

P0024 – COMPLAINTS, COMMENTS AND COMPLIMENTS POLICY



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Revision History

Date	Version	Summary of Changes	Section(s) Changed
21/06/18	1	New Policy	-
01/04/19	2	Change to council names	Section 1 Introduction
24/04/19	3	Updated contact information for other organisations	Section 14 Contact Information
25/04/22	4	Review and update of entire policy to ensure alignment with changes to regulation, legislation and Tricuro Quality, Safety, Compliance and Governance Standards.	All Sections
05/06/24	5	Update organisation changes and format	All Sections
29/11/24	6	Updated post stage 3 details adding Local Government and Social Care Ombudsman and removing CQC. Updated Roles and Responsibilities.	Section 12 Section 7

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1. Introduction

Tricuro strives for high standards in service delivery and welcomes feedback from individuals, users of our services, commissioners, wider stakeholder groups, and our workforce. Such feedback is invaluable in helping us evaluate and improve our work.

2. Scope

This policy applies to all staff employed by Tricuro where feedback is provided, whether through discussion, surveys, direct complaints, comments or within compliments. Every member of staff has responsibility to ensure they comply with this policy. Failure to do so may place vulnerable people in our care at risk and may result in disciplinary action being taken.

3. Purpose of this Policy

Tricuro is committed to providing a good standard of quality services to service users, other agencies and organisations and will take seriously any concern or complaint and will look into it promptly, for resolution as quickly as possible. We recognise that everyone who uses our services, agencies and other organisations have the right to raise concerns or complaints and provide comments and compliments about our services, have access to clear information on how to voice complaints and concerns. The procedure is open to everyone who receives or requests a service from Tricuro and people acting on their behalf and ensure this is provided and accessible along with a standard leaflet outlining this policy and procedure which should be on display and available to anyone who asks for it. All staff are required to read, understand, and adhere to the policy and its procedures.

4. Regulation and Legislation

The Care Quality Commission (CQC) detail in a similar way against [the Health and Social Care Act 2008 \(Regulated Activities\) Regulations 2014](#) and the [2015 amendment](#) the need to evidence that care plans are meaningful, and meet the expectation set against regulatory compliance:

[Regulation 12: Safe care and treatment](#)

[Regulation 13: Safeguarding service users from abuse and improper treatment](#)

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

[Regulation 17: Good Governance](#)

[Regulation 20: Duty of candour](#)

Local Authority Social Services & National Health Service Complaints (England) Regulations 2009; [Social Care Provider Complaints – Section 11](#). This regulation applies where it appears to a local authority considering a complaint that the complaint is wholly or in part a social care provider complaint.

[Home - Local Government and Social Care Ombudsman](#) who look at individual complaints about councils, all adult social care providers (including care homes and home care agencies) and some other organisations providing local public services.

5. Principles

The principles of the policy and procedures are to:

- Ensure everyone knows how to raise a complaint and how a complaint will be handled
- Ensure that complaints are dealt with consistently, fairly, proportionately, and sensitively within clear time frames
- Ensure we are open and accountable

- Ensure we put things right and support our ethos of Safety in Learning
- Provide individuals with a fair and effective way to raise a complaint

- Ensure that complaints are monitored to support continuous improvement

Tricuro will ensure that we:

- Listen carefully to complaints and treat complaints as confidential, where possible
- Record, store and manage all complaints accurately and in accordance with the Data protection Act 2018
- Investigate the complaint fully, objectively and within the stated time frame
- Notify the complainant of the results of the investigation and any right of appeal
- Inform the complainant of any action that will be implemented in order to ensure that there is no re-occurrence
- Report on a quarterly basis, the number of complaints received, the outcomes and any actions taken

Advocacy support from Tricuro cannot be given to someone making a complaint against the company or a service within it. This is because it could be argued there was a conflict of interest. At any stage a complainant may seek advocacy support from an external agency.

6. Accessible Information Standard

Tricuro supports equality of access for all and is committed to complying with the [Accessible Information Standard](#). The Standard applies to service providers across the NHS and adult social care system. All organisations that provide Social Care services, NHS services and GP practices are required by law to follow the Standard as set out in [section 250 of the Health and Social Care Act 2012](#) which sets out a series of requirements for organisations that provide NHS and/or publicly-funded adult social care or health services for commissioners. As a providers of Adult Social Care services, the standard requires Tricuro to **identify, record, flag, share and meet** the information and communication needs of people with a disability, impairment, or sensory loss. These 5 steps **must** be routinely and consistently followed.

