



Complaints Policy and Procedure

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Part One – Introduction & Overview

1.1 Introduction

Sheba Arts is a learning organisation, committed to the development and improvement of our services. and the experience of working with us.

We are committed to providing our audiences, participants and partners with quality experiences, delivered in line with our values and ethos as an organisation and with best practice. We endeavour to treat everyone equally and with equal respect.

We realise that, even in the best-run organisations, there may be times when things go wrong and our users may not be happy with their experience or the service they have received. In such circumstances we seek to resolve dissatisfaction as close as possible to the point of service delivery and to have a robust complaints procedure that enables us to conduct thorough, impartial and fair investigations of complaints so that, where appropriate, we can make evidence-based decisions on the facts of the case.

We take the position that complaints give us valuable information we can use to improve. Our Complaints Handling Procedure will enable us to address a complainant's dissatisfaction and may help us prevent the same problem from happening again. We believe that handling complaints early creates better relations with our audiences and the public, and that handling complaints close to the point of service delivery means we can, in most instances, deal with them locally and quickly.

All Sheba Arts staff cover this procedure as part of their induction and may be given refresher training as required, to ensure they are confident in identifying complaints, empowered to

resolve simple complaints on the spot, and familiar with how to apply this procedure (including recording complaints).

The Complaints Handling Procedure helps us keep the user at the heart of the process, while enabling us to better understand how to improve our services by learning from complaints.

1.2 Complaints Handling Principles

An effective complaints handling procedure is:

1.2.1 User-focused: it puts the complainant at the heart of the process.

1.2.2 Accessible: it is appropriately and clearly communicated, easily understood and available to all.

1.2.3 Simple and timely: it has as few steps as necessary within an agreed and transparent timeframe.

1.2.4 Thorough, proportionate and consistent: it should provide quality outcomes in all complaints through robust but proportionate investigation and the use of clear quality standards.

1.2.5 Objective, impartial and fair: it should be objective, evidence-based and driven by the facts and established circumstances, not assumptions, and this should be clearly demonstrated.

An effective complaints handling procedure should:

1.2.6 Seek early resolution: it aims to resolve complaints at the earliest opportunity, to the service user's satisfaction wherever possible and appropriate.

1.2.6 Deliver improvement: it is driven by the search for improvement, using analysis of outcomes to support service delivery and drive service quality improvements.

1.3 Structure of the Complaints Handling Procedure

1.3.1 The Complaints Handling Procedure (CHP) explains to staff how to handle complaints. The CHP consists of:

- Part One – Overview & Structure
- Part Two – When to Use the Procedure
Guidance on identifying what is and what is not a complaint, handling complex or unusual complaint circumstances, the interaction of complaints and other processes, and what to do if the CHP does not apply.

- Part Three – The Complaints Handling Process
Guidance on handling a complaint through stages 1 and 2, and dealing with post-closure contact.
- Part 4 – Governance of the Procedure
Staff roles and responsibilities and guidance on recording, reporting, publicising and learning from complaints.

1.4 Overview of the Complaints Handling Process

1.4.1 Anyone can make a complaint, either verbally or in writing, including face-to-face, by phone, letter or email.

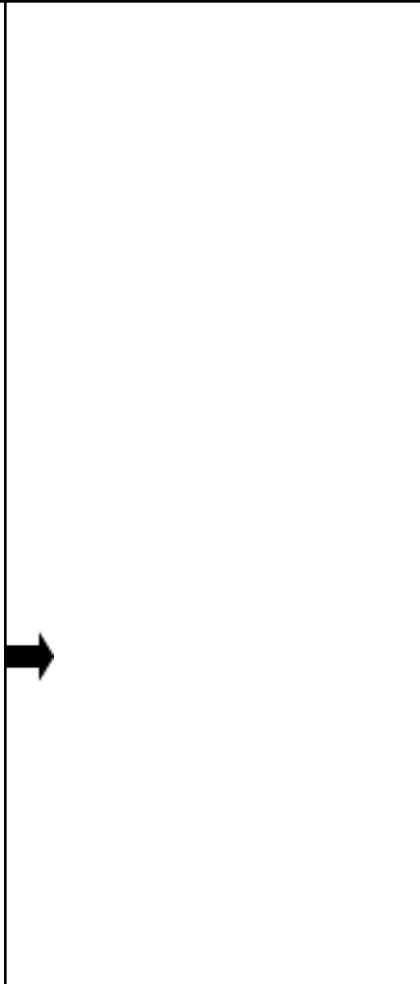
1.4.2 We will try to resolve complaints to the satisfaction of the complainant wherever this is possible. Where this isn't possible, we will give the complainant a clear response to each of their points of complaint. We will always try to respond as quickly as we can (and on the spot where possible).

1.4.3 Our complaints procedure has two stages. We expect the majority of complaints will be handled at stage 1. If the complainant remains dissatisfied after stage 1, they can request that we look at it again, at stage 2.

If the complaint is serious, complex or 'high risk' we will proceed directly to stage 2.

