



# Complaints Handling Procedure

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## Document Information

### Document Review:

This document requires the following reviews and approvals.

| Name       | Role                        |
|------------|-----------------------------|
| [REDACTED] | Head of Governance          |
|            | Council Complaint Leads     |
|            | Chief Operating Officers    |
|            | Information Governance team |
|            | Legal team                  |

This procedure has been noted by:

| Committee                                     | Date          |
|-----------------------------------------------|---------------|
| People, Finance and Operation Committee (PFO) | 10 March 2022 |

## Document Circulation / Readership

The intended circulation / readership for this document are additionally as follows:

- Chief Operating Officers
- Council Complaint Leads
- Heads of Governance



## **1. Introduction**

- 1.1. UKRI is committed to operating a responsive, transparent and fair complaints process. We aim to treat all complaints seriously and confidentially.
- 1.2. UKRI aims to ensure that stakeholders are able to raise their concerns to the organisation and have them thoroughly and effectively investigated.
- 1.3. This procedure emphasises the importance of early resolution of concerns and complaints and sets out the performance standards; the individual roles and responsibilities of staff involved; the reporting and assurance processes in place to ensure compliance and the means by which learning from complaints can be realised.
- 1.4. The Complaints Procedure can be used to complain about our standards of service or activities.
- 1.5. We follow the [Parliamentary and Health Service Ombudsman \(PHSO\) Principles of Good Complaint Handling](#). The principles are as follows:
  - Getting it right;
  - Being customer focussed;
  - Being open and accountable;
  - Acting fairly and proportionately;
  - Putting things right; and
  - Seeking continuous improvement.
- 1.6. Some areas of UKRI are still operating legacy complaint systems. These include NERC BGS and BAS and STFC ISIS. For details of their individual complaint processes, please visit their respective complaint webpages (see references section).

## **2. Aim of the Procedure**

- 2.1. The aim of this procedure is to ensure that complaints handling complies with national good practice, whilst being efficient, flexible and understanding of individual's needs.
- 2.2. By applying this procedure, we will ensure that:
  - Complainants and their representatives' concerns and complaints are resolved at the earliest opportunity;
  - People who complain are listened to and treated with courtesy;
  - Complainants are kept informed of the progress and outcome of the investigation;
  - Staff involved in complaints are given support (where necessary);
  - Actions to rectify the cause of the complaint are identified, implemented where reasonably practicable and evaluated;
  - Learning from complaints informs service development and improvement and the personal and professional development of staff.
- 2.3. The procedure provides a broad guide to investigating complaints, but there is a wealth of PHSO best practice guidance online, which those involved in the management and investigation of complaints can read and utilise.

### 3. Definitions

|                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Complaint</b>                                  | An expression of dissatisfaction, that will be put in writing, about the standard of service, decision making process, action or lack thereof by UKRI and others who act on our behalf                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>Enquiry</b>                                    | <p>These are / concerns which are incorrectly raised with UKRI. This includes allegations / escalations of research misconduct issues, complaints about the actions / decisions of individuals or organisations we fund. There is no direct link to UKRI.</p> <p>These will be recorded as enquiries on the electronic case management system.</p>                                                                                                                                                                                                                                                                                                            |
| <b>Business as usual concern (Non complaints)</b> | <p>These are out of scope of formal complaints procedure but raises concerns which are correctly / appropriately addressed to UKRI and require a response. There is an explicit link with UKRI.</p> <p>We will signpost the individual to the correct process or organisation. (e.g. Funding opportunities or other UKRI teams)</p>                                                                                                                                                                                                                                                                                                                           |
| <b>In scope complaints</b>                        | <p>UKRI will accept complaints about the following:</p> <ul style="list-style-type: none"> <li>▪ we have not followed agreed policies, procedures or legal obligations</li> <li>▪ a UKRI employee has been unhelpful or insensitive in their dealings</li> <li>▪ we have not responded or have taken an unreasonable amount of time to answer a query or request</li> <li>▪ an individual is dissatisfied with how we have handled a <a href="#">data protection</a>, <a href="#">environmental information</a> or <a href="#">freedom of information</a> request</li> </ul>                                                                                  |
| <b>Complaints out of scope of the Procedure</b>   | <p>UKRI will not accept complaints about the following:</p> <ul style="list-style-type: none"> <li>▪ Complaints regarding a disagreement with a decision of the UKRI Board, or that of our Council's, Committees or Panels (including peer review and assessors).</li> <li>▪ Complaints regarding disagreement with peer review comments or application feedback.</li> <li>▪ A matter which is currently subject to litigation or legal proceedings.</li> <li>▪ Complaints relating to decisions by the research organisations we fund.</li> <li>▪ The matter has previously been through our complaints procedure in line with this procedure and</li> </ul> |



