



4.18 OHN Complaints (& Compliments) Policy 2024

Scope

This policy is intended to ensure that complaints are dealt with effectively, in a timely manner and that all complaints or comments by residents, their relatives, carers and advocates, are taken seriously.

It 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. This organisation believes that failure to listen to, or acknowledge, complaints leads to an aggravation of problems, dissatisfaction of the service and possible litigation.

This policy and procedure are provided for the regulated activity of accommodation for persons who require Supported Accommodation and keyworking support services.

Equality Statement

Orchard House - Northampton is committed to equal rights and the promotion of choice, person-centred care and independence. This policy demonstrates our commitment to creating a positive culture of respect for all individuals. The intention is, as required by the Equality Act 2010, to identify, remove or minimise discriminatory practice in the nine named protected characteristics of age, disability, sex, gender reassignment, pregnancy and maternity, race, sexual orientation, religion or belief, and marriage and civil partnership. It is also intended to reflect the Human Rights Act 1998 to promote positive practice and value the diversity of all individuals.

Key Points

- We believe that failure to listen to, or acknowledge, complaints leads to an aggravation of problems, dissatisfaction of residents and potential litigation, as well as being in breach of key considerations of the Health and Social Care Act 2008 and Regulations 2014.
- Orchard House - Northampton supports the idea that most complaints, if dealt with early, openly and honestly, can be resolved at a local level.
- Our complaints policy is intended to respect and accepts the rights of residents to make complaints and to register comments and concerns about the services received.
- We provide accessible complaints literature for residents, families and other representatives to ensure they understand how they can make a complaint or raise a concern about the service they receive.
- We adopt the five principles of the [National Complaints Managers' Group \(England\) 'Good Practice Guidance for Handling Complaints Concerning Adults and Children Social Care Services.'](#)
- Every written and/or serious verbal complaint is acknowledged within three working.
- All complaints are aimed to be investigated within 14 days of being made wherever possible and no later than 28 days for complex or difficult complaints.
- On occasion, due to the complexity of the complaint and/or involvement of external agencies, e.g. the police, this may be extended. The nominated lead for the complaint within the



organisation will keep the complainant informed of any delays and include reasons where possible.

- All complaints will be brought to the attention of the designated complaints Manager without delay.
- The organisation, through the Registered Manager, audits complaints to identify themes and trends which may be indicative of organisational and safeguarding concerns.
- Compliments are important for learning and should be used to share, celebrate, and widely implement best practice.
- We recognise that some residents and family members do not feel comfortable making a complaint. We will consider what actions we must take to resolve any negative feedback including comments, 'grumbles,' or concerns. We will ensure we learn from these and keep a record of this feedback to form part of our complaints auditing.

Policy Statement

Our complaints policy is intended to respect and accept the rights of residents to make complaints and to register comments and concerns about the services received. It further accepts that they should find it easy to do so. We welcome complaints, seeing them as opportunities to learn, adapt, improve, and provide better services.

This organisation supports the idea that most complaints, if dealt with early, openly and honestly, can be resolved at a local level between the complainant and the organisation. The complaints procedure is made available to residents and their families. A copy is always kept in their Care and Support Plan in their homes and available in a format that can be understood by them and meets their communication needs.

The Local Government and Social Care Ombudsman published '[Caring about complaints: lessons from our independent care provider investigations in March 2019.](#)' This provides helpful guidance on learning from the themes and trends identified by the ombudsman to help organisations provide the best service possible.

The Local Government and Social Care Ombudsman has also created guidance on a good practice approach to managing compliments and complaints with Healthwatch: '[Adult Social Care: Quality Matters.](#)'

The [National Complaints Managers' Group \(England\) 'Good Practice Guidance for Handling Complaints Concerning Adults and Children Social Care Services'](#) provides a framework for managing complaints, endorsed by the Local Government and Social Care ombudsman and ADASS (Association of Directors of Adult Services).

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 persons using this service and their representatives.



- **Principle three:** ensure that appropriate systems are in place to keep persons using this service 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.

The Policy

We are morally obliged, through regulatory framework, to effectively manage complaints and to use these to learn, instigate remedial action and ensure continuous improvement.

Orchard House - Northampton aims to ensure that its complaints procedure is properly and effectively implemented, and that residents and family members feel confident that their complaints and concerns are listened to and acted upon promptly and fairly.

All staff and managers will be trained on this policy, and how to deal with minor complaints to the satisfaction of residents and family to minimise the risk of them escalating to major complaints or concerns. Where major complaints are raised by residents, their family, or any other stakeholder then these will be managed in a timely and professional manner.

