

# COMPLAINTS PROCEDURE

## **1. Introduction**

IOH take pride in providing professional occupational health & safety services, which meets the customers' needs. However, there may be occasions when the service we provide does not meet the Clients expectations, in which case we want to know. If you have a complaint regarding any aspect of our services or staff please follow the steps set out in Section 3 below. This procedure and guide shall be followed to manage any complaint raised by Clients or employees of Clients. Any issues raised by employees of IOH are excluded from this procedure and shall be managed through the IOH Grievance Policy as set out in the Employee Handbook.

The definition of a complaint is an expression of dissatisfaction which requires a response. Where an issue is raised directly with the IOH employee and that matter is settled amicably between both parties the issue need not be recorded as required by this procedure.

## **2. Purpose**

The IOH Complaints Procedure is intended to be:-

1. Accessible
2. Transparent and open to scrutiny
3. Consistent
4. Fair to complainant and staff
5. Timely
6. Inquisitorial – a desire to find out the facts
7. Used to stimulate continuous improvement

The Procedure shall also support the individual complained about, by making them aware of the complaint at as early a stage as possible and by appointing a person to keep the person concerned, advised and informed about what is happening at all stages.

## **3. Complaints Procedure**

It is not possible to predict all circumstances where a complaint may arise therefore the Procedure and Guide is intended to allow the IOH Management Team to address each complaint on its merits. The following steps are a guide to the process that will be followed at the discretion of the appointed person to ensure that complaints are addressed in an objective and consistent manner.

Complaints will be investigated if they have been made within 6 months of the date of the event, which has given cause for complaint OR within 6 months of the date of discovering the reason for the complaint. Discretion may be applied in extending these time limits where, in the opinion of the Operations Director, it would have been unreasonable in the circumstances of a particular case for the Complaint to have been made earlier AND where it is still possible to investigate the facts of the case.

Where meetings are held to discuss a Complaint, the Complainant and the person complained about shall be entitled to have representation or support.

**Step Guide – the following steps are for guidance only and may be adjusted to suit the individual case.**

1. If you have a complaint regarding any member of the IOH staff or the service provided you should raise this with the person concerned or their immediate line manager and discuss the complaint in a constructive manner.
2. Where a complaint regarding IOH has been raised by the Client's employee directly with their employer the Client shall be requested to ask the complainant in the first instance to discuss their complaint with the person concerned or their immediate line manager as in Step 1.
3. The Client will be requested to provide details to the IOH Operations Director.
4. IOH respect the right of the Client to instigate any complaint to their own Complaints Procedure, which shall be fully supported by IOH. This shall not preclude IOH carrying out our own investigation.
5. Where a complaint has been referred by the Line Manager or the Client to an IOH employee for local resolution the Line Manager or Client will be requested to inform the Operations Director in writing of the outcome once the matter is settled to the satisfaction of all concerned.
6. If that fails to achieve a satisfactory solution, the complainant shall be advised to put their complaint in writing addressed CONFIDENTIAL to Barry Tupper – IOH Operations Director and enclose a copy for Dr John Wollaston – Chairman and post to IOH, Unit 5 The Staithes, The Watermark, Metro Riverside, Gateshead, Tyne & Wear, NE11 9SN by "special delivery".
7. IOH shall acknowledge the complaint within two working days of receipt and appoint an appropriately qualified member(s) of staff to carry out the necessary investigation and to advise the IOH employee. The person(s) appointed shall have the necessary professional skills to properly investigate the complaint.
8. Where necessary, the Appointed Person shall obtain evidence to support the complaint and where necessary written consent from the complainant for access to confidential information including medical records relevant to any investigation.
9. Where necessary, the Appointed Person may invite the complainant to attend a meeting to discuss the complaint.
10. IOH shall endeavour to provide the complainant, the person complained about and the IOH Client with fortnightly progress reports and close all complaints satisfactorily within six weeks. However, circumstances may dictate that this is not possible in all cases. Where an investigation and resolution exceeds six weeks all parties shall be contacted and a revised timescale agreed.
11. If the complainant is not satisfied at the end of this process they may be invited at the discretion of the Chairman to a formal review of their complaint, which will be heard by a senior member of staff appointed by Dr J F Wollaston, IOH Chairman.
12. If the complainant is still not satisfied they shall be offered the opportunity to refer the issue to an independent arbiter e.g. ACAS.

- 13.** IOH employees shall immediately inform the IOH Chairman and/or the Operations Director if they are made aware that a complaint concerning them has been registered with their Professional Body.
- 14.** The IOH Chairman shall decide how such cases are managed.
- 15.** The Complainant and the person complained about shall be assured that confidentiality shall be maintained throughout the process.
- 16.** All complaints shall be managed through the IOH Quality System in compliance with QMS012 and recorded as a non-conformance on Form QMS012 Appendix A and is therefore open and transparent and liable to scrutiny and audit. Details recorded shall be limited to basic facts and agreed improvements and names and medical data identifiable to the persons concerned shall not be recorded.
- 17.** Agreed improvements shall be recorded on Form QMS012 Appendix A and adopted as appropriate.
- 18.** The IOH Operations Director shall ensure that IOH Clients have access to the current version of this procedure.