|  |                                                                                                                                                                                                                                                                                             |
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|  | <p>has been closed.</p> <ul style="list-style-type: none"><li>▪ Complaints made by UKRI staff which are better managed via other policies and procedures, such as grievances.</li><li>▪ UKRI will not respond to anonymous complaints, please see the UKRI Whistleblowing Policy.</li></ul> |
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3.1. Where a complainant is raising issues in regard to the below areas, the UKRI Complaints team should either transfer or signpost the case to the following processes.

- Where the individual is providing feedback this should be directed to the relevant council / team for consideration and response.
- Where the individual is a member of UKRI staff, their concerns may be better managed via another UKRI policy or procedure, for example, [our grievance procedure \(PDF, 343KB\)](#)
- Where an anonymous complaint is submitted, this should be considered in light of the UKRI Whistleblowing Policy;
- For complaints related to research conduct, complainants will be directed to [our policy and guidance on governance of good research conduct](#).

#### 4. Local resolution

4.1. Staff are responsible for listening and working to resolve concerns raised by individuals as prompt action can prevent escalation to a complaint.

4.2. As part of this, staff should:

- actively listen and demonstrate a clear understanding of what the key issues are for the individual, and what outcomes they would like.
- have the scope to look for ways they can resolve complaints at the earliest opportunity.

4.3. On this basis, UKRI firstly asks that initial concerns and complaints are discussed directly with the UKRI employee who has been dealing with the issue, for example, on an enquiry, application or project. In the case of Innovate UK, the customer support service will provide a first point of contact.

4.4. When you first receive a complaint you should decide whether you can resolve it quickly, or if you need to give it a closer, more detailed consideration. Even where a complaint has been submitted to UKRI Complaints, there may still be scope to address this informally without the need for a formal complaint investigation and response, particularly where we are able to offer the complainant an outcome-focussed resolution (e.g. Where the individual has requested a grant extension but has not heard back or is requesting a call back from a specific team)

4.5. If you can answer or address the issues raised, it is good practice to confirm this with the person making the complaint and make sure they are satisfied that this resolves the matter.

- The Council complaint lead should send them a written response setting out how their complaint has been considered, the conclusions reached, the outcome and proposed actions. This can be done by email, simple form or letter in line with the person's preferences.
- Where a formal complaint was initially submitted, this should be recorded on the eCase system by the UKRI Complaints team as a formal complaint but with the resolution noted as resolved 'informally'.



- 4.6. In resolving a complaint locally or informally, we should still enable complainants to escalate their complaints to the formal stage if they remain dissatisfied and we should signpost the individual accordingly.

## **5. Formal Complaints Process**

- 5.1. The UKRI formal complaints process has two stages<sup>1</sup>:

- Investigation at a Council / departmental level and;
- Independent review.

## **6. Submitting a complaint**

- 6.1. As per the UKRI Make a Complaint [page](#), complaints should be submitted in writing, either by email to [complaints@ukri.org](mailto:complaints@ukri.org) or letters posted to the Deputy Director Risk and Assurance. Any complaints made via telephone will need to be followed up in writing so that they can be formally investigated.
- 6.2. Whilst we expect the majority of correspondence to be sent to the UKRI Complaints inbox, complaints may be received through individual Research Council inboxes. These complaints should be sent to UKRI Complaints to be triaged as per normal assessment processes.
- 6.3. We reasonably ask complainants to include the following information.
- the reason for making the complaint, providing a clear description of the issue and what outcome the individual would like to see;
  - the department of UKRI or the council the complaint relates to, including a contact name if known;
  - if this is a new issue or if it relates to a previous case (any relevance correspondence and/or reference numbers);
  - funding application, grant or project reference numbers where applicable;
  - contact details, including telephone number and email address;

