



Horizons Therapeutic Education Trust

Complaints Policy and Procedure

Horizons Therapeutic Education Trust (HTET)

Status	Approved by Trust Board 21 st September 2026
Policy owner	Chief Executive Officer
Operational leads	Head of Provision and Governance Professional
Version	2.0
Review cycle	Annually, and earlier where legislation, statutory guidance or Trust arrangements change

Board assurance statement. This draft consolidates HTET's existing policy with stronger governance, staff/HR interfaces, equality and reasonable-adjustment provisions, safeguarding escalation, complaint-panel safeguards, record-keeping, organisational learning and a graduated approach to unreasonable behaviour.

Version history

Version	Date	Author/owner	Summary of change
2.0	27/08/2026	Chief Executive Officer	Comprehensive review for Trust Board scrutiny: DfE compliance, governance, HR/staff interface, KCSIE 2026, equality, data protection, panel procedure, unreasonable behaviour and Board assurance strengthened.

Proposed Board approval date: [insert] | Effective date: [insert] | Next review: [insert]

Document governance and control

Document title	HTET Complaints Policy and Procedure
Document owner	Chief Executive Officer
Operational responsibility	Head of Provision / nominated Complaints Co-ordinator
Governance responsibility	Trust Board, supported by the Governance Professional
Approval body	Trust Board
Current status	Approved by Trust Board on 21 st September 2026
Version	2.0
Review frequency	Annual, or sooner following statutory, regulatory, safeguarding, employment, governance or operational change
Publication	HTET website and available on request in accessible formats
Applies to	HTET academies/provisions and Trust-level functions; employees, trustees and relevant commissioned partners involved in complaint handling
Information classification	Public policy; individual complaint records are confidential and access-controlled

Key legal and best-practice framework

- Department for Education: Best practice guidance for academies complaints procedures (current DfE guidance; ESFA functions transferred to DfE on 31 March 2025).
- HTET's funding agreement, Articles of Association and Scheme of Delegation.
- Keeping Children Safe in Education 2026 (effective 1 September 2026) and associated safeguarding/allegations procedures.
- Equality Act 2010, including duties relating to discrimination, victimisation and reasonable adjustments.
- UK GDPR and Data Protection Act 2018; Freedom of Information Act 2000, where applicable.
- Academy Trust Handbook 2026 (effective 1 October 2026), the Seven Principles of Public Life and the Academy Trust Governance Code.
- CST guidance on governing a school trust, governance professionalism, integrity, accountability and effective board assurance.
- Relevant ACAS principles where a complaint gives rise to internal employment, conduct, grievance, capability or disciplinary process.

Contents

1. Purpose, status and principles
2. Who may complain and scope
3. Matters outside this procedure
4. Equality, accessibility and reasonable adjustments
5. Roles and responsibilities
6. General requirements, time limits and communication standards
7. Stage 1 - informal resolution
8. Stage 2 - formal complaint and investigation
9. Stage 3 - complaints panel hearing
10. Complaints about staff, senior leaders, the CEO, trustees or the Trust Board
11. Safeguarding, allegations against staff and other urgent concerns
12. HR and employment interface
13. Serial, persistent and unreasonable behaviour
14. Confidentiality, data protection and record keeping
15. Remedies, learning and continuous improvement
16. Monitoring, reporting and Board assurance
17. External escalation after the Trust procedure
18. Related policies and references
- Appendix 1 - Formal complaint form
- Appendix 2 - Request for panel review
- Appendix 3 - Investigation framework
- Appendix 4 - Panel hearing protocol
- Appendix 5 - Graduated unreasonable-behaviour framework
- Appendix 6 - Complaints register and Board reporting field
- Appendix 7 – Staff quick-reference guide

1. Purpose, status and principles

HTET is committed to providing high-quality, profoundly personalised therapeutic education and to maintaining constructive relationships with pupils, parents, carers, families, commissioners, partners and the wider community. Concerns and complaints are a legitimate form of stakeholder feedback. They will be heard respectfully, considered impartially and used, where appropriate, to improve practice. It is designed to be simple to use, non-adversarial, accessible and capable of providing a full and fair route from early resolution to independent panel scrutiny.