7. Roles and Responsibilities

The Board / CEO

The Board / CEO (where the complaint does not involve the CEO) are responsible for investigating complaints and report their findings to a meeting of the full Board when:

- A stage 2 complaint is against the Chief Executive Officer
- A complainant has appealed against the findings of a stage 2 complaint

At the first available meeting after an investigation carried out by the CEO or Board member has been completed, the CEO or Board will hear the investigation report and consider the findings. After the meeting the Chair will write to advise the complainant of the outcome, the suggested remedy and what to do if they are still unhappy. The CEO or Board will review quarterly a complaints report in order to:

- Check performance with regards to:
 - Whether the procedure was properly followed with respect to timeframes and maintaining confidentiality
 - Whether all remedies were actioned satisfactorily and in a timely way
- Awareness of the policy and procedure and how to make a complaint or give feedback among people who use the service
- Review the policy and procedure and if they remain fit for purpose or require adjustment

- Monitor any trends and agree appropriate action at an organisational level, for example training for staff and volunteers or improvements in areas of service delivery
- Day-to-day responsibility for ensuring this policy is put into practice is delegated to the Director of Corporate Affairs with support from the Locality Manager where appropriate

Director of Corporate Services (DCS)

Where a complaint has been made against a Manager, the DCS will be responsible for carrying out an investigation. A letter of acknowledgement will be sent within 5 working days of receipt of the complaint. When the investigation is complete the DCS will send a letter of explanation to the complainant within the timeframe set out in the procedure advising of the outcome, suggested remedy and what to do if they are still unhappy. The DCS is responsible for action planning in response to where changes or improvements have been identified as needed and ensuring actions are satisfactorily completed.

Business Administration Team

The Business Administration Team will manage the log centrally and ensure it remains current against complaint forms received. The Business Administration Team will ensure timely alerts will be sent to complaint leads as deadlines for responses approach.

Operational Quality Managers

The Operational Quality Managers are responsible for ensuring policies and procedures are reviewed and updated and undertake audits and analyse trends and themes against the Quality Assurance Framework, Performance Data and Audit Cycle. The Operational Quality Managers are responsible for ensuring service managers are supported in completing compliant responses at Stage 2 of a complaint and ensuring lessons learned from complaints are cascaded and implemented accordingly. The Operational Quality Managers will also review lessons learned from complaints to ensure these are implemented and embedding.

Service Managers

Service Managers are responsible for investigating complaints against members of staff and volunteers. When the investigation is complete the complaint lead will send a letter of explanation to the complainant within the timeframe set out in the procedure advising of the outcome, suggested remedy and what to do if they are still unhappy. Service Managers are responsible for ensuring:

- All complaints, comments and compliments are appropriately recorded
- All staff are aware of and correctly follow the complaints, comments and compliments policy and procedure
- Appropriate systems are in place within the services they manage to ensure that services users are aware of how to raise complaints, comments and compliments and that information about how to do this is easily accessible
- All actions required in response to a complaint or comment within services they manage are completed in a timely and satisfactory manner

Staff

All staff are responsible for:

- Understanding and following the policy and procedure
- Informing people who use the services about how to raise complaints, make comments and share compliments; providing appropriate support to do this where needed
- Discussing with their line manager as soon as is possible any incident which they think has or may result in a complaint. Note that the person raising the complaint does not formally need to say they are complaining.

8. Definition of a Complaint

A complaint is any expression of dissatisfaction by an individual, whether justified or not. An individual may make a complaint if they feel Tricuro has:

- Failed to provide a service or an acceptable standard of service or made a mistake in the way the service was provided
- Failed to act in a proper way
- Provided an unfair service

9. Concern or Complaint

It is important to establish the difference between a concern and a complaint. Taking informal concerns seriously at the earliest stage will reduce the likelihood of their developing into formal complaints. If concerns about the provision of a service this must be raised with the manager and the member of staff (where relevant) immediately, so that the concern can be understood and acted upon to ensure a correction or improvement can be addressed, investigated (where required) and implemented.

10. Anonymous Complaints

Complaints received anonymously will be recorded and considered, though action may be limited if further information is required to ensure a full and fair investigation can be undertaken and improvements implemented.

11. Comments and Compliments

Tricuro recognises that when people have taken the time to offer a comment or compliment their contribution should be acknowledged with a response. Anyone making a comment or compliment will receive a written communication summarising the nature of their comment or compliment and how we have responded. If written communication does not meet the individual's access needs an alternative form of communication will be used – in line with the Accessible Information Standard. The identity of persons making comments or compliments will not be made known beyond those directly involved in the complaints, comments, and compliments procedure. Information relating to comments or compliments will be made known to staff and volunteers where it is relevant to:

- Making changes to the way services are delivered
- Giving praise for good work where it has been requested for this to be done

Information about all comments and compliments received and the action taken in response will be recorded into the Central Log.

12. Complaints Process

There are three stages to our complaints process:

Stage 1

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The complainant should be encouraged to speak about their concerns to the staff or Manager supporting them at the time of their dissatisfaction. Most complaints can be dealt with at this stage. A letter of acknowledgement will be sent within 5 working days of receipt of the complaint.

