Compliments and Complaints Procedure Policy

CQC Fundamental Standards

Legislation	Details
Regulation 16: Receiving and Acting on Complaints	Health, social and other care professionals must have the intention of this regulation is to make sure that people can make a complaint about their care and treatment. To meet this regulation providers must have an effective and accessible system for identifying, receiving, handling and responding to complaints from people using the service, people acting on their behalf or other stakeholders. All complaints must be investigated thoroughly and any necessary action taken where failures have been identified in line with the requirements of the relevant professional regulator.

Key Lines of Enquiry

KLOE	How this applies to Compliments and Complaints Policy
Effective	This Compliments and Complaints policy is an aspect of effective because an integral part of providing social care is the ability to maintain and improve the quality of service provided to the service user. An effective complaints procedure means that the process is clearly explained, efficient and monitored in order to ensure complaints are handled professionally and successfully.
Responsive	The ability to respond quickly and effectively to a complaint is essential because it allows the complaint to be rectified as quick as possible in order to ensure the service provided is an effective and responsive.

This policy should be read in conjunction with our:

- Safeguarding Vulnerable Adults Policy
- Complaints record
- Quality Assurance Policy
- Duty of Candour Policy

Policy Statement

Policy Aims

The purpose of this procedure is to maintain and improve the quality of service provided by Micrah Healthcare by ensuring that effective and appropriate action is taken upon receipt of compliments and complaints.

A key consideration is to make arrangements flexible within the parameters of these procedures; treating each complaint according to its individual nature, with a focus on satisfactory outcomes, organizational learning and those lessons leading to service improvement.

To be compliant with the regulation, Micrah Healthcare will:

- bring the complaints system to the attention of service users and people acting on their behalf in a suitable manner and format
- facilitate the making of complaints when one is being made
- acknowledge and investigate all verbal and written complaints and (where relevant), work with other services where the complaint is of a joint nature to address the issues raised
- ensure that service users have access to and the help of an independent advocacy service, which they might need to make a complaint where they lack the capacity or means to make the complaint without such assistance; an advocate can assist the person at all stages in the complaints process

Micrah Healthcare works on the principle that if a service user or anyone who acts in their best interests wishes to make a complaint or register a concern they should find it easy to do so. It is the Micrah Healthcare's policy to welcome complaints and look upon them as an opportunity to learn, adapt, improve and provide better services. This policy ensures that complaints are dealt with properly and that all complaints or comments by service users and their relatives and carers are taken seriously.

The policy is not designed to apportion blame, to consider the possibility of negligence or to provide compensation. It is not the same as the disciplinary policy. However, Micrah Healthcare understands that failure to listen to or acknowledge complaints could lead to an aggravation of problems, service user dissatisfaction and possible litigation.

Micrah Healthcare supports the principle that most complaints, if dealt with early, openly and honestly, can be sorted at a local level, ie between the complainant and Micrah Healthcare. If this fails due to the complainant being dissatisfied with the result, Micrah Healthcare respects the right of the complainant to take the complaint to the next stage by seeking a review with the relevant reviewing body of how the complaint was addressed.

The aim is always to make sure that the complaints procedure is properly and effectively implemented and that service users feel confident that their complaints and worries are listened to and acted upon promptly and fairly.

Scope
This procedure applies to anyone within Micrah Healthcare receiving a compliment or complaint about any individual linked to, or any service provided by, the organization. This procedure also covers the responsibilities of the Complaints Co-ordination team, and where applicable,any other people called upon to investigate a complaint.

If a complaint or concern is an allegation or suspicion of abuse, for example sexual abuse, physical neglect or abuse, or financial abuse, it should immediately be investigated following the appropriate safeguarding policies and procedures.

In a situation where a person discloses physical or sexual abuse, or criminal or financial misconduct, it must be reported to the necessary authority even if the person does not want to make a complaint.

