

Complaints Policy



Complaints Policy

1. Introduction

- 1.1. Christadelphian Care Homes (CCH) respects and values the opinions of residents regarding the care and other services we provide. We commit to listen sympathetically to any dissatisfaction expressed, take the complaint seriously, respond appropriately and learn lessons to avoid the problem reoccurring.
- 1.2. This policy describes how we will achieve this, through a complaints process which is fair and transparent.
- 1.3. Complaints or concerns raised by colleagues will be addressed through the grievance process, if the problem relates to them individually, or the whistle-blowing procedure where a protected disclosure is made. Please refer to the Grievance Policy and the Whistle-blowing Policy for further information.
- 1.4. Residents, their family or advocates may from time-to-time express negative opinions reflecting their experience in the moment, but which are not intended as complaints expecting or requiring a response. These will not be considered complaints under this policy. Colleagues will always seek to clarify the resident's intention and wishes and will make the offer of dealing with any dissatisfaction expressed in this way as a complaint through this procedure.

2. Principles

- 2.1. CCH will treat all complainants with compassion, courtesy and respect, and will uphold the resident's right to confidentiality.
- 2.2. CCH will respond to all complaints received. Complaints may be made by any resident, their family or advocate, with their consent or in their best interests. Complaints may be communicated verbally, electronically or in writing.
- 2.3. CCH recognises the importance of residents being able to speak freely and make a complaint regarding anyone in the organisation. If a resident does not wish to raise a complaint directly to management, colleagues will try to sensitively establish the reasons and try to resolve any concerns. CCH will ensure that residents understand they are free to complain without fear of reprisal.

- 2.4. CCH will ensure that this policy is easily accessible to residents (eg through resident information booklets, the CCH website etc.), and that information about how to complain and any feedback given meet the Accessible Information Standard and are in a format which the resident can understand. Please refer to the Accessible Information Standard Policy for further information.
- 2.5. CCH will ensure that our complaints process is fair and transparent and does not discriminate directly or indirectly on the basis of age, disability, race, religion/belief (including lack of religion/belief), sex, marital status, pregnancy/maternity leave, gender reassignment or sexual orientation.
- 2.6. Complaints should be submitted within 12 months of the incident or concern arising. This time limit can be set aside, at the sole discretion of the manager, if it is still practical to investigate the complaint with appropriate thoroughness and the complainant can demonstrate reasonable cause for delay in making the complaint.
- 2.7. Where other organisations are involved in a resident's care, CCH will work jointly with them to investigate and provide a single joint response to any complaints received.
- 2.8. If CCH receives a complaint about a service not provided by us, we will seek permission to share the complaint with the relevant service provider. If this is refused we will signpost them to the correct provider and provide their contact details.

3. Complaints procedure

- 3.1. When a complaint is made, colleagues will make an effort to resolve it immediately to the satisfaction of the complainant.
- 3.2. Colleagues will offer an apology for the fact that there was a need to complain and explain the complaints process as set out in the procedure steps.
- 3.3. Colleagues will report the complaint to the most senior colleague on duty. If the complaint relates to that individual, colleagues will report the complaint to the next most senior colleague.
- 3.4. The complaint will be entered into the complaints register and written acknowledgement of the complaint will be sent within three working days to the complainant. This is true of all complaints regardless of seriousness or the means of communication. This acknowledgement will include an invitation to meet and discuss the complaint, how the complaint will be investigated, who is responsible for investigating and the time limit for the investigation to be concluded.

- 3.5. The complaint will be investigated by a colleague with the appropriate knowledge, experience and seniority to conduct the investigation robustly. The investigation should usually be concluded within 28 days, however some cases may take longer. If the investigation is likely to take longer than 28 days, CCH will write to the complainant to explain the reason for the delay.
- 3.6. Following a full investigation, a letter of response will be sent to the complainant. This will include:
 - 3.6.1. A summary of the issue from the complainant's point of view
 - 3.6.2. Details of the evidence and sources consulted to investigate the issue
 - 3.6.3. A presentation of the findings for each issue
 - 3.6.4. A conclusion, stating clearly whether the issue is 'upheld', 'partially upheld' or 'not upheld'; unless it is ineligible, in which case the reason for this will be given (e.g. out of time or jurisdiction)
 - 3.6.5. An explanation of the outcome, including whether any remedial action or learning points have arisen from the investigation. If investigation of a complaint results in disciplinary action against any colleagues the complainant will be informed of this, but details of the outcome or ongoing investigation will remain confidential.
 - 3.6.6. An apology, where the issue is upheld and shortcomings have been identified.
 - 3.6.7. The complainant's rights and contact details of independent bodies that can be accessed in the event of dissatisfaction with the outcome of the investigation.
- 3.7. The complaint will be closed once confirmation has been received that the complainant is satisfied with the outcome. If no communication has been received within 28 days of sending the letter of response, CCH will assume the complainant is satisfied. In the event of dissatisfaction with the outcome, CCH will support the complainant to access further support (see Appendix 1).

4. The complaints register

- 4.1. A written record will be held by each CCH site of all complaints received.
- 4.2. The record will contain the complainant's details, the subject matter of the complaint, the date of the complaint, details of any delay where investigation took longer than the agreed response period, the outcome of the investigation, the date the letter of response was sent to the complainant and the date confirmation of satisfaction was received.
- 4.3. The complaints register will be stored securely in line with UK GDPR, data protection law and CCH data protection policies.

- 4.4. A record of the complaint will also be made in the individual resident's care file.
- 4.5. Where complaints are shared as part of learning lessons the complaint will be anonymised in line with UK GDPR and data protection law.