HTET will:

- seek to resolve concerns at the earliest appropriate level without obstructing a complainant's right to use the formal procedure;
- act lawfully, rationally, reasonably, fairly and proportionately, applying the principles of administrative law and the Seven Principles of Public Life;
- address the material points raised and explain findings and outcomes clearly;
- avoid conflicts of interest and ensure decision-makers have no inappropriate prior involvement;
- protect confidentiality while recognising that absolute confidentiality cannot be promised where safeguarding, legal, regulatory or employment duties require information to be shared;
- make reasonable adjustments so that disabled people and others with communication or access needs are not placed at a substantial disadvantage;
- keep complainants appropriately informed of progress and any unavoidable delay;
- distinguish the substance of a complaint from the way in which a person may behave when pursuing it; and
- identify and act on organisational learning, without compromising individual confidentiality.

2. Who may complain and scope

The statutory academy complaints procedure applies to complaints from parents or carers of pupils about matters relating to their child. HTET will also respond respectfully and expediently to concerns raised by other people or organisations, although the Trust may adapt the process where the statutory Part 7 procedure does not apply.

Subject to the exclusions below, this procedure may cover concerns about:

- the education, therapeutic education or pastoral service provided by HTET;
- leadership, management, communication, policies or procedures;
- the conduct of an HTET employee where the concern is appropriately dealt with as a complaint, while any internal employment process remains separate and confidential;
- Trust governance or the conduct of an individual trustee;
- premises, health and safety, accessibility or service delivery; and
- actions or omissions by the Trust or a provision for which no more specific statutory or policy route applies.

3. Matters outside this procedure

The following are normally handled under separate statutory, regulatory or Trust procedures:

Matter	Route
Admissions	Use the relevant admissions and appeal arrangements.
Suspension and permanent exclusion	Use the statutory suspension/permanent exclusion review process.
Statutory SEND decisions and EHC plans	Challenges to local-authority statutory decisions follow the SEND statutory route; complaints about HTET's implementation or service may be considered where appropriate.
Safeguarding and child protection	Safeguarding action takes precedence. See section 11.
Allegations that a member of staff has harmed a child or may pose a risk of harm	Follow KCSIE and the Trust's managing allegations procedures; the LADO must be engaged where the threshold is met.
Low-level concerns about adults working with children	Follow the Trust's safeguarding/low-level concerns arrangements.
Staff grievances, disciplinary, capability, sickness or other employment matters	Use the relevant HR procedure. A parent/carer complaint may trigger an HR process, but the complainant is not a party to that confidential employment process.
Whistleblowing by employees or workers	Use HTET's Whistleblowing Policy.
Subject access and data-protection rights	Use the Trust's data-protection procedures and Data Protection Officer route.
Freedom of Information requests	Use the Trust's FOI procedure.
Complaints about a third-party provider using HTET premises or delivering its own service	Use the provider's complaints procedure unless the complaint concerns HTET's own commissioning, oversight or contractual management.
NHS/CAMHS clinical practice	Clinical complaints about NHS/CAMHS practitioners should follow the relevant NHS/provider complaints route. HTET will cooperate where the matter also concerns education, safeguarding, contractual oversight or integrated practice.

Important. Where a concern raises more than one issue, HTET may run different procedures in parallel or pause the complaints element where this is necessary for safeguarding, criminal, regulatory or employment reasons. The complainant will be told which route applies, so far as confidentiality permits.

4. Equality, accessibility and reasonable adjustments

HTET will take positive steps to make the complaints process accessible. A formal complaint will ordinarily be made in writing, but the Trust will provide reasonable alternatives where this would otherwise disadvantage the complainant.

- accepting a complaint orally and arranging for an accurate written record to be agreed;
- providing information in an alternative format, accessible digital form or larger print;
- allowing additional time where this is a reasonable adjustment;
- providing or facilitating interpretation or communication support where reasonably practicable;
- adapting meeting format, venue, breaks or attendance arrangements;
- permitting a representative or supporter to assist the complainant; and
- considering disability, neurodiversity, mental health, language, literacy, trauma and communication needs before any communication restriction is imposed.

No person will be disadvantaged, treated less favourably or victimised because they have raised a complaint, supported a complaint or exercised a legal right.

