

February 2018

Complaints and Compliments Policy and Procedure

This document is relevant to:	
Central Support Services	✓
Operational Services	✓
Community Engagement	✓

Purpose

To uphold the rights of every person receiving support to make a complaint and voice a concern as well as provide compliments and ways in which we can improve

To ensure staff understand and uphold this right, supporting the individual in making a complaint.

To ensure complaints, concerns suggestions and compliments are logged and that where shortfalls have been made we seek to learn from them and improve our practice in the future.

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Policy

1. Livability believes that if someone wishes to make a complaint or register a compliment or suggestion regarding a service provided by Livability they should find it easy to do so. We want to hear about when things go wrong so that we can learn and make sure that it doesn't happen again, and when we get it right so we can recognise and embed good practice.
2. It is Livability's policy to welcome complaints, compliments and ways we can improve and look upon them as an opportunity to learn, adapt, enhance and provide better services. The procedure below is intended to ensure that complaints are dealt with properly and that all complaints, comments and compliments are taken seriously.
3. All people we support must be given a copy of the Making a Complaint booklet when they start using a Livability service (Copies in other languages and formats are available on request). Where a person has visual difficulties suitable formats must be supplied to meet the accessibility criteria. Copies of the booklet can be downloaded from the Livability website and intranet and a copy should also be displayed in a prominent location
4. Complaints can arise from any part of our organisation and we will take the same approach in understanding making the necessary changes and corrections and learning the lessons.
5. The Livability Complaints and Compliments Policy and Procedure complies with the current legislation and regulations.
6. All contact with the complainant must be polite, courteous and sympathetic. There is nothing to be gained by staff adopting a defensive or aggressive attitude.
7. At all times staff should remain calm and respectful.
8. Staff should not accept blame, make excuses or blame other staff.
9. If the complainant identifies themselves as a staff member, the responsible manager should consider whether the Whistleblowing or Grievance Procedures apply and should be used – the HR team can provide advice and support if required.
10. In the spirit of continuous improvement, Livability has created a review process for our compliments and complaints management system, to ensure that we measure success and learn lessons from the feedback we receive. This process is the responsibility of the Complaints Receiver.

11. Livability's Complaints and Compliments Policy and Procedure will be reviewed on a regular basis to ensure that it complies with current legislation.
12. In the event of a complaint involving alleged abuse or a suspicion that abuse has occurred, the matter must be reported immediately by following Livability's Safeguarding Procedures.

Procedure

Making a complaint

13. The service manager must ensure that the following information is available to all staff, people we support and those supporting the individual and visitors:
 - A copy of the Livability Making a Complaint booklet to support them in making a complaint
 - To have the right to make the complaint directly to the regulator, these details are included in the Making a Complaints booklet.
14. Contact details of organisations that regulate and inspect Livability services may be found on page 12. These may include: CQC, CSSIW, RQIA, Ofsted, Local Education Authority (LEA) and Local Authority Monitoring Services.
15. Regulators generally will not get involved in individual complaints, but require a thorough response to the complainant. They will however assess the impact on service provision, and respond accordingly.
16. The Local Government Ombudsman (LGO) or Northern Ireland (NI) Ombudsman can be contacted by the complainant and ask for their case to be reviewed. This provides a free, independent service if the complainant feels certain regulators have not dealt with their complaint satisfactorily.

Definitions

17. **Complaint** – an expression of dissatisfaction with something that has happened or shortfalls in service provision.
18. The way that someone has been treated or spoken to or a service that has not been provided.
19. **Compliments** – an expression of satisfaction with something that has happened or with the way someone has been treated. We want to hear about what people think we have

done well, so that we can share this knowledge across our service, we value compliments and these enable us to support the development of services.