1.4.4 For detailed guidance on the process, see Part 3 – The Complaints Handling Process

<p>Stage 1: Frontline response</p> <p>For issues that are simple and straightforward, requiring little or no investigation</p> <p>'On-the-spot' apology, explanation, or other action to put the matter right</p>	<p>Stage 2: Investigation</p> <p>Where the complainant is not satisfied with the frontline response, or chooses not to engage at the frontline, or where the complaint is complex, serious or 'high-risk'</p> <p>Complaint acknowledged within three working days</p>	<p>Review by the Board</p> <p>Where the complainant is not satisfied with the stage 2 response.</p> <p>The Board of Trustees will review the complaint and assess whether there is evidence of service failure or maladministration not identified in the original stage 2 response.</p>

<p>Complaint resolved or a response provided within five working days</p> <p>Complaints addressed by any member of staff, or alternatively referred to the appropriate point for frontline response</p> <p>Response normally face-to-face or by telephone (though sometimes we will need to put the decision in writing)</p> <p>We will tell the complainant how to escalate their complaint to stage 2</p>	<p>We will contact the complainant to clarify the points of complaint and outcome sought (where these are already clear, we will confirm them in the acknowledgement)</p> <p>Complaint resolved or a response provided within 20 working days following a thorough investigation of the points raised</p>	
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1.5 Expected behaviours

1.5.1 We expect all staff to behave in a professional manner and treat complainants with courtesy, respect and dignity. We also ask those bringing a complaint to treat our staff with respect. We ask complainants to engage actively with the complaint handling process by:

- telling us their key issues of concern and providing any supporting information they want to give us (we understand that some people will require support to do this)
- working with us to agree the key points of complaint when an investigation is required
- responding to reasonable requests for information

1.5.3 We recognise that people may act in ways that are perceived as challenging or inappropriate in times of trouble or distress, and that factors such as language, disability or

neurodivergence can affect how a person expresses themselves or is perceived to express themselves. We will take this into account when responding to a complainant and will not dismiss a complaint solely because of their behaviour should it be perceived to be challenging or inappropriate. However, we also recognise that the actions of some complainants may result in unreasonable demands on time and resources or unacceptable behaviour towards our staff. We will, therefore, protect staff from unacceptable actions such as unreasonable persistence, threats or offensive behaviour from complainants.

1.5.4 We may also decide to restrict the complainant's access to Sheba Arts staff and, if necessary, the services provided by Sheba Arts. Should we decide to restrict access to a complainant, we will notify the complainant of the decision and outline the restrictions in place. We will also notify the complainant of their right to appeal the decision. Any decision to restrict access to a complainant will be made by the Artistic Director.

1.5.5 If we decide to restrict a complainant's contact, we will be careful to minimise any restrictions on the complainant's access to the complaints process. We will normally continue investigating a complaint even where contact restrictions are in place. In some cases, it may be possible to continue investigating the complaint without contact from the complainant.

1.6 Maintaining confidentiality and data protection

1.6.1 Confidentiality is important in complaints handling. This includes maintaining the complainant's confidentiality and confidentiality in relation to information about staff members or any third parties involved in the complaint.

1.6.2. This should not prevent us from being open and transparent, as far as possible, in how we handle complaints. This includes sharing as much information with the complainant (and, where appropriate, any affected staff members) as we can. When sharing information, we should be clear about why the information is being shared and our expectations on how the recipient will use the information.

1.6.3 We will always bear in mind legal requirements, for example data protection legislation, as well as our Data Protection Policy.

1.6.4 To ensure that we learn from complaints, the outcome of investigations will normally be shared with those members of staff responsible for taking forward any recommendations resulting from complaints (see 4.2.4. Learning from complaints).

1.6.5 Where a complaint has been raised against a staff member and has been upheld, we will advise the complainant that their complaint is upheld, but will not share specific details affecting staff members, particularly where disciplinary action is taken.

Part Two – When to use this Procedure

2.1. What is a complaint?

2.1.1 Sheba Arts defines a complaint as:

‘An expression of dissatisfaction by one or more service users and/or members of the public about Sheba Arts’ conduct, action or lack of action, or about the standard of service provided by or on behalf of Sheba Arts.’

2.1.2 A complaint may relate to the following but is not restricted to this list:

- failure or refusal to provide a service
- inadequate quality or standard of service
- dissatisfaction with one of our policies or its impact on the individual (although it is recognised that policy is set at the discretion of Sheba Arts)
- failure to follow the appropriate administrative process

- conduct, treatment by or attitude of a member of staff, volunteer or contractor

2.1.3 A complaint is **not**:

- a request for information or an explanation of policy or practice
- a response to an invitation to provide feedback through a formal mechanism such as a questionnaire
- a grievance by a staff member or a grievance relating to employment or staff recruitment
- a concern raised internally by a member of staff
- a concern about a child or an adult's safety
- an attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision

2.1.4 We will not treat these issues as complaints and will instead direct people to use the appropriate procedures. Some situations can involve a combination of issues, where some are complaints and others are not, and each situation should be assessed on a case-by-case basis.

2.1.5 If a matter is not a complaint, or not suitable to be handled under the CHP, we will explain this to the complainant, and tell them what (if any) action we will take, and why. See 2.6. What to do if the CHP does not apply.

2.2. Who can make a complaint?

2.2.1 Anyone who receives, requests, or is affected by our services can make a complaint.

2.2.2 We also accept complaints from the representative of a person who is dissatisfied with our service. See 2.7.1 Complaints by (or about) a third party.

