


COMPLAINTS







(full detailed version)

VERSION No	8	
REVIEWED BY	Registered Manager (MP)	
NUMBER OF PAGES	5	

1. Policy Statement

- a) This organisation policy is intended to comply with Regulation 16 of the New Fundamental Standard Regulations.
- b) *This organisation accepts the rights of residents 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.*

2. The Policy

-  This policy is intended to ensure that complaints are dealt with properly and that all complaints or comments by residents 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, resident 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 residents and families in their Resident Guide, as well as is available to all residents and their families at all times in their individual information pack in their rooms and Monitor displays throughout the home.
-  *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:*
 - i. *Principle one: ensure that the complaints process is accessible*
 - ii. *Principle two: ensure that the complaints process is straightforward for service users and their representatives*
 - iii. *Principle three: ensure that appropriate systems are in place to keep service users informed throughout the complaints process*
 - iv. *Principle four: ensure that the complaints process is resolution focused*
 - v. *Principle five: ensure that quality assurance processes are in place to enable organisational learning and service improvement from complaints and customer feedback*

3. Aim of the Complaints Procedure

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

Specifically, we aim to ensure that:

- Residents, 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, usually the manager*
- Every written complaint is acknowledged within 7 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 residents and staff.

4. Responsibilities

The Registered Manager is responsible for investigating and following through complaints.

However, people, residents, their families and representatives may raise any concerns (regardless of how small they may be), and issues with any of the staff. Staff then must inform the RGN in charge, who must inform the manager and / or the deputy manager





5. Complaints Procedure

a) Verbal complaints

- i. *The organisation accepts that all verbal complaints, no matter how seemingly unimportant, must be taken seriously.*
- ii. *Front-line care staff who receive a verbal complaint are expected to seek to solve the problem immediately.*
- iii. *If they cannot solve the problem immediately, they should offer to get the RGN in charge to deal with the problem.*
- iv. *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.*
- v. *At all times in responding to the complaint, staff are encouraged to remain calm and respectful.*
- vi. *Staff should not, make excuses or blame other staff.*
- vii. *If the complaint is being made on behalf of the resident by an advocate, it must first be verified that the person has permission to speak for the resident, especially if confidential information is involved. (It is very easy to assume that the advocate has the right or power to act for the resident when they may not). If in doubt it should be assumed that the resident's explicit permission is needed prior to discussing the complaint with the advocate.*
- viii. *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).*
- ix. *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.*
- x. *Details of all verbal and written complaints must be recorded in the home's complaints log, and the resident's file.*

b) Serious or written complaints

i. Preliminary steps:

-  When a written complaint is received it is passed to the deputy manager or registered 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.
-  *If necessary, further details are obtained from the complainant such as what are the wishes of the person complaining, what are his or her desired outcome of the process.*
-  If the complaint is not made by the resident but on the resident's behalf, then consent of the resident, preferably in writing, must be obtained from the complainant where required.

- reasonable opportunity to deal with the situation.
- iii. It is a free service. Their job is to investigate complaints in a fair and independent way; they are not biased and do not champion complaints; they are independent of politicians, local authorities, government department, advocacy and campaigning groups, the care industry, and the CQC;
 - iv. they are not a regulator and do not inspect care providers.
 - v. The link below is to the LGO's web-page on "Adult social care" and has a short film that provides an overview of their adult social care service; it explains their role and how the service will benefit both residents and care providers. A free copy of the film and manuscript is available to download from the same location: <http://www.lgo.org.uk/adult-social-care/>
 - vi. The LGO is fully independent of the CQC. They deal with individual injustices that people have suffered and the CQC will refer all such complaints to them. The CQC deals with complaints about registered services as a whole and does not consider individual matters. They can share information with the CQC but only when deemed appropriate. The CQC will redirect individual complaints to the LGO, and the LGO will inform CQC about outcomes that point to regulatory failures.

b) Local Authority-funded Residents

Any resident part or wholly funded by their Local Authority can complain directly to the complaints manager (Adults) who is employed directly via the Local Authority and if not satisfied then they may complain to the LGO.

7. Training Statement

The Registered Manager is responsible for organising and co-ordinating training on the complaints procedure. All staff receive training in dealing with and responding to verbal and written complaints. The complaints policy and procedures are included in new staff members' induction training. In order to learn from mistakes, staff group meetings and supervisions are used to discuss formal complaint issues, in order that all staff can share and learn from the experiences.

8. Relevant Contacts:

Adult Social Care Direct

Tel.: 0345 60 80 191

Minicom: 01323 4666 30

Fax: 01323 466 567

E-mail: socialcaredirect@eastsussex.gov.uk

Text: 07797 878 11

Local Government Ombudsman (LGO)

PO Box 4771, Coventry, CV4 0EH

LGO Advice Team: 0300 061 0614

Making a complaint:

www.lgo.org.uk/making-a-complaint/

Care Quality Commission (CQC)

South East Region, Citygate, Gallowgate,

Newcastle upon Tyne, NE1 4PA

Tel.: 03000 61 61 61

Fax: 03000 61 61 71

E-mail: enquiries@cqc.org.uk

Citizens Advice on Consumer Law

Helpline: 03454 04 05 06

Website: www.citizensadvice.org.uk/consumer/

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

Related Policies
Adult Safeguarding
Consent
Dignity and Respect
Duty of Candour
Good Governance
Quality Assurance

ADDITIONAL GUIDANCE:

- z **Thank the complainant for raising a concern:** *You should consider yourself lucky that they are prepared to give up their time to let you know they have a problem- a complaint is a gift.*
- z **Say that you are sorry that the problem has happened:** *This is NOT an admission of guilt on your part, it's just good manners.*
- z **Start with the view that the complainant has a valid point, keep your mind open:** *Accepting that the customer may well have a point, even internally, may well trigger off ideas for an acceptable resolution.*
- z **Gather information:** *Listen to the complainant to help you begin gathering all the facts. Check back that you have understood their issue.*
- z **Investigate all facts:** *Conduct a thorough investigation of the situation, this could be checking care plans, daily records, rotas, mar charts, staff supervision, training, visitors log, as well as interviewing witnesses etc.*
- z **Correct the mistake:** *Clarify what the complainant's expectations are, what works for them. Make sure that your definition of the right fix is the same as theirs.*
- z **Learn from every complaint:** *Do something! Fix the process; train staff in the issue; eliminate the fault, improve the paper work. Make sure you eliminate the possibility of the situation occurring again. Let the complaining customer know that they have helped you resolve a problem - they'll feel great (and will probably tell their friends!). Let them know they have helped you improve your service.*
- z **Minimise reasons for complaints:** *Do you have a continuous improvement culture? Do you provide open, opportunity for stake holders to express their views regularly?*
- z **Remember:** *Well-handled complaints can transform the impression of your service. Think of times you have received excellent customer service in any field, and who you subsequently mentioned it to.*