

Complaints Policy

Aim

SOS Homecare aims to provide high quality services for people who are often vulnerable, it is therefore important that we have a complaints process that is clear, and easy to use.

To develop a service that really does meet the needs of individuals who use our service, it is essential that having encouraged complaints, we listen to our customers and ensure appropriate action is taken.

This policy is intended to ensure that all staff members are aware and understand the complaints and concerns handling process and their role and responsibilities within this.

Objectives

To ensure that all staff / service users are aware of their right to complain and ensure that all complaints are dealt with quickly and effectively and documented appropriately. The intended outcome of this process is that staff / service users, their relatives or representatives are confident that complaints or concerns will be listened to, taken seriously and acted upon. We aim:

- To provide full and timely response to complaints and concerns.
- To ensure complaints and concerns are monitored and analysed to enable trends to be identified and acted upon.
- To ensure feedback is provided to all staff to ensure that SOS Homecare responds positively as an organisation.
- In following this procedure, staff should ensure that SOS Homecare's standards of confidentiality are met.
- If at any stage of the complaints process, the person making the complaint requests a meeting to discuss the situation, they should be given this opportunity.

3. Responsibilities

All employees have a responsibility to:

- Be proactive and highlight any issues that could lead to a complaint or concern to their line manager.
- Take an active role in handling and resolving complaints and co-operate with any investigation.
- Be responsive to lessons learned from complaints.

Registered Managers (and in their absence the most senior person on shift) is responsible for:

- Ensuring the safety of service users and staff.
- Investigating complaints and concerns that have been raised in their service including referral to the appropriate safeguarding team as per company policy and statutory obligation.
- Submitting Notifications as required by the CQC.
- Taking action to reduce the risk of recurrence.
- Ensure systems are in place to feedback to staff the outcomes, actions taken, and

lessons learned from the complaint.

- Ensure all complaints are logged, and action taken is also recorded.
- Instil a culture in which stakeholders feel that they can raise concerns and make formal complaints without fear of reprisals.
- Respond to and record details of informal complaints and concerns.
- Provide training for all staff in the handling of complaints and concerns on induction.

The Directors and Quality Manager are responsible for:

- Ensuring that complaints and concerns are recorded and responded to appropriately.
- Monitor any complaints that require notification to CQC.
- Provide support and guidance for all staff with complaints and concerns handling, for a local resolution.
- Offer debriefing sessions and support to all staff concerned.
- Ensure training is provided for newly appointed staff and Managers, and at the time of an acquisition or contract award to investigate complaints.
- Reporting through Internal Audit by the Quality Manager to the Directors
- Support the Registered Managers during the investigation and responses as required.
- Identifying any trends.
- Recommending further actions to be taken to minimise the risk of recurrence.
- Identifying best practice to ensure effective handling of complaints and concerns and positive feedback from Complainants wherever possible.

4. Definitions

A complaint is an expression of dissatisfaction when expectations, even unreasonable ones, are not met. All stakeholders (Service Users, Staff, Relatives, Friends, Social Workers, Care Managers, CQC, GP's etc.) that are involved in our services have a right to complain and express concerns.

Comments: Suggestions for how the service could be improved

Informal Complaints: Expression of minor dissatisfaction when expectations are not met

Formal Complaints: Expression of serious dissatisfaction when expectations are not met

Examples of the above can be found in Appendix 1 at the end of this document

5. Procedure

5.1 Written complaints

Written or emailed complaints are dealt with in a process which can take up to 4 stages:

- Receipt of the complaint
- Investigation of the complaint
- Responding to the complaint
- Independent review of a complaint

The following sections describe how to process each stage of a complaint, the timings that must be adhered to and the records that must be kept.

Receipt of the complaint

The primary objective of this stage is to reassure the Complainant that their complaint has been received and is receiving proper attention.

Before addressing the complaint, where necessary, the Registered Manager must ensure that the service user's immediate needs are being met. Once this has been confirmed the Registered Manager or delegated responsible individual will:

- Record the complaint in the complaint file.
- Acknowledge receipt of the complaint in writing.
- Provide a named contact that will be the single point of contact with the complainant throughout the procedure. This will normally be the Registered Manager or delegated responsible individual unless unavailable.
- Offer a meeting if it is felt that this may be helpful
- If the complainant attends an initial meeting to discuss the complaint then notes must be taken and held in the complaint file.
- Maintain a copy of the original complaint and a copy of all correspondence sent back to the complainant (clearly dated) within the complaints file.

