

# Delegated Decision Report

Decision below £250k

<b>Subject:</b>	Complaints Policies: Annual Refresh
<b>Decision maker: Senior Officer</b>	Fiona Greenway, Executive Director for Resources
<b>Decision maker: Cabinet Member</b>	Cllr Arooj Shah, Leader of Oldham Council and Cabinet Member for Growth
<b>Decision date:</b>	4 December 2025
<b>Report author:</b>	Fran Lautman, Assistant Director of Customer Experience Leo Morgan, Head of Customer Operations
<b>Ward (s):</b>	All

## Reason for decision

The Council is required to maintain clear, accessible, and compliant policies for handling complaints in line with statutory frameworks, including the Local Authority Social Services and NHS Complaints Regulations 2009, the Children Act 1989 Representations Procedure (England) Regulations 2006, and the Housing Ombudsman Complaint Handling Code (2022).

Approving the refreshed Complaints Policy, Unreasonable Behaviour Policy, Housing Complaints Policy, and Children's Residential Homes Complaints Policy will ensure:

- Consistency with current legislation, Ombudsman Codes, and Council governance standards.
- Clear guidance for residents, staff, and elected members on how complaints are managed across all directorates.
- Strengthened transparency, accountability, and learning from feedback in line with the Council's resident focus priority.
- A single, up-to-date policy suite published to meet statutory and regulatory expectations.

Without this approval, there is a risk that existing policies may fall out of alignment with statutory guidance and best practice, potentially impacting compliance, resident confidence, and audit assurance.

## Recommendation

To approve the refreshed policies, ensuring alignment with statutory requirements, Ombudsman Codes, and the Council's resident focus priority.

## **1. Background**

- 1.1 The Council's complaints and feedback policies provide a clear framework for how residents, service users, and stakeholders can raise concerns, make representations, and share feedback about the services they receive.
- 1.2 The refreshed policies covered by this report include the Complaints Policy (Adults, Children's, Corporate), Unreasonable Behaviour Policy, Housing Complaints Policy, and Children's Residential Homes Complaints Policy. Together, they set out a consistent, accessible, and legally compliant approach to complaint handling across all Council directorates.
- 1.3 The Complaints Policy represents the most substantial change within this refresh, merging three previous policies (Adult Social Care, Children's Social Care, and Corporate) into a single, unified policy. This ensures a clear and consistent process for residents and staff, simplifies governance, and strengthens accountability and learning across the organisation.
- 1.4 The unified approach aligns all services with statutory requirements and the Local Government and Social Care Ombudsman's Principles of Good Administration, while supporting delivery of the Council's Resident Focus priorities
- 1.5 These updates ensure continued compliance with key legislation and statutory guidance, including:
- The Local Authority Social Services and NHS Complaints Regulations 2009 (Adults)
  - The Children Act 1989 Representations Procedure (England) Regulations 2006
  - The Housing Ombudsman Complaint Handling Code (2022)
  - The Local Government Act 1974 and the LGSCO's Principles of Good Administration
- 1.6 The policies aim to:
- Promote early and fair resolution of complaints wherever possible;
  - Ensure consistent standards of communication and timeliness;
  - Set out clear escalation routes for residents and service users;
  - Define expectations for staff conduct and complaint ownership and
  - Strengthen learning, transparency, and accountability across services.
- 1.7 Each policy has been reviewed to ensure clarity of language, alignment with national guidance, and consistency with the Council's resident focus priority and Customer Experience principles.

1.8 The policies are included in full within this report for transparency and approval purposes. Once approved, they will be published as standalone documents on the Council's website and used for statutory reporting.

## **2. Current Position**

2.1 A review has taken place as part of the annual refresh to ensure our customer feedback and complaints policies are in line with legislation and guidance.

2.2 Each of the Complaints Policies in this Delegated Decision Report are reviewed on an annual basis to ensure they are fit for purpose, align with legislation and reflect learning from the previous twelve months of Complaints reporting. They will be reviewed on a more frequent basis if there is sufficient reason to do, such as legislation changes. Delegated Authority is therefore given to the Monitoring Officer and Assistant Director of Customer Experience to make such changes to Complaints policies if required to ensure compliance.

2.3 The Reasonable Behaviour policy will be looked at together with other related policies supported by Community Safety, Health and Safety, Legal services and HR to ensure absolute clarity for our workforce and clear external messaging around appropriate behaviour, escalation and incident reporting. This will be conducted in Quarter 4 2025-2026.

## **3. Option(s) to be considered**

3.1 Option 1: Agree the updated policies (preferred)

3.2 Option 2: Do nothing and continue with the previous policies.

## **4. Preferred Option**

4.1 Option 1 is the preferred option; this is to ensure compliance with relevant legislation. If the Council's policies are not compliant, they may be criticised by the Ombudsman and regulators.

## **5. Consultation**

5.1 Not applicable; statutory requirement.

## 6. Implications

Financial	<p>Approval of the updated Complaints Policy, which consolidates three existing policies into a single, unified framework for greater consistency and simplicity alongside a refresh of existing policies will not result in any direct financial impact. The resources required for implementation and administration will be managed within existing resources.</p> <p style="text-align: right;">(Matthew Kearns, Finance Manager)</p>
Legal	<p>It is very important that the Council is transparent and accurate in all its policies. Should the council have policies that are not in line with legislation or regulatory bodies, the outcomes can have serious detriment. It not only creates a reputational risk but could lead to a negative judicial finding and the inevitable cost implications as policies are regularly referred to in Court proceedings and receive Judicial scrutiny. The preferred option is supported.</p> <p style="text-align: right;">(Alex Bougatef, Director of Legal)</p>
HR	<p>There is no structural or contractual workforce impact as part of this proposal. However, staff must be informed and trained on the updated processes, escalation routes, and professional standards.</p> <p>The Unreasonable Behaviour Policy needs to link with our existing Accident, Incident and Violence Policy/reporting procedure, with Community Cohesion and HR being linked into any wider comms or training.</p> <p>It is positive that engagement in complaints monitoring and learning will involve staff feedback to promote continuous improvement across services.</p> <p style="text-align: right;">(Eleanor Devlin, Assistant Director of HR and OD)</p>
Equality impact including implications for Children and Young People	<p>An Equality Impact Assessment is not required for this decision, as the report is only refreshing the current complaints policies. Currently, the Council will have due regard to the Equality Act 2010 and consider individual circumstances, including medical conditions or vulnerabilities such as mental health needs or learning disabilities. This report makes clear that support will be offered to help residents overcome barriers to making a complaint, and staff are expected to listen actively and respond empathetically, particularly where vulnerabilities are present.</p> <p style="text-align: right;">(James Mulvaney, Policy Manager)</p>

Has the relevant Legal Officer confirmed that the recommendations within this report are lawful and comply with the Council's Constitution?	Yes
Has the relevant Finance Officer confirmed that any expenditure referred to within this report is consistent with the Council's budget?	Yes
Are any of the recommendations within this report contrary to the Policy Framework of the Council?	No

Report author sign-off	Leo Morgan
Role	Head of Customer Operations
Date of sign-off	12.11.2025

Report author sign-off	 Fran Lautman
Role	Assistant Director of Customer Experience
Date of sign-off	24 November 2025

<b>Approval</b>	
Officer approval sign-off	 Fiona Greenway
Role	Executive Director of Resources
Date of sign-off	24/11/25

<b>Approval</b>
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Member(s) approval sign-off	 Cllr Arooj Shah
Role	Leader of the Council and Cabinet Member for Growth
Date of sign-off	27/11/2025

**7. Appendices**

**Appendix 1:** Complaints Policy (Adults, Children’s and Corporate)

**Appendix 2:** Unreasonable Behaviour Policy

**Appendix 3:** Housing Complaints Policy

**Appendix 4:** Children’s Residential Homes Complaints Policy

**Appendix 1: Complaints Policy (Adults, Children's and Corporate)**



# **Complaints Policy**

**Date: 4 December 2025**

**Review date: 4 December 2026**

## **1. Introduction**

- 1.1 Oldham Council recognises the importance of complaints and welcomes them as a valuable form of feedback about our services and those delivered by third party providers on our behalf. Working with a resident focus is a key priority and we want our residents to experience good experiences and good services. We welcome hearing our residents' comments, compliments and complaints to better understand how residents view our services and to use these valuable opportunities to learn and improve.
- 1.2 In setting out this policy, we recognise residents' rights to be heard, understood and respected. We will ensure that residents are treated fairly, openly, honestly, consistently and appropriately in accordance with our values and behaviours.
- 1.3 This policy does not apply to housing services, children's residential homes, or complaints involving unreasonable behaviour, all of which are covered by separate policies.
- 1.4 When handling complaints we will work with a resident focused approach by:
  - Taking a collaborative and co-operative approach, meaning staff will work with colleagues from other teams and departments to resolve the issues at hand.
  - Taking collective responsibility for any shortfalls identified through complaints and using learning to drive improvements. Acting within the professional standards for engaging with complaints as set by any relevant professional body.

## **2. Purpose of the Policy**

- 2.1 The aim of this policy is to provide a fair and consistent approach to handling and resolving complaints from residents.
- 2.2 It provides a unified framework for managing complaints across Corporate Services, Adult Social Care (ASC), and Children's Social Care (CSC), aligning with the Local Government and Social Care Ombudsman (LGSCO) Complaint Handling Code and preserving statutory processes where applicable.
- 2.3 Emphasis will be placed on resolving complaints promptly at a service level. We will ensure that staff are equipped, trained and supported to handle complaints efficiently and effectively, and that lessons learned are used to inform service improvements.
- 2.4 In line with the LGSCO's Principles of Good Administrative Practice, the Council is committed to making lawful, rights-based decisions informed by relevant evidence. We will apply policy and guidance consistently, follow good practice, and ensure complaints are handled in a timely and proportionate manner.
- 2.5 Complaints about housing services provided directly by the Council are covered by a separate Housing Complaints Policy, which follows the Housing Ombudsman's Complaint

Handling Code. This includes complaints from tenants of properties managed under PFI contracts with Housing 21 and Inspiral Oldham.

- 2.6 Complaints relating to children's residential services are covered by a separate Children's Residential Complaints Policy, which links into Stage 2 of the statutory Children's Social Care complaints procedure where applicable.
- 2.7 The Council also maintains an Unreasonable Behaviour Policy, which sets out how unacceptable or disruptive conduct is managed while ensuring fair access to the complaints process.

### **3. What is a Complaint?**

- 3.1 We use the following complaint definition provided by the LGSCO "*an expression of dissatisfaction, however made, about decisions, the standard of service, actions or lack of action by the organisation, its own staff, or those acting on its behalf, affecting an individual or group of individuals*".
- 3.2 Where an issue is being reported for the first time, it will usually be treated as a service request. This is because the majority of such contacts can be handled quickly and effectively to obtain the best outcome for the resident. This approach is in line with LGSCO guidance. Where a matter is treated as a service request, the resident will be informed and advised of the next steps.
- 3.3 If a resident is dissatisfied with how a service request has been handled, they will be given the opportunity to raise a formal complaint.

### **4. General Exclusions**

- 4.1 Each complaint will be considered on its individual merits. However, the following matters are generally excluded from this complaints procedure:
  - Service requests – Defined by the LGSCO as "*a request that the organisation provides or improves a service, fixes a problem or reconsiders a decision*". If the resident remains dissatisfied with the response, they may raise a complaint.
  - Requests for information Managed by the Information Management Team under the Freedom of Information Act 2000, the Data Protection Act 2018, and relevant Council policies. Where issues overlap, a coordinated response may be provided.
  - General enquiries from MPs, Councillors, or Citizens Advice - While general enquiries from these parties are excluded, complaints submitted on behalf of residents will be considered.
  - Complaints about organisations not commissioned or supported by Oldham Council.
  - Complaints relating to schools or education providers.
  - Matters more appropriately addressed by an insurer.
  - Issues under investigation by other bodies, such as the Police.
  - Matters subject to a legal right of appeal or review.
  - Complaints that have already been investigated and responded to.

