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#### **Policy Statement**

This organisation policy is intended to comply with Regulation 16 of the Fundamental Standard Regulations.

This organisation accepts the rights of service users to make complaints and to register comments and concerns about the services received. It further accepts that they should find it easy to do so. It welcomes complaints, seeing them as opportunities to learn, adapt, improve and provide better services.

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Our organisation will comply with legislation, national guidelines, regulations and best practice when managing complaints and suggestions. In accordance with the Equality Act 2010, we will ensure our processes are fair and transparent and do not discriminate directly or indirectly, against those with protected characteristics

#### The Policy

This policy is intended to ensure that complaints are dealt with properly and that all complaints or comments by service users and their relatives, carers and advocates are taken seriously. It is not designed to apportion blame, to consider the possibility of negligence or to provide compensation; it is not part of the company's disciplinary policy or Grievance Process.



This organisation believes that failure to listen to or acknowledge complaints leads to an aggravation of problems, service user dissatisfaction and possible litigation. The organisation supports the idea that most complaints if dealt with early, openly and honestly can be sorted at a local level between just the complainant and the organisation. The complaints procedure is made available to service user and families in their service user Guide. A copy is always kept in their Care Plan in their homes and available in a format that can be understood.

ADASS have published a Good Practice Guide on handling complaints concerning Adults and Children in Social Care settings. They have identified the following five principles:

- Ensure that the complaints process is accessible.
- Ensure that the complaints process is straightforward for service users and their representatives.
- Ensure that an appropriate system is in place to keep service users informed throughout the complaints process.
- Ensure that the complaints process is resolution focused.
- Ensure that quality assurance processes are in place to enable organisational learning and service improvement from complaints and customer feedback.

# **Aim of the Complaints Procedure**

We aim to ensure that the complaints procedure is properly and effectively implemented, and that service users feel confident that their complaints and worries are listened to and acted upon promptly and fairly. Specifically, we aim to ensure that:

- Service users, carers and their representatives are aware of how to complain and that the company provides easy to use opportunities for them to register their complaints
- A named person will be responsible for the administration of the procedure
- Every written complaint is acknowledged within 5 working days
- All complaints are investigated within 14 days of being made
- All complaints are responded to in writing within 28 days of being made
- Complaints are dealt with promptly, fairly and sensitively, with due regard to the upset and worry that they can cause to both service users and staff.

## Responsibilities

The Registered Manager at each branch is responsible for following through complaints. However, they may allocate a specific person to investigate the complaints. Communication between this post and the Registered Manager should be clear and transparent in order that the Registered Manager can demonstrate and evidence compliance.

If the complaint is concerning the registered manager, then another manager or director on the senior management team will handle the complaint. Information on where to send the complaint or whom to speak to, if it involves the registered manager, is included in the complaint's procedure in the service user quide.



Copies of all complaints will be sent to Head office to be monitored.

# **Complaints From A Representative**

If the Service User directly affected does not want to complain themselves, they can ask someone else to make the complaint on their behalf and represent them throughout the process.

A representative can be anyone such as:

- A family member
- A friend
- An advocate
- A legal representative

There is no restriction on who may act as a representative and this list is not exhaustive.

Our organisation will support them by signposting Service Users to an advocate if they do not have any other representation and are not happy to raise the complaint themselves.

Our organisation can only accept complaints from a representative In certain situations. These are;

- Where it is known that the Service User has consented, either verbally or in writing (and this includes the willingness for us to share personal information with the representative)
- Where the Service User cannot complain unaided and cannot give consent because they lack capacity in line with the Mental Capacity Act 2005, and the representative is acting in the Service User's best interests.

If the Service User does not consent to us discussing the complaint with their representative then we take this into account. We will explain to the person making the complaint that only the issues that directly affect them can be investigated. If we do not have consent to share personal information about the Service User we will not be able to investigate any matters relating to the Service User or share personal information about the Service User which may leave some of their concerns unanswered.

