

Comments, Compliments and Complaints Procedure

1. Introduction

This procedure is designed to ensure that the organisation provides proper and consistent attention to concerns and complaints. This applies to all elements of the organisation's services. The procedure outlined below will be followed when any member of staff receives a complaint.

This procedure should also be read in conjunction with our comments, compliments and complaints policy statement and St Piers/Young Epilepsy's duty of candour policy.

2. Definitions

Comment

A comment is a personal opinion or belief, feedback or remark expressed by a stakeholder. The comment may be positive, negative or indifferent. Where the person indicates they expect a reply, or where it is otherwise thought appropriate to do so, this should be dealt with as general correspondence by the appropriate manager.

Compliment

A compliment is positive recognition or praise for a service or individual.

Concern

A concern is defined as a matter of interest, importance or anxiety. St Piers/Young Epilepsy aims to resolve all concerns informally, quickly and in collaboration with the person raising the concern. Concerns will be managed by the relevant manager in the service where the concern has been raised (for example house manager, care coordinator, teacher or tutor), and no formal records will be kept relating to concerns.

Complaint

A complaint is defined as any written or verbal expression of dissatisfaction, or a perceived grievance or injustice by a student, a client, his or her parents/guardians, an official of a local education authority or any other individual or organisation with an interest in St Piers/Young Epilepsy.

Complaints are a valuable and constructive source of information concerning the degree to which we can meet the needs and expectations of our students, clients, their families, and the organisations which fund the services they receive. The nature of complaints and the precipitating factors provide the organisation with useful performance indicators. The way in which complaints are received, addressed and resolved offers another set of indices against which we can judge our performance as a service provider.

Any complaints that relate to safeguarding concerns of children and/or young people, will be managed via the child and adult protection and safeguarding procedures and may require the involvement of our external safeguarding partners.

Anonymous complaints

When complainants do not wish to identify themselves, we will still follow our complaints process as far as is practically possible.

3. Exceptions

It is important to understand the difference between a complaint, grievance or whistleblowing concern to ensure that the correct procedure is followed. The following should be helpful in clarifying the differences.

There are certain issues which fall outside the remit of this complaint's procedure:

- Staff grievances
- Whistleblowing
- Disciplinary procedures
- Capability/Performance Management.

Grievance

Grievances are concerns, problems or complaints raised by a staff member with the employer. Grievances can only be made by an employee, not a student, parent or local authority. If a staff member has a grievance, the St Piers/Young Epilepsy grievance procedure should be followed.

Whistleblowing

Whistleblowing is the term used when someone who works for an employer raises a concern about malpractice, risk, wrongdoing or possible illegality. Only those working in St Piers/Young Epilepsy services can whistle blow. If a St Piers/Young Epilepsy employee has a

whistleblowing concern, they must follow the St Piers/Young Epilepsy whistleblowing and confidential disclosures procedure.

Disciplinary

Matters concerning employee misconduct or poor performance resulting from negligence, lack of application or attitudinal problems are managed under the St Piers/Young Epilepsy disciplinary procedure. In such cases, an investigation will be undertaken and, where misconduct is proven, the matter may result in a disciplinary sanction against the employee.

Capability/Performance Management

St Piers/Young Epilepsy expects all employees to achieve and maintain acceptable standards of conduct, attendance and performance. Where there are concerns with an employee's work performance, they will be managed under the St Piers/Young Epilepsy performance management and capability procedure. A distinction is made between an employee's inability to perform and a lack of performance due to wilful refusal, such cases are managed under the disciplinary procedure.

4. General Advice

- The requirement to have a complaints procedure should not undermine efforts to resolve a concern informally by the relevant manager.
- At first it may be unclear as to whether the individual is raising a question or expressing an opinion rather than making a complaint. An initial discussion about the issue may help to clarify and decide what may need to happen next.
- Staff need to be clear about the difference between a concern and a complaint. Taking informal concerns seriously at the earliest stage will reduce the numbers that develop into formal complaints.
- If the issue remains unresolved after an informal process of clarifying and attempting to resolve the issue, the initial stage of the formal complaints procedure would follow.
- At each stage in the complaints procedure, we will endeavour to resolve the complaint at the earliest opportunity.
- Responses to concerns and complaints are based on openness, candour and integrity and we will apologise when responsibility is acknowledged for any failings.
- Once a complaint has been made it can be withdrawn at any time by the complainant.

- Consent and confidentiality must not be compromised during the complaints process unless there are professional or statutory obligations that make this necessary, such as safeguarding.
- There is a nominated member of staff responsible for overseeing the administration of complaints in St Piers/Young Epilepsy within the safeguarding and quality practice team, known as the complaints coordinator.
- The complaints coordinator acknowledges and logs the progress of each complaint.
- A complaint may be made in person, by telephone, or in writing. A complainant does not have to state that they are 'making a complaint' for their concern to be treated as such.

