



# Complaints

Section	Policy Manual Section 01.10	
Version/Date	4.0/October 2016	
History	Draft Policy prepared	5 February 2009
	Final Policy adopted	16 February 2009
	Draft Policy Prepared	14 February/21 March 2013
	Revised Policy adopted	13 October 2016
Review Schedule	Three-yearly or as required	
Purpose	<i>The Complaints Policy outlines the procedures for making a formal complaint about the Trust, its staff, its services or any decision.</i>	

## 1.0 Objectives

- 1.1 The Complaints Policy and associated procedures are intended to ensure any complaints received about the work of the Trust are handled in a prompt and professional manner, resulting in a fair, common sense resolution.

## 2.0 Procedures

- 2.1 Often the quickest and most satisfactory way of dealing with complaints is for the person (the complainant) to deal directly with the staff member or Trustee (the subject) who provided the service which has given rise to the complaint. This gives the staff member or the Trustee and the person the opportunity to discuss the matter and to come to a quick resolution. It also enables both parties to understand the issues and assists in ensuring that mistakes are not repeated.
- 2.2 If the person does not feel satisfied with the response, then he or she should send a letter or e-mail providing as much detail as possible of the complaint to the Chief Executive. Upon receiving a written complaint, the Chief Executive will immediately notify the complainant in writing that the complaint has been received and will outline the investigative process and timeline.
- 2.3 The Chief Executive will inform in writing the person who is the subject of the complaint about the precise nature of the complaint. Unless there are good reasons for not doing so, the subject will receive a copy of the written complaint, which includes the identity of the complainant.
- 2.4 The Chief Executive will evaluate the complaint and, after appropriate consultation, will respond to it in writing within 1 month of receipt.
- 2.5 If the complainant is not happy with the Chief Executive's response to the complaint then he or she should advise the Chief Executive in writing. At this stage the complaint will be referred to the Trust Board for its formal consideration.

The Trust Board may undertake its own investigations and may ask to meet with the complainant, who may be represented by, or have support from, others. The Trust Board's investigations should be completed within 3 months of the request for consideration.

- 2.6 If the complaint is about the Chief Executive, then the complaint will be referred to the Chair and/or Deputy Chair, and then the Trust Board for its formal consideration under section 2.5, above.
- 2.7 If the complaint is about a Trustee or the Deputy Chair, then the complaint will be referred to the Chair, and then the Trust Board for its formal consideration under section 2.5, above.
- 2.8 If the complaint is about the Chair, then the complaint will be referred to the Deputy Chair, and then the Trust Board for its formal consideration under section 2.5, above.
- 2.9 The Trust Board's decision in relation to the complaint will be final, and the complainant and the subject(s) will be notified of this decision.
- 2.10 At all stages of this process the persons involved are to be treated with respect, and supported throughout the process. All steps will be taken by the Trust Board and its staff to expedite the fair and reasonable resolution of any complaints.
- 2.11 The Chief Executive shall keep a record of all written complaints and report on them to six monthly performance review meetings.

### **3.0 Fraudulent or other illegal activity**

- 3.1 If the complainant is reporting a suspected fraudulent or other illegal activity, then the Trust's policy on Fraud Identification and Response will be followed. An extract from this policy follows:

#### **Fraud Identification and Response**

##### **1. Background**

The intention of the Fraud Identification and Response Policy is to:

- i) provide a clear indication to employees and trustees of the Trust that suspected fraud is a serious matter and must be reported to the appropriate person;
- ii) define fraud and provide examples of potentially fraudulent activity;
- iii) provide a process for notification of suspected fraud or illegal conduct; and
- iv) provide a process for the investigation and management of a suspected fraud or illegal conduct.

Fraud is a wide concept and as such is not easily capable of a precise legal definition. However, fraud is generally understood to be any deliberate action or omission designed to deceive so as to gain some direct or indirect personal gain, benefit or advantage, or cause loss to another party.

A fraud therefore will typically have three elements, intent, deceit, and gain. Examples of fraud may include but are not limited to:

- i) theft or misappropriation of Trust funds or other assets;
- ii) forgery, manipulation or unauthorised alteration of any document;
- iii) accepting or offering bribes or inducements;
- iv) irregularities in the handling and reporting of money;
- v) misrepresentation of timesheets or expense claims;
- vi) abuse of a conflict of interest;
- vii) presenting false credentials or qualifications;
- viii) issuing, approving or paying false or deliberately misleading invoices; or
- ix) misuse or disclosure of confidential information.

## 2. Reporting and Investigation Principles

Trust Waikato regards fraud as totally unacceptable and has a zero tolerance to criminal breaches of business practices.

...Once reported, all allegations of fraud will be thoroughly and fairly investigated and documented as appropriate...

## 4.0 Related policies

4.1 This Complaints Policy forms part of the Trust Waikato Policy Manual and should be read in conjunction with the following related policies:

- Delegations of Authority
- Donations Policy
- Governance Manual
- Privacy Policy
- Fraud Identification and Response

Policy	Complaints	
Version Control		
Draft	Draft Policy	?
1.0	Original Policy adopted/amended	?
2.0	Policy (updated) adopted	16 February 2009
3.0	Policy revised	Feb/March 2013
4.0	Policy revised	October 2016
Review Schedule		
A	Three-yearly	2019