

Policy No: 01-2103	Authorised:	Date: 26.09.2016
<b>MANAGEMENT OF COMPLAINTS</b>		

*This Policy summarises the procedures to be followed to process complaints or concerns received from service users regarding their perception of the quality of the Care Service delivered by the Home:*

1. It is management policy 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 providing compensation. It does NOT form part of the Home's Disciplinary, Grievance and Appeals Procedure.
2. Complaints may originate from service users, their family / relatives, either directly or through the Contracting Authority, and even from the Home's own Care Staff. Complaints may be received both verbally and in writing, and all are taken seriously and are dealt with promptly.
3. Each instance of a complaint must be reported / routed to the Registered Manager. Upon receipt of the complaint the Registered Manager will take the following action:
  - 3.1 Complete the appropriate sections of a Complaints Record Form for appropriate action.
  - 3.2 Provide the complainant with a written acknowledgement within 2 working days. This acknowledgement should confirm that the complaint will be fully investigated and reported back to the complainant within a maximum of 28 days.
  - 3.3 Undertake a thorough investigation into the 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.
4. Every effort will be made to resolve the complaint and to provide a full response to the complainant within 28 working days.
5. 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 3202* on Advocacy).
6. 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, appropriate advice should be sought from legal counsel.
7. If the issues are too complex such that the Registered Manager is unable to satisfactorily resolve the complaint within 28 working days then the complainant must be kept informed of any delays.
8. 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 complaint, or is dissatisfied with the outcome, the complainant has the right to refer the complaint to appropriate external Authorities and / or Organisations, details of which are listed on page 3 of this Policy. These Authorities will include:
  - 8.1 Regulating Authority - e.g. C.Q.C.
  - 8.2 Local Government Ombudsman
  - 8.3 Funding Body (e.g. Social Services)
  - 8.4 Local Authority Clinical Commissioning Group
9. Once the complaint has been resolved to the satisfaction of all parties, the Registered Manager will take the following action:
  - 9.1 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).
  - 9.2 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 8 of this policy can be contacted if the complainant is not satisfied with the outcome of the investigation.

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- 9.3 Complete the relevant sections of the Complaints Record Form, which will then be signed-off by the Registered Manager, or authorised delegate.
- 9.4 Review any staff training issues, specifically the need for any re-training, that may have arisen as a result of the investigation.
10. The Registered Manager is responsible for maintaining all records relating to a complaint, using an appropriate Complaints Record Form as the basis for monitoring the progress made in resolving the complaint. Records will include details of all complaints received, both written and oral, and copies of all statements from relevant parties.
11. Records of all complaints, together with an on-going Complaints Record Log, are maintained in a separate Complaints Records File under the responsibility of the Registered Manager.
12. 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*.
13. In accordance with statutory requirements all complaints records will be kept on file for 10 years from date of first entry on the Complaints Record Log.

**FORMS REFERENCES:**

Form No: 2-205 Complaint Record  
Form No: 2-206 Complaints Record Log

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## KEY CONTACTS:

### Care Quality Commission

National Correspondence  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA  
Tel: 0300-061- 6161  
Fax: 0300-061- 6171

### Social Services

(local details as relevant)

### Local Authority Commissioning Group

(local details as relevant)

### The Local Government Ombudsman

PO Box 4771  
Coventry  
CV4 0EH  
[www.lgo.org.uk](http://www.lgo.org.uk)  
Tel: 0300-061-0614  
Fax: 024-7682- 0001  
Email: [advice@lgo.org.uk](mailto:advice@lgo.org.uk)

### Independent Advocacy Services

(local details as relevant)

### Independent Mental Capacity Advocate (IMCA)

39-41 North Road  
Islington  
London N7 9DP  
Tel: 020-3393- 8347  
Email: [imca@voiceability.org](mailto:imca@voiceability.org)

### Age UK

(details as relevant)

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