If written communication would not meet the individual's access needs an alternative format will be used.

The Service manager will complete the complaints form and submit this to the Business Administration team so that the complaint can be logged into the central system.

The Service Manager dealing with the complaint will provide information to the Locality Manager about the complaint and how it was resolved, and any lessons learned from the experience.

Dealing with this initial stage should not take excessively long, and this should therefore be resolved within 20 working days.

Stage 1 complaints that cannot be resolved, move to stage two, where a designated lead of a higher grade than the initial person dealing, must be assigned, and noted on the same complaints form.

Stage 2

If a complainant has a problem that cannot be sorted out straight away, or they are not happy with the outcome from Stage One, they should be supported through to Stage Two of the process, where a more senior member of the same service or team must take on the lead role.

The investigating Manager will send a further letter of acknowledgement to the complainant within 5 working days, explaining the new lead for the complaint.

When the investigation is complete the Manager will send a letter of explanation to the complainant within a maximum of a further 10 working days from the Stage One completion, advising of the outcome, suggested remedy and what to do if the complainant is still unhappy.

Tricuro's Board will be kept updated on a quarterly basis of all new Stage 2 complaints arising and a summary of concluded complaints investigations, including any action taken. This will coincide with quarterly service updates provided to the Board. At the end of stage 2 the complaints log must be updated with dates of letters and actions taken.

Timetable for stage 2

- Acknowledgement of receipt of the complaint handover from the Stage One reviewer within 5 working days
- Manager, Chief Executive, Chair, or delegated Executive Team member to investigate
- Letter of explanation to be sent to the complainant within a further 10 working days from the end of Stage One either:
 - Advising of the outcome, suggested remedy and what to do if the complainant is still unhappy; or
 - Explaining any delays in the investigation and advising of a new timeframe.

Stage 3: Review by the Executive Team

If the complainant is not happy with the findings of the investigation in Stage 2, the Executive Team will lead the Stage 3 engagement and review of complaint outcomes through the previous stages.

They will explore with them what external support can be given to meet their access needs. The Executive Team (or delegated member) will conduct a review to see if the investigation was reasonably and fairly conducted and that the response to the investigation was adequate and answered the concerns expressed in the original complaint.

It is not a new complaint or re-investigation of the complaint itself.

Timetable for stage 3

- Acknowledgement of receipt of the complaint within 5 working days
- Executive, Chair or delegated Board member to investigate.
- Letter of explanation to be sent to the complainant within a further 10 working days from the end of Stage Two, advising of the outcome, suggested remedy and what to do if complainant is still unhappy

Stage 3 is the final part of the complaints procedure. If complainants still feel that they have not been treated fairly, or not completed what we reasonably could, they may take their complaint to an independent organisation, for example the Local Government and Social Care Ombudsman, or Commissioning authority funding the service.

13. Recording and Reporting

Tricuro is committed to protecting and respecting privacy. It is crucial to keep any personal information it has about customers (and staff) secure and confidential and in line with data protection legislation such as the [Data Protection Act](#), the [General Data Protection Regulation](#) and other related legislation (as amended from time to time).

However, it may not be possible to preserve confidentiality in some circumstances, for example, where relevant legislation applied, or allegations are made which involve the conduct of third parties. Tricuro will retain complaints files in a secure manner six years after the complaint has been closed. All complaints and comments and action taken, even if they are not formal complaints must be recorded on the complaints form and submitted to the Business Administration Team who will enter the details onto a Central Log.

14. Monitoring and Review

Tricuro managers will monitor adherence to and compliance with these policy requirements, including the maintenance of the log and associated documentation, through adherence to the processes and assuring improvements are embedded.

Complaints are an important tool which, alongside data provided by exit discussion, stakeholder surveys, user feedback and focus groups, will allow Tricuro to learn about the services we provide. They provide a useful source of information about how individuals see our services and how we are serving them. Complaints information will be considered on a regular basis by the Executive Team and to the Board and reported quarterly to the Quality Assurance Committee. Wherever possible the data will be used to improve and develop the service.

The QA Team will provide a full annual audit and focussed audits in accordance with the audit cycle and how lessons learned from complaints are applied.

15. References

[The Care Act](#)
[The Health and Social Care Act 2008 \(Regulated Activities\) \(Amendment\) Regulations 2015](#)
[Equality Act 2010](#)

[Human Rights Act 1998](#)

[Complain about an adult social care service | Care Quality Commission \(cqc.org.uk\)](#)

16. Equality Impact Assessment

The initial Equality Impact Assessment of Complaints Comments and Compliments Policy has been completed and all findings have been implemented. For details, please refer to the EQIA records associated with this policy and procedures.