5. Procedure

Compliments procedure

We also like to know what we are doing well and welcome any compliments. These can be sent to compliments@youngepilepsy.org.uk or they can be logged directly on SharePoint by any staff member. The Executive Team and Trust Board are made aware of all the compliments received in the annual complaints and compliments report.

Informal Concerns Resolution

1.1 Where possible and appropriate, staff should try to resolve concerns raised informally and swiftly to find a satisfactory outcome for all parties.

1.2 Staff may be able to resolve concerns immediately without speaking to a manager, however a manager should be informed that the concern was raised to ensure a satisfactory resolution is achieved.

1.3 No record of concerns or their response is required.

1.4 If a satisfactory outcome is not achieved informally, the formal complaints procedure should be initiated. The person raising the concern must always be asked whether they are satisfied with the outcome of an informal resolution process.

Formal Complaints Resolution

A complaint can be raised in two ways:

1. Via any staff member in writing or verbally.

2. Sending an email to complaints@youngepilepsy.org.uk

In accordance with the Equality Act 2010, we will consider making reasonable adjustments if required, to enable complainants to access and complete this complaints procedure. For instance, providing information in alternative formats, assisting complainants in raising a formal complaint or holding meetings in accessible locations.

When a complaint is received, it is necessary that the staff member receiving the complaint, records this in writing and passes it over immediately to the complaints coordinator who records this on the complaints log on SharePoint.

If a complaint is received outside of administrative working hours, the duty manager will be contacted and advised of the facts. The duty manager may contact the Senior House Manager on call and/or the 'on call' Executive to discuss the matter and agree on any immediate actions required.

The complaints coordinator will liaise with the relevant manager and director to establish at what level the complaint will be managed. The stages of a complaint are:

Stage 1 Complaint	<ul style="list-style-type: none"> The complaint is about a specific location within a service. This complaint is a standalone issue and not part of a repeat pattern of complaints. No implications regarding the reputation of the organisation or widespread significant impact
Stage 2 Complaint	<ul style="list-style-type: none"> If the complainant remains dissatisfied with the response from stage 1. A referral to a regulator may be required (CQC/Ofsted) The reputation of the organisation is at risk. The concerns are widespread in the organisation or will have a significant impact on students
Stage 3 Complaint	<ul style="list-style-type: none"> If the complainant remains dissatisfied with the response from stage 2 The complaint is about the Executive Team or an individual governor or trustee

Stage 1 Complaint Resolution Procedure

Complaints received outside of term time.

We will consider complaints made outside of term time for St Piers School, College or Residential Services to have been received on the first school/college day after the holiday period.

2.1 The complaints coordinator will pass a Stage 1 complaint to the appropriate head of service and copy in the relevant director.

2.2 The complaint will be acknowledged to the complainant by the complaints coordinator, within 48hrs of receipt of the complaint.

2.3 The head of service will ensure the complaint is investigated by an appropriate manager and inform the relevant director and complaints coordinator who they have identified. Where the subject of the complaint is the Head of Service, who would ordinarily act as the commissioning manager, the Executive will assume the role of commissioning manager for the purposes of the investigation and resolution process.

2.4 Notes will be kept of all meetings, conversations and of the receipt of any documentation.

2.5 If a complainant wants to withdraw their complaint, we will ask them to confirm this in writing.

2.6 The outcome of the complaint investigation will be passed to the appropriate head of service who commissioned the investigation.

2.7 The head of service will write the response to the complainant. This will be sent to the complainant via email and also by recorded delivery and copied to the complaints coordinator. The head of service will offer to meet with the complainant to discuss the outcome and ensure a resolution is achieved.

2.8 If the complainant remains dissatisfied with the outcome, they can formally request for their complaint to be escalated for Stage 2 resolution. This must be submitted in writing, within 10 working days of receipt of the final response letter, to the complaints coordinator outlining why and/or which parts of the process they remain dissatisfied with (See 'Escalation Process' section below).

2.9 If no request for escalation is received within this timeframe, the complaint will be considered closed and no further action will be taken. Any request received after the 10-working day period will only be accepted at the discretion of the commissioning manager, where exceptional circumstances can be demonstrated (for example, serious illness, bereavement, or other factors that reasonably prevented a timely response). The commissioning manager will inform the complainant in writing on whether a late escalation request will be accepted.

Stage 2 – Complaints Formal Resolution

3.1 The complaints coordinator will pass the Stage 2 complaint to the relevant member of the Executive Team.

3.2 The complaint will be acknowledged to the complainant by the complaints coordinator, within 48hrs of receipt of the complaint.

