

## 1.29 Dealing with Compliments, Complaints and Concerns

Schedule Information	
Policy Category	Category 1 – Managers & Deputies, ELT - Urgent
	Category 2 – All Ops staff, Central Services, Housing
Directorate Lead	Quality & Continuous Improvement
Committee	ELT
Policy Owner	Director Of Operations
Lead Author	Head of Quality & Continuous Improvement
Summary of Policy	Versions prior to 2016 are available through archives and may
Changes	be requested.
Changes	V8.0 – December 2018 - Full update in line with national guidance and changes to St Anne's processes. Sets out the coordinating role of the Quality & Continuous Improvement Team, sets out reporting and administration more clearly. Separates concerns from complaints fully, makes clear that this policy and these procedures apply to all departments and St Anne's Housing as well as Operational Services, clarifies a number of issues, updates forms accordingly and adds a form for Comments & Suggestions.  V8.1 – June 2020 - An update specifically to remove reference to forms COM1 to COM4 and instead include details of use of the Datix Feedback Module. A paragraph has been added regarding seeking permission to send holding letter regarding a complaint. The flowchart has also been updated. Otherwise, the policy remains unchanged.  V8.2 – May 2021 – 1 year extension of expiry date for review of policy May 2021 under way. Change of organisation branding and policy header changed to fall in with new Website / Intranet branding. There has been no change to policy content.  V8.3 – July 2022  • Update in line with The Housing Ombudsman's Complaint Handling Code 2020 sets out requirements for member landlords that will allow them to respond to complaints effectively and fairly.  • Simplify and clarify the procedure and processes for receiving and responding to compliments, complaints and concerns  • Removed comments and suggestions  • Reflect St Anne's purpose, values  V8.4 January 2024 – Updated Template.  V8.5 June 2024 – Added the Director of Housing and Estates for stage 2 appeals. DATIX changed to Incident Reporting
	System. Template response letters uploaded to intranet.
Document Superseded	1.29 Dealing with Compliments, Complaints and Concerns V8.4
Consultation Process	PPWG, ELT
	,



Impact Assessment	Yes
Completed	
Statutory, Regulatory,	N/A
Compliance Considered	
Key Words	Compliments, Complaints and Concerns
Policy Cross Reference	1.02 Code of Conduct
	1.23 Safeguarding Policy & Procedure
	1.28 Whistleblowing Policy
	4.36 Tenant and Client Anti-Social Behaviour
	5.10 Building Repairs and Maintenance
	7.03 Confidentiality and Data Protection
	8.08 Grievance Procedure
PPWG Date	June 2024
ELT Date	July 2024
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Expiry Date	July 2026
Target Audience	Organisation Wide
Contact Details	Corporate Governance department.
	St Anne's Community Services
	Unit 5, Fountain Court
	Bruntcliffe Way, Morley, Leeds LS27 0JG
	Email: governance@st-annes.org.uk
Storage & Version Control	This is a controlled document, whilst it may be printed and
	shared, the electronic copy posted on the internal intranet is
	the controlled document.



This policy should be read in conjunction with the following:

- 1.02 Code of Conduct
- 1.23 Safeguarding Policy & Procedure
- 1.28 Whistleblowing Policy
- 4.36 Tenant and Client Anti-Social Behaviour
- 5.10 Building Repairs and Maintenance
- 7.03 Confidentiality and Data Protection
- 8.08 Grievance Procedure

## **Policy Statement**

St Anne's Community Services (SACS) has a purpose to 'make a difference everyday' - providing high quality care and support, to enable people to lead independent and fulfilled lives. Our response to compliments, complaints and concerns reflects our values of being Person Centred, Respectful, Open, Understanding and Dedicated.

St Anne's recognises that compliments, complaints and concerns provide valuable feedback: we want to know when things go right so we can celebrate and share that and when they go wrong, so we can put things right and improve what we do.

All feedback is used to inform, shape, develop and improve our services.

St Anne's values all feedback from clients & tenants, those close to them, external stakeholders, and anyone else who comes into contact with our services.

St Anne's therefore will positively encourage feedback through a range of methods, both written and verbal and using appropriate technology, interpreters, or other means wherever possible, enabling any person to provide feedback regardless of how, where or when they wish to do so.