20. **Improvements** – Feedback, ideas and suggestions for how we could make things even better. We want to know when people think we could do something better or in a different way. We want to hear ideas and suggestions. These should be acknowledged with thanks and any feedback that is possible and appropriate.
21. All complaints and compliments must be reported and recorded using the Livability Web Form.
22. **Complaints Receiver** – A senior manager charged with ensuring that Policies and Procedure are followed across our services. To contact please see page 12.
23. **Complaints Co-Ordinator** – The person tasked with managing the organisations systems for logging and ensuring the effective processing of complaints in line with this procedure
24. **Representatives** - Livability will only accept complaints from a representative under certain conditions:
Either:
 - where we know that the person we support has consented, either verbally or in writing
 - or where the person we support cannot complain unaided and cannot give consent because they lack capacity within the meaning of the Mental Capacity Act 2005. In this case, the representative is acting in the person we support's best interests; for example, where the matter complained about, if true, would be detrimental to the person we support

Persistent and Repeated Complaints from people who receive a service from Livability

25. There will be occasions where a person for a variety of reasons wishes to make repeated complaints about the same matter/issue.
26. The principle is that we will seek to uphold the individual's rights to make a complaint and work to reach a satisfactory outcome. If the available resolution has been offered and there continues to be a complaint of the same matter/issue then completing repeated complaints forms is unlikely to result in an improved outcome.

27. Therefore in agreement with the Regional Manager the specific matter/issue being raised must be logged in the care /support plan as an area needing resolution. The complaints log will need to record that this is the action that has been taken for all further complaints on this matter/issue.
28. The agreed actions will need to be recorded in the care/support plan and staff need to complete the daily records to record the outcomes.
29. This will enable the matter/issue to be discussed and reviewed in key worker meetings and the individual's reviews.
30. Care must be taken to identify the specific nature of repeated complaints so they are addressed in a robust and transparent approach and not combined into an overall level of dissatisfaction. See Appendix 1.

Press Enquiries

31. Enquiries from the Press must be referred to a senior manager and no staff member should enter into dialogue with a journalist without specific authority to do so. Senior managers must refer all press enquiries to the Communications Team at National Office who will deal with them in accordance with the Crisis PR procedure.

Receiving a Complaint

Verbal Complaints

32. Any staff member who receives a verbal complaint should always seek to resolve the issue at the time and then report and record the complaint/s.
33. If staff cannot solve the problem immediately they should offer to get the senior person to deal with the issue.
34. If the suggested resolution is acceptable then this should be clarified with the complainant along with how the resolution will be communicated (for example through a meeting).
35. If the suggested plan of action is not acceptable to the complainant then the member of staff should ask the complainant to put their complaint in writing and give them a copy of the complaints procedure.
36. If the complainant is unwilling or unable to put the complaint in writing then the staff member should report and record it on their behalf. The Livability Complaints Web Form

could be used for this purpose. (See Appendix 2) The details should be completed in discussion with the complainant.

Complaints Recording

37. Any member of staff receiving a complaint, including verbal complaints, must ensure this is reported and recorded through the Complaints Web Form.
38. All complaints must be recorded using the form however they are raised or any consideration of severity. It is the Service Manager's responsibility to ensure that all complaints have been logged.
39. All records connected to the complaint must be held securely such as fact findings, investigation reports, documents, correspondence and action plans. There is a central portal and the Complaints Co-ordinator will ensure that all document supplied are uploaded and accessible.
40. All records pertaining to a complaint must be retained as a formal record for 10 years.

Anonymous Complaints

41. Livability will always encourage people to identify themselves so that we can talk concerns through with them and keep them involved. Where we receive anonymous complaints we will work to the same standards and seek to address the concerns raised.
42. Anonymous complaints are more likely to be made to external organisations such as the regulators. People do sometimes give their names to the regulator but ask not to be identified. Regulators will feed back to them, whilst respecting their wish to remain anonymous.
43. Service Managers should record all anonymous complaints through the Livability Complaints Web Form

Complaints Management

44. Issues raised by those using our services may not be recognised as a complaint. If a member of staff or the local manager thinks that a comment or expression of concern is a complaint, they should suggest that the person making it raises it as a complaint. The person should be supported to make the complaint and be able to express what they would want to say.
45. All staff have a responsibility to ensure that the Complaints Procedure is properly and effectively implemented and that person we support and their representatives feel

confident that their complaints and worries are listened to and acted upon promptly and fairly.