2.3 Supporting the complainant

2.3.1 Everyone has the right to equal access to our complaints procedure. It is important to recognise the barriers that some people may face complaining. These may be physical, sensory, communication or language barriers, but can also include their anxieties and concerns. Complainants may need support to overcome these barriers.

2.4 No disadvantage

2.4.1 No complainant will be disadvantaged as a result of making a complaint.

2.5 How complaints may be made

2.5.1 Complaints may be made verbally or in writing, including face-to-face, by phone, letter or email.

2.5.2 Where a complaint is made verbally, we will make a record of the key points of complaint raised. Where it is clear that a complex or serious complaint is being raised that will likely be immediately considered at stage 2, it may be helpful to record the complaint with the complainant's input to ensure full details of the complaint are documented.

2.5.3 Complaint issues may also be raised on digital platforms (including social media).

2.5.4 Where a complaint issue is raised via a digital channel managed and controlled by Sheba Arts (for example an official Twitter or Facebook page), we will explain that we do not take complaints on social media, but we will tell the person how they can complain.

2.5.5 We must always be mindful of our data protection obligations when responding to issues online or in a public forum. See 1.6 Maintaining confidentiality and data protection.

2.6 Time limit for making complaints

2.6.1 The complainant must raise their complaint within six months of when they first knew of the problem, unless there are special circumstances for considering complaints beyond this time (for example, where a person was not able to complain due to serious illness or recent bereavement).

2.6.2 Where a complainant has received a stage 1 response, and wishes to escalate to stage 2, unless there are special circumstances they must request this either:

- within six months of when they first knew of the problem; or
- within two months of receiving their stage 1 response (if this is later).

2.6.3 We will apply these time limits with discretion, taking into account the seriousness of the issue, the availability of relevant records and staff involved, how long ago the events occurred, and the likelihood that an investigation will lead to a practical benefit for the complainant or useful learning for Sheba Arts.

2.6.4 Complaints of, or concerning, sexual misconduct will not be subject to any indicative time limit.

2.7 Particular circumstances

2.7.1 Complaints by (or about) a third party

2.7.1.1 Sometimes a complainant may be unable or reluctant to make a complaint on their own. We will accept complaints from third parties, which may include relatives, friends, advocates and advisers. Where a complaint is made on behalf of a complainant, we must ensure that the complainant has authorised the person to act on their behalf. It is good practice to ensure the

complainant understands that their personal information will be shared as part of the complaints handling process (particularly where this includes sensitive personal information). This can include complaints brought by parents on behalf of their child, if the child is considered to have capacity to make decisions for themselves.

2.7.1.2 The provision of a direct mandate from the complainant in writing will normally be sufficient for us to investigate a complaint. If we consider it is appropriate we can take verbal consent directly from the complainant to deal with a third party, and would normally follow up in writing to confirm this.

2.7.1.3 In certain circumstances, a person may raise a complaint involving another person's personal data, without receiving consent. The complaint should still be investigated where possible, but the investigation and response may be limited by considerations of confidentiality. The person who submitted the complaint should be made aware of these limitations and the effect this will have on the scope of our response.

2.7.1.4 See also 1.6 Maintaining confidentiality and data protection.

2.7.2 Serious, complex and high-risk complaints

2.7.2.1 We will take particular care to identify complaints that might be considered serious, complex or high-risk, as these may require particular action or raise critical issues that need the direct input of the Board of Trustees. Serious, complex and high-risk complaints should normally be handled immediately at stage 2 (see 3.5 Stage 2: Investigation).

2.7.2.2 Examples of potential serious, complex or high-risk complaints include those that may:

- involve risk to users/audiences due, for example, to misconduct
- involve a failure to protect vulnerable service users/members of the public
- involve serious administrative failure, for example major delays in payment of freelance workers
- involve multiple incidents involving three or more parties
- pose a serious operational risk to Sheba Arts
- present issues of a highly sensitive nature

2.8 Anonymous complaints

2.8.1 We value all complaints, including anonymous complaints, and will take action to consider them further wherever this is appropriate. Generally, we will consider anonymous complaints if there is enough information in the complaint to enable us to make further enquiries. In situations where complainants remain anonymous, investigation may be limited. Any decision not to pursue an anonymous complaint must be authorised by the Artistic Director.

2.8.2 If we pursue an anonymous complaint further, we will record it as an anonymous complaint together with any learning from the complaint and action taken.

2.8.3 If an anonymous complainant makes serious allegations, these should be dealt with in a timely manner under relevant procedures. This may not be the complaints procedure and may instead be covered by the Safeguarding Policy or Staff Disciplinary Policy and Procedure.

2.9 What if the person does not want to complain?

2.9.1 If someone has expressed dissatisfaction in line with our definition of a complaint but does not want to complain, we will explain that complaints offer us the opportunity to improve services where things have gone wrong. We will encourage them to submit their complaint and allow us to handle it through the CHP. This will ensure they are updated on the action taken and get a response to their complaint.

2.9.2 If the person decides they do not wish to complain, we are not required to progress the complaint under this procedure. However, we should record the complaint as anonymous feedback so that their experience and opinion can be taken into account as part of our evaluation processes.

2.9.3 Where the complaint is serious, or there is evidence of a problem with our services, we should also look into the matter to remedy this (and record any outcome).