5. Roles and responsibilities

Role	Core responsibility
Complainant	Raise concerns as promptly as reasonably possible; explain the issue and desired resolution; provide relevant evidence; cooperate with reasonable requests and timescales; treat those involved respectfully.
All staff	Listen, remain calm and professional, record key facts, resolve straightforward concerns where appropriate, avoid promising outcomes, protect confidentiality and escalate safeguarding or serious concerns immediately.
Complaints Co-ordinator	Acts as the central operational contact; logs complaints; monitors deadlines; coordinates correspondence; ensures records are complete; checks reasonable adjustments; supports handover between stages.
Investigating Officer	Defines the issues; gathers and tests relevant evidence; interviews where necessary; distinguishes evidence from opinion; considers policy and context; makes findings on the balance of probabilities; identifies proportionate remedies and learning.
Head of Provision	Supports early resolution and may determine formal complaints where there is no conflict of interest. Ensures staff support and operational learning.
Chief Executive Officer	Has executive oversight of the Trust's complaints system; appoints investigators or decision-makers where required; ensures implementation of systemic actions; remains independent of cases that may require their direct determination.
Governance Professional	Supports the Board; maintains or oversees the governance record; checks conflicts; convenes and clerks panel hearings; circulates papers; advises on process; records panel decisions and Board assurance information.

Role	Core responsibility
Trustees	Provide strategic oversight and assurance. Trustees should not become involved in the substance of individual complaints before any panel stage unless specifically required by this procedure, because prior involvement may compromise panel eligibility.
Panel Chair	Ensures a fair, respectful and proportionate hearing; confirms issues, process and adjustments; allows each party a reasonable opportunity to present their case; keeps the hearing focused on the complaint rather than re-running unrelated matters.

6. General requirements, time limits and communication standards

6.1 Time limit for bringing a complaint

A complaint should normally be raised within three months of the incident, or within three months of the final event in a series of related incidents. HTET will not operate a blanket refusal to consider late complaints. Exceptional circumstances, accessibility needs, safeguarding context, when the complainant became aware of the matter, and whether a fair investigation remains possible will be considered.

6.2 School days and holiday periods

Timescales in this policy are stated in school days unless otherwise specified. A complaint received during a school holiday may be treated as received on the first school day after the holiday, unless an urgent safeguarding, safety or legal issue requires immediate action.

6.3 Delay

Where HTET cannot meet a published deadline, it will explain the reason, identify what remains to be done and provide a revised, realistic deadline. Complex cases may require more time, but delay will be actively managed.

6.4 Communication standards

- Communications will be courteous, factual, proportionate and free from unnecessarily defensive or adversarial language.
- The Trust will not promise a particular outcome before the evidence has been considered.
- Acknowledging that communication or practice could have been better is not, of itself, an admission of negligence or unlawful conduct.
- Where third-party personal information cannot lawfully be disclosed, the Trust will explain the position without revealing confidential information.
- Complainants will be told how to escalate at the end of each stage, where a further stage is available.

7. Stage 1 - informal resolution

Most concerns are best addressed quickly and directly. The complainant should raise the concern with the relevant member of staff, Head of Provision or another appropriate senior leader. Concerns may be raised in person, by telephone, by email or in writing.

HTET will normally:

- acknowledge an informal concern within 5 school days;
- clarify what has happened, what the complainant is concerned about and what outcome they are seeking;
- seek to resolve straightforward matters through explanation, correction, apology, practical action or an agreed meeting;
- make a brief factual record of the concern, action and outcome where appropriate; and
- aim to provide an informal response within 10 school days, or explain when more time is needed.

A complainant does not have to continue informal discussion indefinitely. If the matter is not resolved, they may proceed to Stage 2.

8. Stage 2 - formal complaint and investigation

8.1 Making a formal complaint

A formal complaint should normally be sent to the Complaints Co-ordinator/Governance Professional using the form at Appendix 1 or in another written form that clearly identifies the complaint. A reasonable adjustment will be made where a written complaint would place the complainant at a substantial disadvantage.

The complaint should, so far as possible, identify:

- the matters complained of;
- relevant dates, people and context;
- any steps already taken;
- relevant documents or evidence;
- the impact of the matters raised; and
- the outcome or remedy sought.

8.2 Acknowledgement and scope

HTET will acknowledge a formal complaint within 5 school days. The appointed investigator or decision-maker will identify the issues to be investigated and may seek clarification. The scope should capture the substance of the complaint without allowing repeated reformulation to make the investigation unmanageable.

