



THE MAZE GROUP CIC

Complaints Policy

Issued: April 2026

Version: 3.0

Policy Approval

Author	Business Manager
Approved by	Board of Directors
Date	23 April 2026

Issue and Revision Log

Issue	Date Issued	Date for Review	Notes
1.0	June 2021	June 2024	
2.0	May 2025	May 2027	
3.0	April 2026	April 2028	Rewritten at request of SNEE ICB

This policy supports compliance with the NHS Standard Contract 2025/26 (relevant clauses: SC13, SC16, SC24, SC35, GC14).

Contents

1. Introduction	1
2. Purpose	1
3. Regulatory Framework.....	1
4. Scope.....	1
5. What is a Complaint?.....	1
6. Accessibility and Support.....	1
7. Complaints Process.....	2
Informal Resolution	2
Formal Complaint.....	2
Escalation	3
8. Confidentiality and Data Protection	3
9. Learning and Continuous Improvement	3
10. Monitoring and Review.....	3
11. Duty of Candour.....	4
12. Safeguarding	4

1. Introduction

The MAZE Group CIC ("MAZE") is committed to providing high-quality services and maintaining a culture of openness, integrity, and accountability. This Complaints Policy outlines how individuals can raise concerns and how those concerns will be addressed in a fair, transparent, and timely manner.

This procedure follows the Local Authority Social Services and NHS Complaints (England) Regulations 2009 and is informed by the Parliamentary and Health Service Ombudsman (PHSO) Complaint Standards.

2. Purpose

This policy aims to:

- Provide a clear, accessible, and fair process for handling complaints
- Ensure complaints are dealt with promptly, courteously, and thoroughly
- Use complaints to improve our services, systems, and behaviours
- Uphold our obligations under relevant UK legislation, including the Companies (Audit, Investigations and Community Enterprise) Act 2004

3. Regulatory Framework

This policy complies with the Local Authority Social Services and NHS Complaints (England) Regulations 2009 and is informed by the Parliamentary and Health Service Ombudsman (PHSO) NHS Complaint Standards.

The organisation will:

- Appoint a Responsible Person (Board-level) to oversee complaints handling, learning, and compliance
- Ensure effective systems for recording, monitoring, and reporting complaints
- Produce annual complaints reports
- Ensure duty of cooperation where complaints involve multiple organisations
- Ensure information about how to make a complaint is publicly available via our website, service materials, and on request

4. Scope

This policy applies to:

- Members of the public
- Service users
- Partners
- Volunteers
- Contractors
- Other stakeholders who engage with MAZE

Note: This policy does not cover complaints by employees, which are handled under the Grievance Policy.

5. What is a Complaint?

A complaint is an expression of dissatisfaction, whether justified or not, about any aspect of MAZE's operations, services, staff, trustees, contractors or volunteers.

Examples include:

- Poor service delivery
- Failure to follow procedures or policies
- Inappropriate behaviour by staff, trustees, contractors or volunteers
- Breach of legal or regulatory obligations

6. Accessibility and Support

We are committed to making our complaints process accessible to all.

We can provide:

- Information in alternative formats (e.g. large print, easy read)

- Interpreting and translation services, including BSL
- Support to make a complaint verbally if needed

You may also access independent advocacy services to support you in making a complaint. We can provide information about independent NHS complaints advocacy services, which are free and confidential.

Children and young people will be supported to express concerns or complaints in ways that match their age, understanding and communication needs. This may include simplified information, visual materials, advocacy support or alternative communication methods.

7. Complaints Process

Informal Resolution

In many cases, complaints can be resolved informally. We encourage individuals to raise concerns with the relevant staff member or team leader in the first instance.

Formal Complaint

Making a complaint will not adversely affect the care or services you receive from us.

Complaints about NHS-funded services may be made either:

- directly to MAZE (service provider), or
- to the commissioning body (Integrated Care Board or NHS England)

Complaints should not be made to both organisations at the same time.

