


Policy No: 03-2107	Authorised: 	Date: 05/02/2020
<b>COMPLAINTS, CONCERNS, COMMENTS &amp; COMPLIMENTS</b>		

*This Policy summarises the procedures to be followed to process positive and negative feedback received regarding the perception of the quality of the Care Services delivered by the Organisation:*

A: THE FEEDBACK SPECTRUM - this is the range of responses that the Service Provider can invoke from service users relating to their perception of the quality of the care service provided. In a “hierarchy” format these are:

**Concerns >>>> Informal Complaints >>>> Formal Complaints >>>> Comments >>>> Compliments**

B: TYPES OF FEEDBACK:

1. **Comments:**

- 1.1 The Organisation believes that obtaining feedback about its services from service users and other stakeholders, which are not necessarily in the form of complaints, can provide a valuable tool within its objectives for Continuous Quality Improvement.
- 1.2 The Organisation believes that service user feedback in the form of Comments is not invariably viewed as negative. Both positive comments in the form of praise, and critical comments and complaints, are useful for Continuous Quality Improvement.


*Negative Comments will be treated as Concerns.*

2. **Concerns:**

- 2.1 The Organisation defines a Concern as being a specific expression of dissatisfaction or unhappiness, which falls short of being an actual Complaint. Some persons are reluctant to describe their views as a complaint, but would still like to communicate their point of view when they feel that something is not right.
- 2.2 Concerns will always be taken seriously. Some may quite appropriately be responded to immediately by the staff member to whom they are addressed, but the staff member will be encouraged to report these “acted-on” concerns to their line manager in case there are wider implications that require a more formal response.
- 2.3 Concerns can be acted upon through the Complaints Management Procedure, per section B:3 of this Policy.

3. **Informal Complaints and Formal Complaints:**


- 3.1 Complaints are usually quite specific and negative in their nature. If the complaint is unwritten and can be acted upon immediately it is classed as Informal. All other complaints are classed as Formal, and these will be actioned according to clauses 3.2 through 3.16 of this Policy. Per clause 2.3 above, this can also include the processing of some Concerns which may escalate into Formal Complaints if not checked.
- 3.2 It is the policy of the Organisation to welcome concerns and complaints regarding the care services provided and to look upon them as an opportunity to learn, adapt, and improve in order to provide better services. This Policy is NOT intended to apportion blame, to consider the possibility of negligence, or to be used as a mechanism for obtaining or providing compensation. It does NOT form part of the Organisation’s Disciplinary, Grievance and Appeals Procedure.
- 3.3 Complaints may originate from service users, their family / relatives, either directly or through the Contracting Authority, and even from the Organisation’s own Care Staff. Complaints may be received both verbally and in writing, and all are taken seriously and are dealt with promptly.

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- 3.4 Each instance of a Concern or Complaint will be reported / routed according to the following hierarchy:
- 3.4.1 Concerns / Complaints relating to daily care delivered by a Care Worker - report to the Registered Manager of the Organisation.
  - 3.4.2 Concerns / Complaints relating to the Domiciliary Care Services Manager - report to the Proprietor or Director of the Organisation.
  - 3.4.3 Complaints relating to the Proprietor or Director of the Organisation - **proceed as directed in clause 3.16** of this Policy.
- 3.5 For clauses 3.4.1 through 3.4.3 above, the following action will be taken according to circumstances:
- 3.5.1 Complete the appropriate sections of a Concerns / Complaints Record Form for appropriate action.
  - 3.5.2 Provide the complainant with a written acknowledgement within 2 working days. This acknowledgement should confirm that the Concern / Complaint will be fully investigated and reported back to the complainant within a maximum of 28 days.
  - 3.5.3 Undertake a thorough investigation into the Concern / Complaint; firstly to determine whether or not the complaint is justified, and if so what action is needed to correct the issue and to prevent a recurrence in the future.
- 3.6 Every effort will be made to resolve the Concern / Complaint and to provide a full response to the complainant within 28 working days.
- 3.7 It is recognised that some people may need independent help and support to raise concerns, and the service user is advised of the contact details of the local Advocacy services from where such help can be obtained. (Refer to *Policy No 3101* on Advocacy).
- 3.8 All contact with the complainant should be polite, courteous and sympathetic, and staff are expected to remain calm and respectful at all times. Staff should not accept blame, make excuses, or blame other staff. If the complaint raises potentially serious matters, (e.g. such as circumstances as referenced in clause 3.4 above), appropriate advice may need to be sought from legal counsel.
- 3.9 If the issues are too complex such that the complaint cannot be satisfactorily resolved within 28 working days then the complainant will be kept informed of any delays.
- 3.10 As a **SECOND STAGE** to the complaints handling procedure, if the complainant is not satisfied with the Service Provider's handling or progress of their Concern / Complaint, or is dissatisfied with the outcome, the complainant has the right to refer the complaint to the following external Authorities, details of which are as follows:

**Regulating Authority** -  
Care Quality Commission  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA  
Tel: 03000 616161  
Email: [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)  
Web: [www.cqc.org.uk](http://www.cqc.org.uk)

**Local Government Ombudsman** 53-55 Butts Rd, Coventry CV1 3BH, 0300 061 0614

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3.11 Once the Concern / Complaint has been resolved to the satisfaction of all parties, the Domiciliary Care Services Manager will take the following action:

3.11.1 Offer the complainant (and advocate, as appropriate) the opportunity to attend a meeting with staff to explain the results of the investigation and, where appropriate, to offer an apology. (An apology for what has happened is NOT an admission of any liability).

3.11.2 Provide the complainant with a written report of the results of the investigation, including any action that has been taken to prevent a recurrence, and the ways in which the Authorities identified in clause

3.10 of this policy can be contacted if the complainant is not satisfied with the outcome of the investigation.

signed-off 3.11.3 Complete the relevant sections of the Concern / Complaint Record Form, which will then be by the Domiciliary Care Services Manager, or authorised delegate.

3.11.4 Review any staff training issues, specifically the need for any re-training, that may have arisen as a result of the investigation.

3.12 The Domiciliary Care Services Manager is responsible for maintaining all records relating to a Concern / Complaint, using an appropriate Concern / Complaint Record Form as the basis for monitoring the progress made in resolving the Complaint. Records will include details of all Concerns / Complaints received, both written and oral, and copies of all statements from relevant parties.

3.13 Records of all Complaints, together with an on-going Complaints Record Log, are maintained in a separate Complaints Records File located at the Organisation's offices under the responsibility of the Domiciliary Care Services Manager.

3.14 The Complaints Record Log will be reviewed on a regular basis for apparent adverse trends in service quality as part of the Management Review of the Quality System, reference *Policy No: 2106*.

3.15 In accordance with statutory requirements all Concerns / Complaints Records will be kept on file for 10 years from date of first entry on the Complaints Record Log.

**3.16 Handling of Complaints relating directly to the Proprietor or Director of the Organisation:**

The Complaint will be reported directly to an appropriate external Authority, according to clause 3.10 of this Policy and with due regard to any relevant legal implications. In all other aspects, processing and handling of the Complaint will proceed as set down in clauses 3.6 through 3.9, and 3.11 through 3.15, of this Policy.

**4. Compliments:**

41 It is the policy of the Organisation to welcome comments and compliments regarding the care services provided and to look upon them as an opportunity to reinforce and confirm the effectiveness of care delivery and appropriate staff support.

*Positive Comments will be treated as Compliments.*

4.2 Comments and compliments may originate from service users, their family / relatives, either directly or through the Contracting Authority, and even from the Organisation's own Care Staff. These may be received both verbally and in writing, and will be valued by the service.

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- 4.3 Each comment or compliment will be reported / routed according to the following hierarchy:
- 4.3.1 Comment / compliment relating to daily care delivered by a Care Worker - report to the Registered Manager of the Organisation (usually the Domiciliary Care Services Manager).
  - 4.3.2 Comment / compliment relating to the Domiciliary Care Services Manager - report to the Proprietor or Director of the Organisation.
  - 4.3.3 Comment / compliment relating to the Proprietor or Director of the Organisation – report to the Manager, Proprietor or Director of the Organisation.
- 4.4 All comments / compliments will be referred to the appropriate service or person and noted in the Compliments Record Log. Written statements will be filed.

### FORMS REFERENCES:

*Complaints & Compliments Record Log*