We will put the person providing the feedback at the centre of the process by actively listening to what people say and make them feel confident that their views will be taken seriously, and that their views will be acted on, including through:

- Reassuring those raising concerns or complaints that they will not be victimised or treated unfairly for doing so
- Aiming to respond to concerns and complaints by working with the person to find a resolution and by being open about the action we have taken
- Whenever appropriate, giving an apology
- Ensuring that positive feedback is shared with the relevant staff
- Learn from any feedback given and improve our Services and Departments to meet the needs of our clients, tenants, and other stakeholders as a result.



#### All Feedback - Compliments, Complaints and Concerns can be made:

- Via St Anne's website under "Contact"
- By writing to the service
- By talking to, ringing or emailing the manager of the service, central service manager, their line manager or central services and asking for direction to whom may the appropriate person to speak to
- By talking to, ringing or emailing any of the staff of the service which the issue relates to

# Information About How to Give a Compliment, Make a Complaint, or Raise a Concern

Information about giving a compliment, making a complaint or raising a concern can be obtained:

- On St Anne's website you can download a copy of this policy, including accessible versions
- By ringing St Anne's Administration Team on 0113 243 5151: The Team will
   only take all initial details regarding the complaint and will pass the details of
   the complaint to the Quality & Continuous Improvement Team <a href="quality@st-annes.org.uk">quality@st-annes.org.uk</a>
- In St Anne's leaflet, 'Tell Us What You Think'

This leaflet summarises how people can give us their feedback. See Appendix 1

Every Client and Tenant in our accommodation-based services will receive a copy of this, and have it explained to them on first receiving a service from St Anne's and at regular intervals thereafter.

In all other services this information will be made available through leaflets/posters and in regular correspondence with the client.

Information about how to provide feedback will be made available in appropriate formats and languages or on tape if preferred. The leaflet will also be made available to relatives, friends, and advocates.

We work with the individual to ensure they feel listened to and supported throughout the complaint process where a complaint refers to protected characteristics, we will take care to ensure our processes in handling the complaint are sensitive to this factor, this may include for example the choice of investigation office, settings/location of meetings.

Depending on the area in which St Anne's is operating, services may need to notify their Local Authority complaints department or contract compliance team of the nature of the complaint and the response and should act accordingly.

**Appendix 2** is a flowchart setting out the process for Feedback: Compliments, Concerns and Complaints



#### Staff Issues

St Anne's Grievance Procedure exists for current and former staff to raise a concern or complaint to do with their employment, including their treatment by other St Anne's staff. This Compliments, Complaints and Concerns Policy is therefore not applicable for that purpose.

#### **Procedures**

## Quality File: maintaining records.

Every service regulated by the CQC will keep a quality file that will include these sections:

- Compliments
- Concerns
- Complaints
- Other Feedback (for example from the annual stakeholder survey)

## Compliments

A compliment is an expression of satisfaction about the standard of service we provide. Compliments are always welcome.

## Receiving a Compliment Verbally/ In writing /Website/Social-Media

- Forward the compliment to the relevant service manager/department. Written/social media feedback should be scanned/forwarded.
- If a verbal compliment is received, ask the person if they would write or email it to the manager of the service, so we can keep a clear and formal record of it. In addition, the person receiving the verbal compliment should make a contemporaneous note and send it to their manager explaining that it was verbal and this is their best recollection?
- Website feedback will go directly to QCI Team and be forwarded within 2 days to the relevant service manager /department manager
- The service manager/department manager should respond to and share the feedback with relevant staff/team departments.



#### Concerns

Some people may not want to make a formal complaint, but they may have concerns that require action to be taken.

It is important that concerns are listened to at a local level and the person understands that they are being listened to and taken seriously. The aim is to arrive quickly and fairly at a satisfactory resolution.

Any concern received will be:

- a) Acknowledged verbally by the person who receives the concern or in writing by the FLM
- b) Investigated by an appropriate person.

Some concerns may be answered and resolved very quickly by the member of staff to whom they are made. If the person raising the concern is happy with the immediate response, then the concern can be considered to have been resolved.

Some may take a little longer and, in those cases, should be investigated by the FLM or a relevant member of staff who the FLM delegates to do so. That member of staff must never be one against whom a concern has been raised (if that is the issue)

- c) Well communicated, keeping the person informed about the progress.
- d) Recorded: the service or department manager should complete a report on Incident Reporting System.
- e) Resolved within 10 days at the most, unless the issue is very complex and/or requires referral to another organisation which may prevent earlier resolution.