In any case involving a vulnerable adult or children, including threat of self-harm and/or harm to others, all staff should implement effective safeguarding policies and practice, referring to the appropriate safeguarding board.

Compliments

This policy encourages all kinds of feedback. Anyone who has a relationship with Micrah Healthcare can compliment a member of staff, a team or the organization. Compliments are passed on to staff and their line manager, and are used to identify areas of good practice Micrah Healthcare can learn from. Compliments can be submitted verbally to any member of staff, who will then forward this on to Micrah Healthcare

Making a Complaint

> **Key Question: Can I make a complaint about an incident that happened few months ago?**
>
> Complaints can be made twelve months from the date when the event or subject of the complaint came to the notice of the complainant. If good reasons exist for the complaint not being made within 12 months, and it's possible to investigate the complaint fairly, Micrah Healthcare may still decide to consider the complaint.

When a complaint is received, it should be viewed positively, and as an opportunity to improve aspects of the services provided by Micrah Healthcare.

If a member of staff is approached by an individual wanting to make a complaint, they should listen to the complaint and provide a copy of the complaint form. An explanation must be given about the various ways in which the complaint may be made. The complaint can be made either by the complainant, with the help of a member of staff or an advocate of the complainant's choice in the following ways:

- Using the complaint form, which can be filled in personally;
- Writing a personal letter of complaint.
- By email.
- Making a formal complaint verbally, either in person or over the telephone.
- (In this event, the person receiving the complaint must make a written record of the complaint, which the complainant should sign in agreement if present, or which is sent out to the complainant to be signed and returned to Micrah Healthcare in a pre-paid envelope).

Whichever method the complainant chooses to voice their complaint, a written record of the complaint must be made within 24 hours.

Letters of a complaint or completed Complaints Forms should then be sent to the Complaints Co-ordination Team

The individual making the complaint must be assured by the person they have contacted that they will be supported throughout the process, and as far as the procedures allow, their confidentiality will be maintained.

Principles of Complaints Handling

1. Service users, their representatives and carers are always made aware of how to complain, for example, by having a complaints notice displayed prominently in public areas, having copies of the complaints procedure included in the information given to service users, and having the procedure available in alternative formats in line with users' communication needs.

2. Service users, their representatives and carers are always made aware that Micrah Healthcare provides easy-to-use opportunities for them to register their complaints.

3. A named person is always responsible for the administration of the procedure.

4. Every written complaint is acknowledged within two to three working days.

5. Investigations into written complaints are held within 28 days.

6. All complaints are responded to in writing by Micrah Healthcare.

7. Complaints are dealt with promptly, fairly and sensitively with due regard to the upset and worry that they can cause to service users and those against whom the complaint has been made.

8. Micrah Healthcare recognises national guidance on complaints handling, which uses a three-stage (two stages for some self-funding service users) model of:

    a. local resolution
    b. complaints review
    c. independent external adjudication by Local Government and Social Care Ombudsman (LGSCO), Health Service Ombudsman or through the Independent Healthcare Advisory Services (IHAS).

9. The person to whom complaints should be made is _____. **(Provide a named person or complaints manager.)**

Key Question: Will my complaint be kept confidential?

Complaints will be handled in the strictest confidence, in line with our Confidentiality policy, the Data Protection Act, the Human Rights Act 1998 and any other legal obligations.
Confidentiality will be maintained so that only managers and staff who are leading the investigation know the contents of the case. Anyone disclosing information to others who are not directly involved in the case should be dealt with under disciplinary procedures.
Information will not be disclosed to third parties unless the complainant or representative who has provided the information has given consent to the disclosure of that information.
However, information will be disclosed if it is in the best interests of a Service User, or the protection, safety or well being of a child or vulnerable adult. In these circumstances, escalation should take place in line with safeguarding procedures.