## **7. How we will handle a complaint**

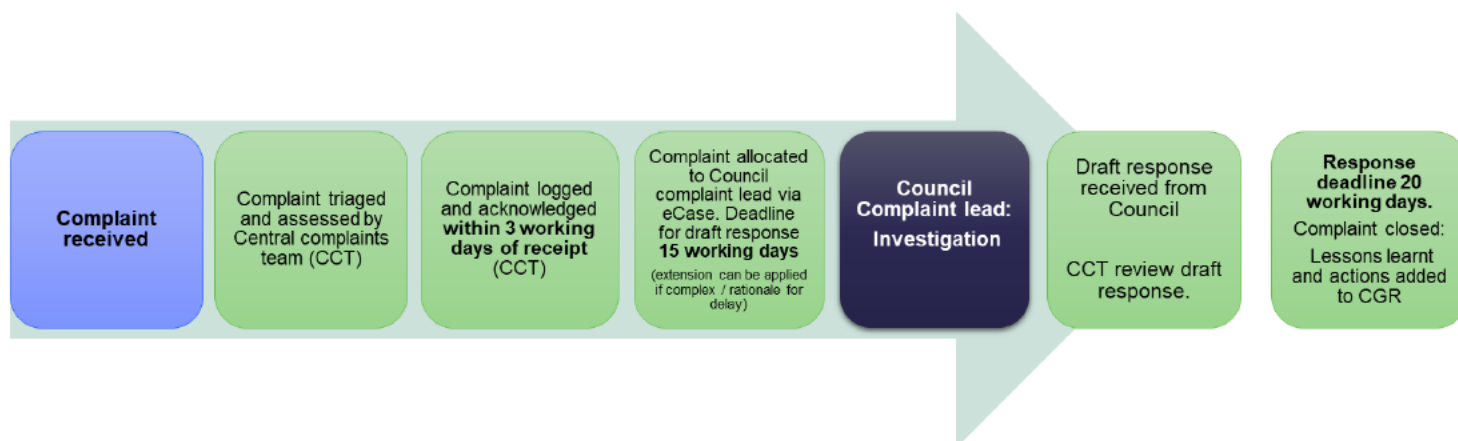
- 7.1. UKRI is committed to promoting equality and to ensuring our complaints policy and process is fair and accessible to all users. Any request for reasonable adjustments to support the complainant with their individual needs will be given due consideration.
- 7.2. Complaints must be registered from the date of receipt in UKRI on the electronic case management system. We routinely aim to provide a full response within 20 working days.
- 7.3. In assessing a complaint, UKRI may determine that longer than 20 working days is necessary. If it is not possible to provide a full response within this time, UKRI will update the complainant as to the following:
- a target date for when we are aiming to respond to the complaint;
  - details of the progress we have made to date (if applicable);
  - contact details if the individual wants to get in touch.

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<sup>1</sup> This may differ for those areas of UKRI still operating legacy complaint systems (including NERC BGS and BAS and STFC ISIS). For details of their individual complaint processes, please visit their respective complaint webpages (see references section).

7.4. Complaint extensions should be sought proactively with updates being given to complainants in advance of the agreed timescale.

7.5. The below summarises the process for complaints with a deadline of 20 working days.



UKRI will work with other organisations in order to resolve complaints that cross organisational boundaries. The process for the investigation will be agreed and the complainant's permission obtained before sharing the complaint with the other organisations.

7.6. Where there is no prior contractual agreement, the UKRI Complaints Team will negotiate with the other organisations on how the investigation is to be handled. A lead organisation will be agreed and the investigation outcomes incorporated into a single written response.

7.7. UKRI will be proactive in informing the complainant of the agreed plan for handling the investigation. Communication should be carefully considered to avoid any perception that UKRI is passing its own legal obligations and / or responsibilities to others.

## **8. Investigating Complaints**

8.1. A staff member with the relevant skill and experience will be nominated to lead complaint investigations.

8.2. When a complaint is received about a member of staff, details will be provided confirming the support available to them.

8.3. It is appropriate to apologise on behalf of UKRI when someone reports a poor experience. Apologies and explanations should be provided as to the investigation outcome and in line with good practice.