- Matters ruled on or under consideration by a Court, tribunal, appeal body, or the LGSCO.
- Complaints previously withdrawn by the resident.
- Complaints submitted on behalf of another individual without sufficient consent - these will not be progressed under this policy, though the Council may carry out an internal review if lawful under UK GDPR.
- Employee grievances.
- Matters covered by the Council's disciplinary procedures.
- Complaints about the conduct of Elected Members – managed under the Council's standards procedure.
- Serious concerns about an individual's wellbeing - these will be considered under the relevant safeguarding procedures.
- Complaints with unclear, frivolous, or vexatious grounds - managed under the Unreasonable Behaviour Policy.

4.2 In line with LGSCO guidance, complaints should be made within 12 months of the issue arising, or the resident becoming aware of the matter. Where exceptional reasons are provided, the Council may exercise discretion to consider older complaints, recognising the challenges of investigating historical matters.

4.3 For recurring issues, investigations will focus on incidents within the past 12 months. Earlier events may be considered for context.

4.4 If a complaint is not accepted under this policy, the resident will receive a written explanation outlining the reasons.

4.5 Residents may challenge the Council's decision to apply an exclusion by referring their complaint to the LGSCO. Contact details are provided in *paragraph 13.3*.

## **5. Anonymous Complaints**

5.1 If a resident does not provide a name, address, or email, we will be unable to respond. However, anonymous complaints will be referred to the relevant service for internal review or investigation.

## **6. Equalities and Diversity and Reasonable Adjustments**

6.1 In applying this policy, the Council will have due regard to the Equality Act 2010 and consider individual circumstances, including medical conditions or vulnerabilities such as mental health needs or learning disabilities. Support will be offered to help residents overcome barriers to making a complaint, and staff are expected to listen actively and respond empathetically, particularly where vulnerabilities are present.

Reasonable adjustments will be agreed on a case-by-case basis in consultation with the resident. In accordance with Section 20 of the Equality Act, these may include large print, translation, interpreter services, advocacy, or alternative formats. Adjustments can be requested via the online form, by phone, or by contacting the Complaints Team directly.

## **7. How Can a Complaint Be Made**

7.1 Oldham Council is committed to making it simple for residents to raise concerns. We offer multiple accessible routes for submitting complaints to ensure residents can choose the method that best suits their needs.

7.2 Many issues can be resolved by contacting the relevant service directly and submitting a service request. If unresolved, residents are encouraged to submit a formal complaint using the online form to support consistent and effective complaint management:

[https://www.oldham.gov.uk/info/200143/complaints\\_and\\_feedback/630/complaints\\_or\\_feedback\\_about\\_the\\_council](https://www.oldham.gov.uk/info/200143/complaints_and_feedback/630/complaints_or_feedback_about_the_council).

7.3 Complaints can also be submitted by post to:

Customer Feedback  
Spindles Shopping Centre  
West Street  
Oldham  
OL1 1LF.

7.4 Alternatively, residents can raise a complaint by calling the Council's Customer Service Centre on 0161 770 8122.

7.5 Where a resident raises a concern with any member of staff, it will be referred to Customer Feedback to ensure it is properly recorded and actioned.

7.6 Residents are encouraged to provide any relevant supporting documents or evidence when submitting a complaint to help ensure a thorough and timely investigation.

7.7 Complaints received via social media platforms (e.g. Twitter or Facebook) will be reviewed by the Communications Team and forwarded to the appropriate service. If identified as a complaint, the matter will be referred to Customer Feedback and managed offline in accordance with this policy.

7.8 Persistent, abusive, or unreasonable contact may be managed under the Council's Unreasonable Behaviour Policy.

## **8. What a Resident Can Expect**

8.1 Residents can expect a consistently high standard of service when raising a complaint. Complaints will be handled promptly, respectfully, and efficiently.

8.2 Where a complaint involves multiple issues, a single response will normally be provided. If the issues fall under different complaint legislation, separate responses may be issued where appropriate.

8.3 Residents may be asked to provide supporting evidence or additional information to enable a thorough investigation. A timeframe will be given, and if essential details are not received, the complaint may be placed on hold until sufficient information is available.

- 8.4 Should a resident decline to provide information that is necessary to complete the investigation, the Council may consider this as limited engagement with the complaints process.
- 8.5 A full record of the complaint will be maintained, including the original submission, all correspondence, and any supporting documentation.

## **9. Consideration of Complexity**

- 9.1 While we aim to respond to complaints as quickly as possible, thorough investigation is a priority. Some complaints may take longer due to complexity, which may become apparent during allocation or as new information emerges. If timeframes cannot be met, we will keep the resident informed and provide regular updates.
- 9.2 A complaint may be considered complex if it:
- Involves multiple Council services or requires input from external organisations (e.g. schools, healthcare providers, or commissioned services)
  - Raises varied or evolving concerns requiring clarification or extended review
  - Is linked to another open complaint
  - Relates to staff who have left the Council, or key staff who are temporarily unavailable
  - Concerns events over six months old
  - Involves sensitive safeguarding, legal, or regulatory matters
  - Has previously been investigated and is being revisited due to new information
- 9.3 These examples support fair and consistent decision-making. Each complaint is considered on its own merits, with factors such as vulnerability, risk, and public impact taken into account. We remain committed to a fair and proportionate process, in line with LGSCO guidance.

## **10. Who Can Make a Complaint**

- 10.1 Anyone receiving services directly from the Council, or from third parties acting on its behalf, may submit a complaint personally or through a representative. This includes complaints raised via elected officials such as MPs or Councillors.
- 10.2 Where a representative submits a complaint, the Council may request a completed form of authority to confirm they have permission to act on the resident's behalf. This ensures compliance with data protection legislation and safeguards the resident's wishes.
- 10.3 For complaints involving commissioned services or third-party providers, please refer to *Section 14* for guidance on joint working and investigation responsibilities.

## **11. Corporate Complaint Resolution Process**

### **Corporate Complaint Stage 1**

- 11.1 The Council operates a two-stage corporate complaints procedure. Formal complaints are initially logged at Stage 1.
- 11.2 Complaints will be acknowledged, defined, and logged within five working days of receipt.
- 11.3 As part of the acknowledgement, we will outline our understanding of the complaint and the outcomes the resident wishes to achieve where sufficient information has been provided. If further detail is needed, the resident will be invited to clarify their concerns.
- 11.4 Once full details are obtained, the complaint will be allocated to the relevant service manager for investigation.
- 11.5 Wherever possible, a Stage 1 response will be issued within ten working days of acknowledgement. If this is not achievable, the resident will be informed of the delay, provided with a revised response date, and given contact details for the LGSCO. For complex complaints, timeframes may be extended, usually by no more than ten additional working days unless clearly justified.
- 11.6 If additional concerns are raised during the investigation, they will be included in the Stage 1 response where relevant and where this does not cause undue delay. If the Stage 1 response has already been issued, or the new concerns are unrelated or would significantly delay the process, they will be logged and managed as a separate complaint.
- 11.7 Should a resident wishes to escalate their complaint to Stage 2, we ask that the request be made within twenty working days of receiving the Stage 1 response. Late requests will be considered on a case-by-case basis.

### **Corporate Complaint Stage 2**

- 11.8 Requests to escalate a complaint to Stage 2 will be acknowledged, defined, and logged within five working days of receipt.
- 11.9 We will outline our understanding of the unresolved issues and the outcomes the resident wishes to achieve. If clarification is needed, the resident will be invited to confirm their concerns. This ensures the Stage 2 response is focused and thorough.
- 11.10 In some cases, it may not be appropriate to progress to Stage 2, for example, if any of the exclusions outlined in *Section 4* apply
- 11.11 Stage 2 investigations will be carried out by a member of staff who was not involved in the Stage 1 response.
- 11.12 Wherever possible, the final Stage 2 response will be issued within twenty working days of acknowledgement. If this is not achievable, the resident will be informed of the delay, provided with a revised response date, and given contact details for the LGSCO. Extensions will not normally exceed a further twenty working days unless clearly justified.
- 11.13 Stage 2 is the final stage of the corporate complaints process. If the resident remains dissatisfied, they may contact the LGSCO. Contact details are provided in *paragraph 13.3* of this policy.

## **12. Adult Social Care Complaint Resolution Process**

### **Who Can Make a Complaint**

- 12.1 Complaints may be submitted by residents who are receiving, or have previously received, services delivered or commissioned by Oldham Council's Adult Social Care service. We may also consider complaints from individuals directly affected by these services. For complaints involving commissioned providers or joint working with partners, see *Section 14*.
- 12.2 Where a representative submits a complaint, written consent will usually be requested to confirm the resident's awareness and agreement. This ensures lawful access to social care records and compliance with the Data Protection Act 2018 and UK GDPR.
- 12.3 If the resident is unable to provide consent or has passed away, the Council must be satisfied that the representative is acting in their best interests. If this cannot be confirmed, the complaint may not be progressed, and the representative will be informed of this decision in writing.
- 12.4 In some cases, residents may need support to make or participate in a complaint. In line with the Care Act 2014, the Council may offer access to independent advocacy where substantial difficulty is identified, such as challenges with understanding, retaining, or communicating information.
- 12.5 Where a complaint relates to decisions about care eligibility, financial assessments, or service charges, residents may request an internal review before escalating to the LGSCO. This review will be carried out by a senior officer not previously involved in the decision, to ensure fairness and transparency.

### **Verbal Complaints and Quick Resolution**

- 12.6 In line with the Local Authority, Social Services and NHS Complaints Regulations 2009, verbal complaints resolved by the end of the next working day do not need to follow the full complaints process. Where this applies, we will confirm the resolution with the complainant. If unresolved, the complaint will proceed through the standard procedure.

### **Adult Social Care - Early Resolution**

- 12.7 In line with the Local Authority Social Services and NHS Complaints Regulations 2009, Adult Social Care complaints follow a single-stage process. Early resolution is part of this statutory process and supports timely, proportionate complaint handling in line with national guidance.
- 12.8 Formal complaints will be acknowledged, defined and logged within three working days after the day on which they were received.
- 12.9 As part of the acknowledgement, we will outline our understanding of the complaint and the outcomes sought. If the details are unclear or incomplete, the resident will be invited to confirm their concerns and desired outcomes.

12.10 Where appropriate, we will seek early resolution. In many cases, frontline services can offer a prompt and practical response. Early resolution may include:

- Facilitating mediation between the service and the resident or their family
- Reinstating or initiating services, assessments, or reassessments
- Providing an apology
- Offering a remedy, including financial redress where appropriate

12.11 Early resolution should be completed within a maximum of twenty working days. If unresolved within this timeframe, the complaint will proceed to full investigation, and a final response will be provided. Where early resolution is agreed by all parties, the complaint may be closed on that basis. If the resident remains dissatisfied, they will be signposted to the next stage.

### **Adult Social Care - Investigation Stage**

12.12 Where early resolution is not possible or appropriate, the complaint will proceed to full investigation under the Adult Social Care complaints procedure.

12.13 The Council is committed to resolving Adult Social Care complaints promptly. While the statutory timeframe allows up to six months from the date of receipt of the complaint for provision of a final response, we aim to complete investigations within a shorter timeframe wherever feasible. The expected response date will reflect the nature and complexity of the concerns raised, and residents will receive regular updates. Extensions will be clearly communicated.

12.14 In exceptional circumstances, the Council may extend the timeframe. Where this applies, the resident will be informed of the reasons and next steps.

12.15 If additional concerns are raised before the final response is issued and are related to the original complaint, they will be included. If the final response has already been issued, or the new concerns are unrelated or would cause significant delay, they will be logged and managed separately.

12.16 Should a resident remain dissatisfied with the outcome they may contact the LGSCO. Contact details can be found in *paragraph 15.3* of this policy

12.17 The Council is committed to learning from complaints. Themes and outcomes are regularly reviewed to identify service improvements and prevent recurrence.