3.3 The member of the Executive Team will refer the complaint to an appropriate manager or Director to investigate and inform the complaints coordinator who they have identified.

3.4 Notes will be kept of all meetings, conversations and of the receipt of any documentation.

3.5 The outcome of the complaint investigation will be passed to the member of the Executive Team who commissioned the investigation.

3.6 The member of the Executive Team will inform the complainant and the complaints coordinator of the outcome of the complaint investigation in writing. The member of the Executive Team will offer to meet with the complainant to discuss the outcome and ensure a resolution is achieved.

3.7 If the complainant remains unsatisfied with the outcome, they can formally request for their complaint to be passed for Stage 3 resolution. This must be submitted in writing, within 10 working days of the receipt of the final response letter, to the complaints coordinator, outlining why and/or which parts of the process they remain dissatisfied. (See 'Escalation Process' section below)

Stage 3 - Complaints Formal Resolution

4.1 The complaints coordinator will pass the Stage 3 complaint to the chief executive and the chair of trustees (unless this has already been received directly).

4.2 The chief executive and the chair of trustees will then appoint a trustee to investigate the complaint and the complaints coordinator will pass the complaint to the identified Trustee.

4.3 The complaint will be acknowledged to the complainant by the complaints coordinator, within 48 hours of receipt of the complaint.

4.4 Notes will be kept of all meetings, conversations and of the receipt of any documentation.

4.5 The trustee will inform the chief executive of the outcome of the investigation.

4.6 The chief executive will inform the complainant and the complaints coordinator and the chair of trustees and chair of governors about the outcome of the complaint investigation in writing.

4.7 There is no right of appeal against a Stage 3 decision.

4.8 If the complainant remains dissatisfied the complainant will be advised of their right to refer their complaint to the Charities Commission, Ofsted and/or CQC.

Escalation process

Stage 1 - 2

4.9 On receipt of a response from a complainant advising dissatisfaction with a complaint outcome, the complaints coordinator will advise the relevant member of the Executive Team that a complaint has escalated to Stage 2.

4.10 After reading the rationale for the remaining dissatisfaction, the member of the Executive Team will commission a review which will be undertaken by an appropriate manager or director as assigned by them.

4.11 The member of the Executive Team will inform the complaints coordinator who they have identified and an acknowledgement of this and the time frame for completion will be sent to the complainant within 48 hours.

4.12 The conclusions of the review should be sent to the complainant within 10 working days.

Stage 2-3

4.13 On receipt of a response from a complainant advising dissatisfaction with the conclusions of the review, the complaints coordinator will advise the chief executive that a complaint has

escalated to Stage 3. The chief executive will inform the chair of the trustees and chair of governors.

4.14 After reading the rationale for the remaining dissatisfaction, the chief executive will commission a review which will be undertaken by a trustee or appropriate executive member.

4.15 The chief executive will inform the complaints coordinator who they have identified and an acknowledgement of this and the time frame for completion will be sent to the complainant within 48 hours.

4.16 The conclusion of the review should be sent to the complainant within 10 working days.

Enabling children, young people and adults at risk to raise comments and complaints.

Children and adults who receive services from St Piers/Young Epilepsy have a right to voice their comments and complaints, and to have these taken seriously. The complaints procedure is communicated directly to children and young people through the initial materials they are given when they join St Piers/Young Epilepsy.

We recognise that all children need to be supported to know how to make a complaint, regardless of their age or level of ability. Therefore, it is important that we diversify and individualise our communication and support to students.

St Piers/Young Epilepsy promotes the following as ways in which a child or adult can tell us about their comments or complaints:

- Communicating with any staff member who will follow the procedure outlined in this document.
- Contacting the complaints coordinator directly via email or telephone.
- Meeting the independent advocate who attends St Piers/Young Epilepsy fortnightly, and who will then pass over any complaints received to the complaints coordinator.
- Contacting the Children's Commissioner or regulator with their complaint as per posters in all residential services.

St Piers/Young Epilepsy also ensures that this procedure is available to parents, carers and other stakeholders via the St Piers/Young Epilepsy websites as well as through direct publicity.

6. Response Times

Most complaints should be resolved and final responses sent within 20 working days of receipt during term time. If it is anticipated that the resolution and final response will not be possible within that timescale, then this will be discussed with the complainant and a holding letter will be prepared and sent by the commissioner of the investigation, indicating the expected timescale for final response and the reasons for the delay.

7. Investigation Process

In investigating and resolving complaints, we will:

- Have a discussion with the complainant to clarify the precise nature of the complaint and the complainant's desired resolution.
- Obtain relevant reports/statements from staff responsible for the area of activity about which the complaint has been made.
- Obtain any relevant records to assist in the investigation.