8.3 Investigation standard

The investigation will be fair, proportionate and evidence-led. It may include:

- reviewing relevant policies, records, correspondence, plans, logs, minutes or other documentary evidence;
- speaking with the complainant and relevant staff or witnesses where this is necessary and proportionate;
- considering conflicting accounts and assessing reliability, consistency and corroboration;
- considering whether relevant legal, safeguarding, equality, education and Trust requirements were followed;
- making findings on the balance of probabilities for each material issue;
- recording reasons for findings and identifying any remedial or learning actions.

Evidence and confidentiality. The complainant is entitled to a fair explanation of the outcome but not to unrestricted access to confidential personnel, pupil, safeguarding or third-party information. Information will be redacted or withheld where lawful and necessary.

8.4 Formal outcome

HTET will normally issue the Stage 2 outcome within 20 school days of receipt of the formal complaint. The response will identify the issues considered, summarise the investigation, state the finding on each material issue and explain any action or learning that can properly be disclosed.

Each issue may be recorded as:

- upheld;
- partially upheld;
- not upheld;
- resolved by agreement; or
- unable to determine, where the available evidence does not permit a reliable finding.

The outcome will explain the right to request Stage 3 and the deadline for doing so. A request should normally be made within 10 school days of the Stage 2 outcome. Late requests will be considered reasonably and not rejected by blanket rule.

9. Stage 3 - complaints panel hearing

9.1 Purpose

The panel is the final internal stage. Its purpose is to review the complaint and the Trust's handling of it fairly and independently, not merely to endorse the Stage 2 decision.

9.2 Composition and independence

- The panel will consist of at least three people who were not directly involved in the matters complained of.
- At least one panel member must be independent of the management and running of the academy/provision concerned.
- Panel members must declare actual, potential or perceived conflicts of interest. A person whose prior involvement could reasonably call impartiality into question will not sit.
- The Governance Professional will keep a record of panel-member independence and conflicts.
- Where necessary, HTET may source suitably experienced independent panel members externally.

9.3 Convening the hearing

The Governance Professional will acknowledge the Stage 3 request and aim to offer a hearing date within 15 school days. Reasonable efforts will be made to agree a date. If the complainant rejects reasonable dates or cannot attend after appropriate adjustments have been considered, the panel may proceed on written submissions or in the complainant's absence so the matter can be brought to a conclusion.

The complainant and the Trust will normally receive the same hearing bundle at least 5 school days before the hearing. Late evidence may be admitted by the Chair where fairness requires it and the other party has a reasonable opportunity to respond.

9.4 Attendance and representation

- The complainant may attend and may be accompanied by a supporter or representative.
- Legal representation is not normally necessary. The Chair may permit it where fairness, complexity or other exceptional circumstances justify this.
- A member of staff attending as a witness may seek support from a trade union representative or workplace companion where appropriate; the panel hearing is not an employment hearing and employment rights remain governed by the relevant HR process.
- Media representatives are not permitted.
- Remote or hybrid attendance may be used where appropriate and fair.

9.5 Recording

The Governance Professional will keep an official written record. Electronic recording is not normally permitted. A recording may be considered as a reasonable adjustment where necessary, with prior agreement and appropriate safeguards. Covert recordings will not normally be accepted as evidence, save where there are exceptional reasons to do so.

9.6 Hearing procedure

1. The Chair introduces the panel, confirms independence, explains the purpose and identifies any adjustments.
2. The complainant presents the complaint and may answer questions.
3. The Trust representative presents the response and may answer questions.
4. Relevant witnesses may be heard where the Chair considers their evidence necessary and proportionate.
5. Both parties may make a brief concluding statement.
6. The complainant and Trust representatives withdraw while the panel deliberates in private.
7. The panel reaches findings and determines any recommendations. The civil standard of proof - balance of probabilities - will be used where factual findings are required.

9.7 Panel powers and outcome

The panel may:

- uphold the complaint in whole or in part;
- not uphold the complaint in whole or in part;
- conclude that a matter was appropriately handled but identify service or process improvements;
- recommend proportionate action to remedy injustice or improve systems, policy, training, communication or oversight; and
- refer any newly identified safeguarding, regulatory, legal or employment issue to the appropriate route without determining matters outside its remit.

The panel will not determine disciplinary sanctions, dismiss staff, overturn statutory decisions that belong to another appeal route, or disclose confidential employment action.

