

## Annex C

### Appeals Process

1.1 Where the Provider has been denied funding for free entitlement places or has had its funding withdrawn the Provider has a right of appeal. The appeal should be made in writing within seven (7) days of the decision letter being received by the Provider. Appeals are administered in two stages:

1.2 **Stage 1:** Review by a Senior Officer - A Provider has seven (7) days from receipt of the Council's decision letter to make a written request asking for a review of the decision.

The written request should detail why the Provider believes the decision should be reviewed and give details of any special circumstances the Provider believes should be considered when the decision is reviewed.

Within 20 working days of receipt of the Provider's written request a Senior Officer reviews the original decision and sends the Provider a detailed written notification of the outcome of the review, setting out:

- The nature of the decision reached;
- How the review was conducted;
- Information about other departments and/or agencies that were consulted as part of the process;
- What factors were considered;
- The rationale for the decision reached; and
- Information about how the Provider can escalate their case to stage two (if appropriate).

1.3 **Stage 2:** Review by an Appeal Panel - A Provider has 20 working days from receipt of the Council's Stage One written decision notification to make a written request to escalate the matter to Stage Two.

Within 40 working days of receipt of the Provider's request an independent appeal panel considers written and verbal representations from both the Provider and Local Authority officers involved in the decision and gives a detailed written notification of the outcome of its decision (within 5 working days of the date of the appeal hearing), setting out:

- The nature of the decision reached;
- How the review was conducted;
- Information about other departments and/or agencies that were consulted as part of the process;
- What factors were considered;
- The rationale for the decision reached; and
- Information about the Provider's right to put the matter to the Local Government Ombudsman (see below).

The appeal panel members will be independent of the original decision making process and suitably experienced (at the discretion of the Council).

1.4 If a Provider is not satisfied with the way their complaint has been dealt with by the local authority, they can make a complaint to the Local Government Ombudsman: [www.lgo.org.uk](http://www.lgo.org.uk) . Telephone: 0300 061 0614.