8.4. A single point of contact will be identified for all complainants with correspondence to be routinely sent to the UKRI Complaints email address.

8.5. Complete and accurate records must be kept on the eCase system to enable an audit of all complaints. The records must include:

- The original complaint;
- The summary of concerns to be investigated and acknowledgement of agreements made with complainants;
- Discussions with the complainant including telephone records;
- Statements and notes of interviews;
- Any technical or expert advice sought;
- Decisions and actions taken.



- 8.6. Annex 2 provides a broad checklist of things investigators should be considering when investigating and producing their response. Further good practice references for investigating have been produced by the PHSO and are included in the references section.

## **9. Preparing a Response**

- 9.1. All complaint responses must include a summary of the investigation findings, whether the complaint is upheld, partially upheld or not upheld, and actions taken to resolve the issues and prevent reoccurrence. The UKRI response template will be provided by the UKRI Complaints team and should be used to produce the final response. Whilst the response has some standard wording and best practice guidance included, it is not aimed to be prescriptive, particularly if the investigator(s) feels there is further information that it may be necessary to include or enclose.
- 9.2. It may be useful for Councils to have arrangements in place to review draft responses to complaints before final quality assurance by the UKRI Complaints team.
- 9.3. All draft responses that are to be sent from UKRI Complaints team will routinely be quality assured by the UKRI Complaints Team, normally the Senior Complaints Manager (or an agreed delegate).
- 9.4. Where concerns are received with implications from a Legal, Risk & Assurance, Communications or Equality, Diversity and Inclusion perspective, UKRI Complaints team will consider additional review or sign off through the relevant team (as required).
- 9.5. If any changes are made to the response, these will be approved by the Council Complaint Lead. If agreement cannot be reached the draft response will be referred to the Deputy Director Risk and Assurance for final decision.
- 9.6. UKRI will send out all final formal complaint responses (excluding for those areas with legacy complaints systems) from the UKRI Complaints mailbox.

## **10. Re-opening Complaints**

- 10.1. In some cases, complainants may request further clarification or may be dissatisfied with the outcome of an investigation. If a complainant requests further information about points in the complaint response, this may be done without having to re-open the complaint if this is a simple clarification.
- 10.2. Requests to reopen a complaint will be assessed by the Senior Complaints Manager or the Deputy Director Risk and Assurance in their absence. There should be a rationale to reopen a complaint and this should not simply be a case that the complainant disagrees or is dissatisfied with the outcome. This may include the following:
- Part of the original complaint has not been answered;
  - The complainant has provided new evidence or information that has not been considered as part of the review.
- 10.3. In both cases, or where it is otherwise appropriate to do so, due to information received, UKRI Complaints should consider re-opening the investigation and further investigation initiated.
- 10.4. If the complainant contacts UKRI with new issues not raised in the original complaint, this should be considered as a new complaint. Staff should however be aware of UKRI's process for managing vexatious complainants, which may need to be employed where complainants are considered to be unreasonably persistent (please see section 14. Special issues relating to complaints).
- 10.5. Where a complainant is seeking compensation / financial remuneration, the UKRI Complaints team should clearly outline in written correspondence that compensation cannot be sought through the UKRI Complaints process and the individual should be signposted to the UKRI Legal team.



## **11. Independent Review**

- 11.1. The Parliamentary and Health Service Ombudsman (PHSO) was set up by Parliament to make final decisions on complaints that have not been resolved by the NHS in England, UK government departments and other UK public organisations. They are independent of the government.
- 11.2. The PHSO are the final stage for unresolved UKRI complaints and there is an expectation that the complainant will have first contacted UKRI to try and resolve the issues. Where attempts for local resolution have been exhausted, the complainant can escalate their concerns to the PHSO. This should be made via their Member of Parliament. More information about how to do this is available from the PHSO website.
- 11.3. The PHSO will require evidence that UKRI has done its utmost to resolve a complaint before they will review the case.
- 11.4. The PHSO will consider aspects such as injustice to the individual, evidence of maladministration or service failures and the scope for resolving the complaint. They will require assurance that there is acknowledgement of the concerns and an apology where appropriate; evidence of learning or change and scope for financial remedy.
- 11.5. The escalation options available to the complainant must be communicated clearly once the UKRI Complaints process has been concluded in writing.
- 11.6. All requests from the PHSO will be coordinated by the UKRI Complaints Team.