A written outcome, including findings and recommendations, will normally be issued within 10 school days of the hearing. A copy will be provided to the complainant and, where relevant and lawful, to the person complained about. The panel's decision concludes the Trust's internal complaints procedure.

10. Complaints about staff, senior leaders, the CEO, trustees or the Trust Board

The route will be adjusted to preserve independence. The Governance Professional should be contacted where the complaint concerns a senior leader, the CEO, a trustee, the Chair, Vice-Chair or the Board.

Subject of complaint	Route to protect independence
Employee (other than Head of Provision/CEO)	Stage 1/2 handled by an appropriate manager or independent senior leader with no conflict; Stage 3 panel follows this policy.
Head of Provision or equivalent senior leader	Formal stage normally determined by the CEO or a suitably independent person appointed by the CEO/Trust; Stage 3 panel follows this policy.
Chief Executive Officer	Formal stage normally commissioned by the Chair of Trustees, using a suitably skilled and impartial investigator/decision-maker; Stage 3 heard by a panel with no prior involvement and the required independent member.
Individual trustee (other than Chair)	Complaint sent to the Governance Professional. Formal stage normally handled by the Chair or another suitably impartial trustee/person; Stage 3 panel must exclude anyone previously involved.
Chair of Trustees	Complaint sent to the Governance Professional and normally handled at the formal stage by the Vice-Chair or another suitably impartial person.
Chair and Vice-Chair jointly, a majority of trustees, or the whole Trust Board	The Governance Professional will arrange an independent investigation/determination and, if escalated, a panel comprised of people sufficiently independent of the Trust's management and the matters complained of. External governance support may be commissioned.

11. Safeguarding, allegations against staff and other urgent concerns

Safeguarding is not a complaints-stage issue to be deferred until the complaints process is complete. Any information suggesting that a child may be at risk of harm, that an adult working with children may have harmed or may pose a risk of harm to a child, or that there is a low-level concern about an adult's conduct must be acted on immediately under HTET's safeguarding procedures and KCSIE.

- The Designated Safeguarding Lead and/or appropriate senior safeguarding lead must be informed without delay.
- Where the allegation threshold is met, the Local Authority Designated Officer (LADO) route must be followed.
- Police, children's social care, regulators, commissioners or professional bodies may need to be notified.

- The complaints process may be paused or its scope restricted to avoid prejudicing safeguarding or criminal enquiries.
- The complainant will be told that the matter has been referred to the appropriate safeguarding route, but confidential detail about safeguarding or staff processes will not be disclosed unless lawful and appropriate.

12. HR and employment interface

A complaint from a parent, carer or other stakeholder can identify information that requires an internal employment response. The external complaint and the internal employment process have different purposes and must not be conflated.

- HTET will investigate the complainant's concerns under this policy to the extent appropriate.
- If staff conduct may engage disciplinary, capability, grievance, sickness, safeguarding or other HR procedures, the matter will be referred to the appropriate employment process.
- The employee will be treated fairly and in accordance with employment law, contractual rights, HTET policies and relevant ACAS principles.
- The complainant will not ordinarily be told whether a disciplinary warning, capability measure or other confidential employment action was taken.
- The complaint outcome may state that appropriate management action has been taken or that the matter has been referred to the relevant internal process, where lawful.
- Information gathered in a complaint investigation may be shared with an HR or safeguarding process where there is a lawful basis and it is necessary and proportionate.
- A member of staff who is the subject of a complaint should be supported appropriately, including access to management, HR, supervision and trade-union support as relevant.

Board scrutiny point. This separation protects both complainant fairness and employee due process: the Trust must not promise a complainant a disciplinary outcome, but neither should a confidential HR process be used as a reason to avoid answering the substance of a complaint.

13. Serial, persistent and unreasonable behaviour

HTET will never restrict access to the complaints process merely because a person has complained, is dissatisfied, emotional, persistent in seeking a permitted review, asks difficult questions or supplies further relevant evidence. The substance of the complaint will be distinguished from the individual's behaviour.

13.1 Behaviour that may require management

- repeated duplicate contact that creates a disproportionate operational burden;
- contacting numerous staff simultaneously after a clear single point of contact has been provided;
- repeatedly reopening the same completed complaint without significant new information;
- refusing to identify the complaint or cooperate with reasonable procedural requirements while continuing to demand a specific outcome;
- abusive, threatening, intimidating, discriminatory or harassing communications;
- unreasonable demands for immediate responses or outcomes outside HTET's powers;
- knowingly false or malicious allegations or conduct primarily designed to disrupt the Trust's work.