2.10 Complaints about contracted services

2.10.1 Where we use a contractor to deliver a service on our behalf we recognise that we remain responsible and accountable for ensuring that the services provided meet Sheba Arts standards (including in relation to complaints). We will do so by ensuring the contractor is aware of and complies with this procedure.

2.11 Complaints about senior staff

2.11.1 Complaints about senior staff can be difficult to handle, as there may be a conflict of interest for the staff investigating the complaint. When serious complaints are raised against senior staff, it is particularly important that the investigation is conducted by an individual who is independent of the situation. In these circumstances the Board of Trustees will normally take over the responsibility for handling the complaint.

2.12 Complaints and staff disciplinary or whistleblowing processes

2.12.1 If the issues raised in a complaint overlap with issues raised under a staff disciplinary or whistleblowing process, we will still respond to the complaint.

2.12.2 Our response will be careful not to share confidential information (such as anything about the disciplinary procedures, or outcomes for individual staff members). It should focus on

whether Sheba Arts failed to meet our service standards and what we have done to improve things, in general terms.

2.12.3 Where there is overlap with issues raised under a staff disciplinary or whistleblowing process, those aspects of the complaint that do not overlap will continue to be handled under the complaints procedure. We will keep the complainant informed as to how their complaint will be handled.

2.13 Complaints and legal action

2.13.1 Where a complainant says that legal action is being actively pursued, this is not a complaint.

2.13.2 Where a complainant indicates that they are thinking about legal action, but have not yet commenced this, they should be informed that if they take such action, they should notify Sheba Arts and that the complaints process, in relation to the matters that will be considered through the legal process, will be closed. Any outstanding complaints must still be addressed through the CHP.

2.13.3 If an issue has been, or is being, considered by a court, we will not consider the same issue under the CHP.

2.14 What to do if the CHP does not apply

2.14.1 If the issue does not meet the definition of a complaint or if it is not appropriate to handle it under this procedure (for example, due to time limits), we will explain to the complainant why we have made this decision. We will also tell them what action (if any) we will take, for example, if another procedure applies.

Part Three – The Complaints Handling Process

3.1 The complaints handling process

3.1.1 Our Complaints Handling Procedure (CHP) aims to provide a quick, simple and streamlined process for responding to complaints early and locally. Where possible, we will resolve the complaint to the complainant's satisfaction. Where this is not possible, we will give the complainant a clear and reasoned response to their complaint.

3.2 What to do when you receive a complaint

3.2.1 Members of staff receiving a complaint should consider four key questions. This will help them to either respond to the complaint quickly (at stage 1) or determine whether the complaint is more suitable for stage 2:

What exactly is the complaint (or complaints)?

It is important to be clear exactly what the complaint is about. We may need to ask the complainant for more information and probe further to get a full understanding. We will need to decide whether the issue can be defined as a complaint and whether there are circumstances that may limit our ability to respond to the complaint (such as the time limit for making complaints, confidentiality, anonymity or the need for consent). We should also consider whether the complaint is serious or complex.

If the matter is not suitable for handling as a complaint, we will explain this to the complainant. See 2.1 for guidance on what is and is not a complaint.

What does the complainant want to achieve by complaining?

At the outset, we will clarify the outcome the complainant wants. Of course, the complainant may not be clear about this and we may need to probe further to find out what they expect, and whether they can be satisfied.

Can I achieve this, or explain why not?

If a staff member responding to a complaint can achieve the expected outcome, for example by providing an on-the-spot apology, they should do so. If they cannot achieve the expected outcome they should explain why not.

Complaints which can be resolved or responded to quickly should be managed at stage 1.

If I cannot respond, who can help?

If the complaint is simple and straightforward, but the staff member receiving the complaint cannot deal with it because, for example, they are unfamiliar with the issues or area of service involved, they should pass the complaint to someone who can respond quickly.

If it is not a simple and straightforward complaint that can realistically be closed within five working days (or ten, if an extension is appropriate), it should be handled immediately at stage 2.

If the complainant does not wish to engage at stage 1 and asks for their complaint to be investigated, it should be handled immediately at stage 2.

3.3 Resolving the complaint

3.3.1 A complaint is resolved when both Sheba Arts and the complainant agree what action (if any) will be taken to provide full and final resolution for the complainant, without making a decision about whether the complaint is upheld or not upheld.

3.3.2 A complaint may be resolved at any point in the complaint handling process, including during the investigation stage. It is particularly important to try to resolve complaints where there is an ongoing relationship with the complainant or where the complaint relates to an ongoing issue that may give rise to future complaints if the matter is not fully resolved.

3.3.3 Where a complaint is resolved, we do not normally need to continue looking into it or provide a response on all points of complaint. There must be a clear record of how the complaint was resolved, what action was agreed, and the complainant's agreement to this as a final outcome. In some cases it may still be appropriate to continue looking into the issue, for example where there is evidence of a wider problem or potential for useful learning. We will use our professional judgement in deciding whether it is appropriate to continue looking into a complaint that is resolved.

3.3.4 In all cases, we must record the complaint outcome and any action taken.

3.3.5 If the complainant and Sheba Arts are not able to agree a resolution, we must follow this CHP to provide a clear and reasoned response to each of the issues raised.