The Service Manager should process the feedback on the Incident Reporting System.

## **Serious or Complex Concerns**

In some instances, the seriousness or complexity of the concern being raised may be such that it should be treated as a full complaint and investigated in that manner (details are set out below).

If in doubt the FLM/central manager should discuss this with the Area Manager/line manager.

## Safeguarding

Any concern raised that relates to a safeguarding issue or suspected safeguarding issue must be dealt with immediately following the guidance in the St Anne's Safeguarding Adults Policy.



#### Offering Apologies to the Person Who Has Raised a Concern

All concerns will be taken seriously by all staff and those raising the concerns will be treated with compassion and understanding at all times.

Poor communication can make it more likely that the person raising the concern will not be satisfied and go on to pursue a complaint.

If an apology is appropriate, it is vital that a meaningful apology is not delayed, and that any apology is based only on the facts at that current time, and that no admission of personal or organisational legal liability is given.

Apologising – saying sorry – for the fact that a person has felt the need to make raise a concern/make a complaint does not constitute an admission of personal or organisational legal liability.

## If the Concern is Resolved

Once the serious/complex concern is resolved the FLM or Manager must:

- Inform the person that their concern will be treated as a formal complaint and that they will receive a letter acknowledging this
- Complete Incident Reporting System Feedback Module 'Concern' setting out details of the concern, all stages of the investigation, all communications made to the person raising the concern and the outcome.

## If the Concern is not Resolved or Not Upheld

If the concern is not resolved to the person's satisfaction, then the FLM must:

- Inform the person that their concern will be treated as a formal complaint and that they will receive a letter acknowledging this
- Complete Incident Reporting System Feedback Module 'Concern' as above and including the reasons why the concern was not resolved.
- Contact the Quality & Continuous Improvement Team to inform them of a new formal complaint.
- The Quality & Continuous Improvement Team will contact the Area Manager, inform them that the concern is to be escalated to a complaint and begin the complaints procedure.

#### **Repeated Concerns**

Some issues can reoccur, for example disputes between clients where they live together in communal services.

Where the same concern continues to be generated then this should be discussed with the Area Manager and an action plan developed.



## **Reporting Feedback- Concerns and Compliments**

The Quality & Continuous Improvement Team will prepare a report and present this to the Quality & Continuous Improvement Group every two months.

A Summary of the Compliments and Concerns report will be prepared for the following Quality and Safeguarding Committee and reported to Board as appropriate.

#### Complaints

A complaint is an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the organisation, its own staff, or those acting on its behalf, affecting an individual resident/client/stakeholder or group of resident/clients/stakeholders.

## Safeguarding

Any complaint raised that relates to a safeguarding issue or suspected safeguarding issue, must be dealt with immediately following the guidance in the St Anne's Safeguarding Adults Policy.

The complainant must be reassured that we will do everything to ensure that the person involved is safe. At the point of producing the resolution letter information should then be given showing that the complaint has been addressed in line with GDPR legislation.

## Time Limit on a Complaint

Most complaints must be made no later than 12 months after:

The date the event occurred or, if later,

The date the event came to the notice of the complainant.

If those timescales have elapsed, a letter will be sent by the Quality & Continuous Improvement Team to explain why the complaint will not be investigated.

The time limit will not apply if St Anne's is satisfied that:

The complainant can give a good reason for not making the complaint within that time period, and despite the delay, it is still possible to investigate the complaint effectively and fairly. Management of all complaints will be coordinated by the Quality & Continuous Improvement Team (QCIT) to ensure consistency, fairness and a timely response.



For all complaints St Anne's will:

- Acknowledge the complaint in writing or by email.
- Ask an appropriate person to carry out an investigation.
- Treat the complaint in confidence.
- Keep the complainant informed of progress.
- Resolve the complaint within a clear timescale appropriate to the level or complexity of the complaint received.

## **The Complaints Process**

## Receiving a Complaint

Anyone can make a complaint.

- All staff should take the following steps when receiving a complaint:
- Contact their line manager/out of hours on call emergency line if they consider anyone is at immediate risk.
- Find out if the person feels able to talk to you, would prefer to talk to another member of staff, needs an advocate or an independent interpreter.
- Confirm the details of the complainant, the actual complaint and the desired outcome (resolution).
- Note that the person making the complaint does not have to put anything in writing but should be supported to do so if they wish.
- St Anne's Administration Team will only take all initial details regarding the complaint and will pass the details of the complaint to the Quality & Continuous Improvement Team <u>quality@st-annes.org.uk</u>
- Complete the first part of the Incident Reporting System Feedback Module 'Complaint'.