## **12. Learning from complaints**

- 12.1. Quarterly high-level complaint data reports will be provided to the UKRI Complaints Forum and UKRI Organisational Learning Forum.
- 12.2. The UKRI Complaints Team will provide assurance to the UKRI Deputy Director Risk and Assurance that themes for complaints have been noted and acted upon as well as ensuring actions have been progressed to completion through the Research Council Complaint Leads or designated action leads, facilitated by the CGR risk management system.
- 12.3. The Council Complaint Leads will support shared learning from complaints by reporting the outcome of complaint investigations to the staff and teams involved, as well as supporting and monitoring that actions have been progressed to completion.
- 12.4. Complaints will be used to enhance and inform the personal and professional development of staff, and learning from complaints should be included in staff appraisals and professional development plans (where applicable).
- 12.5. An annual report for complaints in UKRI will be compiled by the UKRI Senior Complaints Manager.
- 12.6. When more than one organisation is involved in a complaint, consideration should be given to sharing the investigation recommendations and action plans with all parties.

## **13. Risk**

- 13.1. Where a complaint investigation reveals actual and potential risks, these must be reported to the Deputy Director Risk and Assurance or Research Council Complaint Lead, who will advise on the next steps.
- 13.2. Where significant risks are identified or remain following the implementation of action plans, these will be considered for inclusion on the appropriate Risk Register (Council or UKRI Corporate).
- 13.3. Data quality checks will be performed periodically on electronic case management data to ensure the accuracy and completeness of the data. The frequency and volume of checks should be based on the level of errors identified and adjusted accordingly.



13.4. Checks should be performed on the quarterly data reported as part of the quarterly performance dashboard as a minimum, with more frequent checks depending on the error rate.

#### **14. Special issues relating to complaints**

##### **14.1. Vexatious complaints procedure**

In line with PHSO Principles of Good Complaint Handling guidance, public bodies should have arrangements for managing 'unacceptable behaviour'. This only applies to a small minority of complainants who can be unreasonably persistent or behave unacceptably in pursuing their complaint.

14.2. The purpose of this process is to enable UKRI to have a clear and fair process for dealing with situations where a complainant might be vexatious and to recommend ways of handling those situations.

##### **14.3. Vulnerable and Distressed complainants**

This guidance provides information to support UKRI staff members who may deal with members of the public impacted by UKRI activity and who are very distressed. These contacts may need to be signposted to avenues of support, dependent on their needs and circumstances.

14.4. These issues may arise because UKRI has set out its commitment to promoting safe research and innovation environments, which are free from sexual exploitation, abuse and harassment, bullying, psychological abuse and physical violence, for all individuals that are employed on, participate in, or otherwise come into contact with, the research and innovation activities that we fund. Therefore, members of the public have contacted us and sought our intervention with concerns in their research organisations.

#### **15. Retention of Information**

15.1. UKRI understands the importance of confidentiality and protecting personal information and we are committed to complying with UK data protection legislation, including the UK General Data Protection Regulation (GDPR) and the Data Protection Act 2018.

15.2. As a public body UKRI has a duty to record and track any complaints or related correspondence we receive through the UKRI Complaint inbox. We store information about complaints and enquiries on our electronic case management and data storage systems. Only staff dealing with complaints and our professional advisors routinely have access to this information.

15.3. This information will be used for investigation, learning and reporting purposes and will be retained and disposed of in line with the UKRI Retention Schedule.

15.4. The [UKRI privacy notice](#) outlines what happens to any personal data. It applies across UKRI, to our councils, Innovate UK and Research England and to our research centres, units and institutes.

#### **16. Procedure Review**

16.1. This procedure will be regularly reviewed to incorporate any legislative and UKRI staffing changes; reviews will occur, at a minimum, every two years.