13.2 Graduated and proportionate response

Before restrictions are considered, HTET will normally:

- clarify expectations and the complaints process;
- consider why the behaviour may be occurring;
- consider disability, neurodiversity, trauma, mental health, literacy, language and communication needs and make reasonable adjustments;
- seek informal resolution and identify a workable communication plan;
- warn the person about the behaviour causing concern and the possible consequences if it continues.

Possible proportionate measures include:

- a single point of contact;
- requiring communications to be in writing or through an agreed channel;
- scheduled updates instead of repeated ad hoc responses;
- reasonable limits on contact frequency where necessary to protect service delivery;
- appointments for meetings and agreed attendees;
- ending a meeting or call where abusive or threatening behaviour continues after a warning, unless immediate action is required for safety;
- acknowledging but not substantively responding to further correspondence about a complaint that has completed the full procedure and raises no significant new issue.

Formal restrictions will normally be authorised by the CEO, or by the Chair where the complaint concerns the CEO. The decision will be recorded, reasons given, a review date set and the complainant told how to request reconsideration. Restrictions will normally be reviewed within 3-6 months and removed or reduced as soon as they are no longer necessary.

Serious threats, violence, harassment, hate incidents, criminal conduct or immediate safety risks may justify immediate protective action, including ending contact, restricting site access, seeking legal advice or contacting the police. Any site restriction will be separately assessed for lawfulness, necessity, proportionality and access to the child's education.

14. Confidentiality, data protection and record keeping

HTET will maintain a secure record of formal complaints, including:

- the complaint and material correspondence;
- the stage at which it was resolved or whether it proceeded to a panel;
- evidence considered and investigation notes;
- the final outcome and reasons;
- actions taken by the Trust, whether or not the complaint was upheld;
- panel membership, independence/conflict checks, papers, minutes/notes and outcome;
- reasonable adjustments and any communication-management decisions;
- organisational learning and follow-up actions.

Access will be restricted to those who need the information for complaint handling, safeguarding, HR, governance, legal, regulatory, insurance, audit or inspection purposes. Records will be retained in accordance with HTET's retention schedule and data-protection obligations.

The Trust Board should not receive identifying detail about live complaints unless this is necessary for a legitimate governance, safeguarding, legal or risk purpose. This preserves the availability and impartiality of trustees who may later be required to sit on a panel.

Requests for personal data or recorded information will be considered under the applicable data-protection and freedom-of-information regimes. Disclosure may require redaction of third-party, safeguarding, legally privileged, confidential employment or other exempt information.

15. Remedies, learning and continuous improvement

Where appropriate, remedies may include:

- an explanation or clarification;
- an apology for service failure, delay, communication or process shortcomings;
- correcting inaccurate information or completing an omitted action;
- reviewing an education, pastoral or operational arrangement where this is within HTET's powers;
- staff guidance, supervision or training;
- policy or process amendment;
- management or governance action through the appropriate confidential route;
- quality-assurance review, audit or targeted monitoring;
- a commitment to report back on implementation of an agreed systemic action.

An apology or acknowledgement that HTET could have handled something better should be considered where justified and is not, by itself, an admission of negligence or legal liability.

16. Monitoring, reporting and Board assurance

The Trust Board is collectively accountable for ensuring that HTET's complaints arrangements are compliant, effective and capable of generating organisational learning. It should exercise strategic oversight without becoming operationally involved in individual cases.

At least annually, and more frequently where risk indicates, the Board or a delegated committee will receive anonymised assurance covering:

- numbers of informal concerns, formal complaints and panel hearings;
- complaint categories, sites/provisions and recurring themes;
- outcomes and stage of resolution;
- performance against timescales;
- safeguarding, SEND, equality, health and safety, workforce or governance themes;
- use and equality impact of any unreasonable-behaviour restrictions;
- lessons learned and actions completed or outstanding;
- any material procedural deviations and the reasons for them;
- any DfE, Ofsted, commissioner, regulator, insurer or legal escalation connected with complaints.

The CEO will ensure that material systemic actions are assigned, tracked and closed. The Governance Professional will support the Board in maintaining appropriate records of assurance and avoiding conflicts of interest.