## **13. Statutory Children's Social Care Complaints Process**

### **Who Can Make a Complaint or Representation**

13.1 The Statutory Children's Social Care process is designed to support any child or young person who wishes to share feedback about the Council. The term *representation* refers to any form of feedback, which may include a complaint. A child or young person can make a representation themselves or ask someone else to do so on their behalf.

13.2 Complaints under this process can also be considered from:

- A parent or someone with parental responsibility for a child who is in the care of the local authority or is a child in need
  - Local authority foster carers, including those via independent fostering agencies
  - Special Guardians
  - Adopters
  - Others with sufficient interest in the child or young person's welfare to warrant their representations being reviewed
- 13.3 For complaints involving commissioned services or regulated agencies, see *Section 14* for guidance on joint handling.
- 13.4 Each representation is considered on its own merits. Where submitted by someone other than the child or young person, we will assess eligibility, best interests, and consent requirements. We will also consider how much information can be shared and take into account the child or young person's wishes.
- 13.5 Where a complaint is received from a child or young person, independent advocacy will be offered to help them understand the process, express their views, and participate. Advocacy is confidential unless safeguarding concerns arise.

#### **What may be complained about**

- 13.6 This complaints process enables children, young people, and their representatives to raise concerns about the services they receive from Children's Social Care. We will respond to any expression of dissatisfaction, whether verbal or written, unless the contact is anonymous.
- 13.7 Complaints will be considered if they relate to the Council's actions under Part 3 and relevant sections of Parts 4 and 5 of the Children Act 1989, including:
- Children in Need (CIN)
  - Children in Our Care
  - Special Guardianship support
  - Post-adoption support
- 13.8 The following areas are generally excluded from this process:
- Child protection including S47 enquiries and conferences
  - Assessments of potential foster carers and adopters
  - Foster carer registration
  - Section 7 and Section 37 court reports.
- 13.9 Please note that children's residential services follow a separate complaints policy, which is aligned with this statutory procedure. Where relevant, complaints may link into Stage 2.

#### **Statutory Children's Stage 1 Complaint – Local Resolution**

- 13.10 Complaints will be acknowledged within five working days of receipt. As good practice, a summary of the complaint and desired outcomes will be captured at this stage.
- 13.11 We aim to resolve Stage 1 complaints within ten working days, and no later than the statutory maximum of twenty. For complex cases, timeframes may be extended, with clear communication of reasons and revised timescales.
- 13.12 If the complainant is dissatisfied with the Stage 1 outcome, they may request escalation to Stage 2.
- 13.13 There is no formal time limit for requesting Stage 2, but we encourage requests within twenty working days to support timely resolution. Late requests will be considered case-by-case.
- 13.14 Before progressing to Stage 2, we will offer a resolution meeting. If the complainant agrees the matter is resolved, the complaint may be closed. If not, they will be signposted to Stage 2.

### **Statutory Children's Stage 2 Complaint – Independent Investigation**

- 13.15 Stage 2 involves a formal investigation of the complaint. We aim to complete this stage within twenty-five working days, and no later than the statutory maximum of sixty-five working days, starting from receipt of the agreed Stage 2 statement.
- 13.16 An Independent Investigating Officer and an external Independent Person will be appointed. The decision on internal or external appointment will be made jointly by the Complaints Team, relevant Director or Assistant Director, and Service Manager.
- 13.17 A formal written statement of complaint and desired outcomes must be obtained before the investigation begins. This ensures clarity and focus throughout the process.
- 13.18 Once complete, the complainant will receive:
- The Investigation Report
  - The Independent Person's Report
  - An Adjudication Response from the appropriate Director or Assistant Director, outlining any actions to be taken.
- 13.19 If the complainant remains dissatisfied, they may request escalation to Stage 3 within twenty working days of receiving the Stage 2 response. Stage 3 cannot proceed unless Stage 2 has been completed.

### **Early Referral to the Local Government and Social Care (LGSCO) Ombudsman**

13.20 In some cases, following Stage 2, the Council may consider early referral to the LGSCO.

13.21 While the LGSCO usually expects the full statutory process to be completed, early referral may be considered in cases involving delay or unresolved remedies.

13.22 Early referral may be appropriate where:

- The complaint is fully upheld at Stage 2
- Both the complainant and the service agree that progressing to Stage 3 would not change the outcome
- The complainant is satisfied with the findings but seeks external scrutiny

13.23 A decision to refer early will follow:

- Consultation with the appropriate Director or Assistant Director
- Input from Legal Services, where relevant
- Confirmation from the complainant that they do not wish to proceed to Stage 3

13.24 Where early referral is agreed, the Complaints Team will support the complainant in accessing the LGSCO and ensure that all relevant documentation is provided to support their referral.

### **Statutory Children's Stage 3 Complaint - Independent Review Panel**

13.25 If a complainant remains dissatisfied following the Stage 2 investigation and adjudication, they may request that the complaint be considered by an Independent Review Panel. This is the final stage of the statutory complaints procedure.

13.26 Upon receiving a Stage 3 request, the Council will aim to convene the panel within thirty working days, where possible. A Stage 3 statement form will be completed to confirm the specific aspects of the complaint the complainant wishes the panel to review.

13.27 The panel will consist of three independent members, including a Chair, all of whom will be independent of the Council. Their role is to:

- Review whether the complaint was adequately addressed at Stage 2
- Assess whether the investigation report, Independent Person's report, and adjudication response (including any action plan) were thorough, fair, and reasonable
- Make recommendations to support resolution and service improvement

13.28 The panel will not reinvestigate the complaint or consider new issues not raised at Stage 2.

- 13.29 The complainant has the right to attend the panel meeting and may be accompanied by a representative or advocate. Relevant staff involved in Stage 2 may also attend to provide clarification.
- 13.30 Before the meeting, the complainant will receive clear information about the panel process, including attendees, expectations, and how the meeting will be conducted.
- 13.31 Within five working days of the panel meeting, the complainant and any relevant parties will receive a copy of the Panel Report, including any recommendations.
- 13.32 Within fifteen working days of receiving the Panel Report, the Director will issue a formal response outlining the Council's position and any further actions. This marks the conclusion of the Council's statutory complaints process.
- 13.33 The Council will ensure that any recommendations made by the panel are considered for service improvement, and learning from the complaint will be shared with relevant teams.
- 13.34 If the complainant remains dissatisfied, they may contact the LGSCO. Contact details are provided in *paragraph 15.3* of this policy.

#### **Deferring (Freezing) Decisions**

- 13.35 If a complaint is received from or on behalf of a Looked After Child or Young Person regarding a proposed change to their care plan or placement, the Council may defer (freeze) the decision until the complaint is considered.
- 13.36 While deferring is generally favoured, care must be taken to ensure that any delay does not negatively impact the child or young person's mental or physical wellbeing. Safeguarding concerns must be prioritised.
- 13.37 When a deferral request is received, the relevant Head of Service and Complaints Manager will carry out a risk assessment and review the care plan. This will include consultation with:
- The Independent Reviewing Officer (IRO)
  - The child or young person's social worker
  - Consideration of the wishes and feelings of the child or young person

This information may also inform the Stage 1 response.

- 13.38 Where there are conflicting views about deferral, advice and a final decision will be sought from the Executive Director of Children's Services (DCS) and Monitoring Officer.

#### **14. Complaints Involving Commissioned Services and Partner Organisations**

- 14.1 This section applies to complaints involving commissioned services and partner organisations across Corporate Services, Adult Social Care, and Children’s Social Care. It reflects a unified approach while recognising statutory differences and the need for tailored handling depending on the nature of the service and the organisations involved.

### **Council-Commissioned Services**

- 14.2 Where the Council commissions a service (e.g. residential care, home care, highways operations and maintenance) the provider is responsible for delivering services on the Council’s behalf. Under the Local Government Act 1974, the Council remains legally responsible for the actions of commissioned providers, including complaint handling. Complaints about these services are treated as complaints about the Council. In most cases, the provider will be asked to investigate and respond to complaints in the first instance.
- 14.3 The Council will request a copy of the provider’s response to monitor outcomes, ensure appropriate follow-up, and assess whether further action is needed. This oversight supports accountability and continuous improvement.
- 14.4 If the resident does not wish their complaint to be shared with the provider, we will explain which aspects can be addressed independently by the Council.
- 14.5 With agreement from the complainant and provider, a Council officer may lead or support the investigation, particularly where concerns relate to contractual obligations or service standards.
- 14.6 Comments or concerns about commissioned services may also be shared with the relevant Contract Monitoring or Commissioning Team for oversight and learning.
- 14.7 If the resident, child, or young person remains dissatisfied with the provider’s response, they may request that the Council consider the complaint under its own procedure, where appropriate. This may include reviewing the quality or appropriateness of the commissioned service.
- 14.8 If the resident remains dissatisfied after the Council’s review, they may refer the matter to the LGSCO, who can investigate complaints about both Council services and commissioned providers.

### **Joint Complaints Involving Partner Organisations**

- 14.9 Where a complaint spans multiple organisations, such as the Council and NHS bodies such as but not limited to continuing healthcare (CHC) funding decisions, district nursing, community health services, mental health services, or joint safeguarding investigations, a coordinated approach will be agreed in line with the LGSCO’s guidance on joint complaint

handling. Where NHS services are involved, the Council may also coordinate with the Parliamentary and Health Service Ombudsman (PHSO) to support joint investigations, ensuring consistency with national protocols.

14.10 We will work with all parties to agree a coordinated approach, including:

- Obtaining appropriate consent to share information
- Clarifying who will lead the response
- Setting clear expectations around timescales, scope and communication

14.11 The lead organisation will usually be the one most directly responsible for the issues raised. However, joint responses may be issued where appropriate to ensure clarity and avoid duplication.

14.12 Advocacy support may be offered to help residents, children, or young people engage with the process, particularly where substantial difficulty is identified.

14.13 If the resident does not wish their complaint to be shared with a partner organisation, we will explain which elements can be addressed independently and any limitations this may create.

14.14 Where agreement is reached, a Council officer may lead or contribute to the investigation alongside the partner organisation.

## **15. The role of the Local Government and Social Care (LGSCO) Ombudsman Service**

15.1 The LGSCO is an independent organisation that investigates complaints of maladministration and service failure by councils and other organisations delivering local public services. This includes services across Corporate Services, Adult Social Care, and Children's Social Care.

15.2 While individuals can contact the LGSCO at any time, the Ombudsman usually expects the Council to have had the opportunity to investigate and respond to the complaint first. We therefore encourage residents to complete our complaints process before approaching the LGSCO.

15.3 Residents can contact the LGSCO in the following ways:

- Phone: 0300 061 0614
- By post:  
Local Government and Social Care Ombudsman  
PO Box 4771  
Coventry  
CV4 0EH
- Online: [www.lgo.org.uk](http://www.lgo.org.uk)
- British Sign Language: Via Interpreters Live! (free online service)

15.4 The LGSCO encourages residents to use its online complaint service, which allows secure messaging, progress tracking, and document storage.

## **16. Remedies**

16.1 When a service failure occurs, we will explain the actions taken or planned to put things right. Remedies will be fair, proportionate, and resolution-focused, in line with the LGSCO Complaint Handling Code.

16.2 Remedies will reflect both the nature of the failure and its impact on the resident, including distress, inconvenience, and the effort involved in pursuing the complaint. Where appropriate, apologies will be meaningful and delivered by a suitably senior officer, demonstrating accountability.

16.3 We will consider the LGSCO's *Guidance on Remedies* when determining an appropriate response.

16.4 Examples of remedies may include:

- Acknowledging fault where things have gone wrong
- Providing an explanation or reasons
- Offering an apology
- Taking corrective action (e.g. reinstating a service or reviewing a decision)
- Amending or correcting records
- Providing financial redress where appropriate
- Changing policies, procedures, or practices to prevent recurrence

16.5 Where financial redress is considered, we will assess statutory entitlements, quantifiable losses, and the overall experience of the resident, including the time and effort involved in pursuing the complaint.