How People Can Make a Complaint

- In person
- By telephone
- Through a member of our staff
- Through an advocate or representative

Where someone complains orally we will make a written record and provide a copy of it within three working days.

- By letter
- By email

Anonymous Complaints

We deal with anonymous complaints under the same procedure; however, it is better if the complainant can provide contact details so we can tell them the outcome of our investigation.

Aims of the Complaints Procedure

The complaints procedure aims to ensure that:

- Residents, their carers and representatives, are aware of how to make a complaint and that the organisation provides easy to use opportunities for them to register their complaints which are appropriate to their needs.



- Complaints will be acknowledged within three working days and will usually be completed and responded to between 14 and 28 days. On occasions where there are complex concerns or external agencies (e.g. the police) are involved this may be extended. The organisation will keep the complainant updated on any delays and, where possible, the reasons.
- A named person will be responsible for the administration of the procedure.
- All complaints will be dealt with promptly, fairly and sensitively, with due regard to the upset and worry that they can cause to both staff and residents.
- We will supply a copy of the complaints procedure to every person using this service and to any representative if that representative so requests, in a format that they can understand and meets their communication needs.
- Some complaints will require links with other policies and procedures, which may include:
 - Managing Allegations against Staff & Volunteers
 - Code of Conduct for Staff & Volunteers
 - Safeguarding
 - Whistleblowing

The written copy of the complaint's procedure includes details for the:

- Local authority complaints manager.
- Ofsted contact details including telephone, email and address.
- Local Government Social Care Ombudsman (LGSCO).

Responsibilities

The Registered Manager is responsible for managing complaints. However, the HR manager has delegated responsibility for some/all complaints. Communication between The HR Manager and the Registered Manager should be clear and transparent in order that the Registered Manager can demonstrate and evidence compliance.

Staff have a responsibility to comply with this policy which states that they must help people using this service and carers to make complaints, taking complaints seriously and responding to them, or passing them to the appropriate person.

Complaints Procedure

All complaints must be brought to the attention of the Registered Manager, without delay, who will ensure its receipt is recorded on the Complaint's Log.

Verbal Complaints

1. This organisation believes that all verbal concerns or complaints, no matter how seemingly unimportant, should be taken seriously.
2. Front-line care staff who receive a verbal complaint will be expected to seek to solve the problem immediately.
3. If front line staff cannot solve the problem immediately, they should offer to get their manager to deal with the problem.



4. Staff will be 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 required 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 resident by an advocate, it must first be verified that the person has permission to speak for the resident, especially if confidential information is involved. (It is very easy to assume that the advocate has the right or power to act for the person using this service when they may not). If in doubt it should be ascertained that the resident's explicit permission is granted before discussing the complaint with the advocate.
8. After talking a problem through, the manager dealing with the complaint will suggest a course of action to resolve the complaint. If this course of action is acceptable, then a 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, they should be given a copy of this organisation's complaints procedure if they do not already have one and receive support to understand how the complaint will be recorded, investigated and acted upon.
10. Details of all verbal and written complaints must be recorded in the Complaints Log, the resident's file and in the office records.
11. It is important to note that not all verbal complaints are minor, and just because they are not written does not mean that they are not serious.
12. On occasion residents and/or family may not be able to communicate in writing and staff will need to support them to make the complaint in the way that best suits them and/or identify an advocate to support them.

Written Complaints

Preliminary steps:

1. When we receive a written complaint, it is passed to the Registered Manager or their delegate, who records it in the Complaints Log and sends an acknowledgment letter within three working days to the complainant.
2. The Registered Manager (or their delegate) also includes the organisation's procedure for complaints. The person leading the complaint will consider the resident's needs and provide information in a format suitable for the person making the complaint.
3. If necessary, further details are obtained from the complainant.
4. If the complaint is not made by the resident but on the resident's behalf, then consent of the resident must be obtained and a record of the consent must be recorded.
5. If the complaint raises potentially serious matters, advice could be sought from a legal advisor. If legal action is taken at this stage, the registered manager must follow the legal advice on how to manage the complaint.
6. Consideration of a serious matter will include the Registered Manager assessing whether onward referral to Safeguarding, regulatory body and/or the Police is required.



