

COMPLAINTS AND COMPLIMENTS

Scope

- Policy Statement
- The Policy
- Aim of the Compliments and Complaints Procedure
 - Responsibilities
 - Making a Compliment or Suggestion
 - o Compliments and Complaints Procedure
 - Verbal Complaints
 - Serious or Written Complaints
 - Vexatious Complainers
 - o Time Limits
- Local Government Ombudsman (LGO)
- Local Authority-funded Clients
- Relevant Contacts
- Related Policies
- Related Guidance
- Training Statement

Policy Statement

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

This organisation accepts the rights of Clients to make compliments, 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 both compliments and 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 Clients and their relatives, carers and advocates are taken seriously and that compliments are used to reinforce positive behaviour in the organisational culture. 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, Client 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 the Client and families on the Ashridge website https://www.ashridgehomecare.co.uk. A copy is also always available at request.



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:

- Principle one: ensure that the complaints process is accessible
- Principle two: ensure that the complaints process is straightforward for Clients and their representatives
- Principle three: ensure that appropriate systems are in place to keep Clients 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 Compliments and Complaints Procedure

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

We also find it important to share positive feedback when things have gone well to reinforce a positive working culture.

Specifically, we aim to ensure that:

- Clients, carers and their representatives are aware of how to send a compliment or complaint and that the company provides easy to use opportunities for them to register their views.
- 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 Clients 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.



Compliments and Complaints Procedure

Making a Compliment or Suggestion

Often, people feel more comfortable making compliments, suggesting improvements, than complaining formally. Suggestions can be made by anyone receiving services from us, or from their friends and family. To make a suggestion, you can:

- Speak to the manager or their deputy
- Utilise available feedback survey's we undertake
- If the compliment or suggestion is something that requires head office consideration to reward, recognize or manage performance, you can send it to the Registered Manager, Julie Skelly at Julie@ashridgehomecare.co.uk and Trudi Scrivener at trudi@ashridgehomecare.co.uk.

Details of all verbal and written complaints must be recorded in a compliments form in the Client's PASS record.

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 Client by an advocate, it must first be verified that the person has permission to speak for the Client, especially if confidential information is involved. (It is very easy to assume that the advocate has the right or power to act for the Client when they may not). If in doubt it should be assumed that the Client'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 a complaints form, in the Client's PASS record.

Serious or Written Complaints

Preliminary steps:

- When we receive a written complaint, it is passed to the designated lead manager, who records it in a complaints form 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 Client but on the Client's behalf, then consent of the Client, 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.
- 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.
- The outcomes of the investigation and the meeting are recorded in the complaints form, 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 Clients 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 Clients.

Time Limits

You should complain as soon as you can after the date on which the event occurred or came to your notice. If you complain more than 12 months later, it can be more difficult to investigate properly. However, we will consider whether you had a good reason for not making the complaint sooner and whether, despite the delay, it is still possible to investigate the complaint effectively and fairly.

Local Government Ombudsman (LGO)

Since October 2010 the Local Government Ombudsman (LGO) can consider complaints from people who arrange or fund their own adult social care. This is in addition to complaints about care arranged and funded by local authorities, which the LGO has dealt with for more than 35 years.

The LGO's new role includes those who "self-fund" from their own resources or have a personalised budget. It will ensure that everyone has access to the same independent ombudsman service, regardless of how the care service is funded. In most cases they will only consider a complaint once the care provider has been given reasonable opportunity to deal with the situation. 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; they are not a regulator and do not inspect care providers.

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 Clients 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/

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.

Local Authority-funded Clients

Any Client 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

Registered Manager

Julie Skelly

Julie@ashridgehomecare.co.uk

Founder

Trudi Scrivener

trudi@ashridgehomecare.co.uk

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

Adult Safeguarding

Consent

Dignity and Respect

Duty of Candour

Good Governance

Related Guidance

Resources and guidance for Social Care providers: https://www.lgo.org.uk/adult-social-care/resources-for-care-providers

Concerns about a care service:

https://www.scie.org.uk/

CQC 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

CQC 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: https://www.lgo.org.uk/information-centre/reports/annual-review-reports

Local Government and Social Care Ombudsman: How to Complain:



https://www.lgo.org.uk/make-a-complaint

Training Statement

All staff, during induction, are made aware of the organisation's 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, online, workbook, group meetings, and individual supervision. External courses are sourced as required.

Date Reviewed: August 2025

Person responsible for updating this policy: Julie Skelly

Next Review Date: August 2026