**UK Central Government Complaint Standards**

Model Complaint Handling Procedure

1. Introduction

1.1 This Model Complaint Handling Procedure is one of a number of supportive tools and guidance modules designed to assist UK Central Government organisations in embedding the [UK Central Government Complaint Standards](https://www.ombudsman.org.uk/organisations-we-investigate/uk-central-government-complaint-standards) in practice.

1.2 As with the Standards themselves, the model procedure puts existing good practice in one place, providing a more consistent approach to complaints handling across the government sector.

1.3 The model procedure is aimed at supporting organisations to deliver what service users say they want when they make a complaint.

1. How to use the model procedure

2.1 The model procedure can be used as a template by organisations who do not currently have a complaint procedure in place, or wish to refresh what they currently do. It can also be used as a comparison model to help organisations evaluate their current procedures to ensure they are working towards delivering the expectations set out in the Standards.

2.2 The model procedure is not mandatory. It can be tailored to work in the diverse operating procedures that exist across government. Each organisation is free to develop its own policy and procedures that best reflect its service (including size and how it is structured) whilst using the model procedure as a benchmark to ensure consistency in practice.

2.3 Organisations can also find further help in the [good practice guidance modules](https://www.ombudsman.org.uk/sites/default/files/UKCG_One_Pager_Guidance_FINAL.pdf) that have been produced to help support government colleagues in delivery of the Standards.

1. Where do we go if we need more information?

3.3 You will find all the available Complaint Standards materials on the [Ombudsman’s website](https://www.ombudsman.org.uk/gcs).

3.4 If you have any questions or feedback on this document, or any of the UK Central Government Complaint Standards materials please contact the Ombudsman’s Liaison Team liaisonmanagers@ombudsman.org.uk. You can also contact the Liaison Team if you require any assistance in embedding the Standards in your organisation.

Model Complaint Handling Procedure

1. Introduction

1.1 Co-developed with UK Central Government (UKCG) Departments, other public bodies, advice and advocacy groups, the [UKCG Complaint Standards](https://www.ombudsman.org.uk/organisations-we-investigate/uk-central-government-complaint-standards) provide a single vision of good practice for complaint handling. This model complaint handling procedure describes how we will put into practice the core expectations given in the Standards.

1.2 This procedure sets out how we handle complaints and the standards we will follow. This procedure also follows the relevant requirements as given in central government guidance including: ‘Managing Public Money’, ‘The Public Value Framework’, ‘Delivering Better Outcomes for Citizens’ and ‘Corporate Governance in Central Government Departments.’

1.3 The Complaint Standards and this procedure also support delivery of our [Organisations should include details of any relevant Values, Promises, Charters etc they have in place that refer to, or are applicable to, its complaint service. Delete this paragraph if this is not relevant.]

2. Accountability, roles and responsibilities

2.1 Overall responsibility and accountability for the management of complaints lies with [Organisations should insert the name(s) and/or title(s) of their most senior person(s) with overall responsibility for complaints. This would normally be the Chief Executive, a Board member or an equivalent senior leader.]

2.2 We have processes in place to ensure that our senior leaders regularly review insight from the complaints we receive, alongside other forms of feedback on our service. They will make sure action is taken on learning arising from complaints so that improvements are made to our service.

2.3 Our senior leaders demonstrate this by:

* leading by example to improve the way we deal with compliments, feedback and complaints
* understanding the obstacles service users face when making a complaint to us, and taking action to improve the experience by removing them
* making information available in a format that service users find easy to understand
* where available, promoting information about any internal or external support for service users who complain to us, including relevant independent help, advice and advocacy services
* making sure everyone knows when a complaint should be considered by another route, a different process or organisation [Organisations should insert details or examples of relevant alternative legislative routes for resolving complaints they might receive eg, courts, appeal or tribunal]
* making sure we listen and learn from complaints and improve services when something goes wrong

Complaints management, roles and responsibilities

2.4 [Organisations should insert a brief explanation of how complaints are managed in their organisation. For example, who is/are responsible for the overall management/oversight of day-to-day delivery of complaint handling, including a description of who is/are responsible for managing this procedure and for overseeing the handling and consideration of any complaints received. Additional detail can be appended as an annex if necessary].