The Complaints Procedure

Stage one: local resolution

Micrah Healthcare works on the basis that wherever possible, complaints are best dealt with directly with the service users by its staff and management, who will arrange for the appropriate enquiries to be made in line with the nature of the complaint. This can involve using an independent investigator as appropriate or if the complaint raises a safeguarding matter a referral to the local safeguarding adults authority.

Stage two: complaints review

In line with national guidance, Micrah Healthcare then recognises that if the complaint is still not resolved, the complainant has a right to take their complaint to the body responsible for the commissioning of the service, eg local authority and/or health service (again depending on the nature of the complaint and type of service involved). A self-funding service user whose care and support has no local authority involvement is entitled to go directly to the LGSCO for resolution.

Stage three: independent external adjudication

If complainants are still dissatisfied with the management and outcome of their complaint, Micrah Healthcare is aware that they can refer the matter to the LGSCO/Health Service Ombudsman in respect of some private healthcare providers through the IHAS for external independent adjudication.

Role of the Care Quality Commission

Micrah Healthcare makes its users aware that the Care Quality Commission (CQC) does not investigate any complaint directly, but it welcomes hearing about any concerns. It accordingly provides users with information about how to contact the CQC by referring them to the CQC's leaflet *How to Complain About a Health or Social Care Service* (July 2013) (available on the CQC website).

Micrah Healthcare also sends to the CQC any information about complaints requested or required as part of CQC's compliance reviewing policy.

Safeguarding issues

In the event of a complaint involving alleged abuse or a suspicion that abuse has occurred, Micrah Healthcare refers the matter immediately to the local safeguarding adults' authority, which will usually call a strategy meeting to decide on the actions to be taken next. This could entail an assessment of the allegation by a member of the Safeguarding Authority team.

Micrah Healthcare will also notify the CQC.

Receiving a Complaint
Micrah Healthcare will investigate a complaint in a manner appropriate to resolve it as efficiently as possible, proportionate to the seriousness of the complaint.

The Complaints Co-ordination Team Lead will acknowledge of complaints within 24 hours. The complaint will then be considered by the CCT to decide who will be appointed to deal with the complaint. The CCT consists of a member of the Corporate Services team, a member of the Marketing Team and a member of the Finance team.

The CCT will then write to the complainant within **10 days** with details of how their complaint will be handled. This letter will detail the name of the person appointed to manage the complaint.

In the majority of cases, the Complaints Co-ordination Team will pass the complaint to the Manager of the project to resolve the problem. In cases where the Manager is the focus of the complaint, the Complaints Co-ordination Team will decide on the most appropriate person to deal with the complaint.

The person appointed to handle the complaint will write to the complainant within 5 working days of being appointed to manage the complaint, to inform them how their complaint will be managed. This letter must include:

- an action plan for handling the complaint.
- realistic timescales within which the complaint will be managed and timescales for responding.
- any further relevant information regarding the process.
- an offer to discuss the complainant's expectations and desired outcome.
- information about providers of independent advocacy services e.g. the Independent Complaints Advocacy Service or Voice Ability.

The complainant can expect that:

- They will be kept up to date.
- Their complaint will be investigated and, where appropriate, they will receive an explanation based on facts.
- Assurance that the matter has been investigated and action has been taken to prevent a re-occurrence.
- To be informed of any learning for the organization.
- A remedy will be made where appropriate.

The Complaints Co-ordination Team will monitor the progress of the complaint, and ensure that timescales are met. The CCT will have no direct input into resolving the complaint. This will enable the team to work objectively in the case of an appeal. One member of the Complaints Co-ordination Team may act as a process advisor for the investigation team, but will not take an active part in the investigation.

Key Question: Will I be informed of the outcome of my complaint?

Yes. Within 28 working days of being appointed, the person responsible for managing the complaint will inform the complainant of the outcome of their investigations into the complaint. This may be done in person; however, in all cases, a formal written response must be provided to the complainant and/or their advocate.

Verbal Complaints

Micrah Healthcare adopts the following procedures for responding to complaints and concerns made verbally to staff or to managers.