16.6 Financial redress may reimburse actual losses or take the form of a symbolic payment to recognise distress or inconvenience. These are not legal compensation but a gesture of acknowledgement.

16.7 Remedies will be agreed collaboratively between the service and the Complaints Team. If consensus cannot be reached, the matter will be escalated through senior management to ensure a fair and proportionate decision.

## **17. Withdrawal of complaints**

17.1 Residents may withdraw their complaint at any time, verbally or in writing. We will confirm the withdrawal in writing for clarity and record-keeping.

17.2 Even if a complaint is withdrawn, the Council may continue to review or investigate the matter internally, especially where there are concerns about service delivery,

safeguarding, or potential learning. This ensures issues are not overlooked and can still inform service improvement.

## **18. Pausing Complaints**

- 18.1 Complaints may be paused in specific circumstances, such as safeguarding investigations, legal proceedings, or staff unavailability, to ensure a fair and informed response. Residents will be notified of the pause, the reason, and the expected timeframe for resumption. This supports proportionate and lawful complaint handling.

## **19. Managing Unreasonable Behaviour and Protecting Staff**

- 19.1 We treat residents with courtesy and respect and expect the same for our staff.
- 19.2 While most residents raise concerns reasonably, behaviour that is abusive, threatening, deceitful, violent, or otherwise unreasonable may lead to action under the Council's Unreasonable Behaviour Policy or Violence at Work Policy.
- 19.3 Actions may include restricting contact, assigning a single point of contact, or other proportionate measures to protect staff and ensure effective complaint handling. Any steps taken will follow the relevant policy and be clearly explained to the resident.

## **20. Monitoring and Performance**

- 20.1 Monitoring and reviewing complaints across Adult Social Care (ASC), Children's Social Care (CSC), and Corporate Services provides valuable insight into resident experience and service performance. It helps identify areas for organisational learning and supports service development. Complaints data will be analysed alongside other feedback sources, such as compliments, surveys, MP enquiries, and safeguarding alerts, to identify systemic issues. This approach supports the principles of Best Value by promoting transparency, accountability, and continuous improvement, and informs strategic decision-making.
- 20.2 We look beyond individual complaints to identify broader service improvements, including recurring themes, delivery gaps, and opportunities to strengthen policies and practice. Insights will be shared through learning bulletins, reflective sessions, or other internal mechanisms. Staff feedback will also be sought to promote a fair and sustainable complaints culture. Where serious or persistent issues arise, root cause analysis will be undertaken to inform targeted improvements.
- 20.3 A senior officer will oversee complaint handling across all service areas in line with the LGSCO Complaint Handling Code. As the designated Complaint Manager, they will champion a positive complaints culture, monitor performance, escalate risks, liaise with the Ombudsman, support learning, and report regularly to the Executive Management Team.
- 20.4 To support ongoing service enhancement, we will periodically seek feedback from residents on their experience of the complaints process. This helps us understand how

our approach is perceived, identify areas for refinement, and ensure that our procedures remain accessible, fair, and responsive

- 20.5 An annual report will summarise complaints received, responses issued, learning identified, and improvements made, including any LGSCO findings. The report will highlight themes and trends, be shared with the Scrutiny Board, and published on the Council's website. The Member responsible for complaints will be invited to respond, supporting transparency and accountability.
- 20.6 We will review our complaints handling approach following any significant restructure or procedural change and carry out periodic self-assessments against the LGSCO Complaint Handling Code to support transparency and continuous improvement.

## **21. Review of policies**

- 21.1 The Council's Complaints Policy will be published on its website: [www.oldham.gov.uk](http://www.oldham.gov.uk)
- 21.2 This policy will be reviewed annually, or sooner if required due to legislative or procedural changes.



# **Unreasonable Behaviour Policy**

**Date: 4 December 2025**

**Review date: 4 December 2026**

**Oldham Council Unreasonable Behaviour Policy**

## Section A Introduction and Purpose of the policy

### 1.0 Introduction

1.1 This policy has been produced to create a joint understanding of what is considered acceptable and unacceptable behaviour from our residents, businesses and members of the public (hereafter referred to as Customers /you) in dealing with Employees of Oldham Council, and Elected Members of the Council (Members).

The policy is set out for reference for Customers, including those who have submitted a formal complaint, Employees and Members and also for external bodies such as the Local Government and Social Care Ombudsman (LGSCO).

1.2 In setting out this policy, we recognise a Customer's right to be heard, understood and respected. We will ensure that you are treated fairly, openly, honestly, consistently and appropriately in accordance with our values. We are keen to work with our Customers to resolve issues at an early stage to achieve the best outcomes for all.

### 2.0 Purpose

2.1 The purpose of the policy is:

- To define behaviours that are not acceptable and are deemed unreasonable including behaviour by Customers who make frivolous, persistent or vexatious complaints against Employees or Members
- To ensure that the ability of an Employee or Member to conduct business is not adversely affected by those few Customers who behave in an unreasonable manner
- To ensure that Employees and Members have a safe working environment and are not exposed to unnecessary stress due to the unacceptable behaviour of Customers
- To empower Employees and Members to deal confidently and effectively with unreasonable behaviour in the small number of cases where this occurs
- To set out a clear process about how unreasonable behaviour will be managed

Employees and Members operate in public life and their standards of behaviour should reflect the 7 principles of public life <sup>1</sup>. These principles equally apply to elected representatives and those working in and delivering public services. When implementing this policy, you can expect us to respond to you in ways that demonstrate these principles. The principles and how we will demonstrate these in terms of this policy are set out below.

1. <https://www.gov.uk/government/publications/the-7-principles-of-public-life>

Table 1: Our standards of behaviour

Principle of Public Life	Examples of our standards of behaviour in the execution of the Unreasonable Behaviour Policy.
Selflessness	We will act in the public interest.
Integrity	<p>We will act with integrity e.g. we will avoid placing ourselves under any obligation to those seeking inappropriately to influence us in our work.</p> <p>We will declare and resolve any conflict of interests and relationships.</p> <p>We will treat you with dignity and respect</p>
Objectivity	We will take decisions impartially, fairly and will use evidence to make decisions without discrimination or bias.
Accountability	<p>We are accountable for the decisions we make.</p> <p>We will set a date to review the decisions we have made to ensure we do not apply open ended restrictions on contact.</p>
Openness	<p>This policy is available online and will be issued to you with letters setting out any action taken under this policy.</p> <p>We will follow this policy when making decisions.</p> <p>We will explain to you why we have acted under this policy.</p>
Honesty	We will be honest in making decisions under this policy
Leadership	<p>We will challenge and take action where we experience unreasonable behaviour.</p> <p>We will be clear, balanced and professional in our dealings with you.</p> <p>We will follow our policies and procedures in addressing our own behaviour where it falls short of these principles.</p>

2.2 We have a duty to protect Employees and Members and recognise our obligations to Customers. When allegations are made against Employees, we will carry out appropriate investigations in accordance with our internal policies and procedures. Complaints against Members will be dealt with in accordance with the standards procedures.

2.3 We do not tolerate offensive, threatening, abusive or other forms of unacceptable behaviour. Under these circumstances, we will take appropriate action to protect the health and wellbeing of Employees, Members and the integrity of our processes and business.

### **3.0 Who does this policy apply to?**

3.1 This policy applies to any individual or organisation including those who have submitted a formal complaint to us. It also applies to advocates/advocacy services acting on behalf of individuals.

### **4.0 When can the policy be invoked?**

4.1 This policy will normally be invoked on the basis that unreasonable behaviour has taken place over a period of time. However, in exceptional circumstances, the policy will be invoked following a single incident if this incident of unreasonable, unacceptable or vexatious behaviour merits immediate action.

4.2 Subject to the exception set out in paragraph 4.1, a decision to invoke this policy must be made based on documented evidence (examples are outlined in 17.2). The evidence should demonstrate that any individual or organisation's unreasonable, unacceptable, frivolous or vexatious behaviour has taken place over a period of time. A period of time is not defined in this policy but can include a high incidence of unreasonable contact over a short period of time or a history of unreasonable behaviour over a longer timeframe.

### **5.0 Equalities and Diversity and reasonable adjustments**

5.1 When implementing the policy, we will have regard to the Equalities Act 2020 and show due regard to an individual's medical condition or vulnerability such as mental health and learning disabilities, as and when applicable. Any restrictions imposed on Customer contact will recognise and be appropriate to the circumstances.

5.2 Reasonable adjustments will be agreed on a case-by-case basis in consultation with the resident. In accordance with Section 20 of the Equality Act, these may include large print, translation, interpreter services, advocacy, or alternative formats. Adjustments can be requested via the online form, by phone, or by contacting the Complaints Team directly.

### **6.0 Support for Employees**

6.1 We will act quickly to ensure that our Employees have a safe working environment (actions are set out in Section D).

6.2 Support is available for Employees who are affected by unreasonable or abusive behaviour from Customers or complainants. The Employee Assistance Programme

(EAP) offers free counselling support 24/7. Further details are available on the Council's intranet.

- 6.3 Advice can also be obtained from the Complaints Manager about the management of Customer behaviour.

## **Section B Recognising Unreasonable Behaviour**

### **7.0 What behaviour is unreasonable?**

- 7.1 We understand that when you contact us, you may have reason to feel angry, aggrieved, upset or distressed.
- 7.2 We do not view assertive behaviour (for example putting your case forward in a persuasive manner) as unreasonable. However, we will manage behaviour that is aggressive, rude or abusive or which places unreasonable demands on Employees or Members.
- 7.3 Unreasonable behaviour is behaviour or language, whether face to face, by telephone, social media or written that may cause staff or councillors to feel intimidated, threatened or abused. Examples may include:
- Threats
  - Verbal abuse
  - Racist and sexist language
  - Derogatory remarks
  - Offensive language
  - Rudeness
  - Making inflammatory statements
  - Raising unsubstantiated allegations
- 7.4 Whilst we accept that those in contact with us may feel angry, it is not considered acceptable when that anger becomes aggression directed towards Employees or Members.
- 7.5 Verbal and online abuse, threats, harassment or physical violence against Employees or Members will not be tolerated and will be reported to the police, who may decide to prosecute.

### **8.0 Unreasonable requests**

- 8.1 Requests may be considered unreasonable by the nature and scale of service expected. Examples may include:
- Requesting responses within unreasonable timescales
  - Insisting on speaking with specific Employees or Members
  - Adopting a "capture-all" approach by contacting Employees, Members and/or other third parties
  - Making repeated and unnecessary contact during the investigation of a complaint
- 8.2 We recognise that our resources, including time, must be used where they can be

most effective. This might mean that we cannot respond to every issue in the way a Customer would like, if in doing so it would take up a disproportionate amount of time and resources that could be used elsewhere to support the most vulnerable in our community.

8.3 We ask you to recognise that due to volume of work we deal with that we may not be able to respond immediately to your requests. This does not mean that your concerns are not important to us. If we have asked for your patience but you continue to pursue your concerns, we may consider such behaviour to be unreasonable.

## **9.0 Unreasonable Communication**

9.1 Communication may be considered unreasonable where an individual or organisation:

- Continually contact us while we are in the process of investigating their concerns
- Make several approaches about the same matter without raising new issues
- Refuse to accept a decision made where explanations for the decision have been given
- Continue to pursue complaints /issues which we have reviewed and consider to have no substance
- Continue to pursue complaints/issues which have already been investigated and determined
- Continue to raise unfounded or new complaints arising from the same set of facts
- Continue to raise unfounded or new complaints about us on social media without giving us the opportunity to deal with these issues directly through the normal channels
- Use threatening or abusive language
- Send large volumes of irrelevant documentation

## **10.0 How will we manage unreasonable behaviour?**

10.1 We have a zero-tolerance position on violence and threats against Employees and Members and this behaviour will always be reported to the Police.

10.2 Employees and Members have the right to terminate telephone conversations where Customers are behaving unreasonably, aggressively or abusively.

