

Document Number:	2.11
Document Name:	Complaints
Effective Date:	Immediate
Document Status:	

1.0 Policy Purpose and Details

We view complaints as an opportunity for us to learn and improve to meet the needs of our members. We also welcome the opportunity to put things right for the person that has made the complaint.

Our policy is:

- To provide a fair, clear & easy to use complaints procedure use for anyone wishing to make a complaint
- To ensure that people using our service know we have a complaints procedure
- To make sure everyone at The Society 4 Neurodiversity knows what to do if a complaint is received
- To make sure all complaints are investigated fairly and in a timely way
- To make sure that complaints are, wherever possible, resolved
- To gather information which helps us to improve what we do

2.0 Policy Scope

This policy and procedure applies to all current employees, whether full or part-time, temporary or fixed-term.

3.0 Related Policies

Please refer to policy document “2.07 Related Policies”

4.0 Responsibility

Overall responsibility for this policy and its implementation lies with the management committee

5.0 Definitions

A complaint is any expression of dissatisfaction, whether justified or not, about any aspect of The Society 4 Neurodiversity.

Where Complaints Come From

Complaints may come from any person having a legitimate interest in The Society 4 Neurodiversity in terms of having been involved or being a user of our service.

A complaint can be received by email or in writing.

Confidentiality

All information about those that complain will be handled sensitively, telling only those who need to know and following any relevant data protection or safeguarding requirements.

6.0 Procedures

Contact Details for Complaints:

Written complaints may be sent to the Society for Neurodiversity

In writing to:

Society for Neurodiversity, VAC Resource Centre, 8A Hall Street, Halifax, HX1 5AY

or by e-mail at complaints@s4nd.org

You can also complete our on-line Complaints form on the web site.

Unfortunately, at this time we are unable to take complaints over the telephone or in person

Resolving Complaints

Stage One

On receiving the complaint, the nominated member of staff records it in the complaints log.

Complaints should be acknowledged by the person handling the complaint within a week. The acknowledgement should say who is dealing with the complaint and when the person complaining can expect a reply. A copy of this complaints procedure should be attached.

If the complaint relates to a specific person, they should be informed and given a fair opportunity to respond.

In many cases, a complaint is best resolved by the person responsible for the issue being complained about. If the complaint has been received by that person, they may be able to resolve it swiftly and should do so if possible and appropriate.

Ideally complainants should receive a definitive reply within four weeks. If this is not possible because for example, an investigation has not been fully completed, a progress report should be sent with an indication of when a full reply will be given.

Whether the complaint is justified or not, the reply to the complainant should describe the action taken to investigate the complaint, the conclusions from the investigation, and any action taken because of the complaint.

Stage Two

If the complainant feels that the problem has not been satisfactorily resolved at Stage One, they can request that the complaint is reviewed at Board level. At this stage, the complaint will be passed to the Chair who has responsibility for handling complaints

The request for Board level review should be acknowledged within two weeks of receiving it. The acknowledgement should say who will deal with the case and when the complainant can expect a reply.

The Chair may investigate the facts of the case themselves or delegate a suitably senior person to do so. This may involve reviewing the paperwork of the case and speaking with the person who dealt with the complaint at Stage One.

If the complaint relates to a specific person, they should be informed and given a further opportunity to respond.

The person who dealt with the original complaint at Stage One should be kept informed of what is happening.

Ideally complainants should receive a definitive reply within four weeks. If this is not possible, again a progress report should be sent with an indication of when a full reply will be given.

Whether the complaint is upheld or not, the reply to the complainant should describe the action taken to investigate the complaint, the conclusions from the investigation, and any action taken as a result of the complaint.

The decision taken at this stage is final, unless the Board decides it is appropriate to seek external assistance with a resolution.

The complainant can complain to the Charity Commission at any stage. Information about the kind of complaints the Commission can involve itself in can be found on their website at www.charitycommission.gov.uk

Data protection

To process a complaint, the Society for Neurodiversity will hold personal data about the complainant. This will be held securely in accordance with the General Data Protection Regulations 2018. The identity of the complainant will only be made known to those who need to consider the complaint. However, it may not be possible to preserve confidentiality in some circumstances, for example, where relevant legislation applies, or allegations are made which involve the conduct of third parties.

Variation of the Complaints Procedure

The Board may vary the procedure for good reason. This may be necessary to avoid a conflict of interest, for example, a complaint about the Chair should not also have the Chair as the person leading a Stage Two review.

Monitoring and Learning from Complaints

Complaints are reviewed annually to identify any trends which may indicate a need to take further action.

Anonymous complaints

Any complaints received anonymously will be recorded and considered. Action may be limited if fuller information is required to ensure a full and fair investigation.

7.0 Document History

This policy is reviewed regularly and updated as required.

Adopted on: 16th August 2020

To be reviewed: 15th August 2021

VERSION HISTORY				
VERSION	APPROVED BY	DATE	DESCRIPTION OF CHANGE	AUTHOR
1	AR	7/9/2019	First Version	AB