3.4 Stage 1: Frontline response

3.4.1 Frontline response aims to respond quickly (within five working days) to straightforward complaints that require little or no investigation.

3.4.2 Any member of staff may deal with complaints at this stage (including the staff member complained about, for example with an explanation or apology). The main principle is to respond to complaints at the earliest opportunity and as close to the point of service delivery as possible.

3.4.3 We may respond to the complaint by providing an on-the-spot apology where appropriate, or explaining why the issue occurred and, where possible, what will be done to stop this happening again. We may also explain that we may use the information given when we review service standards in the future.

3.4.4 Complaints which are not suitable for frontline response should be identified early and handled immediately at stage 2: investigation.

3.4.5 Notifying staff members involved

3.4.5.1 If the complaint is about the actions of a staff member, the complaint should be shared with them, where possible, before responding (although this should not prevent us responding to the complaint quickly).

3.4.6 Timelines

3.4.6.1 Frontline response must be completed within five working days, although in practice we would often expect to respond to the complaint much sooner. 'Day one' is always the date of receipt of the complaint (or the next working day if the complaint is received on a weekend or public holiday, or after 5PM).

3.4.7 Extension to the timeline

3.4.7.1 In exceptional circumstances, a short extension of time may be necessary due to unforeseen circumstances (such as the availability of a key staff member). We will tell the complainant about the reasons for the extension, and when they can expect a response. The maximum extension that can be granted is five working days (that is, no more than ten working days in total from the date of receipt).

3.4.7.2 If a complaint will take more than five working days to look into, it should be handled at stage 2 immediately. The only exception to this is where the complaint is simple and could normally be handled within five working days, but it is not possible to begin immediately (for example, due to the absence of a key staff member). In such cases, the complaint may still be handled at stage 1 if it is clear that it can be handled within the extended timeframe of up to ten working days.

3.4.7.3 If a complaint has not been closed within ten working days, it should be escalated to stage 2 for a final response.

3.4.7.4 Appendix 1 provides further information on timelines.

3.4.8 Closing the complaint at the frontline response stage

3.4.8.1 If the decision is conveyed face-to-face or via telephone, it is not a requirement to write to the complainant as well (although this can also be done). When conveying the decision it is required to:

- tell the complainant the outcome of the complaint (whether it is resolved, upheld, partially upheld or not upheld)
- explain the reasons for our decision (or the agreed action taken to resolve the complaint; and

- explain that the complainant can escalate the complaint to stage 2 if they remain dissatisfied and how they can do so

3.4.8.2 A full and accurate record of the decision given to the complainant must be kept. If it is not possible to contact the complainant by phone, or speak to them in person, a written response to the complaint must be provided.

3.4.8.4 The complaint should then be closed and records updated accordingly.

3.4.8.5 At the earliest opportunity after the closure of the complaint, the staff member handling the complaint should consider whether any learning has been identified. See 4.2.4 Learning from complaints.

3.5 Stage 2: Investigation

3.5.1 Not all complaints are suitable for frontline response and not all complaints will be satisfactorily addressed at that stage. Stage 2 is appropriate where:

- the complainant is dissatisfied with the frontline response or chooses to have their complaint investigated. Unless exceptional circumstances apply, the complainant must escalate the complaint within six months of when they first knew of the problem or within two months of the stage 1 response whichever is later (see 2.6 Time limit for making complaints)
- the complaint is not simple and straightforward (for example, where the complainant has raised a number of issues, or where information from several sources is needed before we can establish what happened and/or what should have happened)
- the complaint relates to serious, complex or high-risk issues (see 2.7.2 Serious, complex or high-risk complaints)

3.5.2 An investigation aims to explore the complaint in more depth and establish all the relevant facts. The aim is to resolve the complaint where possible, or to give the complainant a full, objective and proportionate response that represents our final position. Wherever possible, complaints should be investigated by someone not involved in the complaint (for example, a line manager).

3.5.3 Details of the complaint must be recorded. Where appropriate, this will be done as a continuation of a frontline response. If the investigation stage follows a frontline response, the officer responsible for the investigation should have access to all case notes and associated information.

3.5.5 Acknowledging the complaint

3.5.5.1 Complaints must be acknowledged within **three working days** of receipt at stage 2.

3.5.5.2 We must issue the acknowledgement in a format which is accessible to the complainant, taking into account their preferred method of contact.

3.5.5.3 Where the points of complaint and expected outcomes are clear from the complaint, we must set these out in the acknowledgement and ask the complainant to get in touch with us immediately if they disagree. See 3.5.6 Agreeing the points of complaint and outcome sought.

3.5.5.4 Where the points of complaint and expected outcomes are not clear, we must tell the complainant we will contact them to discuss this.

3.5.6 Agreeing the points of complaint and outcome sought

3.5.6.1 It is important to be clear from the start of stage 2 about the points of complaint to be investigated and what outcome the complainant is seeking. We may also need to manage the complainant's expectations about the scope of our investigation.

3.5.6.2 Where the points of complaint and outcome sought are clear, we can confirm our understanding of these with the complainant when acknowledging the complaint (see 3.5.5 Acknowledging the complaint).