10.3 Employees and Members have the right to take steps to protect their own safety if they feel threatened in a face to face encounter with a Customer. Examples of these steps include contacting the Police to remove you from our premises or applying a ban to prevent you visiting our premises in future.

10.4 We may decide to restrict communications with you if you do not modify your behaviour. If we do restrict communication with you, we will consider which is the most appropriate and proportionate approach to take. We will consider options in consideration of the nature, extent and impact of your behaviour on our ability to do our work.

10.5 We will be transparent and explain to you what restriction we are putting in place, our reasons for doing so and how long the restriction will apply. The restrictions we may apply are set out in Section D of this policy.

## **11.0 Definition of Unreasonable Behaviour and Unreasonably Persistent Complaints**

11.1 We have adopted the Local Government & Social Care Ombudsman's (LGSCO)<sup>2</sup> definition of unreasonable actions;

*'Unreasonable actions are those which, because of the nature or frequency of contact with an organisation, hinder the organisation's delivery of services or consideration of complaints.'*

## **12.0 Features of unreasonable and unreasonably persistent complaints**

12.1 Features of unreasonable and unreasonably persistent complaints include the following:

*N.B this list is not exhaustive, nor does one example necessarily imply that the person will be considered as being in this category*

- Refusing to specify the grounds of a complaint, despite offers of help
- Refusing to cooperate with the complaints' investigation process while still wishing their complaint to be resolved
- Having insufficient or no grounds for their complaint and making the complaint only to annoy/ cause inconvenience (or for reasons that the complainant does not admit or make obvious)
- Refusing to accept that certain issues are not within the scope of a complaints procedure or that the issues are not within our power to investigate, change or influence e.g. where the issue is the responsibility of another organisation
- Insisting on the complaint being dealt with in ways which are incompatible with the adopted complaints procedure or with good practice e.g. insisting that there must be no written record of the complaint
- Making unjustified complaints about Employees who are trying to deal with the issues and seeking to have them replaced or dismissed
- Changing the basis of the complaint as the investigation proceeded.
- Denying or changing statements made at an earlier stage.
- Introducing trivial or irrelevant new information at a later stage and requiring that the complaint is investigated again
- Raising many detailed but unimportant questions, and insisting they are all answered
- Submitting falsified documents from themselves or others.
- Adopting a 'scatter gun' approach, for example pursuing the same complaint or complaints with various Employees and Members at the same time as with a MP or other external bodies, requiring us to use multiple resources to deal with enquiries when resources could be better used to investigate and respond to the initial complaint

- Making excessive demands on the time and resources of staff with lengthy phone calls, emails to numerous council staff, or detailed letters every few days, and expecting immediate responses.
- Submitting repeat complaints with minor additions/variations the complainant insists make these 'new' complaints.
- Electronically recording meetings and conversations without the prior knowledge and consent of the other person involved
- Refusing to accept the decision; repeatedly arguing points with no new evidence.
- Harassing or verbally abusing or otherwise seeking to intimidate Employees or Members dealing with their complaint by using foul or inappropriate language, including racist, sexist and other offensive language
- Complaining about an issue based on a historic and irreversible decision or incident
- Persistently arguing the same point, asking us to change records, information or decisions when we have already explained our position
- Combining some or all of these features or persisting in behaviour that has the intention or impact of causing harassment to Members or Employees

## **Section C: Formal complaints and unreasonable behaviour**

### **13.0 Unreasonable behaviour by a Customer making a formal complaint**

- 13.1 Dealing with a complaint should be a straightforward process but in a minority of cases, individuals or organisations pursue their complaints in a way which can either impede the investigation of their complaint or can have significant resource issues for us. This can happen while the complaint is being investigated or after we have finished dealing with the complaint.
- 13.2 We are committed to dealing with complaints fairly, comprehensively and in a timely manner.
- 13.3 We will not normally limit the contact with individuals or organisations who make a complaint but we do expect that our Employees and Members are treated respectfully. This applies to verbal, written or face to face contact. Unreasonable behaviour is set out in Section B of this policy and applies to Customers including those who are making a complaint.
- 13.4 We will act to protect Employees and Members from unreasonable behaviour in accordance with this policy.
- 13.5 Raising legitimate concerns or criticisms of a complaints procedure as it progresses, for example if agreed timescales are not met, should not in itself lead to someone being regarded as an unreasonably persistent complainant.
- 13.6 Similarly, the fact that a complainant is unhappy with the outcome of a complaint and seeks to challenge it once or more than once, should not necessarily cause him or her to be labelled unreasonably persistent.

#### **14.0 Deciding the course of action to be taken**

- 14.1 While we cannot spend excessive time in dealing with unreasonable or unreasonably persistent complaints, we will also try to avoid inflaming an already difficult situation.
- 14.2 It may be worth spending some time defusing a situation, rather than taking a hard line and then spending more time holding that position. The best way of handling a situation will be a matter of judgement and should be considered in the first instance by the service manager. Support and advice is also available from the Complaints Manager.
- 14.3 If a decision is made that the complaint is unreasonable and will not be dealt with under the complaints procedure or will not be progressed to the next stage, this decision will be clearly communicated to the complainant and reasons given.
- 14.4 In some cases, relations between us and unreasonable complainants break down while complaints are under investigation and there is little prospect of achieving a satisfactory outcome. In these cases, there may be little purpose in following all the stages of the complaints' procedure. Where this occurs, the relevant Ombudsman may be prepared to consider a complaint before the procedure has run its course.

#### **15.0 What happens if we then receive complaints about the same matter?**

- 15.1 If the complainant has not exhausted our complaints procedure, then the complaint will go to the next stage of the relevant complaints' procedure.
- 15.2 If the complainant has exhausted the complaints procedure but has not been referred to the LGSCO or other relevant Ombudsman or the Information Commissioner's Office (ICO), the complainant will be referred there.
- 15.3 If the complainant disagrees with the decision of the LGSCO, ICO or other relevant body, they will be referred there
- 15.4 If the complainant continues to contact us on the same matter, then we will explain that we will not enter into further correspondence on the matter and that further correspondence will be read and filed but that no further action will be taken
- 15.5 Sometimes, we are presented with further complaints about similar matters that are slightly different from the original complaint but about the same broad area of activity. These complaints can be vexatious and the service manager will use judgement to decide if the complaint should be investigated as a new complaint. In some cases, we may decide not to use the complaints procedure if the complaint is trivial or if the complainant has not suffered any injustice. The Service Manager and the Complaints Manager would need to agree this course of action before it was taken.
- 15.6 New complaints about different matters will be considered as normal under our complaints' procedure taking account of any restrictions we may have applied on communication.

## **Section D – Taking Action**

### **16.0 Imposing Restrictions**

16.1 If a decision to impose restrictions on contact is being considered, the Service Manager will decide if a restriction should be imposed. This decision will be made in consultation with the Director or Assistant Director responsible for the area of work, Complaints Manager and Head of Customer Operations.

### **17.0 Gathering Evidence**

17.1 Evidence of the unreasonable behaviour is required and it is important to note that the policy will not be invoked if there is insufficient evidence to support our actions.

17.2 Evidence such as a contact log, file notes, emails, social media postings screen shots etc can be used to demonstrate the unreasonable behaviour e.g. retaining a copy of an abusive email.

### **18.0 Options to manage unreasonable behaviour**

18.1 If Customers continue to behave unreasonably after we have asked them to modify their behaviour, we will consider the following options:

- Requiring you to contact a named employee or other single point of contact only e.g. the complaints team
- Restricting contact in writing or to a designated email address only
- Restricting contact by telephone, face to face or digital to specified days and times
- Not responding to you if you persistently raise issues which we have considered in full under your right to request a review of that decision. We will decline to respond to further correspondence which does not raise new issues. The correspondence will be read and filed but we will not acknowledge it unless you provide significant new information or evidence relating to the matter.
- Not responding to your correspondence or blocking emails that are abusive or offensive
- Restricting the issues we will communicate with you about
- Returning or deleting large volumes of irrelevant communication you have sent to us
- Blocking your email contact with us if the number or length of or volume of contacts cc'd into the email causes us difficulty in conducting our business
- Re-directing your emails to a generic email account to be managed
- for example where you have cc'd many contacts, multiple times
- Requesting that you are supported by an independent third party such as Citizens Advice or a legal representative. This option may be suggested where you have made several unfounded allegations in the past

18.2 The list is not exhaustive. Any one option or a combination of them may be applied to Customers.

18.3 A blanket ban on contact will not be applied for an unspecified period of time. We do not support a blanket policy of ignoring genuine service requests or complaints where they are founded and any decision we make we will take this into account.

## **19.0 Corporate Single Point of Contact**

- 19.1 Where a complainant or Customer continues to behave unreasonably, we may decide to limit contact to a corporate Single Point of Contact (SPOC). This decision will be made by the relevant Assistant Director, Complaints Manager and Head of Customer Operations.
- 19.2 This action will usually be considered after the service has attempted to manage contact within the service unsuccessfully or where the Customer is submitting complaints over many service areas or where the particular circumstances of the Customer or complainant require this approach to be taken immediately
- 19.3 The Complaints Manager will provide support as necessary to Service Managers and Assistant Director(s) in taking the decision to apply a corporate SPOC.

## **20.0 Exceptional Circumstances**

- 20.1 In exceptional circumstances, we reserve the right to take appropriate action that is specific to the unreasonable behaviour that is under consideration. For example
- When the unreasonable behaviour is being targeted towards one Employee or Member, we may impose a ban on contact to prevent the Customer from contacting that person and to protect their welfare.
  - When the unreasonable behaviour includes face to face threatening behaviour to Employees or Members in our buildings, we may impose a ban to prevent the Customer from entering our offices and report the matter to the Police
  - When the unreasonable behaviour includes publication of derogatory remarks against Employees or Members either in printed media or online or via social media, we may act to prevent such behaviour where it is appropriate to do so, including reporting the matter to the Police or taking legal action against you.
- 20.2 We will look at exceptional cases on their own merit and will take all necessary action that we consider is appropriate for the circumstances. The ban on contact will normally be time limited. We will ensure that the action we take is supported by appropriate evidence and that the reasons for taking the decision are recorded.

## **21.0 Notifying the Customer**

- 21.1 We will contact the individual in writing by letter or email setting out
- Why the behaviour is causing concern
  - A request for the behaviour to change
  - The actions we could take if the behaviour does not change
- 21.2 In exceptional circumstances, the unreasonable behaviour is such that a decision to restrict contact will be made without first issuing a warning to the complainant or Customer. In these cases, we will explain our decision to impose a restriction without warning to you when we write to you to confirm the restrictions that have been put in place.

- 21.3 If the unreasonable behaviour continues, restriction(s) will be put in place.
- 21.4 In some cases, it will be appropriate to issue the letter or email unsigned from a generic organisational email address for example [Customer.feedback@oldham.gov.uk](mailto:Customer.feedback@oldham.gov.uk) .This will be rare but will be considered where there is a history of the complainant or Customer targeting (or they have links with other Members of the public who have a history of targeting) specific Employees and Members in writing, online or on social media.
- 21.5 In other cases, depending on the severity of the issue and where the unreasonable behaviour covers more than one service area, the notification may be issued by more senior Employees or our legal team.
- 21.6 The letter or email will explain
- Why we have taken this decision
  - What action we are taking
  - How long the action will be in place for
  - Your right of appeal
  - Your right to contact the LGSCO or other relevant body about the restrictions placed on you under this policy
- 21.7 A copy of this policy will be enclosed with the letter.

## **22.0 Review of the Decision**

- 22.1 A decision to restrict contact is time limited, usually for 3, 6 or 12 months and will be reviewed by the Employee who made the original decision. The review will take place shortly before the end date of the period of restriction.
- 22.2 The Customer will be informed in writing (by letter or email) of the result of this review if the decision to apply this policy has been changed, ended or extended.