#### **17. Procedure owner**

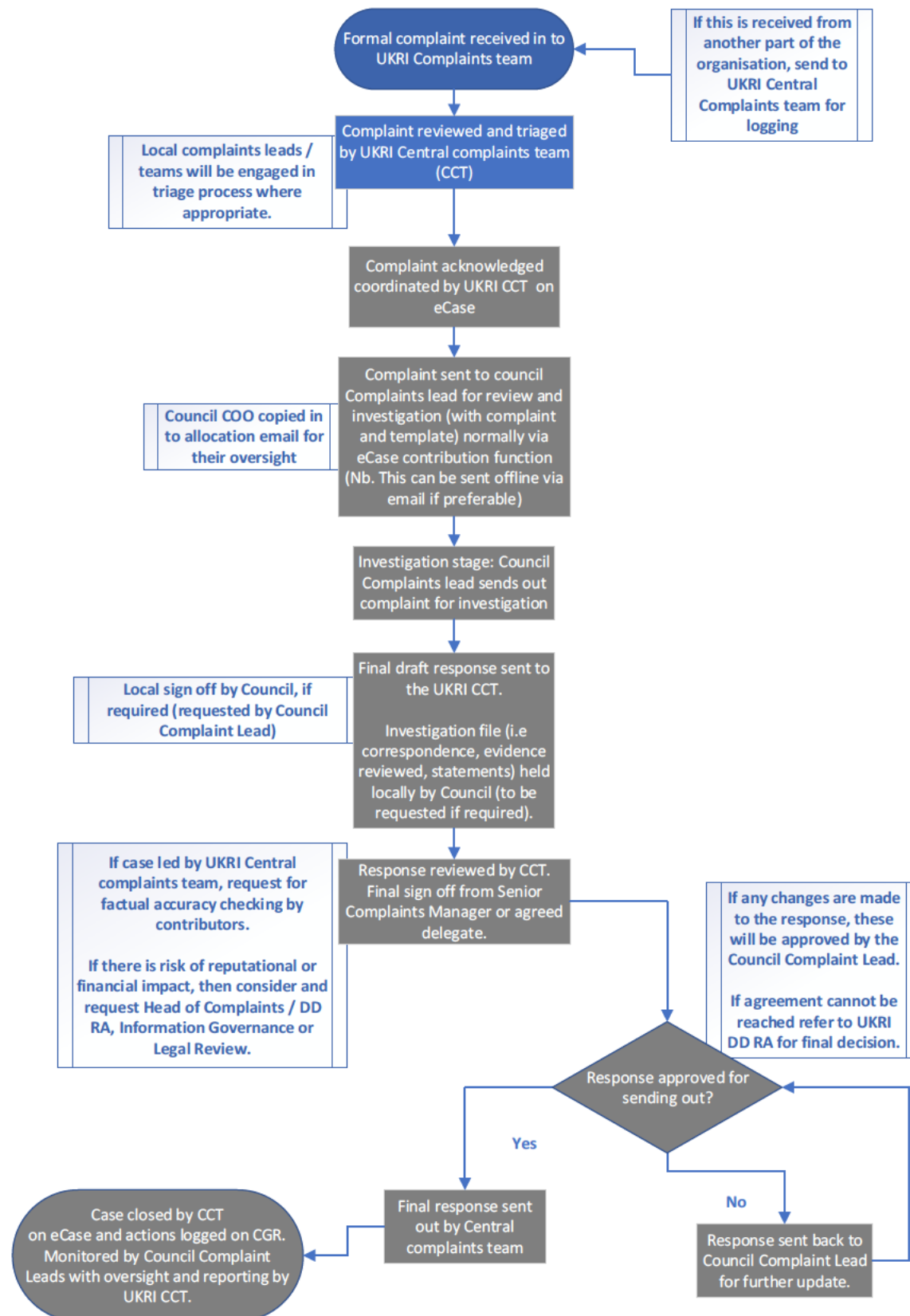
17.1. This procedure will be owned and reviewed by the UKRI Internal Controls team, who can be contacted with queries on [complaints@ukri.org](mailto:complaints@ukri.org)



## 18. References

|                                                            |
|------------------------------------------------------------|
| <a href="#">PHSO Principles of Good Complaint Handling</a> |
| PHSO Complaint Handling guidance <a href="#">resources</a> |
| <a href="#">UK Central Government Complaint Standards</a>  |
| NERC BGS complaints <a href="#">page</a>                   |
| NERC BAS complaints <a href="#">page</a>                   |
| STFC ISIS complaints <a href="#">page</a>                  |
| Innovate UK Edge complaints <a href="#">page</a>           |
| Innovate UK KTN complaints <a href="#">page</a>            |

