nature will then be handled in line with our relevant Data Protection policy, including consideration of Charity Commission guidelines on reporting serious incidents.

Most complaints are resolved at this first stage. Prompt action to listen, to try to understand what matters to the person, and to discuss with them how we may put things right and or apologise may be enough to help resolve the matter swiftly and effectively to the person's satisfaction.

Complaints should be recorded in CCRM as soon as possible after they are received. [CCRM guidance is available here](#). They should be acknowledged within three working days (see [Logging and Recording](#) below). All attempts should be made to contact the client as soon as possible to get to the heart of the complaint and find an early resolution. Upon initial contact, the next steps and methods for keeping in touch and responding should be agreed and this should be recorded on the Stage 1 complaint record in CCRM.

All efforts should be taken to successfully respond and close the complaint within 15 working days. A written response is not required at stage 1 unless the person making the complaint requires it, but details of the response and resolution, or how things have been left with the complainant, should be recorded and linked to the CCRM Stage 1 complaint record which can then be closed.

The stage 1 response must let the person know that they can escalate the complaint to stage 2 if they remain unhappy with the outcome.

Stage 2 – Review

If the complainant is not satisfied with the resolution offered at stage 1, they can ask for their complaint to be reviewed by a more senior person who has not been involved so far. Usually they will do this by contacting the person who responded at stage 1: again there is no set format for making this request.

If the complainant gets in touch because they are unhappy with the stage 1 response but they do not ask for the complaint to be escalated, they should be asked if this is what they want. Sometimes, they may simply wish to talk through the stage 1 response with someone rather than have it reviewed and if this is the case there is no need to escalate to stage 2. This should be recorded on the CCRM stage 1 complaint record.

Where a complaint is escalated, the person who responded at stage 1 will acknowledge the request within three working days and arrange for the complaint to be passed to an appropriate more senior person. In order to enable a level of independence this should be someone slightly removed from the immediate service team. Please see [Who is responsible for complaints?](#) below.

This person will review everything that has happened so far to resolve the complaint, including:

- Reading all relevant records.
- Speaking or emailing directly with the complainant (depending on communication preferences) to confirm the unresolved issue from their point of view, their preferred resolution and the timescale for responding to them.
- Speaking to relevant members of staff to understand further what has happened and why.
- Assessing whether the complaint involves a serious incident, a data protection breach or a material loss to the complainant and ensuring key staff/our insurers are notified if needed (see main Complaints Policy).
- Providing a full response to the complainant within the agreed timescale. Since this is Shelter's final response it should be provided to the complainant in writing, although communication needs may mean letting the complainant know in a phone call as well.

This person is also responsible for ensuring the stage 2 complaint is recorded in CCRM (see [Logging and Recording](#) below). If they do not have access or otherwise aren't able to record the complaint themselves they should delegate this to someone who can, such as an administrator in the service.

The full response should outline what has been found because of the investigation, how that relates to the situation or issues being complained about, and a decision on the complaint. The response should also outline what has been learned and what we will do, if anything, to put things right. This should include how the learning from the complaint will be used to support improvement and prevention of similar issues or situations arising in the future.

Stage 2 is the final stage of Shelter's complaints process. If a person complaining is still dissatisfied with the outcome, they may choose to seek redress from a regulatory body. For Services this may be for example:

- The Legal Ombudsman
- The Solicitors Regulation Authority
- The Information Commissioner
- The Financial Ombudsman
- The Charity Commission

The Stage 2 response should let the complainant know which of these alternative avenues of complaint are available and include contact details. The complaint record in CCRM should then be updated and closed.

Who is responsible for complaints?

Responsibility for resolving a complaint by liaising with the complainant lies with the person dealing with it at stage 1, until the point when the person dealing with it at stage 2 takes over responsibility. Responsibility for carrying out actions to rectify the situation lies with the service during both stages. Where actions are outside the remit of the service and relate to wider operational management, responsibility lies with the Senior Leadership Team.

Area of Services	Stage 1	Stage 2
Community Services	Team leader, Service Manager	Strategic Lead, Head Of
Legal Services	Lead Solicitor	Different Lead Solicitor, Regional Head
TOAS	Team Leader, Operations Manager	Helpline Manager, Head Of.
NHAS/SDAS/other national contracts	Team Leader	Operations Manager, Contract Manager, Head Of.
Justice Services	Team Leader, Service Manager	Justice Quality Assurance Manager,

		Head Of
Breaking the Cycle	Trainer	Relationship Manager

Logging and Recording

All Services complaints, regardless of service, are recorded in CCRM using an Action record held on the client or other complainant's contact record. A separate Action is created for each stage of the complaint, to allow tracking of the various stages. See [CCRM guidance here](#).

Any associated documentation, notes and correspondence received from or sent to the client during the complaint should be stored in a secure folder in SharePoint, rather than CCRM, from where it can easily be retrieved if the client makes a [Subject Access Request](#). This preserves confidentiality. A link to this folder must be saved in a case note on the complaint Action record and the folder itself shared with anyone dealing with the complaint so that they can easily see progress and the outcome. This is because the case notes on an Action used for routine casework are by design visible to all CCRM users throughout Shelter, so to put complaint details in them would not be appropriate.