## **23.0 Right of Appeal**

- 23.1 When we write to a Customer about a decision to restrict or extend restrictions on contact, we will set out the right to request an appeal. The appeal must be submitted within one month of the date of the letter.
- 23.2 The Head of Customer Operations will consider the appeal in most circumstances, along with an Assistant Director for the respective service area, or if they deem necessary appoint a different Employee to consider the appeal as appropriate.
- 23.3 There will be no further right of appeal.

## **24.0 Record Keeping and sharing of information**

- 24.1 Records will be kept by the Service Manager, and where appropriate the Complaints Manager, of the details of the case and the action that has been taken. The record will include
- The name and address of the individual
  - What the restrictions are and when these end/are due to be reviewed

- The evidence to support the decision making
- When the individual/complainant were notified of the restrictions
- If this information has been shared with other services as appropriate including any outside of our organisation

24.2 Examples of the standard format/templates to use when keeping records and decision makers' responsibilities in maintaining records and conducting reviews will be available for Employees and Members on the Council's intranet.

24.3 When making a decision to share information within the Council and with third parties, the Council will always be guided by the provisions of the Data Protection Act (DPA) and the General Data Protection Regulations (GDPR) and will ensure that the Customer's rights to have their information processed in accordance with the statutory requirements is protected and adhered to.

24.4 We may seek legal advice about how best to manage unreasonable behaviour and safeguard the health and safety of Employees and Members. Such advice will be subject to legal and professional privilege and will not be shared with individuals.

## **25.0 Review of Policies**

25.1 The Customer Feedback Policy and Unreasonable Behaviour Policy will be published on [www.oldham.gov.uk](http://www.oldham.gov.uk) These policies will be reviewed annually (or as a change is required).

## **Appendix 3: Housing Complaints Policy**



## **Oldham Council Tenants Housing Complaints Policy**

**Date: 4 December 2025**

**Review date: 4 December 2026**

# Oldham Council Tenants Housing Complaints Policy

## 1.0 Introduction

- 1.1 Oldham Council recognises the importance of complaints and welcomes them as a valuable form of feedback about our services. Working with a resident focus is a key priority and we want our residents to be satisfied with our services. We welcome hearing our residents' comments, compliments and complaints to better understand how residents view our services and to use these valuable opportunities to learn and improve for the future.
- 1.2 In setting out this policy, we recognise residents' rights to be heard, understood and respected. We will ensure that tenants are treated fairly, openly, honestly, consistently and appropriately in accordance with our values and behaviours.
- 1.3 When receiving complaints we will work with a resident focus by:
  - Taking a collaborative and co-operative approach, meaning staff will work with colleagues from other teams and departments to resolve the issues at hand.
  - Taking collective responsibility for any shortfalls identified through complaints and using learning to drive improvements. Acting within the professional standards for engaging with complaints as set by any relevant professional body.

## 2.0 Purpose of the policy

- 2.1 The aim of this policy is to provide a fair and consistent approach to handling and resolving complaints from the Council's tenants and ensure they are handled appropriately and professionally in line with the Housing Ombudsman's Complaint Handling Code.
- 2.2 Emphasis will be placed on resolving complaints as quickly as possible by the service concerned. We will ensure that staff are equipped to deal with complaints efficiently and effectively and lessons learned from complaint investigations will be used to directly inform service improvements.
- 2.3 This policy only relates to direct tenants of Oldham Council. Tenants of properties owned by other social landlords, such as Onward, Jigsaw, Great Places and First Choice Homes Oldham for example, should raise any complaints via their respective landlord.
- 2.4 The Council has entered into contracts with Housing 21 and Inspiral Oldham, whereby these companies are responsible for the maintenance and management of a number of properties in the borough. Housing 21 manages and maintains much of the Council's sheltered housing stock and Inspiral Oldham manages and maintains a number of properties at Crossley in Chadderton, Dew Way in Westwood, Primrose Bank in Medlock Vale/Coppice and Keswick Avenue in Fitton Hill. Throughout the term of these contracts, the Council is landlord of the properties but Housing 21 and Inspiral Oldham will act as managing agents; therefore, residents living in any of these properties can contact Housing 21 or Inspiral Oldham respectively to provide any feedback or raise complaints.

- 2.5 Residents that live in homes managed by Housing 21 can raise complaints with their Court Manager via Housing 21's Complaints Helpline using the details below:

Phone 0303 123 1622  
Email [feedback@housing21.org.uk](mailto:feedback@housing21.org.uk)  
Post Freepost RTJE-LEHY-SGLJ  
Housing 21 Complaints  
Tricorn House  
51-53 Hagley Road  
Birmingham  
B16 8TP

- 2.6 Residents that live in homes managed by Inspiral Oldham can raise complaints using the details below:

Website <https://www.greatplaces.org.uk/contact-us/how-to-make-a-complaint/>  
Phone 0300 123 1966  
Email [customerhub@greatplaces.org.uk](mailto:customerhub@greatplaces.org.uk)  
Post Great Places Housing Group  
2a Derwent Avenue  
Manchester  
M21 7QP

- 2.7 Should residents of Housing 21 or Inspiral Oldham raise their complaint with the Council directly, we will log the complaint and acknowledge receipt. We will ask the respective managing agent to investigate the complaint and provide a comprehensive response to the resident at stages 1 and 2 of the process. A copy of the response(s) will be shared with the Council and saved on the complaint record.

### **3.0 What is a complaint?**

- 3.1 We use the Housing Ombudsman's definition of a complaint as outlined below:  
*'an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the landlord, its own staff, or those acting on its behalf, affecting a resident or group of residents.'*
- 3.2 An expression of dissatisfaction with services made through a survey is not automatically defined as a complaint, however, any surveys sent to residents by the Council will include information as to how they can pursue a complaint if they wish to do so.
- 3.3 Where the issue is being reported for the first time, this will normally be treated as a service request. This is because most of such contacts can be handled quickly and effectively to obtain the best outcome for the resident. This approach is in line with guidance from the Housing Ombudsman. Where we raise a matter as a service request, the resident will be made aware of the decision and advised of the next steps.
- 3.4 Where a resident expresses dissatisfaction with our approach to resolving the service request, they will be given the opportunity to raise a complaint. The complaint will be logged at Stage 1 of the procedure.

## 4.0 Exclusions

4.1 Each complaint will be dealt with on its own merits but routinely, the following would not be dealt with under this complaints procedure:

- A service request (a request from a resident to the landlord requiring action to be taken to put something right). Where a service request has been raised and the resident is dissatisfied with the response they have received, a complaint about the issue may then be raised
- A complaint regarding the Council's allocation scheme, temporary accommodation, homelessness service, private landlord sector accommodation, or any matters relating to privately owned accommodation. Please contact [customer.feedback@oldham.gov.uk](mailto:customer.feedback@oldham.gov.uk) if further advice is needed as to which complaints policy applies
- A dispute with a neighbour which can be dealt with through the terms outlined in a tenancy agreement
- Requests for information (these will be dealt with by the Information Management Team according to the requirements of the Freedom of Information Act 2000 or Data Protection Act 2018 and accompanying policies, depending on the nature of the request. Where there is a crossover of issues, the Complaints Team and Information Management Team will work together to resolve it)
- MP, Councillor and Citizens Advice enquiries (complaints made by such persons on behalf of residents will however be considered)
- Complaints relating to rent increases (where the rent increase is driven by government guidance/ regulation)
- Complaints about the actions of an organisation that is not working for, or supported by Oldham Council
- Matters that would more appropriately be dealt with by an insurer
- Matters relating to court/ legal proceedings (for example, where details of a claim, such as the Claim Form and Particulars of Claim, have been filed at court)
- Matters upon which a Court or the Housing Ombudsman has already ruled, or is in the process of considering
- Complaints that have been previously withdrawn by the resident
- A complaint that has already been investigated and a final response has been issued
- Where the issues involved are covered by the Council's disciplinary policy for employees
- Where the grounds of the complaint are unclear, frivolous, or vexatious (please note the process to manage unreasonable customer contact is set out separately in the Council's Unreasonable Behaviour Policy)
- Matters whereby other bodies, such as the Police, have commenced investigations into the same issues

4.2 In line with guidance from the Housing Ombudsman, the Council will normally only accept complaints made within 12 months of the issue(s) giving rise to the complaint, or within 12 months of the resident being made aware of the issue(s). However, if there are exceptional reasons provided by the resident for the delay in submitting the complaint, we may make a discretionary decision to consider the matter out of time. This approach is taken as historical matters can be difficult to fully investigate due to the passage of time.

- 4.3 Should the resident report a recurring issue, the complaint investigation will focus on any incidents that have occurred in the last 12 months but historical information may be considered as background information.
- 4.4 If we decide not to accept a complaint under this policy, an explanation will be provided to the resident in writing, setting out the reasons why the matter is not suitable for the complaints process.
- 4.5 A resident has the right to challenge the Council's decision to apply an exemption by bringing their complaint to the Housing Ombudsman Service. Contact information for the Housing Ombudsman Service can be found at paragraph 12.2.

## **5.0 Who can make a complaint?**

- 5.1 Anyone who is a tenant of Oldham Council can make a complaint about the housing services they receive from the Council as their direct landlord.
- 5.2 As per paragraph 2.3, this policy does not apply to complaints about housing owned by another housing provider, such as Onwards, Jigsaw, Great Places and First Choice Homes Oldham for example.
- 5.3 Where a complaint is received from a representative, confirmation for the representative to take the complaint forward on their behalf will be sought from the resident. This ensures compliance with Data Protection requirements and that the resident's wishes are being fulfilled.

## **6.0 Anonymous complaints**

- 6.1 If a resident does not provide a contact name or address or email address, it will not be possible for a reply to be provided. Where an anonymous complaint is made, this will be brought to the attention of the relevant service for internal investigation.

## **7.0 Equalities and Diversity and reasonable adjustments**

- 7.1 When implementing this policy, we will have regard to the Equalities Act 2010 and show due regard to an individual's medical condition or vulnerability, such as mental health and learning disabilities. Help and support will be provided to residents to overcome any difficulties in pursuing their complaint. Any support or adjustment made will be determined on a case-by-case basis and with the agreement of the resident.
- 7.2 Reasonable adjustments will be agreed on a case-by-case basis in consultation with the resident. In accordance with Section 20 of the Equality Act, these may include large print, translation, interpreter services, advocacy, or alternative formats. Adjustments can be requested via the online form, by phone, or by contacting the Complaints Team directly.

## **8.0 How can a complaint be made**

- 8.1 Many issues, such as missed appointments or repair requests, can be resolved quickly and successfully by contacting either Housing21 or Inspiral Oldham. If there is a problem with the service provided by the Housing partner then the Contracts Manager for Strategic Housing can help. The contact details for the Contracts Manager – Strategic Housing are below:

Email            [Housing@oldham.gov.uk](mailto:Housing@oldham.gov.uk)

Post              Contracts Manager – Strategic Housing  
Place and Economic Growth  
Oldham Council  
Spindles Shopping Centre,  
West Street,  
Oldham,  
OL1 1LF

- 8.2 Should the Contracts Manager for Strategic Housing be unable to resolve the issue as a service request to the resident's satisfaction, they will make the Council's Complaints Team aware of the resident's outstanding concerns.
- 8.3 If residents wish to raise a complaint with the Complaints Team, they are asked to do so via the online form at [https://www.oldham.gov.uk/info/200143/complaints\\_and\\_feedback/630/complaints\\_or\\_feedback\\_about\\_the\\_council](https://www.oldham.gov.uk/info/200143/complaints_and_feedback/630/complaints_or_feedback_about_the_council).
- 8.4 Complaints can also be submitted by post to The Complaints Team, Spindles Shopping Centre, West Street, Oldham, OL1 1LF.
- 8.5 Alternatively, residents can raise a complaint by calling the Council's Customer Service Centre on 0161 770 8122.
- 8.6 Where a resident raises their concern with any other member of staff, their concerns will be forwarded to the Complaints Team and Contracts Manager for Strategic Housing in order they can be logged and appropriately actioned.
- 8.7 When raising a complaint, residents are asked to provide any relevant supporting evidence/ documentation at the time of making the complaint in order that the issues raised can be fully investigated.
- 8.8 Residents sometimes make contact about Council services on social media, for example, via the Council's Twitter or Facebook accounts. Details of this type of contact will be forwarded to the relevant service by the Communications Team to determine if the contact should be treated as a request for service or handled as a complaint. If the contact should be treated as a complaint, the service will ensure that the Complaints Team is made aware, and the complaint will be handled offline and in keeping with this policy.