Investigation of the Complaint by the Organisation:

1. Complaints will usually be completed and responded to between 14 and 28 days, and the organisation will be in a position to provide a full explanation to the complainant, either in writing or by arranging a meeting with the individuals concerned.
2. If the issues are too complex for the investigation to be completed within 28 days or are delayed due to an external agency e.g. the police, the complainant will be informed of any delays and include, where possible, reasons. Staff should consider if this meets the Duty of candour.
3. Where the complaint cannot be resolved between the parties, an arbitration service will be used. This arbitration 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 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 will be in their preferred communication format.
- The written account will include details of how to:
 1. Contact the regulatory body if the complainant is not satisfied with the outcome
 2. Raise the complaint with the local authority if the complainant's service has been arranged or funded by their local council.
 3. Ask the Local Government and Social Care Ombudsman to investigate their complaint.
- The outcomes of the investigation and the meeting are recorded in the Complaints Log, and any shortcomings in the organisation's procedures will be identified and acted upon.
- The organisation's management formally reviews all complaints monthly as part of its quality monitoring and improvement procedures to identify the lessons learned.
- Lessons learned from complaints will be used to develop action plans for continuous improvement and to update services, policies and procedures, training and will be shared at staff and management meetings.



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Compliments

Compliments will be used as a positive learning tool and will be audited to identify positive and best practice. Action plans will be developed to share and demonstrate how what is learned from compliments can be used to embed high quality care and will be used as case studies to improve staff performance across all teams.

As with action plans for improving after complaints, action plans will be monitored to ensure best practice is being embedded with updates where the agreed actions are not achieving the expected positive outcomes.

Abusive or Vexatious Complainers

Orchard House - Northampton takes seriously any comments or complaints regarding its service. We aim to deal with all complaints in ways which are demonstrably consistent, fair and reasonable. In a minority of cases, people pursue their complaints in a way which can either impede the investigation of their complaint or can have significant resource issues for the service. This can happen either while their complaint is being investigated or once the service has finished dealing with the complaint. This can arise from the inability of the organisation to meet the outcomes of the complaints, i.e. the complaints are unresolved.

Local Government and Social Care Ombudsman (LGSCO)

Since October 2010 the Local Government and Social Care Ombudsman (LGSCO) 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.

The LGSCO's role includes those who 'self-fund' from their own resources or have a personalised budget. 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 departments, advocacy and campaigning groups, the care industry and the CQC.
- They are not a regulator and do not inspect care providers.

The LGSCO is fully independent of the CQC, and deal with individual injustices that people have suffered. 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 LGSCO and the LGSCO will inform CQC about outcomes that point to regulatory failures.



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Local Authority-funded Residents

Any resident part or wholly funded by their local authority can complain directly to the complaints manager (children or adults social care) who is employed directly via the local authority.

Relevant Contacts

Local Authority Complaints Manager (Adults)

<http://www.northamptonshirescb.org.uk/health-professionals/taking-action/designated-officer/>
Tel: 01604 362993 Email: ladoreferral@nctrust.co.uk

Social Services Local Office

NASS or MASH Email adultcarenc@northamptonshire.gov.uk or telephone 0300 126 1000 (Monday to Friday, 9am to 5pm). or MASH@nctrust.co.uk

Out of Hours Service (Social Services)

This service is available when social services offices are closed
Northampton Childrens Service OOH Tel: 01604 626938

Police

The local police can be contacted via the non-emergency number 101

The Local Government and Social Care Ombudsman

PO Box 4771
Coventry
CV4 0EH

- Advice Line: 0300 061 0614
- <https://www.lgo.org.uk/>

The Parliamentary and Health Service Ombudsman

Millbank Tower
Millbank
London
SW1P 4QP

Call Customer Helpline on 0345 015 4033 from 8:30am to 5:30pm, Monday to Friday, except bank holidays. Calls are charged at local or national rates. Send a text to 'call back' service: 07624 813 005, with name and mobile number



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References and Further Reading

Organisational Policies

Managing Allegations about Staff and Volunteers Policy

Safeguarding Policy

Whistleblowing Policy

(Duty of Candour) as stated in Policy 2.6 Code of Conduct for Staff & Volunteers

Relevant References

[CQC Regulation 16: Receiving and acting on complaints](#)

[CQC Regulation 20: Duty of Candour](#)

[CQC Complaints Matter](#)

[Good Practice guidance for handling complaints concerning adults and children social care services \(England\) May 2016](#)

[Resources for care providers - Local Government and Social Care Ombudsman](#)

[Local Government and Social Care Ombudsman: How to Complain](#)

[The Local Government and Social Care Ombudsman - Caring about complaints: lessons from our independent care provider investigations](#)

[Adult Social Care: Quality Matters](#)