A Services Complaints log is extracted from the CCRM data, removing the need for a separately maintained log elsewhere.

If a report with recommendations is produced because of a complaint, it will be stored with the other complaint documentation but must be pseudonymised with all identifying client data removed except CCRM contact reference number so that it can be circulated as widely as needed.

Complaints logs and documentation are kept for review purposes, or in case of further contact about the same issue, for 6 years after the complaint was logged and are then deleted as part of the annual review. We can hold and store this data as it is in our legitimate interests to be able to investigate and respond to complaints made about our services, and because it is necessary for us to provide confidential advice and support services.

If the client asks for their data to be deleted as part of the complaint, this request will be handled by the Data Protection Manager in accordance with [Shelter's Right to Erasure Procedure](#).

Complaints involving a Data Protection breach must be reported to the Data Protection Manager immediately since we may be required to inform the ICO within 72 hours. Breaches will be logged by the Data Protection Manager and dealt with under the [Data Breach procedure](#). Our response to the data subject will be made as part of the complaint resolution process rather than separately.

Reviewing complaints

The complaints log will be reviewed at least annually by the Quality Compliance and Planning, who will provide the Complaints Steering Group with information, analysis, any themes or trends. QCP may also suggest improvement action(s) to Services leadership.

Hub and Service managers should review their own complaints on an annual basis at least, or more frequently if a higher volume of complaints is received and themes or trends emerge. The review should include:

- The number of complaints received in the review period and how this compares to the previous period and year on year.
- Identification of any themes or trends or learning from the complaints.
- Appraisal of any improvement action that is necessary.
- Developing a plan to implement the improvement action.

By regularly reviewing this information, we can make sure that we:

- Identify trends in complaints and areas of service needing improvement.
- Assess whether policy or procedure changes are reducing the level of complaints.
- Assess the effectiveness of our complaints management process in resolving complaints internally.

- Build up an understanding of approaches and remedies that work in helping to successfully resolve complaints.

Complaints from people other than our clients

Complaints can be received from a range of other sources, including:

- People who have not been able to access a service from us.
- People connected with the client, such as family members, carers and guardians.
- Solicitors representing the other side of the dispute or transaction.
- Landlords aggrieved that we are representing their tenant.
- Those involved in the justice system such as judges, court officials and prison officials.

Where a complainant is a third party involved with a client, handling of the complaint should proceed in the usual way, but full [client confidentiality](#) should be maintained in the response. It may not be possible to provide any explanation to the complainant beyond an assertion that the case has or has not been properly dealt with and an explanation of Shelter's general principle and policies in acting for those in housing need.

When the complainant is a client's landlord, we should not encourage them to think that their complaint will result in a change of stance in our representation of our client. They should be dealt with courteously but straightforwardly and it should be made clear that a complaint is not a back-door route to alternatively disputing proceedings.

Unreasonable behaviour

By definition, complainants are unhappy with their experience with Shelter, and some may reasonably be upset or even angry when they are voicing their complaint to us. Allowing them some time and space to vent may go a long way to helping them feel heard and understood, and de-escalating the situation.

However, that does not mean that staff are expected to tolerate aggressive behaviour or abusive language. Shelter's We Will Not Tolerate policy applies in full to complaint situations and staff are empowered to not accept such behaviour and to end conversations if the complainant is refusing to act acceptably.

In a minority of cases people may pursue their complaint in a way that is unreasonable. They may behave unacceptably or be unreasonably persistent in their contact with us. These actions may occur either while their complaint is being investigated or once it has been concluded.

We define unreasonable behaviour as that which because of its nature and/or frequency hinders the service's ability to meet the needs or safeguard the welfare of its staff and other clients.

The decision to designate someone's behaviour as unreasonable should not be taken lightly as it could have potentially serious consequences for the individual. You should therefore be satisfied that:

- The complaint is being or has been investigated properly.
- Any findings are reasonable and justified by the available evidence.
- Communication with the complainant has been adequate.
- The complainant is not providing any new information that might affect Shelter's view on the complaint.

Repeat complaints about the same issue: we will not accept repeat complaints about the same issue, where the full complaints procedure has been followed and the complainant has had a final response which addresses everything they are raising. Repeat complaints will be recorded on the existing stage 2 complaint record but will not be responded to.

Abusive, threatening or aggressive behaviour: the We Will Not Tolerate policy applies to complainants as it does to any other aspect of service provision. We may take steps to restrict or bar a complainant from contacting us, in line with this policy and our [Services Access Policy](#). Where necessary we should record a Risk Alert on the complainant's contact record.

Unnecessarily frequent or persistent contact: in line with our [Services Access Policy](#), we may restrict the complainant's contact by:

- Directing all contact through one person or to one email inbox. (e.g. Service Manager or Team Leader).
- Letting them know we will respond to them once a week/on a particular day or that we will only speak to them during certain time slots.
- Requiring all contact to be made in a certain way, for example only by phone or email.
- Limiting the number of times they may speak to a member of staff each week.