3. Identifying a complaint

Everyday conversations with our service users

3.1 [Organisations who have a public facing service/contact centre/advice line etc should include this section] Our colleagues interact with people [and organisations] who use our service every day. This can often raise issues, requests for a service, questions and worries [Organisations should include here any other contact examples of ‘everyday conversations’ that colleagues may receive and deal with and that are not complaints] that colleagues can help with immediately. We encourage service users to discuss any issues they have with our colleagues, as we may be able to sort the issue out to their satisfaction quickly and without the need for them to make a complaint.

When people want to make a complaint

3.2 We recognise that we cannot always resolve issues as they arise and that sometimes our service users will want to make a complaint. The UKCG Complaint Standards define a complaint as: an expression of dissatisfaction, either spoken or written, that requires a response. It can be about:

* an act, omission or decision we have made
* the standard of service we have provided

It does not include dissatisfaction with a decision which has a right of appeal, reference or review by tribunal or court of law. [Organisations should amend this final sentence to specifically reflect any complaints they may receive that have another legislative avenue for resolution and therefore should not be dealt with under this procedure.]

3.3 All complaints that we receive from our service users, via any source, including via a Member of Parliament, will be dealt with under this procedure.

Feedback and complaints

3.3 People may want to provide us with feedback instead of making a complaint. Feedback can be an expression of dissatisfaction (as well as positive feedback), but it is normally given without the person wanting to receive a response or make a complaint.

3.4 People do not have to use the term ‘complaint’. We will use the language chosen by the service user, or their representative, when they describe the issues they raise (for example, ‘issue’, ‘concern’, ‘complaint’, ‘tell you about’). We will always speak to people to understand the issues they raise and how they would like us to consider them.

3.5 If we consider that a complaint (or any part of it) does not fall under this procedure we will explain the reasons for this. We will do this in writing to the service user raising the complaint and provide any relevant explanation and signposting information.

3.6 Complaints can be made to us:

* by telephone [insert number(s)]
* in writing [insert address(s)]
* by email [insert email address(s)]
* [Organisations should set out any additional formats in which they receive complaints. For example: in person, online, social media etc with relevant contact details]

3.7 We will consider all accessibility and reasonable adjustment requirements of people who wish to make a complaint in an alternative way. We will record any reasonable adjustments we make.

3.8 We will acknowledge complaints within a maximum of 3 working days of receiving them. This can be done in writing, electronically or verbally.

4. Who can make a complaint

4.1 Any service user may make a complaint to us if they have received or are receiving services from our organisation. Others may also complain to us if they are not in direct receipt of our services but are affected or likely to be affected by any action, inaction or decision by our organisation.

4.2 If the service user making the complaint does not wish to deal with the complaint themselves, they can appoint a representative to raise the complaint on their behalf. There is no restriction on who may represent them. However, they will need to provide us with their consent for the representative to raise and discuss the complaint with us and to see their personal information.

4.3 If the person affected has died, [is a child] or is otherwise unable to complain because of physical or mental incapacity, then the complaint may be made on their behalf by a representative. There is no restriction on who may act as a representative but there may be restrictions on the type of information we can share with them. We will explain this when we first look at the complaint.

4.4 If at any time we see that a representative is not acting in the best interests of the service user affected we will assess whether we should stop our consideration of the complaint. If we do this, we will share our reasons with the representative in writing. In such circumstances we will tell the representative that they can [Organisations should set out how the representative can ask for a review of the decision/escalate their concerns to an independent complaints tier/approach their MP and ask them to refer the matter to the Parliamentary and Health Service Ombudsman] if they are unhappy with our decision.

5. Timescale for making a complaint

5.1 Complaints should be made to us as soon as possible after the events complained about. This should be no later than 12 months after the date the matter being complained about happened or the date the service user raising the complaint found out about it, whichever is the later date.

5.2 If a complaint is made to us after that 12 month deadline we will consider it if:

* we believe there were good reasons for not making the complaint before the deadline, and
* it is still possible to properly consider the complaint.

5.3 If we do not see a good reason for the delay, or we think it is not possible to properly consider the complaint (or any part of it) we will write to the service user making the complaint to explain this. We will also explain that, if they are dissatisfied with that decision, they can complain about it by [Organisations should set out how the service users can request a review of the decision/escalate their concerns to an independent complaints tier/approach their MP and ask them to refer the matter to the Parliamentary and Health Service Ombudsman]

6. Complaints and other procedures

6.1 We make sure our colleagues are properly trained to identify when it may not be possible to achieve a relevant outcome through the complaint process alone. Where this happens, colleagues will tell the service user making the complaint and give them appropriate information about any other process that may help to address the issues and could provide the outcomes sought.