1. All verbal complaints, no matter how seemingly unimportant, are taken seriously and are immediately acknowledged as concerns.

2. Front-line care staff who receive a verbal complaint are instructed to address the problem straight away.

3. If staff cannot solve the problem immediately they should offer to get the manager to deal with the problem.

4. All contact with the complainant should be polite, courteous and sympathetic. There is nothing to be gained by staff adopting a defensive or aggressive attitude.

5. At all times staff should remain calm and respectful.

6. Staff should not 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 the 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 will clarify the agreement with the complainant and agree a way in which the results of the complaint will be communicated to the complainant (ie 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 and give them a copy of the complaints procedure.

10. Details of all verbal complaints are recorded in the complaints book by the staff or managers who receive the complaint and on the individual's care records with information on how a specific matter was addressed.

Written Complaints

Micrah Healthcare adopts the following procedures for responding to written complaints.

Preliminary steps

1. When a complaint is received in writing it is passed on to a named person, eg the registered manager or registered provider/complaints manager who records it in the complaints book and sends an acknowledgement letter within two working days, which describes the procedure to be followed.

2. The complaints manager/named person is responsible for dealing with the complaint throughout the process, including for any investigations carried out by an independent person, who will report to the named person/complaints manager.

3. If necessary, further details are obtained from the complainant by the person carrying out the investigation. If the complaint is not made by the service user but on the service user's behalf, then consent of the service user, wherever practical in writing, is obtained from the complainant to provide that information.

4. If the complaint raises potentially serious matters, advice will be sought from a legal advisor. If legal action is taken at this stage any investigation under the complaints procedure should cease immediately pending

the outcome of the legal intervention.

5. A complainant, who is not prepared to have the investigation conducted by Micrah Healthcare or its parent organisation or is dissatisfied with the response to the complaint, is advised to contact the organisation or organisations responsible for commissioning their services (local authority and/or health service) for a review of their complaint.

6. The complainant then has the option of taking the matter to independent external adjudication and will be referred to the information provided by the CQC in its leaflet *How to Complain About a Health or Care Service* (February 2014).

7. If the complaint involves safeguarding issues requiring an alert to the local safeguarding authority, Micrah Healthcare will follow the safeguarding procedures, carrying out any internal investigation in line with any plan agreed with the safeguarding staff (with information shared with the CQC).

Investigation of a complaint (other than safeguarding)

1. Immediately on receipt of a written complaint, Micrah Healthcare will launch an investigation and aims within 28 days 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 to complete the investigation within 28 days, the complainant will be informed of any delay and the reason for the delay.

Meeting

1. If a meeting is arranged the complainant is advised that they may, if they wish, bring a friend or relative or a representative such as an advocate.

2. At the meeting, a detailed explanation of the results of the investigation is given and an apology if it is deemed appropriate (apologising for what has happened need not be an admission of liability).

3. Such a meeting gives the organisation the opportunity to show the complainant that the matter has been taken seriously and has been thoroughly investigated.

Follow-up action

1. After the meeting, or if the complainant does not want a meeting, a written account of the investigation is sent to the complainant.

2. This includes details of how to take the complaint to the next stage if the complainant is not satisfied with the outcome.

3. The outcomes of the investigation and the meeting are recorded in the complaints book and any shortcomings in procedures are identified and acted upon.

4. The management reviews all complaints to determine what can be learned from them. It regularly reviews the complaints procedure to make sure it is working properly and is legally compliant.

Staff Support
All documentation relating to the investigation will be stored securely in the case file. Members of staff named in the complaint (personally or by role) should be informed of the complaint, and fully supported by their relevant line manager. Any investigation should be comprehensive, fair and timely, and should not apportion blame but seek only to improve. A number of supports are available for staff, including Line manager, Managing Director, Peer support, Occupational Health, Professional bodies.