Where a complaint involves multiple organisations, we will:

- liaise and cooperate with relevant organisations
- obtain your consent to share information
- provide a single, coordinated response

If the issue is not resolved informally or is serious in nature:

Step 1: Submission

Submit the complaint in writing by email including:

- Your name and contact details
- A clear description of the issue
- Dates, times, and names of individuals involved (if known)
- Any evidence (e.g. correspondence)

Send to the Complaints Manager (sue.anderton@themazegroup.co.uk).

The Executive Director acts as the Complaints Manager and is responsible for the day-to-day management of complaints.

Where a complaint is made on behalf of another person, we will require appropriate consent to ensure we can share information and investigate the complaint.

Step 2: Acknowledgement

We will acknowledge your complaint within 3 working days. At this stage, we will:

- discuss and agree how your complaint will be handled
- confirm what outcomes you are seeking
- agree a timescale for our response
- explain the investigation process

Step 3: Investigation

An impartial director will investigate the complaint, which may involve:

- interviewing relevant parties
- reviewing documents and records

Where your complaint involves more than one organisation, we will work collaboratively under the duty to cooperate to ensure a coordinated investigation and response.

Where a complaint relates to a notifiable safety incident, the Duty of Candour will be applied in line with Section 11 of this policy.

Step 4: Outcome

We will provide a written response within the agreed timeframe (normally 20 working days).

Our response will include:

- the findings of the investigation
- an explanation of any decisions made
- details of any actions taken or planned
- information about your right to refer the complaint to the PHSO

Complaints should normally be made within 12 months of the event or within 12 months of becoming aware of the issue.

We may still consider complaints outside this timeframe where there is a good reason for the delay, and it is still possible to investigate effectively.

Escalation

MAZE operates a single-stage local resolution process. There is no internal appeal stage. If you remain dissatisfied, you may refer your complaint to the Parliamentary and Health Service Ombudsman (PHSO).

The PHSO provides an independent service and will normally expect you to have completed our complaints process first.

Contact details:

Parliamentary and Health Service Ombudsman

www.ombudsman.org.uk

Tel: 0345 015 4033

8. Confidentiality and Data Protection

All complaints will be handled confidentially and in accordance with the Data Protection Act 2018 and the UK GDPR. Information will only be shared on a need-to-know basis.

9. Learning and Continuous Improvement

All complaints will be logged and analysed periodically to identify trends and service improvement opportunities. Lessons learned will be discussed by senior leadership and incorporated into relevant policies, training, and operational changes.

An annual complaints report will be produced, including:

- number and type of complaints
- outcomes and learning identified
- actions taken to improve services

10. Monitoring and Review

The Responsible Person (a member of the Board of Directors) has overall accountability for:

- ensuring compliance with complaints regulations
- oversight of complaint handling
- ensuring learning is embedded
- annual reporting to the Board

This policy is reviewed every two years by the Board of Directors or sooner if there are significant changes in regulation or governance expectations.

Themes, learning and service improvements arising from complaints relating to NHS-funded activity will be

shared with the commissioning Integrated Care Board (ICB), supporting wider system learning.

11. Duty of Candour

MAZE is committed to operating in line with the statutory Duty of Candour as set out in Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Where a notifiable safety incident occurs, we will:

- inform the affected person (or their representative) as soon as reasonably practicable, in person wherever possible
- provide a clear and truthful account of what is known about the incident
- offer a sincere apology
- explain what further enquiries or investigations will take place
- provide a written follow-up including the details of the incident and any actions taken

A notifiable safety incident is defined as an unintended or unexpected incident that has resulted in, or could result in, moderate or severe harm to a person receiving services.

We will:

- keep a written record of all Duty of Candour notifications and communications
- ensure learning from incidents is shared and embedded through our governance processes
- link Duty of Candour processes with complaints, incident reporting, and safeguarding procedures where appropriate

The Duty of Candour applies whether or not a complaint has been made.

12. Safeguarding

Any complaint that raises concerns about potential harm to a child, young person or adult at risk will be managed in line with MAZE's Safeguarding Policy and reported through the appropriate safeguarding procedures.