6.2 This can happen at any stage in the complaint handling process and may include identifying issues that could or should:

* trigger disciplinary procedures
* trigger a police investigation
* involve a referral to tribunal or court of law
* [Organisations should delete/include any other relevant examples]

6.3 When another process may be better suited, we will provide clear information about the options available, to the service user raising the complaint. We will make sure they understand why this is relevant and, if available and appropriate, we will advise them to seek specialist independent advice.

6.4 This will not prevent us from continuing to investigate any aspects of the complaint that fall under this procedure. Where possible, we will make sure that the service user raising the complaint gets a complete and holistic response to all the issues raised, which includes any relevant outcomes where appropriate. We will engage with other colleagues or organisations who can provide us with advice and support on the best way to do this.

6.5 If a service user is already taking part or chooses to take part in another process but wishes to continue with their complaint as well, this will not affect the investigation and response to the complaint. The only exceptions to this are if:

* the service user requests or agrees to a delay
* there is a formal request for a pause in the complaint process from the police or a judge.

In such cases the complaint investigation will be put on hold until those processes conclude.

6.6 If we consider that a colleague should be subject to disciplinary procedures, we will advise the service user raising the complaint where it is appropriate to do so. We will share as much information with them as we can whilst complying with relevant data protection legislation.

7. Confidentiality of complaints

7.1 We will maintain confidentiality and protect privacy throughout the complaints process in accordance with UK General Data Protection Regulations and the Data Protection Act 2018. We will only collect and disclose information to those colleagues who are involved in the consideration of the complaint.

7.2 Complaint outcomes may be anonymised and shared within our organisation to promote service improvement.

8. How we handle complaints

Making sure service users know how to complain and where to get support

8.1 We publish clear information about our complaints process and how service users can get help, advice and support with their complaint from [Organisations should insert details of any internal support resources and name and contact details of any relevant external help, advice, support or advocacy providers where available].

8.2 We will make sure that everybody who uses (or is impacted by) our services (and those that represent them) know how they can make a complaint by having our complaints procedure and/or materials that promote our procedure [visible in any public areas and] on our website and our [www.gov.uk](http://www.gov.uk) webpage. We will provide a range of ways to do this so that service users can do this easily in a way that suits them. This includes providing access to our complaints process online.

8.3 We will make sure that the ongoing service for anyone making a complaint will not be affected because they have made a complaint.

What we do when we receive a complaint

8.4 We want all service users to have a good experience while they use our services. If somebody feels that the service received has not met our standards, we encourage them, in the first instance, to [talk to colleagues who are dealing with them and/or to contact (organisations should insert details of first point of contact here)] to see if we can resolve the issue promptly.

8.5 We want to make sure we can resolve complaints quickly as often as possible. To do that, we train colleagues to proactively respond to service users and their representatives and support them to deal with any complaints raised at our first point of contact where possible.

8.6 Colleagues who have contact with service users (or those that support them) will handle complaints in a sensitive and empathetic way. Colleagues will make sure service users are listened to, get an answer to the issues quickly wherever possible, usually within a matter of days, and any learning is captured and acted on.

Our colleagues will:

* listen to the service user to make sure they understand the issue(s)
* ask how they have been affected
* ask what they would like to happen to put things right
* carry out these actions themselves if they can (or with the support of others)
* explain why if they can’t do this and explain what is possible
* capture any learning if something has gone wrong, to share with colleagues and improve services for others.

Focus on early resolution

8.7 Our colleagues often handle complaints that can be resolved quickly at the time they are raised, or very soon after. We encourage colleagues to do this as often as possible so that people get a quick and effective answer to their complaint.

8.8 We will acknowledge the complaint (either verbally or in writing/email) within a maximum of 3 working days. Colleagues will also discuss with the service user making the complaint how we plan to respond to the complaint.

8.9 When we receive a complaint, we are committed to making sure it is addressed and resolved at the earliest opportunity.

8.10 When a colleague believes that an early resolution may be possible, they are authorised to take action to address and resolve the issues raised and put things right for the service user raising them. This may mean giving a quick explanation or apology themselves or making sure a colleague who is more informed of the issues does. Colleagues will resolve complaints in person or by telephone wherever possible.

