

**RASA CENTRE COMPLAINTS PROCEDURE & MANAGING ALLEGATIONS
AGAINST STAFF FOR SERVICE USERS**

RASA is committed to delivering a quality service to all involved in the service. It is essential that all complaints are taken seriously and dealt with appropriately. This procedure is in place to:

- Ensure the smooth running of the service
- Protect the well-being of all involved in the service
- Ensure that both complainants, staff and volunteers know that the procedure will be followed in all incidents when a complaint is made
- Ensure that the process of investigation is open, thorough and fair to all parties

RASA is committed to fully investigating any complaint that is made against

- Staff and Volunteers including management committee members, students, consultants etc.
- The delivery of services
- Service users

The complaints procedure is designed to ensure fair treatment for service users who feel that a staff members' actions are:

- In breach of the service user contract
- Below the requirements expected of them
- To provide protection for staff against ill-founded complaints

The complaints procedure is also to be used in conjunction with Equal opportunities policy when service users feel they have been treated unfairly.

Where a service user has a grievance or complaint about a member of staff or the service, they will be asked to put this in writing. No action will be taken unless the complaint is in writing. The letter should include

- Details of the complaint
- Date and time of incident
- Details of any witnesses to the incident

Should the complainant have literacy difficulties, an advocate can act on their behalf or assist them in making the complaint.

Unless there is a good reason for not doing so, a complaint should be raised within one month of the incident to which it refers. The letter should be addressed to the Clinical Lead in her absence the Operations Manager.

The clinical lead will communicate the results of the enquiry to the complainant within 21 days. All time limits will be met unless this is not possible due to annual leave in which case the complainant will be contacted at the earliest opportunity.

1. The Clinical Lead will keep a written record from the first contact of the received complaint.
2. The clinical lead will liaise with the appropriate member of staff and determine how to proceed with the complaint.
3. The clinical lead will provide the employee (s) with a copy of the complaint at the earliest opportunity and inform them of their right to seek advice.
4. If the grievance is a safeguarding concern the Clinical Lead will follow the Managing Allegations against Staff Procedure.
5. Depending on the nature of the complaint, The Clinical Lead will act to resolve the issue to the service user's satisfaction and will inform The Chair of Management Committee if this is not possible.
6. If the complaint is not resolved at this juncture, The Clinical Lead will make a formal report to The Management Committee as part of her duty in this procedure.
7. The Chair of The Management Committee will contact the complainant in writing to inform them of any actions that have ensued as a result of the complaint. This will occur within a two-week period of the Clinical Lead reporting to Management Committee.
8. If the complainant is not satisfied with the resulting actions, they will be invited to attend a meeting with The Clinical Lead and The Chairperson of RASA to investigate the matter further and consider the next course of action.
9. Unless the matter appears to be unusually complex, the span of the enquiry should not be more than six weeks. Should this not be possible, the complainant should be regularly informed of the situation, no less than every four weeks.
10. Unless the complaint is withdrawn, an investigation may only be concluded when the chair is satisfied that all necessary information has been obtained and considered.
11. On conclusion, the complainant should be informed in writing as to the outcome of the investigation and the reasons for the final outcome, together with any proposed or intended consequential action.

Managing Allegations against Staff

RASA will manage all allegations against staff and/or volunteers in accordance with agreed Local Child Protection Procedures. The Clinical Lead is a nominated 'Designated Person' who will liaise with the Local Authority Designated Officer (LADO) on all matters of concern which meet any of the following criteria if it appears that the person has:

- Behaved in a way that has harmed a child, or may have harmed a child
- Possibility committed a criminal offence against or related to a child
- Behaved towards a child in a way that indicates she would pose a risk of harm if they

work regularly or closely with children. In addition, these procedures will be used

- If there are concerns about the person's behaviour towards their own children, or children unrelated to their employment or voluntary work,
- When an allegation is made about abuse that took place some time ago and the accused person may still be working or having contact with children.

RASA will not attempt to manage allegations or concerns which meet any of the above criteria through other mechanisms such as Complaints Procedure or Disciplinary Procedures, unless written agreement to do so has been confirmed by the Local Authority Designated Officer (LADO). RASA will provide the Local Authority Designated Officer (LADO), the Police and Children's Social Care with any personal data/information about staff members/volunteers which the said organisation(s) deem relevant to child protection enquires.

Legislation and Guidance

http://wirrallscb.proceduresonline.com/chapters/p_man_alleg_vol.html

<http://www.seftonlscb.co.uk/managing-allegations-lado.aspx>

http://liverpoolscb.proceduresonline.com/chapters/p_alleg_adults_ch.htm

This policy is to be used in conjunction with:

RASA Safeguarding Policy and Procedure for Adults and Children

RASA Whistleblowing Policy

RASA Safer Recruitment Policy