This stage in the procedure must be completed in a maximum of **three working days** from the receipt of the complaint or as stated within the Local Authority contract if less than three working days. In the absence of the Registered Manager this stage will be carried out by the delegated responsible individual.

If the complaint relates to actions that are the responsibility of the Local Authority or Continuing Health Care (CHC), the complainant must be contacted by the Registered Manager, to ask whether they want the complaint referred to the correct organisation. With their agreement (which must be recorded in the complaint file) the complaint must be forwarded to the Manager of the relevant organisation. Should the Complainant not want the complaint forwarded, they must be advised in writing that the company may be unable to investigate, and they must contact the relevant authority if they wish to pursue their complaint. The action taken and copies of all correspondence must be recorded in the complaint file.

If the complaint indicates that legal proceedings are being taken or considered, then it must be immediately referred to the Directors.

The objective of this stage of the procedure is for SOS Homecare to fully understand how the complaint came about and decide what should be done to ensure it does not happen again.

The designated responsible individual will make an assessment of who can provide information relating to the complaint. Typically, this will be any members of staff that were involved in providing the services about which the complaint was raised.

The designated responsible individual will contact all of the identified individuals and:

- Provide them with details of the Complainant letter
- Invite them to attend a meeting to understand the circumstances which gave rise to the complaint

When carrying out the meeting, the delegated responsible individual will seek to understand:

- What happened to make the complainant raise a complaint
- What action was taken at the time

Once the investigation is complete the delegated responsible individual will:

- Decide if any additional actions need to be taken to ensure the circumstances causing the complaint will not arise again.
- Decide if any changes to systems or processes are needed.

All investigations must be completed within **a maximum of 20 working days** of receipt of the original complaint or as stated within the Local Authority Contract if less than this.

Notes must be taken at each meeting, attendees and apologies must be noted, and the meeting notes must be added to the complaint file. If the designated responsible individual decides that further actions are required to address the complaint, then these must be documented and added to the complaint file.

If individuals are unavailable to attend a meeting within the 20 working days' time limit (possibly due to sickness or annual leave) then the delegated responsible individual must inform the Complainant of the anticipated delay and when the investigation can be expected to be completed. A copy of this notification must be kept in the complaints file. If the delegated responsible individual decides that it will take longer than 20 working days to complete a thorough investigation, then they must inform the Complainant of the extended investigation and provide a new date by which the investigation can be expected to be completed. Delays must be reasonable and proportionate.

If individuals are unable to attend a meeting or would prefer to respond to the investigation in writing then they may do so provided that their response covers the three areas of the investigation:

- What happened to make the Complainant raise a complaint
- What action was taken at the time the complaint was received
- What action has been taken since to change systems or processes to ensure it doesn't happen again

The delegated responsible individual must ensure that a copy of any written response is held in the complaint file and complete notes in the computer system. If a first response does not explain the areas of investigation in sufficient detail then the delegated responsible individual may request further clarification until it does.

Complaints that involve more than one body will require co-operation across organisations and /or independent review

The objective of this stage in the procedure is to address any objections to the formal response that are raised by the complainant.

Should the complainant not be satisfied with the response they have the right to ask for a review. In the first instance this request must be forwarded to one of the Directors. The Complainant does have the right to contact the Local Authority or CQC, should they wish to do so.

5.2 Verbal Complaints

Verbal complaints can either be dealt with simply by the person receiving the complaint or their line manager. If not, the complainant should be encouraged to submit a written complaint which will be dealt with under the previous procedure if they are able to do so.

Receipt of Complaint

The objective of this stage in the procedure is to try and resolve the cause of the complaint as quickly and simply as possible and, if not, bring the complaint to the attention of an appropriate manager.

If a member of staff receives a complaint from someone verbally, either face to face or by telephone, they must make every effort to resolve the complaint there and then. This can often be done by listening sympathetically and with empathy and by giving a thorough explanation to the Complainant.

When they receive a complaint all staff must:

- Deal with it there and then and if possible with minimum points of contact.
Take responsibility for it – ‘my customer, my responsibility’. Where we have failed to provide a good quality service, or have failed to communicate appropriately with someone, we should always apologise. Staff should inform their line manager of the complaint, the outcome and record it appropriately.
- Know who can help if they cannot resolve the complaint on their own. Staff must know the management structure of the service and support available from the Regional Team.