If we can resolve a complaint

8.12 If we can answer or address the complaint, and the service user making the complaint is satisfied that this resolves the issues, colleagues have the authority to provide a response on our behalf. This will often be done in person, over the telephone, or in writing (by email or letter) in line with the individual circumstances.

8.13 We will capture a summary of the complaint and how we resolved it. This will make sure we build up a detailed picture of how each of the services we provide is doing and what people experience when they use these services. We will use this data to help us improve our services for others.

If we are not able to resolve a complaint

8.14 If we are unable to find an appropriate way to resolve the complaint to the satisfaction of the person making it, we will explain to the person how they can progress their concerns by [Organisations should set out how to ask for a review of the response/escalate their concerns to an independent complaints tier/approach their MP and ask them to refer the matter to the Parliamentary and Health Service Ombudsman.]

A closer look into the complaint

8.15 Not every complaint can be resolved quickly and sometimes we will require a longer period of time to carry out a closer look into the issues and carry out a detailed and fair investigation of the issues to determine what happened and what should have happened.

8.16 We will make sure colleagues involved in carrying out this work are properly trained to do so. We will also make sure they have:

* the appropriate level of authority and autonomy to carry out a fair investigation
* the right resources, support and time in place to carry out the investigation, according to the work involved in each case.

8.17 Where possible, complaints will be looked at by someone who was not directly involved in the matters complained about. If this is not possible, we will explain to the person making the complaint the reasons why it was assigned to that person or team. This should address any perceived conflict of interest.

Clarifying the complaint and explaining the process

8.18 The colleague dealing with the complaint will:

* engage with the service user/representative raising the complaint (preferably in a face-to-face meeting or by telephone) to make sure they fully understand and agree:
	+ the key issues to be looked at
	+ how the service user has been affected
	+ the outcomes they seek
* signpost the service user to any available help, support and advice services, at an early stage
* make sure that any colleagues specifically complained about are made aware at the earliest opportunity (see ‘Support for colleagues’ below)
* share a realistic timescale for how long the investigation will take with the service user raising the complaint, depending on:
	+ the content and complexity of the complaint
	+ the work that is likely to be involved
* agree how they will keep the service user (and any colleague specifically complained about) regularly informed and engaged throughout
* explain how they will carry out the closer look into the complaint, including:
	+ what evidence they will seek out and consider
	+ who they will speak to
	+ how they will decide if something has gone wrong or not
	+ who will be responsible for the final response
	+ how the response will be communicated.

Carrying out the investigation

8.19 Colleagues who carry out investigations will give a clear and balanced explanation of what happened and what should have happened. They will reference relevant legislation, standards, policies, procedures and guidance to clearly identify if something has gone wrong.

8.20 They will make sure the investigation clearly addresses all the issues raised. This includes obtaining evidence from the service user raising the complaint and from any colleagues involved. For further help please see guidance.

8.21 We will complete our investigation within the timescale shared with the service user at the start of the investigation. Should circumstances change we will:

* notify the service user raising the complaint (and any colleagues specifically subject to the complaint) immediately
* explain the reasons for the delay
* provide a new target timescale for completion

8.22 If we cannot conclude the investigation and issue a final response within 6 months (unless we have agreed a longer timescale with the service user raising the complaint within the first 6 months) our [Organisations should insert details of their senior manager(s) responsible for oversight of these types of cases] will write to the service user to explain the reasons for the delay and the likely timescale for completion. They will then maintain oversight of the case until it is completed, and a final written response is issued.

8.23 Before sending a final written response to the complaint, we will consider sharing and discussing (by telephone, in a meeting or in writing) the outcome of our investigation and the actions we intend to take, with key parties to the complaint. This will be decided on a case-by-case basis and will be based on the complexity of the issues and the identified impact. We will always consider any comments we receive before coming to a final decision and issuing a final written response.

Providing a remedy

8.24 If, following the investigation, the colleague carrying out the investigation identifies that something has gone wrong they will seek to establish what impact the failing has had on the service user concerned. Where possible, they will put that right for the service user and any other service users who have been similarly affected. If it is not possible to put the matter right, they will decide, in discussion with the service user(s) and relevant colleagues, what action can be taken to remedy the impact.

