



# Yowsun Care Complaints Handling Policy

This policy is intended to set out the values, principles and policies underpinning Yowsun Care's approach to managing and handling of complaints.

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This policy is to be implemented by all Operations team members.

This policy is addressed to all employees but is especially relevant to Operations team members.

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## **COMPLAINTS HANDLING POLICY**

OUTCOME 17, REGULATION 19 (Complaints)

### **Policy Statement**

This policy is intended to comply with the above Outcome and Regulation contained within the Care Quality Commission Essential Standards of Quality and Safety Guidance.

Yowsun Care accepts the rights of Service users to make complaints and to register comments and concerns about the services received (please see separate Comments and Compliments policy). It further accepts that they should find it easy to do so. It welcomes complaints and looks upon them as opportunities to learn, adapt, improve and provide better services.

This policy is intended to ensure that complaints are dealt with properly and that all complaints or comments by customers and their relatives, carers and advocates are taken seriously.

The policy is not designed to apportion blame, to consider the possibility of negligence or to provide compensation. It is not part of the organisation's disciplinary policy.

Yowsun care believes that failure to listen to or acknowledge complaints leads to an aggravation of problems, Service user 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 the complainant and the organisation.

**Aim of the Complaints Procedure**

Yowsun Care aims to ensure that its complaints procedure is properly and effectively implemented and that customers feel confident that their complaints and worries are listened to and acted upon promptly and fairly.

Specifically it aims to ensure that:

1. Customers, carers, users and their representatives are aware of how to complain and that the organisation provides easy to use opportunities for them to register their complaints
2. A named person will be responsible for the administration of the procedure
3. Every written complaint is acknowledged within 5 working days
4. All complaints are investigated within 14 days of being made
5. All complaints are responded to in writing within 28 days of being made
6. Complaints are dealt with promptly, fairly and sensitively, with due regard to the upset and worry that they can cause to both service users and staff.

### **Responsibilities**

The Registered Manager is responsible for following through complaints for the company. 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.

### **Complaints Procedure Verbal complaints**

1. The organisation accepts that all verbal complaints, no matter how seemingly unimportant, must be taken seriously.
2. Front-line care staff who receive a verbal complaint are expected to seek to solve the problem immediately.
3. If they cannot solve the problem immediately, they should offer to get their line manager to deal with the problem.
4. 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.
5. At all times in responding to the complaint, staff are encouraged to remain calm and respectful.
6. Staff should not accept blame, make excuses or blame other staff.
7. If the complaint is being made on behalf of the service user by an advocate, it must first be verified that the person has permission to speak for the service user, especially if confidential information is involved. (It is very easy to assume that the advocate has the right or power to act for the service user when they may not). If in doubt it should be assumed that the service user's explicit permission is needed prior to discussing the complaint with the advocate.
8. After talking the problem through, the manager or member of staff dealing with the complaint will suggest a course of action to resolve the complaint. 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).
9. 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 organisation's complaints procedure if they do not already have one.
10. Details of all verbal and written complaints must be recorded in the Complaints Book, the customer's file and in the home records.

## **Serious or written complaints**

1. Preliminary steps:
  - a. When we receive a written complaint, it is passed to the named complaints manager who records it in the Complaint Book and sends an acknowledgment letter within 5 working days to the complainant
  - b. The manager also includes a leaflet detailing the organisation's procedure for the complainant. (The complaints manager is the named person who deals with the complaint through the process)
  - c. If necessary, further details are obtained from the complainant; if the complaint is not made by the service user but on the service user's behalf, then consent of the service user, preferably in writing, must be obtained from the complainant
  - d. 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 complaints procedure immediately ceases
2. Investigation of the complaint by the organisation:
  - a. 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
  - b. If the issues are too complex to complete the investigation within 28 days, the complainant will be informed of any delays.
  - c. 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.
3. Meeting:
  - a. If a meeting is arranged, the complainant will be advised that they may if they wish bring a friend or relative or a representative such as an advocate
  - b. At the meeting a detailed explanation of the results of the investigation will be given and also an apology if it is deemed appropriate (apologising for what has happened need not be an admission of liability)
  - c. Such a meeting gives the organisation management the opportunity to show the complainant that the matter has been taken seriously and has been thoroughly investigated.
4. Follow-up action:
  - a. 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 Care Quality Commission if the complainant is not satisfied with the outcome
  - b. The outcomes of the investigation and the meeting are recorded in the Complaint Book and any shortcomings in organisation procedures will be identified and acted upon
  - c. The organisation 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**

Yowsun Care takes seriously any comments or complaints regarding its service. However, there are customers and staff 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 in order that the time factor required to investigate time and time again becomes less of a burden on the organisation, its staff and other Service users.

### **Local Government Ombudsman**

Since October 2010 the Local Government Ombudsman can consider complaints from people who arrange or fund their 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 do not take sides and they do not champion complaints.

They are independent of politicians, local authorities, government department, advocacy and campaigning groups, the care industry, and the Care Quality Commission. They are not a regulator and do not inspect care providers.

They are fully independent of the Care Quality Commission (CQC). They deal with individual injustices that people have suffered and CQC will refer all such complaints to them. CQC deals with complaints about registered services as a whole and does not consider individual matters. They can share information with CQC but only when they feel it is appropriate. CQC will redirect individual complaints to them, and they will inform CQC about outcomes that point at regulatory failures.

### **Local Authority funded Service Users**

Any service user, part or wholly funded by their Local Authority can complain directly to the Complaints Manager (Adults) who are employed directly via the local authority.

### **The Local Government Ombudsman for England**

10th Floor,  
Millbank Tower, Millbank, London  
SW1P 4QP  
Advice Line Tel: 0300 061 0614

### **Adult Social Services Southend Borough Council**

Civic Centre,  
Victoria Avenue,  
Southend-on-Sea, Essex  
SS2 5TB  
Email: [council@southend.gov.uk](mailto:council@southend.gov.uk)  
01702 215008

To Raise Concerns Contact:

The Care Quality Commission London  
City Gate, Gallow gate, Newcastle upon Tyne NE1 4PA  
CQC, address

They will take details of concerns and respond appropriately and proportionately to the information divulged.

## **Training**

The registered manager is responsible for organising and co-ordinating training on the complaints procedure.

All staff receive training in dealing with and responding to verbal and written complaints. The complaints policy and procedures are included in new staff members' induction training. In order to learn from mistakes, staff group meetings and supervisions are used to discuss formal complaint issues, in order that all staff can share and learn from the experiences.

This policy will be reviewed by the registered manager.

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