If we receive a complaint where the Service User directly affected does not have the capacity to consent to the complaint being made on their behalf, we first determine if the person making the complaint on their behalf has a legitimate interest in the person's welfare and that there is no conflict of interest. We also need to determine if the person making the complaint has a right of access to the personal information of the Service User directly affected. E.g. are they an attorney with authority to manage the property and affairs of the individual or are they a person appointed by the Courts to make decisions about such matters.

#### **Complaints Procedure**

# **Verbal Complaints**

 The organisation accepts that all verbal complaints, no matter how seemingly unimportant, must be taken seriously.



- Front-line care staff who receive a verbal complaint are expected to seek to solve the problem immediately.
- If they cannot solve the problem immediately, they should offer to get their line manager to deal with the problem.
- Staff are expected to remain polite, courteous, sympathetic and professional to the complainant. They are taught that there is nothing to be gained by adopting a defensive or aggressive attitude.
- At all times in responding to the complaint, staff are encouraged to remain calm and respectful.
- Staff should not, make excuses or blame other staff.
- If the complaint is being made on behalf of the service user by an advocate, it must first be verified that the person has permission to speak for the service user, especially if confidential information is involved. (It is very easy to assume that the advocate has the right or power to act for the service user when they may not). If in doubt it should be assumed that the service user's explicit permission is needed prior to discussing the complaint with the advocate.
- After discussing the problem, the manager or member of staff dealing with the complaint will suggest a means of resolving it. If this course of action is acceptable then the member of staff should clarify the agreement with the complainant and agree a way in which the results of the complaint will be communicated to the complainant (i.e. through another meeting or by letter).
- If the suggested plan of action is not acceptable to the complainant, then the member of staff
  or manager will ask the complainant to put their complaint in writing to the Registered
  Manager. The complainant should be given a copy of the company's complaints procedure if
  they do not already have one.
- Details of all verbal and written complaints must be recorded on the complaints record form, and copies kept in the service user's office file and in the home records.
- Copies of all complaints must be sent to Head Office for monitoring once investigated and completed.

# **Serious or Written Complaints**

#### Preliminary steps:

- When we receive a written complaint, it is passed to the Registered manager, who deals with the complaint through the process and who records it on the complaints record and sends an acknowledgment letter within 5 working days to the complainant.
- The manager also includes a copy of our Complaints policy and procedure for the complainant.)
- If necessary, further details are obtained from the complainant; if the complaint is not made by the service user but on the service user's behalf, then consent of the service user, preferably in writing, must be obtained from the complainant where required.



• If the complaint raises potentially serious matters, head office must be informed immediately, as advice could be sought from a legal advisor. If legal action is taken at this stage, any investigation by the organisation under the complaint's procedure ceases immediately.

Investigation of the complaint by the organisation:

- Immediately on receipt of the complaint, the registered manager will start an investigation and within 14 days should be in a position to provide a full explanation to the complainant, either in writing or by arranging a meeting with the individuals concerned.
- The registered manager will inform head office of the complaint.
- If the issues are too complex for the investigation to be completed within 28 days, the complainant will be informed of any delays.
- Where the complaint cannot be resolved between the parties, an arbitration service will be used. This service and its findings will be final to both parties. The cost of this will be borne by the organisation.

## Meeting:

- If a meeting is arranged, the complainant will be advised that they may, if so desired, bring a friend, relative or a representative such as an advocate
- At the meeting a detailed explanation of the results of the investigation will be given, in addition to an apology if deemed appropriate (an apology is not necessarily an admission of liability)
- Such a meeting gives the management the opportunity to show the complainant that the matter has been taken seriously and investigated thoroughly.

#### Follow-up action:

After the meeting, or if the complainant does not want a meeting, a written account of the investigation will be sent to the complainant.

- If the complainant is not happy with the response they receive or if they have not received an answer within a reasonable time, they can complain to the Local Government & Social Care Ombudsman.
- The Ombudsman believes that up to 12 weeks is a reasonable time for a council or care provider to look at a complaint and reply to the complainant.
- The outcomes of the investigation and the meeting are recorded and any shortcomings in company procedures will be identified and acted upon.
- The company management formally reviews all complaints as part of its quality monitoring and improvement procedures to identify the lessons learned.