8.25 In order to put things right, the following remedies may be appropriate:

* an acknowledgement, explanation and a meaningful apology for the error
* reconsideration of a previous decision
* expediting an action
* waiving (or recompensing) a fee or penalty
* issuing a payment or refund
* changing policies, procedures, guidance or training to prevent the same mistake(s) happening again and to improve our service for others.
* [Organisations should insert any other relevant remedies]

The final written response

8.26 As soon as practical after the investigation is finished, the person carrying out the investigation will co-ordinate a written response [Where applicable, organisations should include details of any relevant procedure for the quality assurance/agreement and sign off of final response letters]. They will send this to the service user and any other relevant parties. The response will include:

* a reminder of the issues investigated and the outcome sought
* an explanation of how we investigated the complaint
* the relevant evidence we considered
* what the outcome is
* an explanation of whether or not something went wrong that sets out what happened compared to what should have happened, with reference to relevant legislation, standards, policies, procedures and guidance
* if something went wrong, an explanation of the impact it had
* an explanation of how that impact will be remedied for the individual
* a meaningful apology for any failings
* an explanation of any wider learning we have acted on/will act on to improve our service for other users
* an explanation of how we will keep the service user involved and updated on how we are taking forward all systemic learning or improvements relevant to their complaint
* confirmation that we have reached the end of our complaint procedure
* details of how to escalate the complaint to the next stage if the service user is not satisfied with our final response by [Organisations should set out how to ask for a review of the decision/escalate their concerns to an independent complaints tier/approach their MP to ask them to refer the matter to the Parliamentary and Health Service Ombudsman]
* if available, a reminder of where to obtain any independent help, advice, support or advocacy.

Support for colleagues

8.27 We will make sure all colleagues who look at complaints have the appropriate training, resources, support and time to respond to and investigate complaints effectively. This includes how to manage challenging conversations and behaviour.

8.28 We will make sure colleagues who are specifically complained about are made aware of the complaint and we will give them advice on how they can get support from within our organisation, and externally if required.

8.29 We will make sure colleagues who are specifically complained about can give their views on the events and respond to emerging information. Colleagues will act openly and transparently and with empathy when discussing these issues.

8.30 The person carrying out the investigation will keep any colleague specifically complained about updated. These colleagues will also have an opportunity to see how their comments are used before the final response is issued.

Requests for review [delete section if no such service is available]

8.31 In our final response to every complaint we will clearly inform the person who has raised the complaint that if they are not happy with the outcome of our investigation, they can ask for a review and provide them with relevant information on how to do that. [Organisations should insert relevant explanation and information including details of the function and remit of their review service and what is required from the service user making the request. For example: ‘We will ask the service user to explain why they think our decision is wrong and provide us with any supporting or new evidence’].

8.32 If we identify that further work is required to address the complaint we will [Organisations should insert details of how any additional work will be completed and a further response sent.] In our final response to the review request we will clearly inform the person who has raised the complaint that if they are not happy with the outcome of our review, they can [Organisations should set out how to escalate their concerns to an independent complaints tier /approach their MP and ask them to refer the matter to the Parliamentary and Health Service Ombudsman.]

Referral to our independent complaints tier [delete section if no such service is available]

8.33 [In our final response to every complaint/In our final response following a review – delete as appropriate] we will clearly inform the service user who has raised the complaint that if they are not happy with the outcome of our [investigation/review], they can complain to our independent complaints tier and provide them with relevant information on how to do that. [Organisations should insert any relevant details and explanation on the role and remit of the independent tier.]

Referral to the Ombudsman

8.34 [In our final response to every complaint/In our final response following a review/ In the final response from our independent tier – delete as appropriate] we will clearly inform the service user who has raised the complaint that if they are not happy with the outcome of our investigation, they can approach their MP and asking them to refer the matter to the Parliamentary and Health Service Ombudsman. We will explain that the Ombudsman’s service is free to everyone and they can find out more about it by visiting the website [www.ombudsman.org.uk](http://www.ombudsman.org.uk) or by calling 0345 015 4033.

9. Complaints involving multiple service areas or organisations

9.1 If we receive a complaint that involves a number of service areas or another organisation(s) we will make sure that we investigate in collaboration where appropriate and possible. Colleagues for each service area or organisation will work together to deliver a co-ordinated and comprehensive response and will ensure that any learning is captured to help us improve our services.

9.2 The colleague investigating for the main service area or organisation will be responsible for making sure the service user who raised the complaint is kept involved and updated throughout.

10. Monitoring, demonstrating learning and data recording

10.1 We expect all colleagues to identify what learning can be taken from complaints, regardless of whether mistakes are found or not.