46. The local Service Manager is the person responsible for following through all complaints, compliments and comments received at the service. This includes ensuring that:
 - i. Every written complaint must be acknowledged within two working days using the Duty of Candour acknowledgement letter [link: [Safeguarding - Complaints acknowledgement letter \(Duty of Candour\)](#)]
 - ii. Investigations into written complaints are completed within 28 days.
 - iii. Complaints are dealt with promptly, fairly and sensitively with due regard to the upset and worry that they can cause to both staff and people we support.
47. If the complaint is being made on behalf of a person we support by an advocate, it must first, where possible, be verified that the person has permission to speak for the person we support, 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 we support when they may not. Staff must obtain the person we support's explicit permission prior to discussing a complaint with the advocate. (Please refer to the CONSENT policy.)
48. Anonymised feedback on complaints will be shared with employees at handover/staff meetings to support our ongoing Practice Development

Duty of Candour

49. The duty of candour is a requirement for all service providers of regulated activities.
50. The duty of candour requires Livability to act in an open and transparent way in relation to care and treatment provided to people we support. This duty applies to our dealings with the people we support themselves, or, in limited circumstances, a person acting on their behalf.
51. Where a person is affected adversely in receiving a service they have a right for this to be recognised the organisation investigates and, where upheld, receive an apology and the changes to address future practice.
52. For every person in Livability who makes a written complaint we will respond in line with the Duty of Candour requirements, acknowledging in writing with an apology and a commitment to learn from the event. Further we will seek to share the learning and outcomes where applicable to minimise the risk of repeated occurrences

53. The Involvement and Communication with Relatives, Advocates, Friends and Carers Procedure provides specific guidance on how incidents should be communicated to meet the Duty of Candour.

Investigation of a Complaint by Livability

54. Livability will investigate the facts and circumstances surrounding any complaint. If necessary, further details should be obtained from the complainant. If the complaint is not made by the person we support but on their behalf, then consent of the person we support, where possible in writing, must be obtained from the complainant.
55. Livability should be in a position to provide a full explanation to the complainant, either in writing or by arranging a meeting with the individuals concerned, within 28 days.
56. If the issues are too complex to complete the investigation within 28 days, the complainant should be kept informed of the reason for any delays. Where a formal investigation is required, this will be commissioned by the responsible manager and may be carried out by an internal or external independent investigator.
57. The commissioning manager will provide the investigator with terms of reference, including who to speak to and the timescale for the completion. The complainant will be kept informed.
58. The investigator(s) will write a report containing recommendations. The report will be sent to the commissioner of the investigation, who will discuss the report with senior and local managers and ensure an action plan is prepared.
59. The commissioning manager will send a summary of the report and an action plan to the complainant.

Meetings

60. Meetings may be arranged to provide face to face feedback from an investigation and / or as part of reaching an agreement on the resolution of a complaint.
61. If a meeting is arranged, the complainant should be advised that they may, if they wish, bring a friend or relative or a representative such as an advocate.
62. At the meeting a detailed explanation of the results of the investigation should be given and also an apology if it is deemed appropriate. Apologising for what has happened need not be an admission of liability. Notes of the meeting and any agreements reached

will be kept. Such a meeting gives the opportunity to show the complainant that the matter has been taken seriously and has been thoroughly investigated.

63. Action plans resulting from complaints will be included into overall service action plans and monitored as part of the quality monitoring process.
64. Any identified shortcomings in procedures or practice will be managed through relevant Livability procedures, including learning and development, supervision, disciplinary and procedure review, as appropriate.

Follow-up Action and Closing a Complaint

65. After the meeting, or if the complainant does not want a meeting, a written account of the investigation should be sent to the complainant. The letter should include details of what to do if the complainant is not happy with the outcome (see Appeals Process below).
66. Managers should inform complainants that complaints will be formally closed after 12 weeks if nothing further is heard.
67. The complaints log will need to detail the actions taken and decision to close the complaint.