Micrah Healthcare will monitor that all staff and service users are aware of the complaints policy and procedures through training, meetings and reviews, service user welcome packs, email and the website. A global notice will be sent to managers and staff to notify release of this document and any subsequent updates to this policy will be provided. Notification of this document will be included in the all-staff email bulletin and staff briefings. All managers will be given training for the implementation of this policy as appropriate. A training needs analysis will be undertaken with other staff affected by this document and any appropriate training will be provided to staff as required.

Monitoring and Evaluation
The Complaints Co-ordination Team will log the process of each complaint, enabling results to be reviewed on a regular basis by the Managing Director.

The Managing Director will regularly review complaints in detail and monitor compliance with the complaints procedure on a monthly basis.

Micrah Healthcare will demonstrate the use of feedback to learn and improve.

An annual report will be produced, which will detail:

- a number of complaints received.
- a number of complaints received are considered to be based on solid evidence or good reasons (complaints upheld).
- issues and key themes that the complaints have raised.
- lessons learnt.
- actions taken or being taken, to improve services as a result of the complaints made.
- a number of cases being considered or referred to the Ombudsman.
- Equality impacts data.
- Production of a report for the Managing Director that includes identification of trends and highlighting issues for audit.

Equality impact assessment.
A preliminary EIA has been conducted with the intention to eliminate unlawful discrimination, advance equality of opportunity and foster good relations, as stated in the Equality Act. The assessment includes the protected characteristics of race, disability, gender, sexual orientation, age, religious or other beliefs, marriage and civil partnership, gender reassignment and pregnancy and maternity, and to promote the positive practice and value the diversity of individuals and communities. So far, no adverse impacts have been identified that arise specifically from the policy or procedures. However, further information will be sought during wider consultation and monitoring.

Quality assurance: Micrah Healthcare will monitor both the effectiveness of the complaints process and how complaints information is being used to improve services and delivery of care. A system will be established to:

- Disseminate learning from complaints across Micrah Healthcare.
- Include the use of complaints procedures as a measure of performance and quality.
- Use complaints information to contribute to development and service planning.

Training

All care staff are trained to respond correctly to complaints of any kind. Complaints policy training is included in the induction training for all new staff and updated as indicated by any changes in the policy and procedures and in the light of the experience of addressing complaints.

Monitoring and Review of this Procedure
This procedure is part of Micrah Healthcare quality standards. Compliance with the policy and procedures laid down in this document will be monitored by the Managing Director, together with independent reviews by both Internal and External Audit on a periodic basis.

The Managing Director is responsible for the monitoring, revision and updating of this document.

This policy will be kept under review in light of operational experience and national guidance. The first review will take place one year from adoption, and positive action will be taken to resolve any issues.

Key Points to Take Away

All compliments should be forwarded on to Micrah Healthcare

Our Complaints Procedure enables any individual or organization coming into contact with our services to express their views and have those views valued and issues resolved fairly and transparently.

Complaint investigations will be completed within 28 working days.

It means really listening to and valuing feedback when it is received and seeing it as an opportunity for enhancement and service improvement in line with our approach to continual improvement and Quality Assurance Policy.

At Micrah Healthcare, the client is at the heart of our service quality and improvement processes.

We operate a system to champion client feedback and complaints and we all play an important role in making that system work well.

After reading this Policy, you should be able to:

- Understand what Compliments and Complaints Procedure Policy is and how the Compliments and Complaints Procedure Policy operates;
- Understand how Compliments and Complaints Procedure Policy operates at Micrah Healthcare and have an awareness of the actions we take in preventing, identifying and reporting concerns;
- Understand the role you play in Compliments and Complaints Procedure Policy.

If you have not understood any of these points, please ask your Line Manager or trainer for further help.

Policy Review

A Director will review this policy at least once a year to make any updates needed.

Authorisation and Signature

This Policy is the authorised version agreed by the Directors of Micrah Healthcare.

All employees are expected to follow this policy and failure to do so could result in disciplinary action.

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Adetutu Adeyinka

Director