Complaints received via St Anne's Website are automatically directed to the Quality & Continuous Improvement Team.

Complaints received by letter (scanned) or email must immediately be sent – by email - to the Quality & Continuous Improvement Team quality@st-annes.org.uk



## Acknowledgement

A member of the Quality & Continuous Improvement Team will contact the relevant person:

Complaints regarding Operational Services – the relevant Area Manager.

Complaints regarding Central Services – the relevant Department Head.

Complaints regarding Housing issues – the Senior Housing Manager.

An acknowledgement letter will be sent out by the Quality & Continuous Improvement Lead within 3 working days of receipt of the complaint.

#### Investigation

## The investigator

In Operational Services / Central Services/ Housing: the Area Manager / Department Head / Senior Housing Manager will either:

- Investigate the complaint themselves or,
- Delegate the investigation to another appropriate individual.

If the complaint involves very serious allegations or it is felt that an external independent investigation is needed, this will be decided by the Head of Quality and Continuous Improvement.

#### The Investigation

When conducting any complaints investigation St Anne's will establish the facts in a systematic way:

- Collecting and assessing evidence
- Conducting interviews
- Referring to client records and documents and taking expert advice as required.

Once the evidence has been gathered, it will be assessed in order to decide what is fair and reasonable in the circumstances of each complaint.



If the investigation into a complaint results in action under St Anne's disciplinary procedures, then:

- The complaints process will be continued to its conclusion, as set out in the process above.
- In the response letter, the complainant will be informed that their complaint has led to disciplinary action (but not the details due to the GDPR and Data Protection legislation)

## **Timeframes Response in Most Situations**

## Stage 1

Acknowledgement letter will be sent within 3 working days, this will include details of the person appointed to conduct the investigation.

Within 10 working days of the complaint being acknowledged, a formal report will be completed by the appointed investigator. The investigator will contact the Quality & Continuous Improvement Lead for that complaint and agree with them a form of wording for the response letter to be delivered in a manner and format the person making the complaint will understand. The response letter will contain:

- A summary of each element of the complaint
- A summary of the investigation, including key facts and issues. Conclusions of the investigation including determining if there was an error, omission, or shortfall for each element of the complaint
- Providing an apology and explanation of what happens next where there was an error, omission, or shortfall
- Any wider learning or wider service changes that will take place as a result of the complaint
- Information on what the person complaining should do if they are still unhappy

The response letter will then be sent to the complainant. The appointed investigator will also update the Incident Reporting System feedback Module – Complaint record.

#### **Holding Response in More Complex Situations**

If, because of the complexity of the complaint or the matter it concerns, it has been impossible to complete the investigation within the 10 days of acknowledging the initial complaint, then the appointed investigator must agree the extension with the complainant and send a holding letter.



Assuming permission is given, a holding letter will be sent by the Quality & Continuous Improvement Team, in liaison with the appointed investigator. This will set out:

- An explanation of why the investigation is taking more than 10 days A realistic revised timescale not exceeding a further 10 days by which it is expected to have completed the investigation fully.
- An offer to meet to discuss the progress so far.

# Stage 2 - Appeals Investigation by the Chief Executive or Director of Housing and Estates

If the complainant is not satisfied with the outcome of the formal complaint response, they can appeal to the Chief Executive. If the stage 2 appeal relates to housing complaint, the Director of Housing and Estates will respond. They will have up to 28 days from the date the response letter was sent to them to appeal.

If they wish to appeal the complainant must write to the Chief Executive or Director of Housing and Estates stating why they are still dissatisfied. The Chief Executive or Director of Housing and Estates will:

- Acknowledge the escalated complaint within three working days of receipt, and
- Make a formal response within 20 working days.

Depending on the nature of the complaint, the Chief Executive or Director of Housing and Estates may:

- Choose to commission further investigation within St Anne's, or
- May commission an independent external review.

Any need to extend the response deadline will be communicated to the complainant. Any additional time will only be justified if related to convening a panel. The investigation should not take longer than 3 months, where possible.

The Incident Reporting System Feedback Module - Complaint record will then be updated when this process is complete.