Appeals Process

68. If complainants are not satisfied with the outcome of an investigation, they can appeal. The appeal should be forwarded to the Livability Complaints Receiver. The appeal should be made within 7 days.
69. Appeals can be made verbally or in writing, and where required, local managers should assist the person we support with the process to raise, make and register the appeal.

The process for managing appeals is as follows:

- i. The first investigation should be reviewed by the investigator's line manager. If after review it is the opinion of the appeals investigator that there are no grounds for appeal, the complainant should be informed either through a letter or at a meeting where minutes are recorded.
- ii. If further investigations or actions are required a further investigation will be commissioned with another manager not connected with the event, the complainant informed and the timescales explained. The relevant director should be kept closely informed.

- iii. The outcomes of this further investigation will be discussed with the responsible senior manager or director, and a proposal for resolution agreed.
 - iv. The complainant should be informed of the outcome of the appeal by letter with a view to closure. This letter must inform the complainant of their legal right to inform the relevant regulator or complain to the Local Government Ombudsman or NI Ombudsman if they are still not satisfied (See page **x** for contact details)
70. Regulators will not usually investigate a complaint until the provider has had an opportunity to respond and resolve matters.
71. Information on local advocacy services should be available through the local service.

Complaints about Local Services made to National Office

72. Where a complaint is made directly to staff at National Office it should be forwarded directly to the Complaints Co-ordinator (complaints@livability.org.uk)
73. The Complaints Co-ordinator will acknowledge receipt of the complaint and liaise with the Complaints Receiver regarding the appropriate manager and process for investigation of the complaint.

Complaints about Livability Central Support Services

74. The following guidance applies to complaints which are about corporate support services rather than Livability's operational services. It follows the same principles as the procedure outlined above. It is separate to the Whistleblowing and Grievance Procedures which relate to complaints being raised by members of staff or volunteers.

Step One - Receipt of complaint and investigation

A complaint may be made verbally or in writing to a staff member within the department responsible for the subject of the complaint. Where a complaint is complex, the manager should request that it is made in writing.

The complaint must be sent to the Complaints Co-ordinator at complaints@livability.org.uk so that all complaints about Livability are monitored and reviewed.

- 75.** The Complaints Receiver will ensure that a thorough response is undertaken where possible within the department cited and the findings shared.

Step Two – Responding to the complaint:

Wherever possible, the manager should attempt to resolve the complaint immediately, (within 24-hours).

If the matter requires further investigation and consideration, the manager will notify the Complaints Receiver, and respond to the complainant in writing as soon as possible and then within 28 days of receipt of the complaint explaining the outcome of the investigation in to the complaint.

Step Three – Complainant remains dissatisfied:

If the complainant is dissatisfied with the response, their complaint will be referred to the responsible Director for review. The Director will write to the complainant with their proposed resolution. There will not normally be a further appeal but complainants may be referred to external agencies or regulatory bodies where appropriate.

Analysis of Complaints

- 76.** The Livability Complaints Receiver will carry out analysis on all complaints as part of its quality monitoring systems. Identifying trends and patterns, measuring success and identification of areas for improvement. They will undertake to share this learning and embed ongoing practice through a regular and at least annual report.

Contact Details

Livability Complaints Receiver

Email: complaints@livability.org.uk

Telephone: 020 7452 2109

Contact Details for Regional Regulators:

English Regulator Care Quality Commission (CQC)

Care Quality Commission, Citygate, Gallowgate, Newcastle upon Tyne, NE1 4PA
enquiries@cqc.org.uk

Tel: 0300 616161

Welsh Regulator Care Inspectorate Wales (CIW)

Complaints in Wales are regulated through the Public Services Ombudsman for Wales and are as follows: <http://www.ombudsman-wales.org.uk/>

Or you can write to:

Care Inspectorate Wales, Welsh Government, Rhydygar Business Park, CF48 1UZ.

Northern Ireland Regulator (RQIA)

Complaints and Representations Manager

The Regulation and Quality Improvement Authority, 9th Floor Riverside Tower,
5 Lanyon Place, Belfast, BT1 3BT

<https://rqia.org.uk/>

Tel: 028 9051 7500

Regional Ombudsman Contact Details

Local Government Ombudsman (LGO).