5. Roles and responsibilities

- 5.1. Any colleague employed by CCH may receive a complaint at any time. All colleagues must therefore understand how to respond to complaints in a sensitive, structured and timely manner.
- 5.2. Colleagues will receive appropriate training in line with their role and duties, at induction and on an ongoing basis, on how to manage complaints, and will be provided with access to the complaints procedure.
- 5.3. All colleagues will be provided appropriate opportunity to reflect upon and learn from complaints.
- 5.4. All colleagues will be clearly advised that swift escalation of any complaint to the appropriate person is necessary, and that deliberately withholding or concealing concerns expressed by residents or those acting on their behalf may lead to disciplinary action.
- 5.5. The manager is responsible for ensuring compliance with this policy by all colleagues at their site, having appropriate arrangements in place for monitoring and reporting on complaints and ensuring that complaints are given due consideration in improvement planning.

6. Safeguarding concerns

- 6.1. Where a complaint or concern relates to a resident who is experiencing harm, or is likely to experience harm, CCH will follow our safeguarding policy and procedures alongside the complaints procedures, seeking advice and guidance from relevant local safeguarding partners.

7. Vexatious complaints

- 7.1. CCH may receive complaints which cause considerable disruption to our work, require disproportionate cost or time to handle or negatively impact the wellbeing of colleagues due to the manner in which the complaint is made or its repetitive nature.
- 7.2. We recognise that CCH has a legal requirement under the Equality Act 2010 to make 'reasonable adjustments' for residents with a disability. Where residents may have a disability which makes it difficult for them to express themselves appropriately, we will consider the needs and circumstances of the individual when making any decisions.
- 7.3. CCH will not label an individual complainant as vexatious nor does the decision that a complaint is vexatious preclude the individual complainant from making a further complaint. Any further complaints will be dealt with under this policy.
- 7.4. If a colleague believes that the primary purpose or effect of the complaint, or the manner in which the complaint is made, is to disturb, disrupt or unduly pressurise CCH, our colleagues or any individual colleague, or the complaint is otherwise clearly unreasonable, the colleague will refer the complaint to the Manager.
- 7.5. The Manager may seek external advice if appropriate and will consider the history and context of interactions with the complainant as well as the nature of the complaint and the manner in which it is made.
- 7.6. If the complaint is not deemed vexatious by the Manager it will be returned to the appropriate point in the complaints handling process.
- 7.7. If a complaint is deemed vexatious, the Manager will respond directly to the complainant explaining why it is thought to be so, and will explain that the complaint will be closed with no further action. The decision to declare a complaint as vexatious will be recorded in the complaints register for future reference.
- 7.8. If any individual wishes to challenge a decision made in relation to this policy and all attempts to resolve the challenge locally have failed, CCH will support the complainant to access further support (see Appendix 1).

Appendix 1 – Unresolved Complaints

In the event that a complainant is dissatisfied with the outcome following investigation of their complaint, there are other bodies who can support or will need to be informed. Where external bodies are managing a complaint, CCH will work with the external body to provide any information requested within agreed timescales.

1. The relevant care regulator. In England, health and social care providers are regulated by the Care Quality Commission. In Wales the regulatory body is the Care Inspectorate Wales and in Scotland it is the Care Inspectorate. These regulators will not investigate complaints on behalf of individuals, but will look into details of any concerns raised regarding a care provider to prevent others from having a similar experience.

Care Quality Commission
National Correspondence
Citygate, Gallowgate
Newcastle upon Tyne NE1 4PA
Website: www.cqc.org.uk
Email: enquiries@cqc.org.uk
Tel: 03000 616161

Care Inspectorate Wales
Welsh Government Office
Sarn Mynach
Llandudno Junction LL31 9RZ
Website: www.careinspectorate.wales
Email: CIW@gov.wales
Tel: 0300 7900 126 option 2

Complaints Policy

-
2. The relevant ombudsman. Residents whose care is funded by Local Authority social services or self-funded have the right to raise their complaint with the Local Government and Social Care Ombudsman. Residents whose care is funded by the NHS have the right to complain to the Parliamentary and Health Service Ombudsman. Neither of these bodies will investigate the complaint until the provider has had the opportunity to respond and resolve the matter in the first instance.

The Local Government and Social Care Ombudsman

PO Box 4771

Coventry CV4 0EH

Website: www.lgo.org.uk

Email: advice@lgo.org.uk

Tel: 0300 061 0614

The Parliamentary and Health Service Ombudsman

Millbank Tower

30 Millbank

Westminster

London SW1P 4QP

Website: www.ombudsman.org.uk

Email: phso.enquiries@ombudsman.org.uk

Tel: 0345 0154033

-
-
3. The relevant Integrated Care System (ICS). Residents can make a complaint about a health service they are receiving or have received to the commissioner of the service. Local contact details for all ICS in the UK can be found [here](#).
4. Local Authority Complaints Teams. Residents have the right to raise a concern or make a complaint about their care, regardless of whether they receive funding from Local Authority social services or not. Residents can make a complaint about any organisation which provides services on the Council's behalf. The contact details for all Local Authority social care services can be found [here](#).

Complaints Policy

5. Professional bodies. If a complaint involves the serious misconduct of a healthcare professional, the relevant professional body can be informed. Details for the relevant body can be obtained from the manager.

6. Other bodies. Residents can obtain support from Healthwatch with making a complaint about a health service they are receiving or have received. Details of the local Healthwatch are available [here](#). Residents can also request details of their local Independent Complaints and Advocacy Service (ICAS) from the manager. Citizens advice provide further guidance and signposting to support for making a complaint about health and social care services, available [here](#).