#### **Ombudsman or External Regulators**

The Chief Executive's formal response must state that if the complainant is still not satisfied, they can appeal to an appropriate external body, which could include:

- Local Service Commissioners, where the complaint regards a Local Authority funded service.
- The Local CCG, where the complaint regards a health funded service.
- The Care Quality Commission, where the complaint regards a registered service.
- The Local Government Ombudsman, for all support and care related complaints (including those made by someone who is self-funded).
- The Housing Ombudsman, where the complaint regards a housing issue (See Appendix 3).

As part of the organisational response to a complaint, if the findings of investigations warrant doing so, the written response must include a sincere expression of sorrow or regret for the incident or issue giving rise to the complaint.

This apology must be clear and unambiguous and may be given verbally in addition to the written apology within the resolution letter.

If a complaint has been upheld, it is good practice to offer both a verbal and written apology.

## **Unreasonably Persistent and/or Vexatious Complaints**

Having completed the formal complaints procedures above, a complainant may be identified as unreasonably persistent and/or vexatious due to the behaviours they display. These may include:

- Behaviours/actions which are disproportionate, harassing or repetitious.
- Seeking unrealistic outcomes relative to the issue being raised and stating that their intention is to persist until that outcome is achieved.
- Repeatedly making the same complaint with minor differences but not accepting the outcome of any investigation into their complaints.

Complainants who are deemed to be 'persistent or vexatious' should still be dealt with fairly and properly whilst ensuring other clients, other tenants or staff are not adversely affected. Further guidance on dealing with persistent and/or vexatious complaints is available from St Anne's Head of Corporate Governance.



## Legal Action by a Person Who Has Made a Complaint

If. at any point during the complaints process the person who has made a complaint states that they have sought, or intend to seek, legal advice in regard to their complaint the details should be passed to the Head of Corporate Governance and where appropriate the insurance brokers, as decided by the CEO and or the Head of Corporate Governance.

If. during the investigation the person who has made a complaint decides to take legal action the complaints process may be halted to determine whether continuing with the complaint could prejudice the outcome of legal action.

The decision to discontinue the complaints process lies with the Director with responsibility for the area that the complaint is about, once all of the information has been made available and legal advice has been sought.

## **Anonymous Complaints**

All anonymous complaints received by St Anne's will be investigated if there is enough information to carry out such an investigation following procedures outlined within the St Anne's Whistleblowing Policy.

#### Confidentiality

All complainants will be dealt with in line with St Anne's Confidentiality Policy, the Data Protection Act and Caldicott Principles.

## **Administration of Complaints**

A register will be kept by the Quality & Continuous Improvement Team of all complaints, setting out:

- Each complaint received
- The subject matter and outcome(s)
- Details of the reasons for delay where an investigation took longer than the agreed response period agreed, and
- The date the report of the outcome of the investigation (the response letter) was sent to the complainant.

The Incident Reporting System Feedback Module – complaint record will be updated as appropriate at each stage.



Complaints will be collated by the Quality & Continuous Improvement Team for the monitoring and analysis of trends or patterns, identifying areas of improvement across the organisation and to ensure learning has been implemented at a local level from the original complaint.

## **Reporting Complaints**

The Quality & Continuous Improvement Team will prepare a report regarding all complaints, together with their outcome and any recommendations for changes to practice resulting from learning derived from the process every two months.

Recommendations to changes in practice and lessons learnt will be presented to the Quality & Safeguarding Committee within their standard board cycle.

#### Review

This Policy and the Procedures will be formally reviewed at least every 3 years or earlier in light of new legislation or good practice guidelines, with a review of complaints being, concerns and compliments being made to the Quality & Safeguarding Committee.

St Anne's will regularly review the Complaints, Concerns and Compliments Procedure across all its services to ensure there is sufficient awareness of and confidence in the procedure among both clients and staff.

As part of the regular reviews, clients will be consulted to ensure they are happy with the procedure and that the procedure works well for them.

#### **Further resources:**

- Appendix 1 Compliments, Complaints and Concerns leaflet <u>1.29</u>
  Appendix 1 Compliments, Complaints & Concerns Easy Read.PDF
- Appendix 2 Complaints and Concerns Flowchart
- Appendix 3 Housing Ombudsman Complaints Procedure. <u>1.29 Appendix</u>
   3 The Housing Ombudsman's Complaint Handling Code 2020.PDF
- Stage 1 and Stage 2 response letter templates are available on the intranet.



## Appendix 2 - Concerns and Complaints process