LGO Telephone: 0300 061 0614

Email: advice@lgo.org.uk

Website: www.lgo.org.uk

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Consult the Intranet for the latest version of this procedure.

Change History:

Issue:	Date:	Author:	Reason:
5.1	June 2015	Andrew Giles	Revised version with Duty of Candour
6.0	February 2018	Liz Mell	Revised

Appendix 1 - Vexatious and Persistent Complaints from External Bodies

A persistent complainant may include:

- Someone who makes the same complaint repeatedly (with minor differences), but never accepts the outcomes
- A person who seeks an unrealistic outcome and persists until it is reached, or
- A person with a history of making other unreasonably persistent complaints (see below).

Characteristics of unreasonably persistent complaints:

- The complaint arises from a historic and irreversible decision or incident
- Contact with the organisation is frequent, lengthy, complicated and stressful for staff
- The complainant behaves in an aggressive manner to staff when presenting the complaint, or is verbally abusive or threatening
- The complainant changes aspects of the complaint part way through the investigation
- The complainant makes and breaks contact with the organisation on an ongoing basis, or
- The complainant persistently approaches the organisation through different routes about the same issue hoping to get different responses.

Principles: There are a number of principles that can be applied by the organisation.

The most important principle is that the complainant receives the same standard of response as any other person, and that the organisation can show it has not discriminated against the persistent complainant.

If the situation is challenging but it is possible to proceed, staff should avoid giving unrealistic expectations on the outcome of the complaint.

Action in response

Where the relationship becomes unworkable, the senior manager should ensure that he or she demonstrates he or she has considered the complaints as fully as appropriate.

If the complainant does not pursue the complaint to the next level, such as contacting the regulator and continues nevertheless to correspond, the correspondence should be considered. If it raises no significant new matters and presents no new information, the complainant should be informed that the organisation is not entering into any further correspondence about the matter. If the complainant still does not take this advice, any further correspondence that does not present significant new matters or new information should only be acknowledged (rather than acted upon).

In some instances, abusive, threatening or other unreasonable behaviour may be a feature of the complainant's disease or mental illness (e.g. chronic anxiety or status of dementia). In such cases, if possible, the matter should be referred to the local authority who will consider involving relevant professionals. However, this does not mean that that we should not continue to restrict access of the complainant to staff (see below).

Restricting access

The decision to restrict access to relevant staff should be taken by the relevant senior manager, and should follow a prior warning to the complainant. Any restrictions imposed should be appropriate and proportionate. The options available are:

- Requesting contact in a particular form (for example, letter only);
- Requiring contact to take place with a single, named person;
- Restricting telephone calls to specific days and times;
- Asking the complainant to enter into an agreement about future contact with the organisation, and
- Informing the complainant that if he still does not follow this advice, (as stated above) any further correspondence that does not represent significant new matters or new information will not necessarily be acknowledged, but will be kept on file.

When it is decided to treat someone as an unreasonably persistent Complainant, the organisation should write to tell the complainant why it believes their behaviour falls into that category, what action is being taken, and the duration of that action. The complainant should also be informed that they can challenge the decision if they disagree with it - e.g. by writing to the Chief Executive or regulator, or the local authority we contract with.

Where a complainant's complaint is closed and s/he persists in communicating about it, the senior manager may decide to terminate contact with that complainant as mentioned above.

Any new complaints from people who come under this policy should be treated on their individual merits.

Guidance on unacceptable behaviour

When the organisation considers that a complainant's behaviour is unacceptable, it should tell him/her why and ask him to change it. If the unacceptable behaviour continues, the organisation should take action to restrict the complainant's contact with its offices.

In all cases, the organisation should write to tell the complainant why it believes his/her behaviour is unacceptable, what action is being taken, and the duration of that action. The complainant should also be told how to challenge the decision if s/he disagrees. Access can be restricted in the same way as for unreasonably persistent complaints above. The same applies to terminating contact.

Appendix 2 – Complaints Web Form guidance

Link: [Complaints Web Form Guidance](#)

Link: [Compliments Web Form Guidance](#)