



COMPLAINTS POLICY & PROCEDURE

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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.

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. 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.

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



- Principle one: ensure that the complaints process is accessible
- Principle two: ensure that the complaints process is straightforward for service users and their representatives
- Principle three: ensure that appropriate systems are in place to keep service users informed throughout the complaints process
- Principle four: ensure that the complaints process is resolution focused
- Principle five: 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 is responsible for following through complaints. However, there may be a specific post with responsibility for 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. **Care Supervisor.**



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 in the complaints book, the service user's file and in the home records.

Serious or Written Complaints

- Preliminary steps:
 - When we receive a written complaint it is passed to the designated lead manager, who records it in the complaints book and sends an acknowledgment letter within 5 working days to the complainant.
 - The manager also includes a leaflet detailing the organisation's procedure for the complainant. (Designated lead is the named person who deals with the complaint through the process)



- 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, 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.
- Depending on the seriousness of the complaint we might require contacting the police or the safeguarding team. Consent must be given by the service user or responsible family or representative.
- Investigation of the complaint by the organisation:
 - Immediately on receipt of the complaint, the complaints 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.
 - 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. This includes details of how to approach the CQC if the complainant is not satisfied with the outcome, utilising the Your Experience button on their website.



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- The outcomes of the investigation and the meeting are recorded in the complaints book, and any shortcomings in company procedures will be identified and acted upon.
- The company management formally reviews all complaints at least every six months 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.

Local Authority-funded Service Users

Any service user part or wholly funded by their Local Authority can complain directly to the complaints manager (Adults) who is employed directly via the Local Authority.

Relevant Contacts:

Local Authority Complaints Manager (Adults)

**Millmead House
Millmead
Guilford
GU2 4BB**

Social Services Local Office

Call 0300 470 9100 or email ascmash@surreycc.gov.uk (available 9am to 5pm, Monday to Friday)

OUT OF HOURS

Call 01483 517 898

Healthwatch Surrey

- Email enquiries@healthwatchsurrey.co.uk
- Call **0303 303 0023**
- SMS 07592 787533
- Visit Healthwatch Surrey

The Care Quality Commission
Citygate
Gallowgate
Newcastle Upon Tyne



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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

Adult Safeguarding

Consent

Dignity and Respect

Duty of Candour

Good Governance

Related Guidance

- Concerns about a care service <https://www.scie.org.uk/contact/concerns>
- Regulation 16 Receiving and acting on complaints <https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-16-receiving-acting-complaints>
- CQC Complaints Matter https://www.cqc.org.uk/sites/default/files/20141208_complaints_matter_report.pdf
- Regulation 20 Duty of Candour <https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-20-duty-candour>
- Local Government and Social Care Ombudsman annual review of complaints



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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.