3.5.6.3 Where the points of complaint and outcome sought are not clear, we must contact the complainant to confirm these. We will normally need to speak to the complainant (by phone or face-to-face) to do this effectively. In some cases it may be possible to clarify complaints in writing. The key point is that we need to be sure that both we and the complainant have a shared understanding of the complaint. When contacting the complainant we will be respectful of their stated preferred method of contact. We should keep a clear record of any discussion with the complainant.

3.5.6.4 In all cases, we must have a clear shared understanding of:

- What are the points of complaint to be investigated?

While the complaint may appear to be clear, agreeing the points of complaint at the outset ensures there is a shared understanding and avoids the complaint changing or confusion arising at a later stage. The points of complaint should be specific enough to direct the investigation, but broad enough to include any multiple and specific points of concern about the same issue.

- **Is there anything we can't consider under the CHP?**

We must explain if there are any points that are not suitable for handling under the CHP (see 2.14 What to do if the CHP does not apply).

- **What outcome does the complainant want to achieve?**

Asking what outcome the complainant is seeking helps direct the investigation and enables us to focus on resolving the complaint where possible.

- **Are the complainant's expectations realistic and achievable?**

It may be that the complainant expects more than we can provide, or has unrealistic expectations about the scope of the investigation. If so, we should make this clear to the complainant as soon as possible.

3.5.7 Notifying staff members involved

3.5.7.1 If the complaint is about the actions of a particular staff member/s, we will notify the staff member/s involved (including where the staff member is not named but can be identified from the complaint). We will:

- share the complaint information with the staff member/s (unless there are compelling reasons not to)
- advise them how the complaint will be handled, how they will be kept updated and how we will share the complaint response with them
- provide support and information on what to expect from the complaint process (this must not be by the person investigating or signing off the complaint response)

3.5.7.2 If it is likely that internal disciplinary processes may be involved, the requirements of that process should also be met. See also 2.12 Complaints and staff disciplinary or whistleblowing processes.

3.5.8 Investigating the complaint

3.5.8.1 It is important to plan the investigation before beginning. The staff member investigating the complaint should consider what information they have and what they need about:

- What happened? (this could include, for example, records of phone calls or meetings, work requests, recollections of staff members or internal emails)
- What should have happened? (this should include any relevant policies or procedures that apply); and
- Is there a difference between what happened and what should have happened, and is Sheba Arts responsible?

3.5.8.2 In some cases, information may not be readily available. We will balance the need for the information against the resources required to obtain it, taking into account the seriousness of the issue (for example, it may be appropriate to contact a former employee, if possible, where they hold key information about a serious complaint).

3.5.8.3 If we need to share information within or outside Sheba Arts, we will be mindful of our obligations under data protection legislation. See 1.6 Maintaining confidentiality and data protection.

3.5.9 Meeting with the complainant during the investigation

3.5.9.1 To effectively investigate the complaint, it may be necessary to arrange a meeting with the complainant. Where a meeting takes place, we will always be mindful of the requirement to investigate complaints (including holding any meetings) within **20 working days** wherever possible. Where there are difficulties arranging a meeting, this may provide grounds for extending the time frame. Complainants may not wish to, or be able to attend, face-to-face meetings – in which case adjustments may be made (e.g. telephone/zoom meetings).

3.5.9.2 As a matter of good practice, a written record of the meeting should be completed and provided to the complainant. We will notify the person making the complaint of the timescale within which we expect to provide the record of the meeting.

3.5.10 Timelines

3.5.10.1 The following deadlines are appropriate to cases at the investigation stage (counting day one as the day of receipt, or the next working day if the complaint was received on a weekend or public holiday, or after 5PM).

- Complaints must be acknowledged within **three working days**
- A full response to the complaint should be provided as soon as possible but not later than **20 working days** from the time the complaint was received for investigation.

3.5.11 Extension to the timeline

3.5.11.1 Not all investigations will be able to meet this deadline. For example, some complaints are so complex that they require careful consideration and detailed investigation beyond the 20 working day timeline. It is important to be realistic and clear with the complainant about timeframes, and to advise them early if we think it will not be possible to meet the 20 day timeframe, and why. We should bear in mind that extended delays may have a detrimental effect on the complainant.

3.5.11.2 Any extension must be approved by an appropriate manager. We will keep the complainant and any member/s of staff who complained about the reason for the delay and give them a revised timescale for completion. We will contact the complainant and any member/s of staff concerned at least once every 20 working days to update them on the progress of the investigation.

3.5.11.3 Appendix 1 provides further information on timelines.

3.5.12 Closing the complaint at the investigation stage

3.5.12.1 The response to the complaint should be in writing (or by the complainant's preferred method of contact) and must be signed off by the Artistic Director or Chair of the Board of Trustees.

3.5.12.2. We will tell the complainant the outcome of the complaint (whether it is resolved, upheld, partially upheld or not upheld). The quality of the complaint response is important and in terms of good practice should:

- be clear and easy to understand, written in a way that is person-centred and non confrontational
- avoid technical terms, but where these must be used, an explanation of the term should be provided
- address all the issues raised and demonstrate that each element has been fully and fairly investigated
- include an apology where things have gone wrong
- highlight any area of disagreement and explain why no further action can be taken
- indicate that a named member of staff is available to clarify any aspect of the letter; and
- indicate that if they are not satisfied with the outcome of the local process, they may seek a review by the Board of Trustees

3.5.12.3 Where a complaint has been resolved, the response does not need to provide a decision on all points of complaint but should instead confirm the resolution agreed.