## **9.0 What a resident can expect**

- 9.1 Residents can expect to receive a consistently good quality service when they contact any member of staff with a complaint and we will deal with all complaints promptly, respectfully and efficiently.
- 9.2 Where complaints cover multiple issues, we will normally provide residents with a single response.
- 9.3 If a complaint includes multiple issues relating to areas covered by other complaints legislation, for example, Adult Social Care, then those issues will be managed separately.
- 9.4 Residents can expect to be asked for supporting evidence or additional information where it is felt this is required to complete a robust investigation. Residents will be provided with a timeframe in which to provide the evidence/ information. If the requested evidence/ information is not provided, and it is deemed as vital to complete an investigation, the complaint may be placed on hold until the Council feels it has sufficient information to enable it to investigate fully.
- 9.5 Should residents decline to provide information that is required to complete a complaint investigation, they may be deemed as not engaging with the complaints process.
- 9.6 A full record will be kept of the complaint, and the outcomes at each stage. This will include the original complaint and the date received, all correspondence with the resident, correspondence with other parties, and any relevant supporting documentation such as reports or surveys.

## **10.0 Complaint resolution process**

- 10.1 The Council operates a two stage housing complaints procedure for its tenants.
- 10.2 Formal complaints will be logged at Stage 1 of the complaints process.
- 10.3 Complaints will be acknowledged, defined and logged at Stage 1 of the complaints process within five working days of receipt.
- 10.4 As part of the acknowledgement process, we will set out our understanding of the complaint and desired outcome, where sufficient information has been provided for us to do so. Where sufficient information has not been provided for us to define the complaint, residents will be asked to confirm the details of their complaint and the outcomes they wish to achieve.
- 10.5 As part of the acknowledgement process, we will also clarify which aspects of the complaint the Council is or is not responsible where this is not clear.
- 10.6 Once the full details of the complaint have been obtained, the Complaints Team will allocate the complaint to the relevant service manager for a Stage 1 investigation.
- 10.7 Where possible, a Stage 1 response will be communicated to the resident within 10 working days from the date that the complaint has been acknowledged. If this is not possible, an explanation and a date by when the Stage 1 response will be provided, together with the contact details of the Housing Ombudsman, will be provided to the

resident and agreement sought; this will not usually exceed a further 10 days unless there is good reason.

- 10.8 Where a resident raises additional complaints during the investigation, these will be incorporated into the Stage 1 response if they are related and the response has not been issued. Where the Stage 1 response has been issued, the new issues are unrelated to the issues already being investigated or it would unreasonably delay the response, the new issues will be logged as a new complaint.
- 10.9 Should a resident wish to escalate their complaint to Stage 2, we ask that an escalation request is made within 4 weeks of the Stage 1 response being received.
- 10.10 Requests for Stage 2 will be acknowledged, defined and logged at Stage 2 of the complaint's procedure within five working days of the escalation request being received.
- 10.11 When acknowledging a Stage 2 complaint, we will set out our understanding of the unresolved issues and desired outcomes, where sufficient information has been provided for us to do so. Where sufficient information has not been provided, residents will be asked to confirm their outstanding points of complaint and desired outcome. Provision of this information will help to ensure the Stage 2 response is robust and suitably addresses the complaint.
- 10.12 In some circumstances, it may not be appropriate to escalate a complaint; for example, escalation to Stage 2 would be deemed inappropriate where:
- The matter would more appropriately be dealt with by an insurer
  - Matters have progressed to court/ legal proceedings (for example, details of the claim, such as the Claim Form and Particulars of Claim, have been filed at court)
  - Investigations by other appropriate bodies, for example, the Police, have commenced into the same matter
  - The resident has previously withdrawn the complaint after receiving the Stage 1 response
- 10.13 The member of staff considering the complaint at Stage 2 will not be the same person that considered the complaint at Stage 1.
- 10.14 Where possible, the Stage 2 final response will be communicated within 20 working days of the complaint being acknowledged. If this is not possible, an explanation and a date by when the Stage 2 response should be received will be provided, together with the contact details of the Housing Ombudsman, to the resident and agreement sought; the extension will not exceed a further 20 days without good reason.
- 10.15 Stage 2 is the Council's final response; should a resident remain dissatisfied with the outcome of their complaint, they are able to contact the Housing Ombudsman, whose details can be found at paragraph 12.2.

## **11.0 Third Party complaints**

- 11.1 Where we receive a complaint relating to work carried out by a third party we have commissioned to provide services on our behalf, the complaint will be dealt with in accordance with this policy.

- 11.2 In order for the matters to be investigated, we will need to share the details of the complaint with the third party organisation and will seek agreement from the resident to do this.
- 11.3 In the first instance, we will ordinarily ask the third party provider to investigate the issues raised and inform us of the findings.

## **12.0 The role of the Housing Ombudsman Service**

- 12.1 The Housing Ombudsman Service is set up by law to look at complaints about housing registered organisations.
- 12.2 The Housing Ombudsman Service can assist residents throughout the life of a complaint and can be contacted:

By phone 0300 111 3000 (9.15am-5.15pm: Monday to Friday)  
By post Housing Ombudsman Service  
PO Box 152  
Liverpool  
L33 7WQ

By email [info@housing-ombudsman.org.uk](mailto:info@housing-ombudsman.org.uk)  
Online [www.housing-ombudsman.org.uk/residents/make-a-complaint/](http://www.housing-ombudsman.org.uk/residents/make-a-complaint/)

## **13.0 Remedies**

- 13.1 Where something has gone wrong, we will set out the actions we have already taken, or intend to take, to put things right.
- 13.2 We will offer appropriate remedy and redress, in accordance with the Housing Ombudsman's Complaint Handling Code.
- 13.3 The general principle is that any remedy offered should reflect the extent of all service failures, and the impact these faults have had on the resident.
- 13.4 Examples of remedies include:
- Apologising and acknowledging where things have gone wrong
  - Providing an explanation, assistance or reasons
  - Taking action if there has been delay
  - Reconsidering or changing a decision
  - Amending a record or adding a correction or addendum
  - Providing a financial remedy
  - Changing policies, procedures or practices
- 13.5 In considering any financial remedy, we will assess whether statutory payments are due and if any quantifiable losses have been incurred. Consideration will also be given to the time and trouble a resident has been put to and any distress and inconvenience caused.

13.6 The service will agree the proposed remedy before a response is issued to the resident. Where agreement cannot be reached between the Complaints Manager and investigating officer, this will be escalated through the relevant senior line management structure for a final decision.

#### **14.0 Withdrawal of complaints**

14.1 Residents may decide to withdraw their complaint verbally or by email or letter. We will confirm the withdrawal of the complaint by email or letter. In some instances, we may continue to investigate the matter internally.

#### **15.0 Monitoring and Performance**

15.1 The monitoring and review of complaints and service requests gives valuable information about resident perception and service performance and helps to identify areas for organisational learning to drive service improvement. We will look beyond the circumstances of the individual complaint and consider whether service improvements can be made as a result of any learning from the complaint.

15.2 The Housing Ombudsman expects landlords to carry out regular self-assessment against its Complaint Handling Code and take appropriate action to ensure compliance. A suitably senior lead person is accountable for our complaint handling. This person will assess any themes or trends and work with colleagues to identify potential systemic issues, serious risks, or policies and procedures that require revision.

15.3 The Housing Ombudsman expects that the Member Responsible for Complaints is appointed to have lead responsibility for complaints to support a positive complaint handling culture.

15.4 The Housing Ombudsman expects local authority landlords to report the outcome of their self-assessments to elected members.

15.5 An annual report regarding complaints performance and service improvement will be produced and shared with the Governance, Strategy and Resources Scrutiny Board. A copy will also be published on the Council's website. The annual report will include

- The annual self-assessment against the Housing Ombudsman's Complaint Handling Code
- A qualitative and quantitative analysis of complaint handling performance
- Any findings of non-compliance with the Housing Ombudsman's Complaint Handling Code
- The service improvements made as a result of the learning from complaints
- Information regarding the landlord's performance from the Housing Ombudsman
- Any other relevant reports or publications produced by the Housing Ombudsman in relation to the work of the Council as a landlord.

15.6 The annual self-assessment against the Housing Ombudsman's Complaint Handling Code will be reviewed following any significant restructure and/or change in procedures.

15.7 Additionally, information relating to complaints will be shared with the Regulator of Social Housing as required.

**16.0 Review of policies**

16.1 The Council's Housing Complaints Policy will be published on its website ([www.oldham.gov.uk](http://www.oldham.gov.uk)).

16.2 Residents will be issued with the policy annually. Information will also be provided in notice boards in communal areas.

16.3 This policy will be reviewed annually (or as a change is required).



# **Children’s Residential Homes Complaints Policy**

**Date: 4 December 2025**

**Review date: 4 December 2026**

# Oldham Council Children’s Residential Homes Complaints Policy

## 1.0 Introduction

- 1.1 At Oldham Council, we want to ensure that we provide a high quality service to children and young people, and those that support them but we recognise that sometimes, things can go wrong.
- 1.2 The feedback we receive from children and young people is important in helping us to uphold high standards and understanding how well our services are working. The feedback we receive can help us to identify any problems and identify opportunities to learn and improve for the future.
- 1.3 The policy reflects national guidance and expectations set out in *Working Together to Safeguard Children (2023)*, which emphasises joint working across agencies to achieve positive outcomes and ensure that children and young people are supported to thrive and overcome challenges.
- 1.4 Ensuring that we have an effective complaints and representations procedure is one of the main ways in which we can ensure that the voices of children and young people are heard, and that they are able to contribute to the process of identifying improvements needed to the way in which our services are delivered.

## 2.0 Purpose of the policy

- 2.1 This document replaces all previous Children’s Homes Complaints and Representations Policies and Procedures and has been produced in line with requirements of The Children’s Homes Regulations, Regulation 39 Complaints and Representations and The Children Act 1989 Representations Procedure (England) Regulations 2006.
- 2.2 It provides general information about how we will handle complaints and representations made to our residential establishments and explains what happens at each stage in the complaints process.

## 3.0 What is a complaint?

- 3.1 We use the term ‘representation’ when referring to feedback provided by children and young people or other people who may come into contact with our residential establishments.
- 3.2 Representations may not always be complaints; they might also be positive remarks or ideas that require a response from the local authority (Getting the Best from Complaints 2006).
- 3.3 When deciding what is a complaint, we use the definition provided by the Local Government and Social Care Ombudsman.