Responses to complaints will be prompt and honest. If the complaint is justified, the response should acknowledge that fact and offer an apology. Defensive or vague responses tend to inflame the situation. It is important to state in the reply whether the complaint has been upheld or not and details of the action taken should be provided.

Similarly, if a complaint is found to be unjustified the response should make that finding and the basis for it clear. In whatever way a complaint is resolved, care must be taken to ensure that the complainant is treated with respect and consideration and relationships are not damaged in any way as the result of a complaint having been lodged. Details of the procedure for redress will be explained within the letter of response.

A complaint should not be investigated by someone who is implicated in the complaint.

Those who investigate complaints, must have completed the necessary internal training to ensure that the quality of investigations is to the required high standard.

During the course of the complaint relevant legal and insurance advice will be sought as appropriate by St Piers/Young Epilepsy.

8. Recording and Monitoring Complaints

As soon as a complaint is received by complaints coordinator, it will be logged. This allows us to ensure that all complaints are recorded consistently and that the investigation and actions

resulting in a complaint being raised are monitored and transparent. The complaints log is accessible on SharePoint to the complaints coordinator, heads of service and Executive Team.

We are required to notify the Adult Social Care Customer Relations Team via email on asc.customerrelations@surreycc.gov.uk of any new complaints that Young Epilepsy receives relating to students aged over 18 years whose package of care is commissioned in part or in full by Surrey County Council. We will inform them of the following:

- the name of the complainant
- the name of the person whom the complaint is being raised on behalf of
- The date you received the complaint and an outline of your planned investigation and response.

Once a complaint investigation is concluded, there are likely to be actions and recommendations generated, to ensure that we continue to develop services to provide the best care, education and health provision for children, young people and adults at risk. It is the responsibility of the head of service to ensure that all actions and recommendations are completed, and to inform the complaints coordinator in order that their completion can be logged.

The Education Governing Body is responsible for sampling complaints annually, as well as monitoring trends and areas of risk, to ensure that the complaints process is effective and that appropriate actions and recommendations are being implemented as a result of complaints.

The Clinical Governance Steering Group will also monitor and analyse any complaints that implicate a clinical governance issue.

When the complaints coordinator is unavailable, the management of complaints will be delegated to a deputy who will fulfil the role in any interim period.

9. Referral to other organisations

If, at any stage of the procedure the complainant is unhappy with the process of the investigation or in its resolution, they may refer the matter to the organisations listed below.

1. Adult Social Care Services and Health Services

Care Quality Commission (CQC)

Citygate, Gallowgate,



Newcastle upon Tyne, NE1 4PA

Telephone: 03000 616161

Website: www.cqc.org.uk

Young Epilepsy Provider ID: 1-101610290

Young Epilepsy Location ID: 1-1377906412.

2. Educational Services and Children's Residential Care:

Ofsted

3rd Floor, Royal Exchange Buildings,

St Ann's Square, Manchester, M2 7LA

General Enquiries: 0300 123 1231

Complaints Line: 0300 123 4666

Website: www.gov.uk/complain-to-ofsted

3. If the complainant believes that St Piers School or College did not handle their complaint in accordance with the published complaints procedure, or acted unlawfully or unreasonably in exercising their duties under education law, they may contact the Department for Education **after completing Stage 3** of this procedure.

The Department for Education will not normally reinvestigate the substance of complaints or overturn any decisions made by St Piers School or College. They will consider whether we have adhered to education legislation and any statutory policies connected with the complaint.

Contact options:

- **Online:** www.education.gov.uk/contactus
- **Telephone:** 0370 000 2288
- **Post:** Department for Education, Piccadilly Gate, Store Street, Manchester, M1 2WD

This policy is agreed by the Trust Board and will be implemented by all departments.	
Signed:	Date:
Chief Executive Mark Devlin, Chief Executive	01 September 2025
Chair of Trustee Board Chair of Trustee Board: Markus Ruetimann	01 September 2025
Date of next review:	31 August 2026

Version table			
Creation:- Gill Walters			
Approved by:-			
Version No.	Date of changes	Reason for change	Changes made by
5	01 July 2022	Removed reference to childrens homes and updated with Residential Special Schools - NMS	Gill Walters
6	24 Aug 2022	Added in compliments email	Gill Walters
7	15 February 2024	Additions include – anonymous complaints, withdrawal of complaint, outside of term time complaint, DfE contact details	Gill Walters
8	11 August 2025	Clarity added to 2.3 and 2.7 Addition of 2.9 Referral to other organisations – checked.	Gill Walters