3.5.12.4 If the complaint is about the actions of a particular staff member/s, we will share with them any part of the complaint response which relates to them.

3.5.12.5 We will record the decision and details of how it was communicated to the complainant.

3.5.12.6 At the earliest opportunity after the closure of the complaint, the staff member handling the complaint should consider whether any learning has been identified. See 4.2.4 Learning from complaints

3.5.13 Review by the Board

3.5.13.1 Once the investigation stage has been completed, the complainant has the right to ask for a review by the Board if they remain dissatisfied. We must make clear to the complainant:

- the request for review by the Board must be within **10 working days**
- how to contact the Board

3.5.13.2 The Board must conduct the review within **20 working days** of the complainant asking for review.

3.5.13.2. The Board considers complaints from people who remain dissatisfied at the conclusion of the complaints procedure. The Board of Trustees will review the complaint and assess whether there is evidence of service failure or maladministration not identified in the original stage 2 response.

3.5.13.3 The Board in its review may uphold the response to the complaint or decide that a different response is warranted. The Board's response to the complaint should be provided as soon as possible but not later than **five working days** from the date the review took place.

3.5.14 Post-closure contact

3.5.14.1 If a complainant contacts us for clarification when they have received our final response, we may have further discussion with the complainant to clarify our response and answer their questions. However, if the complainant is dissatisfied with our response or does not accept our findings, we will explain that we have already given them our final response on the matter.

Part Four - Governance

4.1 Roles and responsibilities

4.1.1 All staff will be made aware of:

- the Complaints Handling Procedure (CHP)
- how to handle and record complaints at the frontline response stage
- who they can refer a complaint to, in case they are not able to handle the matter

- the need to try and resolve complaints early and as close to the point of service delivery as possible
- their role in the resolution of any complaints they may be called upon to assist with

4.1.2 Training on this procedure will be part of the induction process for all new staff.

4.1.3 Senior management will ensure that:

- The Sheba Arts final position on a complaint investigation is signed off by an appropriate manager or Board member in order to provide assurance that this is the definitive response of Sheba Arts and that the complainant's concerns have been taken seriously
- they maintains overall responsibility and accountability for the management and governance of complaints handling (including complaints about contracted services)
- have an active role in, and understanding of, the CHP (although is not necessarily involved in the decision-making process of complaint handling)
- mechanisms are in place to ensure a consistent approach to the way complaints handling information is managed, monitored, reviewed and reported
- complaints information is used to improve services

4.1.4 The roles and responsibilities of key staff are outlined below:

4.1.4.1 The Artistic Director provides leadership and direction in ways that guide and enable us to perform effectively across all services. This includes ensuring that there is an effective Complaints Handling Procedure, with a robust investigation process that demonstrates how we learn from the complaints we receive.

The Artistic Director is also responsible for ensuring that there are governance and accountability arrangements in place in relation to complaints about contractors.

4.1.4.2 Complaints investigators are responsible and accountable for the management of the investigation and in coordinating all aspects of the response to the complainant. This may include preparing a comprehensive written report.

4.1.4.3 All staff must be aware of the CHP and how to handle and record complaints at the frontline resolution stage. They should also be aware of who to refer a complaint to, in case they are not able to personally handle the matter. We encourage all staff to try to resolve complaints as close to the point of service delivery as possible.

4.2 Recording, reporting, learning from and publicising complaints

4.2.1 Complaints provide valuable feedback. One of the aims of the CHP is to identify opportunities to improve services across Sheba Arts. By recording and analysing complaints data, we can identify and address the causes of complaints and, where appropriate, identify training opportunities and introduce service improvements.

4.2.2. We also have arrangements in place to ensure complaints about contractors are recorded and reported on in line with this CHP.

4.2.3 Recording complaints

4.2.3.1 It is important to record suitable data to enable us to fully investigate and respond to the complaint, as well as using our complaint information to track themes and trends. As a minimum, we should record:

- the complainant's name and contact details
- the date the complaint was received
- the nature of the complaint
- the service the complaint refers to
- staff member responsible for handling the complaint
- action taken and outcome at frontline response stage
- date the complaint was closed at the frontline response stage
- date the investigation stage was initiated (if applicable)
- action taken and outcome at investigation stage (if applicable)
- date the complaint was closed at the investigation stage (if applicable)
- date the Board was asked to review the complaint (if applicable)
- outcome of the review (if applicable)
- the underlying cause of the complaint and any remedial action taken

4.2.3.2 If the complainant does not want to provide any of this information, we will reassure them that it will be managed appropriately, and record what we can.

4.2.3.3 Individual complaint files will be stored in line with our document retention policy.

4.2.4 Learning from complaints

4.2.4.1 Clear systems should be in place to act on issues identified in complaints. As a minimum, these systems should:

- seek to identify the root cause of complaints
- take action to reduce the risk of recurrence

- systematically review complaints performance reports to improve service delivery

4.2.4.2 Learning may be identified from individual complaints (regardless of whether the complaint is upheld or not) and from analysis of complaints data.