17. External escalation after the Trust procedure

Once Stage 3 is complete, the Trust's internal complaints procedure is exhausted. If the complainant believes that HTET has not followed its published complaints procedure, has prevented completion of the procedure, has breached relevant education law or has acted unreasonably in the exercise of education functions, they may be able to ask the Department for Education to consider the process.

The Department for Education does not ordinarily re-investigate the underlying complaint or substitute its judgement for the panel's decision. Other external routes may apply to specific matters, including Ofsted, the Information Commissioner's Office, the Local Government and Social Care Ombudsman in limited local-authority matters, professional regulators, the police or courts. HTET will signpost the appropriate route in the final response where it is reasonably clear and relevant.

18. Related policies and references

18.1 HTET policies and procedures

- Safeguarding and Child Protection Policy / KCSIE procedures
- Managing Allegations Against Staff and Low-Level Concerns procedures
- Whistleblowing Policy
- Grievance Policy
- Disciplinary Policy
- Capability Policy
- Equality / Equality Objectives and Accessibility arrangements
- Data Protection, Privacy and Records Retention policies
- Freedom of Information arrangements
- Health and Safety Policy
- SEND Policy / SEN Information Report, as applicable
- Suspension and Permanent Exclusion Policy
- Staff Code of Conduct
- Scheme of Delegation and Trustee Code of Conduct
- Quality Assurance Framework and HTET Vision and Values

18.2 External references

- Department for Education, Best practice guidance for academies complaints procedures.
- Department for Education, How DfE handles complaints about academies.
- Department for Education, Keeping Children Safe in Education 2026 (effective 1 September 2026).
- Equality Act 2010 and EHRC Code of Practice for services, public functions and associations (2026), where relevant.
- UK General Data Protection Regulation and Data Protection Act 2018.
- Freedom of Information Act 2000.
- Academy Trust Handbook 2026 (effective 1 October 2026) and Academy Trust Governance Code.
- Confederation of School Trusts, Governing a School Trust; Model Code of Conduct for Trustees and Trust Boards; Assurance Framework for Trust Governance.
- ACAS guidance and Code principles relevant to fair workplace investigations and employment procedures.

Appendix 1 - Formal complaint form

You do not have to use this form. A reasonable adjustment will be made if you need help to put your complaint into writing.

Name	
Relationship to pupil / organisation (if applicable)	
Pupil and provision (if applicable)	
Preferred contact details	
Do you require a reasonable adjustment or communication support?	
What are you complaining about? Please identify the key events, dates and people involved.	
What steps have already been taken to resolve the matter?	
What evidence or documents would you like HTET to consider?	
What impact has the matter had?	
What outcome or remedy are you seeking?	
Signature (if applicable)	

Name	
Date	

Appendix 2 - Request for Stage 3 panel review

Name	
Date of Stage 2 outcome	
Complaint reference	
Which findings or aspects of the Stage 2 response do you ask the panel to review?	
Why do you remain dissatisfied?	
Is there significant new evidence? If so, explain why it was not previously available.	
What outcome are you seeking from the panel?	
Do you require any reasonable adjustment for the hearing?	
Will you be accompanied? If known, by whom?	
Signature (if applicable)	
Date	

Appendix 3 - Investigation framework

The investigating officer should use this framework proportionately; it is not intended to create unnecessary bureaucracy.

- Confirm appointment, authority and absence of conflict.
- Read the complaint and previous-stage material.
- Define the issues for investigation and clarify ambiguity.
- Identify relevant policy, legal, safeguarding, equality and contractual framework.
- Identify what evidence is necessary and proportionate.
- Plan interviews and give people a fair opportunity to provide relevant information.
- Keep factual notes and distinguish evidence, inference and opinion.
- Test conflicting evidence and assess reliability/corroboration.
- Make a finding on each material issue using the balance of probabilities where factual determination is required.
- Identify remedy, learning, systemic risk or referral to another process.
- Quality-assure the response for completeness, clarity, confidentiality and escalation rights.

Suggested investigation report structure

1. Background and complaint scope
2. Method and evidence considered
3. Relevant policy/framework
4. Findings by issue
5. Overall conclusion
6. Remedy/actions and organisational learning
7. Confidential referrals (recorded separately where necessary)

Appendix 4 - Panel hearing protocol

The Chair may adapt the order where necessary for fairness, accessibility or efficient case management.