## Annex 1: Complaints process flow





## Annex 2: Complaints Investigation & Response Checklist for Investigators

| Complaints Investigation & Response Checklist for Investigators                                                                                                                                                                                                                                                                                                                                                                  |                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| 1. Identify the complainant's key issues / concerns (only include details where relevant to their issues / concerns)                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> |
| 2. Consider whether it would be helpful to call the complainant ( <i>to clarify anything or to resolve some / all of the issues</i> )                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> |
| 3. Check the relevant policy and guidance documents (& <i>note in draft response where evidence has come from these</i> )                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> |
| 4. If related to staff conduct: Get written, dated and signed statements from any member of staff complained about and any witnesses ( <i>include full job titles</i> )                                                                                                                                                                                                                                                          | <input type="checkbox"/> |
| 5. Your investigation needs to determine: <ul style="list-style-type: none"> <li>What actually happened? (<i>where it is not possible to determine this e.g. two different accounts of events with no witnesses / other evidence, this should be clearly stated in the draft response</i>)</li> <li>Was this in line with agreed process and /or policy? (<i>If not, provide detail of what should have happened</i>)</li> </ul> | <input type="checkbox"/> |
| 6. Where something has gone wrong, address with apologies and action / improvement.                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> |
| 7. Use the draft response template for your response and refer to guidance notes re: completion                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> |
| 8. Is draft response in <b>plain English</b> with all terms and acronyms explained?                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> |
| 9. Is the tone of the letter appropriate? (i.e with recognition of distress or upset)                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> |
| 10. <i>Where the complainant is very upset or may require support, should we provide with a copy of the 'Avenues of support' leaflet? (TBC)</i>                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> |

### Annex 3: Roles and responsibilities

The following roles and responsibilities apply within UKRI:

| Role                                    | Responsibilities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| UKRI Deputy Director Risk and Assurance | <ul style="list-style-type: none"> <li>Accountable for the management of all UKRI complaints and enquiries</li> <li>Point of escalation and approval for complex and re-opened complaints</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| UKRI Senior Complaints Manager          | <ul style="list-style-type: none"> <li>Ensure the acknowledgement of all complaints submitted to UKRI within 3 working days of receipt</li> <li>Managing updates to the complainant on the progress and outcome of the investigation within 20 working days (standard target timescale) or extended timescales if appropriate</li> <li>Leads the commissioning of investigations, escalations and independent reviews</li> <li>Ensures case management of all complaints submitted to UKRI and locally to the Research Councils and institutes.</li> <li>Point of liaison with appropriate Council Complaints Administrators / Leads / Investigators to handle the complaint and promptly update the case management system</li> <li>Collating reporting on complaints including lessons learned and actions taken</li> <li>Escalating concerns about action progress to the Head of Governance</li> </ul> |
| Internal Controls Manager               | <ul style="list-style-type: none"> <li>Ensure the acknowledgement of all complaints submitted to UKRI within 3 working days of receipt</li> <li>Supporting updates to the complainant on the progress and outcome of the investigation within 20 working days (standard target timescale) or extended timescales if appropriate</li> <li>Maintaining case management records of all complaints submitted to UKRI and locally to the Research Councils and institutes</li> <li>Point of liaison with appropriate Council Complaints Administrators / Leads / Investigators to handle the complaint and promptly update the case management system</li> </ul>                                                                                                                                                                                                                                                |
| Council Complaints Lead                 | <ul style="list-style-type: none"> <li>Managing responses to the complainant on the progress and outcome of the investigation within the internal drafter timescale.</li> <li>Supporting the preliminary assessment of the complaint (if required)</li> <li>Responsible for investigations to resolve or report on complaints in line with the UKRI requirements.</li> <li>Liaison with Investigators and/or Subject Matter Experts within their Council regarding the received request, with progress updates to UKRI Complaints Officer/team if and when required</li> <li>Notifying UKRI Complaints Officer of all complaints, so that these details can be recorded on the electronic case management system and for reporting which will include lessons learned and actions taken</li> </ul>                                                                                                         |