4.2.4.3 Where we have identified the need for service improvement in response to an individual complaint, we will take the following action:

- the action needed to improve services must be authorised by an appropriate manager
- a staff member (or team) will be designated the 'owner' of the issue, with responsibility for ensuring the action is taken
- where appropriate, performance in the service area should be monitored to ensure that the issue has been resolved
- any learning points should be shared with relevant staff

4.2.5 Reporting of complaints

4.2.5.1 We have a process for the internal reporting of complaints information, including analysis of complaints trends. Regularly reporting the analysis of complaints information helps to inform management of where services need to improve.

4.2.5.2 Complaints information will be reported biannually to the Board, including analysis of the trends and outcomes of complaints.

APPENDIX 1

TIMELINES

General

References to timelines throughout the CHP relate to working days. We do not count non-working days, for example weekends or public holidays.

Timelines at frontline response (stage 1)

We will aim to achieve a frontline response within five working days. The date of receipt is day one, and the response should be provided (or the complaint escalated) on day five, at the latest.

If we have extended the timeline at the frontline response stage in line with the CHP, the response should be provided (or the complaint escalated) on day ten, at the latest.

Transferring cases from frontline response to investigation

If the complainant wants to escalate the complaint to the investigation stage, the case must be passed for investigation without delay.

Timelines at investigation (stage 2)

For complaints at the investigation stage, day one is:

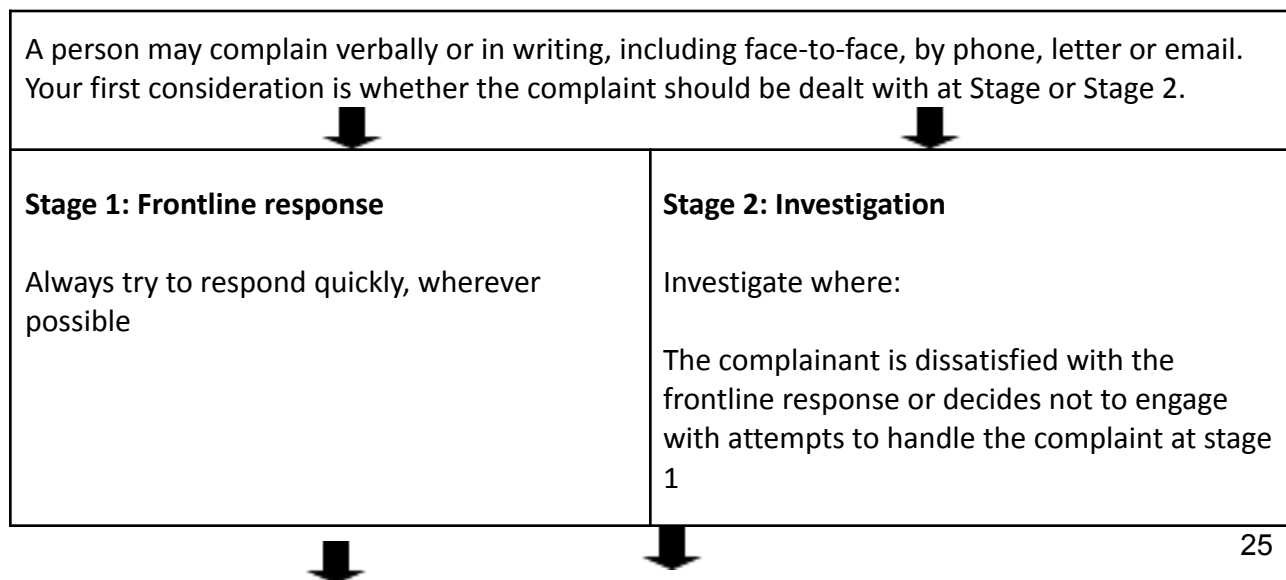
- the day the case is transferred from the frontline stage to the investigation stage
- the day the complainant asks for an investigation or expresses dissatisfaction after a decision at the frontline response stage; or
- the date we receive the complaint, if it is handled immediately at stage 2.

We must acknowledge the complaint within three working days of receipt at stage 2 i.e. by day three.

We should respond in full to the complaint by day 20, at the latest. We have 20 working days to investigate the complaint, regardless of any time taken to consider it at the frontline response stage.

Exceptionally, we may need longer than the 20 working day limit for a full response. If so, we will explain the reasons to the complainant, and update them (and any staff involved) at least every 20 working days.

APPENDIX 2: COMPLAINT HANDLING PROCESS – FLOWCHART



	It is clear that the complaint requires investigation from the outset
Record the complaint, the contact details of the complainant, and notify any staff complained about	Record the complaint, the contact details of the complainant, and notify any staff complained about Acknowledge the complaint within 3 working days ↓
	Contact the complainant to agree: <ul style="list-style-type: none"> • Points of complaint • Outcome sought • Manage expectations (where required) ↓ <i>these(can be confirmed in the acknowledgement where the complaint is straightforward)</i>
Respond to the complaint within 5 working days unless there are exceptional circumstances ↓	Respond to the complaint as soon as possible, but within 20 working days unless there is a clear reason for extending the timescale ↓
Is the complainant satisfied? Always inform the complainant on the procedure for escalating to stage 2	Communicate the decision, normally in writing ↓
(Yes) Record outcome and learning and close complaint. (No) Refer complaint to Stage 2	Record outcome and learning, and close complaint
Follow up on agreed actions flowing from the complaint Share any learning points	