1. Introductions; declarations of interest and independence.
2. Confirm purpose, complaint issues and scope of review.
3. Confirm reasonable adjustments, confidentiality and expected conduct.
4. Complainant's presentation and panel questions.
5. Trust's presentation and panel questions.
6. Relevant witnesses, if agreed by the Chair.
7. Clarifying questions between the parties through the Chair.
8. Complainant's closing statement.
9. Trust's closing statement.
10. Parties withdraw; panel deliberates in private.
11. Panel determines findings, recommendations and any referrals.
12. Governance Professional drafts the decision for Chair/panel approval and issues it within the policy timescale.

Appendix 5 - Graduated unreasonable-behaviour framework

Stage	Typical action	Safeguard
1 - Understand	Listen, clarify concerns, explain process and expectations.	Check whether behaviour reflects distress, disability, communication needs or misunderstanding.
2 - Informal boundary	Explain which behaviour is causing difficulty and what constructive contact looks like.	Keep complaint access open; do not label the person.
3 - Written warning	Confirm expectations and warn that proportionate contact-management measures may follow.	Set out specific behaviour, not general character judgments.
4 - Communication plan	Single point of contact, agreed channel, scheduled updates or reasonable frequency limits.	Ensure the person can still raise a genuinely new complaint and receive statutory information.
5 - Formal restriction	CEO/Chair authorisation for time-limited restrictions where necessary and proportionate.	Record reasons, equality analysis, duration, review date and reconsideration route.
6 - Review	Lift, reduce, amend or continue restrictions based on evidence.	Normally review within 3-6 months or sooner if circumstances change.

Appendix 6 - Complaints register and Board reporting fields

Individual complaint register - minimum fields

- Reference number; date received; provision/site; complainant category; complaint category;
- reasonable adjustment requested/provided; safeguarding or HR interface flag;
- Stage 1/2/3 dates; investigating officer/decision-maker; panel members and independence check;
- outcome by issue; remedy/actions; date closed; external escalation (if any);
- learning theme; owner and due date for systemic action; date action closed;
- unreasonable-behaviour restriction used (yes/no), equality consideration and review date.

Anonymised Board assurance dashboard

Measure	Board assurance question
Volume and trend	Are complaint numbers or categories changing materially?
Resolution level	Are concerns being resolved at the lowest appropriate level without obstructing escalation rights?
Timeliness	Are published timescales being met, and are delays explained and controlled?
Outcomes	What proportion are upheld/partially upheld/not upheld/resolved, and what does this indicate?
Risk themes	Are there recurring safeguarding, SEND, equality, workforce, health and safety, governance or service risks?
Learning	What actions have been implemented and how is impact being checked?
Panel quality	Are independence, conflicts, paperwork, hearing fairness and outcome quality consistently strong?
Unreasonable behaviour	Are restrictions exceptional, proportionate, time-limited and equality-assessed?
External scrutiny	Have any matters reached DfE, Ofsted, ICO, commissioners, insurers, police or legal proceedings?

Appendix 7 - Staff quick-reference guide

Core message. Most complaints are not about blame. They are opportunities to understand, resolve, learn and strengthen relationships. Staff should be calm, factual, compassionate and professional.

When someone raises a concern

- Listen without interrupting and thank the person for raising it.
- Acknowledge the concern without promising an outcome or admitting liability.
- Ask open questions and summarise what you have understood.
- Identify what the person is hoping will happen.
- Resolve straightforward matters if you have authority to do so.
- Explain what will happen next and make a brief factual record.

Escalate immediately if the issue involves

- safeguarding or risk of harm to a child;
- an allegation or low-level concern about an adult working with children;
- threats, violence, criminal conduct or serious health and safety risk;
- serious discrimination or harassment;
- legal correspondence, regulator or media contact;
- a complaint about the Head of Provision, CEO or a trustee.



Do not

- become defensive or argumentative;
- criticise colleagues or speculate about motives;
- promise confidentiality that cannot be maintained;
- promise disciplinary action or any particular outcome;
- share complaint information with people who do not need to know;
- respond while upset or frustrated - seek senior support.

Staff wellbeing matters. A member of staff affected by a difficult complaint should seek support from their line manager, HR, supervision arrangements or trade union as appropriate. Legitimate complaints must still be handled fairly.