If the staff member is able to take action they must determine if the complainant is satisfied with the action taken. All complaints and their resolutions must be recorded for future reference to enable future improvements to the service or in case the complaint is not resolved. If the complainant is not satisfied with either the explanation or resolution then the complaint must be referred to the staff-member’s line manager.

If you receive a complaint out of hours, this must be reported to your line manager as soon as possible, who will take the appropriate action as per procedure. Details of the complaint, date, time, name of the complainant, name of Service User, brief description must be recorded on CarePlanner

5.3 Telephone complaints received at the Head Office

The person receiving the call will email the Directors with a description of the complaint. The appropriate Director will usually ask the Registered Manager to call the complainant or, may call the complainant back. This will be confirmed in an email. The Director will contact the Registered Manager and support them in resolving the complaint.

5.4 Written complaints received at Head Office

On receipt of a written complaint the letter will be forwarded to the Directors. The Director will take the decision to forward this onto the appropriate person. This person will have responsibility for resolving the complaint under the written complaints procedure and will log

this on the computer system.

5.5 Complaints from members of staff

Sometimes complaints will be received at the Head Office from an employee or former employee with a grievance about a member of staff or the Registered Manager. In these circumstances the a member of the HR team will investigate the complaint.

Some complaints may be as a result of a local solution not being reached at the service, in the case of staff complaints; these may be grievances against a Registered Manager, or one of the Directors. These will be passed directly to the other Director and may be dealt with through the grievance policy.

5.6 Recordkeeping – Confidentiality and Consent

Those responsible for maintaining records should be mindful of Service User's right to access any records held about them. When recording complaints on the computer system, take into consideration that anyone with access rights at the service can view these records. In order to safeguard confidentiality, it may be necessary to put a note on the system to say that records of the complaint are held on a separate file.

5.7 Time Limits

There is a time limit for making a complaint. A complaint must be made no later than 12 months after the date on which the event occurred or, if later, the date on which the event came to the notice of the complainant. The time limit will not apply if SOS Homecare is satisfied that the complainant had good reasons for not making the complaint within the time and despite the delay it is still possible to investigate the complaint effectively and fairly.

5.8 Further steps

Once a complaint has been fully dealt with by SOS Homecare if a person is still not satisfied with the outcome they can refer a complaint to the Local Government Ombudsman (LGO) and ask for it to be reviewed. The LGO provides a free, independent service

The LGO Advice Team can be contacted for information and advice, or to register a complaint:

T: 0300 061 0614 (8:30am – 5pm, Monday to Friday)

M: Text "call back" to 07624 811595 (8:30am – 5pm, Monday to Friday)

E: advice@lgo.org.uk

W: www.lgo.org.uk

The LGO will not usually investigate a complaint until the provider has had an opportunity to respond and resolve matters. *Also, they are not able to consider complaints where the complainant is instigating legal proceedings.*

- SOS Homecare are registered with and regulated by CQC and this body can be contacted direct with concerns about a service provided. Further contact information for CQC and the local authority can be located within the Service User Guide.

6. Monitoring

The Care Governance Team are responsible for:

- Monitoring the effectiveness of the company complaints and concerns handling procedure.
- Identifying any trends.
- Recommending further actions to be taken to minimise the risk of recurrence.

7. Review

This policy and procedure will be reviewed every two years.

Appendix 1

Informal & Formal Complaints – Guidelines

	Examples
Comments Suggestions for how the service could be improved	Carers were late (less than 15 minutes in Extra care, or 30 minutes in dom care)
	General feedback from residents or service users
Informal Complaints Expression of minor dissatisfaction when expectations are not met	Carers were late (over 15 minutes in Extra care, or 30 minutes in dom care), and client not notified in advance
	NoK call to say dishes not put away properly
	NoK call to say incorrect type of bowl/plate/cutlery used
	Kitchen bin not emptied
	Client mentions that the carer seemed rushed
Formal Complaints Expression of serious dissatisfaction when expectations are not met	Anything in writing
	Repeated informal complaints about the same issue eg kitchen bin repeatedly not emptied, carers in a rush
	Any care concerns or safeguarding issues
	Any complaints requiring CQC notification