*‘A complaint is an expression of dissatisfaction by one or more members of the public about the Council’s action or lack of action or about the standard of a service, whether the action was taken, or the service provided by the Council itself or a person or body acting on behalf of the Council.’*

- 3.4 Complaints may, for example, be about:
- The actions of staff
  - A failure to do something we should have done
  - The quality of a service we have provided
  - A failure to follow the correct policy or procedure
- 3.5 There may be some issues raised with us that would best be dealt with in a different way. We would not deal with the following issues under the complaints process:
- An initial request for a service (this is generally the first contact we receive asking that a service be considered or carried out)
  - Requests for information (these will be dealt with by the Information Management Team according to the requirements of the Freedom of Information Act 2000 or Data Protection Act 2018 and accompanying policies, depending on the nature of the request). Where there is a crossover of issues the Complaints Team and Information Management Team will work together to resolve it.
  - Employee grievances
  - Matters that would more appropriately be dealt with by an insurer
  - Matters relating to court proceedings, or other legal proceedings, or investigations by other appropriate bodies, for example, the Police
  - Matters relating to proceedings under section 59 of the Care Standards Act
  - Matters upon which a Court is in the process of considering
  - Complaints that have been previously withdrawn
  - A complaint that has already been investigated and a final response has been issued
  - Where the issues involved are covered by the Council's disciplinary policy.
  - Where the behaviour of a person making a complaint prevents us from being able to give proper and reasonable consideration of the issue.
- 3.6 Complaints should be made within 12 months of the person wanting to make a complaint becoming aware of the issue. However, if there is a good reason why the complaint could not have been made earlier, and we have enough evidence available to look into the complaint, we may decide to investigate.
- 3.7 If for any reason we decide not to deal with a complaint under this policy, we will explain this in writing.
- 3.8 We acknowledge that most people work positively with staff members to resolve their complaint but if a person's behaviour towards staff become unreasonable (for example, threatening behaviour towards staff, unreasonable levels of communication and/ or malicious allegations), this may change the way we deal with the complaint and we might take action in line with the Council's unreasonable behaviour policy.

## **4.0 Anonymous complaints**

- 4.1 We understand that sometimes, people find it difficult to make a complaint. Where a person does not want to let us know their name or contact details but we have information about what their concerns are, we still try to make enquiries into the problems that have been raised, where we feel this would be helpful.
- 4.2 If we are not provided with a person's name or contact details, we will not be able to let them know the outcome of the investigation.

## **5.0 Equalities and diversity and reasonable adjustments**

- 5.1 We understand that people may find it difficult to make complaints for a number of reasons. For example, they might have some communication needs which mean they find it difficult to communicate in a certain way.
- 5.2 When dealing with complaints we will make sure that we pay attention to the Equalities Act 2020 and where a person needs help to make a complaint, we do our best to support them to do so. We will discuss possible support options with the person wanting to make a complaint and make decisions about the support we can provide on an individual basis.
- 5.3 Reasonable adjustments will be agreed on a case-by-case basis in consultation with the resident. In accordance with Section 20 of the Equality Act, these may include large print, translation, interpreter services, advocacy, or alternative formats. Adjustments can be requested via the online form, by phone, or by contacting the Complaints Team directly.

## **6.0 Advocacy support**

- 6.1 Where a child or young person raises a complaint or representation with us directly, we will inform them of their right to speak with an advocate. An advocate can help a child or young person to raise issues and provide them with advice and support during the complaints process. The advocacy service is independent of the Council and is confidential.
- 6.2 If a child or young person wishes to raise a complaint, we would always suggest that they speak with an advocate in the first instance as they may be able to help them to solve the problem quickly and easily.
- 6.3 Statutory guidance about advocacy provision can be found in 'Get it Sorted: Providing Effective Advocacy Services for Children and Young People making a Complaint under The Children Act 1989'.
- 6.4 We will only respond to complaints and representations made by a representative/advocate if we are satisfied they are acting in the best interests of the child or young person, that they have no identified conflict of interest and we have permission for them to act on the child or young person's behalf.

## **7.0 Responding to complaints and representations made by children and young people.**

- 7.1 We will always try to deal with and resolve concerns received from a child or young person as quickly and informally as possible.
- 7.2 We will aim to response to all complaints made by children and young people within 10 working days but if the problem or situation is complicated, we may need up to 20 working days.
- 7.3 If we cannot respond to the complaint within 10 working days, we will let children and young people know and explain any delays to them.

### **Informal resolution**

- 7.4 If a child or young person has any concerns, they should speak with the senior member of staff on duty. When dealing with the concerns raised, the member of staff will:
- Speak to the child or young person about their concerns and ask how they would like the problem to be resolved.
  - Provide reassurance and make sure the child or young person feels listened to and that their concerns are being taken seriously.
  - Act quickly to resolve the problem where they are able to. If they cannot resolve the problem straight away, they will let the child or young person know what the next steps are and how long they might take.
  - Consider if there are any safeguarding issues and if there are, take appropriate action in line with safeguarding policies.
  - Update records in the complaint file.
  - Provide information to the child or young person regarding the complaint process and where appropriate, offer advocacy support.
  - If the complaint cannot be resolved at this stage, it can progress to the next stage of the process.
- 7.5 If the complaint is about the senior member of staff on duty, the child or young person is able to ask to speak to the manager instead.

### **Stage 1 investigation**

- 7.6 If the problem cannot be resolved informally and the child or young person wants to continue with a complaint, we will suggest that they speak with an advocate so that they can decide if they would like any support.
- 7.7 If the child or young person wants to make the complaint themselves, or if their advocate does this on their behalf, the manager of the residential home will be asked to look into the issues raised (this is known at stage 1 of the complaints process).
- 7.8 Where the complaint is about the Home Manager, it will be sent to the relevant Head of Service so that they can investigate the complaint and respond to the child or young person.

- 7.9 Most of the time, the manager or Head of Service will be able to resolve complaints by speaking with the child or young person but where it would be helpful, or if the child or young person requests it, they will explain the findings of their complaint investigation in a letter.
- 7.10 When investigating a complaint, the manager will:
- Speak with the child or young person to check they understand their concerns and how they would like them to be resolved.
  - Explain to the child or young person what will happen next and ask how they would like to receive feedback from the complaint investigation (this could be in person or by letter).
  - Review any actions taken to try to resolve the problem informally.
  - Speak with other people to gather information (if needed).
  - Look at relevant documentation, including any policies that are available about the problem being complained about.
  - Update any records/ paperwork in the complaint file.
  - Provide a response to the child or young person as soon as possible.
- 7.11 If the complaint cannot be resolved at Stage 1, the child or young person will be told of their right to take their complaint to Stage 2.

### **Stage 1 review**

- 7.12 If the manager has not been able to resolve the complaint at Stage 1 and the child or young person wants to take their complaint further, then the manager will pass the details of the complaint to the Head of Service.
- 7.13 The Head of Service will review the complaint and the actions taken by the manager to try to resolve the problem. The Head of Service may wish to meet with the child or young person to discuss their complaint and find out how they would like the problem to be resolved.
- 7.14 The Head of Service will send the details of the complaint to the Responsible Individual (Assistant Director) and let them know what has been done to try to resolve matters.
- 7.15 As part of the review, the Head of Service will:
- Review the actions taken at Stage 1.
  - Write to the child or young person to explain the findings of their complaint investigation and let them know what action will be taken next.
  - Update any records/ paperwork in the complaint file.

## **8.0 Further Progression**

- 8.1 If the child or young person is still unhappy with the response to their complaint, the Head of Service will contact the Complaints Team.
- 8.2 Some complaints might need to be looked into under the statutory children's complaints process. The Complaints Team and Head of Service will decide whether the problem being

complained about needs to be considered through the statutory children's complaints process.

- 8.3 If the problem being complained about does need to be considered through the statutory children's complaints process, the child or young person will be told of the next steps, which will be for their complaint to enter the statutory process at stage 2.
- 8.4 For complaints that do not need to be considered through the statutory complaints process, children and young people will be told of their right to contact the Local Government and Social Care Ombudsman and ask that their complaint be reviewed.
- 8.5 If the child or young person has an advocate, they should be kept involved and updated throughout every stage of the complaint process.

## **9.0 Responding to Complaints from other eligible parties (parents, carers, and others)**

- 9.1 Complaints and representations from other eligible people may be received in the following ways:
  - In person
  - By telephone
  - By letter
  - By email
  - Via the Council's website
- 9.2 Where concerns are raised by other people, efforts will be made to resolve the matter informally.
- 9.3 If the matter cannot be resolved informally, the person will be advised of their right to take their complaint to Stage 1.
- 9.4 A Stage 1 complaint will be investigated and responded to within a maximum of 20 working days by the manager of the home or nominated staff member. Upon receipt of a complaint, the manager/nominated staff member will:
  - Acknowledge receipt of the complaint, confirm the details of the complaint and ask what outcome is being sought to resolve matters.
  - Meet with the complainant where this is felt to be helpful.
  - Investigate the complaint, including speaking with others involved as appropriate.
  - Provide the complainant with a written outcome within 20 working days.
  - Complete any relevant paperwork/records in the complaint file.

### **Stage 2 review (corporate)**

- 9.5 Where the complaint is not resolved, and further progression is requested, the complaint and the initial response will be reviewed by the Head of Service who will advise regarding any further action that can be taken to resolve matters.
- 9.6 The Head of Service will notify the Responsible Individual (Assistant Director) and the Complaints Team regarding the complaint.
- 9.7 As part of the review, the Head of Service will:
- Review the findings and actions taken at Stage 1.
  - Provide their response in writing, outlining any further action to be taken.
  - Update any records/ paperwork in the complaint file.
- 9.8 The response letter should advise the complainant that should they remain dissatisfied with the response, they can contact the Council's Complaints Team to discuss any next steps and advise of their right to contact the Local Government and Social Care Ombudsman.

## 10.0 Monitoring and Recording of Complaints and Representations

- 10.1 We want to make sure we learn from the feedback we receive and so we have monitoring and recording systems in place to capture information about the complaints received.
- 10.2 As well as an annual report, the Complaints Team sends a quarterly report to Senior Managers within Children's Social Care which provides relevant complaint information. To ensure that these reports contain relevant information about residential establishment complaints, managers of residential homes are asked to send details of the complaints and representations they have received. The details should include, the number of complaints and representations received, complaint themes and outcomes.
- 10.3 Additionally, where requested, the Registered Person of each residential establishment must send a statement containing a summary of any complaints made during the preceding twelve months, and the action that was taken in response to each complaint, to HMCI (Ofsted).

### Annex A: Complaint Forms

<b>Complainant Report form</b>	 complaint_report form.doc
<b>Investigation Report Form</b>	 COMPLAINT INVESTIGATION FOF

**Annex B: Details of appropriate services to support a child or young person.**

Who	Contact Information
<p><b>Oldham Council's Complaints Procedure</b></p>	<p><a href="mailto:customer.feedback@oldham.gov.uk">customer.feedback@oldham.gov.uk</a></p> <p>Customer Feedback, Oldham Council Offices, Spindles Shopping Centre, Oldham, OL1 1HD</p>
<p><b>Children's Rights Advocacy &amp; Independent Visitor Service</b></p>  <p>Independent Visitor - Leaflet.docx</p>	<p><b>Empire Business Park</b></p> <p><b>Burnley</b></p> <p><b>Lancashire</b></p> <p><b>BB12 6HH</b></p> <p><b>07955 081 356</b></p> <p><b>07871 621 613</b></p>
<p><b>Childrens Safeguarding Unit</b></p> <p><b>Young people can also contact their Reviewing Officer (IRO)</b></p>	<p><a href="mailto:Childrens.Safeguarding@oldham.gov.uk">Childrens.Safeguarding@oldham.gov.uk</a></p> <p><b>0161 627 0019</b></p> <p><b>Rock Street Centre</b></p> <p><b>Rock Street</b></p> <p><b>OLDHAM</b></p> <p><b>OL1 3UJ</b></p>
<p><b>Independent visitor</b></p>	<p><a href="mailto:oldhamchildrensrights@cuffeandlacey.com">oldhamchildrensrights@cuffeandlacey.com</a></p>
<p><b>Children's Commissioner for England</b></p>	<p><b>Dame Rachel Da Souza</b></p> <p><b>Sanctuary Buildings</b></p> <p><b>20 Great Smith Street</b></p> <p><b>London</b></p> <p><b>SW1P 3BT</b></p>

	<b>020 7783 8330</b> <b>0800 528 0731</b>
<b>Young people can contact OFSTED</b>	<b>0300 123 1231</b>  <b>National Business Unit</b> <b>Piccadilly Gate</b> <b>Store Street</b> <b>Manchester</b> <b>M1 2WD</b>

**Annex C: Relevant Legislation**

- Children’s Homes (England) Regulations 2015 including Quality care standards
- Children Act 1989
- Complaints and Representations 2006 Getting The Best from Complaints

## Annex D: Process Flow Charts