10.2 Our senior leaders take an active interest and involvement in all sources of feedback and complaints, identifying what insight and learning will help improve our services for other users.

10.3 We maintain a record of:

* each complaint we receive
* the subject matter
* and outcome (including any learning we have identified)

10.4 We measure the overall performance of our complaints service (and our delivery of the UKCG Complaint Standards) by seeking feedback on our service from service users who have made a complaint, any representatives they may have, colleagues who have been specifically complained about and from colleagues who have carried out the investigation. [Organisations should set out how they will seek this feedback, for example - on every complaint dealt with/on a random sample of x% of the complaints dealt with.]

10.5 We monitor all feedback and complaints over time, looking for trends and risks that may need to be addressed.

10.6 As soon as practical after the end of the financial year, we will produce and publish a report on our complaint handling. This report will include details of the learning we have identified and explain how complaints have led to a change and improvement in our services, policies or procedures.

11. Complaints about a contractor for our services [delete if not applicable]

11.1 This complaint handling procedure applies to all of the UK central government services we provide.

11.2 Where we outsource the provision of government services to a contractor we will work with the provider to support them and ensure that they follow these same complaint handling procedures.

12. Complaints handling by our agencies and arms-length bodies [delete if not applicable]

12.1 As the parent department responsible for [Organisations should insert details of all relevant executive agencies and ALBs for which they have ministerial/departmental responsibility] we make sure that we have meaningful strategic oversight of the performance of these organisations to ensure that they are meeting the expectations set out in the UK Central Government Complaint Standards.

Annex [optional – amend or delete as appropriate]

Roles and responsibilities

The roles and responsibilities of colleagues within our organisation, when dealing with complaints, are set out below [Organisations should include descriptions/names/job/team titles here as appropriate. Examples of what this might look like are provided below].

|  |  |
| --- | --- |
| **Role** | **Responsibility** |
| Senior Responsible Person[insert name and/or job title] | has overall responsibility for making sure we: * comply with the UKCG Complaint Standards and this procedure
* take any necessary remedial action
* report annually on how we learn from complaints.
 |
| Senior leaders[insert description or name(s) and job title(s) of relevant senior leaders for complaints] | Are responsible for:* overseeing complaints and the way we learn from them
* overseeing the implementation of actions required as a result of a complaint, to prevent failings occurring again
* contributing to the investigation of complaints

Senior leaders retain ownership and accountability for the management and reporting of complaints. They are responsible for the quality of the responses provided and should therefore be satisfied that investigations are carried out in accordance with the UKCG Complaint Standards and this procedure.Senior leaders will review the information gathered from complaints regularly (at least quarterly) and consider how services could be improved or internal policies and procedures updated. They will report on the outcomes of these reviews via the organisation’s governance structure.Senior leaders are also responsible for ensuring that complaints are central to the overall governance of the organisation. They will make sure that colleagues are supported both when handling complaints and when they may be the subject of a complaint. |
| Complaints management[insert description or name and job title of relevant Teams or Managers] | Are responsible for the overall day to day management and oversight of the procedures for handling and considering complaints and the teams that deliver those services [delete if not applicable]. In conjunction with senior leaders, they will be involved in a review of the quarterly reports. They will use this review to identify areas of concern, agree remedial action and improve services. The complaints manager(s) may also act as a complaint investigator or complaint lead. |
| Complaint Investigator [insert description or name and job title of relevant individuals or teams] | Is the person allocated to oversee and co-ordinate the investigation of the complaint and the response to a complaint. If needed, they will seek out support and input of others. They will make sure that the information and responses they receive from the service user making the complaint, and from colleagues being complained about, clearly address all of the issues raised.They will be trained in investigative techniques. Where possible they will also be trained in advanced dispute resolution skills. This will enable them to seek a mediated resolution to the concern or complaint at any time during the investigation of the issues. The complaint investigator may also act as a complaint lead and may also delegate their responsibilities as set out in this procedure to the complaint lead. |
| Complaint lead[if appropriate insert description or name and job title of relevant individuals or teams] | As appropriate and when required, the complaint investigator will call for the input of a designated complaint lead(s) with knowledge of the services complained about. The complaint lead will carry out an investigation, as set out in this procedure, and provide the Complaint Investigator with: * an objective account of what happened
* an explanation if something has gone wrong
* details of any action already taken or planned to resolve the matter.
 |