#### **Vexatious Complainers**

This organisation takes seriously any comments or complaints regarding its service. However, there are service users who can be treated as "vexatious complainers" due to the inability of the



organisation to meet the outcomes of the complaints, which are never resolved. Vexatious complainers need to be dealt with by the arbitration service, so that the repeated investigations become less of a burden on the organisation, its staff and other service users.

#### Accessibility

Policies and procedures are available in accessible formats, well publicised, readily available, and accessible, and accessible to individuals using the service, their families, significant others, visitors, staff, and others working at the service.

# **Local Government Ombudsman (LGO)**

Investigate all complaints about adult care services, care provided by a council or care arranged directly with a care provider by:

- Someone paying with their own or family money
- Someone using money provided by a council, via direct payment for example

There is a step-by-step process for making an online complaint on the LGSCO website or a phone number to contact them.

A complaint should be made within 12 months of the problem. If left any longer the Ombudsman may not be able to help.

The LGSCO works to promote high-quality services for all people who use adult social care services. This is particularly the case where when investigating a complaint, the LGSCO detect service failures by a care provider that may affect its registration status. An information-sharing agreement and memorandum of understanding set out how information is shared

#### **Local Authority and Continuing Health Care-funded Service Users**

Any service user part or wholly funded by their Local Authority and Continuing Health Care can complain directly to the complaints manager who are employed directly via the LA.

## **Relevant Contacts**

Local Authority Complaints Manager (Adults)

Please see local government website

Social Services Local Office

Please see local government website

Continuing Health Care



## office@compasschc.co.uk

County Police HQ
Please see local Police website

The Parliamentary and Health Service Ombudsman
Millbank Tower
Millbank
London
SW1P 4QP
Tel. 0345 015 4033

The Local Government Ombudsman 10th Floor, Millbank Tower, Millbank, London

SW1P 4QP Advice Line Tel: 0300 061 0614 [for complainants]

## To Raise Concerns, contact:

The Care Quality Commission Citygate Gallowgate Newcastle Upon Tyne

NE1 4PA Tel. 03000 616161

They will take details of concerns and respond appropriately and proportionately to the information divulged.

#### **Related Policies**

Accessible Information and Communication

Consent

Dignity and Respect

**Duty of Candour** 

**Good Governance** 

Grievance

Safeguarding Adults

Safeguarding Children

Whistleblowing



#### **Related Documents**

## Complaints Record form

#### **Related Guidance**

- Resources and guidance for Social Care providers: <a href="https://www.lgo.org.uk/adult-social-care/resources-for-care-providers">https://www.lgo.org.uk/adult-social-care/resources-for-care-providers</a>
- Concerns about a care service <a href="https://www.scie.org.uk/contact/concerns">https://www.scie.org.uk/contact/concerns</a>
- Regulation 16 Receiving and acting on complaints <a href="https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-16-receiving-acting-complaints">https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-16-receiving-acting-complaints</a>
- CQC Complaints Matter <a href="https://www.cqc.org.uk/sites/default/files/20141208">https://www.cqc.org.uk/sites/default/files/20141208</a> complaints matter report.pdf
- Regulation 20 Duty of Candour <a href="https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-20-duty-candour">https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-20-duty-candour</a>
- Local Government and Social Care Ombudsman Annual Review of Complaints: <a href="https://www.lgo.org.uk/information-centre/reports/annual-review-reports">https://www.lgo.org.uk/information-centre/reports/annual-review-reports</a>
- Local Government and Social Care Ombudsman How to Complain <a href="https://www.lgo.org.uk/">https://www.lgo.org.uk/</a>
   make-a-complaint

#### **Training Statement**

All staff, during induction are made aware of the organisations policies and procedures, all of which are used for training updates. All policies and procedures are reviewed and amended where necessary and staff are made aware of any changes. Observations are undertaken to check skills and competencies. Various methods of training are used including one to one, on-line, workbook, group meetings, individual supervisions and external courses are sourced as required.

Date Reviewed: May 2024



Person responsible for updating this policy: Debbie Walter

Next Review Date: May 2025