



Complaints Policy and Procedure

By listening and responding, the Equality & Inclusion Partnership (EQUIP) can improve the service it provides to people in Warwickshire.

We use a simple feedback form so that we can be sure to give the best possible service to everyone. It can be used for complaints or concerns our clients have and we investigate the situation to ensure we improve our services as much as possible. We also aim to solve any concerns or complaints as quickly as possible.

Clients making a complaint get a written response within 7 working days. If the complaint is simple, this letter will tell you, our client, what action we have taken as a result of your complaint and invite you to contact us again if you are not satisfied. If the complaint is more complicated, this initial response will detail how long we expect an investigation to take, who you can contact at EQUIP for updates, and when you can expect a final response.

If you are not happy with our service, firstly tell the person who's been dealing with your cases. Most of the time, they will be able to get things sorted for you straight away.

If you feel the problems have not been sorted, then please complete the attached form (below).

If you are using this form to make a complaint, you should get a written response to your form within 7 working days (if you provide contact details).

If you have any difficulties in filling in this form and would prefer to give information verbally, please contact us on 0330 135 6606 where a member of staff will be happy to complete the form from the information you provide.

Further copies of this form are available on our website www.equipequality.org.uk

Process

On receipt of the completed form, it is allocated to a senior member of staff who assesses the issue, makes a recommendation to the Chief Executive, and deals with any follow up.

Complaints and Comments

Is this a:		Complaint? <input type="checkbox"/>	Comment? <input type="checkbox"/>
If this is a complaint, you should expect a response within 7 working days If this is NOT a complaint, would you like a response?			
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name:			
Address:			
Telephone Number:			
Mobile Phone Number:			
Email address:			
Which is your preferred method of contact?			
Is the complaint or comment about a specific member of staff?	Yes <input type="checkbox"/>	No	<input type="checkbox"/>
If yes, what is the name of the member of staff?			
Date to which the complaint or comments refers?			
Location of event to which complaint, or comment refers?			
Details of Complaint or Comment (continue on a separate sheet if necessary)			
Signed			
Date:			